



Engaging Families Experiencing Homelessness

A TOOLKIT FOR HOME VISITORS



Table of Contents

ACKNOWLEDGEMENTS	2
BACKGROUND	3
Homelessness	3
Ending Family Homelessness	4
The Impact of Homelessness on Young Children	4
THE MCKINNEY-VENTO ACT	7
Protecting the Right of Homeless Youth to Go to School	7
Who can get help under the McKinney-Vento Act?	8
What school can they go to?	8
How do they get there?	8
Who can help?	8
HOME VISITING WITH FAMILIES EXPERIENCING HOMELESSNESS	9
What is Home Visiting?	9
Illinois Home Visiting	10
The Role of Home Visiting in Mitigating the Impacts of Homelessness	10
Home Visiting for Families Experiencing Homelessness	12
Challenges serving families experiencing homelessness include:	13
Benefits of Home Visiting for Homeless Children	13
STRATEGIES TO SUPPORT FAMILIES EXPERIENCING HOMELESSNESS	16
Serving Families Experiencing Homelessness	16
Home Visiting Tips and Tools	17
Supports needed to effectively serve families experiencing homelessness	17
Considerations and applications for working with families experiencing homelessness	18
RESOURCES FOR SERVING FAMILIES EXPERIENCING HOMELESSNESS	19
Shelters and Housing Support	19
Emergency Shelters	19
Transitional Shelters	19
Rapid Re-Housing (RRH)	19
Permanent Supportive Housing (PSH)	19
Accessing Support and Services	20

Chicago	20
Suburban Cook County	21
Champaign County	22
Other parts of state	22
Professional Development Resources	22
FINAL THOUGHTS	24
REFERENCES	25

Acknowledgements

The knowledge, research, and expertise of this author's valuable colleagues are threaded throughout this toolkit. The author greatly appreciates their commitment and contributions to this work. The author would like to acknowledge:

- Mark Valentine, Start Early
- Carie Bires, Start Early
- Bryce Marable, State of Illinois' Maternal, Infant, and Early Childhood Home Visiting Team and Start Early
- Maureen Wagner, Start Early
- Angelica Cleveland, Start Early

This toolkit was developed by Shawanda Jennings, Program Specialist with Start Early (formerly known as the Ounce of Prevention Fund). She can be reached at sjennings@startearly.org.

The Home Visiting for Homeless Families Demonstration Project is supported by the State of Illinois' Maternal, Infant, and Early Childhood Home Visiting Team as well as Start Early.

Additionally, this project is supported by the Health Resources and Services Administration (HRSA) of the United States Department of Health and Human Services (HHS) under Grant Number X10MC43579 and Grant Number X10MC39684 in the total award amounts of \$8,473,513 and \$8,257,262, respectively, for the Maternal, Infant and Early Childhood Home Visiting Program, and 0% financed with nongovernmental sources. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the United States Government.

Background

Homelessness

In early care and education, children, youth, and individuals who lack a fixed regular, and adequate nighttime residence are considered homeless.¹

This means:

- Sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative accommodations; living in emergency or transitional shelters; abandoned in hospitals; awaiting foster care placement.
- A primary nighttime residence that is a public or private place not designed for or ordinarily used as regular sleeping accommodations for human beings.
- Living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings.
- Migratory children who are living in circumstances described in the above clauses.
- Unaccompanied youth who are living in the above circumstances.



Ending Family Homelessness

The work to end family homelessness is a national priority for many reasons. Being in safe and stable housing benefits both parents and children for a lifetime, improving their overall well-being, health, education, and future employment opportunities — outcomes that strengthen our communities and our country as a whole.

According to the most recent (January 2019) point-in-time count of persons experiencing homelessness conducted by HUD, on any given night, there are over 10,000 persons in Illinois experiencing homelessness.² (It should be noted that discrepancies in the homeless population exist. For example, according to the Chicago Coalition for the Homeless, there are closer to 80,000 Chicagoans impacted by homelessness, this number is referring to the total homeless count according to census data which would include doubled up families that are not included in the point-in-time count.) Thirty-six percent of these persons are children. African Americans are much more likely to experience homelessness than others; 61% of homeless families in the HUD count were African American. Approximately 20% of persons experiencing homelessness suffer from severe mental illness.²

Increased partnerships, more public and private resources, effective interventions, increased access to stable housing, and stronger connections with community networks are among the several things needed to end family homelessness for good.

The Impact of Homelessness on Young Children

A significant number of children experience homelessness at some point during their childhood. Homeless families account for approximately one-third of the total homeless population, with about 1.6 million children nationally experiencing homelessness over the course of a year.³



Most children who experience homelessness are very young, with children under six accounting for 51% of all children in shelter.⁴



Shockingly, the age at which a person is most likely to be found in a homeless shelter in the United States is infancy.⁵



Research has shown that homelessness puts children at increased risk of health problems, developmental delays, academic underachievement, and mental health problems.⁶ In fact, children who are homeless are sick four times as often as other children, experience four times the rate of developmental delays, and have three times the rate of emotional and behavioral problems.³ In addition, over half of all children who have experienced homelessness at some point by the age of five moved more than three times during that period. Studies have found that frequent moves during early childhood negatively impact school achievement.⁷



Strong and healthy parent-child attachment can substantially buffer the negative impacts of homelessness on child development; however, the ability of homeless parents to develop nurturing, responsive relationships with their young children is often hindered by the multiple stressors that homeless parents face.⁸ Meeting their family's basic needs, such as food, shelter, and safety, demands significant time and energy and can prevent homeless parents from focusing needed attention on their young children. In addition, homeless parents are often impacted by poor physical health, mental illness, and significant trauma histories themselves, which can make responsive, sensitive parenting a major challenge.³



Many homeless children do not receive the services they need to address their high rates of medical problems, developmental difficulties, and mental health needs.⁸



Many factors contribute to lack of access, including fragmentation of service systems, limited availability of services, transportation, rigid program rules, and the family's mobility.



Considering the complexity of challenges and needs experienced by many homeless families, a comprehensive, holistic approach that builds on the family's strengths is required to ensure positive child and family outcomes. Housing alone is often not enough to ensure that every member of the family not only remains stably housed but thrives.

Protecting the Right of Homeless Youth to Go to School

The McKinney-Vento Act ensures the right of students to go to school even when they are homeless or do not have a permanent address.⁹ The Act aims to reduce barriers that have prevented many homeless youths from enrolling, attending, and succeeding in school, including:

- transportation
- residency requirements
- and documentation requirements, such as birth certificates and medical records



When youth choose to go to the school in the area where they are living, the school must immediately let students enroll, attend classes, and participate fully in school activities, even if students do not have a parent or guardian with them or documents typically required for enrollment, such as birth certificates, proof of residency, medical records, and school records.

Who can get help under the McKinney-Vento Act?

All homeless young people—including “unaccompanied youth” not in the physical custody of a parent or guardian—who are:

- living in emergency shelters or transitional living programs
- staying temporarily with friends or relatives due to inadequate housing
- or staying in motels, campgrounds, cars, or other temporary housing¹⁰

What school can they go to?

Youth have the right to attend either:

- the school nearest to where they are living
- or the school where they were last enrolled (called “school of origin”), even if they move out of the school district.¹⁰

How do they get there?

The district in which the student chooses to attend school must provide or arrange transportation.¹⁰

Who can help?

McKinney-Vento requires every school district to have a homeless education liaison who works with young people, schools, and service providers to make sure that homeless youth have a smooth transition into school and receive the support services for academic achievement they are guaranteed under law.¹⁰

Contact your state coordinator for homeless education.

- A list of state coordinators can be found online at <http://www.serve.org/nche/downloads/sccontact.pdf>

Home Visiting with Families Experiencing Homelessness

What is Home Visiting?

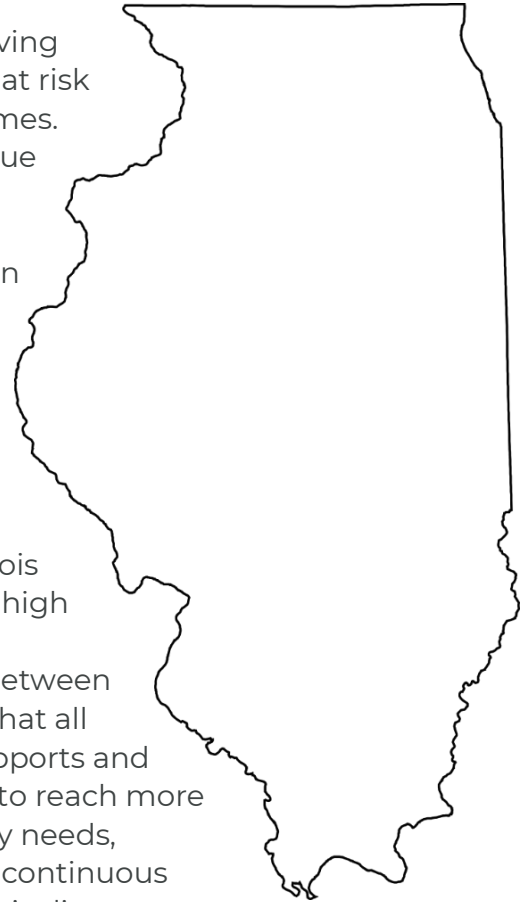
Home visitation is a service delivery strategy that creates supportive environments and relationships for the youngest children by promoting parental competence and successful early childhood development in the family's home. In evidence-based, voluntary, home visiting programs, home visitors provide child-development and parenting information to help parents create safe, stimulating home environments. Home visitors model positive language rich relationships and ensure families are connected to needed resources (medical, dental, financial, mental health).



Illinois Home Visiting

Illinois has long valued evidence-based home visiting programs as an effective and efficient strategy for improving the life trajectory of expectant and new families who are at risk for poor health, educational, economic, and social outcomes. Over the past three decades, Illinois has reflected this value by developing a robust statewide home visiting system that cuts across agencies and funding streams, reaching from the highest levels of government to the providers on the ground. With an awareness of disparities in child and parent well-being across race and ethnicity, the home visiting system in Illinois is committed to approaching service delivery and systems design through a strengths-based racial equity lens.

Recognizing that learning begins at birth, and relational health and care begins before birth, home visiting in Illinois fosters seamless, uninterrupted, and equitable access to high quality early childhood experience and services from the prenatal through early childhood periods. The balance between targeted, needs-based services and the universal vision that all new parents and families can benefit from additional supports and resources, provides a conduit for home visiting in Illinois to reach more young children with services that are responsive to family needs, circumstances, and preferences. Illinois is committed to continuous improvement and innovation and to addressing the state's diverse geographic and demographic realities.¹¹



The Role of Home Visiting in Mitigating the Impacts of Homelessness

Evidence-based home visiting programs for low-income, vulnerable parents their infants and toddlers show promise as a strategy to help keep young homeless families healthy, together, and stably housed. Home visiting programs directly address many of the risk factors experienced by homeless families through a relationship-based, mobile, long-term service model that can complement the services provided through homeless services and other support systems.

Perhaps most importantly, evidence-based home visiting models share a philosophy that focuses on the parent-child relationship as the primary mediator of development in infancy and early childhood. Optimally, those relationships feature stable and predictable caregiving, primary caregivers who are emotionally available to the babies and can help regulate their affects and be attuned to their needs, an environment that encourages exploration, with primary caregivers serving as

“secure bases” for that exploration, and a support system that nurtures and “holds” the parents who are responsible for nurturing and holding the babies.

Because home visiting has a track record of attending to parent-child relationships and the risks that often beset them, there is reason to hope that, by supporting the ability of home visiting programs to engage homeless families and coordinate services with homeless service providers, that developmental trajectories for children in homeless families can be improved.

While there is a current lack of research that focuses on best practices for the delivery of home visiting services to homeless families, findings from studies on improving engagement and program participation with populations classified as hard-to-reach and high-risk may act as a guide for informing current practice due to overlap in maternal characteristics between these two groups. Characteristics commonly associated with being classified as high-risk include living in poverty, having a mental illness or substance use disorder, and experiencing domestic violence. These markers are far more common among homeless families.

A review of some of the literature on home visiting engagement and retention highlights the tension that often exists between adhering to the components of the model that are foundational to its evidence base and allowing for flexibility that may facilitate greater enrollment and participation by meeting families where they are at.

Improving home visiting programs abilities to better engage and serve homeless families may include steps such as:

- Increased training on issues such as substance use and depression. This can improve a home visitor’s ability to engage with mothers who experience these concerns.¹²
- Multidisciplinary teams of clinicians which pool the expertise of individuals from health, mental health, and lay backgrounds. This would allow programs to adapt to the unique needs and challenges of each family.¹³
- Inter-agency cooperation. This has proved successful when serving high-risk populations, like homeless families. Increased coordination with outside agencies would enable home visiting programs to maintain contact with homeless families despite their higher level of mobility and link families to outside supports.¹⁴



Home Visiting for Families Experiencing Homelessness

Research has shown that homelessness puts children at increased risk of health problems, developmental delays, academic underachievement, and mental health problems.¹⁵ In fact, children who are homeless are sick four times as often as other children, experience four times the rate of developmental delays, and have three times the rate of emotional and behavioral problems.

Young children who experience homelessness face a host of challenges that threaten their health, development, and ability to succeed in school. Unfortunately, many of the homeless services families may be accessing do not provide child-centered, comprehensive services that address child well-being and parent-child attachment.¹⁶ At the same time, these families also face barriers to accessing early childhood services and supports that can improve outcomes, such as evidence-based home visiting.

Evidence-based home visiting programs for low-income, vulnerable parents and their infants and toddlers have been shown to successfully address these risk factors. These programs support parents and children by nurturing strong parent-child relationships, promoting positive parenting practices, supporting parents in achieving life goals, and connecting families to community resources. Unfortunately, homeless families face significant barriers to participating in home visiting programs, including rigid program requirements, lack of engagement with common

home visiting referral sources, and lack of capacity of home visitors to address the complex needs of homeless families.

Studies demonstrate the positive impact of evidence-based home visiting programs in enhancing parenting skills and supporting healthy child development for families who face myriad risk factors. These programs, however, have been less effective in reaching homeless families, who are one of the most at-risk and hardest-to-reach populations. Given the urgent need to better serve this population, state agencies that fund home visiting in Illinois have committed to improving access to home visiting programs for homeless families and have asked Start Early to help lead these efforts.

The Home Visiting for Homeless Families Demonstration Project uses an innovative new approach to delivering high-quality home visiting services to homeless children and families in Chicago. Findings from the project will inform the development of public policy recommendations to improve outcomes for homeless children and families in Chicago, across Illinois, and nationwide.¹¹

Challenges serving families experiencing homelessness include:

- Transience and communication
- Complexity of parent/family needs
- Low levels of parent engagement
- Balancing case management activities with child development/parent-child activities
- Lack of collaboration across multiple systems that impact homeless families

Benefits of Home Visiting for Homeless Children

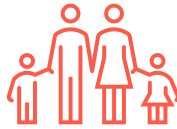


Home visiting seeks to improve the lives of young, at-risk children – a goal that is broadly shared by homeless providers. According to the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program Technical Assistance Coordinating Center Webinar, “Working Together to Provide Stability for Families: Home Visiting and Homeless Service Systems”, the following are benefits of home visiting for homeless children¹⁷:

- Helping families get connected to quality home visiting programs can reduce the risk of poor health outcomes and delayed development of young homeless children and the risk of family separation due to child welfare involvement.



- Home visiting programs can strengthen the family functioning of a very vulnerable subset of low-income families.



- Strengthening parents' capacity to foster the education and development of young children can help parents provide the stimulation necessary to promote language acquisition, motor coordination, and achievement of other milestones.



- Home visiting programs meet with and follow families wherever they are currently living, providing ongoing support and consistency in the lives of children who may be highly mobile.



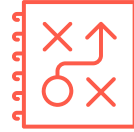
- Early intervention with at-risk children can help mitigate some of the physical and emotional health issues associated with homelessness and result in improved long-term outcomes.



Strategies to Support Families Experiencing Homelessness

Serving Families Experiencing Homelessness

To prevent families with children from experiencing homelessness, and to make sure that when families do experience homelessness, they can quickly regain permanent housing, communities need robust, coordinated systems, focused on shared outcomes. Federal, state, and local action has focused on four key strategies:¹⁸



1. Develop a centralized or coordinated entry system with the capacity to assess needs and connect families to targeted prevention assistance where possible and temporary shelter as needed.
2. Ensure interventions and assistance are tailored to the needs of families: a) Provide rapid re-housing assistance to the majority of families experiencing homelessness; b) Increase access to affordable housing and help communities target resources; and c) Direct more service-intensive housing interventions to the highest need households.
3. Help families connect to the mainstream resources (benefits, employment, and community-based services) needed to sustain housing and achieve stability. Improve linkages to local mainstream systems to help families gain access to these resources more quickly.
4. Develop and build upon evidence-based practices for serving families experiencing and at risk of homelessness.

Home Visiting Tips and Tools

As we continue to engage and enroll more families in home visiting, we are able to learn more about what it takes to serve a family experiencing homelessness.



When thinking about engaging families, some of the strategies for success include things like:

- Extending support to and establish relationships with others in the home
- Demonstrating consistency with appointments
- Keeping appointments even when not able to communicate
- Holding the family accountable
- Expressing desire to support the family
- Being positive and encouraging
- Be understanding of the trauma they have experienced
- Approach difficult topics with sensitivity
- Leaving business cards and door hangers at all known residences and with family members
- Checking on moms in between scheduled visits Have patience with families
- Individualize work with families

Supports needed to effectively serve families experiencing homelessness

- ✓ Housing resources
- ✓ Training on the homeless provider system
- ✓ Trauma-informed care training
- ✓ Mental health first aid training
- ✓ Self-care training
- ✓ Reflective practice
- ✓ Motivational interviewing
- ✓ FAN training
- ✓ Home visitor safety training

Considerations and applications for working with families experiencing homelessness



Flexibility with home visit schedule, location, and frequency

- ✓ Do not have formal conversations about frequency
- ✓ Provide options for home visit dates/times
- ✓ Be creative when finding a safe place to have a home visit
- ✓ Be open to adjusting the length of the home visit (some may last longer or shorter than 1 hour)
- ✓ Schedule next home visit during current home visit

Flexibility to the model and ability to adjust curriculum

- ✓ Establish a grace period for obtaining documentation and completing assessments
- ✓ Keep assessments and other materials on hand at all times
- ✓ Be prepared to balance crisis/trauma and parent-child interaction

Flexibility to follow families once as they move

- ✓ May need to adjust caseload size
- ✓ Have several ways to communicate with families (phone, text, video calls, emails, etc....)
- ✓ Communicate with shelter staff regularly

Resources for Serving Families Experiencing Homelessness

Shelters and Housing Support

One of the most urgent needs for families experiencing homelessness will be shelter. There are different types of shelters. The type of shelter that is appropriate for a particular family may depend on factors such as the composition of the family, the anticipated duration of a family's homelessness, the presence of issues such as domestic violence, substance abuse, or mental illness, and other factors. Among the types of shelters are:¹⁹

Emergency Shelters

These facilities are often the first place people turn to during or after experiencing an economic or domestic crisis. Emergency shelters provide support services and short-term stabilization for individuals and families before finding appropriate housing that meets their long-term needs.

Transitional Shelters

Transitional shelters are a program that provides temporary residence, ranging from six to 24 months for people experiencing homelessness. It is often referred to as "transitional" or "interim" shelter. Transitional shelters typically include supportive services to improve employability, to further help individuals obtain permanent housing as quickly as possible.

Rapid Re-Housing (RRH)

RRH is a housing model which provides assistance to individuals and/or families to find a home of their own as quickly as possible. It is a housing first solution for non-chronic homelessness where individuals or families rent an apartment of their own and are provided temporary community support services which can include case management and time-limited financial assistance, with the goal to bring them quickly out of homelessness.

Permanent Supportive Housing (PSH)

Permanent Supportive Housing (PSH) is a program designed to provide housing and supportive services on a long-term basis to formerly chronically homeless people. These are individuals who have a diagnosed disability and who have been continuously homeless for one year or more., For a significant number of homeless Americans with physical or mental disabilities, long-term homelessness can only be

addressed by providing permanent housing combined with intensive supportive services. PSH provides safe and stable housing environments with flexible and voluntary services.

Both RRH and PSH are based on the national best practice of the “housing first” approach to address homelessness, which is a recovery-oriented model meant to move individuals quickly into independent/permanent housing then providing appropriate support services once they are housed.

Accessing Support and Services

Below is more specific information for helping families to access shelter and other services depending on where in the state they live:

Chicago

Homeless Prevention Call Center

If a family is homeless, or at risk of homelessness, please contact the Homeless Prevention call center. Dial 311 or 312.744.5000 and ask for “short term help”. The call center information & referral specialist will ask you questions about their situation and assess their eligibility for the financial assistance and other community resources. The call center’s hours of operation are Monday-Thursday, 8:30am to 4:30pm. If the family resides in suburban cook county, call 877.426.6515 for help with basic needs.

If a family is seeking shelter please send them to the Salvation Army Shield of Hope Center located as 924 N. Christiana, for shelter placement. If the family is unable to make it to this location, please send them to any hospital emergency department or police station, call 3-1-1, and ask for transportation to a shelter.

Families Can Get Assessed for Housing Programs

Families can complete a coordinated Entry System assessment that asks questions about their eligibility for housing programs that will meet their needs. Upon completion, their name will be entered onto a list, and they will be notified if they matched to a housing program. Please visit the nearest Access Point to complete an assessment. <https://www.csh.org/chicagoces>

Family & Support Services Community Service Centers

The Chicago Department of Family & Support Services’ (DFSS) six Community Service Centers are open from 9am to 5pm Monday through Friday. City residents who need assistance can drop in or schedule an appointment in advance. DFSS Community Service Centers help individuals and families in need access a wide

range of resources including shelter, food and clothing, domestic violence assistance, and job training/placement. Clients can also get information about rental, utility and other financial assistance programs. The facilities also serve as Warming and Cooling Centers during periods of extreme weather.

1. Englewood Center 1140 W. 79th Street Chicago, IL 60620
2. Garfield Center 10 S. Kedzie Ave. Chicago, IL 60612
3. King Center 4314 S. Cottage Grove Chicago, IL 60653
4. North Area 845 W. Wilson Ave. Chicago, IL 60640
5. South Chicago 8650 S. Commercial Chicago, IL 60617
6. Trina Davila 4312 W. North Ave., Chicago, IL 60639

Continuum of Care

The continuum of care is a membership organization who work to prevent and end homelessness. Mandated by the U. S. Department of Housing and Urban Development (HUD), the continuum of care strategizes and plans a coordinated, comprehensive approach to providing housing and services for people experiencing homelessness.

Chicago Continuum of Care
All Chicago
651 W. Washington, Blvd., Suite 504
Chicago, IL 60661
312-379-0301
<https://allchicago.org/continuum-of-care/>

Suburban Cook County

The Alliance to End Homelessness in Suburban Cook County

The Alliance to End Homelessness in Suburban Cook County coordinates the Cook County Continuum of Care (IL-511), which encompasses homeless assistance efforts throughout all of Cook County except for the city of Chicago.

The Alliance to End Homelessness in Suburban Cook County
4415 Harrison St., Suite 228
Hillside, IL 60162
708-236-3261
<http://www.suburbancook.org/>

Champaign County

Like Chicago, Champaign County has a centralized intake number, 311, that should be used as the gateway for accessing services, including shelter, for persons experiencing homelessness.

Other parts of state

ShelterListings.org maintains a list of different types of shelters in Illinois. It is searchable by town, so one can just click on the name of a town and the website will produce a list of shelters in that town with descriptions of eligibility criteria and contact information. That website can be accessed at

<https://www.shelterlistings.org/state/illinois.html>

Professional Development Resources

Early Childhood Learning & Knowledge Center

Head Start's Early Childhood Learning & Knowledge Center website contains several learning modules and supporting resources for early childhood professionals.

<https://eclkc.ohs.acf.hhs.gov/family-support-well-being/article/supporting-children-families-experiencing-homelessness>

National Alliance to End Homelessness

The National Alliance to End Homelessness's Center for Learning provides extensive online training resources, several of which are free to register. Examples of trainings include introductions to rapid re-housing, effective emergency shelter, and keeping people and pets together.

<https://naeh.catalog.instructure.com/>

National Healthcare for the Homeless Council

The Council partnered with the Coldspring Center for Social and Health Innovation to present a unique 4-part webinar series (archived videos) on trauma informed care (TIC). The webinar series videos include:

1. Being Trauma Informed and Its Role in Ending Homelessness
2. Trauma Is the Public Health Issue of Our Time
3. The Abyss: Addiction, Homelessness, and Trauma
4. Hope, Transformation, and Post-Traumatic Growth

<https://nhchc.org/online-courses/trauma-informed-care-webinar-series/>

Start Early – The Essentials of Home Visiting

The Essentials of Home Visiting, a high-quality, online training platform designed to create confident, competent home visitors and supervisors within any home visiting model.

<https://startearly.org/resources-professionals/professional-development/essentials-home-visiting/>

Final Thoughts

Although children and families experiencing homelessness face a myriad of challenges from access to early childhood services to negative impacts on the health and development of young children, we are seeing that evidence-based home visiting as an intervention impacts and improves the developmental trajectories of children experiencing homelessness. In addition, continued coordination of services, meaning collaborations, and advocacy for policy changes will also help in the fight to mitigate the occurrences and impacts of homelessness on children and families.



Every child has equitable opportunity to reach their full potential to thrive in school and in life.



References

- ¹National Center for Homeless Education. (2015, March). Best Practices in Homeless Education Brief Series: Determining Eligibility for Rights and Services Under the McKinney-Vento Act. Retrieved December 09, 2020, from <https://doe.sd.gov/title/documents/EligRights.pdf>
- ²U.S. Department of Housing and Urban Development. (2019, September 20). HUD 2019 Continuum of Care Homeless Assistance Programs Homeless Populations and Subpopulations. Retrieved January 04, 2021, from https://files.hudexchange.info/reports/published/CoC_PopSub_State_IL_2019.pdf
- ³National Center on Family Homelessness. (2011). The Characteristics and Needs of Families Experiencing Homelessness. Retrieved December 09, 2020, from <http://www.familyhomelessness.org/resources.php?p=sm>
- ⁴U.S. Department of Housing and Urban Development. (2010, June). The 2009 Annual Homeless Assessment Report to Congress. Retrieved December 09, 2020, from <https://www.huduser.gov/portal//publications/pdf/5thHomelessAssessmentReport.pdf>
- ⁵U.S. Department of Housing and Urban Development. (2013). The 2013 Annual Homeless Assessment Report (AHAR) to Congress. Retrieved December 09, 2020, from <https://www.huduser.gov/portal/sites/default/files/pdf/2013-AHAR-Part-1.pdf>
- ⁶Rafferty, Y., & Shinn. (1991). The Impact of Homelessness on Children. *American Psychologist*, 46, 1170-1179.
- ⁷The Institute for Children and Poverty. (2009). Examination of Residential Instability and Homelessness Among Young Children. Retrieved from http://www.icphusa.org/PDF/reports/ICP%20Report_Examination%20of%20Residential%20Instability%20and%20Homelessness%20among%20Young%20Children.pdf
- ⁸Strengthening at Risk Homeless Young Mothers and Children Initiative. (2012, March). Supporting Homeless Young Children and Their Parents. Retrieved from <http://www.familyhomelessness.org/media/327.pdf>
- ⁹National Center for Homeless Education. (n.d.). Retrieved December 09, 2020, from <https://nche.ed.gov/>
- ¹⁰Family and Youth Services Bureau. (2012). Practical Application of the McKinney-Vento Act. Retrieved December 09, 2020, from <https://www.acf.hhs.gov/sites/default/files/fysb/mckvenapp20120829.pdf>
- ¹¹Governor's Office of Early Childhood Development. (n.d.). Home Visiting and Homeless Families. Retrieved December 09, 2020, from <http://igrowillinois.org/home-visiting-homeless-families/>

- ¹²Lecroy, C. W., & Whitaker, K. (2005). Improving the quality of home visitation: An exploratory study of difficult situations. *Child Abuse & Neglect*, 29(9), 1003-1013. doi:10.1016/j.chiabu.2005.04.003
- ¹³Lowell, D. I., Carter, A. S., Godoy, L., Paulicin, B., & Briggs-Gowan, M. J. (2011). A Randomized Controlled Trial of Child FIRST: A Comprehensive Home-Based Intervention Translating Research Into Early Childhood Practice. *Child Development*, 82(1), 193-208. doi:10.1111/j.1467-8624.2010.01550.x
- ¹⁴Brookes, S. J., Summers, J. A., Thornburg, K. R., Ispa, J. M., & Lane, V. J. (2006). Building successful home visitor–mother relationships and reaching program goals in two Early Head Start programs: A qualitative look at contributing factors. *Early Childhood Research Quarterly*, 21(1), 25-45. doi:10.1016/j.ecresq.2006.01.005
- ¹⁵Bires, C., Garcia, C., & Zhu, J. (n.d.). Supporting Children and Families Experiencing Homelessness: CCDF State Guide. Retrieved from <https://startearly.org/app/uploads/pdf/CCDF-Homelessness-Guide.pdf>
- ¹⁶Start Early (formerly The Ounce). (n.d.). Federally Funded Home Visiting Programs in Illinois. Retrieved December 09, 2020, from <https://startearly.org/app/uploads/pdf/HighlightingInnovativeProjects.pdf>
- ¹⁷Beltangady, M., & U.S. Department of Health and Human Services. (2014, March). Working Together to Provide Stability for Families: Home ... Retrieved December 9, 2020, from <http://files.ctctcdn.com/37731cd6201/6f92cdd8-e923-4da4-aad0-9796a2f55580.pdf>
- ¹⁸United States Interagency Council on Homelessness. (2017, January 5). Ending Homelessness: Our Progress, Essential Strategies, and the Work Ahead. Retrieved December 09, 2020, from <https://www.usich.gov/tools-for-action/ending-homelessness-our-progress-essential-strategies-and-the-work-ahead/>
- ¹⁹United to End Homelessness. (2019, September 25). Types of Housing Support for the Homeless. Retrieved December 09, 2020, from <https://www.unitedtoendhomelessness.org/blog/types-of-housing-support-for-the-homeless>