Who are we serving?

What do our families and children look like?

Stories from Illinois Head Start/Early Head Start Programs

“I have noticed an increase in grandparents or even great grandparents raising their grandchildren. One of the families on my caseload with one of the greatest needs is raising their grandchildren. This family is involved with DCFS, receives DCFS stipends and assistance through WIC and LINK, but still struggles to provide basic needs for the children. At the beginning of this school year, the grandmother informed me at Parent Orientation that she had health issues. She has been in and out of the hospital multiple times, she fell multiple times this year, broke her tailbone and even fell after breaking her tailbone. The grandparents also were not aware of community resources and additional support until I informed them of the resources available.

Since working with this family, I have helped them with complications with their Medicaid and LINK card and helped them directly work with DHS, along with the DCFS worker. I have also provided emergency food to the family, & clothing and coats that other agencies provided. For this family, the three older children, who were residing in the home, have recently been removed due to grandma’s health. She now only has the two youngest children who are currently in the program - and they may also be removed, due to her health. Looking at my caseload for this school year, I have seven children out of 51 who are being raised by their grandparents. I have noticed that these grandparents are often overwhelmed, unaware of community resources, and their health is not the greatest.”
“One child who comes to mind this year is a boy, who is not medically fragile, but deeply emotionally affected. He does not have an IEP and he does not have special needs in regard to development, yet since he has been enrolled, we have met as a group with one or both of his parents five times so far, with a follow up meeting on the calendar. This child's father suffers from PTSD which has affected his relationships with the family, and which have trickled down to the child. The child has witnessed the episodes of difficulty his father has had, and has gone through multiple break-ups of his parents which also involve the insertion of other adults into their home(s) and lives.

His parents do not seem to be committed to one living situation, which leaves this child in almost daily turmoil about where, and with whom, he will be with in the evenings. He has not been able to bond well with adults and does not play with other children. Even when he is not raging, he is destructive to the classroom and aggressive toward others. His parents act agreeable about finding him help, visiting him in the classroom and trying to provide consistency for him, but so far have been unable to do so. This child requires a person to shadow him constantly to keep him and others safe. We have had our Mental Health Consultant observe and consult several times to try to help with his well-being and to help staff cope with the frequency and intensity of his behaviors.”

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“Maria and her three children have been homeless for 3-4 months. The mother lost her job, her car was impounded (she was living in her car) and she is lacking English skills, so she is finding it hard to get through her situation. I have referred her to Daybreak Shelter where she is currently residing. I am trying to help the family get back on their feet, but it is hard when mom is very suspicious of authority. Mom is very proud and trying to help her, while still allowing her to keep her dignity, has been a challenge.”
A family that comes to mind in particular is one with an older grandmother who has temporary custody of her grandson who is in our program. Mom has several children who are all in the custody of other family members. We have mom's youngest child who is 4 in our full day session. Grandma does an outstanding job with her grandson given the limited resources. Yet she admits there are struggles in raising another child at her age. Grandma herself is limited in reading and writing with no driver's license or any means of transportation.

We've taken grandma and child to several appointments, to remain health approved for our program. After transporting the family to multiple appointments, we learned that the child had severe dental issues that needed to be addressed immediately. We've assisted the grandmother in finding a dental surgeon that would complete the work. Although grandma does the best she can, this family was still in need of additional resources. Our Head Start center was able to help locate sponsors for this family and several other families for Christmas. Our program also was able to provide brand new coats and shoes which we received from donations from local agencies. Grandma expressed such gratitude for everything we've been able to assist her with. When she calls in, she always ends our conversations with "Okay Love you." Families like this one confirm our program is more than just educating children, we strive to empower and support the whole family.

During the summer of 2018, we received a call from a single mother in distress, looking to get her son into a preschool program. As the Family Community Service Worker gathered her information, she had to listen very closely in order to understand the answers (this mother could hardly mumble in-between her tears). Grace went on to say how she had her son, Andrew, enrolled in a local daycare center and he was only able to attend one day. She continued saying that at
the end of the first day, she was informed by the staff that they would not be able to offer services to little Andrew any longer. They stated that Andrew seemed to be Autistic and they would not be able to care for him at this center. Grace was heartbroken and devastated and did not know where to turn for help. Being a single mother with a part-time job, and enrolled at a local college herself, she did not know what she was going to do. She met with a Family Community Service Worker and a Head Start application was completed for Andrew. He has now been enrolled since the end of August of 2018.

Although caring for Andrew has had its challenges, the classroom has found new and unique ways, designed specifically for Andrew, to better serve his needs. With the assistance and encouragement of the Head Start program, Grace is now working with a program that focuses on the evaluation, diagnosis, and treatment of children with developmental, behavioral, social and emotional needs. We are happy to say that Andrew is not only flourishing in the classroom, but will be joining us in the fall for another school year! The Head Start program has been essential to Grace, and in her own words as stated during the completion of Andrew’s reenroll application, “I would only send him to Head Start…I don’t trust anyone else.”