



HOMELESSNESS & HOUSING INSECURITY IN ILLINOIS

To end family homelessness and housing insecurity, we need to create additional permanent housing resources for families.

HOUSING IS AN IMPORTANT SOCIAL INFLUENCER OF HEALTH



Young children who experience homelessness face substantial and severe health risks, such as developmental delays, increased hospitalization, and depression. They also experience academic challenges including lack of school readiness and academic failures.



Children's Health Watch found that "the younger and longer a child experiences homelessness, the greater the cumulative toll of negative health outcomes, which can have lifelong effects on the child, the family, and the community."



Housing insecurity exacerbates the myriad and lifelong health effects caused by adverse childhood experiences (ACEs), which include asthma, coronary heart disease, stroke, and diabetes.



An estimated 18,600 hospitalizations are associated with early childhood and prenatal homelessness in the U.S. costing more than \$238 million annually. Infants less than 12 months old account for more than half of this cost.



The comprehensive community housing systems funded by HUD called Continuums of Care (CoC) do not serve families who are living doubled-up, only those who are literally homeless. Families have to meet the literal definition of homelessness to be eligible for CoC housing and services.

33%

Of all homeless persons nationwide are families with children

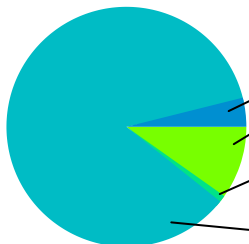
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Most cited reasons for family homelessness are:

1. Lack of affordable housing
2. Unemployment
3. Poverty

IL STATE BOARD OF ED
HOMELESS COUNTS SY 2017-2018
52, 977 ILLINOIS STUDENTS

Homeless families are often hidden from our view—they are living in shelters, cars, campgrounds, or doubled-up in overcrowded apartment



Hotels/Motels, **3.9%**
 Shelters, transitional housing, awaiting foster care, **9.8%**
 Unsheltered (cars, parks, campgrounds, temporary trailer or abandoned building), **0.9%**
 Doubled-up (living with another family), **85.4%**



1 in 5 (15 million) children under age 18 live in poverty

POLICY RECOMMENDATIONS

- Racial equity and economic justice should be central in the provision of housing for Illinois children and families.
- Maintain current state funding for housing for young children and pregnant persons.
- The Illinois State Legislature should form a taskforce/body to study the needs of low-income children (particularly those under 6 years of age) and families experiencing housing insecurity and make statewide recommendations.
- Families comprising children ages birth to six and pregnant persons with housing insecurity should be prioritized for homelessness prevention services because they are the most vulnerable to long-term harm to both their physical and mental health.
- Within Illinois' Continuums of Care (CoCs), households in which someone is pregnant or has delivered an infant within the last 12 months should receive priority for rapid rehousing to mitigate the health impacts of housing insecurity.
- Social supportive services should be provided to children and families experiencing housing insecurity.
- Families must be considered in the design, development, and/or expansion of supportive and affordable housing.
- Barriers to housing, such as credit scores, onerous security deposits, and income requirements, must be addressed in order to increase safe and accessible housing for low-income families.

FOR MORE INFORMATION CONTACT:

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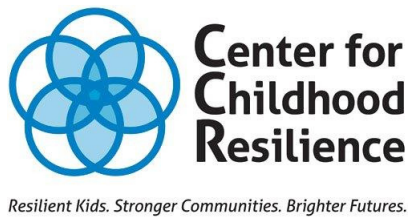
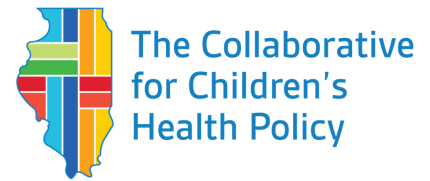
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HOMELESSNESS & HOUSING INSECURITY IN ILLINOIS

SUPPORTING ORGANIZATIONS

Collaborative on
Child Homelessness
Illinois



Illinois Chapter

INCORPORATED IN ILLINOIS

American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN®



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