



HEAD START  
DEMONSTRATION  
PROJECTS

***Serving Homeless Families:***

***Descriptions, Effective Practices, and Lessons Learned***

April 1999



U.S. Department of Health and Human Services  
Administration for Children and Families  
Administration on Children, Youth and Families  
Head Start Bureau

This report was prepared under Contract No. 105-96-2010 of the Head Start Bureau,  
Administration on Children, Youth and Families, Administration for Children and Families,  
U.S. Department of Health and Human Services, by the National Head Start  
Training and Technical Assistance Resource Center at  
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## Executive Summary•

In October 1993, the Head Start Bureau (HSB) of the Administration on Children, Youth and Families funded 16 Head Start grantees to implement demonstration projects for homeless children and their families. The objectives of this initiative were to (1) enhance access of homeless families to Head Start services; (2) provide services responsive to the special needs of homeless children and families; (3) identify effective methods of addressing the needs of homeless families; and (4) implement and document replicable strategies for collaboration between Head Start programs and community agencies on behalf of homeless families. At the end of the three-year demonstration period, the HSB transitioned demonstration funds to the Grantees' regular Head Start budgets to promote continuation of services for homeless families. Based on reviews of the projects' final reports and telephone discussions with project administrators, this report provides the following information about the demonstration projects.

- ❖ The characteristics of the projects and families served.
- ❖ Critical issues relevant to project implementation.
- ❖ Challenges encountered and effective practices with respect to each issue.
- ❖ Key lessons learned.

### **Description of Demonstration Projects and Families Served**

Four of the 16 demonstration projects integrated Head Start services into ongoing shelter or transitional housing facility services for homeless families; three offered traditional Head Start services and collaborated with other community agencies to provide

housing and self-sufficiency-related services; and nine provided housing and self-sufficiency-related services, as well as traditional Head Start services. Project characteristics with regard to duration of services, type of Head Start program, site location, ages of children served, and services provided by project staff are presented in Table 1.

*Duration of Services:* There was general agreement among all grantees that full-day, full-year Head Start services were necessary to adequately meet the needs of homeless families. Most grantees that were unable to provide full-day, full-year services during the demonstration period were considering options for doing so in the future.

*Type of Center:* Some grantees suggested that it was necessary to establish special Head Start Centers for homeless children because traditional Head Start classrooms do not meet homeless children's developmental and socioemotional needs. Other grantees suggested that it was more appropriate to integrate homeless children into existing Head Start Centers because integration provides homeless families with opportunities to interact with families who are not homeless. The grantee implementing a Family Child Care Provider model suggested that this was a particularly appropriate service approach for homeless families because it offers homeless children the consistency and individualized attention they need, fosters the development of close personal relationships between providers and parents, and ensures a home-like environment in which siblings can be served together.

*Ages of Children:* Although most projects served children between three and five years of age, there was general consensus among grantees that meeting the comprehensive needs of homeless families requires

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servicing infants and toddlers as well as preschool-aged children.

***Location of Center Facilities:*** The advantages to locating Head Start services in a shelter or transitional housing facility were: (1) transportation was not a problem; (2) families had easy access to classrooms, parent events, and project staff; and (3) services coordination was fostered by daily contact between project and shelter facility staff. A disadvantage of this location was that it was difficult to retain children and families in Head Start project services when families left the shelter, even when projects encouraged continued involvement.

An advantage of locating Head Start classrooms and services in community sites was that retention of families was not contingent on duration of shelter stays. Two disadvantages to this type of location were: (1) families often lacked transportation to access the classrooms and/or parent activities, and (2) it was more difficult to coordinate services with collaborating agencies. In most cases, projects lacked resources to provide transportation for the families.

***Project Services:*** Nine grantees hired special project staff to help families obtain housing, jobs, and self-sufficiency-related services. In the other seven projects, these services were provided by collaborating agencies. Eight projects provided families with transportation services, either directly through use of a van or bus, or indirectly through vouchers or cash for public transportation. Three

grantees maintained funds to help families when they needed money to pay utility bills or security deposits, or to purchase appliances, window coverings, or bedding when they could not obtain them elsewhere.

***Family Characteristics:*** Grantees located in large cities in the East and Midwest tended to serve primarily African American families. Two projects served a large percentage of Caucasian families, while other projects served a mixture of Caucasian, Hispanic/Latino, and African American families. In most projects, participating families were primarily single-parent and female-headed, with only three projects serving a significant percentage of two-parent families. The majority of families served were public assistance recipients at the time of project intake and were residing in some type of shelter or transitional housing facility. Shelter facilities varied with respect to duration of shelter stay (ranging from 30 days to two years) and the populations served (victims of domestic violence, teen mothers, homeless women with young children, and two-parent families). Some projects also served families who were residing with relatives or friends (“doubled up”), living in motels, and/or about to be evicted because they could not pay their rent. Frequently cited reasons for homelessness were domestic abuse (eight projects), substance abuse (seven projects), the breakup of a woman’s relationship with a male partner (eight projects), and lack of money to pay rent (five projects).

**Table 1: Number of Demonstration Projects Exhibiting Particular Characteristics**

<b>PROJECT CHARACTERISTICS</b>	<b># OF PROJECTS</b>
<b><i>Duration of Educational Services</i></b>	
Full day (at least 8:30 a.m. to 5:30 p.m.)	7 projects
Extended day (at least 6 hours)	1 project
Half-day (e.g., approximately 3 hours)	5 projects
Both full-day and half-day classes	3 projects
Full week	14 projects
3–4 days per week	2 projects
<b><i>Type of Program</i></b>	
Special Centers for homeless children	9 projects
Integration of homeless children into community Head Start Centers	3 projects
Both special and integrated Centers	3 projects
Family child care providers (no classrooms)	1 project
<b><i>Ages of Children Targeted for Services</i></b>	
Three- to five-year-olds only	11 projects
Both three- to five-year-olds and infants and toddlers	5 projects
<b><i>Location of Center Facilities (Classrooms)</i></b>	
In a shelter or transitional housing facility	4 projects
In various community sites	10 projects
In both housing facilities and community sites	1 project
<b><i>Services Provided by Project Staff</i></b>	
Mainly Head Start comprehensive services	7 projects
Self-sufficiency and housing-related services in addition to Head Start services	9 projects
Transportation services	8 projects
Emergency funds	3 projects

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### **Implementation Issues, Challenges Encountered, and Effective Practices**

Critical issues with respect to implementing Head Start services for homeless families were:

- ❖ Building effective collaborative relationships.
- ❖ Recruiting, enrolling, and retaining homeless families.
- ❖ Involving homeless parents in Head Start.
- ❖ Meeting the unique needs of homeless children and parents.

#### *Building Effective Collaborative Relationships:*

Grantees developed three types of collaborative relationships: (1) collaborations involving coordination of services, (2) collaborations developed to recruit families to the project, and (3) collaborations established to access services for project families. All grantees reported that collaboration was a challenging task because of the necessity to build trust with partners, convince partners of the importance of Head Start services for homeless families, and establish open and effective communication with partners.

Strategies reported to be effective in building trust were:

- ❖ Including potential partners early in the project's planning phase.
- ❖ Developing a project advisory committee including representatives from partner agencies.
- ❖ Representing the project on existing coalitions of homeless services agencies.

- ❖ Emphasizing the benefits of collaboration to potential partners.
- ❖ Inviting partner agency staff to participate in project activities.

Strategies reported to be effective in convincing partners of the importance of developmental services for children were:

- ❖ Informing partners about the importance of early childhood development services for the well-being of parents as well as children.
- ❖ Educating partners about the efficacy of a family perspective in providing services to homeless families.
- ❖ Identifying homeless children's needs, the lack of services for homeless children in the community, and the ways that Head Start can fill these gaps.

Strategies that promoted open communication between project and partner agency staff were:

- ❖ Developing interagency case management teams or joint planning and case staffing teams.
- ❖ Co-locating Head Start staff and collaborating agency staff in the same sites.
- ❖ Identifying a staff person from the partner agency with a similar philosophy to serve as a primary contact.
- ❖ Establishing formal agreements specifying collaborating partners' roles and responsibilities.

**Recruiting, Enrolling, and Retaining Homeless Families:** Several demonstration projects encountered problems recruiting, enrolling, and/or retaining homeless families in project services, particularly during the first year of project operations. The strategy that was found to be most effective in enhancing recruitment was educating other agencies about Head Start, the projects' services, and the eligibility requirements. Strategies that tended to enhance enrollment were those that reduced the amount of time necessary to obtain required documents, such as:

- ❖ Enrolling children in classes as soon as they have immunization records and establishing a 30-day grace period for obtaining other documentation.
- ❖ Helping families navigate the bureaucracy to obtain necessary documentation.
- ❖ Establishing relationships with health care agencies to provide free physical examinations and immunizations for homeless children on an expedited basis.
- ❖ Providing services to parents even before a child's enrollment in the classroom.

Retention of families was fostered by strategies that addressed the high mobility of homeless families, including:

- ❖ Developing working relationships with shelter staff that allowed demonstration project staff to intervene with families if an eviction was imminent.
- ❖ Encouraging families to continue bringing their children to Head Start classes even when the family is no longer in the shelter.

- ❖ Providing transportation to all families to facilitate access to Head Start classrooms.
- ❖ Establishing close personal relationships with parents so that they perceive project services as enhancing their own well-being as well as their children's.

**Involving Parents in Head Start:** Although most grantees experienced difficulties involving homeless parents in Head Start activities, parent involvement was reported to be improved by the following practices:

- ❖ Holding parent meetings at times and locations that accommodate parents' schedules.
- ❖ Structuring parent meetings as social occasions or gatherings.
- ❖ Developing creative ways in which parents can be involved without being in the classroom, such as assisting on the bus as a monitor or recording books and songs on tape to be played in the classroom.
- ❖ Coordinating with social services departments or shelters so that parents can obtain "work" or "volunteer" credits for the hours they work in the classroom.
- ❖ Hiring a homeless parent to serve as a program advocate because that person was effective in reaching out to homeless families.
- ❖ Establishing a contract with parents to contribute a specific number of hours.

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*Meeting the Multiple Needs of Homeless Families:* Grantees described the following practices as being effective in meeting the multiple service needs of homeless children:

- ❖ Implementing a Primary Caregiver Model in the classroom in which each child is assigned to a caregiver responsible for supporting and nurturing that child.
- ❖ Providing children with a lot of physical attention and validation of feelings.
- ❖ Establishing a classroom environment that has limited amounts of materials and toys, food available at all times, consistent and repetitive routines, and space for quiet times.
- ❖ Hiring a child development specialist to work with teachers, children, and families.
- ❖ Hiring teachers who have qualifications that go beyond the early childhood education (CDA) certificate requirement of Head Start.

For the most part, service needs of homeless parents were addressed by referring them to other community agencies. However, several projects were directly involved in providing housing-related services to homeless parents. Effective practices for helping parents obtain housing were:

- ❖ Employing a staff person to work with realtors, apartment managers, and housing administrators to advocate on behalf of project families.
- ❖ Providing transportation to visit apartments and meet with realtors, writing letters of recommendation on behalf of families, and helping families complete forms.

- ❖ Providing emergency funds to aid families in paying utility bills and security deposits and to help them purchase appliances, window coverings, or bedding.

### **Lessons Learned from the Demonstration Projects**

The key lessons learned in the process of implementing services for homeless children and families were the following:

- ❖ Homeless parents need as much support and nurturance as their children.
- ❖ The needs of homeless children often are overlooked by agencies serving homeless families.
- ❖ Transportation services are essential.
- ❖ Homeless families require children's programming for at least nine hours a day.
- ❖ Head Start is a "newcomer" in the homeless services area, and time is needed to establish credibility before implementing project services.
- ❖ It is sometimes difficult to obtain services for some families, because they are not considered to be homeless according to definitions of many community services agencies and the McKinney Act (e.g., families doubled up with other families are not considered homeless).
- ❖ Some changes in welfare policies and practices have often made it more difficult to serve homeless families and more difficult for homeless families to access the services they need.

### **Implications for Serving Homeless Families**

The experiences of the 16 demonstration projects suggest that there are a number of effective approaches to serving homeless families, and that the efficacy of any particular approach often depends on the characteristics of the community with respect to its resources, local policies, and service delivery systems for homeless families. The projects' experiences also indicate that Head Start has a critical role to play in serving homeless families, and in many communities it may be the only agency serving homeless families that focuses on children as well as parents. In addition, the fact that Head Start employs a family-based, comprehensive services approach to serving families means that it is in a unique position to provide homeless families with the kinds of

services necessary to meet their multiple needs. Finally, a key implication of the demonstration projects' experiences is that Head Start programs cannot "do it all." Collaboration with other agencies serving homeless families was a critical element of each demonstration project. However, collaboration often proved to be a challenging task, and many Head Start programs desiring to expand their services to homeless families may require training and technical assistance in developing effective partnerships in their communities. Collaboration also was found to be problematic in communities in which services to homeless families were limited. This suggests that Head Start Centers may have a role in advocating for greater services for these families in their communities or may need to expand their own services to meet existing service gaps.

## ***Introduction***•

In October 1993, the Head Start Bureau (HSB) of the Administration on Children, Youth and Families funded 16 Head Start grantees to develop and implement demonstration projects for homeless children and their families. The objectives of this initiative were to (1) enhance access of homeless families to Head Start services; (2) provide services responsive to the special needs of homeless children and families; (3) identify effective methods of addressing the needs of homeless families; and (4) implement and document replicable strategies for collaboration between Head Start programs and community agencies on behalf of homeless families. At the end of the three-year demonstration period, the HSB transitioned demonstration funds to the grantees' regu-

lar Head Start budgets to promote continuation of services for homeless families.

Based on reviews of the projects' final reports, as well as telephone discussions with project administrators, this report provides the following information:

- ❖ Characteristics of the demonstration projects and families served.
- ❖ Critical issues relevant to project implementation.
- ❖ Challenges encountered and effective practices with respect to each issue.
- ❖ Key lessons learned.

## Chapter One: Description of the Demonstration Projects

The locations and grantee agencies for the 16 demonstration projects are presented in Table 2; contact information is provided as an Appendix. Most projects served families residing in urban areas, although a few served families living in suburban or rural areas.

### A. General Service Approaches

The demonstration grantees adopted three general approaches to serving homeless children and families.

- ❖ Four projects integrated Head Start services into ongoing shelter or transitional housing

**facility services for homeless families.** In this approach, grantees developed coordinated services relationships with agencies operating family shelters and/or transitional housing facilities. Head Start programs were located in the housing facilities, demonstration project staff focused on meeting children’s service needs, and housing facility staff provided parents with case management services, including referrals for services related to self-sufficiency and housing.

**Table 2: Demonstration Project Grantees**

<b>LOCATION</b>	<b>GRANTEE</b>
Aberdeen, Washington	Coastal Community Action Program
Baltimore, Maryland	Baltimore DHCD Human Services Division
Boston, Massachusetts	Action for Boston Community Development, Inc.
Cedar Rapids, Iowa	Hawkeye Area Community Action Program
Chicago, Illinois	City of Chicago, Department of Human Resources
Columbus, Ohio	Child Development Council of Franklin County, Inc.
District of Columbia	United Planning Organization
Elmsford, New York	Westchester Community Opportunity Program, Inc.
Lexington, Kentucky	Community Action Council for Lexington-Fayette
Madison, Wisconsin	Dane County Parent Council, Inc.
Minneapolis, Minnesota	Parents in Community Action, Inc.
New York, New York	Human Resources Administration
Oakland, California	City of Oakland, Office of Health and Human Services
Phoenix, Arizona	Southwest Human Development, Inc.
Reno, Nevada	Community Services Agency
Seattle, Washington	Puget Sound Educational Service District Head Start

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- ❖ **Three projects offered traditional Head Start services and collaborated with other community agencies to provide housing and self-sufficiency services.** Grantees implementing this approach collaborated with multiple agencies serving homeless families, rather than coordinating their services with any one agency. The children were either integrated into existing community Head Start centers or placed in special centers established for homeless children. Demonstration project staff provided traditional Head Start services, with collaborating partners expected to meet families' housing and self-sufficiency service needs.
- ❖ **Nine projects provided housing and self-sufficiency-related services as well as traditional Head Start services.** In these projects, special staff were hired to provide families with services related to self-sufficiency and housing. Collaborations with agencies serving homeless families were developed primarily to facilitate referrals to the demonstration project.

The particular approach adopted by the grantees reflected their perceptions of the status of homeless services in their communities. Some grantees, for example, were

located in communities that did not have single agencies providing comprehensive services to homeless families. Consequently, they developed collaborations with a wide range of agencies. Other grantees described their communities as lacking adequate services related to self-sufficiency and housing for homeless families. As a result, they hired project staff to provide those services to project families.

### **B. Features of the Demonstration Projects**

Fifteen demonstration projects offered center-based services, with two of these also providing home-based services. One grantee provided Head Start services through Family Child Care providers. Most projects offered services for the full year, with some of these closing for a short period to provide staff training. A few projects did close their classroom services during the summer months. Other project features are presented in Table 2. These include the duration of classroom services, the types of Head Start centers, the locations of center facilities, and the ages of children served.

#### ***Duration of Head Start Day, Week, and Year***

As shown in Table 3, seven projects offered full-day Head Start (at least 8:30 a.m. to 5:30 p.m.), six operated either extended-day classes (about 6 hours) or the traditional half-day classes, and three provided both partial- and half-day classes. Only two projects did not offer classes for the full week.

## Description of the Demonstration Projects

**Table 3: Characteristics of Projects**

<b>Project Characteristics</b>	<b>Aberdeen</b>	<b>Baltimore</b>	<b>Boston</b>	<b>Cedar Rapids</b>	<b>Chicago</b>	<b>Columbus</b>	<b>D.C.</b>	<b>Elmsford</b>
<b>Duration of Classroom Services</b>								
Full day (about 9 hours)					■	■	■	■
Extended day (about 6 hours)	■							
Half-day (3–4 hours)			■					
Full and partial day		■		■				
Full week		■	■	■	■	■	■	■
3–4 days per week	■							
<b>Type of Site</b>								
*Special Centers for homeless	■				■	■	■	■
Integrated into regular Centers								
Both special and integrated		■	■	■				
Family Child Care Providers								
<b>Location of Facilities</b>								
Shelter or housing facility					■			■
Community sites (CS)	■	■	■			■	■	
Housing facility and CS				■				
<b>Ages of Children Served</b>								
3–5 years old	■	■	■			■	■	
Birth to 5 years old				■	■			■

<b>Project Characteristics</b>	<b>Lexington</b>	<b>Madison</b>	<b>Minneapolis</b>	<b>New York</b>	<b>Oakland</b>	<b>Phoenix</b>	<b>Reno</b>	<b>Seattle</b>
<b>Duration of Classroom Services</b>								
Full day (about 9 hours)	■			■				■
Extended day (about 6 hours)								
Half-day (3–4 hours)		■	■			■	■	
Full and partial day					■			
Full week	■	■	■	■	■		■	■
3–4 days per week						■		
<b>Type of Site</b>								
*Special Centers for homeless		■		■		■	■	
Integrated into regular Centers	■		■		■			
Both special and integrated								
Family Child Care Providers								■
<b>Location of Facilities</b>								N/A
Shelter or housing facility				■		■		
Community sites (CS)	■	■	■		■		■	
Housing facility and CS								
<b>Ages of Children Served</b>								
3–5 years old	■	■	■		■	■	■	
Birth to 5 years old				■				■

\*Special classes for homeless children usually included neighborhood children who were not homeless.

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Grantees that were unable to provide full-day, full-year classroom services indicated that this was a barrier to serving homeless families. One grantee noted that several families took their children out of Head Start when they found full-day child care services. Another grantee indicated that retention of participating families was hampered by a lack of summer Head Start classroom services. Administrators of these projects reported that they were currently considering options for extending their services, such as developing linkages with Family Child Care providers and/or child care agencies to provide “before” and “after” child care services to Head Start children.

### ***Types of Head Start Centers***

Nine grantees established special Head Start centers to serve homeless children and their families; three grantees integrated homeless children and families into already existing Head Start centers; and three grantees both integrated children into existing Head Start centers and established special centers designated for homeless children. As noted previously, one grantee used Family Child Care providers to serve homeless children.

**There was no consensus across grantees as to the most appropriate type of program for serving homeless families. Grantees establishing special centers for homeless children indicated that this approach was necessary because traditional Head Start classrooms do not meet these children’s needs. In comparison to non-homeless Head Start children, homeless children were less able to adapt to change, more overwhelmed when there were too many objects or activities, and more likely to exhibit multiple behavior problems. Consequently, they required classrooms that have minimal stimula-**

**tion with respect to materials, toys, and activities; highly structured curricula that stress consistent routines; and staff-to-child ratios permitting individualized attention and nurturing relationships.**

Grantees integrating homeless children and families into existing Head Start centers expressed the opinion that this was the most appropriate approach because it provided homeless families with opportunities to interact with families who are not homeless and encouraged them to view themselves as part of a broader community. These grantees acknowledged that working with homeless children was challenging for classroom staff, but indicated that the challenge was adequately addressed by hiring additional classroom staff and providing specialized training. The three grantees that both established special homeless centers and integrated children into existing centers also noted that integration was a more appropriate approach. Consequently, they plan to expand their efforts to place children in existing Head Start centers and eventually close their “homeless-only” centers.

The grantee using Family Child Care providers suggested that this was a particularly appropriate approach to serving homeless families. This model offers homeless children the consistency and individualized attention they need, fosters the development of close personal relationships between providers and parents, and ensures a home-like environment in which siblings can be served together.

Because only four project evaluations assessed child outcomes, no empirical evidence is available to establish the efficacy of the different approaches with respect to children’s well-being. However, one grantee that established special homeless centers as well as integrating homeless children into existing centers reported that children who moved from the homeless Head Start class-

## ***Description of the Demonstration Projects***

room into an existing Head Start program in the community did better on measures of academic performance and personal adjustment than those who stayed in the Head Start classroom for children who are homeless. Although this finding supports the contention that integration may be a more effective approach, the evaluation involved a very small sample size and thus the finding must be interpreted with caution.

### ***Ages of Children Targeted for Services***

Eleven projects served only children between three and five years of age, while five projects served infants and toddlers as well. Among the five projects serving infants and toddlers, two provided home-based services, two established special infant-toddler classrooms, and one used Family Child Care providers.

There was general consensus across grantees that meeting the comprehensive needs of homeless families requires serving infants and toddlers as well as preschool children. In fact, all grantees indicated that a shortage of infant-toddler child care was a major service gap in their communities. This service was noted to be increasingly important as new welfare policies require women with infants and toddlers to work or enroll in training programs in order to continue receiving benefits.

### ***Location of Head Start Centers and Services***

Among the 12 projects establishing special centers for homeless children, five located at least some of their classrooms and services within a shelter or transitional housing facility. The remaining projects established their special centers in various community sites such as schools, YWCAs, community

centers, former child care centers, and churches.

According to the grantees, there were advantages and disadvantages to each type of location. One advantage of locating Head Start services in a housing facility was that transportation was not a problem. Families residing in the facility had easy access to the classrooms, parent meetings, and project staff. This type of location also permitted frequent interaction between Head Start staff and staff serving homeless parents and fostered opportunities for joint planning, joint staffing, and services coordination. A disadvantage was that it was difficult to retain children and families in Head Start project services when families left the shelter, even when projects encouraged continued involvement.

An advantage of locating Head Start classrooms and services in community sites was that retention of families was not contingent on duration of shelter stays. A disadvantage was that families often lacked transportation to the classrooms and/or parent activities. Grantees providing services in community locations noted that transportation services were necessary to facilitate family recruitment and retention; the absence of transportation services was a primary barrier to project implementation. Another disadvantage to locating classrooms in community sites was that it was difficult to maintain frequent and regular contact between project staff and collaborating agency staff. As a result, project staff often were unaware of the nature and extent of services families were receiving from other agencies, while collaborating agency staff were not fully apprised of the services families were receiving from the project.

### C. Families' Demographic Characteristics

Table 4 presents information on the general demographic characteristics of project families. Because projects' final reports varied with respect to the types of information provided regarding family characteristics, there are some gaps.

The **race/ethnicity** of families tended to vary across locations, with grantees in large cities in the East (including Elmira, which is in Westchester County) and Midwest tending to serve primarily African American families. The Aberdeen and Cedar Rapids projects served a large percentage of Caucasian families, while other projects served a mixture of Caucasian, Hispanic/Latino, and African American families. Phoenix and Aberdeen served a number of Native American families, and Boston served a number of Asian families.

Information on **family structure** was available from 13 project reports. Of these projects, ten served primarily single-parent mother-headed families, and three served a significant percentage of two-parent families (although both parents were not always the children's biological parents). Five projects served a small number of single-parent fathers.

Ten grantees provided information relevant to families' **participation in public assistance programs**, including AFDC/TANF, Food Stamps, and SSI. In eight projects, the vast majority of families served were public assistance recipients at the time of intake into the project. The exceptions were the Cedar Rapids and Phoenix projects. The Phoenix grantee reported that the number of families receiving public assistance at intake decreased significantly from year two to year three.

Information on the **employment status** of families at project entry was provided

by seven grantees. In most of these projects, less than 20 percent of families served were employed at intake. In the Phoenix project there was a change in employment status of participants at intake from 11 percent employed in year two to 60 percent employed in year three. This was attributed to a change in the types of families entering the shelter facility in which the project was housed. In the Washington, D.C., project there also was a change in participants' employment status at intake from 11 percent employed in year one to 80 percent employed by the end of the third year. This change was attributed to new welfare policies requiring parents to work in order to maintain their benefits.

With respect to **housing status**, most projects served families residing in some type of shelter or transitional housing facility. Some of these facilities permitted families to remain for a year or longer, others limited the stay to around six months, and still others restricted families to 30-day or three-month stays. Some facilities served women who had experienced domestic violence, some served all homeless women with young children, one served two-parent families as well as women with children, and one served teen mothers and their children. One project served families residing in a permanent living apartment facility in which 45 percent of the units were set aside for families coming from shelters. Several projects also served families who were residing with relatives or friends ("doubled up"), living in motels, and/or about to be evicted because they could not pay their rent.

The **primary reasons for homelessness** are presented in Table 5. Domestic abuse was cited as a major reason for homelessness by the eight grantees that had developed collaborative relationships with shelters serving victims of domestic violence.

## Description of the Demonstration Projects•

**Table 4: Characteristics of Families at Intake**

<b>Family Characteristics</b>	<b>Aberdeen</b>	<b>Baltimore</b>	<b>Boston</b>	<b>C. Rapids</b>	<b>Chicago</b>	<b>Columbus</b>	<b>D.C.</b>	<b>Elmsford</b>
<b>Race/Ethnicity</b>								
Caucasian	80%	2%	9%	77%	5%	NA	0	11%
African American	0	98%	45%	*23%	85%	NA	Most	58%
Hispanic/Latino	9%	0	27%	0	8%	NA	Some	19%
Other (Asian, Native American, Mixed)	11%	0	19%	0	2%	NA	0	12%
<b>Family Structure</b>								
Single Parent (mother)	55%	92%	95%	NA	100%	Majority	85%	100%
Single parent (father)	5%	0	0	NA	0	Some	0	0
Two parent (not always married)	33%	4%	5%	NA	0	Some	15%	0
<b>Recipients of Public Assistance</b>	87%	88%	NA	46%	100%	NA	91%	100%
<b>Employed (full or part time)</b>	15%	30%	NA	26%	NA	NA	**19%	NA
<b>Housing Status at Intake</b>								
At risk of homelessness (doubled up, imminent eviction, motels)	80%	42%	68%	16%	0	0	22%	0
Short-term shelter (up to 30 days)	10%	4%	23%	66%	0	Most	42%	0
Long-term shelter (to 12 months)	0	0	0	0	0	0	0	0
Transitional housing (1 year+)	5%	54%	0	0	0	Some	25%	100%
Domestic abuse shelter of facility		Some	2%	15%	100%	Some	Some	0
<b>Numbers Served (families or children)</b>	41(**f)	305 (f)	66 (c)	178 (f)	270 (c)	184 (f)	144 (f)	34 (c)

<b>Family Characteristics</b>	<b>Lexington</b>	<b>Madison</b>	<b>Minneapolis</b>	<b>New York</b>	<b>Oakland</b>	<b>Phoenix</b>	<b>Reno</b>	<b>Seattle</b>
<b>Race/Ethnicity</b>								
Caucasian	26%	17%	10%	NA	NA	32%	NA	37%
African American	65%	71%	80%	NA	NA	12%	NA	22%
Hispanic/Latino	0	7%	*10%	NA	NA	40%	NA	14%
Other (Asian, Native American, Mixed)	9%	5%		NA	NA	14%	NA	14%
<b>Family Structure</b>								
Single Parent (mother)	68%	65%	75%	NA	Most	38%	NA	98%
Single parent (father)	14%	0	3%	NA	Few	0	NA	NA
Two parent (not always married)	18%	35%	22%	NA	Some	62%	NA	NA
<b>Recipients of Public Assistance</b>	97%	92%	NA	NA	NA	Y1-40% Y3-32%	NA	98%
<b>Employed (full or part time)</b>	NA	10%	NA	NA	Some	Y1-11 Y3-60%	NA	NA
<b>Housing Status at Intake</b>								
At risk of homelessness (doubled up, imminent eviction, motels)	0	0	0		48%	0	Most (Motels)	
Short-term shelter (up to 30 days)	0	100%	0		20%	25%	Some	
Long-term shelter (to 12 months)	0	0	Most	Some	0	75%	0	
Transitional housing (1 year +)	Most	0	0	Some	20%	0	0	100%
Domestic abuse shelter of facility	Some	0	0		Some	0	0	
<b>Numbers Served (families or children)</b>	37 (f)	42 (f)	1075 (c)	NA	101 (c)	60 (f)	14 (f)	41 (f)

•This percentage includes all families of color. \*\*This increased to 80% toward the end of the third project year due to welfare reform requirements. \*\*\*f=count by families, c=count by children

**Table 5: Primary Reasons for Homelessness Reported by Projects**

<i>Reasons for Homelessness</i>	<i>Aberdeen</i>	<i>Baltimore</i>	<i>Boston</i>	<i>C. Rapids</i>	<i>Chicago</i>	<i>Columbus</i>	<i>D.C.</i>	<i>Elmsford</i>
Domestic abuse	■	■	■		■	■		
Substance abuse			■				■	■
Problems with families with whom they are currently residing (double up)								
Change in relationships with male partners	■	■				■	■	
Immigration from other states						■		
High cost of housing in the community							■	■
Lack of money to continue paying rent	■	■						
Inadequate financial management skills or lack of employment skills			■					

<i>Reasons for Homelessness</i>	<i>Lexington</i>	<i>Madison</i>	<i>Minneapolis</i>	<i>New York</i>	<i>Oakland</i>	<i>Phoenix</i>	<i>Reno</i>	<i>Seattle</i>
Domestic abuse		■				■		■
Substance abuse	■		■		■	■		
Problems with families with whom they are currently residing (double up)	■	■	■	■				■
Change in relationships with male partners	■	■		■			■	
Immigration from other states		■	■			■		
High cost of housing in the community			■					
Lack of money to continue paying rent	■		■		■			
Inadequate financial management skills or lack of employment skills								

Substance abuse was cited as a key reason for homelessness by seven grantees. Another frequently cited reason for homelessness was the breakup of a relationship, which usually left the female partner and her children without a place to live. In four projects, many of the families served had come from another state either because they had family or friends living in the new location or they were looking for a better life for their families. These families often became homeless when they were unable to find jobs and affordable places to live and could no longer double up with family or friends. This was noted as a key reason for being

homeless among families served in Phoenix, Madison, Columbus, and Minneapolis.

## D. Project Services to Children and Families

All projects offered the full array of Head Start comprehensive services to children and families in the areas of education, health, mental health, social services, and parent education. Nine grantees hired additional project staff to help families obtain housing, jobs, and self-sufficiency-related services such as adult basic education, GED classes, job training classes, and job readiness workshops.

## ***Description of the Demonstration Projects•***

In the other seven projects, these services were provided by collaborating agencies.

Eight projects made transportation services available to families, primarily to transport children to Head Start classrooms. A few projects also offered transportation to give parents access to services in the community for their children and themselves.

Transportation was provided either directly through use of a van or bus, or indirectly through vouchers or cash for public transportation.

Three grantees budgeted for emergency funds for families to be used in special situations. In one project, the emergency fund was used to pay for child care services when a family's child care benefits were terminated by the local public assistance office. Two other projects used their emergency funds to help families pay utility bills or security deposits, or purchase appliances, window coverings, or bedding when they could not obtain them elsewhere.

A few projects developed classroom service models that differed somewhat from traditional Head Start classrooms. One of them implemented a family support model in which the classroom environment was designed to nurture and support parents as well as children. Furniture and materials were adult-sized as well as child-sized, and parents were invited to use the facility to do their laundry and take care of personal hygiene needs. Two projects adopted a Primary Caregiver Model in which each child was assigned a caregiver who was responsible for addressing the child's needs and fostering a nurturing and supportive

relationship. Another project employed a child development specialist to address homeless children's social and emotional needs and provide training and support to staff. Several grantees, noting that homeless children were frequently concerned about not getting enough food, made food available in the classroom at all times, provided additional snacks during the day, and/or gave children snacks to take home or eat on the bus on the way home.

Nine grantees used volunteers to assist in providing services. Volunteers included high school students (two projects), college and university students (five projects), senior citizen groups (two projects), and members of local community organizations such as the Junior League (two projects). Volunteers tended to work primarily in the classrooms, although in one project they also accompanied home visitors to family homes. In one project, the local children's museum and library sent volunteers to the classroom, a music therapist visited the classroom on a weekly basis, and university nursing students worked in the classroom on a daily basis providing health-related assessments for the children and education and training for parents and staff. One grantee participated in the Jesuit Volunteer Program, using the volunteer as a project case manager. The Jesuit Volunteer Program provides nonprofit social services agencies with a volunteer who meets their staffing qualifications. The volunteer stays for one year, and the participating agency pays about \$6,000 to support the volunteer. A new volunteer is provided each year.

## Chapter 2: Issues, Challenges, and Effective Practices

Several issues were reported to be particularly important with respect to implementing Head Start services for homeless families:

- ❖ Building effective collaborative relationships.
- ❖ Recruiting and enrolling homeless families.
- ❖ Retaining homeless families and children in project services.
- ❖ Involving homeless parents in Head Start.
- ❖ Meeting the unique needs of homeless children and parents.

### A. Building Effective Collaborative Relationships

The collaborative relationships established between demonstration grantees and other community agencies facilitated obtaining space for classrooms, recruiting and enrolling families, and securing services for children and families not provided by project staff or staff from other divisions of the grantee agency. Grantees developed three general types of collaborative relationships:

- ❖ **Collaborations involving coordinated services.** In these collaborations, grantee and partner agencies engaged in joint planning to avoid duplication of services, maximize services to families, and ensure that each agency provided services consistent with its area of expertise. This type of collaboration usually, but not always, occurred between demonstration projects and agencies operating a shelter or transitional housing facility.
- ❖ **Collaborations for recruitment purposes.** In this type of collaboration, grantees developed partnerships with community agencies serving homeless families to facilitate referrals of eligible families to the projects. Some grantees asked partner agencies to give eligible families information about Head Start, the Head Start application form, and the name of a contact person at the project. Other grantees asked partner agencies to provide the names of eligible families to the demonstration project, and project staff made the initial contact concerning Head Start services. Collaborations for recruitment were established with shelters, transitional housing facilities, agencies serving domestic violence victims, housing authorities, community coalitions of agencies serving homeless families, and city or county social services departments.
- ❖ **Collaborations to provide access to services.** Grantees also established collaborations to expand the array of services available to project children and families. To meet children's service needs, partnerships were developed with mental and physical health providers, child development centers, and agencies providing services to children with disabilities. To meet parents' service needs, partnerships were developed with realtors; housing managers; and agencies providing adult education services, sub-

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stance abuse treatment services, job training or employment services, and social services benefits. Some of these partnerships involved contractual agreements for services to be provided to a number of children and families. For example, one project established a contractual agreement with a community mental health agency to provide mental health services to project participants on a priority basis. In other partnerships, services were provided on a case-by-case basis.

All 16 grantees experienced some level of success in collaborating with community agencies and organizations. Despite this success, 15 grantees acknowledged that establishing effective collaborations was a challenging task. The key challenges they encountered were:

- ❖ Establishing trust with collaborating partners.
- ❖ Convincing partners of the importance of Head Start services for homeless families.
- ❖ Establishing open and effective communication with partners.
- ❖ Overcoming barriers regarding access to resources.
- ❖ Maintaining collaboration when there was turnover among project or partner agency staff.

These challenges, and the strategies and practices developed to address them, are discussed in the following sections.

### ***Establishing Trust***

Many grantees reported that potential partner agencies did not fully accept the project. In some cases, potential partners viewed project staff as outsiders rather than as colleagues. In other cases, potential partners felt that the project would “take away”

the families they were serving, duplicate their services, or in some way detract from their efforts for homeless families. A few grantees indicated that agencies serving homeless families had their own ideas about appropriate service approaches for these families and were reluctant to collaborate with the project unless it was willing to adopt these approaches.

Strategies reported to be effective in establishing trusting relationships with collaborating partners were the following:

- ❖ Include potential partners early in the project, ideally during the planning phase, to promote a sense of shared ownership.
- ❖ Develop a project advisory committee that includes representatives from all potential collaborating partners and meet as frequently as possible.
- ❖ Have someone represent the project on existing coalitions of homeless services agencies.
- ❖ Emphasize the ways that partners can benefit from the collaboration, such as being able to offer child development and parenting education services to their clients.
- ❖ Invite partner agency staff to participate in project activities such as parent involvement sessions and family days.

### ***Convincing Partners of the Importance of Developmental Services for Children***

Several grantees experienced difficulties convincing staff from agencies serving homeless families of the importance of addressing the needs of homeless children. Frequently, staff from these agencies did not perceive services for children as a priority for homeless families because parents' service needs were so extensive. In addition, some of the agencies serving homeless

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women emphasized women's empowerment, and their advocacy efforts on behalf of these women were occasionally in conflict with Head Start's advocacy for children. The following practices were reported to be effective in convincing partners of the need for child-focused as well as parent-focused services:

- ❖ Educate community agencies regarding child development issues and the importance of early childhood development for the well-being of parents as well as children.
- ❖ Educate community agencies regarding the relevance of a family perspective in providing services to homeless families. For example, point out that a considerable amount of stress experienced by homeless parents is a consequence of the difficulties they encounter in their role as parents.
- ❖ Clearly identify children's needs, the lack of services for homeless children in the community, and the ways that Head Start can fill these gaps.

### ***Establishing Open and Effective Communication Between Project Staff and Partner Agency Staff***

Nine grantees reported that collaborative relationships were hampered by poor communication between demonstration project and partner agency staff, resulting in misunderstandings between staff and, in some instances, a reluctance of staff to share information. Poor communication frequently occurred when partners did not know what the project expected them to do, or partner agencies expected the grantee to provide services it was not prepared to provide.

Grantees indicated that a key facilitator of effective communication was consistent and frequent face-to-face contact between demonstration project and partner agency staff. Strategies found to be effective in this regard were the following:

- ❖ Develop interagency case management teams or hold frequent joint planning or case staffing meetings.
- ❖ Co-locate Head Start staff and collaborating agency staff in the same office. An example of this was having a Head Start project outreach staff person work on site at a shelter or transitional housing facility to help families complete Head Start applications and/or work with housing facility staff to address specific family problems.
- ❖ Contact all agencies serving homeless populations in the community and establish a forum for continuing dialogue, such as an advisory board or coalition.
- ❖ Identify someone in the partner agency with a similar philosophy and perspective to serve as a primary contact, and meet with that person on an informal as well as formal basis.
- ❖ Develop clear expectations regarding collaborating partners' roles and responsibilities by establishing formal agreements and procedures.

### ***Overcoming Barriers Regarding Access to Resources***

Some grantees reported that potential partners expressed concern that collaboration with the project would drain their resources and result in excessive burden to their staff. Consequently, they expected to

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receive project funds to pay for services their agency provided. Four grantees that did offer to share resources reported that this strategy greatly enhanced collaboration. For example, a project that collaborated with the YWCA to provide space for its Head Start classroom offered children's car seats to the YWCA, shared its furniture with the YWCA, and provided food for children in the YWCA child care program as well as in the Head Start classroom. Another project collaborating with a homeless shelter offered workshops on health and nutrition for all shelter residents, rather than just for those who were project participants. Two grantees shared project funds with partners providing specific services in areas such as mental health, physical health, or adult education.

### ***Maintaining Collaborative Relationships When There Was Staff Turnover in the Project or in the Partner Agency***

Collaborations often were established when a demonstration project staff member developed a close relationship with a partner agency staff member. Although these collaborations were effective, they tended to dissolve when one of the staff members left. In contrast, collaborations were more enduring when partner agency administrators were committed to, and involved in, the collaborative arrangements. One strategy for fostering this involvement was to have agency leaders meet frequently to discuss partnership issues and problems and, when possible, develop formal collaborative agreements.

## **B. Recruiting and Enrolling Homeless Families**

Eleven demonstration projects experienced problems recruiting or enrolling homeless families in project services. Projects integrating their Head Start classrooms and services

with shelter or transitional housing facilities were less likely to experience these problems than other projects, usually because referral and enrollment in Head Start were part of their coordinated services.

### ***Recruiting Homeless Families***

Although 13 demonstration projects met or exceeded their initial recruitment objectives, these objectives were more likely to be met in the second and third years of project operations than in the first year. During the first year, recruitment was more problematic because grantees were in the initial stages of establishing their collaborative relationships. Grantees reported that recruitment increased once collaborative relationships were in place.

Recruitment efforts also were reported to be hampered by a lack of knowledge about Head Start among agencies and facilities serving homeless families. Recruitment was enhanced when the project employed the following strategies:

- ❖ Visit shelters and transitional housing facilities and talk to staff about the project's services, intake and enrollment processes, and eligibility requirements. It is particularly important to stress eligibility requirements to prevent partners from referring families that do not have Head Start-eligible children.
- ❖ Develop information fliers and brochures about the project and disseminate them to all agencies and facilities serving homeless families or families at risk of homelessness.
- ❖ Go to food banks, churches, housing authorities, and other organizations that reach homeless families and tell them about the project and what Head Start

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has to offer homeless children and parents.

Finally, several projects reported that sometimes families who were referred to Head Start by another agency would not complete the intake process. To remedy this problem, grantees either had partner staff conduct the initial Head Start intakes at their sites or placed a project staff person on site at the partner agency to conduct intakes with identified eligible families.

### **Enrolling Homeless Families**

Six grantees reported that recruited families often dropped out of the project before receiving services. In one project, 29 percent of recruited families left before services could be delivered. In another project, 64 percent of recruited families never enrolled their children in Head Start.

One challenge to enrolling families was **locating or obtaining the required documents for enrollment**, especially the physical exam, immunization records, and birth certificates. Many homeless families lacked adequate medical records or had not provided their children with the medical services required for enrollment in Head Start. Often, the process of getting the paperwork together or obtaining medical services was so lengthy that families lost interest in the project. To meet this challenge, projects developed the following procedures:

- ❖ Enroll children in classes as soon as they have immunization records and establish a 30-day grace period for obtaining other documentation.
- ❖ Assist homeless families in navigating through the bureaucracy to obtain necessary documentation.
- ❖ Establish relationships with health care agencies to provide

free physical examinations and immunizations for homeless children on an expedited basis, and accompany parents and children to their service appointments.

- ❖ Begin providing services to parents immediately, even before a child's enrollment in the classroom—making home visits to families and offering housing-related and/or crisis intervention services.

Another challenge to enrolling families was a **shortage of classroom slots in many Head Start centers**, particularly those operating on a full-day, full-year basis. The following strategies were reported to be effective in meeting this challenge:

- ❖ Make enrollment of homeless children a priority for Head Start Centers, especially at full-day programs.
- ❖ Develop a transitional classroom with a large percentage of slots designated for homeless children.
- ❖ Develop an on-site Head Start classroom at shelters or transitional housing facilities.

### **C. Retaining Families**

In seven projects, a substantial percentage of families were reported to participate for very brief time periods. In one project, 25 percent of enrolled homeless children attended classes for less than two weeks after enrollment; in another project, 16 percent attended for less than a month; and in a third project, 23 percent participated for less than three months. For several projects, the median length of stay was between 30 to 66 days. This high level of turnover was described as

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creating a sense of instability in the classroom, making it difficult for homeless children to feel safe in their environment.

One reason offered for low retention rates was the **high mobility of homeless families**. Many families living in shelters or transitional housing facilities were evicted for violating rules, left because their duration of stay had expired, or left because they had found other living arrangements. Families who were living “doubled up” with friends and relatives often moved around from place to place when relationships with their “host” became strained. Often families moved without notifying project staff, making it difficult for staff to track them and link them to other Head Start centers near their new locations. To meet this challenge, projects developed the following strategies:

- ❖ Develop working relationships with shelter staff that allow demonstration project staff to intervene with families if an eviction is imminent.
- ❖ Permit families to continue bringing their children to Head Start classes even when the family is no longer in the shelter.
- ❖ Provide transportation to all families to facilitate access to Head Start classrooms.
- ❖ Establish close personal relationships with parents so that they perceive project services as enhancing their own well-being as well as their children’s.

Grantees also noted that retention was a problem because **most homeless families required full-day and full-year Head Start services for their children**, while not all grantees were equipped to offer services at this level. Once parents became employed, enrolled in training programs, or started school, they often were unable to remain

in projects that did not offer children’s programming for at least nine hours a day. A few of these projects collaborated with child care providers to assume care of the children both before and after Head Start services in order to retain families. Although many grantees were unable to do this during the course of the demonstration project, several noted that this was one of the changes planned for the future.

### **D. Reducing Children’s Absences**

The attendance rates of homeless children in the Head Start classrooms varied across projects. Projects located in shelters or transitional housing facilities generally experienced the highest attendance rates, mainly because transportation was not a problem. Grantees that were unable to provide transportation generally reported the greatest problems with attendance, particularly at the onset of project operations. In one project, homeless children were absent about twice as often as housed children; in another project, between one third and one half of homeless children had absences totaling two weeks or more during the Head Start year; and in three projects, the average daily attendance of homeless children ranged from 65 to 79 percent.

Although transportation services were viewed as key to ensuring consistent attendance, the following practices also were reported to enhance attendance:

- ❖ Establish an attendance contract with parents and ask them to sign it.
- ❖ Talk to parents about the effects of inconsistent attendance on young children, particularly with respect to developing positive peer relationships.

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- ❖ Provide intensive services to families with children who have excessive absences, making home visits to understand the reasons for absences and helping them overcome barriers to attendance.

### **E. Involving Parents in Head Start**

Twelve grantees reported experiencing difficulties involving homeless parents in Head Start activities. Homeless parents were described as less likely than non-homeless parents to volunteer in classrooms, participate in parent meetings and workshops, attend parent-teacher conferences, or serve on policy councils. In one project, about 40 percent of parents never attended a parent conference or meeting and 66 percent never attended a parent education program; in another project, 36 percent of parents did not participate in any center activities; and in a third project, 48 percent of parents did not participate in any workshops or training. One evaluation reported that out of 25 parents interviewed by the evaluator, only three said that they had attended a parent activity, and only five said that they had attended a daytime or evening event.

Grantees indicated that it was difficult to involve homeless parents in Head Start activities because they **often had extensive demands on their time**. Shelter and transitional housing facilities frequently required activities that kept parents busy during both day and evening hours. In addition, welfare reform policies in many communities required that parents work or be in training to maintain their benefits. These external demands and expectations meant that homeless parents often were not motivated to get involved with Head Start. In spite of this challenge, several projects

experienced success in involving parents through the following strategies:

- ❖ Hold parent meetings at times and locations that accommodate parents schedules—for example, in the evenings and at the shelters where they live. In some projects, home visits were made to families to conduct parent conferences.
- ❖ Structure parent meetings as social occasions or gatherings (one project called them “chat groups”) and offer food and child care as part of the gathering.
- ❖ Structure parent meetings as opportunities for parents to talk about what is going on in their lives rather than as workshops or instructional events.
- ❖ Ensure that staff, particularly family advocates or family services staff, develop close relationships with parents so that parents view attendance at parent meetings or events as an opportunity to meet with their advocate.
- ❖ Develop creative ways in which parents can be involved without being in the classroom such as riding the bus with their child, assisting on the bus as a monitor, creating a parent handbook for the bus, recording books and songs on tape to be played in the classroom, or advocating with outside constituencies on behalf of the project.
- ❖ Coordinate with social services departments or shelters so that parents can obtain “work” or “volunteer” credits for the hours they work in the classroom.

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- ❖ Hire a homeless parent to serve as a program advocate, responsible for increasing parent involvement.
- ❖ Establish a mutually determined contract with parents for them to contribute a specific number of hours each month if they are working or in training, or each week if they are not.

### **F. Meeting the Multiple Needs of Homeless Families**

All grantees reported that meeting the multiple service needs of homeless children and their parents was a challenging task. One strategy for meeting this challenge was to provide specialized training for project staff. Formal training sessions usually involved workshops conducted by Head Start supervisory staff or by experts in the community. These workshops were provided either on an ongoing basis (e.g., once a month), or during a three- to four-week block of time. Informal training took place through staff meetings, inservices, and contacts with consultants specializing in areas such as mental health, child development, and working with children with disabilities.

#### ***Meeting Children's Needs***

In comparison to non-homeless children served by Head Start, homeless children were reported to have greater developmental delays, particularly in language development; to be more likely to have learning disabilities and mental health problems; and to exhibit a higher frequency of socioemotional problems such as withdrawal, shyness, separation anxiety, short attention spans, flat affect, aggression, hoarding, demanding or attention-seeking behaviors, anxiety in response to changes in classroom environments or staff absences, con-

cern over getting enough food, and difficulty making choices and sharing toys.

The following strategies were reported to be effective in meeting homeless children's needs:

- ❖ Adopt a primary caregiver model in the classroom in which each child is assigned to a caregiver who is responsible for supporting and nurturing that child.
- ❖ Provide a lot of physical attention and validation of feelings.
- ❖ Provide a classroom environment that meets the needs of the children by having limited amounts of materials and toys, making food available at all times, implementing consistent and repetitive routines, and setting aside individual spaces for quiet times.
- ❖ Increase the staff-to-child ratio.
- ❖ Hire a child development specialist as a staff person or consultant to work with teachers and with individual children and their families.
- ❖ Ensure that mental health services for children are accessible in a timely manner.
- ❖ Provide teachers with as much family background information as possible.
- ❖ Hire teachers who are skilled at working with children with multiple needs and who have qualifications that go beyond the early childhood education certificate requirements of Head Start.

There is little empirical evidence regarding the impact of the demonstration projects on children's developmental status or

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behaviors because only four projects assessed children's outcomes in their evaluations. The general findings from those evaluations, however, suggest that the children experienced positive effects. The main findings were the following:

- ❖ The Seattle project evaluation reported that the total number of developmental delays decreased significantly from an average of 2.3 per child at pre-test to less than one per child at the post-intervention assessment.
- ❖ In the Baltimore project, teachers reported noticeable increases in vocabulary, expressive language, and gross motor skills from the time children entered the project until the time they left. Teachers also indicated that children appeared more rested and less anxious about eating after spending a month or longer in Head Start and that there was less aggressive and "out-of-control" behavior the longer children remained in the project.
- ❖ The Boston project found that children who moved from the homeless Head Start classroom into existing Centers did better at the end of their Head Start stay on measures of academic performance and personal adjustment than did those who stayed in the homeless classroom.
- ❖ In the Chicago project, all children included in the evaluation demonstrated developmental progress over a six-month interval.

### **Meeting Parents' Needs**

Homeless parents were reported to need mental health, substance abuse, domestic

violence, and physical health services frequently. To meet these needs, grantees usually collaborated with community agencies that either provided these services directly or employed case managers to assist parents in obtaining these services.

Homeless parents also were reported to need self-sufficiency-related services. They were found to have low literacy levels; to lack basic skills with respect to managing their time, families, and finances; and to be generally unprepared both vocationally and academically to enter the work force. Again, the primary strategy for addressing these needs was to collaborate with community agencies offering either direct or case management services in these areas. However, some grantees hired project staff to serve as case managers and help parents obtain these services. Some grantees also became more directly engaged in providing self-sufficiency-related services by (1) offering workshops on job readiness, career planning, and time and financial management skills; (2) working with parents to develop individualized goals and helping them become motivated to accomplish those goals; (3) establishing relationships with local businesses willing to hire project participants; and (4) in one project, hiring at least one parent in a responsible position within the agency.

Finally, all families needed housing services. For most projects, this was the most difficult need to address, primarily because their communities lacked sufficient housing for low-income families. A few grantees also noted that local policies regarding eligibility for particular types of housing units exacerbated the difficulty. For example, in two project sites, families were not eligible for subsidized housing if they had an eviction on their record. In another site, families must have monthly incomes that are at least three times their monthly rent in order to be eligible for a rental unit. Although many demonstration projects

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relied on collaborating agencies to provide housing-related services, several also hired staff to help project families obtain housing. The following practices were reported to be effective:

- ❖ Employ a staff person to work with realtors, apartment managers, and housing administrators to advocate on behalf of project families.
- ❖ Provide transportation to parents to visit apartments and meet with realtors, write letters of recommendation on their behalf, and help them complete forms.
- ❖ Provide families with long-term housing information and home management assistance.
- ❖ Provide emergency funds to help families pay utility bills and security deposits and to help them purchase appliances, window coverings, or bedding when families cannot obtain them elsewhere.

Although project evaluations did not assess parent outcomes with respect to mental health, substance abuse, physical health, and domestic violence problems, some evaluations did assess outcomes for parents with regard to self-sufficiency and housing. However, the outcomes that were reported cannot be considered to be the specific result of the projects' interventions, because the evaluations did not employ comparison or control groups.

Project evaluations noted the following findings with respect to attaining housing:

- ❖ In Phoenix, 61 percent of families obtained permanent housing upon leaving the project
- ❖ In Oakland, of 29 families studied, 41 percent secured housing within six months of entering the project, and the percentage of

families sharing housing (doubled up) was reduced from 21 percent to nine percent.

- ❖ In Cedar Rapids, 81 percent of families included in the evaluation had secured housing by the time of exit from the project.
- ❖ In Chicago, 84 percent of families leaving the project secured permanent housing,

Evaluations also reported the following outcomes relevant to enhancing self-sufficiency:

- ❖ In Phoenix, 89 percent of the Spanish-speaking parents enrolled in English as a Second Language courses, and 11 percent of all parents were enrolled in an educational program during their time in the project.
- ❖ In Cedar Rapids, 74 percent of families were unemployed at intake, while only 41 percent were unemployed at exit.
- ❖ In D.C., at the time of followup (three months after leaving the project), 31 percent of parents were employed, 65 percent had completed a school or job training program, and two had received GEDs.
- ❖ In Lexington, 15 out of 22 parents received employment training services, and six parents who had marketable employment skills completed an 80-hour Job Readiness Workshop.
- ❖ In Chicago, 92 percent of mothers enrolled in school or went immediately to work, 66 percent completed or made acceptable progress in training programs, 62 percent found employment, and 29 percent ended dependence on welfare.

## Chapter 3: Lessons Learned from the Demonstration Projects

Most of the lessons learned from the demonstration projects are reflected in the previous discussions. However, interviews with project administrators resulted in the identification of some overarching lessons relevant to serving homeless children and families.

- ❖ **Homeless parents need as much support and nurturance as their children.** Homeless parents are under a great deal of stress and require extensive support. Staff must be open, flexible, and non-judgmental when working with these parents. For example, just telling a parent that a child needs to go to the dentist usually is not sufficient. Instead, staff may need to tell a parent several times and even make the appointment and accompany the parent and child to the appointment.
- ❖ **Homeless children often are overlooked by agencies serving homeless families.** Homelessness is a great hardship for children, and in most communities the services are not there for them. Demonstration projects had to expend a great deal of effort to keep the needs of children in the forefront of thinking about services for these families. As one project director noted: “We are the hub that keeps everyone focused on the kids.”
- ❖ **Transportation services are essential.** The importance of this service cannot be overstated. As one project director said: “It’s expensive, but it’s necessary.”
- ❖ **Homeless families require children’s programming for at least 9 hours a day.** Full-day services that begin early in the morning and extend to at least 6:00 p.m. are necessary to ensure that families will be able to keep their children in Head Start, and that parents will be able to get the services they need or obtain full-time employment.
- ❖ **Head Start is a “newcomer” in the homeless services arena, and time is needed to establish credibility.** To a large extent, the success of these projects was contingent on their ability to collaborate with agencies serving homeless families. Many of these agencies were ones that the Head Start grantee had not collaborated with in the past. Project directors indicated that time was needed to establish Head Start agency credibility in the area of homeless services and make sure that all systems were in place before attempting to implement the project.

## ***Serving Homeless Families***•

- ❖ **Many homeless families are not considered to be homeless according to definitions of many community services agencies and the McKinney Act.** Several project directors noted that they served many families who were doubled up with other families and tended to move frequently from place to place. Children from these families were reported to have less stability in their lives than those who resided in shelters or even motels and often exhibited greater socioemotional problems. However, it was very difficult to obtain services for these families because they often did not meet national, state, or local definitions of homelessness.
- ❖ **Welfare reforms made it more difficult to serve homeless families and more difficult for homeless families to access the services they need.** Eight project directors provided their perceptions of the impact of welfare reform on the families they served:
  - ❖ Welfare reform has made it more difficult for people to be eligible or maintain eligibility for TANF and thus they are not eligible for shelters in our community. This means that more families are doubling up rather than going into shelters. These people usually are not viewed as homeless, although in reality they are homeless and often have as great, or greater, problems than families residing in shelters. *(Boston)*
  - ❖ Welfare reform has meant that shelters are requiring greater compliance with work requirements. Shelter staff now focus on “where do we get you a job,” rather than “how do we make positive changes in this family.” Consequently, they are providing the family with fewer social supports, and the Head Start program often has to fill in the gaps. *(Phoenix)*
  - ❖ TANF regulations add stress to homeless families because they often mean that families have to move on to work or school at the same time that they are homeless, and this is very difficult. Often they cannot get the services they need. *(Cedar Rapids)*
  - ❖ More families are becoming homeless as they lose their benefits. For example, they may lose their Food Stamps and start taking money from rent to buy food; then they do not pay rent and may get eviction notices. Once they get an eviction on their record, it is extremely difficult for them to find housing. *(Minneapolis)*

## ***Lessons Learned from the Demonstrations Projects•***

- ❖ One of the impacts has been that staff members at the Department of Social Services are confused about eligibility requirements for child care benefits, and families are sometimes losing this benefit inappropriately. To ensure that services are provided to children on a continuous basis, the project has had to provide funds for child care until the problems are straightened out. *(Seattle)*
- ❖ Kentucky's new child care benefits regulations deny benefits to families with incomes over 133 percent of poverty level. This comes to about \$7.00 per hour for a family of three, which is not sufficient to pay for child care. Also, one aspect of the new rule is that once you select a child care provider, you must keep the same one for at least six months. This is a problem for homeless families because they may move to a new place that is some distance from the provider. It also makes it difficult to enroll children in Head Start because families may have already selected a provider. *(Lexington)*
- ❖ There are not enough full-day, full-year Head Start slots, or even child care slots, to meet the needs of all the welfare families in which mothers are now being required to work. *(Oakland)*

## **Chapter 4: Implications for Serving Homeless Families**

The experiences of the 16 demonstration projects suggest that there are a number of effective approaches to serving homeless families, and that the efficacy of any particular approach often depends on the characteristics of the community with respect to its resources, local policies, and service delivery systems for homeless families. Services approaches that are “ideal” in one community, may not work in another community. Head Start grantees interested in implementing services for homeless families must carefully consider the characteristics of their communities in determining the most effective approaches.

A primary implication of the demonstration projects’ experiences is that Head Start has a critical role to play in serving homeless families. In many communities, it may be the only agency serving homeless families that focuses on children as well as parents. In addition, the fact that Head Start employs a family-based approach to serving children means that it is in a unique position to provide homeless families with the kinds of services necessary to meet their multiple needs. Most child care programs, for example, rarely provide the classroom environments and curricula that homeless children require to address their developmental and socio-emotional problems. Child care programs also do not usually ensure that the children they serve receive basic medical, dental, and mental health services, nor do they devote special efforts to help parents improve their parenting skills and enhance their knowledge about child development. Homeless families, even more than other low-income families, clearly need the types of services that Head Start offers, and Head Start programs may be the only place where they can obtain these services.

Another implication of the demonstration projects’ experiences is that Head Start programs cannot “do it all.” Collaboration with

other agencies serving homeless families was a critical element of each demonstration project. However, collaboration often proved to be a challenging task, and many Head Start programs desiring to expand their services to homeless families may require training and technical assistance in developing effective partnerships in their communities. Collaboration also was found to be problematic in communities in which services to homeless families were limited. This suggests that Head Start Centers may have a role in advocating for greater services for these families in their communities or may need to expand their own services to fill some of the existing gaps.

Finally, almost all grantees identified transportation and extended-day and full-year child care as critical needs for homeless families, as well as for other low-income families. Most of the grantees indicated that public transportation in their communities was not adequate to meet the needs of homeless families. Transportation was necessary to get children to Head Start classes, parents to parent and family activities and events, and both children and parents to service or job-related appointments. Similarly, most grantees indicated that child care services in their communities also were not adequate to meet the needs of these families. Affordable infant-toddler child care services were almost nonexistent in many communities, and unless the Head Start program operated for at least 9 hours a day, and provided full-year programming for children, it was not adequate for parents who were working or in training programs. Head Start programs interested in extending their services for homeless families may need to assess the transportation and child care situation in their communities, as well as their own capacity to provide transportation services and to extend their hours to meet the needs of working parents.

**Head Start Demonstration Projects  
Serving Homeless Families**

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Agency for Child Development/Head Start  
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## ***Serving Homeless Families***

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