



State of Illinois
Illinois Department of Human Services

2026

ANNUAL

REPORT



ILLINOIS COMMISSION ON POVERTY ELIMINATION
AND ECONOMIC SECURITY & THE INTERAGENCY
WORKGROUP ON POVERTY AND ECONOMIC SECURITY



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Introduction

Commission Background and Objective

The Illinois Commission on Poverty Elimination and Economic Security (Poverty Commission or Commission) and the Interagency Workgroup on Poverty and Economic Security (IWGP or Workgroup) submit this joint report to fulfill the requirements of the [Intergenerational Poverty Act](#), 305 ILCS /70. The Act created the two groups to work in tandem, the Poverty Commission representing elected officials, the judiciary, and individuals from and supporting many of the different populations impacted by poverty; and the IWGP representing State agencies focused on assisting all Illinoisans, and especially those facing economic and other hardship, to achieve stability and security. The Poverty Commission and IWGP work synergistically to drive policy recommendations and implementation across all the focus areas outlined in the original [Strategic Plan](#).

Overview of Poverty in Illinois

State Fiscal Year 2026 (FY26), which ran from July 1, 2025 through June 30, 2026, saw an alarming increase of challenges for those in poverty. [H.R. 1](#), the federal budget bill enacted on July 4, 2025, made major changes to federal safety net programs. Those impacts began in FY26, and will continue, potentially on an even larger scale, in FY27.

The full effects of the changes to eligibility for the Supplemental Nutrition Assistance Program (SNAP) and Medicaid are yet to be seen or fully quantified. Likewise, changes in the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) nutrition assistance, U.S. Department of Housing and Urban Development (HUD) homelessness assistance funding, U.S. Department of Education funding for special education, and more could pull more Illinois families into poverty, and make it harder for those in poverty to achieve economic stability. While the State and Illinois community partners, non-profits, and philanthropy are working cooperatively to support these Illinoisans, the reality is that there is simply not enough State or private funding to fill the holes left by shifting federal priorities.

The State and its partners across sectors will need not only to maintain current commitments but become even more creative as to how they can collectively move the needle on poverty reduction in these times.

Figure 1. Number of Illinois Residents at or below Various Income Levels¹ (2024 data)

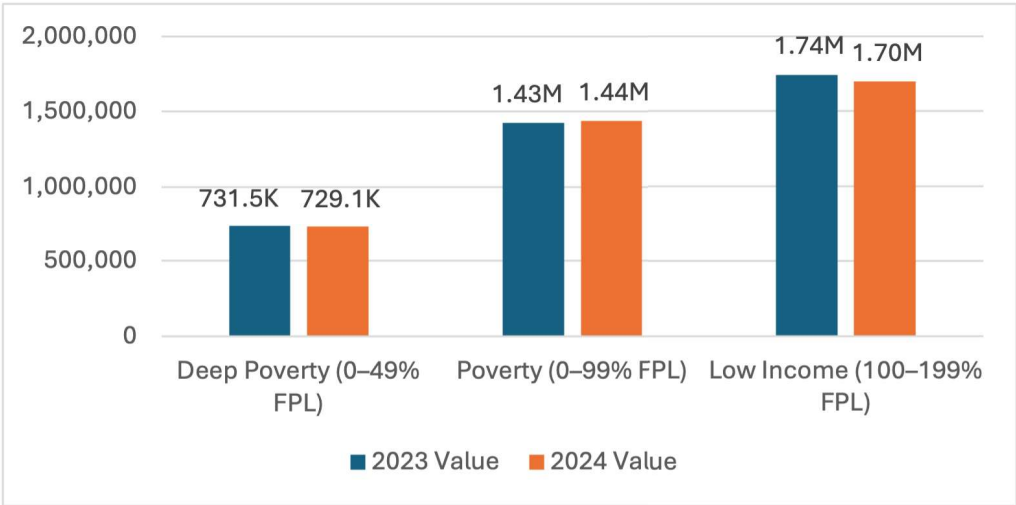
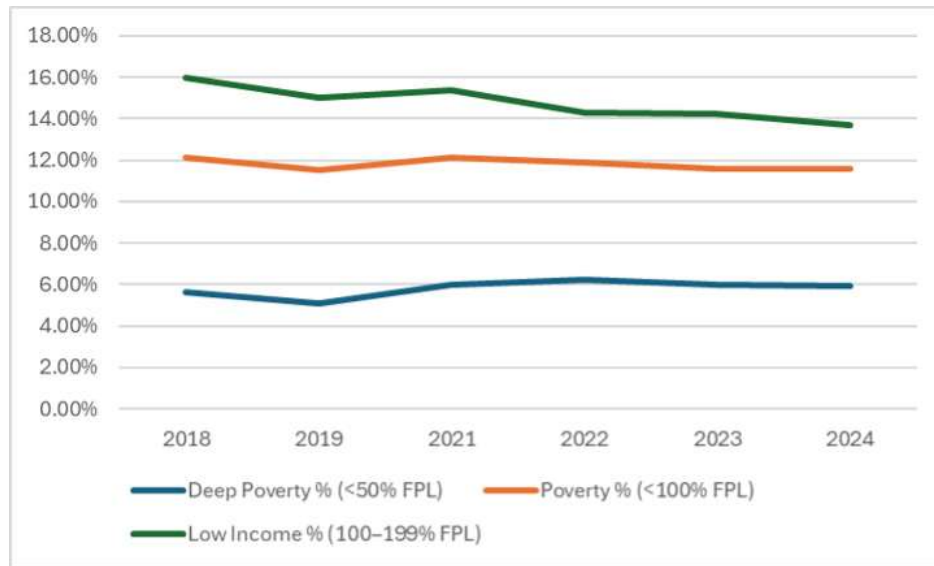


Table 1. Thresholds and Income Limits²

Household Size	Deep Poverty (50% FPL)	Poverty (100% FPL)	Low Income (200% FPL)
1	\$7,530	\$15,060	\$30,120
2	\$10,220	\$20,440	\$40,880
3	\$12,910	\$25,820	\$51,640
4	\$15,600	\$31,200	\$62,400

1. U.S. Census Data <https://data.census.gov/table/ACSDT1Y2015.B17002>

2. U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. 2024 Poverty Guidelines for the 48 Contiguous States. Published January 17, 2024. Available at: aspe.hhs.gov/poverty-guidelines

Figure 2. Poverty Rates Over Time* (2018-2024)³

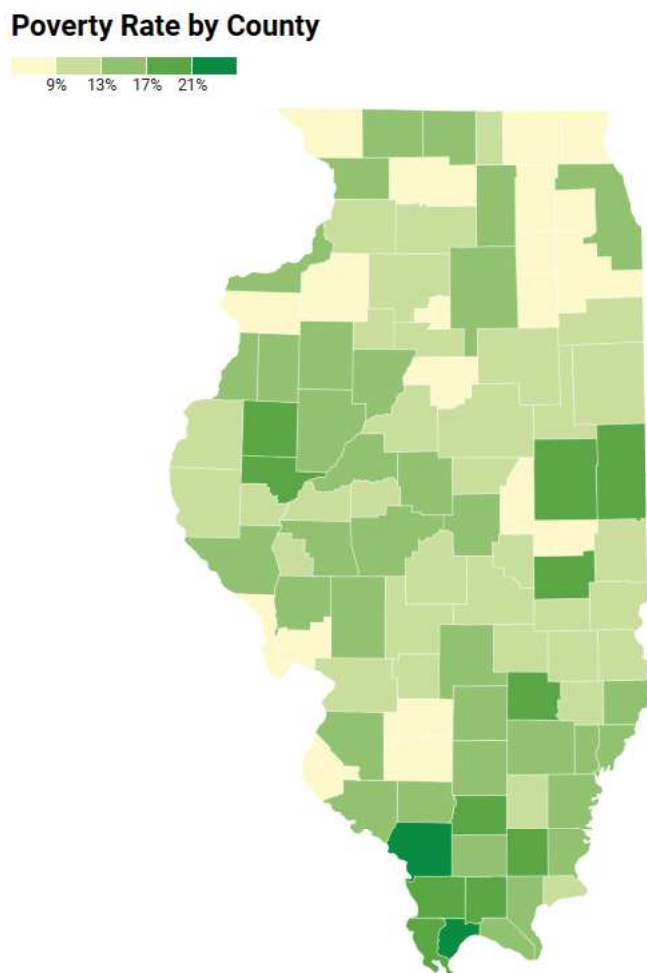
* Percentage data. No available data for 2020.

Table 2. 10 Counties with Highest Rates of Poverty in 2024⁴

County	Population	Families Below Poverty (<100% FPL)	Persons Below 150% FPL	Persons Below Poverty (<100% FPL)
Pulaski	4,808	17.0%	37.9%	25.0%
Johnson	11,486	14.7%	24.0%	17.6%
Saline	22,628	14.2%	27.4%	18.9%
White	13,194	13.4%	28.8%	16.4%
Franklin	36,627	12.8%	27.9%	17.5%
Vermilion	69,149	12.8%	27.6%	17.7%
Perry	18,089	12.5%	24.2%	16.9%
Union	16,575	12.4%	29.1%	20.2%
Wayne	15,852	12.2%	26.5%	16.1%
Henderson	6,092	11.8%	24.7%	13.9%

3. U.S. Census Data, <https://data.census.gov/table/ACSDT1Y2015.B17002>

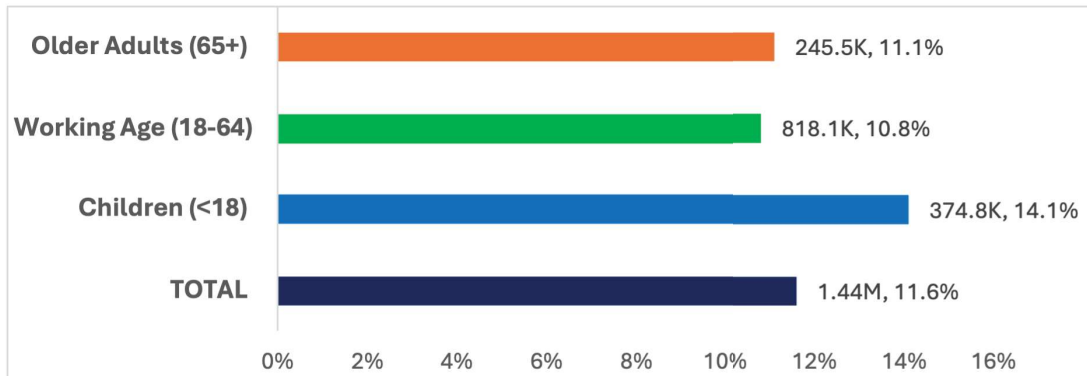
4. U.S. Census Data S1702, and S1701 combined

Figure 3. Rate of Poverty (persons below 100% FPL) by IL County⁵**Table 3. Poverty by Age 2024⁶**

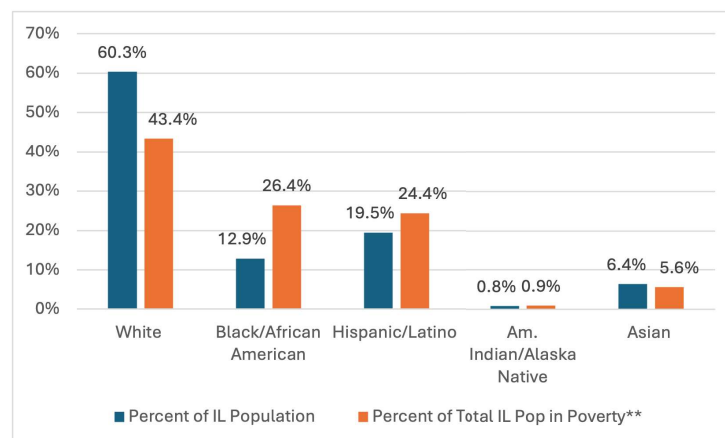
Group	Number of People Living in Poverty (100% FPL)	Percentage of Each Group Living Below Poverty
TOTAL	1,438,470	11.6
Children (<18)	374,795	14.1
Working Age (18-64)	818,139	10.8
Older Adults (65+)	245,536	11.1

5. [U.S. Census Data B17002](#)

6. [U.S. Census Data S1701](#)

Figure 4. Poverty (100% of FPL) by Age Group (2024)⁷**Table 4. Poverty by Race/Ethnicity in Illinois (2024)⁸**

	Total IL Population	Percent of IL Population	Below Poverty	Percent below poverty within each group*	Percent of Total IL Pop in Poverty**
White	7,497,355	60.3%	624,488	8.3%	43.4%
Black/African American	1,602,690	12.9%	380,105	23.7%	26.4%
Hispanic/Latino	2,422,244	19.5%	350,880	14.5%	24.4%
Am. Indian/Alaska Native	102,580	0.8%	13,330	13.0%	0.9%
Asian	797,110	6.4%	81,209	10.2%	5.6%
TOTAL	12,423,178		1,438,470		

Figure 5. Poverty by Race/Ethnicity as a Percentage of Population in Illinois⁹7. [U.S. Census Data S1701](#)

8. Ibid

9. Id.

Overview of Comprehensive Approach

Poverty Commission Convenings, Five-Year Strategic Plan Pillars, and Associated State Actions

The Commission convenes annually per the statute. On July 29, 2025, less than a month after H.R. 1 was passed, the Commission held a [joint meeting](#) with the Illinois Commission to End Hunger to address the changes brought by H.R. 1 specifically changes to SNAP, Medicaid, and to lawful immigrants' access to benefits. The two commissions agreed to continue collaboration and hold joint meetings in the future. The new Poverty Commission co-chair, Michelle DeHaven Quast, CEO of The Foundation for Northwest Illinois was also introduced during this meeting. The Commission next met on September 29, 2025 and discussed initial steps on formulating a new 5-year strategic plan and then on April 27, 2026, where members were updated on and discussed the impacts of federal policies on Illinoisans living in poverty and the efforts of State and local government bodies, philanthropy, and community organizations to provide relief and support to them.

In addition to full Commission meetings, the Commission's [five subcommittees](#) continued to meet in FY26 and shared latest updates on federal changes particularly on housing programs and work requirements for able-bodied adults without dependents (ABAWD); impacts of federal changes to community-based organizations; actions being taken by the State in response to H.R. 1; and current and new programs addressing poverty such as the Child Tax Credit, the Direct File tax filing tool, the Multi-Sector Plan on Aging, as well as the Home Services Program for people with disabilities.

The [IWGP](#) also continued to meet quarterly and discussed state actions in response to poverty. This report describes the actions of the IWGP member agencies in FY26 to make progress toward each of the five strategic pillars that are outlined in the Strategic Plan. Though not exhaustive of all of the State's anti-poverty work, it provides a well-descriptive snapshot of the programs and efforts, influenced in part by the Poverty Commission. This report also includes recommendations for each pillar that could be adapted as new goals and/or strategies for the next fiscal year.

Infrastructural Action and Support: Governor's Office of Management and Budget

Coordinating and Ensuring Program Funding and Sustainability

The Governor's Office of Management and Budget (GOMB) continued to work with agencies and the General Assembly to secure sufficient and consistent funding for different programs that alleviate poverty.

Notable major programs that have been funded/maintained funding include the permanent supportive housing (for people with substance use disorders); the new Families Receiving Emergency Support for Hunger (FRESH) program to assist those who lost their SNAP benefits due to HRI; TANF; rental assistance, child support, free breakfast and lunch program; Community Care Program; home delivered meals; and the Illinois Multisector Plan on Aging. All of these and more will be discussed in greater detail below.

Pillar 1: Ensure Illinois is Best in Nation for Raising Families

Ensure Access to High-Quality Early Childhood Services, Including Early Intervention, Home Visiting, and Affordable Child Care

Find a Method to Replicate the Federal Child Tax Credit for Families Raising Children

Expand Access to Free and Reduced School Meals

Increase Participation in WIC by Improving Accessibility for Those Who are Eligible

Ensure Access to High-Quality Early Childhood Services, Including Early Intervention, Home Visiting, and Affordable Child Care

Child Care Assistance Program Expansion and Workforce Support

- The Illinois Department of Human Services-Division of Early Childhood (IDHS-DEC) worked in FY26 to grow the state's critical Child Care Assistance Program (CCAP) toward caring for more children than it has in over a decade, now assisting the families of approximately 155,000 children access quality child care.¹⁰
- IDHS-DEC also developed and deployed a modernized [CCAP application](#) in partnership with Code for America, creating a simple, accessible, and user-friendly online application for families and providers.¹¹
- The State continued in FY26 to drive focus on sustaining the early intervention and home visiting workforces that support families across Illinois.
- The Governor's Smart Start Illinois initiative, including Smart Start Workforce Grants – developed with the sole aim of lifting teacher and caregiver wages to help preserve the critical child care workforce in Illinois – now support nearly 17,000 teachers and caregivers across more than 8,800 classrooms.

Preschool for All and Preschool for All Expansion

- The Illinois State Board of Education (ISBE) executed its Early Childhood Block Grants in FY26 to include:
 - Level funding for a total of \$706.9 million (not including one-time grants to Chicago Public Schools [CPS] or administrative costs to ISBE)
 - Preschool for All (PFA): A total of \$465 million supporting 530 programs.
 - Preschool for All Expansion (PFAE): A total of \$72.7 million supporting 103 programs.
 - Prevention Initiative (PI): A total of \$169.2 million supporting 168 programs.
 - One-time grant funds to 118 grantees for a total of \$5.31 million.

10. [Approved budget creates new milestone for families and early childhood providers in Illinois](#)

11. [Code for America and State of Illinois Unveil Landmark Partnership to Transform How Families Access Affordable Child Care — Code for America](#)

- Also, in FY26, ISBE allocated \$3.86 million in quality dollars to increase per-child funding minimums and averages got PFA and PFAE to four non-school district grantees and 36 of the lowest-funded Tier 1 school districts.
- FY26 estimated enrollments in these programs:
 - Preschool for All: 90,575
 - Preschool for All Expansion: 8,197
 - Prevention Initiative: 19,777

Early Intervention and Home Visiting

- The Illinois Department of Public Health (IDPH) continued to support Governor Pritzker's birth equity efforts across Illinois by funding a cohort of grantees doing community engaged work to advance maternal child health.¹² Activities are the same: supporting and providing access to doulas to promote culturally sensitive care, instituting home visitation, creating a newly built maternal child health and wellness center, mitigating substance use and addressing behavioral health needs, all with the goal of reducing maternal morbidity and mortality and improving the long-term outcomes of mothers and babies.
- IDPH also began a large maternal health strategic planning effort that brings together a multisector partnership to identify the most actionable and meaningful system changes needed in Illinois for families, and the plan will be produced by the end of calendar year 2026.¹³
- Through its [Early Hearing Detection and Intervention Program](#), IDPH provided statewide management of hearing screening, diagnostics and referrals for early intervention and parent-to-parent support. Children with confirmed hearing loss, including those with low vision, have elevated risks for social, emotional, developmental, communication, and language delays. In addition, they are more vulnerable to abuse and neglect, making early identification and coordinated support essential.
- IDPH strengthened parent-to-parent support systems that helps families navigate state services, reduce duplication of services, and prevent loss to follow-up. The program also advances interagency collaboration by coordinating referrals and care management with IDHS-Bureau of Early Intervention, the Department of Children and Family Services (DCFS), and the University of Chicago Division of Specialized Care for Children. These partnerships help families receive comprehensive and streamlined access to the services required to support their child's development and kindergarten readiness.
- IDPH initiated a pilot hearing screening project for children participating in early intervention and home-visiting programs. The project recognizes that the incidence of hearing loss can double or triple by school age and ongoing surveillance is necessary. Because a child's hearing directly influences communication and language development, core components of early childhood success, this effort strengthens early identification, intervention, and kindergarten readiness.

12. [IDPH Awards \\$4.5 Million in Grants to Support Governor Pritzker's Birth Equity Efforts Across Illinois](#)

13. [Illinois Multi-Sector Maternal Health Strategy](#)

- Likewise in 2025, the Department of Healthcare and Family Services (HFS) expanded Medicaid to include home visiting services for pregnant and parenting individuals to improve maternal and child health outcomes. These evidence-based services were delivered directly in the home and included prenatal education, health screenings, and postpartum support to reduce care gaps and promote birth equity. The coverage built on statewide maternal and child health initiatives and reflected a coordinated, cross agency commitment to supporting families during pregnancy and early childhood.

Looking Ahead

On July 1, 2026, the Illinois Department of Early Childhood (IDEC) officially became the lead agency for Child Care Licensing, the Head Start State Collaboration Office Grant, Home Visiting, Early Intervention and the Child Care Assistance Program, the Early Childhood Block Grant, and a range of other early childhood support to families, providers, and educators.

The FY27 state budget includes a \$2 million appropriation to ISBE for the Education of Homeless Children and Youth State Grant Program. This grant program has not been funded since its enactment in 2011. The program provides competitive grants to districts with high percentages of students experiencing homelessness. It is designed to expand or improve services provided to homeless students as part of a school's regular academic program. Grant funds can be used to support things like rental assistance, transportation assistance, emergency shelter, housing stability case management, other collaborative housing strategies, and activities set forth in Section 723(d) of Subtitle B of Title VII of the federal McKinney-Vento Homeless Assistance Act (42 U.S.C. 11433(d)).

Expand Access to Free and Reduced School Meals

- ISBE continued to promote and work with school districts on the implementation of the Community Eligibility Provision to provide meals at no cost to all students.
- ISBE was awarded a nearly \$7 million federal Fresh Fruit and Vegetable Program grant, aimed at increasing children's acceptance and consumption of fresh, unprocessed produce, and another nearly \$700,000 federal School Breakfast Expansion Grant by the USDA to increase breakfast participation.
- The Summer Food Service Program increased access to free meals (both breakfast and lunch) in rural areas in the summer through expanded promotion and implementation of the Summer Food Service Program Rural Noncongregate option.

Looking Ahead

The FY27 state budget includes an increase of \$17 million to the Illinois Free Lunch and Breakfast program, from the historical funding level of \$9 million to \$26 million.¹⁴ This additional funding will enable ISBE to increase the Illinois Free Rate from \$0.04 (FY26 rate) to somewhere between \$0.10 and \$0.12 in FY 2027, with exact final rate still being calculated.

14. [The State of Illinois Newsroom](#)

ISBE is finalizing the development of a statewide electronic USDA household income application that is accessible for families and can easily be included when they apply for other household benefits. ISBE will be piloting the electronic application with a small group of schools starting in school year 2026-27 before rolling it out statewide.

Illinois expanded its Medicaid 1115 Healthcare Transformation Waiver in 2024 to address health related social needs, including food insecurity, recognizing their direct impact on health outcomes.¹⁵ The State used the waiver to authorize new services, build infrastructure, and partner with community organizations to support Medicaid members facing unmet social conditions. More work on this is anticipated in the coming year.

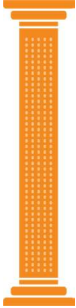
Increase participation in WIC by improving accessibility for those who are eligible

- Through the IDHS Division of Family and Community Services' (FCS) Office of Family Wellness, WIC participation reached 178,860 in October 2025 which was 102% of the established goal for the federal fiscal year and the highest level of participation in many years. The most recent caseload data (March 2026) showed participation at 168,568, and work is always underway to reach more families.
- Engaging and retaining child participants in WIC was a focus area for IDHS in FY26, as children have the lowest uptake of all WIC eligibility categories. The FY23 estimates in program participation showed Illinois as serving 84,600 children or 34.1% of those eligible. In federal FY26 child participation averaged approximately 90,364, showing progress toward increasing participation in this category. This is likely due to the increase in the fruit and vegetable benefits in the WIC food package as well as a concerted effort over the past 3 years to partner with the Head Start program to make it easy for families to engage in both.
- The Department of Commerce and Economic Opportunity (DCEO) continued to ensure that Illinois Grocery Initiative awardees (New Stores in Food Deserts and Equipment Upgrades programs) accommodate WIC payments as required by the Illinois Grocery Initiative Act.

Poverty Commission FY27 Recommendations for Pillar 1

- Prioritize investments in communities with the highest child poverty rates and greatest disparities in access to early childhood services.
- Partner with community organizations to ensure families with limited English proficiency can easily access services.
- Increase communication to families about meal eligibility, using simplified forms and multi-language outreach.
- Partner with local food systems and Illinois farmers to increase access to fresh, locally grown foods.
- Develop outreach campaigns with schools, WIC clinics, childcare centers, and pediatric clinics to ensure families know how to claim the federal Child Tax Credit.

15. [The State of Illinois Newsroom](#)



Pillar 2: Stabilize Homes and Communities

Reduce Homelessness by Half and Ensure Housing Affordability and Accessibility

Invest in High-Quality, Specialized Supports for Persons Experiencing Mental Health and Substance Use-Related Crises

Invest in Interventions that Address Cycles of Trauma and Violence in Our Communities

Reduce Homelessness by Half and Ensure Housing Affordability and Accessibility

- Homelessness prevention and reduction is the core mission of the Illinois Office to Prevent and End Homelessness (OPEH). OPEH's Home Illinois Plan outlines the State's actions and policy priorities: [25-26 Home Illinois Plan A11Y.pdf](#). The Poverty Commission and IWGP support OPEH's work to address homelessness in Illinois.
- IDHS-FCS's Office of Housing Stability (OHS) serves as a core operational driver of Illinois' statewide homelessness reduction strategy. Through coordinated funding, prevention initiatives, shelter and outreach operations, and capacity building across the provider network, OHS delivered measurable contributions to the Poverty Commission and the IWGP. Programs such as the [Emergency Solutions Grant \(ESG\)](#) and the [Emergency and Transitional Housing \(ETH\) Program](#) played a central role in reducing acute housing instability by stewarding public resources and advancing initiatives that help Illinois families secure and maintain stable housing.
- From July 1, 2025, through March 31, 2026, more than 31,000 individuals representing 22,100 households accessed services through the ETH program, resulting in over 9,200 participants exiting shelter to more stable housing. During the same period, the ESG program provided a safe place to sleep for over 7,000 people and connected 700 individuals experiencing unsheltered homelessness with critical services through street outreach.
- OHS supportive housing programs further strengthened long-term housing stability by expanding access to permanent supportive housing and intensive supportive services for individuals and families with complex needs. Between July 1, 2025, and March 31, 2026, the OHS Supportive Housing Program served 10,392 people, including 2,300 children, across 7,363 households. Many participants entered with significant needs such as mental health challenges, physical disabilities, or substance use disorders and exited to more stable housing opportunities. Additionally, the Permanent Supportive Housing Program funded 553 units of housing from July 1, 2025, through December 31, 2025; during this period, more than 500 households were enrolled in SNAP benefits and nearly 30,000 units of supportive services were delivered.
- Programs within the OHS Bureau of Prevention—including Homeless Prevention, Rapid Rehousing, and Shelter Diversion—advanced a coordinated, system-level response that prevents homelessness, diverts households from shelter, and rapidly rehouses individuals and families to minimize instability and promote lasting stability. The Homeless Prevention program served more than 6,000 households, with 5,000 households receiving rental assistance, 215 receiving mortgage assistance, and 1,100 receiving

utility assistance. Between July 1, 2025, and March 31, 2026, the Shelter Diversion Program diverted 2,107 individuals from entering shelter, while 4.4 percent of participants exiting shelter were diverted from returning. During this same period, the Rapid Rehousing program added 584 new units to program operations and moved 1,600 people into permanent housing. Collectively, OHS programs significantly advanced the State's goal to reduce homelessness, strengthen housing stability, and expand access to affordable and supportive housing—directly supporting Illinois' poverty elimination strategy in FY26.

- The State's Ad-Hoc Missing Middle Housing Solutions Advisory Committee released a report that outlines strategies to expand housing options for middle-income Illinoisans. As the State moves into implementation under Executive Order 2024-03, the Department of Commerce and Economic Development (DCEO) will play an important role advancing initiatives that ensure housing affordability and accessibility across Illinois. DCEO was appropriated \$100 million for FY27 to provide grants to support infrastructure improvements in support of Missing Middle Housing projects.¹⁶

Incentivizing Supportive Housing Production

- In May 2026, IHDA released its [draft 2027-2028 Qualified Allocation Plan](#) ("QAP") for public comment. This document will govern the agency's allocation of Low-Income Housing Tax Credits ("LIHTC") for the coming two years. The draft QAP includes an updated scoring structure which highly incentivizes developments to incorporate shares of units serving supportive housing populations, up to 100%. The draft QAP includes three policy track scoring options that provide incentives for advancement of the document's policy priorities, one of which is "Serving Vulnerable Populations." The QAP is expected to be finalized and published in FY27.
- **Low-Income Housing Tax Credit Program (LIHTC)**
In June 2026, IHDA funded the creation and/or rehabilitation of 231 supportive housing units under its 2026 9% LIHTC program.¹⁷ Awards made under this funding round included three developments that utilized the "PSH Track Scoring" option, which maintained competitive incentives for developments that dedicate at least 30% of their total units to serving supportive housing populations under IHDA's 2026 QAP. Total awards made to these three developments alone (not including supportive housing units within awarded "General Track Scoring" developments) included: \$5.1 million in federal tax credits, more than \$470,000 in state tax credits, and nearly \$7 million in subordinate resources. In total, the round's supportive housing units consisted of 72 Permanent Supportive Housing units and 159 Statewide Referral Network units via developments funded under both the PSH Track Scoring and General Track Scoring.
- **Permanent Supportive Housing Development Program:**
In May 2026, IHDA funded 142 supportive housing units under Round XII of IHDA's Permanent Supportive Housing Development Program. Awards under this funding round totaled \$50 million which will be put towards the construction of 6 developments.¹⁸

16. [The State of Illinois Newsroom](#)

17. [2026.07.07_2026-LIHTC-Announcement-FINAL-1.pdf](#)

18. [Pritzker Administration Expands Permanent Supportive Housing Across Illinois](#)

\$20 million of the awarded funds were sourced from IHDA's first allocation of Opioid Remediation Funds, which will support the construction of two developments that serve individuals or families living with a substance abuse disorder and/or co-occurring disorder, and who are currently experiencing homelessness. This project was in collaboration with IDHS's Division of Behavioral Health and Recovery (DBHR) and OPEH.

- **Supportive Housing Institute:** In July 2025, IHDA approved \$465,000 in Illinois Affordable Housing Trust Funds to support a grant to the Corporation for Supportive Housing to fund the third round of the Illinois Supportive Housing Institute.¹⁹ The program aims to increase the capacity and success of teams in applying for and constructing supportive housing developments in Illinois. Development teams who participate in this training program can receive point incentives under both IHDA's Permanent Supportive Housing Development Program and 9% Low-Income Housing Tax Credit program. In June 2026, IHDA concluded [its fifth cohort of the Supportive Housing Institute](#), graduating nine development teams who completed the months-long, intensive technical assistance and program facilitated by the Corporation for Supportive Housing. Looking ahead to work in FY27, the Supportive Housing Institute will open applications for a sixth cohort in fall/winter 2026.

Invest in High-Quality, Specialized Supports for Persons Experiencing Mental Health and Substance Use-Related Crises

- IDHS-DBHR supports the Housing is Recovery program.²⁰ The program provides affordable housing using a bridge rental subsidy combined with access to recovery support services or treatment to individuals with serious mental illness (SMI) who are at high risk of unnecessary institutionalization or individuals with substance use disorder (SUD) who are at high risk of overdose due to homelessness, a lack of access to recovery support services, and repeating cycles of hospitalizations or justice system involvement.
- The [Projects for Assistance in Transition from Homelessness](#) (PATH) program, also supported by IDHS-DBHR, provides outreach and engagement services to people experiencing homelessness, including linkage to housing services, mental health and substance use disorder treatment, and additional support services.
- IDHS-DBHR's SUD [Permanent Supportive Housing program](#) prioritizes unsheltered homeless individuals, in addition to women, young adults (18–25), and parents with children 17 and younger with substance use disorders, to secure stable housing while receiving ongoing case management, treatment linkage, and recovery support. Services follow a housing-first, harm-reduction approach and focus on long-term stability, recovery engagement, and improved quality of life.
- 988 Suicide & Crisis Lifeline provides 24/7/365 crisis support available via call, chat, and text statewide. Over 90% of calls are answered in state.²¹ If an in-person response is needed, 988 is able to connect to and

19. [FY-2025 IHDA Report-of-Activities.pdf](#)

20. [IDHS: 225 Housing is Recovery \(25-444-22-3139\)](#)

21. [July-26-988-In-State-Monthly-Report.pdf](#)

send out a Mobile Crisis Response Team or connect to 911, depending on the situation. The State, led by IDHS-DBHR, continued to invest in 988 in FY26.

- Mobile Crisis Response Teams provide on-demand, in-community, team-based care and follow-up to individuals experiencing a behavioral health crisis, regardless of ability to pay, 24/7/365 statewide.²² MCR Teams take requests for service through direct call to a provider, 988, or 911 (via transfer to 988) as part of the State’s “no-wrong-door” approach, aimed at making it as easy as possible to access the resource.
- Living Room Programs provide a safe, inviting, home-like atmosphere where individuals can calmly process a crisis event, as well as learn and apply wellness strategies which may prevent future crisis events. The LRP is staffed by Peer Recovery Support Specialists and is based on a philosophy that crises are an opportunity for learning.²³
- Crisis Residential Centers are voluntary, short-term residential services designed for individuals experiencing a behavioral health crisis and/or significant life challenges that place them at risk of escalating psychiatric symptoms. These individuals may be unable to safely manage their symptoms in their home or community environment without the benefit of on-site clinical and recovery supports. In addition, peer support service is available.
- Illinois expanded its Certified Community Behavioral Health Clinic (CCBHC) program, allowing 19 clinics to offer enhanced mental health and substance use treatment services under a new Medicaid demonstration model. This expansion increased access to coordinated behavioral health care, including 24/7 crisis services, and ensured that clinics served anyone seeking care regardless of age, ability to pay, or location. The initiative demonstrated Illinois’ commitment to strengthening its behavioral health system by improving service capacity, financial stability for providers, and comprehensive, community-based care statewide.
- A collaboration between IDHS-DBHR and the State’s Office of Firearm Violence Prevention (OFVP), Program 510-FRFV, Mental Health Response Leads are funded to support 26 community areas in Chicago to coordinate a mental health response to mass shootings (in which 4 or more individuals were shot or killed, excluding the perpetrator) to assist impacted individuals with accessing immediate and long-term mental health resources and supports.²⁴
- IDHS-DBHR issued the Bridge NOFO in SFY26 to enhance and build infrastructure that supports health outcomes for pregnant women and women with dependent children impacted by substance use and co-occurring disorders.²⁵
- The State’s Gambling Disorder Prevention Program provides services for individuals with gambling disorders including screening of student and adults, treatment, and prevention services.²⁶
- IDHS-DBHR also expanded Certified Recovery Support Specialist (CRSS) with Certified Recovery Support Specialist-Young Adult (CRSS-YA) Endorsement to meet needs of transition-aged youth (14-27).²⁷

22. [590 Crisis Care System](#)

23. [IDHS: Living Room Program](#)

24. [MHRMFV-Final-Report.pdf](#)

25. [IDHS: Bridge Program for Pregnant Women and Women with Dependent Children – Bridge PWWDC 26-444-26-2841-05](#)

26. [IDHS: Gambling Help](#)

27. [COUNSELORS OF PROBLEM](#)

- [Program 515-HDSD](#) provides training to other community service providers that enhance its Behavioral Health Services to address Mental Health Disparities, Trauma and Social Determinants of Health (SDOH) in Chicago communities impacted by poverty. They also have a program called the Gen Z Mental Health Ambassador program that engages youth in mental health, substance disorder, trauma, mindfulness, and cognitive behavioral group discussions.
- [Program 515-EFAP](#) (Emergency Financial Assistance Program) provides inpatient detox and residential rehabilitation to individuals experiencing substance use disorder and co-occurring mental health conditions who are impoverished and/or from disadvantaged communities.
- OPEH provides almost \$31 million each year to fund Permanent Supportive Housing across the state. This includes supportive housing for individuals and families with mental health and substance disorders. Permanent Supportive Housing has been shown to be the most effective solution for ending homelessness for people with mental health and substance use disorders.²⁸
- In continued collaboration with ICJIA, IHDA, IDHS and TASC, IDOC built out the [Bridge to Home \(B2H\)](#) housing program statewide to provide permanent supportive housing and intensive wrap-around case management services to individuals releasing from IDOC custody with high needs.
- IDOC also continued its partnership with the Flexible Housing Pool in Cook County to secure permanent supportive housing placement and wrap around case management services for individuals releasing from IDOC custody with mental health and accessibility needs.²⁹
- IDOC and IDHS-DBHR continued a partnership to provide Narcan and training to IDOC facilities and to individuals upon release from custody. IDOC also continued to provide Medications for Opioid Use Disorder services for individuals in custody both while in custody and in preparation for release.
- IDPH received both the SAMHSA GLS grant for youth suicide prevention³⁰ and the CDC Comprehensive Suicide Prevention grant.³¹ These funds support high-quality crisis care by strengthening suicide prevention systems, expanding evidence-based intervention and postvention services, improving referral pathways, and increasing access to specialized support for youth and individuals at risk of suicide and mental health crises.
- IDHS-DDD's Supports Services Team (SST) provides behavioral supports training and review to families and providers to help to strengthen and improve supports for individuals with high behavioral needs.³² SST has supported more than 900 individuals, helping training front line staff to feel like they can better support individuals at home and in the community.
- ISBE's Resilience Education to Advance Community Healing (REACH) Statewide Initiative is a program that trains educators, school mental health professionals, and community members to recognize the signs and symptoms of trauma and address students' social-emotional and mental health needs.³³ For FY26, \$1M was appropriated from the General Revenue Fund (GRF).

28. [Permanent Supportive Housing Helps People Exit Homelessness](#)

29. [Flexible Housing Pool](#)

30. [IDPH Suicide Prevention Grant Boosts Mental Health Offerings for Students](#)

31. [CDC Comprehensive Suicide Prevention Program](#)

32. [IDHS: Support Services Team Final Information Bulletin](#)

33. [ISBE Resilience Supportive Schools Illinois](#)

- Continued the Resilience-Supportive Schools Illinois (RSSI). RSSI is a free and voluntary support digital application that uses school-specific data to connect educators with evidence-informed tools and resources to improve the mental health and well-being of their school communities.
- More than 1,500 schools across more than 500 school districts have participated in REACH/RSSI. These participating schools and districts have completed more than 700 trauma-responsive action plans as part of their involvement in the program

Supporting Older Adults, Illinoisans with Developmental Disabilities, and Other Vulnerable Communities

- IDHS's Division of Development Disabilities (DDD), with support from the Illinois Council on Development Disabilities, created a pilot housing navigation program in 2022, which became permanent in 2026. There are now housing navigators within each regional independent service coordination agency to assist in connecting people with housing opportunities through the Statewide Referral Network (SRN). This has led to greater utilization of both the SRN and Section 811 for [Ligas Consent Decree](#) class members and other persons with intellectual and developmental disabilities, with 352 individuals enrolled in housing navigation and 128 individuals placed in housing at the end of FY26.
- In continued efforts to support individuals in crisis and at risk for institutionalization, IDHS-DDD has expanded their stabilization services to support a total capacity of 72 beds. Currently, there are 16 short-term beds, 7 long-term beds, and 8 transition beds. By the end of FY27, IDHS-DDD anticipates a significant expansion to a total of 40 short-term beds, 24 long-term beds, and 8 transition beds. At least half the individuals utilizing stabilizations homes are in crisis, experiencing or at imminent risk of homelessness, abuse or neglect. A total of 323 people have been served since the start of the program.
- The Illinois Department on Aging (IDoA) continues to prioritize use of its Emergency Senior Services (ESS) funds for older adults experiencing or at-risk of homelessness. Funds have been utilized by older adults across the state for rent and mortgage assistance, utility assistance, household repairs and minor modifications, household supplies and furnishings³⁴.
- IDoA's recently published [Multi-Sector Plan for Aging](#) (MPA) includes "Livable and Connected Communities" as one of its four focus areas, a key component of which is housing stability and security. This focus area of the MPA includes several action items aimed at ensuring older adults can age safely and comfortably in their communities through a coordinated approach that expands affordable and accessible (including wheelchair accessible) housing (including independent, temporary, and supportive), integrates services, and builds local capacity for age-friendly planning and design.
- The Illinois Department of Corrections (IDOC) collaborates with OPEH and the Continuum of Care agencies across the state to build out referral processes for housing for individuals releasing from custody or who are residing in IDOC transitional housing.
- IDOC in partnership with IDHS helps to identify and support individuals in custody with intellectual and developmental disabilities to process them for waivers and enrollment in residential and community services pre-release.

34. [CSFA](#) | [GATA](#) | [Illinois.gov](#)

- In collaboration with IDoA, IDOC assesses individuals pre-release for post-release in-home services to assist older adults in returning home to family when possible with in-home supports to maintain that housing option.
- IDOC is also working to expand transitional housing capacity for individuals on mandatory supervised release, through contracted and non-contracted providers, including housing options for people with sex offense convictions. This includes pursuit of statewide expansion of scattered-site housing to better serve high-barrier release populations.
- ISBE has worked to strengthen statewide support for homeless students by providing ongoing technical assistance and training. Monitoring activities have been expanded to help LEAs maintain compliance with [McKinney-Vento](#) requirements and address identified gaps. Collaboration with cross-agency partners has increased, supporting more comprehensive services for children and youth experiencing homelessness
- With the expansion of the Medicaid 1115 Healthcare Transformation Waiver in 2024³⁵, the state authorized new services and partnered with community organizations to support Medicaid members experiencing unsafe or unstable housing while building the infrastructure needed to deliver these supports statewide, and HFS is planning on launching some of the housing services in FY27.
- In partnership with OPEH, IDPH has created a Housing Stability Senior Policy Advisor role to strengthen IDPH's capacity to address homelessness as a public health issue through policy development, systems change, strategic partnerships, and data-informed decision-making. IDPH released the second [Homelessness Mortality and Morbidity Report](#) in January 2026 that examines mortality, health outcomes, and healthcare utilization among people experiencing homelessness in Illinois, and identifies persistent health disparities, emerging trends, and the disproportionate burden of illness and premature death experienced by this population, helping inform policies and interventions that promote housing stability and improve health outcomes.
- IDPH also works to improve identification and documentation of housing instability within healthcare systems to help improve care coordination, connection to vital resources, homelessness prevention and discharge planning.
- DCEO led the distribution of \$24.7 million to 434 pharmacies through the Illinois Pharmacy Support Program to strengthen access to pharmacy services across the state, particularly in rural, low-income, and medically underserved communities. Each eligible pharmacy received \$56,892 in flexible funding to support operations, expand service hours, enhance tele-pharmacy, and remote consultation capabilities, improve medication delivery, and bolster patient outreach and care coordination. Funding prioritized pharmacies at risk of closure or financial strain, including small independent operators, pharmacies in counties under 50,000 residents, those in federally designated underserved areas, locations serving predominantly Medicaid patients, and pharmacies in high-poverty or low-access census tracts. The program aims to preserve essential health access points statewide and complements broader state initiatives to improve affordability and expand health care access, including medical debt relief and recent legislation to increase transparency and reduce prescription drug costs.³⁶

35. [The State of Illinois Newsroom](#)

36. [Gov. Pritzker Announces \\$25 Million to Strengthen Pharmacy Access Across Illinois](#)

Invest in interventions that address cycles of trauma and violence in communities

- In FY26, the Office for Community and Positive Youth Development (OCPYD) Bureau of Violence Prevention Services awarded 231 grants totaling \$116,306,725 to address the needs of 52 communities with the highest rates of firearm violence in Illinois. These communities were identified by an analysis of firearm shootings and firearm victimization rates. The grant programs included trauma informed behavioral health services and supports; high risk youth development services, street outreach, case management and victim services for those at the highest risk of shooting or being shot; and community convening to create community safety plans and coordinate services within each of the 52 communities.
- The Office of Adult Services and Basic Supports (ASBS) Bureau of Domestic Violence, Sexual Assault and Human Trafficking, part of IDHS-FCS, issued almost \$100M of funding to 40 domestic violence agencies that provide shelter and comprehensive services throughout Illinois. These agencies include four agencies that provide direct legal representation, and 21 agencies that support specialized services such as counseling, case management, and child specific services. By Q3 of FY26, the programs reported that of the 64,000 Illinoisans served, 97% reported learning more ways to plan for their safety; and providers increased the safety of survivors, their children, and vulnerable family members. Survivor safety is paramount and survivors are supported to create and encouraged to follow individualized safety plans and may seek assistance as often as it is necessary to keep their children, themselves, and vulnerable family members safe.
- The Office of Firearm Violence Prevention (OFVP) continued implementation of the Peacekeeper Program in FY26, engaging community partners who work with participants with lived experience to build relationships, mediate conflict, connect to services and reduce community violence. This included supporting violence prevention coordination and community conveners to strengthen collaboration, resource alignment, and community driven prevention strategies. OFVP funded trauma-informed and evidence-based services for individuals and families impacted by violence, including crisis response, behavioral health referrals, and victim support services.
- IDoA published a new 3-year [State Plan on Aging](#) with a statewide goal to, “Drive continuous quality assurance and improvement activities that emphasize person-centered and trauma-informed services while maximizing effectiveness of services delivered through the Aging Network.”³⁷
- IDOC continued partnership with Chicago Cred, the Institute for Nonviolence Chicago and other community re-entry organizations to engage individuals pre-release to bridge them to post-release violence intervention and wrap around services.
- Continue the implementation and expansion of the Interpersonal Violence Training Program delivered to individuals in custody pre-release.
- In partnership with the Illinois Department of Corrections (IDOC), IDHS-DBHR’s Successful Reentry program works to identify incarcerated individuals with co-occurring mental health and substance use disorders that are approaching release from incarceration and assist them with the development of a wellness recovery action plan (WRAP). Deliverables of the program include housing connection support and, if needed, up to 30 days of immediate, temporary housing for those leaving IDOC custody.

37. [IDoA State Plan FY2026-2028](#)

- In July 2025, the Illinois State Board of Education (ISBE) published the first iteration of the Children's Adversity Index.³⁸ In summer 2026, ISBE will be publishing its first update to the index. Public Act 103-0413 mandates the creation of a Children's Adversity Index to measure community-level adversity in order to estimate exposure to potential sources of childhood trauma. Beginning in 2024, ISBE in collaboration with a research partner, began developing the index through a multi-stage, collaborative effort involving significant input from state agencies and external experts, ensuring the index provides a holistic measure of the complex factors that affect child well-being. Statute requires ISBE to update the index at least every two years.
 - The index is presented as a set of interactive maps that visually illustrate the distribution of adversity measures across the state. It includes a map depicting each community's overall exposure level, along with separate statewide maps for each domain, to provide a more detailed view of community specific trauma exposure.
 - The index provides a useful tool for a wide range of state- and regional-level policymakers, nonprofits, state agencies, and other stakeholders to help them make better informed decisions about resource allocation, policies, and programming, and prioritize communities most in need.
- SAMHSA (the Substance Abuse and Mental Health Services Administration) grants support substance use and mental health services, research, technical assistance, and training to advance the behavioral health and to improve the lives of individuals living with mental and substance use disorders, and their families. The total expended for all state FY 2026 SAMHSA AWARE (Advancing Wellness and Resilience in Education) grants to date plus outstanding obligations is \$1,769,184 and the total expended to date plus outstanding obligations in state FY 2026 SAMHSA REACH (Resilience Education to Advance Community Healing) Out/School-Based Trauma-Informed Support Services grant is \$504,141.
- The U.S. Department of Education's [School Based Mental Health \(SBMH\) Grant](#) aims to increase the number of credentialed mental health services providers providing school-based mental health services to students in LEAs with demonstrated need. The Project has recruited and provided training and support to 79 new SBMH professionals and 78 new re-specializing SBMH professionals since federal FY23 in the areas of School Social Work, School Psychology, and School Counseling, with an FY26 investment of approximately \$2.2 million.

Poverty Commission FY27 Recommendations for Pillar 2

- Invest in the Building Up Illinois Developments (BUILD) Initiative, aimed at eliminating barriers to housing development, streamlining construction, and closing the housing gap in communities across the State. BUILD would involve partners throughout State government, and importantly IWGP members DCEO and IHDA to implement the plan, which would help enable the creation of up to 4,000 new homes.
- Increase the availability of permanent supportive housing.
- Continue existing work between IDHS and HFS to increase mobile crisis availability.
- Continue to invest and expand the community behavioral health workforce.

38. [Children's Adversity Index](#)

- Expand sustainable funding for community violence interruption organizations.
- Increase neighborhood-based prevention infrastructure.

Pillar 3: Ensure Just and Equitable Access to Economic Security Programs

Create a Single, Accessible Platform for Individuals to Enroll in All State Benefits

Increase Uptake, Access, and Value of Public Benefits for Those in Extreme Poverty

Deploy Direct Cash Assistance Programs to Lift Families Out of Poverty

State Actions

Create a Single, Accessible Platform for Individuals to Enroll in Multiple State Benefits

- OPEH has been collaborating with HFS and IDHS to ensure the Application for Benefits Eligibility (ABE) website is available and accessible to people experiencing homelessness.
- Looking ahead, HFS is working toward a statewide resource and referral platform that allows health care providers, payers, care managers, and CBOs to connect individuals with service providers and community resources and track the outcomes of those referrals. The Illinois Community Access Referral Resource System (ICARRS) will be an integral component for the Health-Related Social Needs (HRSN) program. All managed care organizations (MCOs) and all organizations referring for HRSN services under the 1115 waiver will be required to use the system once it is available. All CBOs and other entities delivering HRSN services will use ICARRS to receive referrals and track completion of services. The platform will also be used for behavioral health and other social support services.
- IDoA included as a mid-term action item in its recently published Multi-Sector Plan for Aging, “Explore the development of a streamlined or universal application for Illinois benefit programs to maximize enrollment in Medicaid, SNAP, property tax relief, Benefits Access Program, and other programs with eligibility determined at the state level.”³⁹ In furtherance of this action item, IDoA partnered with the UIC Institute for Healthcare Delivery and Design to submit an application for grant funding from the Resilient Chicago Fund to convene relevant agencies to develop an aligned vision and workplan for designing and testing a universal application. To date, no award announcements have been made.

Increase Uptake, Access, and Value of Public Benefits for Those in Extreme Poverty

- With federal changes to SNAP and Medicaid on the way, OPEH has been publicizing trainings to make sure that people experiencing homelessness maintain eligibility for these benefits. OPEH and Legal Aid Chicago provided virtual meetings on the SNAP changes to answer questions and receive feedback from statewide on-the-ground service providers.
- One eligibility requirement for the Community Care Program (CCP) is to apply for, and if eligible, enroll in Medicaid. IDoA-contracted Care Coordination Units (CCUs) assist older adults with Medicaid applications and redetermination documents and oftentimes help them apply for SNAP. IDoA and Aging Network partners are working to ensure older adults understand the recent SNAP and Medicaid eligibility changes resulting from H.R. 1, helping them stay enrolled, and offering work and volunteer opportunities, where appropriate.

- In collaboration with IDHS and HFS, IDOC has moved the pre-release Medicaid application timeframe from 60 days prior to release to prior to 90 days pre-release, allowing returning residents the opportunity to have stable health care options upon leaving custody. The agencies have been working collaboratively to educate individuals in custody around the importance of Medicaid enrollment and about MCO options.
- IDOC has additionally worked to strengthen coordination with the Social Security Administration and Disability Determination Services to improve access to SSI/SSDI for people leaving custody, including support for applications, determination interviews, medical records collection, and benefit approvals where eligible.
- As detailed in the section above on Pillar 1, ISBE (1) increased access to school breakfast and school lunch through continued promotion, (2) implementation of the [Community Eligibility Provision](#) and increased access to meals in rural areas in the summer through expanded promotion and implementation of the [Summer Food Service Program](#) Rural Noncongregate option, (3) increased promotion to schools and families about the availability of the [Summer Electronic Benefit Transfer Program](#), and (4) increased access to fresh fruits and vegetables through the [Fresh Fruit and Vegetable Program](#).
- For Medicaid's 60th anniversary, Illinois celebrated major advancements in expanding access and improving quality, including becoming the first state in 2021 to extend full-benefit postpartum coverage to 12 months with continuous eligibility.⁴⁰ The State also received federal approval for the 1115 Healthcare Transformation Waiver, allowing Medicaid to address health-related social needs such as housing, food insecurity, and re-entry services.⁴¹

Develop direct cash assistance programs to lift families out of deep poverty

- Program 515-HAIF (Housing Assistance to Individuals and Families) helps individuals and families with rent, mortgage, and utility bills to prevent homelessness.⁴² Funds are also available for housing application fees, gas, clothing, furniture, groceries, and other necessities.
- OPEH in partnership with the University of Chicago Inclusive Economy Lab (IEL) completed a pilot project to distribute cash assistance to families experiencing homelessness. IEL is analyzing data and outcomes of the program, Stability Investment for Family Housing, to measure effectiveness of the pilot.⁴³

Additional State Actions

- The Illinois Department of Agriculture (IDOA) has administered the [Local Food Infrastructure Grant](#) (LFIG) program since FY2025. LFIG is intended to serve applicants with purchasing, leasing to own, renting, building, or installation of infrastructure that will increase market access of Illinois agricultural products to communities across the state.

40. [Illinois first state to extend full Medicaid benefits to mothers 12 months postpartum](#)

41. [The State of Illinois Newsroom](#)

42. [IDHS: 515-HAIF Housing Assistance for Individuals and Families \(26-444-22-3307-01\) LAO](#)

43. [Stability Investment For Family Housing | UChicago Urban Labs](#)

- IDOA also administers the [Specialty Crop Block Grant Program](#) (SCBGP). The program is designed to enhance the competitiveness of specialty crops, which are defined as fruits, vegetables, tree nuts, dried fruits, horticulture, and nursery crops.

Poverty Commission FY27 Recommendations for Pillar 3

- Support guaranteed income programs, including the Newborn Equity Security Transfer (NEST) program, which will provide eligible mothers enrolled in Medicaid direct cash payments to support poverty reduction and better health outcomes.
- Explore creation of a unified, client-centered access model so residents can apply for, renew, and receive referrals for multiple benefits through a single, coordinated process. This should ideally include integrated eligibility screening across SNAP, TANF, Medicaid, WIC, LIHEAP, child care, housing, and workforce supports.
- Create systems for warm handoffs between IDHS and other State agencies, community-based providers, schools, health systems, housing providers, and workforce agencies. Establish shared referral protocols and closed-loop referral systems so residents are connected with resources and follow-up.
- Continue to seek means to reduce administrative burden and simplify program rules. Administrative complexity acts as a barrier to access. Illinois should aim to reduce unnecessary paperwork, duplicative verification, confusing notices, and procedural terminations that cause eligible families to lose benefits.
- Access should be equitable for residents who speak languages other than English, have disabilities, lack internet access, or have limited digital literacy. To meet this goal, Illinois should work to (1) enhance timely interpretation and translation across all major customer access points; (2) ensure applications, notices, call centers, websites, and offices comply with accessibility standards; (3) maintain in-person, phone, paper, and community-based application options, not only digital access; and (4) fund digital navigators and community-based enrollment assistance in high-poverty communities.
- Strengthen cash assistance connections for families leaving shelters, domestic violence programs, hospitals, schools, and reentry systems.

Pillar 4: Address Barriers to Paid Work, Education, and Advancement

Address Barriers That Prevent Consistent Work at a Living Wage, by Investing in Transportation, Child Care, Paid Leave, Broadband, Legal Aid, Reentry Services, Disability and Rehabilitation Supports, and Immigrant and Refugee Services

Invest in Apprenticeship, Work Based Learning, and Barrier Reduction Programs so Individuals Can Learn and Train While Supporting Their Family

Expand Access to Legal Counsel for Illinoisans and Ensure Equitable Access to Court and Legal Processes

State Actions

Address Barriers That Prevent Consistent Work at a Living Wage, by Investing in Transportation, Child Care, Paid Leave, Broadband, Legal Aid, Reentry Services, Disability and Rehabilitation Supports, and Immigrant and Refugee Services

- IDHS-DRS strengthened collaboration with local workforce boards and community rehabilitation providers to create more employment pathways for youth and for individuals facing intersecting barriers, including those returning from the justice system.
- IDHS-DBHR and DRS work together to provide training and technical support to mental health community centers to provide the evidenced-based practice of Individual Placement and Support (IPS) to individuals who have mental health or behavioral health issues. This model provides a whole spectrum of employment and education support from job search to job retention, as well as career advancement. It supports individuals in determining their employment preferences and career paths. Education support includes assisting and supporting an individual in obtaining a certification, GED, high school, and higher education.
- IDHS-DRS advanced the Dignity in Pay Act transition by prioritizing the move away from sheltered workshops.⁴⁴ Through the federally supported Subminimum Wage to Competitive Integrated Employment (SWTCIE) Illinois Project, the agency continued phasing out 14(c) subminimum wage positions in favor of competitive, market-rate jobs.⁴⁵
- By strengthening Vocational Rehabilitation (VR) case management, IDHS-DRS increased self-sufficient wages for participants and tracked higher weekly earnings to lift people out of deep poverty.
- By the 2025–2026 school year, IDHS-DRS Specialized Pre-Employment Career Training Program (PECT) enrollment grew to more than 14,000 transition-age students with disabilities across nearly 700 Illinois schools, increasing access to real employment preparation.⁴⁶ DRS shifted PECT from classroom simulations to paid, employer-based internships and on-site job training in integrated community settings.

44. [Dignity In Pay Act Becomes Law - Access Living](#)

45. [IDHS: Subminimum Wage to Competitive Integrated Employment \(SWTCIE\) Illinois](#)

46. [IDHS: Pre-employment Career Training \(PECT\) Program](#)

- In June 2026, DRS authorized Centers for Independent Living to deliver specialized training that combines workplace skills with financial literacy and economic-independence modules, helping youth prepare to balance earnings, benefits, and family needs.
- Launching the “Pathways to Partnerships” (IPPP) Internship Program⁴⁷
 - High-Demand Career Pipelines: Supported by a recurring \$2 million allocation through 2026, DRS strengthened partnerships with the Illinois State Board of Education to build structured pipelines into apprenticeships and pre-apprenticeship programs.
 - Employer Engagement and Placement Alignment: Through June 2026, DRS mapped local employer hiring needs to ensure students were placed directly into industries with sustainable wages and long-term career opportunities.
 - Targeted Youth Access: IPPP guaranteed that youth ages 10–24 have early, guided exposure to apprenticeships and do not fall into low-wage or unstable gig employment.
- Through a multi-million-dollar federal grant, IDHS-DRS partnered with six regional rehabilitation providers to transition individuals out of 14(c) subminimum-wage workshops, part of the SWTCIE Illinois Project.⁴⁸
- Competitive Integrated Employment (CIE) participants moved into training and employment tracks that guaranteed at least minimum wage or higher in community-based workplaces.
- Family-Centered Barrier Reduction: DRS implemented new wraparound supports including individualized stipends and benefits counseling, to ensure families did not lose critical healthcare or housing assistance when a member entered paid training or employment.
- In late 2025, IDHS-DRS partnered with the Illinois Department of Transportation (IDOT) to identify and remove systemic travel barriers. Together, they launched a statewide workshop to guide local transit agencies in implementing accessible, region-specific transportation solutions. IDHS-DRS also made targeted regional transit investments, including a direct \$94,000 allocation to expand transportation access for rural and underserved job seekers with disabilities.
- In FY26, the Office of Welcoming Centers for Refugee and Immigrant Services, part of IDHS-FCS, continued to experience strong demand for immigrant and refugee services across Illinois. Through the Illinois Welcoming Centers (IWC) Program, partners provided critical support services, including case management, crisis intervention, and referrals with follow-up. Between September and December 2025, IWC partners served 15,344 unduplicated clients, and from January through April 2026, an additional 12,470 clients received services. During the same periods, 10,180 and 6,681 individuals, respectively, participated in educational workshops covering topics such as housing rights, digital literacy, health, and vaccine information.
- Demand for immigration legal services also remained exceptionally high. Through the third quarter of FY26, The Resurrection Project’s (TRP) Access to Justice (A2J) and Immigrant Legal Support Program (ILSP) significantly exceeded annual performance targets. Despite temporary service disruptions caused by immigration enforcement actions and a network-wide workshop pause earlier in the year, program outcomes remained strong. Through Q3, TRP reached 157,635 individuals through immigration

47. [IDHS: Pathways 444-30-3333 Pathways to Partnerships CILs](#)

48. [IDHS: Subminimum Wage to Competitive Integrated Employment \(SWTCIE\) Illinois](#)

education efforts, served 32,655 clients through navigation and support services, completed 7,597 legal screenings, trained 536 community navigators, and provided 4,777 accompaniment services. Additionally, 327 individuals received full legal representation in removal proceedings.

- In FY26, IDHS-FCS grantees served more than 1,700 individuals in acquiring academic or vocational skills to enable individuals to obtain, retain, or improve employment and overcome barriers to employability. Services are provided to adult ex-offenders to promote self-sufficiency or maximize independence. These services also include vocational testing and evaluation, vocational guidance and training, referrals to employment-directed resources, occupational and rehabilitative training activities, and post-placement monitoring of an individual's situation.
- IDHS-FCS funded 24-hour crisis care and post-crisis care in licensed facilities for at-risk families who have children less than 7 years of age. Crisis Nursery services provide a safe haven for families by providing respite and short-term crisis care. Crisis Nurseries are licensed facilities open 24 hours a day, seven days a week. Services include keeping young children safe during critical times of parental stress, illness, job search, homelessness, and emergencies; parent support and parent education groups to enhance self-esteem, parent-child interaction, child management and discipline; community resources of in-kind goods such as diapers, formula, and clothing; individual crisis counseling, home visiting, referrals, advocacy, and follow-up services. Seven grantees served more than 2,600 families as of Q3 of FY26.
- IDHS grantees also provided services for individuals with developmental disabilities, including improving individuals' mental and physical health and related behaviors, leading to improved social adaptation and integration. Such services include psychological and aptitude testing, assessment of fine and gross motor skills, vocational interest testing, career opportunity counseling, simulated work setting, vocational and personal adjustment counseling, employment supervision, independent living skills, job application skills, development of work skills, job placement and follow-up, and job coaching services. Thirty-three grantees supported more than 12,000 individuals as of Q3 of 2026.
- IDHS-FCS's Bureau of Domestic Violence, Sexual Assault and Human Trafficking provided supports, through both comprehensive agencies, and dedicated legal services contracts, for more than 3,000 clients and transportation assistance to 3,600 clients. Both represent critical supports for individuals who are survivors of domestic violence, and a critical survival support to escape their abusers.
- OPEH has been sharing information about the state's job readiness and workforce development resources with the state's Continuum of Care providers who are distributing information to homeless providers in their communities.
- IDoA staff continued participation in reentry summits and resource fairs hosted by IDOC aimed at assisting individuals soon to be released from carceral settings with benefits.
- IDOC implemented and expanded use of its web-based job match tool, onBoard, in pre-release planning to connect people leaving custody to interviews, employment opportunities, and income that supports housing stability.
- IDOC coordinated with IDES and local workforce agencies to expand employer participation and employment readiness workshops in the pre-release process.

- The Department of Labor (IDOL) enforces laws such as the [Illinois Wage Payment and Collection Act](#) and the [Illinois Minimum Wage Law](#), which require that workers be paid promised wages for work performed, and uphold a wage floor for all workers. IDOL investigates violations of these Acts and when it is determined that a worker is owed money from an employer, IDOL recovers those wages and disburses them to the worker. In FY26, IDOL has collected millions of dollars in unpaid back wages on behalf of low-wage Illinoisans.⁴⁹
- Additionally, IDOL enforces the Paid Leave for All Workers Act, which guarantees most employees 40 hours (or a prorated amount for part-time employees) of paid leave each year to use as that employee sees fit.⁵⁰ IDOL continues to conduct educational efforts for employers and employees to know their rights and responsibilities under the law.
- DCEO's Office of Broadband operates programs that directly address access to work opportunities including:
 - Connect Illinois: Over \$1 billion has been allocated to build out high-quality broadband infrastructure to every home, business, and community anchor institution across the state, increasing opportunities for job seekers and workforce development. The largest of these funding sources is the federal Broadband Equity, Access, and Deployment program. Illinois is awaiting approval from the federal government in order to launch these broadband infrastructure projects.
 - Broadband Workforce Development Initiative: As a part of the federal Broadband Equity Access and Deployment (BEAD) program, Illinois is working to address the upcoming labor shortage in the broadband industry. Through a partnership with Heartland Forward, the Illinois Broadband Jobs Board has launched and includes available broadband jobs and job training opportunities. The Office of Broadband is also collaborating with American Jobs Centers, Workforce Innovation and Opportunity Act (WIOA), and other workforce stakeholders statewide to raise awareness of the labor need and connect broadband providers to their local workforce ecosystem.
 - Digital Access Programs: Digital access is the goal of the Office of Broadband, wherein all Illinoisans have access to the quality and affordable broadband, devices, and skills they need to participate in Illinois' modern economy and thrive. The Office of Broadband has launched the Illinois Tech Reuse Network in order to increase the availability of refurbished free or low-cost devices into Illinois communities. The Office is also launching a pilot program working with organizations statewide that support justice-impacted individuals in integrating digital access and skills into existing programming.
- IDHS-DRS incorporated broadband access and digital inclusion into its 2025–2026 strategic plan. This included expanding remote accessibility and ensuring clients in rural areas or with mobility limitations could connect to VR employment and training network.

49. [IDOL Secures Nearly \\$400,000 in Back Wages for Workers Under Prevailing Wage Act](#)

50. [Paid Leave for All Workers Act](#)

Invest in Apprenticeship, Work Based Learning, and Barrier Reduction Programs so Individuals Can Learn and Train While Supporting Their Family

- IDHS-FCS administers the Supplemental Nutrition Assistance Program Employment and Training (SNAP E&T) program. Currently 19 out of 43 providers offer a work-based learning activity as part of their SNAP E&T program. FCS is actively expanding the SNAP E&T program to identify and onboard additional providers that offer high-quality, work-based learning opportunities, including pre-apprenticeship, apprenticeship, and other work-based learning models statewide.
- All 43 SNAP E&T providers and 22 Temporary Assistance for Needy Families Employment and Training (TANF E&T) providers issue supportive services like transportation, childcare, and other resources to address participant barriers. In addition, OWD administers the Employment Barrier Reduction Fund (EBRF) program through the Illinois Association of Community Action Agencies (IACAA). EBRF provides individuals receiving SNAP, TANF, and Medicaid outside of Cook County with essential resources to enter and sustain employment.
- OFVP continued implementation of the Peacekeeper workforce model, providing paid employment opportunities, training, and mentorship for program participants in communities disproportionately impacted by violence.
- Through the Youth Homelessness System Improvement grant, OPEH in partnership with the Night Ministry created an internship program⁵¹ where youth ages 18-24 learn about the Illinois Homeless Response System and support in OPEH initiatives.
- IDoA and RUSH University continued work on their 3-year project to develop a core training curriculum for direct care workers across waiver programs. This core curriculum will feed into specialized certificates and mentoring which will form the basis of a career ladder for those in the direct care workforce.⁵²
- In FY26, Illinois Correctional Industries (ICI) expanded the U.S. Department of Labor (US DOL) apprenticeship programming to Centralia Correctional Center, Vandalia Correctional Center, Vienna Correctional Center, and Kewanee Life Skills Re-Entry Center. Increasing completed apprenticeships from 44 in CY 2024 to 161 in CY 2025, and 107 completed to date in CY 2026. Approved occupations for US DOL apprenticeships is up to 54 different occupations. Statewide enrollment in US DOL apprenticeships through ICI has jumped to 536 individuals in custody.
- ICI increased work-based learning opportunities increased with the addition of urban agriculture at Vienna and Vandalia Correctional Centers, Diesel Automotive Attendant at East Moline Correctional Center, Welding and AWS certification at Kewanee Life Skills Re-Entry Center, and Service Animal trainer through a partnership with SIT (Supporting Independence through Teamwork) Service Dogs at Shawnee Correctional Center.
- Pre-apprenticeship programming partnership with Mid-America Carpenter's Union at Western Correctional Center's ICI facility was developed and is slated to begin in July 2026 with the filling of the Corrections Vocational Instructor (CVI) position allocated in FY26.

51. [IDHS: Youth Homelessness Prevention Subcommittee 8/22/2024](#)

52. [ConnectED Illinois – Center for Excellence in Aging](#)

- The expansion of the US DOL apprenticeship program to Robinson Correctional Center also began in July 2026 with the filling of the CVI position allocated in FY26 to further expand apprenticeship opportunities.
- DCEO's Office of Employment and Training (OET) invests in workforce programs that help job seekers gain new skills, earn credentials, and access in-demand careers while supporting themselves and their families. Through career, training, and employment services, OET connects individuals to opportunities that promote economic mobility and strengthen Illinois' workforce.
- DCEO continues to address poverty and advance economic mobility through the WIOA and state investments that expand paid training opportunities, reduce barriers to employment, and connect residents to family-sustaining careers. OET-administered programs supporting pathways out of poverty include:
 - Illinois' WIOA Title I Adult Program provides career training, supportive services, and employment services to adults, particularly those with barriers to employment, to help participants obtain in-demand credentials and family-sustaining employment.⁵³ In recent Program Year (PY) reporting (July 1, 2024-June 30, 2025), the program served 8,331 participants, including 6,672 in training, achieved employment rates of 79.8% and 78.8% in the first and fourth quarters after completion, a 76.2% credential attainment rate, and 68.8% measurable skills gain rate.
 - [Apprenticeship Illinois](#) expanded earn-and-learn opportunities that help individuals earn wages while gaining industry-recognized skills and credentials that lead to quality jobs. In PY 2026, the Apprenticeship Expansion Competitive Grant⁵⁴ Program awarded \$9.7 million to 26 grantees to expand Registered Apprenticeship Programs (RAPs), pre-apprenticeship pathways, and intermediary organizations that develop and manage apprenticeship programs over a three-year performance period (July 1, 2026-June 30, 2029). Additionally, 14 Apprenticeship Specialists, supported through Local Workforce Innovation Areas (LWIAs), provide employer support to expand Registered Apprenticeship Programs and strengthen regional work-based learning systems. By connecting individuals to paid training and family-sustaining careers in high-demand industries, Apprenticeship Illinois helps reduce poverty and increase economic mobility.
 - The workforce programs under the Climate and Equitable Jobs Act (CEJA) are entering their third year of operations for most programs. The Climate Works and Workforce Hub training programs have had successful outreach and recruitment, with waitlists developing at most regions. The Energy Transition Navigators have been coordinating with the hubs for outreach, intake, and partnerships. The Returning Resident Program is operating at four IDOC facilities (Decatur Correctional Center, Vienna Correctional Center, Western Illinois Correctional Center, and Kewanee Life Skills Re-Entry Center).⁵⁵ The training program has reported a 50% placement rate into jobs in and outside of clean energy sectors.

53. [Draft Illinois WIOA State Plan Modification 2026 Updated.pdf](#)

54. [Office of Employment and Training](#)

55. <https://www.illinoisworknet.com/CEJA/Pages/CEJAReturningResidents.aspx>

- The Home Illinois Workforce Pilot Project is a \$6 million initiative funded through the Illinois Job Training and Economic Development Program (JTED)⁵⁶. The pilot created a partnership between the DCEO-OET, the Illinois Office to Prevent and End Homelessness (OPEH), and the Illinois Interagency Task Force on Homelessness. The pilot supports four regional grantees that integrate workforce services with housing stabilization efforts, including employment navigation, occupational skills training, work-based learning, supportive services, and rapid rehousing. FY26 efforts focused on strengthening partnerships between Continuums of Care (CoCs), Local Workforce Innovation Areas (LWIAs), and community-based organizations to improve access to employment and career pathways. Early lessons learned indicate that participants in Rapid Rehousing programs experience stronger workforce outcomes due to increased housing stability.
- The JTED Program advances the state's poverty reduction goals by connecting unemployed, underemployed, and underserved populations to training, work-based learning, and family-sustaining careers. In FY26, JTED-funded organizations provided supportive services, including transportation, childcare, technology access, legal aid, reentry services, disability supports, and immigrant and refugee services, helping participants enter and retain employment in high-demand industries. Additionally, a notice of funding opportunity was released for an additional \$10 million in [Round 3 JTED funding](#).
- [Partners for Reentry Opportunities in Workforce Development](#) (PROWD) supports federally incarcerated individuals as they prepare for and transition back into their communities by connecting participants to career readiness, workforce training, digital literacy, and supportive services. Through partnerships with correctional facilities, Residential Reentry Centers, LWIAs, and community organizations, the program addresses barriers to employment and strengthens workforce pathways for justice-impacted individuals. As of June 30, 2026, PROWD served 883 participants statewide.
- In FY26, IDHS and DCEO partnered to support the implementation of new federal work requirements for Able-Bodied Adults Without Dependents (ABAWDs). Through Illinois' network of American Job Centers and workforce providers, SNAP participants are connected to approved, qualifying activities, including online job readiness training, volunteering, vocational training, work-based learning, and employment services that help individuals meet requirements while building skills for good jobs and long-term economic mobility.
- DCEO's Office of Illinois Works administers the Illinois Works Jobs Program Act, which is designed to increase equity and opportunity in Illinois' construction workforce⁵⁷. The Illinois Works Pre-Apprenticeship Program is designed to create a diverse group of candidates to learn pre-apprentice skills and who will ultimately be transitioned into US DOL-registered apprenticeship programs. DCEO provides participants with wraparound services, which assist with items such as childcare or bus fares, to ensure participants complete the program.
- During FY26, ISBE [Career and Technical Education](#) (CTE) programs collaborated with partners in the Association of Rural and Small Schools (AIRSS), IDPH, CTE administrators, and community

56. [Governor Pritzker Awards \\$6 Million in Grant Funding Through Home Illinois Workforce Pilot Program](#)

57. [Illinois Works Jobs Program Act - Illinois Works](#)

organizations to develop a competitive grant program to support the development or enhancement of health sciences CTE programming in rural school districts with priority for those furthest away from funding adequacy. This competitive funding will be awarded during FY27 with an aim of increasing the pipeline of healthcare workers to meet critical labor market shortages in rural communities ranging from CNA-certified graduates who will graduate ready to work in any patient care facility to the community health workers able to help individuals gain access to critical services. A total of nine million dollars in federal Perkins funding has been set aside across three years to fund this grant program.

- In 2025, HFS applied for and received federal Rural Health Transformation Program funding to strengthen healthcare access in rural communities in Illinois and invest in workforce development⁵⁸. As part of its strategy, the State prioritized apprenticeship and work-based learning programs that helped rural residents train for healthcare careers while still supporting their families, removing barriers that often prevent people from entering the field. This initiative reflected Illinois' commitment to building a sustainable rural healthcare workforce by pairing financial investment with accessible, community-centered training opportunities.

Additional State Actions:

ISBE Special Education Department Transition Projects:

Division of Rehabilitation Services within DHS (DRS)–ISBE Interagency Agreement (Broad MOU)

The DRS–ISBE Interagency Agreement is the statewide agreement that guides how DRS, ISBE, and local education agencies (LEAs) work together to provide transition services and Pre-Employment Transition Services (Pre-ETS) to students with disabilities aged 14 ½ until the end of the regular school year in which they turn 22. Through activities such as transition planning, career exploration, work-based learning, vocational rehabilitation services, employer engagement, and collaborative programs, the agreement helps students prepare for postsecondary education, competitive integrated employment, and independent living.

Illinois Pathways to Partnerships Project (IPPP) MOU

The DRS–ISBE IPPP MOU serves as one targeted strategy for expanding the goals of the broader Interagency Agreement. It strengthens existing transition efforts by expanding partnerships among LEAs, DRS, universities, employers, and centers for independent living and by increasing access to work-based learning experiences, internships, and other career-focused opportunities that improve outcomes for students with disabilities aged 10-24.

Illinois Center for Transition and Work (ICTW)

ICTW is an ISBE funded project that helps build the capacity of educators, administrators, and related service personnel to effectively implement transition planning, work-based learning, career development, and employment-focused practices. ICTW provides the training and technical expertise that help schools and partners deliver services effectively for students with disabilities, particularly those with significant support needs.

58. [Rural Health Transformation Program](#)

Promoting Post-school Outcomes for Illinois Students with High Incidence Disabilities – Targeted Training Initiative

This ISBE funded initiative improves outcomes for transition-aged students with high-incidence disabilities by using data to strengthen transition planning and IEP services, providing targeted professional development and technical assistance to educators, and creating a scalable framework for continuous improvement across Illinois. It also develops guidance and resources to help educators better support incarcerated students as they prepare for employment, postsecondary education, independent living, and successful adult outcomes.

Looking ahead, beginning July 1, 2026, DCEO's Office of Employment and Training (OET) will launch the Illinois workNet Universal Referral System, creating a statewide centralized network that helps job seekers connect to the services they need to get and keep a job.⁵⁹ Through one shared platform, workforce partners, state agencies, community-based organizations, and service providers can refer individuals to resources such as transportation, childcare, disability services, language assistance, housing, legal aid, reentry services, and other supports that reduce barriers to employment and improve economic mobility.

Expand Access to Legal Counsel for Illinoisans and Ensure Equitable Access to Court and Legal Processes

- In FY26, the Office of Welcoming Centers for Refugee and Immigrant Services continued to experience strong demand for legal services. Demand for immigration legal services also remained exceptionally high. Through the third quarter of FY26, The Resurrection Project's (TRP) Access to Justice (A2J) and Immigrant Legal Support Program (ILSP) significantly exceeded annual performance targets. Despite temporary service disruptions caused by immigration enforcement actions and a network-wide workshop pause earlier in the year, program outcomes remained strong. Through Q3, TRP reached 157,635 individuals through immigration education efforts, served 32,655 clients through navigation and support services, completed 7,597 legal screenings, trained 536 community navigators, and provided 4,777 accompaniment services. Additionally, 327 individuals received full legal representation in removal proceedings.
- The majority of individuals served through A2J and ILSP programs identify as Latino/Hispanic, including many recently arrived migrants from Venezuela, Ecuador, Colombia, and Mexico. These outcomes demonstrate the continued need for accessible legal, social, and integration services for immigrant and refugee communities throughout Illinois.
- Through partnership with the Illinois Equal Justice Foundation, OPEH works to provide access to legal and financial assistance to tenants facing eviction through the Court-Based Rental Assistance Program. The aim is to provide funds to back pay rent and work with landlords to keep renters in the housing they already have.
- In response to a recent finalized federal Older Americans Act rule, IDoA is updating state rules and will establish a more robust Legal Assistance Developer position to provide leadership in securing and maintaining the legal rights of older individuals.

59. [Referral System Technical Assistance, Tutorials, & Videos](#)

Additional State Actions

In FY26 IDES revamped its Reemployment Services and Eligibility Assessment (RESEA) program for Unemployment Insurance (UI) claimants. RESEA is a required program for claimants who are most likely to exhaust their benefits before getting reemployed. Over 25,000 claimants participate in the program annually. The new RESEA program model is designed to: increase the likelihood that individuals get reemployed before benefits are exhausted; increase quality referrals to workforce partners for retraining and supportive services, if needed; and ensure that claimants understand the ongoing UI eligibility requirements to avoid errors that have an impact on UI benefits while looking for new employment.

Poverty Commission FY27 Recommendations for Pillar 4

- Increase investment in SNAP Employment and Training (SNAP E&T), administered by IDHS, to support statewide access to case management, supportive services, and education and training, including work-based learning models, that help SNAP recipients gain economic mobility and advance into sustainable career pathways.
- Sustain and create additional barrier reduction programs like the Employment Barrier Reduction Fund, administered by IDHS, that can mitigate expenses like transportation or childcare that can make it harder for people to get job training.
- Increase access to legal services for expungement, debt relief, and employment-related civil issues.
- Increase the capacity of community providers to provide supportive employment opportunities such as the “Individual Placement and Support” (IPS), an evidenced-based approach in helping individuals with mental health/behavioral health issues obtain employment, maintain employment, improve employment options and pursue education options for better employment.

Pillar 5: Support Trusted Community Based Providers to Serve the Needs of those In Deep Poverty

Support our Caregiving Workforce by Ensuring Equitable Wages and Develop Meaningful Supports for Unpaid Caregivers

Provide Community-Based Providers with Consistent and Equitable Access to State Funding that Adequately Keeps Pace with Rising Costs

State Actions

Support our Caregiving Workforce by Ensuring Equitable Wages and Develop Meaningful Supports for Unpaid Caregivers

- IDHS-DRS implemented a series of wage increases that elevated the base pay for Individual Providers (IPs) above the statewide minimum wage. Pay rose from \$18.25 per hour in January 2025 to \$20.00 per hour by July 2026.
- To promote retention and reduce turnover, IDHS-DRS added seniority-based wage enhancements. Caregivers earned additional hourly premiums for every 10,000 hours of verified service.
- Through the consumer-directed Home Services Program (HSP), IDHS-DRS allowed eligible relatives—such as adult children, siblings, and extended family members—to be formally hired and paid as caregivers. Once hired, they receive full wages, overtime protections, and access to health benefits. While state regulations prevent spouses and parents of minors from being compensated under HSP, DRS ensures these individuals are connected to alternative programs like the Department on Aging’s Community Care Program.
- By enabling relatives to receive a living wage for caregiving, IDHS-DRS helped families avoid financial instability and prevented caregivers from needing to leave the household to secure unrelated employment.
- IDHS-DRS administered a statewide Paid Time Off (PTO) program, allowing caregivers to earn one hour of PTO for every 40 hours worked—an essential support for caregivers who need time off without losing income.
- In partnership with SEIU’s Member Education and Training Center, IDHS-DRS launched paid mandatory training in June 2025. Caregivers were compensated at their normal hourly rate while completing annual skills updates and safety training, ensuring family and non-family providers alike received professional-grade preparation.
- IDHS-DDD has continued to invest through the Guidehouse rate study in workforce and specifically in increasing Direct Support Professional and ICF Aid’s wages, getting very close to the goal of 150% of minimum wage. In FY26, there was an increase of \$0.80 in the hourly rate.
- Effective January 1, 2026, IDoA increased the reimbursement rates to Community Care Program (CCP) In-Home Services providers from \$29.63 per hour to \$30.80 per hour, supporting a minimum wage of \$18.75 per hour for home care aides working in the program. IDoA allows family members to be paid

home care aides if they meet the pre-requisites, complete training and are hired by an In-Home Service provider.

- In Illinois, domestic workers are entitled to labor protections such as the overtime requirements of the Minimum Wage Law, per the Domestic Workers’ Bill of Rights Act [820 ILCS 182] and paid leave under the Paid Leave for All Workers Act [820 ILCS 192], which is enforced by IDOL. IDOL will continue to conduct educational efforts for employers and employees to know their rights and responsibilities under the law.
- The Support for Family Home Health Aides and Caregivers Act created a statewide program, administered by HFS, to train and certify family caregivers to provide qualified home health services to their medically fragile relatives. The Act required the development of training standards, clinical acuity tools, certification requirements, and a respite program to support family home health aides and other nursing professionals. With federal approval, certified family caregivers could deliver home health services through Medicaid home and community-based waivers, expanding access to care and supplementing existing nursing services.

Provide Community-Based Providers with Consistent and Equitable Access to State Funding that Adequately Keeps Pace with Rising Costs

- IDHS-DRS added a pre-placement payment for Community Rehabilitation Providers through vocational rehabilitation funds.
- OFVP administered statewide violence prevention funding through the Reimagine Public Safety Act (RPSA), supporting community-based organizations operating in communities experiencing high levels of gun violence. OFVP provided technical assistance and training, building support for funded organizations to strengthen program implementation, fiscal management, data reporting, and service delivery, and supported community-level coordination by hosting statewide learning opportunities to strengthen local violence prevention ecosystems.
- IDHS-DDD has continued to invest in increased funding for supports for individuals by investing more than \$700 million over the past four years including additional increases in both the Children’s Residential Waiver and Adults with DD Waiver as well as a 5% increase in the home-based self-directed support budget that allows adults in that program to spend more money on services they need to respond to increased costs.
- In 2022, Illinois extended the Hospital Assessment Program through 2026 to stabilize hospital finances and ensure that facilities serving high numbers of Medicaid patients—especially community based and safety net providers—received more predictable and equitable funding. The renewed program refined payment structures, expanded hospital qualification criteria, and shifted funding toward Medicaid volume and acuity so resources better kept pace with rising costs faced by community providers. These changes strengthened the financial foundation of safety net and rural hospitals, helping them maintain essential services and support historically underserved communities.

Additional State Actions

IDPH supported access to needed health care by providing/managing grants to help fund specialty clinics that care for infants, children, and adults with newborn screening disorders and other genetic conditions. IDPH also provided/managed grants to help fund genetic risk factor screening in local health departments during this time.

Looking Ahead:

- IDoA is working with the UIC School of Public Health to conduct surveys and focus groups which will be used to develop specifications for the build-out of a Caregiver Portal by July 2027.
- IDoA intends to offer trainings developed in partnership with Rush University for the direct care workforce to unpaid caregivers via the Caregiver Portal, once developed.

Poverty Commission FY 27 Recommendations for Pillar 5

- Expand equitable access for small, emerging, and community-led providers by reducing barriers that prevent smaller, grassroots, Black-led, Latino-led, immigrant-led, and other community-based organizations from accessing State funding. This includes simplifying application processes, offering technical assistance before and during the grant cycle, providing language access, reducing unnecessary administrative burden, and creating funding opportunities that do not favor only large, well-resourced organizations.
- The State should strengthen provider capacity through technical assistance and infrastructure support by funding capacity-building supports that help community-based providers meet grant, fiscal, data, compliance, and reporting requirements. This should include training, one-on-one technical assistance, shared administrative tools, data system support, and funding for back-office infrastructure. Capacity-building should be treated as a poverty-reduction investment, not an optional add-on.
- The State should explore better aligning funding with equity and community need. Funding decisions should be guided by poverty data, racial equity data, service gaps, and community input. Priority should be given to providers serving areas with high rates of deep poverty, homelessness, food insecurity, unemployment, limited transportation access, and other indicators of economic hardship. The State should also ensure that rural communities, immigrant communities, and historically underfunded communities have fair access to resources.
- Where possible, Illinois should move toward multi-year grants and contracts for essential services that support poverty reduction. Multi-year funding allows providers to plan, retain staff, build trust with communities, and deliver consistent services. Short-term funding cycles can destabilize providers and weaken the safety net for residents experiencing deep poverty.

Conclusion

Illinois government agencies and partners across the state have a difficult charge to reduce poverty at a time when federal anti-poverty programs, funding, and other supports are seeing extreme disruption and change. The member agencies of the IWGP will continue to work in concert with the Poverty Commission to pursue policies and programs that seek changes at a root-cause level, as ultimately that is where progress will be made in decreasing intergenerational poverty.

The Poverty Commission urges Illinois to prioritize a funding model that recognizes community-based providers as essential partners in reducing poverty. By strengthening the infrastructure of trusted community-based providers, Illinois can improve service access, advance racial and economic equity, and make measurable progress toward reducing deep and persistent poverty. The IWGP will work with member agencies to strengthen cross-agency coordination through shared data, common referral pathways, interoperable technology, and joint accountability measures.

Appendix

Number of People Living in Poverty by Age Group

Year	Group	Number of People Living in Poverty (<100% FPL)	Percentage Below Poverty Level
2024	Children	374,795	14.1%
	Working Age	818,139	10.8%
	Older Adults	245,536	11.1%
2023	Children	389,823	14.7%
	Working Age	809,869	10.8%
	Older Adults	226,825	10.6%
2022	Children	424,983	15.9%
	Working Age	830,755	11.0%
	Older Adults	213,905	10.2%
2021	Children	442,261	16%
	Working Age	851,062	11.2%
	Older Adults	205,200	10%
2020	Children	454,654	16.2%
	Working Age	864,994	11.3%
	Older Adults	169,022	8.8%
2019	Children	436,327	15.7%
	Working Age	814,173	10.7%
	Older Adults	170,042	8.6%
2018	Children	456,926	16.2%
	Working Age	881,959	11.4%
	Older Adults	170,362	8.8%
2017	Children	486,196	17.0%
	Working Age	921,313	11.9%
	Older Adults	162,244	8.6%
2016	Children	511,679	17.7%
	Working Age	943,685	12.1%
	Older Adults	166,144	9.2%
2015	Children	558,784	19.1%
	Working Age	995,263	12.6%
	Older Adults	149,211	8.5%

Year	Group	Number of People Living in Poverty (<100% FPL)	Percentage Below Poverty Level
2014	Children	593,186	20.2%
	Working Age	1,059,126	13.4%
	Older Adults	152,223	8.8%
2013	Children	616,060	20.7%
	Working Age	1,081,022	13.6%
	Older Adults	148,311	8.8%
2012	Children	624,272	20.7%
	Working Age	1,082,219	13.7%
	Older Adults	144,071	8.8%
2011	Children	658,340	21.6%
	Working Age	1,091,542	13.8%
	Older Adults	130,083	8.2%
2010	Children	600,045	19.4%
	Working Age	1,001,778	12.7%
	Older Adults	129,888	8.4%

Source: [U.S. Census Data, S1701](#)

Number of Poor and Poverty Rate in Illinois: 2000 to 2024

Year	Percent Extreme Poverty (<50% FPL)	Percent below Poverty (<100% FPL)	Percentage Below 125% FPL
2024	5.9%	11.6%	14.8%
2023	6.0%	11.6%	14.6%
2022	6.2%	11.9%	15.3%
2021	6.0%	12.1%	15.4%
2020	5.5%	12.0%	15.7%
2019	5.1%	11.5%	15.0%
2018	5.6%	12.1%	16.1%
2017	5.8%	12.6%	16.7%
2016	5.9%	13.0%	17.1%
2015	6.2%	13.6%	17.8%
2014	6.6%	14.4%	18.7%
2013	6.8%	14.7%	18.9%

Year	Percent Extreme Poverty (<50% FPL)	Percent below Poverty (<100% FPL)	Percentage Below 125% FPL
2012	6.5%	14.7%	19.0%
2011	6.9%	15.0%	19.6%
2010	6.1%	13.8%	18.1%
2009	6.0%	13.3%	17.5%
2008	5.4%	12.2%	16.3%
2007	5.3%	11.9%	15.8%
2006	5.5%	12.3%	16.2%
2005	5.5%	12.0%	15.7%
2004	5.8%	11.9%	16.0%
2003	5.2%	11.3%	15.1%
2002	5.6%	11.6%	14.8%
2001	4.9%	11.2%	14.5%
2000	4.6%	11.1%	14.7%

Source: [U.S. Census Data, B17002](#)

Poverty by County 2024

County	Families below Poverty	Persons below 150% FPL	Persons Below Poverty
Pulaski	15.2%	37.8%	26.1%
Alexander	13.3%	34.2%	21.0%
Johnson	13.1%	23.6%	16.7%
White	13.1%	28.9%	16.4%
Saline	13.0%	26.2%	17.1%
Perry	12.7%	24.6%	16.9%
Union	12.4%	27.6%	19.4%
Franklin	12.3%	29.0%	16.9%
Vermilion	12.2%	27.6%	17.2%
Jackson	12.1%	35.1%	21.8%
White	13.4%	28.8%	16.4%
Franklin	12.8%	27.9%	17.5%
Perry	12.5%	24.2%	16.9%
Jefferson	10.6%	21.8%	13.5%
Marion	10.8%	26.2%	15.4%

County	Families below Poverty	Persons below 150% FPL	Persons Below Poverty
Fayette	9.4%	25.1%	15.5%
Bond	8.0%	20.6%	10.9%
Coles	11.6%	28.6%	18.7%
Pike	11.0%	25.7%	14.8%
Vermillion	12.8%	27.6%	17.7%
Logan	10.2%	18.9%	13.1%
Hancock	11.3%	20.6%	12.3%
McDonough	9.9%	26.4%	17.2%
Rock Island	11.0%	22.9%	15.5%
Winnebago	11.1%	24.3%	15.6%
DeKalb	10.1%	22.9%	14.8%
Knox	8.4%	25.1%	14.6%
Schuyler	8.2%	28.8%	20.8%
Champaign	7.2%	26.4%	19.1%
Clay	10.5%	29.6%	17.5%
Edwards	10.6%	25.3%	16.5%

Source: U.S. [Census Data, S1701](#) and [S1702](#)



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on Poverty Elimination
and Economic Security