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**The Impact of Stress on Academic Achievement
in Homeless Children**

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in Homeless Children**

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Abstract

The Impact of Stress on Academic Achievement in Homeless Children

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Currently, 3.5 million people experience a lack of stable living conditions in the U.S. Families with children account for over 35% of the homeless population. As the present economy continues to struggle, this growing sector will result in more families losing their homes. The increasing volume of the homeless population, along with the fact that severe poverty and homelessness pose significant risks to child development, indicates that homelessness is a pressing social concern. This literature review seeks to explore the current research that exists pertaining to physical, psychological, social, and academic issues that impact children experiencing homelessness. Prevention and intervention strategies for school counselors are then explored in order to promote academic and emotional success for children who are homeless. Finally, recommendations for future research are presented.

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Introduction

The recent decline in the U.S. economy, resulting in conditions comparable to the era of the Great Depression, has led to a rise in homelessness (National Center on Family Homelessness [NCFH], 2009). At least two million Americans are expected to face home foreclosures in the near future (HCFH, 2009). Presently, 3.5 million people experience a lack of stable living conditions in the U.S. (National Coalition for the Homeless [NCH], 2009).

One of the fastest growing sectors, families with children account for over 35% of the homeless population (DeBradley, 2008; Rukmana, 2008). Homeless families often experience severe physical and mental health problems resulting from life struggles; these issues tend to disrupt the academic achievement of the 1.5 million children who do not have homes (NCH, 2009). The increasing volume of the homeless population, along with the fact that severe poverty and homelessness pose significant risks to child development, indicates that homelessness is a pressing social concern (Jozefowicz-Simbeni & Israel, 2006).

According to the McKinney-Vento Homeless Assistance Act, adopted by the U.S. Department of Education, those who are homeless are defined as “lack[ing] a fixed, regular, and adequate nighttime residence;” these places can include sharing the housing of others due to economic hardship, staying in temporary locations, and living in private or public places that are not intended for the sleeping of human beings (U.S. Department of Education, 2004). As a result of insufficient housing conditions, families lose privacy, possessions, community, and security (National Child Traumatic Stress Network

[NCTSN], 2005). Families face the daunting task of reestablishing their lives in the midst of troubling circumstances.

Consequently, there are a multitude of health and psychological issues that impact the development of children who are homeless. The unpleasant living conditions, along with the distress from effects of poverty, create a life of chaos and overstimulation (Strawser, Markos, Yamaguchi, & Higgins 2000). Additionally, homeless children are more likely to have acute and chronic health problems because of a lack of adequate nutrition and an inability to obtain appropriate healthcare (NCFH, 2009). Furthermore, high mobility rates, domestic violence, natural disasters, and addiction can trigger anxiety and depression (Anooshian, 2005; Miller, 2009). Fifty percent of school age children that are homeless experience anxiety, depression, or withdrawal compared to only 18% of those not homeless (NCTSN, 2005).

These stressors that homeless children often face can result in significant social and academic problems. Studies show that violence and aggression contribute to poor development of homeless children that prompts relationship problems with peers (Anooshian, 2005; Bradovic, 2009). The isolation that children who are homeless encounter due to the social stigma of homelessness can exacerbate behavioral problems (Anooshian, 2005). These difficulties impact educational achievement. Homeless children are twice as likely as non-homeless children to repeat a grade and have an estimated graduation rate that is below 25% (NCFH, 2009). Academic problems affect other domains of development over time (Obradovic, 2009). For example, the scrutiny of

peers due to academic failures may cause a homeless child to develop antisocial behaviors, thus resulting in social and emotional problems.

Another impediment homeless children face stems from societal messages. The government has previously influenced the formation of negative perceptions and judgments of homeless children that have hindered educational advances. For example, the Reagan Administration's depiction of families cheating the welfare system and being "homeless by choice" has indirectly led to a public support of budget cuts in federal funding (Varney, 2008). Society has gone to a victim-blaming mentality, in which tax dollars are discouraged from being "wasted" on the homeless. This view has impacted the way schools and teachers interact with homeless students. Teachers may see homeless children as weak instead of having to endure unfavorable conditions (Powers-Costell, 2008).

As a result, educational barriers are numerous despite recent federal legislation's attempt to provide equal access. The McKinney Vento Homeless Assistance Act orders that homeless children are granted appropriate education that includes immediate enrollment regardless of records, transportation services, and gifted and special education programs (DeBradley, 2008). Children who are homeless are allowed to stay at their original schools regardless of a move to another location. However, many states and school districts do not follow these mandates because of costs (Strawser, Markos, Yamaguchi, & Higgins, 2000). Unfortunately, 45% of homeless children do not attend schools (Miller, 2009).

While the literature on homeless children has spanned 20 years, most studies dealing with education have centered on interventions targeting individual subgroups, such as either students, parents, teachers, or policies (Buckner, 2008; Powers-Costello & Swick, 2008; Swick, 2008). This can be a disjointed practice, as it is less likely to take into consideration how the different factors are intertwined and together play a role in impacting homeless children's academic achievement. Moreover, a social work perspective dominates the focus of examination regarding recommendations for action. While social workers are essential in providing assistance for students who are homeless, they tend to focus more on support in the home and less on the educational and social needs in the classroom. As a result, it would be valuable to explore a broader systemic framework that addresses multiple factors and assures a coordinated team effort in promoting maximum development and academic success.

School counselors play a distinct role in addressing the needs of homeless children. They have the training necessary to develop positive relationships with homeless children and their families. Also, because school counselors are aware of current policies, they can communicate to parents and school staff the educational rights given to homeless children. In addition, school counselors have the capabilities of interacting with the community and shelters. This collaboration assists in providing a smooth transition between the daily struggles of homelessness and the challenges faced in the schools. By serving as the liaison between the school, family, and community, school counselors take part in developing student coping skills and facilitating learning environments (Strawser et al., 2000). A systematic approach is necessary to examine

educational barriers and to instill a social justice perspective that unites parents, school officials, and community agents in addressing the needs of homeless children.

The goals of this report are to illustrate the structural causes and effects of homelessness on young children and to target appropriate interventions that will tackle academic barriers. Specifically, this paper will first discuss the circumstances surrounding conditions of homelessness in families. Second, it explains the physical and psychological issues that homeless children experience. Finally, it proposes an integrative approach to addressing interventions that allow elementary school counselors to work with students, teachers, parents, and community workers to advocate for the benefit of homeless students. Included are suggestions for future research.

Chapter 1: Description of Family Homelessness

Causes of Homelessness

The current weakening economy has led to over 600,000 families who experience homelessness each year (NCH, 2009). Poverty and a lack of affordable housing are key factors in causing homelessness. Six million jobs have been cut since the start of the recession and people are finding it difficult to pay for housing, food, childcare, healthcare, and education (NCH, 2009). Thus, homeless parents must often choose between various basic needs in order to reach minimal survival. The pressing need for food and shelter tends to take priority over other valuables such as a visit to the doctor.

Furthermore, a low minimum wage has not kept up with rising house costs, resulting in a high demand for housing that exceeds the supply of affordable housing (DeBradley, 2008). In fact, according to the Economic Policy Institute, the value of the minimum wage in 2009 was 17% less than it was in 1968 (The Economic Policy Institute, 2009). Currently, twenty-six percent of homeless parents are employed (Baggerly, 2004). Holding a job does not necessarily result in the ability to afford housing. For example, in order to meet the expense of a two-bedroom apartment, the wage needed is more than twice the minimum wage (Hildebrandt & Stevens, 2009). As the gap between housing costs and income continues to widen, more housing foreclosures will occur (HCFH, 2009). An estimated 7 million households living on very low incomes are at risk of foreclosure (NCH, 2009).

The decline in public assistance has furthered the rise of homelessness. Since 1980, federal support for low-income housing has fallen 49% (National Low Income

Housing Coalition [NLIHC], 2005). Additionally, in 1996, the government repealed the Aid to Families with Dependent Children (AFDC), the largest cash assistance program for poor families and replaced it with a grant program called Temporary Assistance to Needy Families (TANF). However, in 2005, TANF helped only a third of the children that AFDC helped to reach above the 50% poverty line (NCH, 2009). Currently, the median TANF benefit for a family of three is only one-third of the poverty level. Even as the number of children in poverty rises, the number of those receiving TANF is decreasing (Hildebrandt & Stevens, 2009). Thus, welfare has not been able to meet the needs of the majority of people in poverty.

Under these conditions, additional individual vulnerabilities exist that result in tendencies towards homelessness. Personal and relational factors such as family conflicts and health concerns intensify problems for those already struggling financially (Jozefowicz-Simbeni & Israel, 2006). Single mothers in their mid-late twenties with two-to-three children make up 84% of homeless families (NCFH, 2009). Domestic violence accounts for a majority of the reasons for this homelessness. Over 90% of these mothers have suffered severe physical or sexual abuse in their lives (NCTSN, 2005). In 63% of these cases, an intimate partner was the perpetrator (NCFH, 2009). Often these mothers have few resources and no place to go. Fractured social support systems and isolated neighborhoods increase the likelihood of negative outcomes for the women (Rukmana, 2008). Therefore, these single mothers must face the difficult choice of enduring the abuse or leaving the relationship and entering homelessness.

Along with a deficiency in resources, health problems may enhance the likelihood of homelessness. Because a considerable amount of personal finances is spent on housing, many people must forgo necessities, including health care. One in three Americans does not have health insurance (NCH, 2009). The lack of affordable health care can have detrimental effects. Without access to health insurance, families may find themselves unable to pay their medical bills. As a result, an option they might be expected to face is giving up their belongings, including houses, in order to pay the bills. With no homes, families find themselves searching for any decent place to live temporarily.

Living Conditions

The constant demand to meet the basic need for shelter creates much stress for the family. Once a family loses its home, the burden to regain stable living tends to be a difficult and intimidating task. Finding a place to stay temporarily is often the immediate concern. The options homeless families encounter may include staying in shelters, cars, campgrounds, tents, or doubling up in overcrowded apartments with relatives or friends. Children are forced to move around frequently. Each year, 97% of homeless children move, often up to 3 times a year (Baggerly, 2004). Whether families are constrained to living in shelters or with relatives, the uncertainty of where they will be in the near future is a constant worry.

According to the NCFH (2009), over half of homeless children stay with relatives or friends and one-fourth stay in shelters. Families may try to avoid shelters and other services because of the associated stigma behind the label of homeless (Jozefowicz-

Simbeni & Israel, 2006). The fear of being misunderstood and of others reacting negatively prevents many from turning to the shelter for help. However, the option of staying with extended family may result in negative outcomes as well. While extended family might encounter pressure to provide housing or childcare, they can be reluctant due to their own financial limitations. Conflicts frequently develop within extended families, eventually resulting in people being cut off (Fraenkel, Hameline, & Shannon, 2009).

Finding available space in the shelters is a major concern. With a lack of funding, shelters often turn families away because they are filled to capacity. Despite the average number of emergency shelter beds increasing by 8% in 2005, an average of 32% of requests for shelter by homeless families were denied in 2005 due to lack of resources (NCH, 2009). One study found that 12 of the 23 cities surveyed had to deny shelter access to families due to a lack of capacity (U.S. Conference of Mayors, 2007). It is especially difficult for women with older children to find accommodations since many shelters only take young children up to the age of 12 (DeBradley, 2008). Single fathers and children tend to be denied as well because most family shelters cater towards women. However, the rate of single male parents seeking shelter for themselves and their children continues to rise (Kolos, Green, & Crenshaw, 2009).

Consequently, many people in homeless situations are forced to separate and live in different shelters or with relatives and friends in crowded, temporary arrangements. About 55% of the cities surveyed by the U.S. Conference of Mayors report that families may have to break up in order to be sheltered (U.S. Conference of Mayors, 2007). In

other cases, parents may choose to separate from children by sending them to stay with relatives in order to avoid shelter life. One-fifth of homeless children are separated from their immediate family at some point (Anooshian, 2005).

Even if shelters are available, the conditions often are not conducive to appropriate child development. While families may experience initial relief, the overcrowded conditions result in difficult and uncomfortable situations. Despite close living arrangements, families usually do not form supportive communities. Mutual fear and a lack of appropriate living spaces cause families to isolate themselves within the shelters (Fraenkel et al., 2009). Safety concerns are a prevalent issue. Children may encounter inappropriate behavior from other homeless adults who are drunk or suffering from substance abuse. Witnessing violence among the people in shelters is also a prevalent concern (NCH, 2009). Furthermore, the poor quality of air may lead to breathing problems. Asthma is one of the most prevalent health concerns resulting from the harsh environment. Grant et al. (2007) found that there is a 40% prevalence rate of asthma for homeless children in New York City; only 15% were taking appropriate asthma controllers and medication.

Regardless of dedicated staff workers, shelters continue to be noisy, chaotic, and unstructured (NCFH, 2009). Inconsistent shelter conditions increase stress on families. The lack of privacy prevents children from adequately completing their homework and nightly rituals, such as eating dinner, are often not routine (Kolos et al., 2009). The duration of shelter stay fluctuates and shelter rules may contrast. Some shelters require families to pack up and leave during the day. Families must make the effort to learn the

rules to each shelter so they will not risk the possibility of being dismissed for not following the rules. For example, one shelter set a curfew at eight o'clock in the evening and if the family did not come back by that time, they were sent away (Buckner, 2008).

Chapter 2: Impact of Homelessness on Children

Family homelessness encompasses a greater issue than just a lack of stable housing. Research in the past decade has broadened the conceptualization of homelessness and some studies suggest that developmental problems could be a result of extreme poverty as opposed to homelessness itself (Buckner, 2008; Strawser et al., 2000). While recent research shows that there is not much difference between homeless and low-income children, homeless children are placed higher on a continuum of risk than poorly housed children (Kolos et al., 2009).

According to Varney and van Vliet (2008), homelessness may be more a marker of risk for a broader set of poverty-related problems than the primary source of problems. While homelessness does independently contribute to adjustment issues, the sum of multiple risk factors may be more influential than homelessness in predicting development. Cumulative risk is more significant to a child's outcome than homelessness (Shinn et al., 2008). Subsequently, developmental delays due to the lack of stimulating environmental conditions involving poverty and homeless-related issues affect the physical, psychological, social, and academic well-being of homeless children. These effects are not exclusive but simultaneously impact one another, amplifying negative consequences.

Physical Consequences

The circumstances surrounding housing instability cause much physical stress on children who are homeless. As a result of poverty, homeless children face poor nutrition and often encounter a shortage of food. Two-thirds of homeless children worry about

having enough food, and more than one-third report that they are forced to skip meals daily (NCFH, 2009). One study compared the growth of homeless children age 3 months to 11 years with the national standards from the National Center for Health Statistics (NCHS) and found that homeless children have significantly lower-height percentiles than the average of housed children (Chiu & DiMarco, 2010). Additionally, homeless children have high rates of obesity due to nutritional deficiencies and a difficulty in obtaining healthy food. More than one-third of children who are homeless are identified as overweight or obese (Chiu & DiMarco, 2010). Studies found that children lacked adequate amounts of vegetables and meats in their diet and instead ate excessive amounts of starch and fast food (Strawser et al., 2000). In the book Nickel and Dimed (2001), journalist Barbara Ehrenreich discovers that fast food is the norm for people in poverty because of the low costs. Food provided by government agencies also consist of high-sodium boxed and canned foods.

With the constant moving around and lack of nutrition, homeless children face more health problems than children who are housed. The NCFH (2009) found that homeless children become sick four times as often than other children and are more than twice as likely to have moderate to severe acute and chronic health problems (NCFH). These complications include respiratory infections, ear infections, and gastrointestinal problems. Moreover, asthma, which is the most prevalent chronic childhood illness in the U.S., affects 33% of homeless children (Cutuli, Herbers, Rinaldi, Masten, & Oberg, 2010). Homeless children who present with asthma have a more severe diagnosis than housed children and are more likely to manage their condition poorly. According to

Cutuli et al. (2010), only 12% to 15% of homeless children with asthma take appropriate asthma medication.

Homeless children rarely receive routine health care for their physical problems (Strawser et al., 2000). Families lose ties with community health services due to frequent mobility and are also unable to afford private medical care. Instead, they are most likely uninsured or insured by Medicaid. One study reported that more than half of the children at a homeless shelter in the Seattle area did not have health insurance, which was a concern because they tended to use emergency rooms at a higher rate than did average children (Chiu & DiMarco, 2010). As an alternative, they may use clinics and health centers as sources of health care (Coker et al., 2009). These clinics often do not provide adequate care for the severe health problems. Sometimes, families are denied from shelters because of an illness and then forced to spend the night on the streets, further aggravating the symptoms (Strawser et al., 2000). These negative conditions resulting from unmet needs exacerbate homeless children's health and also damage their psychological development.

Psychological Consequences

The distress resulting from multiple factors of homelessness contributes to a negative state of mental health. Forty-seven percent of homeless children suffer from issues such as anxiety, depression, or withdrawal (Drewes & Schaefer, 2010). Stress contains emotional tension and anxiety resulting from unmet needs or environmental events that are perceived as threatening (Davey & Neff, 2001). For homeless children, there is much stress from enduring unstable living conditions. Losing a home

significantly strains the mind and may produce psychological trauma (Landow & Glenwick, 1999). Homeless children constantly worry about the immediate future; often times there is a high possibility of being separated from their family, which may intensify the anxiety (NCFH, 2009). Furthermore, lower levels of self-esteem and a heightened sense of insecurity may increase anxiety. Homeless children experience social stigma from peers, resulting in shame (Kolos et al., 2009). This isolation intensifies feelings of inadequacy and loneliness.

Experiencing and witnessing violence may also produce psychological trauma symptoms. In general, witnessing domestic violence as a child results in a heightened potential for anxiety. Children often report that despite not being abused, just knowing that their mothers are abused creates more apprehension due to the anticipation of violence (Swick, 2007). Aggression in families often destroys the relationships between family members, causing anxiety, distrust, and chaos (Anooshian, 2005). Instead of developing nurturing relationships, families spend more time handling aggressive behaviors. A meta-analysis of 118 studies comparing the negative psychological effects of children who are exposed to domestic violence and children who are not exposed reveal that 63% of child witnesses fared more poorly than children who had not been exposed to domestic violence (Kitzmann, Gaylord, Holt, & Kenny, 2003). Children who are exposed to domestic violence tend to show greater behavioral, emotional, attitudinal, and cognitive difficulties compared to children who are not exposed (LaLiberte, Bills, Shin, & Edleson, 2010). It is likely that children internalize the aggression they witness and externalize the antisocial behavior patterns in the form of disruptive behaviors

(Swick, 2007). Additionally, children's self-esteem may be damaged and chronic fatigue symptoms will possibly develop.

Furthermore, there is a high correlation between children who are exposed to domestic violence and those who are victims to child physical abuse (LaLiberte et al., 2010). Kitzmann's et al. (2003) meta-analysis also looked at studies that compared the effects of psychological damage with child witnesses and children who were physically abused. Effect sizes were non-significant, suggesting that both groups of children showed similar levels of adjustment problems. Children who experience violence often display low energy, motivation, and focus to develop healthy and nurturing relations with others (Anooshian, 2005).

Violence is a common occurrence among children and families encountering homelessness. By the age of twelve, 83% of homeless children witness at least one act of violence and 25% witness family violence (Buckner, 2008). Furthermore, children who are homeless experience three times the rate of sexual abuse and twice the rate of physical abuse than housed children (Drewes & Schaefer, 2010). The high-stress life of homelessness creates a higher potential for violence and exacerbates the effects that children experience as a result of the aggressive behaviors. Homeless families who must constantly deal with belligerent interactions spend less time fostering nurturing relationships with their children. Mothers who are victims of abuse are more inclined to have aggressive relations with their children (Swick, 2007). Thus, violence disrupts normal attachment and bonding between the parent and child. The isolation that children who are homeless face is extended not only within the community, but also in the home

as well. Moreover, children who are homeless are also exposed to violence on the streets and in the shelters. As a result, homeless children are often fearful even when they are in safe places. The lack of trust due to prior exposure to aggressive behaviors increases anxiety and causes them to be hyper vigilant. This manner negatively impact a child's daily functioning at school and interactions with others (Swick, 2007). Often, homeless children will internalize the aggressive behaviors, resulting in antisocial behavior patterns.

Homeless children's ability to adjust to these stressors varies depending on their coping resources as well as their interactions with families, peers, and environment (Gewirtz, Hart-Shegos, & Medhanie, 2008). Positive relationships can add to the resiliency of children, thus enabling those who are homeless to manage the stress in healthy ways. However, the propensity for homelessness to strain relationships and result in neglect often leads to the development of unhealthy coping skills. Without appropriate development, children are unable to manage stressful environments. Accordingly, children who are homeless may internalize the stressors and thus, experience headaches, fatigue, stomachaches, fingernail biting, and irritability (Davey & Neff, 2001).

Consequently, the most prevalent ailment for homeless children is anxiety disorders (Yu, North, LaVesser, Osborne, & Spitznagel, 2008). About half of all school-age children experiencing homelessness have problems with anxiety and depression compared with only 21% who are poor but housed (Baggerly, 2004). Unstable environments are often detrimental to children, who generally require routine and structure. Sleep disturbances, irritability, hyper vigilance, and heightened startle

responses often result (Buckner, 2008). These factors may limit homeless children's explicit memory and diminish their sense of identity (Baggerly & Jenkins, 2009).

Social Consequences

Behavior problems often occur as a result of stress. Exposure to family violence tends to cause externalized rather than internalized behavioral problems (Gully, Koller, & Ainsworth, 2001). As homeless children externalize the trauma they experience, aggressive and delinquent behaviors appear. One study found that behavior disorders were four times more prevalent in homeless children than in housed children (Yu et al., 2008). Many homeless children lack appropriate cognitive and language development, are delayed in social maturity, and have limited learning experiences. As a result, they are fairly limited in their responses to stressful situations and tend to display less tolerance and more frustration in difficult situations (Davey & Neff, 2001).

The chaos and overstimulation from being exposed to adult behavior in shelter life are suggested factors influencing homeless children's lack of impulse control and adjustment (Strawser et al., 2000). Often, the instability and insecurities of life for homeless children produces inadequate social skills. Social development is hindered and children who are homeless experience less social support from their housed peers, which enhances the development of unhealthy coping strategies (Buckner, 2008). These negative behaviors are often a way for homeless children to protect themselves. Children are more likely to be victimized by peers when families experience economic distress (Buckner, 2008). Consequently, homeless children develop protective behaviors, such as using aggression or withdrawing from others, to combat the negative attention. The

aggressive behavior stems from externalizing the stressors of homelessness (Baggerly, 2004). Hostile behavior may be the only way homeless children know how to respond due to their exposure to violence in the family and their living environment. For example, a child who is excluded by peers may respond by fighting back, which would be considered as a normal response that is observed during family conflict. Children who are homeless often have difficulty with regulating their behavior in emotional situations during interactions with peers (Buckner, 2008).

Homeless children also choose to cope with social isolation by withdrawing. They may have strained relationships with peers stemming from negative beliefs that are influenced by their parents' lack of trust with others. But instead of the children acting out against those they don't trust, they withdraw from all relationships, preferring to be alone (Anooshian, 2005). However, as homeless children try to protect themselves, isolation from peers continues to increase and depression is heightened. The constant occurrences of stressful and traumatic experiences have profound effects on development and the ability to learn.

Academic Consequences

Learning is often obstructed by conditions of homelessness. Twenty-three percent of homeless children do not attend school (NCTSN, 2005). Families constantly move around due to restrictions on the length of stay in shelters or friends' residences. As a result, families struggle with sending their children to school (Strawser et al., 2000). Thus, homelessness produces high rates of school absence (Miller, 2009). Missing numerous days of school leads to a higher probability of repeating a grade (Buckner &

Bassuk, 2001). In fact, every time a child changes schools, he or she is set back academically four to six months (de Bradley, 2008).

According to the National Child Traumatic Stress Network (NCTSN) (2005), homeless children are twice as likely as other children to repeat a grade in school. Studies show that homeless children perform lower in basic reading and mathematics and have lower GPA's compared with the children in the general population (Buckner & Bassuk, 2001; Baggerly, 2004). Seventy-five percent of homeless students perform below grade level in reading (Walker-Dalhouse & Risko, 2008). Low self-efficacy and self-esteem play an important role in literacy development.

Obradovic (2009) found that as homeless children shifted to upper grades, the achievement gap widened between homeless and housed children. This may be a result of increased demands in schoolwork, declining motivation, and greater peer influences. Difficulty completing homework also impacts school achievement (DeBradley, 2008). Frequent moves may prevent students from participating in useful tutoring or summer programs (Obradovic, 2009). By graduation, few homeless students are proficient in reading and math. Subsequently, they are four times more likely to drop out of school. Furthermore, the graduation rate for homeless children is below 25%. Research shows that homeless students who drop out of high school earn over a lifetime \$200,000 less than those who graduate (NCTSN, 2005).

The quality of peer relationships in school is also predictive of educational outcomes (Buckner, 2008). Discrimination due to the stigmatization of being homeless and living in shelters creates a distraction to the learning environment. Children who are

homeless may be teased about hygiene issues or for not having school supplies (Strawser et al., 2000). Consequently, homeless children tend to display high rates of behavioral problems in the classrooms, which may disrupt their learning (Miller, 2009). They are less likely to engage in pro-social behaviors and more likely to have difficulty with peers. According to Fantuzzo & Perlman, (2006), 34% of homeless children have at least one classroom-related behavioral problem, often resulting in school suspensions. Forced to spend time outside of school causes children to fall further behind academically.

Barriers to Education

The U.S. Department of Education addressed the issue of education for homeless children and youth by creating the McKinney-Vento Education for Homeless Children and Youth (McKinney-Vento) program in 1987, which was reauthorized in 2001 under No Child Left Behind (U.S. Department of Education, 2004). Prior to this legislation, children who were homeless had difficulty enrolling in school because of school policies hindering access to quality education. Policy entailed that residency requirements, birth certificates, immunization records, and guardianship requirements were necessary before students were enrolled. Delays in the transferring of school records and the lack of transportation also often prevented homeless children from attending school. Furthermore, due to unstable living conditions, homeless children experienced high mobility, which often resulted in changing schools because shelters or other living accommodations were not located within district boundaries (NCH, 2009). Changing schools disrupts the education of children who are homeless, causing them to be at a high risk for falling behind.

The McKinney-Vento Act was established to require states to guarantee equal access to education for homeless children and to provide services needed to enable them to meet state achievement standards. In addition, the program prohibits schools from placing homeless children in a separate school or a separate program within a school based on the condition of being homeless. Schools must allow children to enroll immediately and also provide transportation to and from school. Children are permitted to remain at their original school despite moving to another location. Additionally, another requirement is to designate a local liaison and state coordinator to ensure identification of homeless children and that they are enrolled in schools.

Despite these measures, homeless children continue to struggle with enrolling, attending, and succeeding in the schools. Regardless of the law, many states and school districts are not heeding the requirements. Specifically, there has not been enough funding from the federal government to pay for costs of transportation when families move away, especially out of district (Jozefowicz-Simbeni & Israel, 2006). A key issue many schools encounter is the dilemma of deciding how far a child who is homeless can move for the school district to remain responsible to provide transportation services. Homeless families may move too far for it to be considered reasonable to transport the child back to the school of origin.

Additionally, a lack of awareness of homeless students' rights exists with both school staff as well as parents. Limited resources result in an unwillingness to provide training and outreach to schools that often have high staff turnover rates. Several reports also discovered that some liaisons were not even aware that they were designated as

homeless liaisons (Jozefowicz-Simbeni & Israel, 2006). Additionally, not informing parents of their rights is a passive way to deny services to students and families. Having an uninformed parent is problematic because it is up to parents to request services guaranteed through the McKinney-Vento Act (DeBradley, 2008).

Teacher perceptions may also inhibit a homeless child's learning experience. Homeless children often report that they are automatically placed in lower-level classes or groups and are assumed to be low-achievers due to their economic status (Drewes & Schaefer, 2010). If homelessness is seen as a reflection of individual weakness rather than as result of a wide variety of societal factors, teachers may blame parents or even the children for academic struggles (Powers-Costello & Swick, 2008). They may think children who are homeless lack motivation or even ability to succeed (DeBradley, 2008). Homeless children are often misunderstood and disciplined inappropriately through placements in Disciplinary Alternative Education Programs (DAEP) and in-school suspensions (ISS) (Herrington, Kidd-Herrington, & Kritsonis, 2006). Hence, homelessness often constrains life opportunities and limits access to resources required for healthy development and successful functioning. Schools can provide interventions that help homeless children adapt and develop skills to promote strong relationships and academic achievement.

Chapter 3: Implications for School Counselors

The bulk of research regarding child homelessness revolves around community-related services. Local family support groups, clinics, and welfare agencies are recognized as offering assistance to homeless families. Less discussion exists concerning the aid schools can supply to address their needs. However, schools can play a critical role in providing support to homeless children and their families. Due to the wide-range of negative consequences previously discussed, a comprehensive program of services that includes a focus on the school context can be beneficial in supporting homeless children.

The literature on issues of homelessness and schools has typically been associated with discussions about interventions delivered by principals, teachers, and social workers (Miller, 2008). While these professionals are valuable, factors exist that may hinder their effectiveness. Principals and teachers often do not have the necessary training and awareness to address the effects of homelessness. University and professional development programs are inclined to concentrate on subjects such as developing curriculum and instructional agendas rather than preparing principals and teachers to handle unique circumstances that require a considerable sensitivity. While social workers are trained specifically in dealing with issues of homelessness, they may struggle with providing support to homeless children due to the large population of students they manage. Typically, one social worker oversees multiple schools. As a result of their heavy workload, social workers often tend to develop impersonal relationships with students and families.

A school counselor is in a unique position to attend to the issues that homeless children face. Counselors have the advantage of developing personal relationships with all students at their schools. Contrary to school social workers, school counselors focus their attention on just one school. This benefit allows the counselor to personally know the students who are homeless and to recognize their needs. As a result of thorough needs assessments with individuals as well as the whole school, targeted and school-wide interventions can be implemented to address the concerns relating to homelessness. Additionally, counselors receive the proper training to develop the knowledge, awareness and the skills that are critical in assisting homeless students. They are trained in multicultural counseling, which offers a broader worldview and a better understanding of societal influences that affect children's well-being (Amatea, 2007). Thus, counselors have the skills to block and counter the blaming of homeless children by school staff and others that may result from stereotypes and deficit views. Instead school counselors are capable of initiating collaboration among teachers and parents to produce solutions for the academic achievement of children who are homeless.

A system's approach to intervention is recommended by the American School Counselor Association's (ASCA) Four Components of a Comprehensive, Developmental School Guidance and Counseling Program. This program calls for the counselor to not only respond to a small percentage of students but to also reach every student in the school through involving all school personnel (American School Counseling Association [ASCA], 2003). Creating a school atmosphere that promotes diversity and acceptance results in a positive and successful learning environment for all students. By addressing

student needs on multiple levels, schools are better equipped to provide support that improves the well-being of children who are homeless. ASCA's four components include guidance curriculum, responsive services, individual planning, and systems support.

Guidance Curriculum

Guidance curriculum encompasses education and prevention with the counselor providing support for all the students in the school. By developing and implementing lessons designed to promote competencies of knowledge and skills, counselors can reach all students (ASCA, 2003). For children who are homeless, it can be extremely difficult to feel safe at school and find a sense of belongingness in the school community. Research has found that a positive classroom climate, peer support, cooperative learning, and encouraging teacher-student interaction are highly correlated with academic achievement (Knoff, 2005). Therefore, a goal of the school counselor is to raise awareness and instill sensitivity in the peers of homeless children so that the learning environment is both safe and inviting to homeless students. The school counselor may choose to focus classroom guidance activities on building social skills and classroom community among the students. While these lessons may not directly address the issue of homelessness, they do attend to the fears and social isolation experienced by homeless children.

One example of a successful evidence-based prevention program is the "Stop and Think" model (Baggerly, 2004). These weekly social training lessons involve discussions on positive social skills, offer opportunities for modeling appropriate

behaviors and allowing for practice through role-playing, and provide performance feedback. The counselor creates a safe environment for students to question and discuss what appropriate friendship-behaviors look like in an inclusive community. As students explore healthy ways of interacting and decision-making with peers, they can develop appropriate social strategies. A caveat is that classroom teachers must be sure to review the lessons on a regular basis. It is important that these skills are integrated and reinforced by everyone on the school staff. Without teacher support, the probability of lasting changes is unlikely.

Creating a welcoming school and classroom environment using the “Stop and Think” program can increase social acceptance and therefore decrease homeless children’s anxiety and aggression. By spending less time worrying about tense relationships with teachers and classmates, children who are homeless are better able to focus on learning. The “Stop and Think” program has been successfully implemented in schools with diverse, multi-cultural groups (Knoff, 2005). While more research needs to be done regarding the impact of the program on children who are homeless, “Stop and Think” has been found to effectively create a positive learning environment for children experiencing severe poverty (Knoff, 2005).

To specifically address the issue of homelessness, the school counselor can utilize children’s picture books as resources that will not only engage children in learning about the issues but also promote opportunities for dialogue. The sensitive topic of homelessness should not be avoided but instead be carefully introduced early on in children’s development. Children’s literature is an effective way to initiate discussions

and provide accurate information regarding social issues through the portrayal of concrete examples. In a safe environment, books promote the chance for children who are homeless to take part in the conversations. Children who are homeless are able to relate to the characters in the book and therefore are empowered to speak up about their own experiences. Moreover, students in the classroom begin to recognize stereotypes, which is important in developing unbiased attitudes (Marshall, 1998). As they listen, the students develop a better understanding of what being homeless looks like and are encouraged to ask questions. Additionally, homeless children are able to develop healthy coping skills as they observe how the characters in the books handle and solve their problems (Jackson & Nelson, 2002). Thus, children who are homeless see beyond the negative stereotypes they may be accustomed to regarding homelessness. As a result, their self-esteem increases, which is correlated to an improvement in academic achievement (Baggerly & Jenkins, 2009).

Examples of appropriate children's books dealing with child homelessness include Eve Bunting's Fly Away Home and Monica Gunning's A Shelter in Our Car. Bunting's picture book presents the story of a boy who shares what it is like to live invisibly in an airport with his father. Gunning's book involves a girl who lives with her mother in an old car. Both books portray a realistic and serious tone; yet at the same time, they depict a hopeful attitude in the midst of the difficult conditions. These books foster an appreciation of each child's own uniqueness, which leads to a higher likelihood that children will reach their full potential (Marshall, 1998). As discussions generate new

awareness of diverse issues, the school counselor fosters an environment that is accepting of all students, including students who are homeless.

Responsive Services

Responsive services consist of activities that allow the school counselor to meet the individual students' immediate needs. These needs typically occur as a result of life events or situations and conditions in their lives (ASCA, 2003). For a child experiencing homelessness, individual and group counseling are interventions that can effectively address psychological and social effects and help increase academic success.

Individual counseling provides an opportunity for the school counselor to meet with a child experiencing harmful effects of homelessness and to uniquely address specific needs. Counselors are effective in providing support and a healthy adult relationship to homeless children who may be experiencing much hardship outside as well as in the schools. Homeless children often do not have nurturing relationships with adults because of the stressful dynamics at home. As school counselors work with homeless children to develop trust, they encourage and motivate children, thus building resiliency. In general, children are naturally resilient and can overcome significant obstacles if protective factors are in place (Shepard & Booth, 2009). By providing adult support and teaching coping skills, children who are homeless can fight against the effects of depression and anxiety that result from difficult homeless conditions (Landow & Glenwick, 1999).

Often times, attention is given to fixing the child who is homeless, whether it is to eradicate the violent behaviors or to treat the tendency to withdraw. However, studies

show that homeless children have identifiable strengths even in the midst of extremely unfavorable environments (Israel & Hernandez, 2008). Exploring children's positive characteristics is beneficial for enhancing successful development and improving self-efficacy. A child's belief in his or her effectiveness may be a protective factor that enhances the ability to withstand stress and cope adaptively when facing harsh circumstances (Landow & Glenwick, 1999). Strengths to focus on may include the extent to which children who are homeless are outgoing, active, and helpful (Israel & Hernandez, 2008). Pinpointing these positive traits in children who are homeless is likely to increase self-esteem.

In order to promote positive coping strategies, school counselors can incorporate play therapy in their interventions. By providing unconditional positive regard, empathy, and genuineness, the school counselor creates a safe environment for a child who is homeless to express concerns through play (Baggerly, 2004). This nondirective type of counseling allows the child to explore any topic without a fear of consequences and is especially beneficial for a child who has difficulty expressing thoughts and feelings. Play therapy has been shown to reduce symptoms resulting from trauma such as domestic violence as well as decrease internalizing and externalizing behavior problem (Baggerly & Jenkins, 2009; Drewes & Schaefer, 2010). As a result, children who are homeless are better able to develop their skills for academic achievement.

While research on play therapy has not identified this intervention as evidence-based according to the most rigorous criteria, play therapy does have sufficient empirical base to support its effectiveness in addressing issues of diverse populations (Drewes &

Schaefer, 2010). One study found that homeless children who received weekly sessions for an average of 14 sessions of child-centered play therapy had significant decreases in classroom behavioral problems and increases in self-esteem (Baggerly & Jenkins, 2009). The homeless children developed emotional security, the ability to accommodate and respond constructively to others, and increased self-control. However, the research study did not find statistical increases in areas of children's organization of their experience. The lack of improvement in areas relating to purposeful attention, connecting to experiences, and engaging cognitively with peers, which may be on a higher level of cognitive ability, might be due to the short number of sessions completed. The high rate of mobility of homeless children resulted in many missed sessions due to absences or children moving. One study determined that 32 sessions were ideal for accomplishing significant improvement for children with behavior and emotional struggles (Baggerly & Jenkins, 2009). The findings are encouraging since this study is the first to show research that demonstrates improvement in homeless children's classroom learning development after receiving play therapy.

Another promising approach to intervention is group counseling, which can meet the needs of multiple students at one time. Fewer homeless children report having a close friend or other supportive relationships than children who are not homeless (Grothaus, Lorelle, Anderson, & Knight, 2011). Bringing together a small group of students who are all experiencing homelessness offers support through the opportunity to form bonds with those who can better understand them. Being able to relate with other children reassures them that they are not alone in their experiences. Landow and Glenwick (1999) found

that the social support from the presence of peers reduced the negative effects of stress. In a study of 384 children who had been exposed to a traumatic experience, social support interventions reduced posttraumatic stress symptoms by 29% (La Greca, Silverman, Lai, & Jaccard, 2010). Group work can also provide the opportunity to develop and practice skills that promote healthy conflict resolution and problem solving. Group counseling offers a safe space for children who are homeless to share their anxieties and frustrations with their experiences and learn how to cope and interact positively with others.

The school counselor can use these group sessions to directly teach how to cope with stress in difficult circumstances. The ability to relax is fundamental in a child's performance of daily tasks (Davey & Neff, 2001). The counselor is able to provide homeless children with information on stress and its effects and help them become aware of the tension in their bodies as a result. Through basic stress management techniques, such as deep breathing and muscle relaxation, children can develop positive coping skills. So when they are in stressful situations, whether it is in the classroom working on a difficult assignment or interacting with peers, homeless children have the skills to control their anxiety. These strategies for managing stress may also boost self-esteem and social competency, which reduces maladaptive behavior problems (Davey & Neff, 2001). Again, it is important to point out the importance of making sure the children who are homeless have a place to routinely practice and reinforce these skills.

Studies have shown that children may benefit from Progressive Muscle Relaxation (PMR) and Imagination (Klein-Hebling & Lohaus, 2002). Children

experiencing high anxiety are taught PMR to tense and relax specific muscle groups in order to calm down. In Imagination, children are guided through a fantasy journey that leads them from the present environment to a peaceful place in their minds. These strategies decrease somatic or psychological symptoms and also counter unproductive emotional responses due to asthma or anxiety (Klein-Hebling & Lohaus, 2002). Research designates that asthma, which is common among children who are homeless, can be triggered and intensified by stress (Dobson, Bray, & Kehle, 2005). Therefore, relaxation training can be a beneficial intervention for handling or preventing asthma symptoms. However, research studies have tended to focus on showing positive outcomes in short-term conditions. More investigation needs to be done to determine lasting effects when the intervention is extended over time (Klein-Hebling & Lohaus, 2002).

Individual Planning

Individual planning addresses students' personal goals and future plans (ASCA, 2003). These activities involve guiding students through the development of education, career, and personal goals as well as interpreting assessment results with students and parents (Jackson & Nelson, 2002). School counselors can instill a sense of hope and purpose in the lives of children experiencing homelessness. These children are often burdened by the worries of their present living conditions, causing them to feel stuck and hopeless about their future. Many do not even consider the opportunities they have for the future since they can focus only on their present concerns. Therefore, school

counselors play a significant role in helping the children who are homeless plan for achievement and future success.

School counselors' awareness of homeless children's basic needs and their knowledge of a wide range of school programs and activities help them link students to appropriate resources. For example, providing a free and reduced breakfast and lunch program can make a difference in supplying the necessary nutrition children need to grow, develop, and pay attention in the classroom. While research is cautious to directly link nutrition and academic achievement due to a variety of other factors such as positive parental involvement, most studies show a general increase in cognitive development and academic achievement as a result of adequate nutrition (Behrman, 1996). For many homeless children, school-provided meals are the most consistent source of nourishment they receive.

In addition, other resources that may lead to academic growth include after-school programs and tutoring. Lauer et al. (2006) reviewed 35 studies and reported that children in poverty who attended after-school programs significantly improved in both reading and mathematics scores. Moreover, Collaborative for Academic, Social, and Emotional Learning (CASEL) investigated and reviewed 73 after-school programs to evaluate their effectiveness on personal and social improvement of children with troubling behaviors (Durlak & Weissberg, 2007). A meta-analysis of 73 programs resulted in findings that showed children who participated in after-school programs improved in their expression of positive feelings and attitudes, indicators of behavioral adjustment, and school performance. The programs that were found to be evidence-based had effect sizes

ranging from 0.24 to 0.35, resulting in children with improved self-confidence and self-esteem, school bonding, positive social behaviors, school grads, and achievement test scores. Problem behaviors such as aggression, noncompliance, and conducts problems were also reduced. After-school programs resulted in 27% more children achieving higher grades and 37% more children attaining higher achievement test scores (Durlak & Weissberg, 2007).

The presence of healthy adults along with meaningful and engaging activities increases children's academic achievement (Shepard, & Booth, 2009). A quality afterschool program can provide hope and structure as homeless students interact with adult role models and participate in meaningful activities with peers. Children experiencing homelessness need this stability to counter the unsteadiness of their mobile lives. After-school programs, such as Heart to Heart, provide safe places for students to express themselves through the use of art. Healing may occur from the healthy relationships with adults in addition to a sense of accomplishment by creating something unique (Shepard & Booth, 2009).

An after-school tutoring program called Hot Meals & Homework (HMHW) has been found to decrease the number of course failures of homeless children, although grade-point averages remained unchanged (Grothaus et al., 2011). A two-year study indicated that the mean number for failing grades received in the fourth marking period were significantly lower than the mean for the first marking period, with a medium effect size of 0.77. This weekly program, which is run by an agency that serves homeless families in an urban, mid-Atlantic region, pairs homeless children with volunteer tutors

who provide homework assistance in addition to the opportunity to play educational games. The children are also fed a nutritious meal that is provided by a local restaurant. Although limited research exists on the effectiveness of after-school programs initiated by school counselors, counselors can use these plans and outcome results to model and apply to their own programs. A school counselor has the ability to engage the assistance of others to set up effective after-school programs that enrich homeless children's lives.

Systems Support

The final component of ASCA's National Model, systems support, targets the administration and management to enhance the students' well-being. By taking on leadership roles in the schools and communities, school counselors affect change on a systematic level (ASCA, 2003). Counselors have the ability to collaborate with teachers, parents, and community personnel to provide the best learning environment for the children. Homeless children therefore benefit greatly when counselors instill a climate of open-mindedness and reduce disapproving attitudes of homelessness based off of negative stereotypes.

As influential role models, teachers play a significant role in a child's educational success. They impact a child's sense of self-efficacy, especially regarding academic achievement. As homeless children see that high expectations are placed on them, they will be increasingly motivated to achieve (Powers-Costello & Swick, 2008). Therefore, it is important that a school counselor works with teachers to create the most supportive learning environment for children who are homeless. Counselors can help teachers examine the different barriers that may negatively impact relationships with homeless

students. Research indicates that an effective cultural competence-building activity involves experiential learning, which includes immersion experiences within the community (Grothaus et al., 2011). Encouraging faculty to take part in community events develops awareness of issues that homeless families encounter and is advantageous in building rapport with parents and children.

Through in-service trainings, school counselors have the opportunity to educate staff about information of homeless issues and the existing school policies that guarantee rights to homeless children. Many teachers are often unacquainted with the McKinney-Vento Act, which can hinder them from providing the assistance necessary for welcoming children into the classroom. Knowledge creates an awareness that produces sensitivity. Having compassion can decrease negative stereotypes and views and reframe teacher perceptions that might have hindered student achievement (Powers-Costello & Swick, 2008). Teachers begin to understand how to help homeless students find a place in the classroom and change unengaged and disruptive children into active group participants in the classroom (Walker-Dalhouse & Risko, 2008). When teachers believe in their students who are homeless, the students in return feel that they belong in the classroom and are increasingly motivated to work.

A common misconception about homeless families is that the parents are not concerned about their children's academic success. However, studies show that homeless parents do want to be a part of their children's education (Jozefowicz-Simbeni & Israel, 2006). However, they often encounter many demanding life stressors they must deal with. Finding jobs and housing may consume most of their time; school becomes less of

a priority. Prioritizing their needs and determining which issues to address becomes a difficult task. Additionally, alienated parents who have grown accustomed to being negatively judged by others may be distrustful of the schools that they perceive as unsupportive of their children's success (Buckner, 2001). Consequently, homeless parents are less likely to proactively turn to the school and request for assistance.

Reaching out to parents of homeless children is advantageous in creating a positive learning environment. If parents trust the schools, children are more likely to trust them as well. A school counselor has the ability to create a more family-centric school climate that encourages parents who are homeless to be involved. Parents need to feel welcomed and comfortable to step into the school. Counselors provide this by actively learning about families of the homeless children and the communities where they reside (Van Velsor & Orozco, 2007). As the counselor understands the homeless families and their needs, he or she can develop school programs and activities that encourage families to participate. Providing flexible conference times and transportation to and from school also demonstrates to the parents that they are valued. It is important that during the conferences, parents hear about strengths of their children (Amatea, 2007). School counselors can reinforce the need to the rest of the school staff to display genuine care to the children, which is crucial for building trust between parents and schools. Additionally, since it is up to the parents who are homeless to request services required under the McKinney-Vento Act, counselors should inform parents of their rights under the policy and remain in close contact to make sure they get the services they need.

Finally, a school counselor promotes an optimum learning environment for homeless children by developing working relationships with those in the community, such as social workers, homeless liaisons, and shelter staff. A homeless child's personal life is not distinct from school life; the stress that a child who is homeless encounters outside of school is brought into the classroom. Therefore, by keeping an open line of communication with personnel in the community, school counselors can collaborate to distinguish what resources a child who is homeless needs at school as well as in the community (Amatea, 2007). For example, the school counselor may work with shelter staff to set up homework sessions at the shelter or to send appropriate resources to assist in completing homework. If supplies are needed, the school counselor can work with the community to set up fundraising activities. Open and consistent communication between the school and the community generates a value to homeless children that school is a place to seek assistance and gain success.

Chapter 4: Future Research Directions

Current research includes a vast collection of information concerning the impact of homelessness on children. However, limited research focuses on the outcomes of programs in the school counseling field that serve children and families experiencing homelessness (Grothaus et al., 2011). The U.S. Department of Education requires all public school counseling programs to be evidence-based (Drewes & Schaefer, 2010). Most of the interventions mentioned in this report require more rigorous research by incorporating more diverse and randomly assigned sample groups, higher sample sizes as well as the use of control groups. Furthermore, many of the interventions that were studied were based on the general population of children or on populations that had similar characteristics of homeless children, such as housed low-income children or children who have experienced violence at home. Therefore, studies on these interventions need to focus directly on children who are homeless in order to test the effectiveness of the interventions on this population. However, it will be more difficult to execute the research, due to the transient nature of children who are homeless. Nevertheless, it is necessary to investigate the effectiveness of applying the ASCA National Model to the specific population of children who are homeless. As schools shift from a best practice mentality to a data-driven and evidence-based practice orientation, school counselors will be required to choose and implement interventions that have empirical evidence to support their effectiveness. Therefore, future research needs to incorporate rigorous studies so that school counselors can effectively assist children who are homeless.

Additionally, it should be noted that not all homeless children fit under the category of needing a great extent of intervention. Homeless children are a heterogeneous population; there is substantial variation in the effects children who are homeless experience, and therefore researchers and school counselors cannot generalize the effects to all individuals. Therefore, it would be advantageous to study the protective factors that draw out the resiliency of children who are homeless. Results of these studies would provide assistance for school counselors in offering additional interventions for homeless children who have more difficulties. As the population of children who are homeless continues to grow, addressing these important issues may be beneficial in providing effective care for children who are homeless.

Conclusion

Children who are homeless experience numerous negative consequences as a result of facing the challenges of living in homelessness. The physical and psychological effects due to homelessness impact how homeless children relate to peers at school and often hinder their academic achievement. Additionally, homelessness has lasting effects on family stability that may magnify familial dysfunctions, even after regaining more stable housing (Park, 2004). In fact, one in five adults who are currently homeless were homeless as children (Baggerly, 2004). Therefore, addressing these effects during a child's development can shift future outcomes. A school counselor promotes change through connecting counseling and education. The main goal of a school counselor is to further academic success of all children. For children who are homeless, it is beneficial to address the emotional and social barriers that arise from difficult home environments.

Research supports the effectiveness of the suggested comprehensive model in increasing academic achievement and building positive student behavior in the general population (Brigman & Campbell, 2003; Sink & Stroh, 2003). Anxiety and depression that affect learning are reduced when school counselors address children's social and emotional issues (Whiston & Sexton, 1998). Likewise, the holistic approach of implementing ASCA's National Model is expected to be more efficient in addressing the needs of homeless children than merely providing individual counseling. Homelessness does not just fall under the category of a lack of housing situation. As Drewes & Schaefer (2010) explain, homelessness is a multidimensional issue that affects the community and involves an interplay of concerns ranging from drug abuse to child

maltreatment and neglect. Therefore, no single intervention has been able to effectively treat the symptoms that arise in a child experiencing homelessness. School counselors who are willing to create a comprehensive program with an overall positive school environment may promote learning and school satisfaction for children who are homeless that will result in a successful future.

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