Best Practices in Early Care and Education for Young Children Experiencing Homelessness

Prepared for Building Early Links for Learning (BELL)
by
William Curran-Groome
Research & Evaluation Group
Public Health Management Corporation
Philadelphia, PA

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Executive Summary

In late 2016, the U.S. Departments of Health and Human Services (HHS), Housing and Urban Development (HUD), and Education (ED) published a joint policy statement concerning the needs of young children experiencing and at risk of homelessness and their families.[5] The statement summarizes the large and growing body of evidence quantifying the negative impacts homelessness and unstable housing have on young children's development, and suggests potential strategies for better serving these children and their families.

Building on this and other recent work relating to young children experiencing homelessness, this report explores organizations', municipalities', and states' practices and policies for addressing the educational and related needs of young children experiencing homelessness and their families. This paper also considers the scope of early childhood homelessness in Philadelphia, and the landscape of existing housing and educational services available to young children experiencing homelessness, with the goal of providing organizational leaders, advocates, and policymakers in Philadelphia and across the Commonwealth with new approaches to better serve the needs of some of our most disadvantaged children and their families.

Interviews and a review of the literature highlighted many promising and novel strategies. At the organizational level, providers discussed the importance of memoranda of understanding (MOUs) and strong interpersonal relationships between staff to creating long-lasting collaborations and productive cross-training sessions. At the systems level, policies for prioritizing homeless children for services featured prominently; interviewees also discussed the importance of hiring dedicated staff to facilitate integration and to ensure that children and their families receive comprehensive supports and can make smooth transitions between programs. At the municipal level, cities are pioneering integrated referral and tracking systems and are conducting outreach and education around homelessness to underidentified populations, while working with relevant staff to increase identification rates. At the state level, the Office of Child Development and Early Learning (OCDEL) has numerous avenues through which it can better connect young children experiencing homelessness to high-quality early care and education (ECE), including modifying guidelines for Child Care and Development Fund (CCDF) subsidies to prioritize and better serve children experiencing homelessness; and revising eligibility criteria for Individuals with Disabilities Education Act (IDEA) services to make children experiencing homelessness categorically eligible. Examples from Oregon, which has created regional hubs to integrate services relevant to homeless families with young children, and

Massachusetts, which has emphasized building formal and personal relationships between ECE and homeless-serving organizations and staff, may also inform future state-level work in Pennsylvania.

Although federal legislation, funding requirements, and regulation create much of the framework for state- and local-level work relating to early childhood homelessness, there exist significant opportunities for homeless-serving and ECE organizations in Philadelphia, the School District of Philadelphia (SDP) and the City of Philadelphia government, state agencies, and the Pennsylvania legislature to institute new policies and develop and expand new programs in order to better serve young children experiencing homelessness.

Introduction

An estimated 318,000 children spent time in a shelter in the U.S. in 2013; approximately 49% (156,000) were five years old or younger.[6] The total population of homeless children, which also includes many other groups of unhoused or unstably housed children, is much larger. These children are at risk for a number of adverse long-term outcomes, including higher rates of physical, behavioral, and mental health diagnoses and poorer educational outcomes in comparison to their stably housed peers.[7] Research indicates that early brain development sets the stage for lifelong learning: positive and stimulating interactions and environments can increase children's likelihoods of healthy cognitive and social emotional development,[8] whereas repeated negative experiences and a sustained, unsupportive environment—"toxic stress"—can lead to developmental delays and physical health issues.[9] High-quality early care and education (ECE) fosters supportive and responsive relationships between trained adults and young children, which can prevent or reverse the negative effects of toxic stress.[9] Furthermore, high-quality ECE has been demonstrated to improve children's cognitive, social-emotional, and behavioral health outcomes,[10] and as such could serve a particularly important role in buffering young children from the risks associated with homelessness.

Accompanying services provided by ECE programs (e.g., mental and physical health screenings and referrals to social services), both for children and their parents, may additionally help to support homeless children's development and speed homeless families' transitions into more stable housing. While federal, state, and municipal laws and regulations, as well as many individual program-level policies and practices, strive to ensure that children experiencing homelessness are placed in high-quality ECE programs, these children and their families continue to face significant barriers. From identifying available programs to transporting children to classes and care, homeless families are confronted with a unique set of challenges stemming from their unstable living situations and compounded by related issues, such as deep poverty, limited support networks, and low levels of education.

This landscape analysis: (1) provides an overview of federal legislation and regulation and their implications for the provision of ECE to young children experiencing homelessness; (2) explores best practices from other states, comparing and contrasting them with current approaches in Pennsylvania; and (3) draws on smaller systems strategies (i.e., municipal and organizational) to help identify where and how Philadelphia can improve the short- and long-term outcomes of young children experiencing homelessness.

Defining Homelessness

Homelessness continues to be defined and addressed differently across systems. The McKinney-Vento Act, which covers the educational rights of students and their families, provides a broadly encompassing definition that reflects the well-quantified negative outcomes associated with living in doubled-up situations and motels and hotels by including these populations in its definition of "homeless".[11] HUD, which is the primary funder for emergency and transitional housing services throughout the country, offers a definition inclusive of those who are in the shelter system or are unsheltered, with limited provisions for those living in hotels and motels and for those who are doubled up. The HUD definition is acutely lacking in regard to homeless children and youth in Philadelphia; approximately 46% (n=1,922) of enrolled homeless students (as counted by McKinney-Vento programs) lived in doubled-up conditions during the 2015 school year, although many of these children and youth would not be considered homeless by HUD.

McKinney-Vento Definition[1]

Children and youth 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; are abandoned in hospitals; or are awaiting foster care placement;
- 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; or
- Are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings.

Further disparities exist in the measurement of homeless populations: HUD uses a point-in-time approach, which counts the number of individuals who meet its criteria for homelessness on a single night in January. This count does not accurately reflect the transitional nature of homelessness, given that many individuals and families transition in and out of homelessness over the course of a year. McKinney-Vento programs aggregate numbers over the course of the school year, counting any child or youth who experienced homelessness for any duration of time toward their annual numbers. This methodology better reflects the often-cyclical patterns of homelessness, and results in numbers that better gauge the number of children and youth who have been—and likely still are—impacted from being unstably housed, as opposed to only those who are currently homeless.

Federal Legislation and Programming

Existing legislation at the federal level underlies state and local approaches to addressing education for children experiencing homelessness. In many cases, federal policy establishes baselines for the states in terms of how they identify, guarantee the basic rights of, and provide required services to children experiencing homelessness. Other federal programs provide supplementary funding to help states better serve these children. This section describes the major federal programs impacting state approaches to serving homeless children, and discusses some of the gaps inherent to or as yet unaddressed by these programs.

The **McKinney-Vento Homeless Assistance Improvements Act of 2001** (McKinney-Vento) provides the most comprehensive federal policy pertaining to the educational rights of and practices for serving children and youth experiencing homelessness. McKinney-Vento mandates that states: provide equal access for children and youth experiencing homelessness to all public education provided by the state educational authority (SEA), including preschool education; revise policies that may create barriers for children and youth experiencing homelessness (e.g., residency requirements, immunization records, etc.); and do not separate children and youth experiencing homelessness from the mainstream school environment based on their homeless status. McKinney-Vento allocates funding to each SEA, which is then responsible for sub-granting between one-half to three-quarters (at a minimum) of its McKinney-Vento funding to local education authorities (LEAs). Funding supports a state-level homeless coordinator responsible for furthering McKinney-Vento directives and expanding enrollment, retention, and achievement of children and youth experiencing homelessness in public education systems; and local homelessness liaisons, who are responsible for identifying children and youth experiencing homelessness and connecting them to relevant service providers in order to facilitate their enrollment and success in school.

While McKinney-Vento makes great strides toward both defining the educational rights of homeless children and youth and implementing those rights in practice, the legislation was created with K-12 education in mind. At its core, McKinney-Vento establishes that a child experiencing homelessness is eligible for all the same services as are that child's stably housed peers. For public K-12 education, which is compulsory and universally available, this means that all children and youth experiencing homelessness must be enrolled, since all their stably housed

peers are enrolled. However, for ECE, where many programs are privately funded and there are often limited seats available, children experiencing homelessness are only guaranteed enrollment if there are 1) LEA-administered programs in their original LEA—where they resided prior to becoming homeless—or LEA of residence, and 2) those programs have seats available. As is frequently true elsewhere, high demand and limited funding mean that homeless children in Philadelphia may have to wait to enroll until a seat becomes available.

Early Head Start and Head Start (EHS/HS) are federally funded, high-quality ECE programs that serve children birth to age five from low-income families. EHS/HS offer comprehensive, community-based educational, health, and family well-being services to over 37,000 children in Pennsylvania.[12] As of the passing of the Improving Head Start for School Readiness Act of 2007, children experiencing homelessness are automatically eligible for EHS/HS services, even if those children do not meet EHS/HS income requirements.[13] EHS/HS programs prioritize children experiencing homelessness for enrollment, and may (although they are not required to) reserve up to three percent of their vacant seats for children experiencing homelessness. To facilitate enrollment and attendance, EHS/HS providers must allow children experiencing homelessness to enroll and attend for up to 90 days without required documentation, such as immunization records. Additionally, EHS/HS grantees must coordinate with their McKinney-Vento LEA homelessness liaison, as well as other community organizations such as emergency housing providers, facilitating identification and enrollment of eligible children (see "Promising Organizational Practices" for more on these partnerships).[14, 15] The effectiveness of the EHS/HS models in serving children experiencing homelessness and their families is derived from their multi-pronged services—education, health, and social—and evidenced by their numbers: in 2012-2013, HS served over 45,000 families experiencing homelessness across the U.S., and helped more than a third of these families find stable housing.[16]

Title I of the Elementary and Secondary Education Act (ESEA) provides federal funding to SEAs, who in turn sub-grant that funding to LEAs, in order to ensure that disadvantaged children have an equal opportunity to succeed in school and meet challenging educational standards. Title I funding supports two types of assistance at the school level: targeted assistance programs, which serve individual children identified as at-risk for failing, are provided at schools where less than 40 percent of the school population is low-income; and school-wide programs, which work to improve curricula, facilities, and programmatic offerings to benefit all students at the school, and are provided at schools where 40 percent or more of the student body is low-income. Title I specifically defines children experiencing homelessness as eligible for funding, irrespective of other indicators of academic risk, and allows LEAs to set aside additional funding

to serve homeless students and combat their heightened risks for failing in school. This eligibility also applies to young children experiencing homelessness in the context of Title I-funded preschools.[1][17]

Every Student Succeeds Act (ESSA)[3, 4]

ESSA amends the McKinney-Vento act as of July 1, 2016; and amends Title I Part A of the Elementary and Secondary Education Act after the 2016-2017 academic year. The amendments to Title IA entail new reporting requirements for state report cards, and establish that all LEAs receiving Title IA funding must reserve funds to support homeless students, including salaries for local liaisons and transportation costs associated with maintaining children and youth experiencing homelessness at their schools of origin. The most significant amendment to McKinney-Vento is the addition of "preschool" to the definition of school of origin, whereby LEAs are now required to provide transportation for homeless preschoolers to the preschool they attended while stably housed. This is critical because transportation is often the greatest barrier to care, and because the mandate for transportation applies even if the LEA does not provide transportation to stably housed preschoolers.

Title I allows schools to either provide preschool services themselves, or to support eligible students at existing preschools not administered by the LEA, such as EHS/HS providers. If an LEA so chooses, it may operate a district-wide preschool program that serves eligible students from some or all Title I school attendance areas. Because LEAs often do not have sufficient funding to serve all eligible children, they may determine which eligible children to prioritize for slots; the School District of Philadelphia could choose to prioritize homeless children for ECE slots, and could use homelessness set-aside funding to increase the per-slot funding. In addition or alternately, these set-aside funds can be used to provide add-on, education-related services.[18]

The **Individuals with Disabilities Education Act (IDEA)** comprises four Parts, of which two—Parts B and C—are relevant to our discussion of young children experiencing homelessness. IDEA Part C covers the educational and related rights of children ages birth through two years old, while IDEA Part B covers children ages three through 21. The premise of IDEA is to ensure children and youth with disabilities have the same opportunities to succeed in their education as do individuals without a disability. This is accomplished via identification, tracking, evaluation, and support of children with suspected or diagnosed

[1] Title I defines "preschool" as the educational time period before which children become age-eligible for public elementary school; the definition is not limited to three- and four-year-olds.

developmental delays. Children eligible for services under IDEA may receive: “specialized instruction; academic or behavioral support; vocational education; related services, such as transportation, physical therapy, psychological services, social work services, and counseling; medical services for diagnostic or evaluation purposes; parent counseling and training; recreation; and other support services, if students need them to benefit from a special education program.” Furthermore, these services and supports may be provided in a variety of settings, including at an ECE program and in a shelter or other transitional housing facility.[19]

While IDEA does not currently cover all homeless children and youth, research suggests children and youth experiencing homelessness are significantly more likely to have developmental delays;[20] one study estimated approximately 20 percent of homeless children ages birth through four in New York City met criteria for the Early Intervention Program, compared to roughly eight percent of age-eligible children overall.[21] Given the prevalence of developmental delays among children experiencing homelessness, and given the scope of eligible services and the latitude provided LEAs in their use of IDEA funding, there are significant opportunities for collaboration and supplementation between homeless support services and IDEA services. Partnerships between homeless-serving agencies and LEAs could draw on multiple funding sources, including McKinney-Vento sub-grants, Title I funding, and IDEA funding, to provide more comprehensive services to children experiencing homelessness and their families. Furthermore, these services need not be strictly educational; funding may be used to provide social services, health screenings, and transportation, which may not be covered under other programs that subsidize ECE (e.g., Child Care Development Fund). LEA homelessness liaisons funded under McKinney-Vento are paid to coordinate services for children experiencing homelessness, and could facilitate the process of connecting such children to comprehensive services funded by McKinney-Vento, Title I, and IDEA.

State Approaches

State-level policymaking and implementation of federal programs offer additional opportunities to enhance outcomes for children experiencing homelessness. These opportunities include interpretation and regulation relating to Child Care and Development Fund (CCDF) and IDEA Part B and C monies; Race to the Top – Early Learning Challenge (RTT – ELC) grants; and strategic use of McKinney-Vento funds (both for state-level initiatives and via targeted sub-granting to school districts). This section will describe the current landscape in Pennsylvania and draw on innovative practices in other states to inform next steps at the state level.

Pennsylvania's **Education for Children and Youth Experiencing Homelessness (ECYEH) Program** is a state-level program dedicated to implementing McKinney-Vento directives. The Commonwealth is subdivided into eight regions, each with a regional coordinator, who in turn works with local coordinators to provide McKinney-Vento outreach and technical assistance services to LEAs and to connect children and youth experiencing homelessness to additional resources and supports. ECYEH is also responsible for aggregating and reporting data on children and youth experiencing homelessness from each of the eight regions.[2]

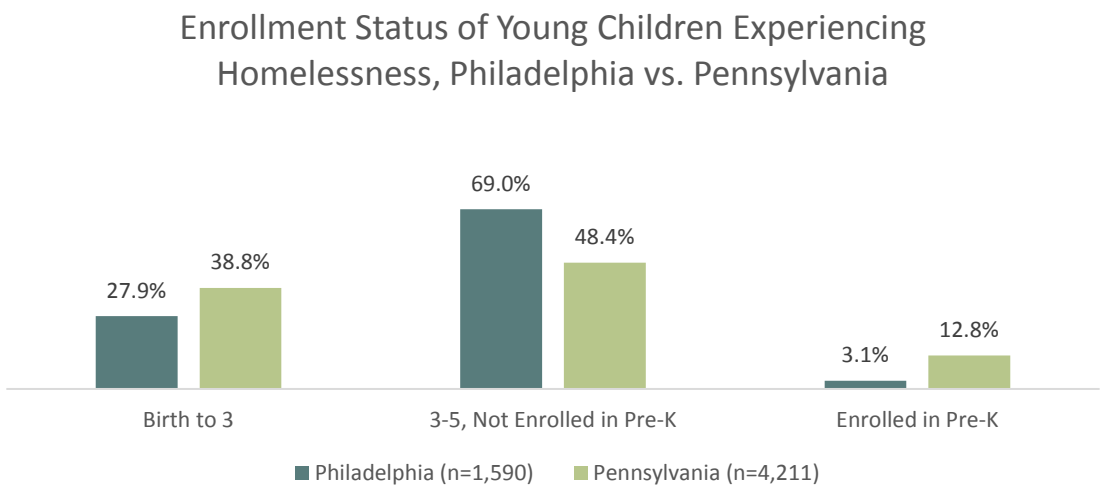
According to the 2014-2015 statewide ECYEH report,[22] there were 26,273 children and youth reported as homeless in Pennsylvania during the 2014-2015 school year, of whom 22,014 were enrolled in school. Enrolled students experiencing homelessness accounted for approximately one percent of the Pennsylvania public school population.

Of these homeless students, 4,211 were age four or younger, and were identified as either enrolled in pre-kindergarten[3] (n=539, 12.8%), ages 3-5 and not enrolled in pre-kindergarten (n=2,039, 48.4%), or birth to age 3 (n=1,633, 38.8%). Philadelphia, which functions as its own ECYEH reporting region, had an under-five population of 1,590 children (37.8% of the statewide population under five). Of these, 49 (3.1%) were enrolled in pre-kindergarten, 1,097 (69.0%) were children ages 3 to 5 and not enrolled in pre-kindergarten, and 444 (27.9%) were ages birth to 3. Compared to the state as a whole, Philadelphia has proportionally more children ages 3-5 who are not enrolled in pre-K, fewer who are enrolled in pre-K, and fewer who are birth to age 3 (Figure 1).[22]

[2] An interview with Alfred Quarles, Jr., the regional coordinator for Philadelphia's ECYEH program, informed the content of this and other sections.

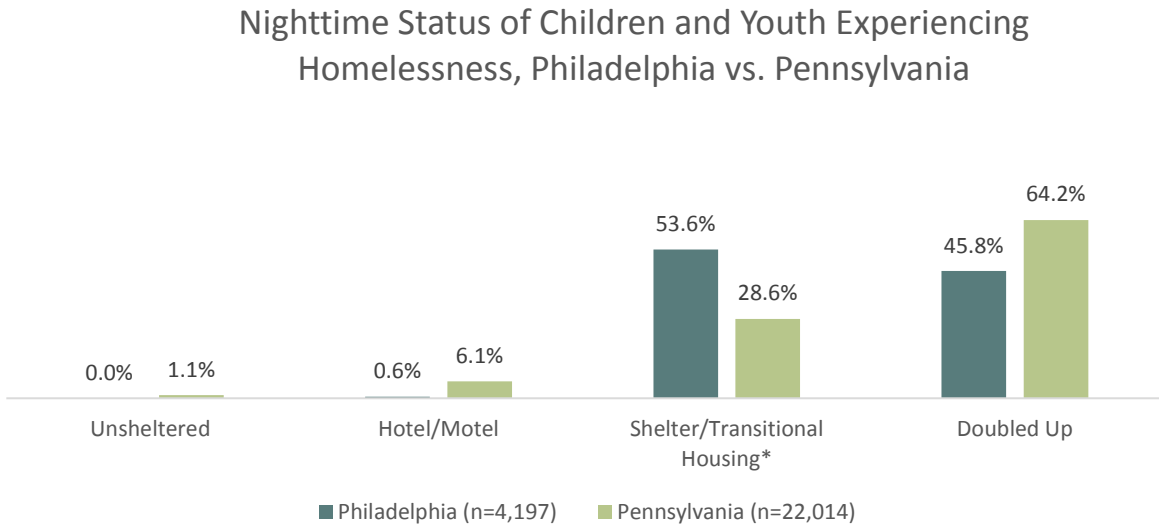
[3] The pre-kindergarten population includes only those children ages 3-5.

Figure 1.



Although nighttime status is only reported for enrolled students, data may serve as a proxy to infer where the majority of ECE-aged children sleep. In Pennsylvania as a whole, 1,353 (6.1%) sleep in a hotel/motel, 232 (1.1%) are unsheltered, 6,302 (28.6%) sleep in a shelter/transitional facility or are awaiting foster care placement, and 14,127 (64.2%) are doubled up. In contrast, in Philadelphia 26 (.6%) students were sleeping in a hotel/motel, one (0.0%) was unsheltered, 2,249 (53.6%) were in a shelter/transitional facility or were awaiting foster care placement, and 1,921 (45.8%) were doubled up (Figure 2).[4]

Figure 2.



[4] The report notes that Philadelphia has been working in recent years to improve its ability to identify students who are doubled up; prior emphasis was on identifying shelter and transitional housing populations.

In Philadelphia, 228 students received non-specified (i.e., not McKinney-Vento or Title I) district funding to attend early childhood programs. Most regions blended funding from two or more sources (broken down as McKinney-Vento, Title I, and other) to support homeless students in attending early childhood programs. Region 7 (Northeastern Pennsylvania), which serves far fewer children/youth experiencing homelessness than does Philadelphia, provided early childhood program funding to a greater number of students; Regions 4-6 (Southwest including Allegheny, Northwest, and Northcentral, respectively) provided funding to proportionately more children to attend early childhood programs.[22]

The prevalence of student homelessness by age/grade (Figure 3) clearly illustrates how young children experiencing homelessness are seriously underserved by educational programming in Philadelphia. There are more than twice as many children who are age-eligible for Pre-K than there are for any other age/grade category; less than one twentieth of age-eligible children experiencing homelessness are enrolled in Pre-K in Philadelphia (49 of 1,146).

Figure 3.[5]

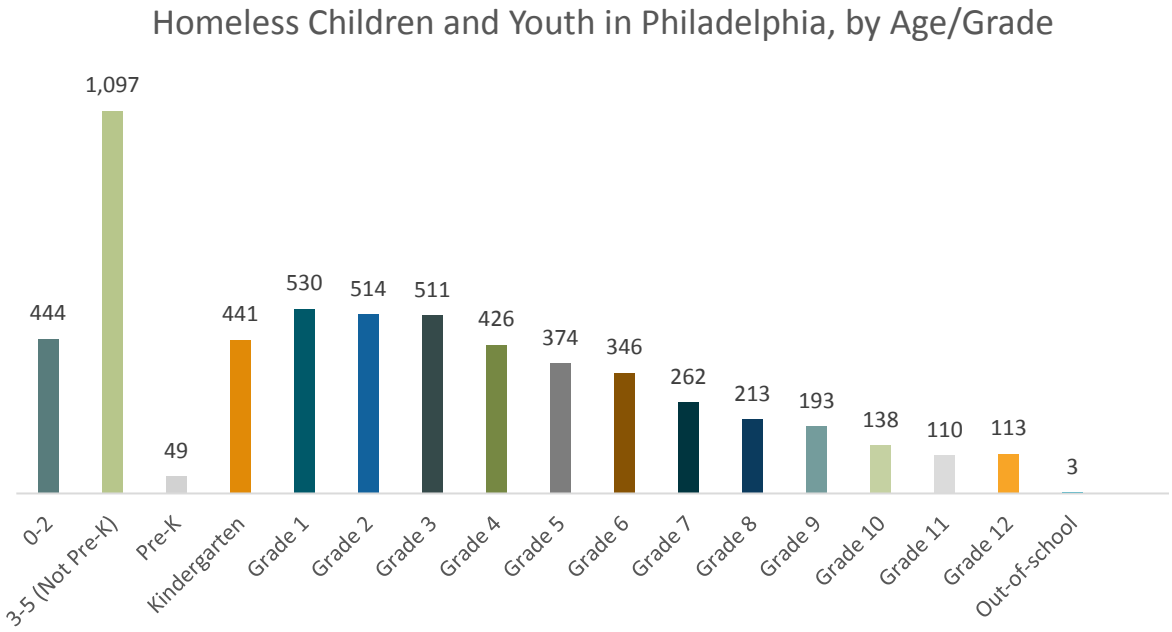


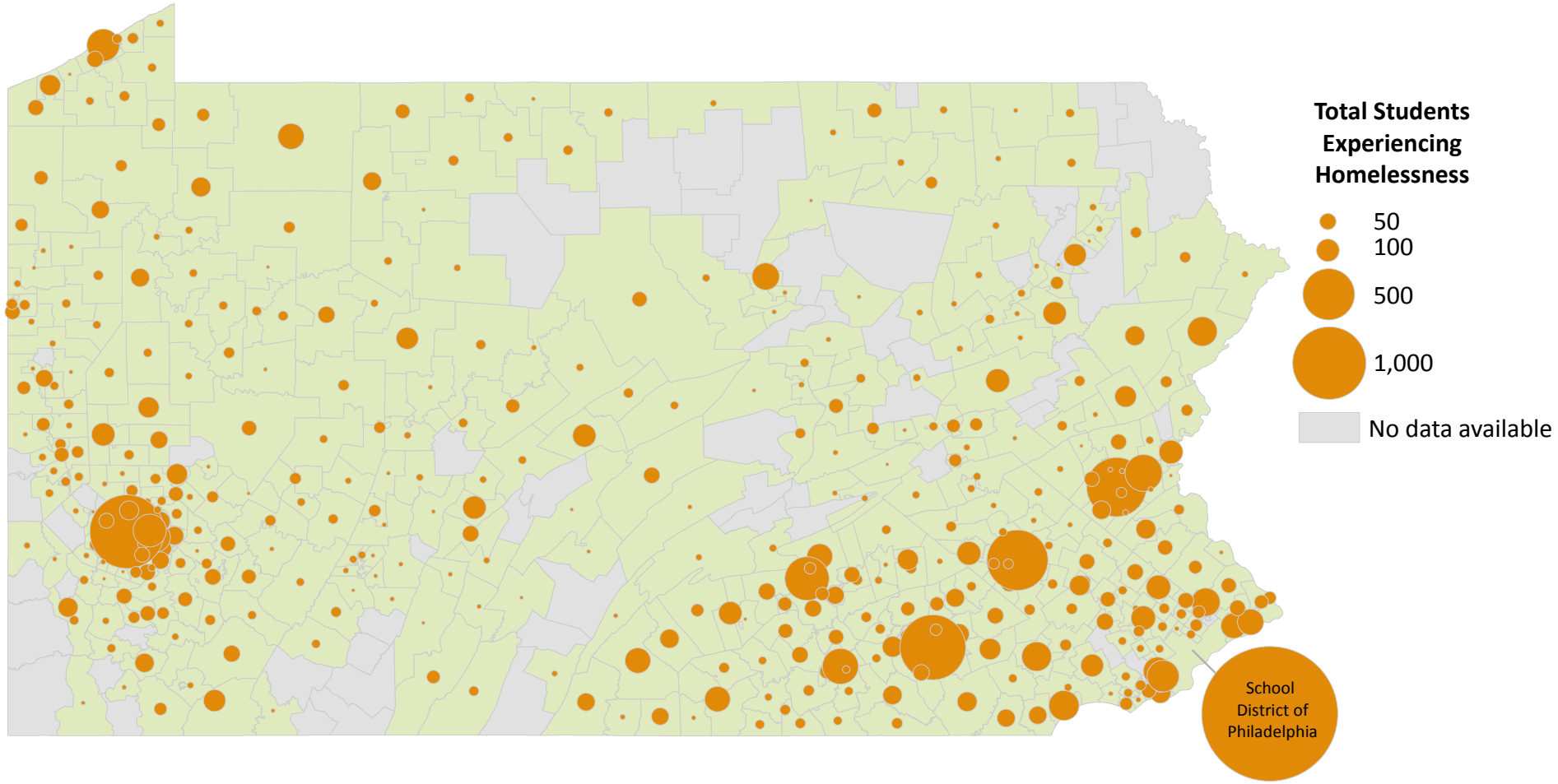
Figure 4 illustrates the distribution of homeless students, by LEA, across the Commonwealth; the School District of Philadelphia's homeless student population (n=3,832) is more than four times greater than

[5] Only students enrolled in LEA-operated preschool programs are included in the "Pre-K" category in Figure 3; children counted under the "3-5 (Not Pre-K)" category may be enrolled in non-LEA preschool programs. This footnote was added after the initial publication of this brief to clarify how the ECYEH program counts young children identified as homeless.

the homeless student population of the next most prevalent LEA (Pittsburgh School District; n=891). Figure 5 represents the same data, but as a percent of the total student population in each LEA. By this measure Philadelphia is not such an outlier, suggesting that the magnitude of Philadelphia's homeless student population is a result of the City's size.

Figure 4.

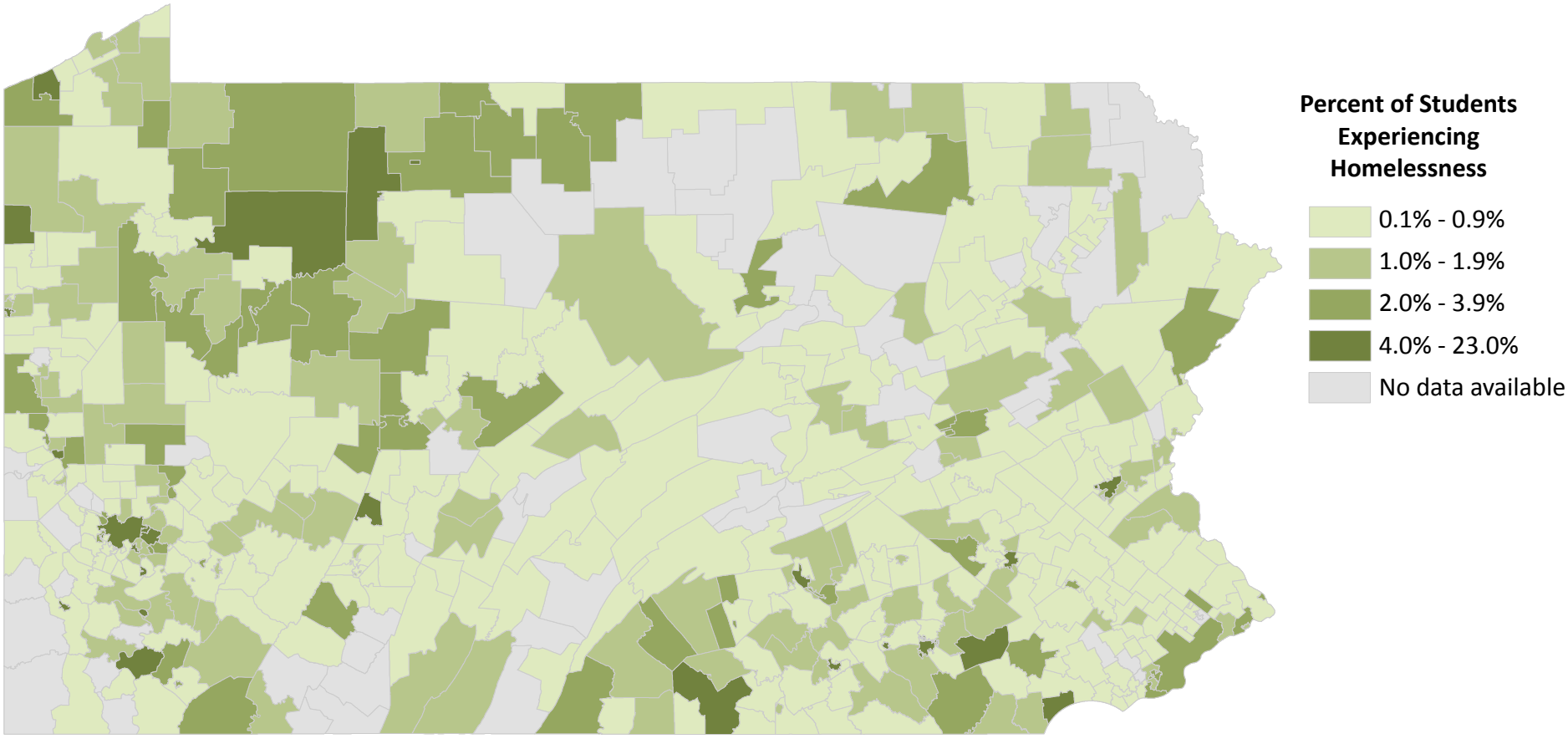
Students Experiencing Homelessness in Pennsylvania, by Local Educational Authority, SY 2014-15[2]



Note: Some LEAs in Pennsylvania did not report on homeless student enrollment for SY 14-15; data for LEAs reporting homeless student counts below three were suppressed to protect student privacy. LEAs that did not report, or whose reporting values were suppressed, are represented in grey. Homeless student data includes LEA-funded preschool students as well as K-12.

Figure 5.

Percent of Students Experiencing Homelessness in Pennsylvania, by Local Educational Authority, SY 2014-15[2, 3]



Note: Some LEAs in Pennsylvania did not report on homeless student enrollment for SY 14-15; data for LEAs reporting homeless student counts below three were suppressed to protect student privacy. LEAs that did not report, or whose reporting values were suppressed, are represented in grey. Homeless student data includes LEA-funded preschool students as well as K-12.

The **Child Care and Development Fund (CCDF)** is a federal-state allocation that subsidizes child care for low-income parents who are working or attend training/education. In 2015, Pennsylvania's CCDF allocation was $188 million.[23] While CCDF funding comes with some use restrictions—for example, funds can only be used to support children under the age of 13, or those under the age of 19 with a disability—states retain significant flexibility in how they allocate CCDF funding. Per Pennsylvania's 2016-2018 CCDF State Plan,[24] the Commonwealth does not take advantage of six identified policies that would remove barriers to and facilitate enrollment of young children experiencing homelessness: 1) homeless status automatically confers eligibility for child care subsidy; 2) homeless families without countable income are not required to make copayments; 3) providers are reimbursed at higher rates for offering care during non-traditional hours; 4) providers are reimbursed at higher rates for serving students identified as homeless; 5) housing search activities are allowable for purposes of program eligibility; and 6) job search activities are allowable for purposes of program eligibility. Pennsylvania does implement two practices supportive of young children experiencing homelessness: 1) young children experiencing homelessness are prioritized for enrollment; and 2) for children enrolled in Head Start, eligibility redetermination for subsidized child care does not occur until the end of the Head Start program year.[6] However, CCDF plans may be modified at the State's discretion at any point in time, leaving open the option for improvements prior to the next CCDF plan for fiscal years 2019-2021.

An IDEA for the State Legislature

In Minnesota, homeless advocates have identified and collaborated with supportive state legislators to propose legislation that would entitle all homeless infants and toddlers to early intervention services, irrespective of whether they had an identified developmental delay. To date, this legislation has been unsuccessful due to two primary concerns: 1) additional costs, which were estimated at $10 million per year; and 2) a perception that providing children without delays with IDEA services would be stigmatizing. However, given the well-established risks facing many homeless children; the impacts of these risks on homeless children's short- and long-term outcomes; and the benefits of preventive interventions, both in terms of children's well-being and in terms of lifetime cost savings, these concerns are unfortunately short-sighted.

[6] This section was revised after the initial publication of this brief to address inaccuracies relating to Pennsylvania's CCDF policies.

At the state level, forward-thinking interpretation of the **Individuals with Disabilities Education Act (IDEA) Part C** could significantly expand the positive impact of the legislation for children experiencing homelessness. Part C allows states to include "at-risk" infants and toddlers under the definition of "infant or toddler with a disability."[26] Were Pennsylvania to adopt this definition, infants and toddlers experiencing homelessness would be entitled to comprehensive early intervention services; IDEA Part B does not provide states this flexibility for children ages three and up. Pennsylvania has already made some headway in this area: in 2014, OCDEL added infants and toddlers experiencing homelessness as an eligible category for at-risk tracking.[27] As such, homeless infants and toddlers who are referred for a developmental delay screening or evaluation are tracked until they reach age three; tracking involves regular screenings to ensure that the homeless infant or toddler does not develop a delay over time. This approach increases the likelihood that these infants and toddlers, should they develop developmental delays, will more quickly be identified, evaluated, and connected to support services. However, OCDEL could build on this approach by providing all early intervention services to infants and toddlers experiencing homelessness, rather than limiting services to tracking.[7]

Race to the Top—Early Learning Challenge grants fund states' efforts to increase low-income and disadvantaged students' enrollment in high-quality ECE programming; and build unified systems for delivering high-quality ECE programs and services. While Pennsylvania was awarded an RTT—ELC grant in 2013, the State has not significantly focused on children and youth experiencing homelessness as a priority sub-population within the broader categories of disadvantaged and/or low-income children and youth.[28] Nonetheless, the experience and progress of other states as they have used their RTT-ELC awards can inform Pennsylvania's future work and illustrate best practices that can be implemented at local and municipal levels. The Administration for Children and Families (ACF) cites two states, Massachusetts and Oregon, as models for strategies to better serve young children experiencing homelessness.[14]

Massachusetts's RTT–ELC efforts are concentrated around a handful of core approaches, including: 1) data sharing between state agencies to better understand where and how families experiencing homelessness utilize state resources and programming; 2) providing technical assistance to employees at homeless-serving organizations to build knowledge around early childhood development and promote use of developmental screens; 3) increasing service

[7] An interview with Ryan Strack, District Liaison for Homeless and Highly Mobile Students with Minneapolis Public Schools, informed the content of this and other sections.

providers' knowledge of and familiarity with ECE programs available to families experiencing homelessness; and 4) building personal linkages between providers serving families experiencing homelessness and ECE providers. Oregon took a different approach, and is using its award to fund regional hubs responsible for coordinating comprehensive resources and supports for families with at-risk children (including children experiencing homelessness) in order to overcome the fragmentation and disconnect that individuals often face when attempting to access individual supports and resources on their own.

Pennsylvania could adopt similar strategies, including better integrating state and local databases on homelessness, health, and education for children experiencing homelessness and their families; and formalizing support for or mandating cross-systems communication and collaboration between ECE providers and homeless support services, akin to the mandate already in place at the federal level that requires EHS/HS programs to work with their local McKinney-Vento liaisons.

Promising Organizational Practices

Despite the clear identification of barriers preventing children experiencing homelessness from attending ECE programs, and the efforts at federal, state, and local levels to address these barriers, the available literature is too limited to identify or quantify approaches that constitute "best practice." Nonetheless, the following section outlines promising and novel approaches at the municipal and organizational levels, including referral systems, blended funding streams, inter-organizational partnerships, technical assistance programs, improvements to shelters' physical environments and client support processes, and staff positions dedicated to assisting families experiencing homelessness.

Perhaps one of the most intuitive approaches to addressing this issue is to co-locate ECE services in transitional housing facilities. In New York City, one large family shelter has adopted this model: the shelter provides on-site pre-K and ECE services that are open both to shelter residents and to members of the broader community. In this manner, services are immediately accessible to children in the shelter, but if children and their families move out of the shelter, they can maintain continuity of care and continue to receive services at the shelter.[29] This model may well be replicable in Philadelphia, especially as the city looks to introduce new ECE providers into the system to meet enrollment goals for its new Pre-K program, PHLpreK. However, shelter-based programs can face unique challenges, including the stigma attached to shelters, low levels of parent engagement, and a high turnover rate due to the flux in families' living situations;[30] such issues may be inherent to serving families experiencing homelessness.

Another novel practice entails establishing partnerships between ECE providers and local shelters to assess and improve shelter practices and environments in relation to serving young children. In Connecticut, this initiative has been pioneered by the Connecticut Head Start Collaboration Office, which is mandated, per the Head Start Act of 2007, to coordinate with the state McKinney-Vento program and with other homeless-serving institutions; the Collaboration Office's mandate to facilitate cross-systems collaboration makes it an ideal institution to coordinate the assessment process as well as other activities between ECE and emergency housing (EH) providers. The Collaboration Office has funded three cohorts of grantees to

support them in conducting joint self-assessments: Head Start (HS) staff visit a shelter and work on-site to complete a self-assessment tool that considers a number of child-related metrics, including the shelter's workforce qualifications, programming, funding, tracking and evaluation, and policies on young children and families. HS and shelter staff then develop action plans to address problem areas, and receive mini-grants to make improvements. Oftentimes, the first post-assessment actions are around improving health and safety standards, such as making sure windows are safe for young children. Other often-overlooked features include child nutrition and eating schedules (i.e., more frequently than three times a day), and age-appropriate toys and books for young children. Furthermore, the grants provide an opportunity for staff to build cross-systems relationships, facilitating future planning and collaboration, such as bi-directional referrals. HS staff also has an opportunity to learn more about what shelters look like and how they operate, and begins to become acquainted with the funding streams, policies, etc., that influence shelters' day-to-day work.[16] While the assessment process in Connecticut has been funded by the Head Start Collaboration Office, the Department of Housing and Urban Development (HUD) provides technical assistance funding to shelters, and shelters may request technical assistance funding to implement the assessment process.[8]

Another model out of Connecticut is that of the ECE advocate, an inter-systems coordinating role funded by the Connecticut Office of Early Childhood. The Thames Valley Council for Community Action (TVCCA), a county-wide social services agency, employs an ECE advocate who collaborates with shelters and transitional housing providers to help identify ECE-aged children and to facilitate their enrollment in high-quality programs. This process entails a sit-down between the advocate and the family, wherein they develop a "Family Partnership" that outlines goals for the family (e.g., jobs, transportation, health care) and for the child. The advocate provides a referral to an appropriate ECE provider—most often an EHS/HS provider—and works with the family in a supportive role until the child is enrolled and the family begins to receive social services from an EHS/HS Family Services staff person. The ECE advocate also works with shelters to help them refine their practices and physical environments to better meet the needs of young children in their care: she holds weekly meetings with individual emergency housing provider staff, and convenes a monthly meeting with representatives from each of the shelters involved in the initiative. This builds on the progress achieved when TVCCA

[8] An interview with Marsha Basloe and Grace Whitney, Senior Advisor for Early Childhood Development and Education at the Administration for Children and Families and Director of the Connecticut Head Start State Collaboration, respectively, informed the content of this and other sections.

and each of its partner emergency housing providers participated in the self-assessment process mentioned above. TVCCA emphasized that a significant part of the process was building and maintaining relationships with partner organizations; the ECE advocate slowly becomes more trusted over time, although staff turnover at shelters can partially reset this process.[9]

In Anchorage, AK, the school district has used its Title I funding to develop a standardized referral system, in concert with local HS programs, to facilitate the process of connecting children identified as experiencing homelessness with high-quality ECE services.[31] If such a system were web-based, referrals could easily be coordinated with homeless-serving organizations, and it could automate and expedite referrals to the school district or directly to ECE providers. Furthermore, such a system could support other social services providers (e.g., emergency food services) in referring clients to care, and need not be exclusive to children experiencing homelessness.

Columbus, OH, takes a different approach, using its Title I funds to support an ECE advocate and a parent consultant at local shelters. "The early childhood advocate ensures that young children experiencing homelessness are screened for developmental disabilities and connected with early childhood programs. The parent consultant works to encourage parents to become more involved in their children's early education and care."[31] This two-generation model addresses children's immediate needs (screenings and referrals) while also focusing on building parenting skills and parental involvement, which have been demonstrated to have greater impacts on some child outcomes than do features of ECE, such as quality and quantity of care.[10] While coordination of developmental screenings is valuable, Title I funds need not be used for screenings/evaluations themselves—any family may request a screening or evaluation per IDEA requirements, and infants and toddlers experiencing homelessness in Pennsylvania who are referred for an initial evaluation are guaranteed tracking and follow-up screenings through age two. Furthermore, once tracking is initiated for an infant or toddler experiencing homelessness, that child is entitled to tracking through age two even if s/he becomes stably housed.

New York City worked to expand homeless children's participation in ECE via a targeted outreach campaign. Prior to the start of the 2014-2015 school year, the Department of Homeless Services and the Education Department collaborated to call over 2,700 homeless

[9] An interview with Mary Guertin, Director of Head Start/Early Head Start at Thames Valley Council for Community Action, informed the content of this and other sections.

families to inform them about available universal pre-K programs and the process to enroll their children. Applications among children in transitional housing increased significantly—from one-third of eligible four-year-olds in 2014 to more than one-half in 2015.[32] Although this approach does not remove structural barriers to enrollment and retention, New York's experience reinforces the value of traditional recruitment methods.

A Look at Vogel Alcove [10]

Vogel Alcove is a comprehensive education and social services agency dedicated to serving children experiencing homelessness and their families. Based out of Dallas, TX, the Alcove's 70-person staff concentrates on providing child care and case management (among other auxiliary services) to children and families who live in emergency or domestic violence shelters or other transitional housing programs. The Alcove has a $6 million annual budget comprising funding from EHS/HS, CCDF, United Way, and private philanthropy, including individuals, foundations, and major fundraising events.

Through a network of partnerships/affiliations with over 20 local homeless-serving organizations, Vogel Alcove receives referrals for ECE slots and social services. The Alcove uses the Dallas Continuum of Care (CoC)[11] as a forum for working with homeless-serving organizations; the Alcove previously formalized partnerships using MOUs, but has moved away from this approach due to difficulties coordinating with case managers at shelters. Emergency housing staff's familiarity with the Alcove ensures that the organization receives more referrals than it can accommodate. The ECE program at the Alcove is accredited by the National Association for the Education of Young Children (NAEYC), and has a highly qualified teaching staff: pre-K teachers all have at least a BA, while infant/toddler teachers have at least a CDA, and most hold an AA or BA. The program receives funding from a variety of sources, including EHS/HS (as a contractor to Greater Dallas Head Start); the Dallas Independent School District (all preschoolers are dually enrolled in the city's pre-K program, for which homelessness provides automatic eligibility); pass-through money from the state; CCDF funds; [12] and private donations. Students are eligible for ECE services if they are living in transitional housing,

10 An interview with Karen Hughes, President/CEO of Vogel Alcove, informed the content of this and other sections. Interviews were requested with three other ECE providers focused on serving children experiencing homelessness, but no responses were received.

11 Continuums of Care are local or regional entities that coordinate homeless services and funding between organizations within their jurisdiction.

12 Although some of Vogel Alcove's clients are eligible for CCDF, the majority do not qualify: they are looking for housing, which is not an eligible activity under Texas' CCDF program.

although students who become more stably housed while enrolled at Vogel Alcove can continue to attend until they enter kindergarten.

While the Alcove does not provide transportation services to clients, some transitional housing providers drive or bus children and families to the Alcove each morning; other clients take public transit (the Alcove assists with bus tokens), walk (there is a "stroller garage" where parents can store their strollers during the day), or drive themselves. The Alcove provides services from 7am-6pm, Monday through Friday, to accommodate parents' schedules; during holidays and over the summer, the Alcove hosts programs and camps, including those for school-age children.

In order to provide comprehensive developmental services that are responsive to the unique needs of homeless children and parents, Vogel Alcove offers or embeds a number of additional supports on top of its ECE offerings, including:

- Developmental screenings (using the Devereux Early Childhood Assessment) [13] and, when required, speech, physical, and occupational therapy provided by staff clinicians;
- The Parent Education Program, which equips parents with information about child development processes and effective parenting techniques;
- Employment counseling and support for parents who are seeking jobs;
- Health services, such as well-child check-ups, immunizations, medical treatment and referrals, vision and hearing screenings via weekly site visits from a local hospital's mobile outreach program, and dental care via a similar arrangement;
- Breakfast, lunch, and afternoon snack provided with USDA funding;
- A social-emotional learning lab, separate from the standard classrooms, with a dedicated staff person;
- A trauma-informed curriculum/educational approach called "Conscious Discipline"; [14] and
- A resource room of donated goods, including clothing and baby formula.

[13] http://www.centerforresilientchildren.org/home/assessments-resources/
[14] https://consciousdiscipline.com/

While these wrap-around services work to address the multi-dimensional needs of children experiencing homelessness and their families, the Alcove still struggles to help its clients permanently escape the often cyclical nature of homelessness. Many clients who do find employment and transition out of supportive housing quickly find themselves thrown back into homelessness because they lack support networks and other resources to weather crises. As such, Vogel Alcove is in the process of further developing its two-generation programming, and hopes to create a career center and work-study program for parents and offer stipended positions with the Alcove's ECE program.

Conclusion

The prevalence of homelessness among young children in Philadelphia is significant: during 2014-2015 there were 1,590 identified children under age five in Philadelphia who experienced homelessness. The actual number is likely much greater—homelessness is difficult to identify, particularly for children who have yet to enter the public school system. The School District of Philadelphia (SDP) provided unspecified funding to support 228 of these children in attending early childhood programs, and EHS/HS programs based in Philadelphia reported serving 310 children and families experiencing homelessness—some of whom may have overlapped with the 228 SDP reported serving.[33] It is unclear whether the more than 1,000 young children experiencing homelessness not served by these sources received any formal care and education (some may have been eligible for CCDF subsidies), but it is clear that many of these children and their families are not receiving optimal care, education, and related services.

High-quality ECE can actively promote positive social-emotional, physical, and cognitive growth in all young children; for those experiencing homelessness, high-quality ECE may also serve as buffer against myriad associated negative outcomes. Furthermore, ECE programs can serve as a resource hub for young children experiencing homelessness and their parents to obtain services that may not normally be provided to their stably housed counterparts, including benefits enrollment, supplementary academic and social-emotional support, and job training, among others. As is evident from the experiences of other programs, municipalities, and states, there are many additional approaches available to Philadelphia's network of ECE and homeless service providers, the City of Philadelphia, and state legislators to better meet the needs of young children experiencing homelessness and their families.

Improving identification is one of the first steps to better serving this population. Many identification processes are institution-based: EHS/HS identify homelessness during the intake process; [15] public schools are encouraged to ask school-age children who are identified as homeless if they have siblings who have not yet entered the school system; and shelters report homelessness to municipal funders, McKinney-Vento programs, and/or the school district. Non-EHS/HS ECE providers do not have a standardized process for identifying and reporting

[15] An interview with Abigail McMahon, Intake Program Manager at the School District of Philadelphia's Office of Early Childhood Education, informed the content of this and other sections.

homelessness; the 2014-2015 PA ECYEH Evaluation Report details the successes of promoting awareness of homelessness among these providers, and increasing their capacities to report this information. Further ensuring that ECE providers are screening their children and families, reporting children identified as experiencing homelessness, and connecting these children to services, will continue to improve child and family outcomes. However, an over-reliance on institutional identification inevitably is limited in its ability to capture unenrolled ECE-aged homeless children who are living doubled-up or in other non-institutional environments. Furthermore, doubled-up children often experience a degree of housing instability greater than that experienced by those in the transitional housing system, and are also likely less well-connected to a broader network of services. Increased publicity around homelessness and its many manifestations has helped, both in Philadelphia and nationally, to increase identification of doubled-up youth in recent years; expanded funding will speed this process. Outreach activities in high-prevalence geographies and at high-traffic destinations—e.g., food pantries/soup kitchens, beauty parlors, barber shops, substance use treatment programs, and laundromats—may also help to better capture under-identified and underreported sub-populations of homeless families. Other avenues for identifying non-shelter homeless children could include conducting follow-up screening calls with families who apply for housing support at Apple Tree Family Center (the centralized intake location for emergency housing in Philadelphia) but do not enter emergency housing; and working with agencies involved in providing support to families at risk of eviction or who have recently been evicted, as this population may quickly transition into homelessness.

The next step is to make sure that comprehensive systems are in place to connect identified homeless children and their families to appropriate community resources. New York City's phone campaign to inform homeless families about free pre-K programs, and the subsequent jump in enrollment, points to the importance of ensuring homeless families know about, and are reminded of, available services. However, while information about programs is important, it alone is insufficient. Follow-up contact, assistance with application and enrollment, and warm hand-offs to contacts at ECE providers may help to increase enrollment and retention in and utilization of services. In the context of ECE, this process must also include auxiliary services that support retention in care, such as coordinated transportation. Prior to recent McKinney-Vento amendments included in ESSA, SDP was not required to provide transportation to ECE-aged homeless children; with the addition of "preschool" to the school of origin definition, young children experiencing homelessness will now be entitled to transportation. SDP plans to

use special education bussing to meet this new requirement, along with free public transit passes. However, ECE-aged children require a chaperone to take public transit, which may represent a significant barrier for some families. Ensuring that children are connected to the nearest high-quality provider will continue to be important to minimizing the impact of transportation barriers. For some, home visiting programs may make more sense, at least for the short-term, so that children are not enrolled in a program before shortly moving to a different area.

SDP has worked to ensure that identified families are connected to resources in part by developing active relationships with shelters. SDP officials with the district's HS programs receive referrals throughout the course of the year, and also coordinate annual on-site registration drives to encourage shelter residents to enroll in SDP's HS programs. The HS infrastructure then works to provide and connect children and families to supplementary services. SDP could expand this approach by identifying a point of contact for each family shelter to ensure all age-eligible children are referred into the program, and to facilitate registration events. A formal, web-based referral system could also help to facilitate this interaction between organizations; the McKinney-Vento office could both fund and oversee the development and administration of this system.

In the context of serving young children experiencing homelessness, the educational aspects of high-quality ECE are complemented by the capacity (or potential capacity) of such programs to both provide and connect students to non-educational supports; for parents, an ECE provider may also provide first-line or supplementary social services. The EHS/HS model is the best large-scale example of how ECE centers can serve as hubs for integrated services. On a smaller scale, Vogel Alcove (which receives Head Start funding) takes this premise and expands on core EHS/HS services—for example, developmental screens evolve into on-site speech, physical, and occupational therapy from clinical staff. Replicating this model may not be feasible given that the Alcove relies heavily on philanthropy. However, developing mutually beneficial partnerships with other community organizations may help to provide supplementary services; Philadelphia providers have a host of medical schools and hospitals with which to collaborate. Braiding funding is another important strategy: EHS/HS may fund core services, and supplementation with Title I, McKinney-Vento, and IDEA funding can help to build out programs and provide additional services. For non-EHS/HS providers, Philadelphia's PHLpreK program may be a good alternative source of funding to serve at-risk students.

At the municipal level, SDP's McKinney-Vento office can continue to build relationships and awareness of ECE programs among homeless services providers—and vice versa. These connections may also prove conducive to improving shelter practices and environments to meet the developmental needs of young children (akin to the HS/shelter partnerships pioneered in Connecticut). The McKinney-Vento office could also work to create and implement uniform procedures and forms for applying to ECE programs, including those that are not directly run by SDP. Finally, SDP could adapt its allocation of Title I funding to prioritize serving preschool-aged children experiencing homelessness, either via a district-administered preschool program, or by supporting children at existing high-quality, public providers.

At the state level, there is even more latitude for implementing innovative changes to the institutions that affect young children experiencing homelessness. A homeless-centered interpretation of CCDF could significantly re-orient ECE programs, from changing funding incentives to encourage providers to identify and serve homeless students, to defining the housing search process as an eligible activity for subsidized enrollment. Adapting IDEA criteria to include homelessness as a category of eligibility for comprehensive services could transform available resources for infants and toddlers, providing them with flexible and significantly expanded supports; this funding could also be used to pay for some or all of their ECE-related costs. Furthermore, IDEA funding can be used to support parents, which could help to speed families' transition into more stable housing and support resiliency once there.

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Appendices

The forms below were provided by individuals and organizations who were interviewed for or collaborated on writing this report. They serve as examples of how some providers have worked to systematize processes relating to services for young children experiencing homelessness. The Early Childhood Self-Assessment Tool for Family Shelters, produced by the Office of the Deputy Assistant Secretary for Early Childhood Development, is another valuable resource; the tool may be found online here.

Head Start Developmental Questionnaire

1. Do you have children under the age of five?

No Yes

If yes, names and date of birth:

_____

_____

_____

_____

2. Is child currently enrolled in?

Birth to Three No Yes

Preschool No Yes

Day Care No Yes

Other (describe): No Yes

_____

_____

3. Do you have concerns about your child's development?

No Yes

If yes, please state your concerns:_____

_____

_____

4. Would you like us to refer you to our Educational Liaisons?

No Yes

5. Contact information and address:_____

Memorandum of Understanding
[Early Care and Education Provider]
And
[Emergency Housing Provider]

This Memorandum of Understanding (this "Agreement") is between [Early Care and Education Provider] and [Emergency Housing Provider].

I. PURPOSE

The goals of this Memorandum of Understanding (MOU) are to establish collaborative working relationships in order to:

- Continue to conduct outreach to enroll children experiencing homelessness into Head Start, Early Head Start or other high quality childhood programs, specifically those provided by [Early Care and Education Provider]; and
- Work with families living in [Emergency Housing Provider] to provide resources and activities to help their children become school ready; and
- Recruit and enroll children three to five years of age into [Early Care and Education Provider] or another high quality program in Philadelphia County.

II. SCOPE OF AGREEMENT

[Early Care and Education Provider] and [Emergency Housing Provider] desire to foster greater communication and understanding of each entity's individual mission, resulting in better advocacy around early childhood education and development issues and creating a climate and condition in the emergency housing environment that is conducive to supporting the health and wellbeing of young children. These activities will be accomplished, at a minimum, via the following means:

[Emergency Housing Provider] will:

- Provide or arrange for a private area where the Head Start Shelter Case Coordinator(HSSCC) can meet with families.
- Provide a point person who will effectively communicate with the HSSCC.
- Provide a release of information between Head Start and the Shelter in order to receive relevant information on the family.
- Provide the opportunity for the HSSCC to meet weekly with the family/child.
- Notify the HSSCC of any changes within the family.
- Work collaboratively with and make referrals to the HSSCC any families with children three to five years of age.

[Early Care and Education Provider] will:

- Provide a point person (HSSCC) who will be responsible for effectively communicating and working collaboratively with the shelter point person;

- Provide a Head Start release of information to effectively have the Head Start program work with the family;
- Provide resources to the families on the early childhood community;
- Provide enrollment information from Head Start to qualified families;
- Provide weekly activities that help align the school readiness goals to recruited children; and
- The HSSCC will be on site a minimum of one day a week.

III. LIAISONS:

Both parties agree to have specifically named liaisons at all times. These representatives of the parties will be the first contact regarding questions and problems that might arise during the implementation and operation of the agreement.

Organization name: [Early Care and Education Provider]	*Organization name: [Emergency Housing Provider]*
Contact person:	*Contact person:*
Title:	*Title:*
Street address:	*Street address:*
City, state, zip:	*City, state, zip:*
Phone:	*Phone:*
Fax:	*Fax:*
E-mail address:	*E-mail address:*

IV. TERM OF AGREEMENT:

The agreement will begin on XX/XX/XX and end on XX/XX/XX

V. ACCEPTANCE AND APPROVALS

[Early Care and Education Provider]	*[Emergency Housing Provider]*
Name and Signature of Head Start Director Date	Name and Signature of Authorized Signatory Date

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