# Housing Insecurity & Homelessness in Illinois Among the Pregnant & Parenting

## **Executive Summary**











### EXECUTIVE SUMMARY

Homelessness among pregnant and postpartum persons and young children and their families is a significant, growing problem in Illinois. Experiencing housing insecurity and homelessness while pregnant contributes to an array of adverse maternal health outcomes. Further, homelessness experiences during the early childhood years can have lasting impacts on a child's health and development.

Unfortunately, child and family homelessness is often less visible than homelessness among other populations. Because families experiencing homelessness are more likely to live doubled-up with others or in motels and other temporary, unstable living situations as opposed to in shelters or on the street, this population is often overlooked by government officials and community leaders. The result is that national, state and local responses to persistent homelessness do not adequately address the unique needs of families with young children experiencing homelessness.

To address this critical issue, Start Early, the University of Illinois Center for Research on Women and Gender (UIC CRWG) and the Chicago Coalition to End Homelessness (CCH) launched the Housing Insecurity and Homelessness in Illinois Among the Pregnant and Parenting (HIHIPP) project. The project builds on previous research conducted by UIC CRWG and aims to create a 10-year action plan for preventing and ending homelessness among expectant parents and young children in Illinois. The project focuses specifically on pregnant people and families with children under age 3, as well as several subpopulations that experience unique vulnerability concurrently with housing insecurity: parenting youth, women and children experiencing domestic violence, recently incarcerated mothers of young children and people with or at risk of developing HIV.





## The project was completed in three phases over the course of one year, beginning in March 2024.

PHASE 1: DISCOVERY & INVENTORY

- Interviews with people with lived experience of homelessness
- Review and analysis of existing policies and relevant research and data
- Create an inventory of past and current initiatives focused on addressing homelessness among the prenatal-to-age-3 population in Illinois

PHASE 2: THEORY OF CHANGE

- Develop a Theory of Change
- Identify primary drivers of homelessness for Illinois families and pregnant people
- Illuminate potential pathways toward achieving Theory of Change vision
- Continue in-depth interviews with people with lived experience of homelessness

PHASE 3: ACTION PLAN

- Develop a 10-year action plan that puts forth strategic objectives
- Develop an operation plan to guide the work needed to achieve the vision of preventing and ending homelessness for families with young children and pregnant people in Illinois

The project activities, which included convening meetings, conducting background research and policy and data analyses, and direct engagement with people with lived experiences of homelessness, revealed many realities about the housing supports landscape – such as:

- The housing landscape is siloed.
- Funding is extremely limited and restrictive.
- Few, if any, existing initiatives recognize pregnant and parenting people or families as a priority population to serve.

Individuals shared challenges associated with navigating this complex web of housing resources only to find that they were not eligible or that the resources had been expended by the time they reached them. They also expressed frustration with the workforce assisting them, often feeling disrespected and, at times, mistreated.

#### Theory of Change

These findings, along with continuous input from the Advisory Committee and people with lived experiences, informed the development of the Theory of Change. The Theory of Change articulates a vision of success, which is to ensure safe, secure and sustainable housing for all pregnant people and families with children under age 3 in Illinois.

The Theory of Change also identified mechanisms critical for achieving that vision, including:

- Foundational elements, such as supportive policy, adequate funding and data and research
- An accessible array of integrated, family-centered and trauma-informed services delivered by a well-trained and supportive workforce
- A shift in mindset among all stakeholders that recognizes the importance of addressing homelessness among pregnant people and families with young children

The Theory of Change is visually represented by a house built with bricks that represent essential elements of holistic, long-term, affordable and safe housing and essential services and supports, including educational and career services, health and well-being services, and initiatives that contribute to a well-equipped and trained workforce. See Appendix E.

#### Action Plan

The Action Plan was developed by the project leadership team, with input and feedback from the Advisory Committee, and reflects priorities for action and impact based on the current climate. The Action Plan is grounded in the Theory of Change and reflects learnings from the review of recent data and research, the inventory and analysis of promising initiatives, and interviews and engagement with people with lived experiences of homelessness.

The final plan is meant to be flexible and opportunistic to meet the demands of a dynamic political landscape, while remaining focused on building foundational structures needed for successful systems change, such as improved data, policy and advocacy capacity, and elevates the need to pursue innovations.

The plan includes a set of strategic objectives aligned to the vision of ensuring safe, secure and sustainable housing for all pregnant people and families with children under age 3 in Illinois. The objectives address issues related to housing, supports and services, and workforce and professional practice. The plan identifies several key strategies for advancing the strategic objectives, including policy and advocacy, data and research, family engagement and leadership, strategic communications, professional development and training, pilots and demonstration projects and private sector partnership. The plan also proposes establishing a multi-sector implementation coalition to lead and coordinate efforts to advance the plan's strategic objectives over a 10-year timeline.