

Navigating Life:

Delaware Families Experiencing Homelessness with Young Children

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Abstract

Objective: This study explored the lived experience of Delaware families residing in homeless shelters and motels with young children. We focused on their daily experiences to gain understanding about their day-to-day living to foster understanding about optimal supports that can facilitate more permanent housing arrangements. **Methods:** We used qualitative approaches to obtain descriptions about the daily lives of families experiencing homelessness with young children. Semi-structured interviews were conducted between November 2022 and February 2023. This study analyzes data from three families using open and thematic coding methods. **Results:** Families experiencing homelessness with young children discussed their struggle to locate housing, attend to day-to-day tasks, and maintain and obtain employment. Having access to conveniently located affordable and available child care and reliable transportation were discussed across the themes. **Conclusions:** Evidence building through gathering pertinent qualitative information is a critical step toward understanding the needs of families experiencing homeless. Findings from this study can inform state-level policy and state and non-profit agencies' practices. **Policy Implications:** Current policies that support family homelessness could be adjusted to better address connecting families to resources (e.g., direct connection to landlords), transportation (e.g., increasing allotted bus passes, providing a "free" monthly bus pass), and child care (e.g., co-located care – shelter plus child care, funding enrollment slots left "open" specifically for families experiencing homelessness).

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Introduction

Family homelessness is a traumatic experience that significantly impacts the health and well-being of caregivers and children.¹ Yet U.S. housing policies primarily focus on single adults. Families with children comprise roughly 30% of the U.S. homeless population with an average size of 3.2 people for sheltered families.² This does not include families staying in rapid rehousing programs, permanent supportive housing programs, and unsheltered families that may be difficult to identify, like those sleeping in backyards or vehicles used for transportation.

The 2024 Delaware Point-In-Time Count reported 19% of Delaware households experiencing homelessness were households with children under 18. Shockingly, children under 18 accounted for the largest age group experiencing homelessness (26%) followed by people ages 35-44

(17.6%).³ Additionally, between 10/2/22 and 9/30/23, data in Delaware's Community Management and Information System (CMIS) indicated that 16% of those tracked were children under the age of five.⁴ The CMIS data included anyone who was enrolled in a street outreach, emergency shelter, transitional housing, rapid re-housing, or permanent supportive housing project.

National data finds families experiencing homeless with children are more likely to be female-headed with children under the age of six.¹ Family and child age level data specific to Delaware are not available at this time. Americans experiencing homelessness who identify as Black or African American account for almost 40% of the homeless population; a rate disproportionate to the national population.² The disproportionality is a product of past and current racial inequities in housing, education, and healthcare constructed to protect the status quo of White Americans.^{5,6} The homeless population in Delaware is also disproportionately minority families. Black or African American residents account for 22% of the state's population but comprise 59% of the people experiencing homelessness.³

Understanding these families' experiences is vital to creating and implementing policies that provide actionable and necessary support to promote family stability, health and wellbeing. Conversing with families to understand their needs and desires is imperative for the process, and can yield a wealth of knowledge from a small number of people. This study gives rise to the voices of Delaware families experiencing homelessness through documenting day-to-day experiences of living in homeless shelters and motels with young children.

Housing stability is associated with better health outcomes for adults and children such as improved mental health and decreased delays in seeing a doctor.⁷ Stable housing also provides a foundation for participating in the economic and social life of a community. Locating housing can be challenging for under resourced families like those experiencing homelessness. Families experiencing homelessness encounter stressors at higher rates than their low income housed peers – including multiple moves, neighborhood dislocation,^{8,9} lack of food preparation areas,¹⁰ and unpredictable daily life.¹¹ Co-occurring stressors negatively affect health and wellbeing¹² and disrupts early childhood development¹³ affecting physical, emotional, and social development.¹⁴ Stressors also inhibit family functioning altering time spent together and parenting practices.^{11,15,16}

Early childhood is a critical developmental period that affects future health and education outcomes. Adverse experiences, such as homelessness, negatively affect child development while supportive and stable environments offer protective factors that foster optimal developmental outcomes.¹⁷ The chaotic nature of homelessness does not support day-to-day stability. Likewise, shelters and motels often lack safe floor space for children to play and learn to crawl, and frequently do not have separate sleeping areas for children.¹⁸

Parenting can be stressful under the best circumstances; parenting while experiencing the loss of permanent housing -creates additional stress. The sudden loss of permanent housing removes people from their community, support networks, friends, family, and the majority of their possessions often leaving them with a diminished sense of security.¹⁸ Parents report the experience of parenting while homeless makes them feel judged and viewed as incompetent.¹⁹ They describe a phenomenon referred to as public parenting where they feel added pressure and stress to change their style of parenting to adapt to the loss of privacy and autonomy experienced

in sheltered living.¹⁰ These experiences impact parental mental health and self-efficacy. In turn, parental mental health affects family relationships and child development.¹

We explore the experiences of families living in homeless shelters and motels with children age eight and younger and draw on in depth interviews to answer the question: *What are the experiences of families experiencing homelessness with young children?*

Methods

Data were collected as part of a larger study that explored the use of early care and education services (child care, early intervention, child care subsidy) among families experiencing homelessness with young children in New Castle, Kent, and Sussex Counties.²⁰ Homelessness was defined according to the McKinny-Vento Homeless Assistance Act.²¹

The larger study employed semi structured interviews and an in-person survey conducted at the conclusion of the interview. Ten families participated in the study. Participants received a \$25 gift card and a daily bus pass. Interview recordings were transcribed verbatim. University Institutional Review Board (IRB) approval was received prior to data collection and necessary procedures were followed to protect human subjects, confidentiality of data, and consent procedures, as outlined by the Ethical Principles of Psychologists and Code of Conduct.²² Participants were assigned a pseudonym to protect the participants' identity.

This study is an in-depth exploration of larger study data that primarily resulted from the interview question, "I understand that you are experiencing a lack of stable housing for you and your family. During this time, what do you consider your greatest need?" and two follow up probes, "How would addressing (your greatest need) help you and your child?" and "How do you feel you could obtain (your greatest need)?"

Three participant interview transcripts were selected to represent mothers' and fathers' experiences, rural and urban locations, and residing in motels and shelters. The transcripts were imported into Dedoose qualitative coding software²³ and coded using open and thematic coding to gain understanding about families' daily lived experiences. Three themes emerged 1) locating housing; 2) navigating day-to-day life; and 3) maintaining and obtaining employment. Table 1 describes the codebook.

To increase reliability of study findings, analytic memos drafted during initial data collection were used during this analysis to support data interpretation.^{24,25} To maintain trustworthiness and credibility, and decrease researcher bias, the coding and analysis for this study includes triangulation and construction of a detailed code book. An audit trail was maintained to reduce research bias and increase transferability.^{24,26}

Table 1. Coding themes and descriptions

| Code | Definition |
|--------------------------------------|---|
| Locating housing | Experiences with locating stable housing such as downpayment, child care, availability |
| Daily life (day-to-day life) | Experiences with daily life tasks and responsibilities such as work, child rearing, meal preparation |
| Maintaining and obtaining employment | Experiences with maintaining employment and/or obtaining employment such as transportation, child care, or searching for work |

Sample

The unit of analysis was the family.²⁷ Family was defined as at least one adult 18 years of age or older caring for one or more child(ren) while experiencing homelessness. Specific details about the participant and their family are provided below. The primary language spoken by the three participants and their family members was English. This was the first experience of homelessness for each family. The duration of their homelessness experience at the time of their interview ranged from five to eighteen months

Participant 1 (“Aaliya”), is a single mother of three children ages 4 months, 2 years, and 3 years. She is 19 years of age and self identifies as Black. She resides in a motel due to a domestic violence situation. For safety reasons, Aaliya and her children had recently moved to a different motel. The move required her to shift her work location so that she could walk to work because she could no longer maintain her car. Aaliya works two service industry jobs to pay the \$72 nightly motel fee. The motel fee was previously covered by the COVID hotel motel voucher program funded Delaware Department of Health and Social Services. Her older two children were enrolled in child care before and at the start of their first hotel stay. As a result of the move, the distance to the child care program was too far because she was reliant on public bus service with limited service. Aaliya now relies on a disabled family member and the children’s fathers’ family to provide child care while she works. Most days, the children receive care separately by different family members.

Participant 2 (“Shaunae”), is a single, divorced mother of two children ages 11 months and 8 years. She is 34 years of age and self identifies as Black. She resides with her children in a homeless shelter due to a domestic violence situation. She was employed as a warehouse worker when she and her children began residing at the shelter. Her abrupt move to shelter resulted in the loss of child care that was provided by a family member who resided at the residence she left. She was subsequently terminated from her employment due to the inability to maintain consistent child care. She has her own car. Each weekday morning she drives her older child to school from the shelter.

Participant 3 (“Jamel”), is a father of four; two biological children ages 22 months, 3 years and two “adopted” children ages 6 years and 7 years. He resides in a shelter with his partner and their four children. Jamel is 28 years of age and self identifies as Black. He and his partner were laid off during the COVID-19 pandemic. Shortly thereafter they lost their housing and moved into the home of a family member. They also lost this housing arrangement when the family member suddenly passed away. Prior to arriving at the homeless shelter, they lived in two different motels funded by the Delaware DHSS. He is currently employed as a warehouse worker and his partner works in housekeeping at a hotel. They rely on public transportation. His partner was present at the interview and she responded to some of the questions and added details to the experience shared by Jamel.

Findings

The three main themes that emerged from data are discussed below. Although each theme is discussed separately, they are interdependent. For example, taking time to locate housing takes time away from managing daily life and working to save money takes time away from locating housing.

The Reality of Locating Housing

Locating stable and permanent housing was the top priority and most pressing need for all three families. Each family struggled to locate housing even though they felt they were taking the necessary steps to pay for housing or qualify for subsidies (finding employment, establishing a bank account, fixing their credit score). The conversation about housing became overwhelming at times for the families, but they choose to continue to share their stories.

Families expressed feeling constant pressure to obtain housing quickly while simultaneously managing their daily lives and ensuring the health and safety of their children. They shared their frustration with not being able to locate housing which they attributed to a lack of effective resources and the lack of time.

Families expressed feeling overwhelmed, frustrated and confused because even though they followed the steps needed to prepare, they still could not locate housing. Jamel shared, “We open up a bank account. Then they told us um, try to fix our credit score and we did that.”

Aaliya and Jamel spoke about saving money and opening back accounts for the downpayment and proof of income required by landlords. To save as much money as possible, Aaliya shared that she pulls a lot of double shifts and will go back for second shift on the same day. She explained that she does this because, “when you try to get a house or apartment, they gonna look at them paystubs and how much you got.”

Families felt the root of the problem (not finding housing) was the lack of effective resources (e.g., case manager to help fill out housing applications) and adequate information (e.g., list of landlords who accept vouchers). Aaliya commented, “Delaware barely has any resources...because finding housing is very, very, what do you call it? Difficult. So, like I say, like resources that actually help.” Aaliya also felt resources should include both mental health services, “I have anxiety so like mental health, or like ah just like a counselor, or (pause) yeah somebody keep me like motivated, like don’t give up you got it type of thing” and child care in concert with supportive housing, “I wish like some child care...support sheltering because you have kids. Cause now a days, especially in Delaware you cannot be like homeless with kids.”

Jamel expressed the need for hands-on support and more specific guidance,

“They (housing staff) should be callin’ landlords for us...they should be knowin’ landlords...this is our first time rentn’. We don’t know nothin’ about this. This is like dropping us in no man’s land and tryin’ make us figure out...Like I got scammed already twice.” He also shared, “(I spoke to) plenty of landlords and they say it sound like you got your head on straight. I would love to take a chance with you but to be honest with you, I got better candidates then you.”

The need for available, affordable, and accessible child care was mentioned as a necessary for locating housing and providing daily stability. According to Jamel,

“If we have somebody to take these kids (child care) and us to really handle business like say if we want to go out and look for a house...Not even enough time to really even look for housing cause we do that like on the fly. Like we on the bus like we lookin’ for a house while we got time...if it’s Saturday or Sunday when

one of us is off we are lookin' for housing. We don't really have time to do what you really want to do or what you be able to do if you already was stable (housed)."

Families shared that their inability to locate housing after completing the required steps took an emotional toll on them. They expressed feelings of frustration, disbelief, guilt, and a loss of faith with the process. Shaunae shared,

"I've been on my own for 11 years...I maintained for 10 years of my life... We didn't have this problem... We had a roof over our head...They (shelter staff) say that they have resources to help us along the way. I don't know what type of resources that they offer. How can I put this, they've offered me resources that I, there's stipulation that I have failed... So, I'm just a little confused... If it wasn't for them (her two children), I feel like I don't have a purpose...I have just so many emotions, so many mental like, but I'm okay. I'm mentally sane, trust me. I pray."

Jamel expressed,

"If getting a house was that easy, you'd see a lot of people leave out fast (no longer homeless)...It's a lot and it's been very hard to be honest with you, very hard because if you don't meet the requirements that they want you to do you'll be homeless again. Then we'll be starting over. I mean she would lose her job. I would lose my job and we'll be homeless again and the kids wouldn't be in school so then that mean most likely the kids will be taken from us. So, we don't want none of that to happening you know. It's just you gotta keep a good head and do what you supposed to do. They say believe in God, that's what we do."

The Reality of Managing Daily Life

Managing day-to-day life without permanent housing, reliable transportation, and child care was complex for these families. Families described the experience of completing day-to-day tasks while being homeless. In the words of Jamel, "it's really a learning process...If you's already stable, then you have, you would know how your day would go. You get what I'm saying, we'd plan it out already. This is like everything is like on the fly." Similarly, Shaunae stated it's "a whole new ballgame...I am just figuring out and relearning because now I'm at the bottom."

Day-to-day tasks were difficult to manage with the persistent fear of being on the streets with their children. Families shared how the daily stress to secure/safeguard their nighttime sleeping arrangement was extremely difficult. The fear of not having a place to sleep weighed heavily on them. All three expressed fear of losing their children if they did not maintain a roof over their heads, "DFS will take your children from you in a heartbeat. They do not play around" (Aaliya). Jamel shared their experience about accepting a roof, any roof, over their head. He described in detail his families experience with two motels,

"I asked them...can we move, cause where we was livin' (first motel) was like...when I say drug infested I'm meaning like people doing "duz" right outside the door it just wasn't a good

place at all for the kids to be raised...my kids saw people who die...We comin' outside early in the morning to take them to school and there's a person that OD, overdosed outside right in front of the door... It was like a no choice. We didn't have no choice...First day we got in there (second motel), bed bugs literally crawling. We stayed up the whole - when I say we stayed up the whole night, we couldn't sit down, we were standing up like the whole entire night. 24-hours we stayed up even the kids, like couldn't let them stay down, sleep nowhere...but they did get us out that room the next morning, got us to a way better room that didn't have bed bugs and then we slept a little bit better."

Families discussed attending to daily activities such as getting themselves ready for work, helping their children get ready for school (washing their face and ensuring they brush their teeth), taking care of sick children, eating meals together, and taking public transportation or walking to work, stores, and the bank. Jamel expressed his frustration with being reliant on the public bus for all their day-to-day activities, "Transportation, that's the key. It's key to people who is homeless or don't have a car...Every time I get the bus I gotta pay. I gotta do multiple busses like two busses going there (work) and two busses going back...\$8 to \$10 every day." Aliya shared a similar sentiment about traveling between work, child care, and the motel, "I don't have transportation...be far to get there-there-there and in the bus. Buses don't run in (name of neighboring town). They run like here or (name of another town), like highways type of thing."

Mealtime, a main day-to-day activity was discussed at several points during the interviews. Families expressed the desire to have a place to prepare and share meals. Aaliya expressed, "I don't want to be in a hotel anymore or even a shelter...so she (daughter) can have her own room you know and I could finally cook a meal." The absence of food preparation and storage areas evoked emotional stress and the desire for the past. Shaunae shared,

"My daughter she's havin' me feeling real bad cause she said, 'Mama I want breakfast, I want French toast and eggs, scrambled eggs', and I'm like okay, um let me order it from a diner, and she's like 'no, I don't want it from a diner, I want your cookin'. I want your home cookin'". It's one of those ahh moments. You know like, I know I need to get it together but, ohh no, (breaks down in tears -pauses- resumes talking through tears). Now those are moments that I have that I'm like how did I get here? I'm just wrapped up with all types of different emotions, feelings, everything, you know, it's just a big old difference for me."

Mealtime was also talked about as family bonding time. Jamel and his partner described how they located places to share meals together as a family by watching out the bus window as they travel to and from work,

"We took 'em to dinner...and we sat down and ate dinner. Showin' 'em that we love 'em, and we can spend our time occupied on what they want us to do for them...We only know the (restaurant name)

because it's on our work route. So now we know when to get to like, sit down, and eat pizza and have a family dinner.”

Families expressed that managing daily life was overwhelming and short on time without access to child care and child care subsidy (Purchase of Care, POC). Shaunae shared, “(Child care) would be real nice cause...I can't leave my kids nowhere. I got to take them everywhere I go.” Aaliya mentioned how she cobbles together child care to work her two jobs that require her to work various shifts. Due to the lack of transportation and child care hours of operation she no longer uses center-based care. Therefore, she cannot receive POC and now pays out-of-pocket for care, “They're not in daycare so Purchase of Care isn't paying...I give (relative's name) like a few dollars...here and there...whatever I can just like (a) thank you, you know.”

The Reality of Maintaining and Obtaining Employment

Families in this study were working or had recently worked. Maintaining and obtaining employment was fostered by key supports like child care and reliable transportation. However, families identified housing as the most important factor for employment because it provided stability and predictability. Jamel shared, “If we had a stable home...A lot of stuff is not stable enough (without housing) so if daycare call us...you gotta pick 'em up or anything like that, we can't leave work...We gonna get fired from the jobs that we have.

Aaliya and Jamel and his partner work between 5 and 7 days per week. Shaunae had employment when she entered the shelter but due to a domestic violence situation, her local child care arrangement was no longer an option. She began driving to a relative's home in a neighboring state in order to maintain her employment, “I would go all the way out that way, that's what I was doin' when I was working...I was driving all the way to (name of town) and then coming all the way back here to come to work...I was doing a lot of drivin'...you know oil changes every two months instead of every 4 months.” Currently to provide income for her and her children, Shaunae mentioned she works on the weekends doing hair for friends and family. She sets up three appointments and is able to bring the children with her. She stated that she uses the money to “get by” until she finds a job.

Child care was also mentioned as a key support for obtaining and maintaining their employment, “I came here with a job...now I'm not working 'cause I can't get daycare for her right now” (Shaunae). Jamel expressed that child care would make their lives easier,

“It will be way much easier if we can have all of them...two gone (referring to child care for the two youngest children) and them two (two oldest children) in an afterschool program. And we would work longer...basically it's that like one hour that one hour missing right there that one of us need to be here.”

Shaunae's process of locating new employment was inhibited by her POC denial,

“They denied me. I have to go up there after I'm done with you to see exactly why. Like I said, that's what makes me feel like I'm on Candid Camera. If you all sendin' my literature to the (shelter), why did I get denied? Cause the first reason why I was eligible, makes me eligible is that I'm in a homeless shelter.”

To maintain employment without child care, Jamel and his partner coordinated their schedules. Without an understanding manager, the arrangement would likely be insufficient.

“I have to tell my uh manager that I’m gonna be little be late because... She get off when I supposed to go to work... I don’t get to arrive until 5:30 or 5 o’clock...She get off at 5. I supposed to be at work at 4:30 already...the (two older) kids don’t get off the bus until 4:20 so I’m already late right there just from them two...and they really get out at what I think 3:30 but they the last kids on the bus.”

Discussion

Families shared details of their lives revealing their experiences regarding locating housing, navigating day-to-day life, and maintaining and obtaining employment. Families conveyed their lived experience clearly. They were acutely aware of their needs and identified support that would help them obtain housing. Families articulated that stable housing was their number one need. Stable housing was perceived as the main resource that would have a positive effect on every aspect of their lives and the lives of the children by providing stability and reducing their daily stress. Over time, chronic stress negatively affects the nervous, cardiovascular, endocrine, and immune system.¹²

Families described experiencing compounding stressful situations like substandard housing conditions that impact health and emotional wellbeing such as bed bugs²⁸ and living in high stress environments.¹⁷ Families recognized their housing situation directly affected their mental health and suggested supportive services should include mental health counseling. They also identified transportation and child care as a support and a barrier to these three aspects of their lives.

Locating housing for these families went beyond searching for an available apartment or home to rent. Families stated that locating housing meant they needed to have employment, obtain a voucher, open a bank account, clean-up their credit score, save money for a downpayment, find a landlord willing to rent to them, and ensure the location had access to transportation and was located in a safe environment to raise their children. This process was described as stressful and difficult to manage while working and caring for the needs of their children.

An approach to reducing some of the stress experienced during the process of locating housing, is to connect families experiencing homelessness with landlords who accept vouchers and have availability. However, the Delaware affordable housing market is tight, likely making the process challenging for these families even with connections to landlords. Thinking creatively about ways to encourage landlords to accept vouchers and builders to convert existing dwellings or incorporate more units into affordable housing is necessary. Steps to increase the number of landlords accepting vouchers could entail providing incentives such as assistance with building repairs or assuring them that families will receive ongoing services to enhance stability (e.g. financial counseling, enrollment in Head Start). Conversations about housing systems and supports are currently occurring across Delaware; these conversations should include hearing directly from families experiencing homelessness.

The experience of homelessness undermines parents’ ability to protect their children leaving them feeling guilty.²⁹ However, positive parenting can support resilience among children

experiencing homelessness.³⁰ Mealtime was conveyed as positive family time and a guilt inducing interaction. Parents described scouting out and memorizing restaurants on bus routes as they traveled to and from work. The additional effort to create family mealtime opportunities was intentional to create space and time to build relationships with their children and spend time together as a family. Conversely, the lack of personal space and a kitchen to prepare homecooked meals requested by their children injected stress and negative feelings about their parenting into mealtimes. Supporting families' ability to eat together fosters the opportunity for positive parenting and reducing parental stress.

Families expressed that obtaining child care was a key pressing need to locate housing, complete day-to-day activities, and obtain and maintain employment. Child care programs allow parents with young children to work and promote early childhood development.³¹ Enrollment in child care programs offer protective factors against the risks of homelessness by providing stable and enriching early care environments.

Child care in conjunction with subsidy facilitates access to affordable, high-quality child care. Programs such as Early Head Start and Head Start prioritize enrollment for families experiencing homelessness and reduce barriers to enrollment (e.g., longer time periods for immunization record submission), yet we know that families experiencing homeless are less like to engage in such programs.³² Providing families experiencing homelessness with low barrier access to high-quality early care and education services such as child care and child care subsidy can help provide stability and foster optimal early childhood development.

An identified child care barrier in this work is the denial of POC while residing in shelter. In Delaware, families experiencing homelessness are given presumptive eligibility for 90 days. Denial of POC for a family experiencing homelessness warrants further inquiry into the implementation of the POC policy and how families interpret housing questions on the POC application. The denial of POC for this family experiencing homelessness in Delaware was not unique. Prior work found several instances of POC denial while living in shelter.²⁰

Family homelessness is complex and multifactored; reducing barriers to early care and education services is not sufficient. Additional consideration must be given to housing programs and Delaware's Child Care Resource and Referral (CCR&R) agency connecting families directly to accessible, affordable, and available child care. In 2020, a summary report on early learning opportunities for young Delaware children experiencing homelessness was submitted to the Delaware Department of Education.³³ The report details the strong interest in Delaware to increase enrollment and participation of children experiencing homelessness in early education programs such as child care. Additionally noted is the need for better data to understand the prevalence of young children experiencing homelessness in Delaware. Robust data can help us identify families experiencing homelessness, thus providing support by fostering direct access to the resources necessary to address their unique needs. Support could entail finding available and affordable open child care slots within walking distance or near parent's places of employment. The previously mentioned Delaware report outlines several recommendations including strengthening partnerships with partner agencies. Working collaboratively across organizations and agencies to connect families to simultaneously to affordable, accessible, and available child care and stable housing is vital ensuring the youngest Delawareans are provided the opportunity to reach their optimal development.

Families in this study lived their day-to-day lives in the context of enduring the daily stress of homelessness and they lived in fear of losing their children. Yet, families demonstrated perseverance and resolve in navigating through systems to locate housing, live their day-to-day lives, and maintain or obtain work. Families repeatedly emphasized that stable housing would reduce their stress, help them in their day-to-day life, and support their ability to work. Child care access, subsidy, and reliable transportation were identified as needs that would help them obtain stable housing.

Implications

This study supports the value of research that includes the voices of those with the lived experience of homelessness when considering policy and practice changes and implementation.³⁴ Their stories reveal the added complexity of experiencing homelessness while caring for young children. This study adds to the information known about the experience of homelessness while caring for young children even though it is limited by a small sample. Although our work does not capture the full scope of experiencing homelessness with young children it provides an in-depth description of many aspects of their daily lives and adds to what is known about family homelessness. Families described how their health and wellbeing were negatively impacted by the lack of stable housing.

Insights gleaned from this work can inform policy and practice to create a multi-pronged approach to stable housing. Reasonable actions can be taken to begin to address the identified needs. Embedding housing case managers/housing navigators within housing programs could enhance wraparound services to facilitate families' direct access to landlords. Providing monthly "unlimited rides" bus passes to families experiencing homelessness can support their continued employment. Fully implementing federal child care, Head Start and public school policy options could include connecting families experiencing homelessness directly to child care programs and subsidy.

Navigating housing and child care systems is complex and overwhelming. A strategy to support families experiencing homelessness with young children navigating these systems is to create an ongoing partnership between the CCR&R agency, the Delaware Department of Health and Social Services (POC administrator), and the housing system using designated case managers. Designated case managers would facilitate connecting families experiencing homelessness to available child care, POC, and housing and can also support families in child care with housing supports when needed.

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