

# Indiana



## America's Youngest Outcasts: State Report Card on Child Homelessness

Indiana ranks 30th in the nation in child homelessness. This rank is a composite of the number of children currently homeless in the state, an assessment of how children are faring in various domains (i.e., food security, health, education), the risk of children becoming homeless, and the state's planning and policy efforts.

### Extent of Child Homelessness

More than 13,012 of Indiana's children experience homelessness each year according to the data collected by the McKinney-Vento Educational Programs.<sup>1</sup> Indiana ranks 27th in the number of homeless children and 12th in the percentage of children who are homeless.<sup>1</sup> Of the 285,000 children living in poverty in Indiana, one out of every twenty (5%) are homeless.<sup>2</sup>

### Age and Race/Ethnicity

Indiana has 285,000 children living in poverty. Sixty-three percent of Indiana's children living in families with incomes below the poverty level are White, non-Hispanic, 24% are Black, non-Hispanic, and 12% are Hispanic.<sup>5</sup>

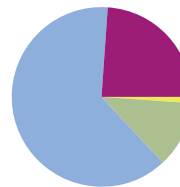
#### Ages of Homeless Children<sup>1</sup>

Under 6 years <sup>3</sup>	5,465
Grades K–8 (enrolled)	6,251
Grades 9–12* (enrolled)	1,296
<b>Total Homeless Children</b>	<b>13,012</b>

\*These totals DO NOT include approximately 180 homeless, unaccompanied youth.<sup>4</sup>

#### Race/Ethnicity

\*Among children living in poverty. Not available for homeless children.



- White (63%)
- Black (24%)
- Asian (1%)
- Native American (0%)
- Hispanic (12%)

### \* INDIANA'S RANKS

	RANK
Extent of child homelessness	12
Child well-being	47
Risk for child homelessness	29
State policy and planning	Inadequate
<b>Overall rank</b>	<b>30</b>

\*States ranked 1-50 with 1 being best and 50 worst.

### Housing and Income

Housing is a basic right and essential for the healthy growth and development of children. However, in every state, housing costs outpace wages and public assistance for low income citizens.

- A two-bedroom unit priced at the Fair Market Rent (FMR) falls outside of the financial reach of a full-time worker earning minimum wage in Indiana.<sup>6</sup> One wage earner earning the state's minimum wage (\$6.55) would need to work 79 hours per week for 52 weeks per year to afford a two-bedroom apartment at FMR.<sup>7</sup>
- Even with two full-time minimum-wage earners, decent housing is just barely attainable in most places in Indiana.
- The average-wage earner in Indiana fares slightly better. One wage earner earning the state's average wage for renters (\$11.53/hour) would need to work 45 hours per week for 52 weeks per year to afford a two-bedroom apartment at FMR.<sup>7</sup>

For a typical homeless family, which consists of a single mother with two children, housing is even more difficult to attain:

- The average monthly income for a single mother in Indiana who receives public assistance is less than \$510, or roughly 50% of the Federal Poverty Level (FPL).<sup>9</sup>
- This family can afford to pay \$153 per month in rent, leaving a deficit of \$521 from the amount needed to rent a two-bedroom apartment at the state's average FMR.

For families in this situation, even a seemingly minor event can trigger a catastrophic outcome, pushing a family onto the streets.

#### Indiana's Housing and Income Gap<sup>7</sup>

Minimum hourly wage:	\$.65 <sup>8</sup>
Average hourly wage for renters:	\$11.53 <sup>7</sup>
Hourly wage needed to afford 2-BR apartment:	\$12.95 <sup>7</sup>
Fair Market Rent for 2-BR apartment:	\$674 <sup>7</sup>

Tell us about your state: visit [www.HomelessChildrenAmerica.org](http://www.HomelessChildrenAmerica.org) to find information, share ideas, and help end child homelessness



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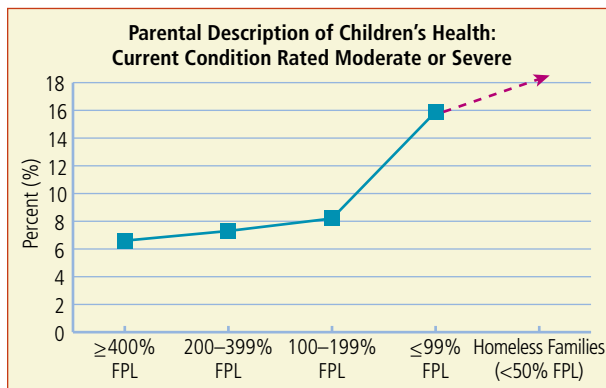
## Food Security

The U.S. Department of Agriculture estimates that one in 24 of Indiana's households have very low food security, indicating that they have experienced hunger.<sup>10</sup> The prevalence of very low food security in Indiana is higher than the national average of one in 26. Households living in poverty and headed by a single woman with children are especially vulnerable to very low food security. When these households become homeless, they represent the extreme end of the food insecurity range in Indiana.<sup>10</sup>



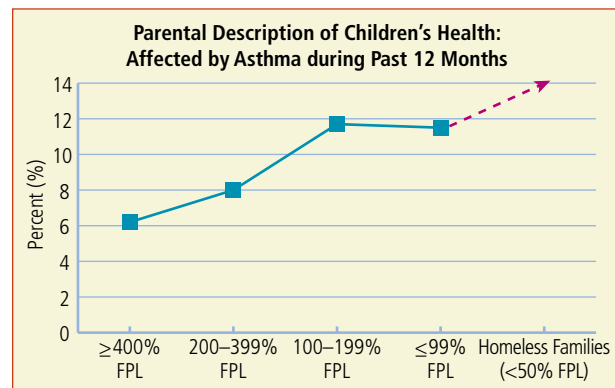
## Health

Compared to middle-income families, homeless families in Indiana suffer proportionately more moderate to severe health problems, including asthma, traumatic stress, and emotional disturbances:



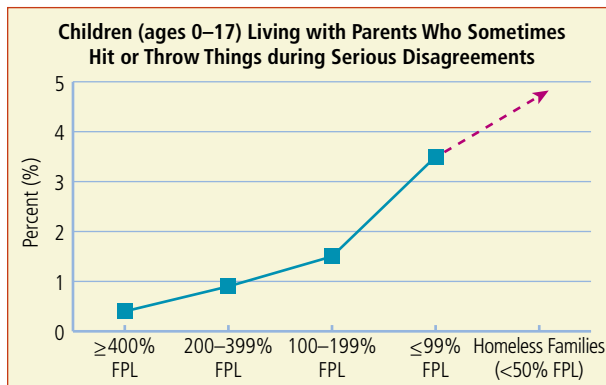
### Overall Health Problems

Homeless families are more than twice as likely as middle-income families (18% vs. 7%) to report that their children have moderate or severe health problems such as asthma, dental problems, and emotional difficulties.<sup>11</sup>



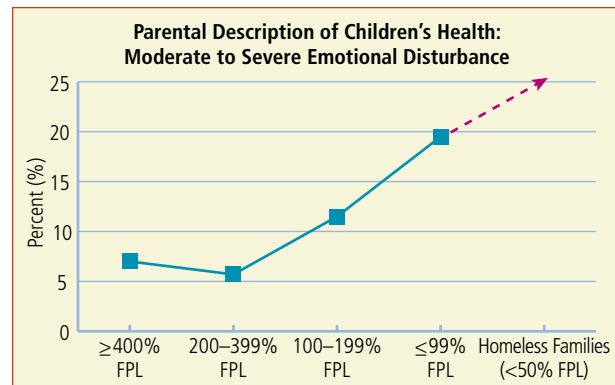
### Asthma

Indiana's children without homes are more likely to have asthma than those from middle-income families. While 8% of Indiana's middle-income families report that their children have been affected by asthma in the past year, 12% or more of homeless families include a child who had asthma during the past 12 months.<sup>12</sup>



### Traumatic Stress and Violence

Homeless children are five times more likely to witness violent behavior by their parents as children in middle-income families (5% vs. 1%).<sup>12</sup>



### Emotional Disturbances

Six to seven percent of children in middle-income families are described by their parents as having moderate to severe emotional disturbances. Approximately four times as many children in homeless families in Indiana (26%) were reported as having moderate or severe difficulties with emotions, concentration, behavior, and getting along with other people as compared to children from middle-income families.<sup>12</sup>



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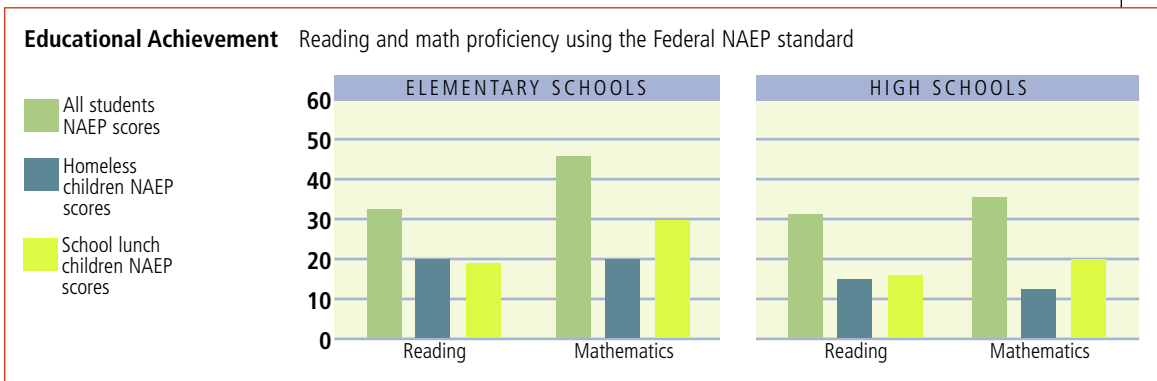


## Education

The reading and math proficiency of homeless students in Indiana is measured by state assessments, which can be converted into standardized National Assessment of Educational Progress (NAEP) scores. These scores suggest that homeless students in Indiana have significant deficiencies in both reading and math:

- Thirty percent of Indiana’s homeless students enrolled in grades three through eight took the 2005 state reading assessment.<sup>13</sup> Of those, 51% were proficient in reading, by NAEP standards. These students were located in districts that received Mc Kinney-Vento subgrants.<sup>13</sup>
- Similarly, approximately 15% of Indiana’s 1,296 homeless high school students were tested and 41% of those were judged proficient in reading.<sup>13</sup>
- Thirty percent of homeless students in grades three through eight were tested in mathematics. Of those, 54% were proficient in mathematics by NAEP standards.<sup>13</sup>
- Fifteen percent of homeless high school students were tested in mathematics. Of those, 28% were judged proficient by NAEP standards.<sup>13</sup>

Measured by the federal National Assessment of Educational Progress (NAEP) standards, the state’s homeless children rank below all children in Indiana in reading and mathematics proficiency.<sup>13</sup>



Severe economic consequences accompany the lack of educational achievement among Indiana’s homeless children. Poverty strongly correlates with educational deficiencies. Homeless women with children are often not well-educated themselves and childhood homelessness has profoundly negative effects on educational opportunities. Researchers at Columbia University have found that:

One of the best documented relationships in economics is the link between education and income: more highly educated people have higher incomes. Failure to graduate from high school has both private and public consequences: income is lower, which means lower tax contributions to finance public services.<sup>14</sup>

The difference in lifetime earnings between those with a high school degree and those without is, on average, approximately \$200,000. Researchers have calculated the additional costs of education necessary to achieve higher high school graduation rates and the increases in amounts paid back to society in the form of taxes and the like. The results suggest that net lifetime increased contributions to society associated with high school graduation are about \$127,000 per student.<sup>14</sup>

If we assume on the basis of their test scores a high school graduation rate of less than 25%, then the 1,296 homeless high school students in Indiana, as a group, will lose \$190 million in lifetime earnings and society will lose \$123 million in potential contributions from them.<sup>14</sup> Other studies have shown that they will have shorter and less healthy lives, and are very likely to pass on to their own children the diminished opportunities that accompany poverty.<sup>14</sup>

Difference in lifetime earnings: HS degree vs. without	\$200,000
Net lifetime increased contributions to society with HS degree . . . (per student)	\$127,000
Number of homeless HS students in Indiana	1,296
High school graduation rate for homeless children	< 25%



**IN loss in lifetime earnings** . . . . . **.\$190 million**  
**IN loss in contributions to society** . . . . . **.\$123 million**



# Indiana



## Risk Factors for Child Homelessness in Indiana

To determine the risk of a child becoming homeless in each state, we designed an index that takes into account various state indicators associated with family homelessness. When we consider risk factors for homelessness, we often focus on individual vulnerabilities, such as a recent pregnancy or hospitalization of a parent for a mental health or substance use problem. However, these individual factors only tell us *who* is more likely to be affected by adverse economic and housing factors. *Why* someone becomes homeless is determined by structural factors such as the lack of affordable housing and employment opportunities. As a result, we designed a risk index to focus on the structural determinants of family homelessness. This index is comprised of state-level indicators in three domains: socio-economic descriptors, housing market factors, and generosity of benefits.

To construct the index, nine factors within the three domains were ranked and then states were scored according to their quintile (one point for the top fifth of the states and up to five points for the worst fifth of the states). Domain scores were then combined to create an overall score from five to 45 based on the total of the one to five rankings for the nine factors. The final step was to rank the states by their overall score. The final ranking provides a picture of which states have structural characteristics that may make them more or less vulnerable to high rates of child homelessness. A lower ranking indicates less vulnerability, while a higher ranking indicates greater vulnerability.

Indiana ranks 29 out of the 50 states on their vulnerability to high rates of child homelessness.



## Indiana's Planning and Policy Efforts

### STATE PLANNING

Over the past several years, federal, state and local governments have engaged in planning activities to address and end homelessness. These efforts have taken the form of developing state interagency councils on homelessness and 10-year plans to end homelessness and are summarized below for Indiana.

#### What, if any, are the state's interagency efforts on homelessness?

The Indiana Interagency Council on Homelessness consists of representatives from eleven agencies, including the Family and Social Services Administration and the Indiana Department of Education.<sup>33</sup>

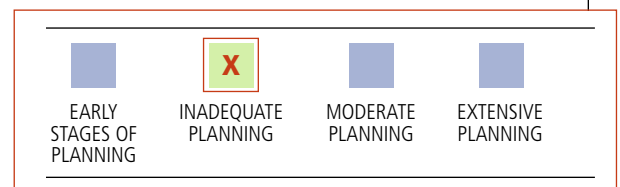
Representatives from Indiana have attended two Policy Academies—in November 05 on homeless families with children, and in May 2003 on individuals experiencing chronic homelessness. After the Policy Academy on individuals experiencing chronic homelessness, the Indiana Interagency Council on the Homeless drafted the *Action Plan to End Chronic Homelessness*. Although the focus of the report is on individuals experiencing chronic homelessness, it states that the needs of homeless families must also be addressed. Included among its 18 strategies are goals to create better discharge plans when individuals leave institutional settings, and to increase family homelessness prevention, the availability of supportive housing, the availability of supportive services, training and employment opportunities for individuals experiencing chronic homelessness, access to mainstream resources, and state investment in homelessness.<sup>33</sup>

#### What statewide ten-year planning efforts have taken place?

At the time of this publication, no statewide ten-year planning efforts have taken place in Indiana.

#### State Planning Ranking:

We have classified Indiana's state planning efforts as "Inadequate." For more information on the state classification process, see *America's Youngest Outcasts: A State Report on Child Homelessness* or visit [www.HomelessChildrenAmerica.org](http://www.HomelessChildrenAmerica.org).



# Indiana

## STATE POLICIES



### Housing

States can address the housing needs of low-income families through short and long-term strategies. One measure of a State's ability to immediately house families in need is the supply of emergency shelter, transitional and permanent supportive housing slots. Data are available to compare states on this measure. Indiana currently has 683 units of emergency shelter, 652 units of transitional housing, and 135 units of permanent supportive housing designated for families.<sup>16</sup>

Section 8 vouchers and public housing are two of the primary ways for homeless families to secure affordable housing. An analysis of waiting list data from Public Housing Authority (PHA) annual plans submitted to the U.S. Department of Housing and Urban Development<sup>17</sup> reveals that over 80% of families on these lists have extremely low incomes and nearly all have children.<sup>18</sup>

- In Indiana, approximately 90% of the households on the Section 8 waiting lists and 67% on the public housing waiting lists are families with extremely low incomes.<sup>17</sup>

PHAs may determine which subpopulations, if any, are given priority on their waiting lists. Giving priority to families experiencing homelessness and/or survivors of domestic violence would help to alleviate the negative impacts of homelessness on children and the strain on the shelter system.

- Most Public Housing Authorities in Indiana currently do not give priority to survivors of domestic violence and/or people experiencing homelessness on their public housing waiting lists, but not on their Section 8 waiting lists.<sup>17</sup>

Over the long-term, local and state housing trust funds are one way that states can develop their affordable housing stock. Indiana is one of 38 states that has a state housing trust fund.<sup>19</sup>

#### What would it cost for the state to house all homeless families at Fair Market Rent?

Section 8 housing vouchers could, if generally available, fill the gap between family income and housing costs. Unfortunately, current funding for the voucher program meets the needs of only one-quarter of homeless families. Providing housing at FMR for homeless families in Indiana would cost an additional \$5,600 per family, an annual total cost of \$30 million dollars, or less than one percent of the state budget.<sup>15</sup>



### Income

#### Wages

Indiana's minimum wage is \$6.55/hour.<sup>8</sup> This wage covers only 50.6% of the hourly wage needed to afford a two-bedroom apartment at Fair Market Rent in Indiana. Families receiving the maximum TANF benefit would need to spend 234% of their income on rent to afford a two-bedroom apartment at Fair Market Rent. Obviously, this is an impossibility.<sup>20</sup>

An Earned Income Tax Credit can give families living in poverty an economic "boost" that may help reduce child poverty and increase a family's take-home earnings.<sup>21</sup> Indiana is one of 21 states that has a refundable State Earned Income Tax Credit.<sup>22</sup>

#### Child Care

Child care is essential for families seeking to secure and maintain work, search for housing, attend school and job training opportunities and more. The average annual cost for child care for a four-year old in Indiana is \$5,408, which is slightly lower than the national average of \$5,719.<sup>23</sup>

Every state receives funding through the Child Care and Development Fund (CCDF) to provide child care assistance to low-income families. Indiana families report that they used their voucher for the following reasons:<sup>24</sup>

- Employment (72%)
- Training/education (8%)
- Both employment and training/education (8%)

These numbers demonstrate that child care vouchers help families engage in work and job training/education activities, a key component of a family's ability to exit homelessness.

Through the Child Care and Development Fund, states are given flexibility in determining how to prioritize the distribution of vouchers.<sup>25</sup> Indiana currently does not prioritize children who are homeless when distributing its child care vouchers.



# Indiana

## Food Security

States can help families by conducting outreach and enrollment efforts that help eligible individuals access food stamps, encourage schools to participate in school breakfast programs, and facilitate family enrollment into WIC. The chart at right describes how Indiana compares to the rest of the country:

Indiana is above the national average in terms of the proportion of eligible children enrolled in food stamps, and is below the national average among schools participating in the school breakfast program.

### Indiana Child Enrollment in Federal Nutrition Programs<sup>26</sup>

	Indiana	National Average
Food Stamp Enrollment (among eligible children)	69%	61.9%
School Breakfast Participation (among schools providing lunch)	76.7%	84.2%

## Health

Children who are uninsured are more likely than their insured peers to lack a regular source of care, to delay care, or to have an unmet medical need.<sup>27</sup> Their families are more likely to incur medical debts that lead to difficulty paying other monthly expenses such as rent, food, and utilities.<sup>28</sup> Providing children with access to health insurance is essential to helping them grow up safe, healthy, and housed.

Approximately 6.7% of children in Indiana are uninsured, compared to about 10% nationally. Indiana spends 19.1% of its total Medicaid budget on children, compared to the national average of 19.3%. Children's eligibility for Medicaid changes based on their age (see box at right).<sup>27</sup>

### Medicaid Eligibility by % of FPL:

Infants: . . . . .	200%
Children ages 1–5 . . . . .	150%
Children ages 6–19 . . . . .	150%

## Education

Under the educational provisions of the McKinney-Vento Homelessness Assistance Act, states are required to remove barriers to the school enrollment and academic success of children experiencing homelessness.<sup>29</sup> The U.S. Department of Education has identified seven barriers that state McKinney-Vento subgrantees<sup>30</sup> must report on annually. The table at right illustrates which barriers Indiana subgrantees encounter.

Indiana receives an average of \$85 per child from the federal government to address the education needs of children and youth experiencing homelessness.<sup>32</sup> There is currently no state-level funding dedicated to the education of homeless children.

### Reported Barriers to Enrollment<sup>31</sup>

Type of Barrier	% of Subgrantees Indiana	% of Subgrantees National Average
1. Eligibility for Homeless Services	28.6	27.4
2. Immunizations	28.6	28.4
3. Other Medical Records	28.6	18.7
4. Other Barriers	21.4	26.7
5. School Selection	28.6	23.3
6. School Records	35.7	28.2
7. Transportation	28.6	42.3

## Who is considered to be homeless in Indiana?

At the time of this publication, Indiana did not have a statewide definition of homelessness.

# Indiana

<sup>1</sup> Education for Homeless Children and Youth Program, Title VII-B of the McKinney-Vento Homeless Assistance Act as Amended by the No Child Left Behind Act of 2001, *Analysis of 2005–2006 Federal Data Collection and Three-Year Comparison*, National Center for Homeless Education, June 2007. Number of children includes the estimated number of children ages 0–5 who are not yet enrolled in school.

<sup>2</sup> American Community Survey. (2006).

<sup>3</sup> Estimate based on research that 42% of homeless children are ages 0–5. For more information, see Burt, M. et al. (1999). *Homelessness: Programs and the People They Serve*. Washington, DC: The Urban Institute. Retrieved from [www.urbaninstitute.org](http://www.urbaninstitute.org).

<sup>4</sup> This number was calculated by taking the total number of children enrolled in school and dividing that by 8.5 (given that kindergarten enrollments are typically half that of the other primary grades). Multiplying this number by 4 gives us the potential high school enrollment. Subtracting the McKinney Vento figure for homeless children enrolled in high school yields the approximate number of homeless, unaccompanied youth not enrolled in high school.

<sup>5</sup> United States Census Bureau. (2007).

<sup>6</sup> Fair Market Rent is defined as “the maximum chargeable gross rent in an area for projects participating in the HUD Section 8 program,” and is set at the 40th percentile of market rents for units at each bedroom size as determined by the Department of Housing and Urban Development. American Community Survey. (2006).

<sup>7</sup> National Low Income Housing Coalition. (2008). *Out of Reach 2007–2008*. Washington, D.C.: National Low Income Housing Coalition. Retrieved from [www.nlihc.org/oor/oor2008/index.cfm](http://www.nlihc.org/oor/oor2008/index.cfm).

<sup>8</sup> Minimum wages in effect as of July 24, 2008. When federal and state law have different wage rates, the higher standard applies. United States Department of Labor. (2008). Wage and Hour Division. Retrieved from [www.dol.gov/esa/minwage/america.htm](http://www.dol.gov/esa/minwage/america.htm)

<sup>9</sup> U.S. Department of Health and Human Services Office of Planning, Research and Evaluation. (2007). Policies as of July 2005: Benefits. Retrieved from [www.acf.hhs.gov/programs/opre/welfare\\_employ/state\\_tanf/reports/wel\\_rules05/wel05\\_benefits.html](http://www.acf.hhs.gov/programs/opre/welfare_employ/state_tanf/reports/wel_rules05/wel05_benefits.html)

<sup>10</sup> Nord, M., Andrews, M., & Carlson, S. (2006). *Household Food Security in the United States, 2005: Economic Research Report No. ERR-29*. Washington, D.C.: United States Department of Agriculture.

<sup>11</sup> Estimate based on research that 42% of homeless children are ages 0–5. For more information, see Burt, M. et al. (1999). *Homelessness: Programs and the People They Serve*. Washington, DC: The Urban Institute. Retrieved from [www.urbaninstitute.org](http://www.urbaninstitute.org); National Center for Health Statistics. (2003). National Survey of Children’s Health. Retrieved from [www.cdc.gov/nchs/about/major/slaits/nsch.htm](http://www.cdc.gov/nchs/about/major/slaits/nsch.htm).

<sup>12</sup> National Center for Health Statistics. (2003). National Survey of Children’s Health. Retrieved from [www.cdc.gov/nchs/about/major/slaits/nsch.htm](http://www.cdc.gov/nchs/about/major/slaits/nsch.htm).

<sup>13</sup> National Center for Homeless Education. (2007). *Analysis of 2005–2006 Federal Data Collection and Three-Year Comparison*. Retrieved from [www.serve.org/nche/downloads/data\\_comp\\_03-06.pdf](http://www.serve.org/nche/downloads/data_comp_03-06.pdf).

<sup>14</sup> Levin, H., Belfield, C., Muennig, P. and Rouse, C. (2007). *The Costs and Benefits of an Excellent Education for All of America’s Children*. New York, NY: Columbia University. p. 6. Retrieved from [www.cbse.org/media/download\\_gallery/Leeds\\_Report\\_Final\\_Jan2007.pdf](http://www.cbse.org/media/download_gallery/Leeds_Report_Final_Jan2007.pdf).

<sup>15</sup> Personal Communication to Michael Holzman by Barbara Sard, Center on Budget and Policy Priorities, June 27, 2008; National Governors Association, National Association of State Budget Officers (June 2008). The Fiscal Survey of States. Table A-2, expenditures column.

<sup>16</sup> US Department of Housing and Urban Development, Homelessness Resource Exchange. (2007). *HUD’s 2007 Continuum of Care Homeless Assistance Programs Housing Inventory Chart Report*. Retrieved from [www.hudhre.info/CoC\\_Reports/07\\_NatbedInventory.pdf](http://www.hudhre.info/CoC_Reports/07_NatbedInventory.pdf).

<sup>17</sup> Coddington, B. and Pelletiere, D. (2004) A Look at Waiting Lists: What Can We Learn from the HUD Approved Annual Plans? Research Note #04-03 and accompanying data. Washington, D.C.: National Low Income Housing Coalition. Retrieved from [www.nlihc.org/doc/Presentation-Sheets10-1-04.xls](http://www.nlihc.org/doc/Presentation-Sheets10-1-04.xls).

<sup>18</sup> Extremely Low Income refers to families who earn less than 30% of the area median.

<sup>19</sup> Brooks, M. (2007). *Housing Trust Fund Progress Report 2007*. Frazier Park, CA: Center for Community Change.

<sup>20</sup> Calculation based on Fair Market Rent for this state and TANF benefit for a family of three. See Methodology section for more detail.

<sup>21</sup> Nagle, A. & Johnson, N. (2006). *A Hand Up: How State Earned Income Tax Credits Help Working Families Escape Poverty in 2006*. Washington, D.C.: Center for Budget and Policy Priorities. Retrieved from [www.cbpp.org/3-8-06sfp.htm](http://www.cbpp.org/3-8-06sfp.htm).

<sup>22</sup> State EITC Online Resource Center. Retrieved from [www.stateeitc.org](http://www.stateeitc.org).

<sup>23</sup> Children’s Defense Fund. (2006). *Children in the States 2007*. Retrieved from [www.childrensdefense.org](http://www.childrensdefense.org).

<sup>24</sup> US Department of Health and Human Services, Administration for Children and Families, Child Care Bureau. (2006). *Child Care and Development Fund (CCDF): Report to Congress for FY 2004 and FY 2005*. Retrieved from [www.acf.hhs.gov/programs/ccb/ccdf/rtrc2004/rtrc\\_2004\\_2005.pdf](http://www.acf.hhs.gov/programs/ccb/ccdf/rtrc2004/rtrc_2004_2005.pdf).

<sup>25</sup> Child Care Bureau (2006). *Child Care and Development Fund (CCDF) Report to Congress for FY 2004 and FY 2005*. p. 7. Washington, D.C.: Administration for Children and Families, US Department of Housing and Human Services.

<sup>26</sup> Cooper, J. and Weill, R. (2007). *State of the States 2007: A Profile of Food and Nutrition Programs across the Nation*. Washington, D.C.: Food Research and Action Center.

<sup>27</sup> Kaiser Commission on Medicaid and the Uninsured. (2008). *State Medicaid Fact Sheets*. Kaiser Family Fund. Downloaded from [www.kff.org](http://www.kff.org).

<sup>28</sup> Kaiser Family Foundation. (2008). *The Uninsured: A Primer—Key Facts about Americans without Health Insurance*. Washington, D.C.: Kaiser Commission on Medicaid and the Uninsured. Retrieved from [www.kff.org](http://www.kff.org).

<sup>29</sup> 42USCS 11431-34

<sup>30</sup> States may distribute their McKinney-Vento funds to school districts in particular need of financial assistance to serve children who are homeless. These subgrantees are required to report additional information (beyond what non-subgrantee school districts report) about the children they serve.

<sup>31</sup> Data computed from individual state reports submitted to US Department of Education in the Consolidated State Performance Report: Parts I and II for State Formula Grant Programs. School Year 2006–2007. Washington, DC: US Department of Education. Retrieved from [www.ed.gov/admins/lead/account/consolidated/index.html](http://www.ed.gov/admins/lead/account/consolidated/index.html)

<sup>32</sup> US Department of Education. *FY 2001–2009 State Tables for the US Department of Education. State Tables By Program*. p. 29. Retrieved from [www.ed.gov/about/overview/budget/statetables/index.html](http://www.ed.gov/about/overview/budget/statetables/index.html).

<sup>33</sup> Indiana Interagency Council on the Homeless. (No date). *Action Plan to End Chronic Homelessness*. Retrieved from [www.hrsa.gov/homeless/statefiles/inap.pdf](http://www.hrsa.gov/homeless/statefiles/inap.pdf).

