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ABSTRACT

In order to better serve Illinois individuals and schools, human service organizations must pursue collaboration among and within state agencies, community organizations and resources, and families. Families have the primary responsibility for raising their children, but economic and social factors make it increasingly harder for families to do this alone. In this context, Illinois human service agencies must support the efforts of families by, for example: (1) increasing the coordination of state-funded programs which provide subsidized early child care; (2) making Head Start and state kindergarten programs available to all eligible children; and (3) lessening the risk of abuse, neglect, and family disintegration by lowering the rate of teenage pregnancies. Collaboration among human service agencies entails shifting control of programs away from the state to the local level. At the state level, a new policy-making body called "The Office of Children, Youth, and Families" could coordinate planning for services and establish quality guidelines. This office could then work with community coordinating councils who have the authority to establish common goals; pool and manage resources; engage in joint planning, implementation, and evaluation; and delegate individual responsibilities for specified outcomes. State and local and inter-agency partnerships should be mandated. An appendix describing initiatives currently underway in Illinois is included. (JW)

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A NEW PARADIGM:

MOVING TOWARD COMPREHENSIVE SERVICES

The Illinois Initiative for Comprehensive Children and Family Services

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**A NEW PARADIGM:
MOVING TOWARD COMPREHENSIVE SERVICES**

**The Illinois Initiative for Comprehensive Children
and Family Services**

Communities and state government need to adopt a new way of delivering human services. The locus of decision-making must be dramatically changed from state government to partnerships between state officials, community leaders -- and families themselves. Our disjointed, outmoded, and overcentralized system of human services is failing our children and frustrating our taxpayers. Current reform efforts often place too much emphasis on the inefficiencies of the system as opposed to the needs of the family. The people who are closest to the problems are almost always left out of the decision-making process.

Only by adopting a fundamentally new paradigm will Illinois policy makers be free to restructure existing human services so that they are well coordinated with one another and carefully linked to the strengths and needs of our schools. The integrated system we seek must be created by executive order, statute, or interagency agreement. We are convinced that with leadership from the Governor, comprehensive service integration can become a reality. The economic and social consequences of our collective failure to revitalize human services in Illinois are simply unacceptable.

Moving Toward a New Paradigm

The time has come for us to support children and families differently. We need to embrace a new paradigm in which collaboration occurs between and within state agencies, community organizations and resources, and families. This new paradigm will clearly establish authority for the full range of children and family services within the Governor's Office, but governance of these services will be shared with community leaders, parents, and child-serving professionals.

The time has come for us to support children and families differently.

This new governance structure has three basic elements: an Office of Children, Youth and Families in the Governor's Office; community coordinating councils; and a mandated partnership between the state office and local councils.

The new paradigm will better respond to the complex and diverse needs of children by fostering communication between the state and local levels; requiring a common vision; and strengthening links among families, communities, institutions and state government. The new paradigm will focus reform efforts on qualitative and quantitative outcomes for children and families. The new paradigm will be one in which children and families are supported by state agencies and community resources in a way that enables them to ultimately become less dependent on the system. This paper describes the current state of affairs for children and families in Illinois and outlines first steps for reform.

The Time is Now

Although families have the primary responsibility for raising their children and assuring their needs are met, they cannot do it alone. As *Illinois Kids Count: Imagine the Possibilities* makes clear, Illinois families and communities have undergone great change in recent years. This change has been influenced by the weakened economy, the increase in the number of single-mother families, and the federal reduction in services to children and families leaving a larger burden on the state.¹ While families are struggling under these conditions, children are the ultimate victims. Their well-being is affected by the quality of education, health, economic security and family support available.

Illinois ranks 38th among the 50 states and the District of Columbia on a variety of indicators of well-being, despite the fact that we have the 12th highest per capita income. Even though children now make up a smaller percentage of the Illinois population, they are more likely to be poor than before. Nearly 700,000 children in Illinois are living in poverty. Children of the working poor present a unique problem as the income for a minimum-wage household is \$8,500, well below the federal poverty threshold of \$14,800 for a family of four. In education, Illinois now ranks 44th in terms of state per-capita spending as opposed to 7th just a decade ago. Cook County illustrates the inequity of educational funding as funding per student ranges from \$3,000 to \$11,000 from school to school.

The challenge we face demands a public response more coherent, more innovative, and more realistically funded than any previously attempted in Illinois.

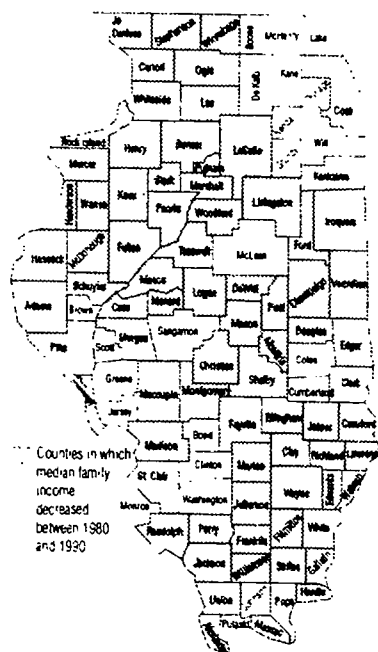
Although the number of children in Illinois has declined, a greater share of them are at risk of educational failure, violence and economic hardship. And rural areas are as likely to confront problems as urban areas. Median family income decreased between 1980 and 1990 in 79 of 102 counties. Children who are poor are less likely to have access to health care and social services, and are affected when their community is undergoing economic adversity as well.

When families experience severe stress, as Lisbeth Schorr has observed, love often turns into neglect, affection withers into hostility, and discipline becomes abuse. Poverty, mental illness, drug abuse, and social isolation can weaken families and impair families' ability to care for their children.² Seventy-three Illinois counties experienced an increase in foster care placement between 1985 and 1992. We have clearly failed to address the fundamental needs of Illinois children. Communities, employers, the state, local agencies and institutions must all help provide the backdrop of economic security and supportive services families need to do the hard work of raising children.

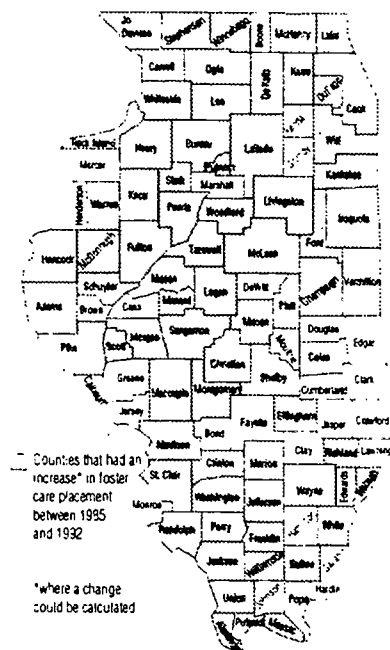
¹ Voices for Illinois Children, *Illinois Kids Count 1993: Imagine the Possibilities* (Chicago: Voices for Illinois Children, 1993), 3.

² Lisbeth B. Schorr, *Within Our Reach: Breaking the Cycle of Disadvantage* (New York: Doubleday, 1988), 151.

**Decreases in Median Family Income
1980-1990**



**Increases in Foster Care Placement
1985-1992**



Geographic and community boundaries are currently defined differently by state agency planning authorities. The Department of Children and Family Services divides the state into regions that are different from the Department of Alcoholism and Substance Abuse's InTouch networks and school districts. The Departments of Public Aid and Public Health both define their service areas along county lines. A cohesive approach to children's services means that all of these different boundaries must make sense to local communities and families and reflect natural community boundaries as much as possible.

State government officials have not entirely ignored these problems. Multiple planning initiatives currently underway seek to develop more comprehensive approaches toward services for children and families to enhance overall well-being for families and school-readiness and success for children. Four state agencies have agreed to share boundaries and use Child and Adolescent Local Area Networks as common planning and service delivery boundaries. The appendix to this paper provides brief descriptions of a number of current initiatives, which involve some fifteen agencies and organizations. However, while these initiatives begin to move us in the right direction, they remain isolated efforts and have the potential to confuse policy makers, frontline workers and families alike. Thus, we confront the critical challenge of integrating state and local collaborations and coordinating the planning of these individual efforts.

The challenge we face demands a public response more coherent, more innovative, and more realistically funded than any previously attempted in Illinois. We know that fragmented, categorical service delivery systems have shown limited success in dealing with populations suffering from multiple problems. We know that prevention and early intervention strategies are cost effective. We

know that in many instances public schools can be the best access points to provide comprehensive services to those in need. We know that family and community participation is essential. The largest remaining uncertainty is whether Illinois has the will and determination to face up to this challenge.

Conditions Must Improve for Children and Families

The first need of every child is to belong to a sustaining family -- a family that provides for the fundamental needs of the child. All families require support from the human services system, integrated with and including education, health and early childhood care. High-risk families need additional support. Any attempts at reform must keep children and families as the focus of their efforts. Illinois must be committed to achieving specific outcomes demonstrated by an improvement in child well-being indicators. While these indicators serve as a measure of the quality of services, effective service delivery is attained only when families experience a change in the way in which their needs are met.

We need, for example, to increase the coordination of state-funded programs which deliver subsidized early child care and education services to Illinois children, and make Head Start and state kindergarten programs available to all children who are eligible in Illinois. We need to reduce both the number of Illinois children living in foster care and the length of time they remain in foster care. We must lessen the risk of abuse, neglect and family disintegration by lowering births to mothers who are single, teen-aged and have not completed high school. We must provide sufficient child care so that parents receiving Aid to Families with Dependent Children can participate in job training or educational programs. And we must increase the number of mothers who receive health care during the critical first trimester of pregnancy and ensure that babies with developmental delays receive critical educational and therapeutic services.

Effective service delivery is attained only when families experience a change in the way in which their needs are met.

Reform efforts must also lead to increased investment in communities' capacity to serve children and families, and in neighborhood resources available to children and families. The end result will be stronger communities, stronger families, and the enhanced well-being of all children.

Building Shared Governance

Collaboration is required to achieve comprehensive system reform. Collaboration is not coordination, which involves little institutional change. Stages of the collaboration process include planning, building consensus, implementation, and evaluation; and collaboration ultimately leads to joint goals and shared responsibility. As Charles Bruner points out, collaboration can occur at different levels -- among upper-level agency administrators, among line workers in different agencies, between the frontline worker and other workers in the same agency, and between the frontline worker and the family. Because of the interrelationship among the various levels, collaboration must occur at not one but all levels.³

The new paradigm Illinois requires can only be achieved through fundamental and radical reform of the current system. It demands collaboration among groups at the state and local levels. Authority must rest both with communities or individuals in communities who are responsible for children and with state government. This necessitates a shift in governance to the local level. Services must be flexible, responsive, culturally appropriate, and designed according to families' specific needs. Family support centers which assist families in becoming self-sufficient are an important part of the solution. They can be school-linked but should include access to a range of services such as health care, child care, parent education, GED preparation, case management, job placement, economic services (AFDC, Medicaid, Food Stamps), and food distribution.

The New Paradigm

- *Office of Children, Youth and Families in the Governor's Office*
 - *Community coordinating councils*
 - *Mandated state-local partnership*
-

The new paradigm for Illinois will shift authority away from Springfield to the local level. The mandate for this governance change -- through executive order, legislation, or interagency agreement and brought about by gubernatorial leadership -- will have three elements:

Office of Children, Youth and Families

At the state level, a new policy-making body will address the entire range of services for children and families. The Office of Children, Youth, and Families in the Governor's Office will coordinate overall planning for the human service and education agencies in terms of leadership, administration, policy, funding and management information systems. The Office will also establish guidelines to ensure quality services.

³ Charles Bruner, *Ten Questions and Answers to Help Policy Makers Improve Children's Services* (Washington, DC: Education and Human Services Consortium, 1991), 10.

Community Coordinating Councils

At the local level, community coordinating councils will have the authority and the responsibility to establish common goals; pool and manage resources; engage in joint planning, implementation and evaluation; and delegate individual responsibilities for outcomes. Risk-taking and experimentation must be encouraged and supported at the frontline level. Families should have a single family advocate or caseworker, multiple points of entry to the system, and access to family support centers.

An effective governance system will appropriately link the education and human services systems. In order to accomplish this goal, the community councils must involve key institutions and individuals who will lend them credibility and stature in the community. And in order for these councils to be successful, they must have authority from both the state and local levels:

- To make decisions that cut across service domains.
- To plan and implement program and systems change.
- To pursue new patterns of funding and decision-making, new forms of frontline practice, and new requirements for sharing client information and program performance data.⁴

State and Local Partnership

The collaborations at the state and local levels cannot work in isolation. A crucial element of the new governance structure is mandated partnership between the state and local levels.

In order to establish this new paradigm of collective governance, families must participate directly in the community governance structure. Other necessary components are commitment and accountability of the community coordinating councils for reform of service delivery at the local and frontline level; formal agreements which emphasize shared decision-making; common or integrated budgets and resource allocation; and participation by key institutions and resources in the community engaged in solving problems.⁵

The new paradigm for Illinois will involve a radical shift in authority away from Springfield and to the local level.

⁴ Atelia I. Melaville and Martin J. Blank, *Together We Can: A Guide for Crafting a Profamily System of Education and Human Services* (Washington, DC: United States Government Printing Office, 1993), 86.

⁵ The Annie E. Casey Foundation, "Found Difficult and Left Untried: The Governance Necessary for Service Integration," *A.E.C. Focus* (Winter 1993), 19.

Our Call for Action

Despite some positive steps, Illinois' political system has not yet responded adequately to the enormity and gravity of the challenge we face. State human service agencies still operate in isolation, within a system plagued by fragmentation and categorization. They lack the capacity to respond to early warning signs of children and adults at risk of failure; instead, they react after a crisis has occurred - when problems are more difficult to solve and solutions more costly to achieve. Successful prevention and early intervention services should be expanded statewide and linked to neighborhood schools when appropriate.

Gubernatorial leadership is required to focus attention on the required paradigm, to jump-start the process, and to provide direction for stakeholders who will be able to sustain the restructuring effort. The federal Family Preservation and Family Support Initiative and the new Healthy Families Illinois legislation provide opportunities for widespread system reform. Such efforts can create a climate that is more amenable to change and provide a strong framework for reconfiguration of the human services system. Illinois leadership must seize and capitalize upon these opportunities.

To obtain the necessary shift in governance, the Governor must act. The Governor should create an Office of Children, Youth and Families in the Governor's Office to reconfigure the human services system and bring about such a shift. The responsibility rests with the Governor to ensure that the Office coordinates policies; assesses the impact of any single agency's policies on collaboration at the community level; streamlines and coordinates current initiatives; and advocates a new vision for Illinois through the publication of *A Children's Plan for the Future*. The Governor should create an Advisory Group to the Office of Children, Youth and Families which represents a broad base of individuals. And the Governor should actively engage the public and members of the General Assembly in building support for these reforms.

State officials, community leaders and families all have important roles to play in bringing about systemic change in Illinois.

State officials, community leaders and families all have important roles to play in bringing about systemic change in Illinois. Yet state and local leadership must be invested in and committed to restructuring systems and working in partnership. The focus of Illinois' reform efforts should be, first and foremost, the needs of children and families. This demands a fundamental shift in governance and the use of common geographic boundaries by state agencies and networks of community agencies and organizations.

Moving toward the new paradigm of comprehensive services for children and families in Illinois will not be easy. But our need for a new governance system -- an Office of Children, Youth and Families, community coordinating councils, and a formal partnership between the two -- is clear. The responsibility lies with the Governor if we are to realize this vision in Illinois.

APPENDIX

CURRENT INITIATIVES IN ILLINOIS

The following are planning initiatives currently underway which seek to develop more comprehensive approaches toward services for children and families in order to enhance overall well-being for families and school-readiness and success for children. They are initiated at the federal and state levels and involve some fifteen agencies and organizations. While they have begun to move us in the right direction, they still remain isolated efforts. Thus, we are faced with the additional, yet critical, challenge of integrating state and local collaborations and coordinating the planning of these individual efforts.

Coordination Efforts Created by State Initiatives

• Governor's Task Force on Human Services Reform

Governor Edgar convened the Task Force, with public and private membership, in February of 1993 to re-examine Illinois' health and human services delivery systems. Over the past year, the Task Force has tried to determine the nature and scope of the problems of the human services system as experienced by citizens, providers, advocates and public officials, and to develop a plan to test system-wide reform at the community level. In response, the Annie E. Casey Foundation recently awarded Illinois a \$2.5 million grant to coordinate services for troubled children and families in five pilot communities: DuPage County, the Grand Boulevard neighborhood in Chicago, Springfield, the Southern Seven counties, and Waukegan. The Task Force calls for local "federations" to establish community-specific priorities and anticipates a state-level collaboration to coordinate planning and decision making. The Governor's staff point to the Task Force as the focal point for all human services system reform activities.

• Project Success

A state project for disadvantaged children, this initiative seeks to link health and social services with public schools. There are now projects operating in 39 communities throughout Illinois. Project Success operates through local governing boards which convene teachers, parents, community-based organizations, business representatives, park districts, libraries, and state and local providers to identify problems of school-age children and respond in a comprehensive and collaborative way. The project aims to ensure that children and their families receive the necessary services to be successful in the classroom. It works to improve access to health and human services by bringing social services to schools and fostering communication and collaboration at the grassroots level. Collaboration at the state level among human service agencies and the State Board of Education is coordinated by the Governor's Office.

• Child and Adolescent Local Area Networks (C&A LANs)

Established in 1993 by the Illinois Department of Mental Health and Developmental Disabilities (DMHDD), C&A LANs exist in 40 communities and are slated to be in operation statewide by June 1994. The LANs geographic boundaries follow the existing Department of Children and Family Services (DCFS) Youth Services Planning Areas. The DMHDD is coordinating this effort with the DCFS, the Department of Alcoholism and Substance Abuse, and the State Board of Education to create a geographically-based, integrated system to meet the mental health needs of all children served by those agencies and their delegates through contractually linked, comprehensive services systems. Services for the priority population - severely emotionally disturbed youth - include mental health, child welfare, health, education, recreation, vocational, alcohol and substance abuse, social services, juvenile justice, individualized service planning, continuous case management, and case advocacy. Local planning is aimed at insuring the existence of adequate resources in each community, minimizing the need for dislocation and placement, and creating a more flexible and responsive system in terms of community and individual needs. Recently, DCFS has indicated that the child welfare system will adopt the C&A LAN structure as the geographic unit and local authority for child welfare services.

Federal Mandates for State Planning

• Family Preservation and Family Support Initiative

This federal initiative was created by the Omnibus Budget Reconciliation Act of 1993 and is funded through Title IV-B Part 2 of the Social Security Act. It is intended to provide states with new funds for family preservation and family support services, and thus promote family strength and stability, enhance parental functioning, and protect children through a capped entitlement. States are encouraged to use the funds strategically and creatively with an eye toward broader system reform. Each state must first implement a collaborative, broad-based, and inclusive planning process to identify the changes needed to make service delivery more responsive to individual and community needs and more sensitive to the context in which they are delivered. Illinois could receive as much as \$37.7 million in new federal funds over the next five years. The Department of Children and Family Services serves as the lead agency in Illinois.

• Early Intervention Local Interagency Councils

The Early Intervention Services System, established in both federal and state law, is a program to identify and serve developmentally delayed infants from birth to 36 months of age. Illinois' Interagency Council consists of the State Board of Education; the University of Illinois' Division of Specialized Care for Children; the Illinois Planning Council on Developmental Disabilities; the Departments of Rehabilitative Services, Mental Health and Developmental Disabilities, Children and Family Services, Public Health, Public Aid, Alcoholism and Substance Abuse; parents; providers; a member of the General Assembly; and a representative who trains professional personnel to serve infants and toddlers. Interagency agreements define each agency's responsibility for paying for services and resolving disputes. The State council has established 45 service areas, each governed by a Local Interagency Council. These councils develop agreements between local agencies, resolve disputes, conduct local needs assessments, and identify and resolve access issues.

• Head Start

The 1994 reauthorization of Head Start provides for program expansion and requires grant applicants to undertake community-wide strategic planning and needs assessments in collaboration with other private organizations and public agencies. Section 112 creates the Initiative of Families with Infants and Toddlers. A State Liaison Officer is to be selected by the state Head Start Association to coordinate Head Start with health care, welfare, child care, education and national service activities, family literacy services, and activities relating to children with disabilities.

• Goals 2000: Educate America Act

This federal law introduces new planning requirements for child and family services and provides for a state panel to develop a state education improvement plan and establish standards and performance measures. The plan must specifically address early childhood and access to other human service programs like health, nutrition, mental health and social services. The panel must include representatives of more than 30 different constituencies. Parent participation is mandated. The panel is to spend the first year planning and the four subsequent years overseeing the implementation of the state plan.

• Community Services Block Grants (CSBG)

Recipients of these grants, distributed in Illinois by the Department of Commerce and Community Affairs, are required to develop a Community Action Plan which includes a needs assessment and a description of the service delivery system and linkages to be developed in order to fill identified service gaps. CSBG funds are to be coordinated with other public and private sources for information, referral, case management, and follow-up services. The overall goals are self-sufficiency, family stability, and community revitalization.

- **Local Partnerships**

The School to Work Opportunities Act of 1994 calls for the creation of a state office and local partnerships to address issues of training within schools and industry. State plans are to include human service agencies. Federal grants to states and communities are available to create programs for non-college bound youth integrating traditional and vocational education.

New Proposals for State Planning

- **Healthy Families Illinois**

The Illinois Senate and House of Representatives recently passed a child welfare reform bill which directs the Department of Public Health, along with the Departments of Children and Family Services, Public Aid, and others, to develop Healthy Families Illinois. A steering committee is to be assembled to plan for the implementation of the innovative child abuse prevention program Healthy Families America. This program, already in operation in several other states, identifies families at risk of child abuse or neglect at the time a child is born and offers supportive services to a family on a voluntary basis and before abuse occurs.

- **Success Starts Young: Toward the Creation of an Early Childhood System**

The state legislature recently authorized the creation of a work group on early childhood to promote the development of a well-financed, high-quality, early childhood care and education system for children ages birth to eight. The Work Group's efforts will be supported by Success Starts Young, a new project of Voices for Illinois Children, aimed at linking and integrating Head Start with other preschool programs to yield a comprehensive system that will include: early childhood education, early childhood care, parental involvement, nutrition and health services, and social service supports. Voices serves as the catalyst for building consensus and fostering collaboration among key players and interest groups.



April 1995

Dear Friend of Children,

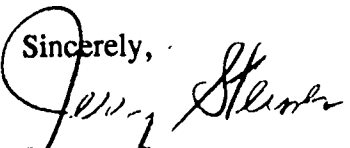
In today's political climate, the call for substantial welfare and human services reform has taken on new reality. What was once merely a rhetorical question has suddenly moved to the center of the political agenda in Washington, D.C. and Springfield. It seems certain that dramatic changes will be adopted that will affect public policies and programs for children and their families in the years ahead. Now, perhaps more than ever, we in Illinois must engage in the important work of restructuring our existing system of human services so that they are comprehensive, well coordinated with one another, community-based and carefully linked to our schools.

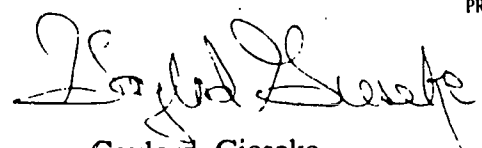
With the generous support of Kraft Foods, Voices for Illinois Children is pleased to share the enclosed copy of *A New Paradigm: Moving Toward Comprehensive Services*. The paper describes the current conditions confronting our youngest citizens and outlines first steps toward reform. In short, Illinois must shift decision-making about services for children and families from the state level to a partnership between state officials, community leaders and families themselves. The new paradigm we envision has three basic elements:

- an Office of Children, Youth and Families within the Governor's Office, which will integrate policy-making at the state level;
- Community coordinating councils, which will engage in joint planning, implementation and evaluation at the local level; and
- Mandated state-local partnership, which will require crucial collaboration between the state office and local councils.

A New Paradigm provides more details about this vision for reform. We encourage you to use these ideas to foster or continue your own discussions. We welcome your response to this paper and we urge you to participate as our state moves toward a new paradigm of comprehensive services for all Illinois children and their families.

Sincerely,


Jerome Stermer
President


Gaylord Gieseke
Projects Director

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About Voices for Illinois Children

Voices for Illinois Children champions the full development of every child in Illinois. Special emphasis is placed on those children who live in poverty or are vulnerable because of discrimination, ill health, or family stress.

Voices is a statewide, nonprofit, multi-issue advocacy group addressing problems faced by Illinois children and their families. Through research, public education and coalition building, Voices generates support from and facilitates collaboration among civic, business, and community leaders; advocates for specific program and policy reforms; and monitors these reforms. Voices does not provide social services and accepts no government funding.

About The Illinois Initiative for Comprehensive Children and Family Services

The Illinois Initiative for Comprehensive Children and Family Services, an ongoing public education and advocacy project of Voices, promotes long-range system reform which strengthens communities, supports and enables families, stresses prevention and early intervention, appropriately links services to neighborhood schools, and provides single points of access. Through a series of activities, Voices will continue to encourage public discussion and reaction among public officials, service providers, local leaders and Illinois citizens about the need for system reform and the merits of a comprehensive approach to social services delivery, integrated with education, for children and families.

Authors

This paper was written by Ann Kirwan, Gaylord Gieseke and Jerry Stermer. The views expressed in this document are solely the responsibility of Voices for Illinois Children.

If you would like additional copies of this paper or further information about the Illinois Initiative for Comprehensive Children and Family Services, please write or call Voices: 208 S. LaSalle Street, Suite 1580, Chicago, Illinois 60604, (312) 456-0600.



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