Current Data on Infants and Toddlers Experiencing Homelessness

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Abstract

During the first year of life children are at the greatest risk for experiencing homelessness (Perlman & Fantuzzo, 2010). Unfortunately, data on the number of infants and toddlers experiencing homelessness are extremely limited, and any data available are inadequate for a variety of reasons. There is minimal information on how many young children and families experiencing homelessness benefit from early childhood programs and support services aimed at addressing the needs of this vulnerable population. This article presents a summary of existing data and the challenges encountered in using this data to better understand the scope of homelessness during the first years of life. The author provides suggestions to improve data collection practices and the processes for identifying families and children experiencing homelessness to enhance access to early childhood services.

Teachers and the health manager at an Early Head Start (EHS) program were concerned that 8-month-old Jonell had been crying more than was typical for him for almost 2 weeks. They talk with Jonell's mom, Keisha, to learn whether she had noticed any changes or if they had experienced any changes at home that might help explain what was distressing Jonell. Keisha shared that, due to family violence, she and Jonell temporarily moved in with friends and, because she was focused on finding a job, Keisha had not been able to apply for any assistance yet. Money was tight and they had little food where she was staying. Keisha was still breastfeeding Jonell, but she was not eating and could tell Jonell was unsettled when she fed him. What they discovered together was that Keisha was not producing enough milk and Jonell was hungry. Both Keisha and Jonell were not getting the nutrition they needed. Together, Keisha and staff secured additional food supports,

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and soon Jonell was eating and settling down, though they all continued to monitor Jonell's development and health. Program staff supported Keisha to connect with community resources to address her other needs, most notably for stable housing.

Infants and toddlers are among the highest risk for experiencing homelessness, but the knowledge base to understand the true scope of the problem is inadequate, due in part to the fact that data sources available for this population are extremely limited. In addition, the existing sources of information vary regarding how they define and measure homelessness, making it harder to collect and interpret the data. Specifically, there are two operational federal definitions of homelessness (see Box 1) used widely to collect data and establish eligibility for services and benefits.

One definition is included in the education subtitle of the McKinney-Vento Homeless Assistance Act (42 U.S.C. \$11434a(2). This definition is used by programs and services administered by the U.S. Departments of Health and Human Services (HHS) and Education (DoEd), such as EHS and Part C early intervention services. The education subtitle definition takes into account families who stay in places not meant for human

Box 1. Federal Definitions of Homeless

McKinney-Vento Education Definition:

(2) The term "homeless children and youth"

(A) means individuals who lack a fixed, regular, and adequate nighttime residence (within the meaning of section 11302(a)(1) of this title); and (B) includes—

(i) children and youths who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; or are abandoned in hospitals;

(ii) children and youths who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings (within the meaning of section 11302(a)(2)(C) [1] of this title);

(iii) children and youths who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings; and

(iv) migratory children (as such term is defined in section 6399 of title 20) who qualify as homeless for the purposes of this part because the children are living in circumstances described in clauses (i) through (iii).

Source: McKinney-Vento Homeless Assistance Act 42 U.S. Code § 11434a (2) (education subtitle)

McKinney-Vento Housing Definition:

General definition of homeless individual

(a) IN GENERAL

For purposes of this chapter, the terms "homeless", "homeless individual". And "homeless person" means – [1]

(1) an individual or family who lacks a fixed, regular, and adequate nighttime residence;

(2) an individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; (3) an individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including hotels and motels paid for by Federal, State, or local government programs for low-income individuals or by charitable organizations, congregate shelters, and transitional housing); (4) an individual who resided in a shelter or place not meant for human habitation and who is exiting an institution where he or she temporarily resided;

(5) an individual or family who-

(A) will imminently lose their housing, including housing they own, rent, or live in without paying rent, are sharing with others, and rooms in hotels or motels not paid for by Federal, State, or local government programs for low-income individuals or by charitable organizations, as evidenced by—

(i) a court order resulting from an eviction action that notifies the individual or family that they must leave within 14 days;

(ii) the individual or family having a primary nighttime residence that is a room in a hotel or motel and where they lack the resources necessary to reside there for more than 14 days; or

(iii) credible evidence indicating that the owner or renter of the housing will not allow the individual or family to stay for more than 14 days, and any oral statement from an individual or family seeking homeless assistance that is found to be credible shall be considered credible evidence for purposes of this clause;

(B) has no subsequent residence identified; and

(C) lacks the resources or support networks needed to obtain other permanent housing; and

(6) unaccompanied youth and homeless families with children and youth defined as homeless under other Federal statutes who—

(A) have experienced a long term period without living independently in permanent housing,

(B) have experienced persistent instability as measured by frequent moves over such period, and

(C) can be expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse the presence of a child or youth with a disability, or multiple barriers to employment.

(b) DOMESTIC VIOLENCE AND OTHER DANGEROUS OR LIFE-THREATENING CONDITIONS

Notwithstanding any other provision of this section, the Secretary shall consider to be homeless any individual or family who is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions in the individual's or family's current housing situation, including where the health and safety of children are jeopardized, and who have no other residence and lack the resources or support networks to obtain other permanent housing.

Source: McKinney-Vento Homeless Assistance Act 42 U.S. Code § 11302

habitation, such as motels and cars, as well as families who stay temporarily with others because of factors such as economic hardship, loss of housing, natural disasters, or family discord. This definition acknowledges that some families avoid shelters and fear entering shelters because many shelters are not safe for children, or because they may fear that entering shelter will result in child welfare involvement. It also recognizes the threat to child development and learning posed by mobility.

Another definition is included in the housing subtitle of the McKinney-Vento Homeless Assistance Act, and it is used by programs and services administered by the U.S. Department of

Housing and Urban Development (HUD), such as emergency shelters and public housing. The HUD definition (42 U.S.S. \$11302) is more narrow and aims to focus resources on those whose homelessness is most visible, such as those living on the streets or in public shelters. HUD has further narrowed and complicated its statutory definition through regulations. (Federal Register, 2011). HUD varies the application of its definition by prioritizing benefits and services for subpopulations, such as single adults, veterans, or, recently, non-parenting youth 18 to 25 years old, and uses such terms as "literally homeless" and "chronically homeless," thus adding even more ambiguity.

When federal definitions of homelessness vary this way, across federal programs and from year to year, providers of services and families themselves become confused. For infants, toddlers, and their families, data collection cannot be combined to enhance understanding of the scope of the problem. Barriers to service access may result simply because of a lack of understanding of criteria used for determining eligibility.

Data sources also vary widely in terms of the specific elements collected. While DoEd and HHS programs use the same McKinney-Vento definition of homeless, each funding stream collects data related to housing status differently. For instance, the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) programs (part of the U.S. Department of Health and Human Services, Health Resources and Services Administration) collect data annually on "adult participants by housing status" and the Child Care and Development Fund (CCDF; part of the US Department of Health and Human Services, Administration for Children and Families) currently asks states to include "family homeless status" on monthly case-level data reports on children and families served, whereas EHS (part of the U.S. Department of Health and Human Services, Administration for Children and Families) programs collect data on "children enrolled using homeless criteria," "number of families experiencing homelessness that were served during the enrollment year," and "number of children experiencing homelessness that were served during the enrollment year." Each of these elements is likely to produce different data as they represent both child-level and family-level data and data for different periods of time. In addition to these differences, across the various federal programs, it is rare for providers to offer specific training on the McKinney-Vento education and housing definitions and when they are used; how best to determine homeless status using the various definitions; and how to access supports and services based on correct eligibility criteria to ensure comprehensive supports are successfully accessed for infants, toddlers, and their families.

This clear difference in both the definition of homelessness used and the type of data collected by federal agencies and programs makes the interpretation and synthesis of data across sources impossible (Shaw, Hirilall, & Halle, in press). It also means that there is no reliable way to establish the actual number of infants and toddlers experiencing homelessness nor to know how many children experiencing homelessness are accessing services from programs that support vulnerable families (Shaw et al., in press).

The Scope of Early Childhood Homelessness

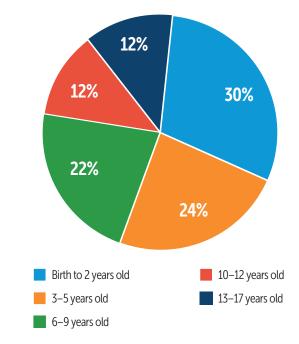
Data published by the U.S. Census Bureau (2018) showed that infants and toddlers remain the age group most likely to be living in poverty and that extreme poverty is associated with homelessness. Although there is relatively little known about the housing status of infants and toddlers living in poverty, research does suggest that having a child under 2 years old puts families at an elevated risk for entering the shelter system (Shinn, Greer, Bainbridge, Kwon, & Zuiderveen, 2013). Furthermore,



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children are at greatest risk of entering the emergency housing system during their first year of life (Perlman & Fantuzzo, 2010). In an analysis of HUD data, Solari, Shivji, de Sousa, Watt, and Silverbush (2017) found that children under 6 years old accounted for approximately half (49.6%) of all children served by emergency shelters in 2016. The Family Options Study, which looked at 2,282 families recruited in homeless shelters across 12 sites, found 50.4% of those families had a child under 3 years old and that 30% of the 4,528 children in shelters with their families were from birth to 2 years old (Gubits et al., 2018; See Figure 1).

Figure 1. Family Options Study: Ages of Children in Homeless Shelters



Note: Additional analysis from: Gubits et al., 2018.

Shinn (2017) analyzed HUD data from the 2015 Annual Homeless Assessment Report with U.S. Census Bureau data and found that the age at which one is most likely to be in a public shelter is during infancy (see Figure 2). Data from 2014 (Brown, Shinn, & Khadduri, 2017) showed 0.8% of all infants to have stayed in shelter during that reporting period.

HUD not only relies on a narrower definition of homelessness, but these sources also depend primarily on emergency shelters and other housing programs as sources of information. This is problematic because using these data sources alone will greatly underestimate the true number of children and families experiencing homelessness (National Center for Homeless Education, 2017). DoEd data, collected from school districts nationwide and using the McKinney-Vento education definition, suggest that students from preschool through high school experiencing homelessness are more likely to be living doubled up than they are to be staying in a shelter, in a motel, or in inadequate housing. According to data from the 2015-2016 school year, there were 1,304,803 students identified as homeless, of which 985,932 students, or 75%, were living doubled up, compared to 315,025 students, or 25%, who were living in shelters, hotels, or unsheltered (National Center for Homeless Education, 2017).

Unfortunately, the relevant data is again not available specifically for children from birth to 3 years old, although it does include preschool-aged children. The Administration for Children and Families used data from HUD, DoEd, and HHS to estimate the extent of early childhood homelessness across

the nation. The report suggested that more than 1.2 million, or 1 in 20, children under 6 years old experienced homelessness in 2016 (Administration for Children and Families, 2017). The report also suggested that as many as 92% of young children experiencing homelessness are not participating in early childhood care and education programs. Again, a limitation of this report is that data were not available specifically for infants and toddlers, most likely because infants and toddlers are underrepresented in early childhood services more broadly. It is important to note that these estimates are larger than numbers reported by HUD because they use the broader McKinney-Vento definition to determine homeless status, which includes highly mobile families and those living doubled up. These data are a good example of how the difference in the definition as well as a lack of focus specifically on the experiences of infants and toddlers—can strongly influence understanding how prevalent the experience of homelessness is for infants, toddlers, and their families.

How Early Childhood Programs Are Addressing Homelessness

This section describes what is known about how four key early childhood systems— EHS, MIECHV, Individuals With Disabilities Education Act (IDEA) Part C Early Intervention (part of the U.S. Department of Education's Individuals With Disabilities Education Act), and child care subsidized through the CCDF—currently support infants, toddlers, and their families who are experiencing homelessness. In addition to describing what

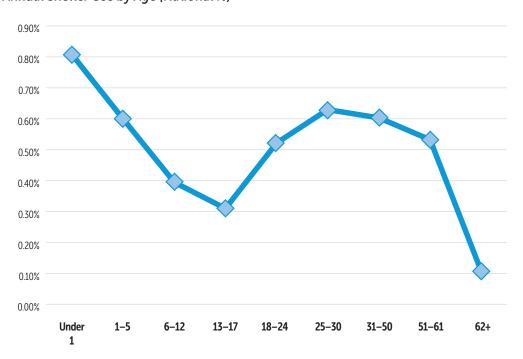


Figure 2. Annual Shelter Use by Age (National %)

Source: 2015 Annual Homeless Assessment Report (HUD, 2016) and U. S. Census Data (Updated from Shinn, Brown, Wood, & Gubits, 2016)

researchers know about how these systems support these families, this section describes the limitations of researchers' knowledge from these systems.

EHS

Among all of the service systems designed to support vulnerable families and promote healthy child development, EHS was the first to direct its attention specifically to the challenges of homelessness. In fact, the federal Head Start Act (reauthorized in 1994) which established the EHS program was the first early childhood policy to specifically address the service needs of families experiencing homelessness.

Since the inception of EHS, Head Start Performance Standards (Federal Register, 2016) have required EHS programs to prioritize homelessness and gather data about children and families experiencing homelessness using the McKinney-Vento education definition of homelessness to determine categorical eligibility for program enrollment and to gather and report data. The EHS Program Information Report contains several data items related to homeless status, making it possible to identify the number of children and families served by each program who experienced homelessness during the program year. The Head Start National Center on Parent, Family and Community Engagement released a standardized set of interactive webbased training modules in 2018 to ensure staff are using the McKinney-Vento definition appropriately when determining child and family homelessness (Administration for Children and Families, 2018; see Box 2).

Box 2. Supporting Children and Families Experiencing Homelessness

This video series will help viewers learn how to identify families experiencing homelessness, conduct community outreach, and much more through knowledge checks, practice scenarios, and interactive learning modules intended to deepen understanding of family homelessness. Each module takes approximately 30 minutes to complete and provides a Certificate of Completion. The modules included are:

Module 1: Overview of Family Homelessness

Module 2: Understanding Family Homelessness

Module 3: Understanding the McKinney-Vento Homeless Assistance Act's Definition of "Homeless"

Module 4: Determining a Family's Homeless Status

Module 5: Identifying and Reaching Out to Families Experiencing Homelessness

Module 6: Enhancing Program Access and Participation for Children Experiencing Homelessness

Module 7: Building Relationships With Families

Module 8: Connecting With Community Partners

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

EHS data for the 2016–2017 program year showed that EHS programs served a total of 204,560 children and 15,526 of those (7.6%) were identified as experiencing homelessness (Office of Head Start, n.d.). Data on family services for this same period reported that a total of 183,741 families were served by EHS and 20,076 (10.9%) of those families received housing assistance from their EHS program including support with subsidies, utilities, and house repairs. In addition, 5,249 families acquired housing during the 2016–2017 program year (Office of Head Start, n.d.).

MIECHV

Information about home visiting programs that support homeless families comes primarily through the federal MIECHV Program. These federally supported and evidence-based home visiting programs (see Box 3) provide parents with valuable skills to help support their family's health and well-being. While each home visiting program has distinct goals, processes, and eligibility criteria, programs target their services to support low-income or high-risk families.

Home visiting programs may help families mitigate some of the risks associated with experiencing homelessness in infancy and toddlerhood (McDonald, & Grandin, 2009). Although a 2016 letter to grantees strongly recommended prioritizing families experiencing homeless for federal MIECHV services, at the time of this publication these programs are not

Box 3. Evidence-Based Home Visiting Programs

The following home visiting models have met U.S. Department of Health and Human Services criteria for evidence of effectiveness. (Health Resources and Services Administration, n.d.) Maternal, Infant, and Early Childhood Home Visiting grantees were allowed to select one or more of the models listed below for implementation using fiscal year 2018 funds.

- Attachment and Biobehavioral Catch-Up Intervention
- Child First
- Early Head Start-Home-Based Option
- Early Intervention Program for Adolescent Mothers
- Early Start (New Zealand)
- Family Check-Up® for Children
- Family Connects
- Family Spirit[®]
- Health Access Nurturing Development Services (HANDS) Program
- Healthy Beginnings
- Healthy Families America®
- Home Instruction for Parents of Preschool Youngsters®
- Maternal Early Childhood Sustained Home-Visiting Program
- · Minding the Baby®
- Nurse-Family Partnership®
- Parents as Teachers®
- Play and Learning Strategies-Infant
- SafeCare® Augmented



Parents continue to struggle with finding high-quality care for their infants and toddlers

required to prioritize the enrollment of families experiencing homelessness, and it is unclear what their collective policies are with respect to serving homeless families. In 2018, several new data elements were added to the MIECHV performance reporting measures to require programs to report on the number of adults experiencing homelessness that they serve. The first reports generated from these data are anticipated in early 2019. It is unclear that standardized training is offered to programs in how to use the McKinney-Vento definition to determine homeless status. Given this lack of consistency, coupled with the fact that home visiting data vary substantially across evidence-based models, there are currently no national data exploring the efficacy of home visiting in the lives of infants and toddlers experiencing homelessness. This lack of data also suggests that there has been no rigorous study of the potential benefits of these evidence-based models for families experiencing homelessness either.

Part C Early Intervention Services

IDEA Part C offers funds to states to deliver comprehensive early intervention services for infants and toddlers with disabilities. These services may be particularly beneficial to families experiencing homelessness because studies continue to show that children experiencing homelessness are at an increased risk for developmental delay (Brumley, Fantuzzo, Perlman, & Zager, 2015). Any state receiving Part C funding is required to prioritize children experiencing homelessness by ensuring that they are identified and evaluated for services (U.S. Department of Education, n.d.), however, there is no information on the extent to which this provision is implemented or whether states are actively reaching out to identify homeless families. Furthermore, Part C allows states flexibility to include children who are at risk under the definition of disability, although this is not true for Part B services for preschool aged children (Curran-Groome & Atkinson, 2017). Therefore, states may choose to include children experiencing homelessness using the McKinney-Vento definition under this at-risk category in order to provide comprehensive Part C services in shelters and anywhere homeless families may reside and follow them as they relocate and until the child is 3 years old.

Unfortunately, much like the other programs referenced in this article, very little is known about how many of the children and families experiencing homelessness are served by Part C. In fact, only 6% of programs link their Part C data with housing data (Derrington, Spiker, Hebbeler, & Diefendorf, 2013). This means that there is very limited information on homelessness and infants and toddlers with disabilities. Further, because of the authority states have to design their early intervention system and establish eligibility criteria for Part C services, states vary in the extent to which they partner with housing providers and ultimately identify and engage homeless families.

Child Care Subsidy

Parents continue to struggle with finding high-quality child care for their infants and toddlers. This fact may be particularly true for parents experiencing homelessness because there is wide variation in local eligibility criteria for subsidized care and financial assistance. The Child Care and Development Block Grant Act (reauthorized in 2014) included accommodations to support the enrollment of young children experiencing homelessness into the child care subsidy system. States were directed to use the McKinney-Vento education definition to determine eligibility for these accommodations. Although policy changes have been made, states (and sometimes local communities) have the authority to determine which accommodations will be implemented to decrease barriers to access for homeless families, and there are limited data on the extent to which families experiencing homelessness are actually accessing child care subsidy dollars. Because this policy change occurred fairly recently, the child care subsidy system is just beginning to adjust state data systems to collect data on homelessness (Shaw et al., in press).

The Administration for Children and Families released training on how to appropriately gather information about family homelessness and to determine eligibility using the McKinney-Vento education definition in 2018, and states and communities are beginning to ensure that subsidy staff, contracted agencies such as child care resource and referral agencies, child care providers, and others are receiving that training (see Box 2). As with MIECHV above, data will begin to become available in the coming years. Therefore, given how recently the legislation was passed, and the time it takes to implement new policies and data platforms, accurate information is not yet available to know how many children and families are able to access child care subsidies through CCDF.

Where to Go From Here?

Although very young children are one of the most vulnerable segments of the population, an accurate picture of just how prevalent homelessness is for infants and toddlers and their families—and researchers' understanding of how families experiencing homelessness are engaged through and actually

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use early childhood services for infants and toddlers—is limited. The lack of information is due, in part, to the fact that very young children experiencing homelessness remain essentially invisible within both the adult and child services worlds. Without access to reliable, quality data, even the basic task of describing the scope of infant-toddler homelessness becomes difficult. Differences in the definition of homelessness also limit the ability to link and draw comparisons across data sources (Shaw et al., in press). Therefore, early childhood programs should pay careful attention to the ways in which they collect data on family homelessness—not only at program entry to determine eligibility and available accommodations but throughout each family's involvement with services. Housing and homeless service providers should be informed on the use of the broader definition of homelessness in early childhood programs to determine eligibility to ensure that families obtain priority access or other special accommodations because of their being homeless.

In 2016, HHS, HUD, and DoEd released a joint policy statement urging state and local early childhood, housing, and homeless providers, as well as policymakers, to come together to

increase their focus on, and better address the needs of, young children experiencing homelessness (HHS, HUD, & DoEd, 2016). The joint policy statement recommended strengthening partnerships between housing and early care and education programs, home visiting programs, and early intervention services to better support the developmental needs of young children and to achieve stability for their families.

Yet, findings from several reports have indicated that families experiencing homelessness still face numerous challenges and barriers in accessing early childhood services, particularly for infants and toddlers (Perlman, Shaw, Kieffer, Whitney, & Bires, 2017). These families are not equitably accessing early care and education services (Administration for Children and Families, 2017) nor are they equitably accessing essential services, such as nutrition services through the Women, Infants, and Children program, to meet their most basic needs (Burt, Khadduri, & Gubits, 2016).

As a result, there is not yet an adequate understanding of the ways in which these services may benefit families with infants and toddlers experiencing homelessness. For example, in one study, 63% of a sample of 199 housing programs from across the country reported that they support families with enrolling in EHS, and 40% of these providers reported having a formal relationship with an EHS program (Shaw, 2018). With respect to CCDF, although there is some evidence suggesting that many housing programs are aware of and support enrollment in child care subsidy programs (Shaw, 2018), little is known about the extent of use of subsidies by homeless families who may be referred for subsidies and whether they are actually able to access financial assistance for child care and maintain

enrollment in child care over time. The absence of data on the use of child care subsidies presents a missed opportunity to capture data from early childhood systems on infants and toddlers experiencing homelessness which, as previously described, is particularly important for children under 3 years old because early childhood systems are the only opportunity to capture data both on children defined as experiencing homelessness under HUD's definition as well as on those who are highly mobile or living doubled up and captured using the McKinney-Vento education definition.

Finally, although there is robust evidence exploring the effects of early childhood services including early care and education, home visiting, and early intervention on children's development, especially for children at risk, very little is known about whether children experiencing homelessness benefit from these programs. In particular, very little is known about how mobility affects efficacy, access, attendance, and participation:

Homelessness and high mobility are associated with higher risks than poverty alone. Findings strongly suggest that the goal of closing the achievement gaps observed for children

in the United States is going to require explicit attention to homelessness and high mobility and that strategies that work for stable children may prove inappropriate or insufficient for mobile children as mobility itself poses challenges for interventions or policies aimed at addressing the issues of these children and families (Masten, 2014, p. 111).

Therefore, more evidence is needed to explore both trends in the use of these

programs as well as the benefits of these programs specific to the needs of infants and toddlers facing homelessness and whether they will need to be tailored to address mobility and other conditions that co-occur with homelessness. Researchers should consider the strengths of these programs, as well as ways in which these programs might be able to improve to better serve families facing housing instability and create an evidence base for use of models with special populations.

To this end, investigations are needed to explore whether changes in early childhood policies, performance standards and regulatory guidance for programs such as Head Start, MIECHV, IDEA Part C, and CCDF are removing barriers to equitable access and increasing the enrollment and ongoing participation of young children experiencing homelessness in early childhood programs and services, especially those highlighted above and others, such as Women, Infants, and Children, which are intended to serve high-risk populations. Finally, further study is needed to explore the implementation of early childhood policies, how implementation varies across states, and whether further guidance can ensure implementation even when dealing with the challenge of homelessness.

It is important to continue to develop a research agenda focused on understanding the scope of the problem, the complexity of needs, and the effectiveness of services and interventions intended exclusively for infants, toddlers, and their families experiencing homelessness. Doing so would help to inform the field of promising practices around supporting the engagement of infants, toddlers, and their families into early childhood services and, perhaps, the prevention of homelessness and its deleterious effects on this vulnerable population. In addition, this information may be used to advocate for children experiencing homelessness and ensure that they have access to the early childhood services they are entitled to and need.

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programs that can strengthen their partnerships with one another and with housing and homeless service providers to better support vulnerable infants, toddlers, and their families experiencing homelessness.

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