Overcoming Educational Disadvantage: Shelter Initiatives for Homeless Children

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This project addresses the challenges confronting children living in Massachusetts homeless shelters, with particular attention to these youths’ education as well as the services that family shelters provide to support their academic achievement. With 1.35 million homeless children living in the United States each year (“How Many People Experience Homelessness?”, 2009), it is imperative that this population receives a quality education. Homelessness can result in academic disadvantage for many children, who benefit from a strong collaboration between the school system and a well-equipped shelter to meet their unique educational needs. This qualitative study involved interviews with ten shelter employees across Massachusetts. Analysis of the data indicated that the areas of greatest concern are the quality of parental involvement with the child, securing before and after school care, and accessing transportation. Many of the respondents noted that the availability of funding and staffing determined the shelters’ ability to adequately address these concerns. Policy-makers interested in resource allocation, homelessness advocates, and those who can offer volunteer services could utilize these findings.

INTRODUCTION

The United States faces homelessness on an epidemic scale, as nearly 650,000 individuals are homeless on any given day (“Snapshot of Homelessness”, 2011). Homelessness proves difficult to quantify, but according to the National Law Center on Homelessness and Poverty, 3.5 million homeless individuals live in the United States each year, 1.35 million of whom are children (“How Many People Experience Homelessness?”, 2009). These are children like “Katie,” a young student who struggles with severe asthma, particularly during the cold winter months. “Katie” usually takes the bus to school, but the shelter she resides in currently is not quite distant enough from her new school for a bus to transport her. Now she walks to school each day, and her asthma has gotten worse.

Children of homeless families are a particularly vulnerable population and face numerous hardships such as hunger, mental and physical health ailments, and difficulty accessing consistent, quality education. Educational discrimination puts homeless youth at a significant disadvantage, since they are often unable

1 “Katie” is a child living at an urban central Massachusetts family shelter where I conducted a research interview.
to access the education offered to other children, due to lack of transportation, inability to access immunizations and other medical services, and the lack of opportunity concerning school selection (National Center on Family Homelessness, 2010). Homeless children are 35% more likely to repeat a grade and are 78% more likely to have poorer school attendance than non-homeless youth (“McKinney-Vento Homeless”, 2010).

A homeless child is “an individual who lack[s] a fixed, regular, and adequate nighttime residence”; this includes children living in motels, camp grounds, cars, public places, and shelters, youth awaiting foster care placements, and some migrant children (“McKinney-Vento Definition of ‘Homeless’, n.d.). Individuals lose their homes due to a variety of factors. Through loss of employment, eviction from their residence, or having significant medical expenses, parents, and consequently, their children, can experience homelessness. Recessions, a lack of available jobs or housing (Dillon, 2009), the onset of and lack of affordable care for a mental or physical illness, and domestic violence (Hernandez Jozefowicz-Simbeni, & Israel, 2006), all act as agents of homelessness as well. Poverty may also generate homelessness, especially for youth, who comprise 40% of all poverty-stricken individuals (“Causes of Homelessness, n.d.). The following sections will address the challenges, legislation, and family shelter efforts pertaining to homeless children, their daily struggles, and their education.

**Physical, mental, and emotional health.** Homelessness proves to have severely adverse effects on children's health conditions since basic medical and nutritional needs are generally left unmet for children without housing (Julianelle, 2007). Developmental delays, especially in young children, can occur as a result of living in an insufficiently stimulating environment (Hernandez Jozefowicz-Simbeni & Israel, 2006). According to a landmark 1987 Boston-based study, of the eighty-one sheltered children five years of age and younger tested with the Denver Developmental Screening Test, 47% had one or more developmental delays, 33% had at least two, and 14% had four. Delayed areas occurred in language development, social skills, and fine and gross motor skills (Bassuk & Rubin, 1987).

Mental health and emotional issues among homeless children are also of great concern. The chaotic and generally stressful environment characteristic of shelter life does not provide ideal living conditions, especially for youth (Bassuk & Rubin, 1987). Homeless youth are more at-risk for developing aggressive and antisocial behavior and are more inclined to abuse illegal substances, all of which are a cause for concern both in and out of the classroom (Hernandez Jozefowicz-Simbeni & Israel, 2006). Emotional anxiety as a manifestation of distress is certainly prevalent among homeless youth and can often stem from experiencing or witnessing violence (Darden, 2009), from vulnerability to the loss and change of schools or friends, or from other events considered stressful for young individuals (Hernandez Jozefowicz-Simbeni & Israel, 2006). Homeless youth also experience considerably lower levels of self-esteem stemming in part from their homeless status and the associated negative stereotypes as perceived by themselves or others (Hernandez Jozefowicz-Simbeni & Israel, 2006).

**Quality of Parenting.** Lack of parental involvement is a major contribution to homeless children's everyday and educational challenges (Dupper & Halter, 1994). Homeless parents, who are most often single mothers, are likely to experience their own emotional and physical health problems, substance abuse issues, and high stress levels. Furthermore, homeless parents are less likely than their non-homeless counterparts to be able to afford medical services (Hernandez Jozefowicz-Simbeni & Israel, 2006). Parents may not be invested in their children's education because of pressing survival needs, and may not send their children to school unless otherwise mandated (Dupper & Halter, 1994). It should also be noted that many parents of homeless children are themselves undereducated. According to a study concerning homeless shelters in New York City, 62% of homeless parents had not completed high school, and 60% of these parents lacked any form of work experience. If parents' skills in literacy and math are limited, reading and understanding their children's important school forms becomes difficult (Da Costa Nuñez, 2000).

**Academic Issues.** According to research conducted through the Metropolitan Housing and Communities Center (n.d.), homeless students have lower standardized test grades in reading, spelling, and math than do their non-homeless counterparts. Shelters can be noisy and chaotic with limited study areas for homework, and often the families of homeless students are unable to afford the proper supplies required for educational success (Cunningham, Harwood, & Hall, 2010) such as school fees related to field trips, textbooks, and extracurricular activities (Dworsky, 2008).

When the simple act of getting to school becomes a critical problem as well, it cannot be expected that homeless youth will be able to make the most out of their education. Although federal legislation mandates that homeless students may remain in the school in which they were formerly enrolled, homeless shelters at times encourage parents to re-enroll their children in a school closer to the shelter, especially if transportation services are limited (Dworsky, 2008). Since homeless students are likely to bounce from one school to another, schools and
shelters face difficulty in providing adequate transportation (Dupper & Halter, 1994).

The McKinney-Vento Homeless Assistance Act. Federal legislation has been passed to confront the obstacles homeless children face when trying to secure an education. The McKinney-Vento Homeless Assistance Act is the revised legislation of the Stewart B. McKinney Homeless Assistance Act implemented in 1987 that addressed some of these educational barriers. In the 1990s, the Act was revised to include preschool-age children and stressed the importance of public programs and cooperation at the community level. Finally in 2001, the McKinney-Vento Homeless Assistance Act became recognized as a portion of the No Child Left Behind Act of 2001 (Hernandez Jozeowicz-Simbeni & Israel, 2006).

The most basic mandate of the McKinney-Vento Act states that each homeless child “has equal access to the same free, appropriate public education, including preschool education, as provided to other children and youth” (Cunningham, Harwood, & Hall, 2010, p. 6). States are required to identify the homeless students in their school systems and must work to remove educational barriers as well as expand the potential for academic achievement among homeless youth (Cunningham, Harwood, & Hall, 2010). The Act stipulates that all homeless students possess the right to continue attending and receiving transportation from the school in which they were originally enrolled. Schools are prohibited from engaging in any measures that would segregate homeless students from non-homeless students, whether through the implementation of separate schools or programs or by stigmatizing the housing situation of homeless children by neglecting confidentiality (Darden, 2009). Once a child has been identified by a school system as homeless, the rights of the student must also be privately discussed with his or her parent or guardian (Dworsky, 2008).

Homeless Shelters’ Efforts. Homeless shelters can take helpful measures to counteract some of the educational hurdles that homeless students are likely to encounter. A 1994 Illinois-based study addressed the educational obstacles specific to homeless youth in shelters from the viewpoints of homeless shelter directors and educators in the public school system. They found that the most significant hindrances to education for homeless children were parents’ non-involvement with their children’s education, difficulties in securing transportation to school, and insufficient clothing (Dupper & Halter, 1994).

Although only a small number of homeless shelters have implemented additional education-related programs for homeless youth, these services have proven their effectiveness, as demonstrated in a 2008 research study concerning Chicago homeless shelters and their educational services. School attendance and grades were not regularly tracked by shelter staff, but children were recognized and praised for their academic accomplishments. Some staff members took an additional step by ensuring that the older children were ready for school in the morning if their parents needed to be at work during early hours. Many shelters, while they intended to provide after school services, including tutoring and recreational programs, actually lacked these programs. Even though outside study services and recreational activities were offered, shelter staff generally did not encourage parents to take advantage of these programs. Many shelters also lacked services promoting early childhood education enrollment. By not clarifying that homeless parents are legally permitted to enroll young children in preschool programs regardless of deadlines and documentation, shelters were unintentionally discouraging their residents from this process (Dworsky, 2008).

Research indicates that shelter services related to education are indeed effective if they are implemented and utilized. In a review of the educational attainment of homeless youth in California, children who lived in shelters were less likely to be expelled, suspended, or receive detentions than homeless youth living in public or outdoor areas (Julianelle, 2007). Since merely living in a shelter resulted in positive outcomes for homeless youths’ education, extra services that shelters offer are likely to produce even greater academic success.

Despite the seriousness of childhood homelessness, however, in some areas of the country no formal research has been conducted regarding these children's educational concerns (Hicks-Colickr, Burnside-Eaton, & Peters, 2003). Therefore, the purpose of this research study is to determine the daily and academic challenges that children living in homeless shelters are confronted with and to explore the efforts in addressing these issues in Massachusetts.

METHODOLOGY

In order to gain a more comprehensive understanding about the daily and academic challenges that confront homeless children living in shelters, to discern which programs related to educational advancement for homeless youth are being offered in these shelters, and to assess the quality of these services, I gathered information from shelter employees involved in some way with homeless children and their struggle to meet educational goals. Speaking with shelter staff seemed the most appropriate information-gathering avenue, since they can offer not only objectivity and factual information but also personal perspectives regarding shelter programs.
Using internet shelter directories from the mass.gov and National Coalition for the Homeless websites as my sampling frame, I collected data from ten family shelters throughout Massachusetts. I sought geographical variety and purposely selected a convenient sample that included urban and suburban shelters located in the western, central, and eastern regions of Massachusetts. After initially contacting each shelter to determine that at least one staff individual was interested in participating, I conducted interviews with each participant from May to July of 2011. Each interview lasted between 30 – 60 minutes, and each participant was interviewed once at the shelter in which she worked. Questions consisted of specific inquiries regarding the shelter and the participant (for example, the number of residents under the age of eighteen, the children’s duration of homelessness, and the participant’s position in the shelter). Other questions pertained to general issues that children encounter when living in a shelter such as:

What do you think are some of the challenges that homeless children face?

Check all that apply.
Lack of transportation/access to community services  _____
Inadequate clothing  _____
Physical/medical concerns  _____
Lack of health insurance  _____
Developmental delays  _____
Emotional issues (internalizing behaviors)  _____
Behavioral issues (externalizing behaviors)  _____
Other: _________________________________________  

Some questions focused on homeless children’s educational challenges, and others inquired about the programs and services that the shelters offer in an attempt to address educational outcomes such as:

Which services related to academic achievement does this shelter provide for its child residents?

Check all that apply.
Before school care  _____
After school care  _____
School attendance support  _____
Mentoring  _____
Tutoring  _____
Transportation  _____
Provision of school supplies  _____
Provision of clothing  _____
Other: _________________________________________  

Questions also addressed the participants’ opinions about the effectiveness of these programs, the obstacles the shelter faces in providing educational assistance, and possible improvements that could be made to these programs. Examples include:

Which services provide the best educational services to child residents? What makes them so effective?

What are some improvements that could be made to the services this shelter offers?

**FINDINGS**

**Demographics.** A total of ten individuals each employed at ten different shelters throughout Massachusetts initially consented to an interview. At the time of the interviews, however, additional staff at the shelters also elected to participate and provided supplementary information. As many as three shelter staff individuals were present at the time of each interview. Participants’ length of employment at their respective shelters ranged from two weeks to twenty-two years, and their positions of employment included case workers, case managers, family advocates, and directors, among others.

Each participant answered questions regarding the shelters themselves as well as some demographic information concerning the children presently in residence. Six of the ten shelters operated in urban environments, and two of these six were considered domestic violence shelters; generally, victims of domestic abuse flee to distant shelters in order to better ensure asylum from their abuser’s potential harm. The remaining four shelters operated in suburban areas. Participants indicated that their shelters housed families with children of all ages, ranging from newborns to eighteen-year-olds. Children in residence consisted of no more than twenty-one and no fewer than four children at any given time.

**Problems.** Participants indicated that the most significant everyday and academic challenges that confronted homeless children included issues relating to parenting; behavior, emotional well-being, and social adjustment; and transportation. Participants also described types of shelter services that complemented the schools’ efforts to improve the education of children in residence including after school care, school attendance support, and the provision of school supplies, among others.

Parenting. Perhaps the most pervasive issue and most damaging factor to the well-being of the children in residence, however, was the poor quality of their caregivers’ parenting. “We [shelter
staff] basically are their parents,” remarked one participant. With nine out of the ten participants expanding upon issues related to parenting at least once within the scope of the first four questions of the interview, it became obvious that poor parenting had clear implications for the children’s well-being. At the time of the interviews, many parents were unable to establish routines or manage time, and their knowledge of proper nutrition was lacking. Parents often had not completed high school, thus making it difficult for them to assist their children with homework, particularly since many of the parents also experienced some level of a language barrier. Additionally, participants indicated that patterns of substance abuse and parents’ own mental health issues related to depression, bipolar disorder, and anger impaired their ability to interact positively with their children.

It should be noted, however, that many of these issues result from parents’ own stressors as well as the lack of quality parenting role models that these individuals had in their own lives as children. The “parents come from a horrific background, and that transfers to the children,” stated one participant. Poverty inhibits many of these adults who have often experienced trauma, and feel overwhelmed with trying to find jobs, meet welfare requirements, and simply survive. Many are single mothers, and some are adolescents themselves with more than one child in their care. Additionally, many parents feel they lack control in decision-making when in shelter, seeing as they and their children often are forced to adapt to new home and school environments. Such concerns place a tremendous amount of pressure on homeless parents.

Children’s Challenges. The chief concern of many of the participants included the children’s behavior, emotional well-being, and social adjustment. For the purposes of this study, behavioral issues are defined as externalizing behaviors such as acting out, aggression, and violence; and emotional issues, or internalizing behaviors, include depression, anxiety, a low sense of stability, and confusion or a heightened sense of the unknown. Social adjustment issues refer to the difficulties child residents encounter in acclimating to new living situations, which includes adjusting to shelter life and dealing with the stress around hiding their homelessness from peers,

<table>
<thead>
<tr>
<th>Participant Number</th>
<th>Location</th>
<th>Participant Position in Shelter</th>
<th>Years Employed at Shelter</th>
<th>Domestic Violence Residents</th>
<th>Number of Child Residents</th>
<th>Age Range of Child</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Urban</td>
<td>Case worker</td>
<td>5 months</td>
<td>No</td>
<td>12</td>
<td>1–13 yrs</td>
</tr>
<tr>
<td>2</td>
<td>Urban</td>
<td>Office manager &amp; Family life advocate</td>
<td>10 years</td>
<td>No</td>
<td>13</td>
<td>Newborn-18 years</td>
</tr>
<tr>
<td>3</td>
<td>Suburban</td>
<td>Director</td>
<td>22 years</td>
<td>No</td>
<td>12</td>
<td>6 months – 6 years</td>
</tr>
<tr>
<td>4</td>
<td>Urban</td>
<td>1. Housing coordinator</td>
<td>4 wks</td>
<td>Yes</td>
<td>18</td>
<td>&lt;6 years-18 years</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2. Family advocate</td>
<td>2 wks</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>3. Stabilization worker</td>
<td>10 yrs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Urban</td>
<td>Assistant director</td>
<td>2 years</td>
<td>No</td>
<td>21</td>
<td>3 months-12 years</td>
</tr>
<tr>
<td>6</td>
<td>Urban</td>
<td>Director</td>
<td>2 years as director</td>
<td>Yes</td>
<td>4</td>
<td>1-7 years</td>
</tr>
<tr>
<td>7</td>
<td>Urban</td>
<td>Case manager</td>
<td>17 years</td>
<td>No</td>
<td>19</td>
<td>11 months-18 years</td>
</tr>
<tr>
<td>8</td>
<td>Suburban</td>
<td>Director</td>
<td>11 years</td>
<td>No</td>
<td>13</td>
<td>1 month-18 years</td>
</tr>
<tr>
<td>9</td>
<td>Suburban</td>
<td>1. Case manager</td>
<td>19-20 yrs</td>
<td>No</td>
<td>8</td>
<td>1-16 years</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2. Site manager</td>
<td>5 yrs.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Suburban</td>
<td>Case manager</td>
<td>1 yr</td>
<td>No</td>
<td>8</td>
<td>1.5-6 years</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Program supervisor</td>
<td>11.5 yrs</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

Table I. Descriptive Data
for example. Each of these factors played a significant role in the ability of child residents to function in both everyday life as well as in an educational setting.

Many of the younger children in pre-school and kindergarten exhibited high levels of resiliency and seemed to adjust more easily to shelter life, in part because of their assumed obliviousness to their homeless situation. However, participants indicated that the sense of loss among this age group was still present and not easily understood even if it was not as profoundly experienced as it was in comparison to some of the older children. The children in grades 6 – 12 were more likely than children in younger grades to experience anxiety, depression, and embarrassment or shame surrounding their homeless status. Adapting to shelter rules and adopting a new shelter lifestyle also proved difficult for adolescent residents. New curfews, lack of privacy from living in a single room with their entire family, the inability to allow peers to visit, as well as acclimating to living in close quarters with a group of strangers, all contributed to the anxiety and behavioral issues in many of the children.

Functional Delays. Participants from seven out of the ten shelters cited the presence of functional delays with both physiological and environmental origins. These delays included ADHD, Autism Spectrum disorders, and speech disorders, while educational delays often reflected factors related to the child’s environment. For example, absenteeism and being forced to frequently change schools often resulted in the child being held back a grade. Parents’ mental health, a history of autism and other childhood disorders, as well as a history of trauma in either parents’ or children’s lives often exacerbated these delays.

Transportation. Six participants described inadequate transportation as an educational challenge, and three of these participants listed the lack of transportation as one of the most significant educational challenges. Problems in securing transportation to and from the shelter resulted in difficulty accessing other aspects of the community, especially since many of the suburban communities where some of the shelters were located did not provide any public transportation. However, transportation between the shelters and schools was generally adequate, as long as the school was located in the same community as the shelter. Since being sheltered outside of their former communities impacts school attendance, the provision of adequate transportation becomes a key factor in accessing education. Although McKinney-Vento legislation mandates that children in shelters are to receive transportation to and from their school of choice, coordinating this service at times took multiple weeks, especially since some schools failed to offer buses or vans in these cases, forcing the children to rely on public transportation instead.

**Programs and services.**

While problems arise in providing academic services to children in residence, the family shelters of this sample certainly demonstrated the means to implement some educational services. Ideally, the relationship between homeless shelters and school systems is a partnership in which the programs and services of each facility complement the other in providing adequate education for this disadvantaged population. In cases where the shelters and schools maintained a collaborative relationship, participants described a positive academic experience for the children in residence. One participant described the accomplishments of an eleven-year-old student who received an “Exceptional Student Award” while in shelter, in which this supportive shelter-school relationship existed.

The services provided with the most consistency included after school care, transportation, school attendance support, and the provision of school supplies. Six out of the ten participants remarked that, while the shelters themselves did not actually provide after school care, the schools the children attended as well as other organizations in the community usually administered this service. Each of these shelters often provided transportation to and from after school programs, a crucial aspect in measuring the effectiveness of accessing both after school care and transportation. Nine out of ten participants also expanded upon their efforts concerning school attendance support. When interacting with parents, participants stressed the importance of education in general, including school attendance. Participants also took efforts to ensure all families were awake and ready for school in the morning; some participants even indicated that they at times drove students to school if they missed the bus. Finally, nine out of ten participants indicated that the shelter possessed the resources to provide school supplies to their young residents by means of governmental grants and private donations.

**DISCUSSION**

Not surprisingly, participants were forthcoming in stating that the lack of sufficient funds limited the adequacy of many of these programs and services. Participants indicated that more staff or volunteers would allow the shelter to provide a greater number of services with increased consistency. Participants remarked that the shelters could provide certain programs, such as tutoring services and some recreational activities, only when staff from the shelter or school was available or when
volunteers were present. One participant described a tutoring program in which teachers from the local school volunteered their time for individualized homework help at the shelter. This program was only provided sporadically, however. The “kids are floundering,” she remarked, when they are unable to receive tutoring. This speaks to the influence that policy makers and volunteers have on resource allocation and service provision, both which ultimately determine the academic experiences of these children. Policy and volunteerism conducive to supporting effective programs are essential to these children’s success in educational settings.

Because of its small sample size and local focus, the conclusions of this study are not necessarily generalizable to other areas. However, these findings may represent the situation of childhood homelessness in regards to access to and achievement in education as it exists currently in Massachusetts. The dedication of the participants in servicing this vulnerable population, however, cannot be overstated. All participants were forthcoming with information during the interviews and appeared genuinely concerned for their young residents’ well-being as well as the functioning of the shelter. “I see them [the sheltered women and children] as my sister or my family,” expressed one of the participants, the director of an urban domestic violence shelter. Their commitment to overcoming homeless children’s challenges gives hope for a future where no child has to suffer the injustice of an inferior education because of homelessness.

Works Cited


