

E X E C U T I V E   O F F I C E   O F   T H E   P R E S I D E

08-Aug-1996 06:54pm

TO:           (See Below)

FROM:       Dorothy K. Craft  
             Domestic Policy Council

SUBJECT:   PARTNERSHIPS FOR STRONGER FAMILIES

MEMORANDUM TO PARTNERSHIPS STEERING COMMITTEE

FROM:       JEREMY BEN-AMI

SUBJECT:   MEETING CANCELLATION AND  
             SUMMARY OF ACTION TEAMS' PROGRESS

The meeting of the Partnerships for Stronger Families Steering Committee scheduled for next Wednesday, August 14, has been cancelled. The Steering Committee will meet next on Wednesday, September 18 from 2:00-4:00 pm in the Truman Room at the White House Conference Center (726 Jackson Place).

During the month of August, the individual Action Teams are continuing to work toward the goal of producing specific products that will be shared with the Steering Committee at the September meeting.

\* The Action Team on Technical Assistance has distributed a survey to managers of technical assistance programs, seeking information about the structure and process of current federal technical assistance. In addition, members of the Action Team are conducting interviews to document the specifics of innovative technical assistance initiatives. By September 18, the team will produce a draft working paper analyzing the current status of technical assistance and efforts making recommendations for change.

\* The Action Team on Financing Flexibility is continuing to develop a guide to waiver authority within existing federal programs that will be useful to Empowerment Zone and Enterprise Community initiatives, as well as other community efforts. By September 18, this team will have developed a draft version of this guidebook.

\* The Action Team on Accountability and National Indicators

will convene a meeting of subcabinet-level agency executives in early September to develop a listing of key issues relevant to publishing a list of national indicators on children's well-being. The group will also develop a paper examining issues of accountability in intergovernmental partnerships for children and families. By September 18, the Action Team will have developed draft copies of both products for review.

\* The Action Team on Information Dissemination is developing a prototype of a "one-stop" electronic point of access to information on federal resources for children and families. This version will be available for demonstration at the September 18 meeting.

\* The Action Team on Promoting Intergovernmental Partnerships is reviewing papers describing the structure and experiences of various models of intergovernmental partnerships. The group will convene a working meeting on August 13 to consider the lessons of these partnerships and use them to develop a framework for intergovernmental partnerships. A draft of the framework, along with a preliminary concept paper to accompany it, will be available for discussion at the September 18 meeting.

Following the July Steering Committee Meeting, a meeting of the Domestic Policy Council was set for September 30 to discuss the initial products developed by each Action Team of the Partnerships for Stronger Families effort. Our September meeting will be a critical one for that effort as each team shares the draft products of its work to date. I thank you for your work and commitment to move us forward toward our goal.

Please add the following dates to your calendar for meetings of the Partnerships for Stronger Families Steering Committee:

September 18

October 17

November 21

December 19

All meetings will be held in the Truman Room of the White House Conference Center (726 Jackson Place) from 2:00-4:00 pm.

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## **Summary Report on Indicators of Child Well-Being**

A Proposal from the Reporting Committee of the  
Federal Interagency Forum on Child and Family Statistics

### **Background and Purpose**

At the first meeting of the Federal Interagency Forum on Child and Family Statistics, Duane Alexander proposed that the Forum produce an annual report to the President on the status of children. Although ASPE is producing a comprehensive report on the well-being of children and youth, the Forum saw the need for a summary report as well. The Reporting Committee herewith proposes for consideration by Forum members a process for preparing, reviewing, and releasing such a summary report and a list of indicators that would be included.

The purpose of the report is 1) to summarize the well-being of children and youth for the general public and the policy communities in an accessible format 2) to monitor child and youth well-being over time, and 3) stimulate the improvement of the collection and reporting of data on children and youth by federal statistical agencies through their involvement in this process and through recommendations to the Forum's data collection committee. The indicators proposed represent the best available data on topics which the Forum member agencies agree are of the highest importance in monitoring child well-being, and they were selected through a consensus process by representatives of each agency. Special feature measures could be highlighted each year, and "guest" measures are proposed in areas which the committee felt were important to measure but which do not currently have regular, continuous, or complete coverage in federal surveys.

### **Preparation, Review, and Release**

The Reporting Committee proposes that the report be prepared under the direction of the committee with the support of Child Trends, Inc. Child Trends has completed much of the work already in the preparation of the ASPE report "Trends in the Well-Being of Children and Youth", and has proposed the initial set of indicators from which the committee deliberated, some of which were calculated by Child Trends staff. The role of the committee will be to make final decisions regarding the report content and style, to provide data to Child Trends when necessary, and to review the report, (particularly sections using data from their agency). Final approval of the indicators to be included rests with the Forum member agencies, and the committee recommends that review be obtained by experts outside the government as well to help inform the deliberations of the committee. The committee will coordinate the review process. Forum members will have input into the report at all stages of development through their representative on the committee.

The cover of the report will carry the Forum name and perhaps a logo, and the title page of the report will state that it was prepared under the direction of the Federal Interagency Forum on Child and Family Statistics by Child Trends, Inc. All of the Forum members will be listed inside the cover, as in the Aging Forum reports.

The format that the committee envisions for the report is a short, colorful executive summary with graphics and text, like that of NCHS' Health United States: 1994 (without the appendices).

The committee proposes that one agency take the lead in releasing the report. This will result in efficiencies in the review and clearance process, eliminating the need for multiple formal reviews by each statistical agency. The committee proposed that either ASPE or NICHD release the report, since these agencies are most active in coordinating activities around child well-being. After discussions between the two agencies, NICHD stated its willingness to release the report.

The costs for the preparation and production of the report would be shared by the member agencies of the Forum. We have commitments for sufficient funds to produce the report---about \$5,000 from each agency. In addition to the normal government distribution of the report, partnerships with private organizations could be explored to disseminate the report to wide audiences.

### **The Indicators**

Indicators were chosen by the committee to represent the same domains of children's lives as are represented in the ASPE report: Population and Family Characteristics, Economic Security, Health and Health Care, Behavioral Health, and Education. The committee used the following guidelines in selecting the indicators:

- 1) they must be easy to understand by broad audiences.
- 2) they must be objective, and their importance must be based on research rather than public opinion.
- 3) they must be balanced so that no one domain of children's lives would dominate the report.
- 4) they must be available regularly so that they can be updated annually (or nearly) and show trends over time.
- 5) they must be representative of large segments of the population, rather than one concentrated group, and.
- 6) there must be reliable estimates available for the indicator.

The committee chose 26 indicators for the annual report which are specified in the table which follows. In addition, the committee proposes presenting 4 additional indicators that are important, but for which the data are not regularly available or for which coverage of the phenomenon in federal surveys is not yet optimal. These are listed on a "guest list" at the end of the table.

### List of Indicators

| Indicator | Description | Source | Periodicity |
|-----------|-------------|--------|-------------|
|-----------|-------------|--------|-------------|

#### Population and Family Characteristics

|                                       |                                                                             |           |        |
|---------------------------------------|-----------------------------------------------------------------------------|-----------|--------|
| 1. Number of Children                 | Number of children under age 18                                             | March CPS | annual |
| 2. Child Proportion of Population     | % of total and dependent populations                                        | March CPS | annual |
| 3. Minority Children                  | % of children who are other than white non-Hispanic                         | March CPS | annual |
| 4. Children in Single-Parent Families | % of all non-institutionalized children under age 18 living with one parent | March CPS | annual |

#### Economic Security

|                                           |                                                                                                                                 |           |        |
|-------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|-----------|--------|
| 5. Child Poverty                          | % of children living in poverty, and under 50% and 150% of poverty line                                                         | March CPS | annual |
| 6. Poor Children Receiving Assistance     | % of poor children receiving AFDC, Food Stamps, subsidized housing, energy assistance, or free/reduced price lunch in past year | March CPS | annual |
| 7. Parental Labor Force Detachment        | % of children with no resident parents in labor force                                                                           | March CPS | annual |
| 8. Secure Parental Labor Force Attachment | % of children with at least one resident parent employed full time full year                                                    | March CPS | annual |

#### Health and Health Care

|                                     |                                                                                                 |                                        |        |
|-------------------------------------|-------------------------------------------------------------------------------------------------|----------------------------------------|--------|
| 9. Infant Mortality                 | Death rate per 1,000 children under age 1                                                       | Vital Statistics, Mortality            | annual |
| 10. Low Birth Weight                | % of newborns weighing 5.5lbs. or less                                                          | Vital Statistics, Natality             | annual |
| 11. Immunization                    | % of children ages 19-35 months who have received combined 4:3:1 or 3:3:1 series vaccinations   | National Health Interview Survey, NCHS | annual |
| 12. Limitations of Major Activities | % of children <5, and 5-17 who are limited in major activities due to chronic health conditions | National Health Interview Survey, NCHS | annual |
| 13. Child Mortality                 | Death rate per 1,000 children ages 1-14                                                         | Vital Statistics, Mortality            | annual |

|                          |                                                           |                                   |        |
|--------------------------|-----------------------------------------------------------|-----------------------------------|--------|
| 14. Teen Accident Deaths | Motor Vehicle Accident Deaths per 1,000 youth ages 15-19  | Mortality Statistics Branch, NCHS | annual |
| 15. Teen Homicides       | Homicide rate per 100,00 youth ages 15-17                 | Mortality Statistics Branch, NCHS | annual |
| 16. Teen Births          | birth rate per 1,000 single females ages 10-14, and 15-17 | Vital Statistics, NCHS            | annual |
| 17. Health Insurance     | % of children covered by health insurance                 | March CPS                         | annual |

#### **Behavioral Health**

|                                 |                                                                                                                    |                                                                           |                 |
|---------------------------------|--------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------|
| 18. Violent Crime Arrests       | Arrests for violent crimes per 1,000 youth ages <15 and 15-17                                                      | Uniform Crime Reporting Program, FBI                                      | annual          |
| 19. Crime Victims               | % ages 12 and over who are victims of crime (violent and thefts)                                                   | Crime Victimization Survey, BJS                                           | annual          |
| 20. Seat Belt Use               | % of children under 18 who wear seat belts regularly                                                               | National Health Interview Survey, NCHS                                    | every 5 years   |
| 21. Cigarette Addiction         | % of 8th, 10th, or 12th graders who smoke daily                                                                    | Monitoring the Future                                                     | annual          |
| 22. Alcohol and Substance Abuse | % of teens who report having 5+ drinks per night or who have used controlled substance in last 30 days (composite) | National Household Survey on Drug Abuse, National Institute on Drug Abuse | every 1-3 years |

#### **Education**

|                                      |                                                                                             |                                                   |               |
|--------------------------------------|---------------------------------------------------------------------------------------------|---------------------------------------------------|---------------|
| 23. Early Childhood Reading Exposure | % of children ages 3-5 who are read to daily                                                | National Household Education Survey, NCES         | 1996, 1999?   |
| 24. Math and Reading Proficiency     | Change since 1990 in the proficiency scores in math and reading for 9, 13, and 17 year-olds | National Assessment of Educational Progress, NCES | every 2 years |
| 25. High School Completion           | % of 21-22 year-olds who've completed high school                                           | October CPS                                       | annual        |
| 26. Detached Youth                   | % of youth ages 16-19 not in school or labor force full time                                | March CPS                                         | annual        |

#### **Guest List**

|                      |                                                                          |                       |                                  |
|----------------------|--------------------------------------------------------------------------|-----------------------|----------------------------------|
| 1. Sustained Poverty | % of children who were poor for two years in a row                       | March CPS, SIPP       | annual                           |
| 2. Food Security     | % of families who report that they have enough food                      | various surveys, USDA | irregular                        |
| 3. Child Abuse       | Substantiated cases of child abuse and neglect (rate per 1,000 children) | NCCAN                 | annual                           |
| 4. Child Care        | % under 5 with employed mothers in child care                            | SIPP NHES             | 1993, '94 and '97<br>1995, 1999? |

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## **Building Partnerships for Stronger Families: Report of a White House Working Meeting**

March 12-13, 1996  
Washington, DC

Sara Nathanson and Leila Fiester  
Policy Studies Associates, Inc.

Prepared for the U.S. Department of Education  
Contract EA94053001, Task Order #10/EA950920

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## Overview

State and local representatives from the front lines of innovative partnerships for stronger families shared success strategies, discussed challenges, and mapped out action steps at a working meeting with federal policy makers on March 12 and 13, 1996. The meeting, convened by President Clinton's Domestic Policy Council in collaboration with the National Performance Review, U. S. Department of Education, Federal Working Group on Comprehensive Services for Children and Families, and the Policy Exchange of the Institute for Educational Leadership, brought together collaborators from each level of government to clarify the issues, barriers, and success factors involved in building intergovernmental partnerships that improve results for families. Participants generated action steps for each level of government that will inform a federal framework for action as well as action plans for each federal agency.

Participants included practitioners, policy makers, and program administrators from 14 states<sup>1</sup> and localities with innovative strategies for strengthening children, families, and communities. State and local participants represented the fields of education, health, human services, labor, justice, and economic development. Representatives of federal agencies and executive offices,<sup>2</sup> foundations, and organizations involved in promoting stronger families also participated.

During several small group sessions; a "town meeting" with Vice President Al Gore and Carol Rasco, Assistant to the President for Domestic Policy; and a concluding plenary session, participants addressed the following questions:

- What factors contribute to the success of innovative state and local reforms for families and communities? What are the obstacles to successful partnerships, and how should they be addressed?
- What specific actions should each level of government take to improve results for families and communities through intergovernmental partnerships? In particular, what should federal partners do to remove barriers and increase responsiveness to local reform efforts?

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<sup>1</sup>Arkansas, Colorado, Connecticut, Indiana, Iowa, Kentucky, Maryland, Minnesota, Missouri, North Carolina, Ohio, Oregon, Vermont, and West Virginia

<sup>2</sup> The departments of Agriculture, Education, Health and Human Services, Housing and Urban Development, Justice, Labor, and Transportation; Office of Management and Budget; Office of the First Lady; National Economic Council; Community Empowerment Board; Office of Intergovernmental Affairs; Office of the Vice President; National Performance Review; Bureau of the Census; Bureau of Labor Statistics; National Institute of Child Health and Human Development; the National Center for Education Statistics

The working meeting was part of the Clinton Administration's ongoing efforts to work with other levels of government and communities to strengthen families. Strong, healthy families are essential to the economic and social wellbeing of the country because "when families flourish, communities and nations follow," explained Elaine Kamarck, Senior Policy Advisor to the Vice President. Other White House efforts to promote partnerships for stronger families include: the Federal Working Group on Partnerships for Stronger Families; the Empowerment Zone/Enterprise Community program; and formal partnerships between the federal government and state governments in Connecticut, Indiana, Oregon, and West Virginia.

This report summarizes the key actions, issues, success factors, challenges, and governmental roles identified by meeting participants. Appendices contain the meeting agenda, descriptions of federal programs or collaborative efforts and state and local partnerships to strengthen children and families, and a draft vision statement for partnerships for stronger families.

## Recommended Actions

One of the primary purposes of the meeting was to develop concrete and specific action steps for moving toward stronger families, at all levels of government and within communities. These steps will inform the work of the Federal Working Group on Comprehensive Strategies, an interagency collaborative group, which is identifying actions that the federal government can take to facilitate state and local strategies for children and families. In topical discussions and a "town meeting" with Vice President Gore and policy adviser Rasco, participants recommended the following federal, state, and local government actions to help build stronger families:

### Actions for the Federal Government

Federal actions should support new roles and responsibilities for accountability among partners at all levels of government, provide new tools for flexible local efforts, and establish incentives for innovative approaches, participants agreed. The federal government should:

#### Support New Roles and Responsibilities for Accountability

- ***Define expectations and responsibilities for federal, state, and local governments.*** Clear role definitions, based on the strengths and capacities of each level of government, will reduce duplication, overlap, and confusion about the locus of control or accountability. A shared understanding of "who does what" will help the federal government streamline its efforts and find cost-effective strategies for coping with downsizing and balanced budgets. In defining new roles and responsibilities, the federal government should examine family policy and related programs in their historical context to build on lessons learned, honor past successes, and avoid repeating mistakes.
- ***Convene a federal interagency working group to determine what constitutes meaningful and useful outcome data for children and families.*** Outcome data should support a shared vision for families and should be collected and disseminated in ways that respond to state and local information needs. The interagency group should develop a system of responsible safeguards against fraud and abuse in data reporting. The group should include representatives from states and localities but could be headed by a federal agency, such as the Bureau of the Census.

### **Provide New Tools for Flexible Responses**

- ***Develop consistent interagency confidentiality rules that remove barriers to effective, comprehensive services for families and children.*** Current confidentiality procedures make it hard to provide families with a continuum of care across systems such as law enforcement, health care, education, welfare, and human services. A common set of rules that is consistent across agencies and through inspection and audit procedures will help communities forge more cooperative partnerships. The federal government should follow the example of states such as Indiana, where government attorneys and officials collaborated to produce a one-page interagency confidentiality document.
- ***Encourage Empowerment Zones, Enterprise Communities, and other community development efforts to bring together a comprehensive array of funding streams*** that include education programs, social welfare programs, and state and local initiatives. The federal government should urge these "umbrella" partnerships to use their broad funding infrastructure to support coherent local strategies that cross programmatic lines and put families' interests first. Communities that blend funding streams can bring more practitioners and leaders together to work toward a shared vision for children and families.
- ***Provide communities with flexible, responsive technical assistance that builds capacity for sustainable local problem-solving.*** Federal strategies for technical assistance may include setting standards for government-funded private providers; involving community members in selecting technical assistance providers; facilitating community connections to institutions of higher education for ongoing technical assistance; and training program administrators as technical assistance providers to avoid adding another level bureaucracy.

### **Establish Incentives for New Approaches**

- ***Reward best practices and disseminate case studies of innovative strategies.*** Official recognition of successful partnerships for stronger families will foster innovation across the country. An effective information-sharing system will help communities avoid reinventing good ideas by building on the promising practices, strategies, results, and lessons learned from other sites. The federal government could use as a model the award system used by the National Performance Review to acknowledge outstanding efforts within federal agencies.

## **Actions for State Governments**

State actions should improve coordination across systems and agencies, streamline communication and technical assistance, and encourage broad-based local support, participants said.

In particular, states should:

### **Improve Coordination Across Systems and Agencies**

- ***Facilitate local innovation by clarifying whether communities face obstacles posed by federal or state regulations.*** Clear information from state governments will help communities pursue appropriate solutions to real or perceived barriers to effective partnerships for families. Local efforts that receive concise regulatory information from the state government can avoid wasting time applying for unnecessary waivers or confusing state and federal barriers.

### **Streamline Communication and Technical Assistance**

- ***Establish a single ombudsman for local reform efforts that need information about state programs, regulations, and waivers.*** States should consider the experience of Oregon and Connecticut, where federal points of contact provide consistent information and embody common goals across program lines. States might also consider establishing a hotline for local partnerships with questions about state guidelines, requirements, or assistance.
- ***Simplify and streamline regulations and paperwork to clarify legal requirements for state administrators and local practitioners.*** A leaner system of rules and a smaller bureaucracy will allow information to be dispersed through a single entity, which will reduce confusion at the local level. States may consider using the methods that helped the National Performance Review identify 16,000 pages of unnecessary federal regulations.

### **Encourage Broad-based Local Support**

- ***Reward local partnerships that demonstrate positive results, rather than individual programs that follow traditional requirements.*** State agencies—including top officials, middle management, program administrators, and inspectors general—should value comprehensive, coordinated strategies that produce successful results for families. All state institutions must buy into this orientation to avoid sending conflicting messages to local partnerships.

## **Actions for Local Governments**

Local actions should empower communities to identify and attain solutions, encourage the involvement of all local stakeholders, and coordinate with efforts by other levels of government, participants said. Local governments should:

### **Empower Communities to Identify and Attain Solutions**

- ***Develop shared leadership among local policy makers and community members to set objectives that focus on building community assets.*** A vision shared by all stakeholders should inform local assessment of resources, assets, opportunities, and needs. Local reform efforts will have more credibility if they grow from shared management and mutual understanding among diverse community members.
- ***Identify community resources, goals, assets, needs, and regulatory barriers before asking the state government for waivers or assistance.*** Well-informed local reform efforts that come to the table with a clear mission are empowered to move ahead and can better define their expectations for state action.

### **Encourage the Involvement of all Local Stakeholders**

- ***Increase broad-based local participation by educating community members about how the flow of federal and state funds affects local infrastructure for children and families.*** Field officers for federal programs could help community members get involved in local governance and become familiar with funding decisions that impact families.
- ***Include suburbs and exurbs in regional planning and development efforts for urban areas.*** As urban residents continue to migrate to outer areas, cities must expand their definitions of community to incorporate the resources and needs of the larger region. Regional planning and economic development will benefit from a vision of infrastructure, jobs, and communication that does not isolate the city core from its surrounding areas.

### **Coordinate Efforts with Other Levels of Government**

- ***Help improve the federal government's responsiveness to communities by providing feedback on federal performance.*** Federal agencies and offices need to know how their actions impact the front lines of service delivery to children and families.

## A Focus on Key Issues

As participants developed recommendations for federal action, they identified important success factors, challenges, and governmental roles and relationships related to five key topics: (1) building capacity, (2) strengthening data and information systems, (3) improving accountability, (4) streamlining bureaucracy, and (5) financing.

### Building Capacity

Capacity building creates communities that optimize their resources and leadership, learn from the work of others, and tap into a network of partners, participants agreed. Key topics for capacity building include leadership, relationships among stakeholders, information sharing, mentoring opportunities, technical assistance, seamless systems of support, and economic development.

- **Shared leadership** enables diverse stakeholders to bring new ideas, resources, and broader credibility to family-centered efforts. Funding mechanisms should encourage and reward shared leadership and active involvement of diverse stakeholders, participants agreed.
- **New relationships among stakeholders** require community members to learn to trust and respect each another and the work they do together. In particular, partnerships should (1) bring together schools, health care providers, and municipal government representatives to identify resources, assets, needs, barriers, trends, gaps in existing systems, and coordinated responses; (2) engage agencies in changing service delivery systems; and (3) engage and employ neighborhood residents in order to build local skills, bring new incomes into communities, and produce more culturally appropriate programs.
- **Shared information** builds capacity for problem solving and optimizes state and local partners' knowledge about best practices, flexibility options, and legal requirements. Existing laboratories such as Empowerment Zones can serve as concrete examples of intergovernmental relationships in discussions about how new partnerships impact the lives of children and families.
- **Mentoring opportunities** help communities replicate successful partnerships. Governments can promote mentoring relationships by developing grants and other incentives for existing laboratories (e.g., Oregon Options, Empowerment Zones/Enterprise Communities, Pulling America's Cities Together [PACT], SafeFutures) to team with emerging partnerships. The federal government itself also has a role in mentoring communities.
- **Technical assistance** builds capacity in communities when it responds to evolving local needs. Federal and state governments should design grant processes that encourage locally driven,

flexible technical assistance that allow communities to manage their own training opportunities.

- **Seamless systems of support** emphasize early intervention and prevention efforts to build capacity among families and communities to avoid chronic—and costly—crises. Capacity building in such systems (e.g., Empowerment Zones/Enterprise Communities, PACT, Oregon Options) must involve managers of data, funding, and accountability to ensure consistency and coherence throughout the system.
- **Economic development** in communities is closely related to the wellbeing of children and families. The federal government and its partners should articulate a national vision for children and families that incorporates economic development, participants agreed.

## Strengthening Data and Information Systems

To support partnerships for stronger families, all levels of government should change the kinds of data they produce as well as the ways in which data are collected, analyzed, used, and disseminated to create stronger families and children, participants said.

- **Collecting information:** Current data systems use inconsistent reporting requirements, are unresponsive to local information needs, and cannot describe holistically how initiatives affect children and families. In collecting data, partnerships should shift from a "pathology model" to a focus on the strengths and assets of families and communities. This change would emphasize broad progress toward goals rather than individual program indicators. Federal, state, and local partners must collaborate to develop the kinds of data that will most effectively reach the public.
- **Analyzing information:** Data and information systems should focus on outcome information—results—instead of processes. A common set of outcome data across agencies, programs, and levels of government would enable local initiatives to share and compare their results nationwide. A common set of data also would serve as a catalyst for new intergovernmental and interagency partnerships that could share information and align their objectives to meet mutual goals.
- **Using information:** Accurate, comparable outcome data are valuable tools for conducting high-quality evaluation and community assessments—essential steps in developing effective partnerships for stronger families. Information about outcomes for families provides a framework for discussion about partnerships across agency lines.
- **Disseminating information:** Partnerships garner credibility with the public and support from funders by providing simple, compelling information about the effects of their work. An informed public can advocate for new approaches to strengthening families within programs, schools, or agencies at all levels of government. Understandable, usable outcome data about children and families also shapes public policy making.



## Improving Accountability

An improved vision of accountability focuses more closely on results and clarifies the relationship between goals and results. Accountability systems should support the use of outcome information for the continuous improvement of programs, partnerships, and policies.

- **Focusing on results:** Results must be well defined, shared, and measurable. Partners must develop a shared agenda that includes steps and responsibilities for reaching shared goals. This requires partnerships to align monitoring, reporting, funding, and accountability systems—and to help practitioners, administrators, inspectors, and other stakeholders view accountability in more holistic ways. Auditors and others in direct contact with local partnerships must share an understanding of goals, measurements, and results. States' shared outcomes, developed with community input, might also inform a national vision of outcomes.
- **Linking outcomes to accountability:** Resources and funding should reward positive outcomes—not programs and procedures. One option is for the federal government to issue an RFP for "a significant amount of funding" based entirely on a single outcome, a participant suggested. The government should not specify how the outcome should be achieved, who should accomplish it, or any other input.
- **Using outcome information:** Communities need good information in order to be accountable for results. The federal government could improve information sources by increasing conducting population surveys and collecting community demographic data more frequently. Accountability efforts should also link progress measurement with incentives for producing results.

Goals for strengthening families are extremely hard to measure because there are not enough data yet to link many strategies with specific impacts; agencies within partnerships often measure progress differently or resist changing their information systems; and complex goals and changes take time to become evident. Despite these obstacles, effective partnerships at the federal level can help states improve accountability. Agreements around intergovernmental service delivery with the federal departments of labor, education, health and human services, and management and budget make it easier for some states to take risks in managing results and reallocate resources to support local data collection and reporting, participants noted.

## Streamlining Bureaucracy

Excessive state or federal bureaucracy impedes partnerships' efforts to focus on children and families, keep partners in touch with family and community conditions and concerns, and establish clear goals for local action. Federal and state governments can streamline bureaucracy for state and local partnerships through efforts to improve the waiver system, merging and restructuring efforts, better funding and accountability measures, and increased responsiveness to community conditions.

- **Improving the waiver system:** The federal government should notice repeated requests for common waivers and change the regulations that present obstacles rather than focusing on working around existing rules. For example, an interagency, categorized database could track common waiver requests. The federal government should also simplify waiver applications and use common applications for all states and agencies.
- **Merging and restructuring:** All levels of government can consolidate administration, cut costs, and stimulate collaboration by merging programs and retraining staff. A single interagency point of contact could serve as a clearinghouse for information from all programs and agencies about waivers, funding, resources, and other issues affecting state and local partnerships for families.
- **Better funding and accountability measures:** Consistent messages about funding across federal agencies and programs would help partnerships concentrate on meeting the needs of communities, rather than those of discrete (and conflicting) funding streams. Interdepartmental budget strategies and merged funding would stimulate coordination among and within agencies and support more comprehensive strategies for service delivery. Auditors and inspectors-general who monitor practitioners and report on their programs should deliver consistent messages to communities about federal requirements. A state or federal database should be established with continually updated data from local initiatives to help communities compare their progress with other sites.
- **Increased responsiveness to community conditions:** A stronger link between federal agencies and communities that enables front-line practitioners and administrators to describe the real impact of policies would make the government more responsive to families and communities.

## Financing

Key topics for financing partnerships include funding sources and limits, incentives in financing, challenges to changing funding strategies, and the relationship between federal budgeting and state and local budget reform.

- **Funding sources and limits:** Participants agreed that federal funding streams have a strong impact on state and local partnerships and that blending federal funding streams would give communities more flexibility to pursue partnerships. To ensure that efforts to strengthen families receive adequate funding, participants suggested that the federal government earmark a pot of funds for children and families and establish a federal tax to support it. The federal government also should create more flexibility within existing statutory authority to address the needs of children and families holistically.
- **Incentives in financing:** Current funding carries financial rewards for problems and pathologies rather than for solutions; states and communities receive funds for treating problems rather than for preventing them. States also lose money when the number of people needing services and supports declines. The challenge of funding efforts that reduce the need for intensive, remedial treatment or maintenance investments may involve aligning incentives within and across agencies and levels of government. The federal government also must develop better incentives to create local activities that mobilize local resources, participants said.
- **Challenges to changing funding strategies:** Participants identified the following funding challenges: (1) grant amounts and sources are unpredictable; (2) funds often carry implicit preferences for particular types of programs; (3) short-term funding streams force partnerships to focus on short-term solutions; (4) structures for allocating and distributing federal resources do not ensure that resources reach the people who most need them; (5) partnerships are vulnerable to state budget deficits and fiscal crises; (6) the federal government must balance funding for efforts to address problems with funding for planning, prevention, and outreach; and (7) it takes time and effort to make the transition to new funding systems.
- **The relationship between federal budgeting and state and local budget reform:** Participants questioned whether it is really possible for states and communities to develop results-based or investment-based approaches to budgeting and financing as long as the federal government uses a line-item budget.

## **Appendix A: Meeting Agenda**

**Tuesday, March 12, 1996**

- 5:30 p.m.      Registration
- 6-7:30 p.m.    Reception and dinner
- 7:30 p.m.      Building partnerships for results: Discussion with Cabinet members and other administration officials
- 8:45 p.m.      Overview of Wednesday's meeting

**Wednesday, March 13, 1996**

- 8 a.m.          Introductions and networking
- 8:30 a.m.      Understanding state and local reforms for children and families: Small group discussions
- 10 a.m.        Federal action to support partnerships for stronger families: Small group discussions
- Noon           Lunch and networking
- 1 p.m.          A focus on the issues: Identifying next steps  
Small group discussions
- 2:30 p.m.      Town meeting with Vice President Al Gore
- 4 p.m.          Moving ahead: Building Intergovernmental Partnerships  
Plenary discussion
- 5 p.m.          Conclusion of meeting

## **Appendix B: Federal Programs and Collaborative Efforts to Strengthen Families**

Leaders from five federal agencies set the tone for the meeting by highlighting current efforts by the Clinton Administration to support partnerships that strengthen families. The speakers included Henry Cisneros, Secretary of the Department of Housing and Urban Development (HUD); Richard Riley, Secretary of the Department of Education (ED); Janet Reno, U.S. Attorney General, Department of Justice (DOJ); Peter Edelman, Assistant Secretary for Planning and Evaluation, Department of Health and Human Services (HHS); and Ellen Haas, Undersecretary for Food, Nutrition, and Consumer Services, Department of Agriculture (USDA).

*Activities within the Department of Housing and Urban Development.* HUD has demonstrated its commitment to strengthening families through services for homeless people, public housing programs, and affordable housing/home ownership initiatives. For homeless women and children—the country's fastest growing homeless population—HUD implemented a certificate and voucher program to move women and children out of shelters and into safer, longer-term transitional housing. HUD provides premiums to shelters that keep families intact. Working families also find it easier to stay together in public housing under new rent rules, which permit an 18-month grace period before rents are raised when a family gains additional income.

HUD works to strengthen families through job initiatives that incorporate conditions of participation. These conditions encourage participants to adopt positive behaviors toward their families. For example, a lead-abatement training project requires participating men to accompany their families on obstetric and pediatric visits.

*Activities within the Department of Education.* ED provides communities with flexibility and resources for partnerships to strengthen families through several initiatives. Under the Goals 2000: Educate America Act, ED grants seed money to state and local school-improvement efforts that bring parents, students, teachers, school administrators, and members of the business and religious communities together to address local needs. ED also promotes flexibility at the state and local levels through its Ed Flex initiative, which gives states authority to handle their own waivers and consolidate their planning efforts.

The Department of Education's Family Involvement Partnership for Learning supports partnerships among schools, parents, businesses, and community groups by promoting strategies that make parents feel welcome in schools and creating family-friendly work opportunities. In addition, through Title XI of the Elementary and Secondary Education Act schools can use a percentage of

federal categorical funds to coordinate services with community health and human service agencies and other local partners to meet the comprehensive needs of families.

*Activities within the Department of Justice.* In addition to its efforts in law enforcement and criminal prosecution, DOJ has become a catalyst for family-centered, community-based intervention and education efforts. DOJ has formed several partnerships with other agencies and communities to establish innovative strategies for strengthening families:

- Domestic and family violence initiatives reach out to survivors of violence through police units, shelters, and other community settings; DOJ encourages partnerships with medical and public health systems that recognize domestic violence as a public health problem
- More than 33,000 community police officers are building trusting relationships with youth and community members
- The SafeFutures program allows communities to identify specific needs and resources but gives federal help in reaching local goals
- A partnership between DOJ and the Department of Education focuses on designing effective interventions that help school truants and drop-outs avoid a cycle of crime

*Activities within the Department of Health and Human Services.* Under HHS' Family Preservation and Support program, states develop five-year plans for delivering a continuum of comprehensive services for children and families. States collaborate with several systems of support including public health agencies, mental health care providers, schools, parents, and advocacy groups to identify goals for meeting families' needs.

Other HHS partnerships that encourage local collaboration and flexibility include: Healthy Schools/Healthy Communities, a school-based health clinic program; Community Schools, a joint effort with the Department of Education that invites communities to design after-school programs around local needs and interests; involvement in the Empowerment Zone/Enterprise Community laboratories in collaboration with HUD, USDA, and other agencies; and several partnerships to address domestic violence through community-based public health, nutrition, law enforcement, and human-service organizations. HHS also demonstrates a commitment to partnerships within the agency itself. The department's Governing Council on Children and Families examines the needs of children and families in a holistic way across the entire agency; the council focuses on improving results for families, not federal programs.

*Activities within the Department of Agriculture.* In its efforts to promote healthy diets for children and families, USDA has recognized the importance of empowering communities and families to make healthy food choices. The department's Team Nutrition Schools serve as the focal point for local partnerships between schools; families; communities; government; and health, education, and food industry organizations. USDA provides more than 5,000 Team Nutrition Schools with technical assistance and other capacity-building efforts that help schools meet dietary guidelines through a locally driven, integrated approach.

## Appendix C: State and Local Partnerships to Strengthen Families

Participants highlighted the following programs, initiatives, and strategies in their state and local partnerships:

- **Arkansas** recently formed a Governor's Partnership Council for Children and Families to build community capacity for strengthening families. Activities include: linking existing reform initiatives across systems; strengthening relationships between communities and state agencies; planning and budgeting across agencies; developing performance measures; providing technical assistance; and identifying state financial and regulatory barriers to local service integration. Council members includes parents, public and private non-profit agencies, professional and advocacy organizations, elected officials, and businesses. The state departments of health, education, and human services co-chair the council.
- **Colorado's** collaborative efforts include welfare reform, family-centered health and human services initiatives, and a PACT site. Denver Family Opportunity unites more than 100 public and private partners to help families receiving public assistance become self-sufficient through skills development, child care, and job placement. Integrated systems of support in Denver meet families' health and social needs through school-based clinics, home visits to first-time mothers, paternity identification programs, and a Medicaid managed care initiative. Metro Denver PACT is a multi-agency federal/local partnership that brings together the governor's office, city and county government, and the resources of six federal agencies and offices. PACT empowers communities to reduce crime and violence through coordinated, multi-disciplinary strategies that emphasize prevention and education.
- **Connecticut's** Neighborhood Revitalization initiative is a federal, state, and local partnership that directs resources to locally identified needs and removes barriers to community-based solutions. Neighborhoods develop comprehensive strategic plans and measurable goals for economic development and neighborhood revitalization. Municipal and state partners help neighborhoods identify resources, waivers, and information that support their goals. A recent Memorandum of Understanding between Connecticut and the federal government placed a federal point of contact in the state as an interagency facilitator and information resource. A separate HUD-sponsored partnership is transforming a New Haven public housing project into an education campus that empowers families to meet their own needs.
- The **Indiana** Collaboration Project improves and expands services to children and decreases bureaucratic obstacles to state and local coordination. The project's accomplishments include: (1) new strategies for pooling, blending, and developing alternative funding for child care services and a Healthy Families Initiative; (2) a statewide electronic communication system that gives counties access to federal, state, and local officials who can resolve barriers; and (3) a common intake/release form for 11 state agencies. Indiana has developed a one-page confidentiality document that unifies several agencies under one set of rules. Local Step Ahead Councils conduct needs assessments and plan improved systems of support for families; a state Policy Council on Families and Children supports the local councils.



- **Iowa's** Council for Human Investment developed a long-term, multidisciplinary human investment strategy with broad policy goals and benchmarks. The council also conducted surveys of customer satisfaction with public services. The council includes state legislators, officials from four state agencies, and public and private stakeholders. Iowa's Child Welfare Decategorization Project eliminates bureaucratic barriers to local services; counties that join the voluntary project implement use a flexible, combined funding scheme that allows them to create less-restrictive individual service plans for children. Iowa's employment incentives for welfare recipients have helped 35 percent of the residents who received public assistance become employed. Iowa's welfare caseloads and expenditures have reached a 10-year low.
- **Kentucky's** systemic, standards-based school reform effort began in 1990, when the legislature designed a comprehensive initiative that includes (1) a preschool program in collaboration with Head Start and an approved child care program that increase children's readiness to learn; (2) state-funded, school-based and school-linked family resource/youth service centers that link children and families with existing health and human services and create new services to fill gaps; (3) a state cabinet that focuses on strengthening children and families; and (4) an accountability system.
- In **Maryland**, the Governor's Subcabinet for Children, Youth, and Families is an interagency partnership committed to devolving authority to local management boards and streamlining bureaucracy through interagency budgeting, funding, and planning. The subcabinet promotes family-centered services that emphasize coordination, access, and accountability. The state works with businesses and schools in the Maryland's Tomorrow High School Program, an effort to prevent school dropout and help graduates transition to the workplace. The Community Building and Partnership alliance in Baltimore (an Empowerment Zone) brings together city agencies, community organizations, and state and federal agencies to transform housing, health care, youth programs, family support, public safety, employment, and other systems of support.
- **Minnesota's** family-centered initiatives support innovative, community-based strategies, shared outcomes, and accountability. Minnesota Milestones establishes measurable goals for improving results for children and families and allows communities to compare their progress with other locations and the state as a whole. The Automated Children's Services Report Card displays data on-line and on a World Wide Web site; the Kids Can't Wait Progress Report also lets community members and programs evaluate progress. Action for Children, which supports community-based family service collaboratives and an interagency technical assistance team, emphasizes joint planning and problem solving by local stakeholders. The restructured state Department for Children, Families, and Learning offers a state-level model for linkages between education and human services.
- The **Missouri** Family Investment Trust is a public/private partnership between four state agencies, business and civic leaders, and communities. Communities that become partners with the Trust can negotiate new relationships with state agencies to provide responsive services that move children and families toward communities' priorities, selected from a core set of desired results. Missouri also supports community-based partnerships for families through Caring Communities, a school-based effort to link or co-locate health and human services with education reform in schools. Sixty school sites in seven communities have been identified; Caring Communities benefits from interagency budgeting across five state agencies.

- **North Carolina** is improving systems for children and families through education reform efforts that grant schools flexibility and incentives to achieve performance-based standards. Reform of the state's financing system has also moved North Carolina toward outcomes-based budgeting by allocating funds in 11 "function areas" rather than along department lines. Twenty-four county partnerships receive funds from Smart Start, the state's early childhood initiative that focuses on improving the health and well-being of young children and families through public/private partnerships and redesigned comprehensive service delivery systems.
- **Ohio's Children and Families First** initiative unites the public and private sectors and state and county governments to create collaborative systems of services for families. Local councils of direct service providers, family advocates, community members, and local leaders meet regularly to identify needs and coordinate services. In Cleveland, an Empowerment Zone, a non-profit organization called Cleveland Works delivers educational opportunities, legal services, job training and placement, family education, health care, and child care services. Cleveland Works draws on funds from several federal programs, state and municipal governments, and private and non-profit organizations; these broad funding sources help the organization address the needs of people who seek permanent employment and an opportunity to move off public assistance.
- The **Oregon Option** is a federal, state, and local partnership to improve the state's intergovernmental service delivery system. Partners focus on removing barriers and improving results for benchmarks measuring healthy children, a well-developed and educated workforce, and stable families. A Shared Information System collapses core data from 10 agencies into one statistical file to support these efforts. Other information technology initiatives include automated county maps for seven benchmarks that communities use to assess progress toward improving results for families and children. The Oregon Commission on Children and Families works with local commissions to develop community-based plans for children and families. The commission is developing results-oriented goals for school-linked services, family resource centers, and assessing the effectiveness of integrated services. Oregon also expanded its Medicaid coverage to more than 126,000 additional low-income individuals through a demonstration project.
- In **Vermont**, early intervention and prevention are the driving principles behind health, education, and human services partnerships that link families to systems of support. "Success by Six" brings state and local partners together early in children's lives through home visits and other health and education initiatives. This support has reduced teen pregnancies and the incidence of abuse of young children. Vermont Early Education Services works collaboratively with families and communities to expand, improve, and link services that enhance economic, social, and personal wellbeing. A partnership between the state's Agency for Human Services and the Vermont Department of Education has developed a set of outcomes for families and will support corresponding community development efforts.
- Counties in **West Virginia** are creating Family Resource Networks (FRNs) to conduct local needs assessments, plan evaluation efforts across systems and programs, and solicit community input. Seven established FRNs focus on preventive strategies and early identification of family needs. The state governor's Cabinet on Children and Families, an oversight body for state systemic reform efforts, is reviewing 19 proposed FRNs. The cabinet pooled state and federal funding streams into a Family Resource Planning Fund that

shares the costs of collaborative local planning and evaluation. A five-year Child/Family Services Plan guides community planning, supports and enhances services, and provides a framework for services integration in the state.

## **Appendix D: A Draft Vision Statement For Partnerships for Stronger Families**

In his State of the Union Address, President Clinton said: "Our first challenge is to cherish our children and strengthen America's families. Family is the foundation of American life. If we have stronger families, we will have a stronger America." This effort—Partnerships for Stronger Families—is about meeting that challenge and strengthening families. The following principles will guide our work:

- ***Invest Early and Prevent Crises.*** Early intervention can help to avoid the need for long-term supports. Attention and resources should focus on providing early help and support to enhance the strengths of families and prevent crises.
- ***Respond to Families, Not Problems.*** Rather than drawing rigid boundaries between services and supports for families, government must be able to respond flexibly. Families do not come in neat packages, the supports they need do not fall into discrete programs, and governments cannot respond with "one-size-fits-all" policies. Each member of a family must be seen in the context of his or her family and community—not as a disconnected individual with isolated problems.
- ***Account for Results.*** Success of these partnerships should be measured by results—good indicators of the strength of families and the growth of children—not by the dollars spent or numbers of people serving or being served.
- ***Facilitate and Support Local Efforts.*** The Clinton Administration is committed to support for bottom-up reform. Families live and work in communities, and efforts to improve results should build on local initiatives. To be successful, partnerships for stronger families must engage all stakeholders in the community: neighborhood and community leaders, schools, nonprofit and for-profit organizations, local government, the faith community, the media, and families themselves.
- ***Provide Opportunities for Parents to Meet Their Responsibility.*** In the end, successful partnerships for stronger families must build on the fundamental role of both parents in raising their children. Mothers, fathers, and other caregivers must accept their responsibility as nurturers, first teachers, partners with schools, mentors of their adolescents, and coaches during life transitions. Federal, state, and local policies should reinforce that critical responsibility and provide parents with opportunities to fulfill it.

**DRAFT**

**PARTNERSHIPS FOR STRONGER FAMILIES**

**May 16, 1996**

**PROJECTED TIMELINE FOR ACTION TEAM STRATEGIC PLANS**

**Develop Strategic Plans by May 31**

**Short-term deliverables: complete by September 1**

**Conference/meeting with state, local and private representatives by October 1**

**Revise/finalize deliverables by November 1**

**Plan for implementation beginning 1997**

JEH  
5/09/96

**Partnerships for Stronger Families**  
**Preliminary List of Action Teams**  
 (as of 04/30/96)

\* = Team Chair

**Building Capacity: Technical Assistance**

|                    |                                                                      |                     |            |
|--------------------|----------------------------------------------------------------------|---------------------|------------|
| Reggie Robinson*   | Department of Justice                                                | (202) 307-5933      | Beth<br>Wh |
| Jim Kohlmoos       | DOEd -- OESE                                                         | (202) 401-0113      |            |
| Ann Smith          | DOEd -- Office of Special Education and<br>(Rehabilitative Services) | (202) 205-8888      |            |
| Fred Garcia        | DOJ -- OJP                                                           |                     |            |
| Emily Martin       | DOJ -- OJJDP                                                         | (202) 514-1563      |            |
| Tim Murray         | DOJ -- BJA                                                           | (202) 307-5974      |            |
| Cheryl Austein     | HHS -- ASPE                                                          | (202) 690-6051      |            |
| Jennifer Chang     | HHS -- ACF                                                           | (202) 690-6241      |            |
| Angela Duran       | HHS -- ASPE                                                          | (202) 708-4151      |            |
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| Audrey Nora        | HHS -- Maternal and Child Health<br>Bureau                           | (301) 443-2170      |            |
| Susanne Stoiber    | HHS -- ASPE                                                          | (202) 690-8774      |            |
| Patty Morris       | USDA--Special Nutrition Programs                                     | (202) 305-2052      |            |
| Amy Bennett        | School to Work Office                                                | (202) 401-6226      |            |
| Beverly Godwin     | National Performance Review                                          | (202) 632-0374      |            |
| Elaine Kamarck     | National Performance Review                                          | (202) 456-2816      |            |
| Susan Valaskovic   | National Performance Review                                          | (202) 632-0150 x117 |            |
| Betsy Julian       | HUD -- Fair Housing and Equal<br>Equal Opportunity                   | (202) 708-4151      |            |
| Gaynor McCown      | Domestic Policy Council                                              | (202) 456-5575      |            |

**National Indicators**

|                        |                                                   |                |
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| Peter Edelman*         | HHS -- ASPE                                       | (202) 690-7858 |
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| Angela Duran           | HHS -- ASPE                                       | (202) 690-8794 |
| Claude Earl Fox        | HHS -- Disease Prevention and<br>Health Promotion | (202) 401-6295 |
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|                     |                                       |                     |
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| Audrey Pendleton    | DOEd -- OUS / PES                     | (202) 401-3630      |
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| Jay Hirschman       | USDA -- Center for Nutritional Policy | (202) 208-2331      |
| Barbara Allen-Hagan | DOJ -- OJJDP                          | (202) 307-1308      |
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| Jeanne Griffith     | National Center for Ed Statistics     | (202) 219-1828      |
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| Nevzer Stacy        | School to Work Office                 | (202) 401-3823      |
| Anne Bookman        | DOL                                   | (202) 219-6611      |
| Kathy Nelson        | HUD -- Office of Policy Development   | (202) 708-0544      |
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(out 2/1)

**Financing: Flexibility**

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| Angela Duran   | HHS -- ASPE                                                            | (202) 690-8794 |
| Mary Knipmeyer | HHS -- Substance Abuse and<br>Mental Health Services<br>Administration | (301) 443-5184 |

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| Margaret Pugh | Office of the Vice President | (202) 456-9039 |

|              |                             |                     |
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| Patsy Mathews | DOEd -- OUS - Budget | (202) 401-0318 |
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**Information Dissemination**

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*Paul Leonard*  
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*Susan*  
*Judi Gold*



April 15, 1996

MEMORANDUM FOR PETER EDELMAN -- HHS  
JOHN MONAHAN -- HHS  
REGGIE ROBINSON -- DOJ  
MICHAEL STEGMAN -- HUD  
GERALD TIROZZI -- DOEd

FROM: JEREMY BEN-AMI  
GAYNOR MCCOWN  
BEVERLY GODWIN

SUBJECT: NEXT STEPS AND TIMELINE

CC: Carol H. Rasco  
Elaine C. Kamarck

Thank you for your willingness to chair one of the action teams we have established as part of our Partnerships for Stronger Families effort. We appreciate your ongoing participation and input a great deal.

The purpose of this memorandum is to provide an outline of next steps and a timeline. At our last meeting, we discussed the following principles for determining next steps:

- *Start With A Few Limited Challenges*
- *Set Achievable Goals For This Year*
- *Maintain High Level Focus While Involving Federal Staff At All Levels*
- *Make Progress On Interagency and Intergovernmental Partnerships*

Below is a proposed timeline:

*April-- Develop Action Teams  
First week of May-- Chairs Convene Action Team Meetings  
Thursday, May 16th-- Steering Committee Meeting  
May 31st-- Draft Action Plan Due From Each Team*

Please put the steering committee meeting on May 16th at 2:00 p.m. on your schedule. We will convene in room 472 of the OEOb.

As the chair of an action team, you will report to the steering committee on a monthly basis. The steering committee will be

made up of key policy representatives from the DPC, NPR, OMB and NEC staff and Assistant Secretaries or Program Directors from HHS, HUD, DOL, DOJ, Agriculture, Education, and Transportation. Other offices to be represented are the Community Empowerment Board, the President's Prevention Council, National Service, and the office of the First Lady.

We requested that each agency represented on the steering committee designate a staff person or persons for each action team. We are still waiting to hear from several agencies. Attached you will find a list of names and phone numbers for everyone who has been nominated to participate in the different action teams thus far. You may want to add others to your group or provide suggestions of people who should participate on the other action teams. Please get us that information by COB on Wednesday (April 17) and we will send out an updated list.

Following is a list of the action teams and an indication of possible "deliverables." Please note that the deliverables we have included are merely suggestions; each action team will determine its own goals and develop a strategic plan to meet them.

(1) *Building Capacity: Technical Assistance*  
(Reggie Robinson)

(1) Develop an inventory of programs and funding currently available - how it is used, how it is provided. (2) Prepare an options memo on how federal technical assistance could be improved and redesigned to best meet customer needs. This could include proposing joint funded and interagency ventures as appropriate and bold, creative reinvention options. (3) Develop a guide for consumers that explains the technical assistance that is available, who is eligible, and how it can be accessed.

(2) *Accountability: National Indicators*  
(Peter Edelman)

(1) Build on the work of the Interagency Forum on Family and Child Statistics and incorporate agencies that have not been involved -- e.g., HUD, DOJ. (2) Propose key national indicators of family and child well-being and develop a plan for how these could be used.

(3) *Flexibility: Financing*  
(John Monahan)

(1) Suggest how we could allow more flexible funding within current legislation. (2) Build on work done by the Community Empowerment Board -- to analyze the hundreds of requests for flexibility received from communities -- to determine common areas of concern, where "blanket waivers" might be granted, etc... (3) Suggest how flexibility

currently available -- but not being fully utilized or realized by intergovernmental partners -- might be better used. (4) Look at opportunities for additional performance partnership grants, particularly as legislation is reauthorized. (5) Develop suggestions on how to share successful financing approaches such as the creative programs described by work done through the Finance Project and others.

**(4) Information Dissemination**  
(Gerald Tirozzi)

(1) Develop an inventory of all federal resource guides, 800 numbers for the different clearinghouses, electronic directories and other information resources. (2) Propose recommendations on how this network of resources could be integrated to provide interested organizations and individuals a consolidated, easy-to-use point of reference.

**(5) Single Point of Contact**  
(Michael Stegman)

(1) Assist HUD in implementation of current single point of contact for Connecticut and for 183 other jurisdictions. (2) Determine whether and how other agencies can participate in the HUD effort to provide all communities with a single point of contact for their programs.

We hope this is a useful start. Please call one of us if you have any questions. Thank you for your cooperation.

Attachment: Preliminary List of Action Team Participants

## ***PARTNERSHIPS FOR STRONGER FAMILIES***

draft 03/12/96

In his State of the Union Address, President Clinton said: "Our first challenge is to cherish our children and strengthen America's families. Family is the foundation of American life. If we have stronger families, we will have a stronger America." This effort -- Partnerships for Stronger Families -- is about meeting that challenge and strengthening families. The following principles offer guidance about how to do so:

**Invest Early and Prevent Crises.** Early intervention can help to avoid the need for long-term supports. Attention and resources should focus on providing early help and support to enhance the strengths of families and prevent crises.

**Respond to Families not Problems.** Rather than drawing rigid boundaries between services and supports for families, government must be able to respond flexibly. Families do not come in neat packages, the supports they need do not fall into discrete programs, and governments cannot respond with "one size fits all" policies. Each member of a family must be seen in the context of their family and community -- not as a disconnected individual with isolated problems.

**Account for Results.** Success of these partnerships should be measured by results -- good indicators of the strength of families and the growth of children -- not by inputs such as dollars spent or numbers of people serving or being served.

**Facilitate and Support Local Efforts.** The Clinton Administration is committed to supporting bottom up reform. Families live and work in communities, and efforts to improve results should build on local initiatives. To be successful, partnerships for stronger families must engage all stakeholders at the local level: neighborhood and community leaders, schools, nonprofit and for-profit organizations, local government, the faith community, the media and families themselves.

**Provide Opportunities for Parents to Meet Their Responsibility.** In the end, successful partnerships for stronger families must build on the fundamental role of both parents in raising their children. Mothers, fathers, and other caregivers must accept their responsibility as nurturers, first-teachers, partners with schools, mentors of their adolescents, and coaches during life transitions. Federal, state and local policies should reinforce that critical responsibility and provide parents the opportunity to fulfill it.

THE WHITE HOUSE  
WASHINGTON

March 26, 1996

MEMORANDUM TO FEDERAL WORKING GROUP ON PARTNERSHIPS FOR  
STRONGER FAMILIES

From: Jeremy Ben-Ami   
Subjects: "Partnerships for Stronger Families": Next Steps

The Federal Working Group on Partnerships for Stronger Families is meeting on Thursday, March 28 at 2:00 p.m. in the Prevention Council offices on Jackson Place. Following up on the next steps suggested at the March 17 White House Working Meeting, this memo provides a preliminary outline of next steps for discussion by the Working Group. It is time for us to roll up our sleeves and begin to act on some of the many excellent ideas that have emerged from this successful planning process and Working Meeting.

Let me suggest a couple of principles for determining our next steps:

- (1) Start with a few limited challenges -- In advance of the Working Meeting, we laid out a broad framework for thinking about federal action and to guide discussion. Now, however, our agenda needs to be focused and limited. I would propose that we identify between 2 and 5 concrete tasks to pursue. We all have limited time, and we need to demonstrate some results to show that this is worth the effort.
- (2) Set achievable goals for this year -- We should choose tasks where results can be achieved by the end of the year. They should not require legislative action, and they should not involve the articulation of new policy. Making progress by the end of the year will give us energy and incentive to take on a broader agenda in the second term.
- (3) Maintain High Level Focus While Involving Federal Staff at All Levels -- We need a structure that both provides high level political focus to give this work momentum *and* involves agency staff whose buy-in is critical to achieving a real change in mindset and to getting the work done.
- (4) Make Progress on Interagency Partnerships -- Build on the good work going on in individual agencies and focus on tasks that build interagency partnerships.

With these thoughts in mind, the following is a possible structure and agenda for this effort for the remainder of 1996.

## Structure

We should have a steering committee made up of key policy people from the agencies and the White House, and a series of working groups each responsible for one concrete task.

*Steering Committee* -- The Steering Committee would include DPC, NPR, OMB and NEC staff and Assistant Secretaries or Program Directors from HHS, HUD, DOL, DOJ, Agriculture, Education, and Transportation. Other offices represented would be the Empowerment Board, the Prevention Council, National Service, and the First Lady. The working groups should report to the Steering Committee on a monthly basis.

*Working Groups* -- For discussion Thursday, here are five possible working groups and a brief description of what they might be expected to deliver by the end of the year. We would like each agency to designate a staff person for each working group.

### (1) *Building Capacity: Technical Assistance*

Task: Undertake a thorough review of federal T/TA to communities and state and local government on the issue of serving families and children.

Deliverables: (1) First, develop an inventory of programs and funding currently available -- how it is used, how it is provided; (2) Prepare an options memo on how federal TA could be improved and redesigned to best meet customer needs. This would include proposing joint funded and interagency ventures as appropriate and bold, creative reinvention options. (3) Develop a guide for consumers that explains the TA that is available, who is eligible, and how it can be accessed.

### (2) *Accountability: National Indicators*

Task: Propose a system of national indicators of child and family well-being and present roll-out options.

This group should build on the work of the Interagency Forum and incorporate agencies that may not have been involved -- i.e., HUD, DOJ.

### (3) *Financing*

Task: Develop a user-friendly guidebook that explains to communities how to use existing federal dollars -- including block grants and other funding streams -- to support integrated efforts. This guide might include an appendix with examples of model programs and how they creatively fund their efforts.

The group should start by looking at the questions and requests submitted by EZs and ECs to the CEB and should look at some of the work done by the Finance Project describing creative programs around the country.

(4) *Information Dissemination*

Task: Develop a coordinated system of 800 numbers, web sites, and clearinghouses that relate to federal resources for programs serving children and families.

The group should start by taking an inventory of all federal resource guides, electronic directories and other information resources. Some work has already been done in this area – including a list of clearinghouses prepared by the Prevention Council.

The group should provide recommendations on how this network of resources can be integrated to provide interested organizations and individuals a consolidated, easy-to-use point of reference. For instance, the group should consider whether home pages on the internet can be interconnected and whether a consolidated directory of clearinghouses might be a useful tool.

(5) *Streamlining Bureaucracy*

Task: Expand the notion of a Single Point of Contact beyond HUD and beyond Connecticut and the EZs.

The group should determine whether and how other agencies can participate in the HUD effort to provide all communities with a single point of contact for their programs.

cc: Carol Rasco  
Elaine Kamarck

# **DRAFT**

## **Comprehensive Strategies for Children and Families**

### **States and Localities Invited to March 12-13 Meeting**

#### **Examples of Their Innovations**

State and local representatives from fourteen States have been invited to the March 12-13 White House Working Meeting on Comprehensive Strategies for Children and Families. From each State, at least one local representative, one person from the education community, and at least one additional representative from the human services, health, economic development, labor, or justice field have been invited to participate to share their innovations with each other and with their federal partners and to provide input into plans for further federal action.

The invited States and localities were selected because of their innovations either directly in the children and family area or in developing a tool for use in another area that could be applied to improving results for children and families. What follows is a description of some of the innovations from these 14 States and localities. These summary descriptions are designed to show the diversity and creativity among States and localities. This list is not meant to be complete either in terms of the innovations among these States and localities or to infer that there are not innovations within the other 36 States.

#### **Arkansas**

##### **Building Capacity:**

Enterprise Communities: East Central; Mississippi County; Pulaski County

##### **Streamlining Bureaucracy:**

Recently formed Governor's Partnership Council for Children and Families to support local community capacity to produce children who are in supportive, nurturing, healthy families, and children who succeed in school. Co-chaired by the departments of health, education and human services. Membership: parents and other consumers of services; state, local and community-based public and private nonprofit agencies; professional and advocacy organizations; elected officials; and businesses. Will link existing reform initiatives across systems, focus on building stronger relationships between communities and state agencies, plan and budget across agencies, develop performance measures, provide technical assistance to communities, and identify state financial and regulatory barriers to local service integration. Five target communities identified for initial phase of work.

#### **Colorado**



**Building Capacity:**

Denver is a Project PACT (Pulling America's Communities Together) Site. Project PACT is a multi-agency federal/local partnership designed to empower communities to reduce crime and violence. Two key principles of PACT: (1) Local communities, not the federal government, play the lead role in crafting solutions to address local problems; and (2) Government actors at all levels must establish coordinated, multidisciplinary approaches to reduce crime and build healthy communities. The resources of the federal departments of justice, education, health and human services, housing and urban development, and labor, and the office of national drug control policy support PACT communities through technical assistance, planning, identification of best practices, and provision of information. Metro Denver PACT brings together the Governor's office, the mayors' offices of Denver and Aurora, Representative Schroeder's office, and the county commissions for Adams, Arapahoe, Boulder and Jefferson Counties. Some of Denver's activities include a metro-wide curfew, an illegal firearms enforcement strategy, and a risk factor training session which focused on the risk factors associated with violence.

Enterprise Community: Denver

**Streamlining Bureaucracy:**

Denver-- school-based clinics, home visitation for first time mothers, paternity identification, Medicaid managed care initiative

**Improving Accountability:**

Denver Family Opportunity -- welfare reform effort of over 100 public and private partners, working to move families to complete self sufficiency through training, child care, and job placement

**Connecticut****Building Capacity:**

Living/Learning education campus in New Haven public housing for low-income, at-risk families to empower people to take control of their lives, treat families holistically, and be accountable for goals for family growth and development.

Enterprise Communities: Bridgeport; New Haven

**Streamlining Bureaucracy:**

Neighborhood Revitalization Act recently passed. Very similar to Local Empowerment and Flexibility Act, but at state level. Law allows municipalities and state to work with neighborhoods that come forward with comprehensive strategic plans and measurable goals for economic development and neighborhood revitalization, and to waive municipal and state codes and regulations that impede success. The federal government and

Connecticut just entered into a partnership so that federal solutions and barriers to economic development and neighborhood revitalization would also be addressed.

## **Indiana**

### **Building Capacity:**

Enterprise Community: Indianapolis

### **Streamlining Bureaucracy:**

Step Ahead: Indiana Collaboration Project encourages coordination and cooperation among federal, state, local and private programs; discourages duplication of services; and allows low flexibility regarding program implementation. State government employees are moving to a facilitating role rather than a monitoring, regulatory role.

Consolidated plan for children and families, which identified 199 federal programs serving children and families, submitted to the President.

## **Iowa**

### **Financing:**

Scott County Child Welfare Decategorization Project: Beginning with two counties in 1987 and later expanding to any interested counties, Iowa has passed legislation allowing counties to decategorize funds and to carryover funds from one fiscal year to the next. The purpose of the initiative is to protect children through early intervention and the use of the least restrictive services to meet client needs. Funds are freed for the development of less restrictive services by reducing the use of expensive residential care and relying more heavily on community-based services. In Scott County, degategorization creates a child welfare fund by combining funds from the Iowa Department of Human Services, the Seventh Judicial District Court, and Scott County. Funds are not actually pooled; however, clients are served as if this were the case. A plan of service is developed for the client, and the agencies have funding flexibility (through the Iowa state legislation) to provide the services that are needed, rather than based on narrowly defined categories. The legislation has allowed the agencies more flexibility in how state dollars are spent. Iowa has attempted to create flexibility in federal programs through available means (e.g., waivers; the new definition of Early and Periodic Screening, Diagnostic, and Treatment).

### **Building Capacity:**

Enterprise Community: Des Moines

### **Streamlining Bureaucracy:**

Council for Human Investment (CHI) created through legislation in 1993. Members appointed by Governor include departments of economic development, education, human services, and health, and public, private, and legislative members. Two responsibilities:

include developing a long-term human investment strategy with broad policy goals and benchmarks, and conducting customer satisfaction surveys of the users of public services. Initial focus on economic development, work force development, and strong family.

**Improving Accountability:**

Welfare reform -- "responsibility with consequences" theme -- begun in 1993. Provides incentives for employment. Iowa now has 35% of welfare cases working and welfare caseloads/expenditures lowest they have been in 10 years. Department of health visits all families sanctioned for non-cooperation.

**Kentucky**

**Building Capacity:**

Empowerment Zone: Kentucky Highlands

Enterprise Communities: Louisville; Scott and McCreary Counties [with Tennessee]

**Improving Accountability:**

Comprehensive education reform begun in 1990:

- Establishes student performance results for all students, and requires schools to help all students successfully meet them.
- Holds educators accountable, with positive and negative consequences, including monetary rewards, the possibility of dismissal, etc. Professional development funds earmarked to help teachers prepare for changes.
- Preschool programs for at-risk 4 year olds, with parents as part of the program.
- Primary school replaces K through 3rd grade, with students progressing at their own pace. Students move into 4th grade when they master skills necessary to succeed in 4th grade.
- Extended school services provide extra instructional time for students who need it -- before, after school, weekends and during the summer.
- Technology for instruction, communication and information.
- Family Resource and Youth Services Centers provide access to needed in services in every school catchment area.

How this works: Kentucky schools assigned an accountability index derived primarily from measures of student performance (test scores), but also dropout rates, transition to work, and post secondary education. Baselines used to calculate "threshold improvement goals" for the next two years. Schools that exceed their goals receive monetary rewards and school staffs decide how the money will be spent. Schools improving (maintaining their baseline or showing some improvement but falling short of their goal) develop an improvement plan and have an additional two years to attain their improvement goal. Schools that show declining scores must develop improvement plans and are eligible for monetary and technical assistance from the state. Eventually, the state expects to designate schools that chronically fail to attain achievement targets as "schools in crisis"

and to take corrective action. Each school where 20% of student population eligible for free lunches funded to establish a family resource or youth services center.

#### **Streamlining Bureaucracy:**

Commission on Families and Children, recently established by Executive Order, responsible for “planning, implementation, and direction of a family-oriented system of community supports and services” for children and families. Includes all state-level departments that serve children, members of local communities, the private sector, and parents.

#### **Maryland**

#### **Building Capacity:**

Baltimore -- Community Building in Partnership in Sandtown-Winchester area of Baltimore is a partnership among residents, government, and the enterprise foundation to transform the neighborhood. The goal is to transform the systems of support that are not working for residents, including housing, education, health and human services, employment, and public safety. CBP partners with city agencies, community-based organizations, and state and federal agencies to implement housing, comprehensive health care, youth programs, family support, public safety, and employment initiatives.

Empowerment Zone: Baltimore

#### **Streamlining Bureaucracy:**

Governor's Subcabinet for Children, Youth, and Families, originally established by Executive Order, then by State law in 1993, responsible for overall planning, coordination, and monitoring of children's and family services. Includes departments of human resources, education, health and mental hygiene, juvenile services, and budget and fiscal planning, and the office for handicapped individuals. Reforming services on an interagency basis through local management boards. Required to phase in a statewide system of interagency budgeting and funding by 1998. The Subcabinet operates under five principles:

- Increase local authority to implement and monitor services on an interagency basis
- Maximize family-centered, home- and community-based services, including interagency case management and a single point of access to multiple agency services
- Shift resources to prevention and early intervention efforts
- Ensure that the interagency budget for children and families reflects Subcabinet and local priorities and that agency budgets have the flexibility to address common priorities.
- Ensure system-wide oversight, monitoring, collaboration and accountability through the Subcabinet.

Improving Accountability:

Maryland's Tomorrow High School Program, a partnership among businesses, schools and the state, operates in 75 sites, serving about 8,000 students around the state. Primary goals are to prevent dropouts and to help graduates make the transition successfully into the workplace or higher education. Provides comprehensive services, including working with students year-round and for one year after graduation, skills development, personal development, sustained parent involvement, business involvement, and staff development. Each school has a teacher or case manager who advocates for the students, defusing any crisis that might lead a student to quit school. Students identified based on factors such as low academic achievement, histories of grade retention.

## **Minnesota**

### **Financing Comprehensive Strategies:**

Family Services Collaboratives grant program. Consolidates funding of some federal programs.

Minnesota also establishing integrated funds, or pooled resources, within the local family service collaboratives.

### **Building Capacity:**

Interagency Technical Assistance: At the Governor's level, Minnesota has created a Children's Interagency Technical Assistance Team to serve the community-level family service collaboratives. Some of this team's responsibilities include:

- Funnel and receive technical assistance requests to focus team. Focus teams formed in areas of: integrated service delivery; funding and finance; evaluation; governance; and information management.
- Anticipate technical assistance needs of collaboratives and respond to them.
- Identify appropriate persons and agencies to solve specific problems.
- Remove barriers that impede systemic change by eliminating administrative rules and policies and making recommendations to the Children's cabinet on changes in state and federal policies.

Enterprise Communities: Minneapolis; St. Paul

### **Strengthening Data/Information Systems:**

Automated Children's Services Report Cards: Minnesota developed an on-line children's report card for every community in the State. Minnesotans can view information on-line from a variety of data bases, such as health, education, demographics and crime, and compare their communities performance with that of other locations, regions and the state as a whole. Citizens can look at the results of a citizen survey about experience and attitudes towards crime or at maps of community progress for children based on 21 indicators. In February 1996, Minnesota announced a World Wide Web site which includes this information.

**Streamlining Bureaucracy:**

State level: the newly-created Department of Children, Families and Learning [includes former department of education]; the Children's Cabinet; the Legislative Commission on Children, Youth and Families; the Pew Charitable Trusts-funded integration project; the Children's Interagency Technical Assistance Team; the public/private Action for Children Commission; the Minnesota Family Investment Program; MinnesotaCare; the Department of Human Services Children's Initiative.

Local level: the Family Services Collaboratives; children's mental health collaboratives; family preservation and support project; early childhood family education and learning readiness programs; and Head Start's project cornerstone

**Improving Accountability:**

Kids Can't Wait Vision, 1992. Individuals, communities, neighborhoods and institutions (including state agencies and programs) devise strategies and goals to enhance their support of families. Goal is comprehensive systemic change in the way services for children and families are delivered in all Minnesota communities, assuring services are family-centered, comprehensive, culturally-appropriate, community-based, inclusive, and coordinated, so that outcomes for children and families are improved. The 1994 Kids' Can't Wait Progress Report shows a number of improvements over 1992 indicators.

Minnesota Milestones sets forth a vision and measurable goals for the state's future based on what Minnesotans said were their hopes for the state and their communities. The purpose of Minnesota Milestones is to determine where the state wants to be in the future and to measure long-term results over the next 5, 10 and 20 years. It gives Minnesotans a way to focus on the future and hold leaders accountable for how the state gets there. The result of a citizen-based planning process with 45 meetings across the state was a planning document "Minnesota Milestones: A Report Card for the Future" which includes a vision for the future, 20 broad goals and 79 ways to measure progress towards these goals. For example, under the broad goal "Families will provide a stable environment for their children" are 7 measures with specific targets such as teen pregnancy rate, runaways per 1,000 children, percentage of students attempting suicide, divorce rate, percentage of students who move more than once a year, etc.

**Missouri****Building Capacity:**

Enhanced Enterprise Community: Kansas City, Kansas and Kansas City, Missouri  
Enterprise Communities: East Platte, St. Louis

**Streamlining Bureaucracy:**

Caring Communities, a school-based effort to link or co-locate health and human services with education reform efforts within the schools. Attempting to integrate educational

improvement efforts with human service reform. Goals are to create a culture within the school building that teaches the whole child, and to develop community systems that support and encourage community learners. Have identified 60 school sites in 7 communities -- supported by \$24 million budget crossing five agencies (the departments of elementary and secondary education, health, mental health, labor and industrial relations, and social services). Desire partnership with communities in the truest sense, which means the state devolves authority to the community.

**Improving Accountability:**

The Family Investment Trust, established by Executive Order, is bridging efforts between state agencies and local communities to create a more responsive system of services for children and families. The Trust is a public/private partnership with participation by state departments of education, health, mental health, and human services, and business and civic leaders. The Trust is working toward a set of desired results for children and families. Communities interested in working in partnership with the state designate different priorities from each of the broad categories of core results (healthy child and youth development, strong neighborhoods and families, and parents working). Communities designated for Community Partnerships with the state will be empowered to negotiate new relationships with state agencies to provide a variety of services for children and families.

Community education centers such as the Clay School/Friedens Haus Community Education Center in Hyde Park neighborhood of North St. Louis. Includes after-school tutoring, club and mentoring groups for children, teen leadership and job training, parenting groups, health centers, university, business, foundations, law enforcement among the partners. Clay School has increased student attendance (from 80% to 96%), improved academic achievement, decreased student discipline referrals, and decreased student mobility, decreased violent crimes against people by 15% in the Hyde Park community, and significant increase in parental involvement and volunteerism.

**North Carolina**

**Financing Comprehensive Strategies:**

Budgeting by key function rather than by department. North Carolina is moving toward an outcomes budget. Have organized the work of the state by 11 functions. This year, 8 of the 11 functions are part of the state's new performance budget. Tried to realign the legislative committee structure to match the 11 functions but were not successful.

**Building Capacity:**

Enterprise Communities, Charlotte, Halifax, Edgecombe and Wilson Counties; Robeson County

**Streamlining Bureaucracy:**

Smart Start early childhood initiative started in 1993. An effort to reshape human services and improve the health and well-being of young children and families through a collaborative "top down" and "bottom up" strategy and a public-private partnership. Includes several goals and objectives, all driven by the overriding goal that every child start kindergarten healthy and ready to learn. Not focused only on young children, but on families and, less directly, on the role communities play in mobilizing efforts and resources on behalf of young children and families. Provides child care, health care and other services to children, and a variety of family support services. Looks to find new approaches to governance and the delivery of human services. The North Carolina Partnership for Children oversees Smart Start. Local programs are planned and initiated by county partnerships for children. Twenty-four such partnerships representing 32 counties are receiving Smart Start funds.

Project Uplift began as a pilot in 1987 to work with families in a public housing community in Greensboro. Includes a full-day child development center; a family resource center which offers adult education and job training, transportation, child care, parenting education, nutrition services, health care, and social and emotional development programs; and a literacy program for mothers and children.

#### **Improving Accountability:**

Education reform: Setting performance standards in schools. Each school must make progress against its own baseline, not system averages. Flexibility to schools regarding how to meet the standards. Cut centralized bureaucracy and shifted costs savings into local schools. Schools will get bonus funds if they meet or exceed the standards. If a school repeatedly fails to make progress, the state can take over.

### **Ohio**

#### **Building Capacity:**

Supplemental Empowerment Zone: Cleveland

Enterprise Communities: Akron; Columbus; Greater Portsmouth

#### **Streamlining Bureaucracy:**

Ohio is one of five Ed-Flex States, meaning the Secretary of Education has devolved authority to grant Goals 2000 waivers so that the state can grant waivers to local school districts without coming back to the U.S. Department of Education for permission.

Lucas County Family and Children First Council supports strong, nurturing and healthy families by creating and implementing an innovative, family centered and community responsive collaborative system of services. Council includes executive and direct service staff from all the publicly funded youth and family serving systems, United Way, and a broad representation of community family advocates, consumers of services, service providers and community leaders. Providing family centered services at neighborhood-based Family Resource Centers, with outplacement of service resources from all the publicly funded family service systems.



**Improving Accountability:**

Cleveland Works, a non-profit organization that delivers job training and placement and comprehensive family services to people seeking permanent employment and an increase in their standard of living, including the opportunity to move off the public assistance roles. Established in 1986 to provide training to adult AFDC recipients in Cuyahoga County in Cleveland. Programs of Cleveland Works entered around three cornerstones: family health, quality education, and gainful employment. Five mayor programs: job placement and retention, job preparation and training, "Beat the Streets", legal services, and the family development project. Through these programs, provide educational opportunities, legal services, family education, and on-site health clinic, and on-site child care. Uses federal JOBS, JTPA, and Head start funds, Food Stamps. Also state, county, city, foundations, private contributions, and corporations. Tracks 6 results: job readiness, entry wage, job retention rates, cost per placement.

**Oregon****Building Capacity:**

Enterprise Communities: Josephine; Portland

**Improving Data and Information Systems:**

As part of the Oregon Option healthy children cluster, Oregon has produced automated county maps for seven healthy children benchmarks (e.g., teen pregnancy rate, immunization rate, low birth weight). Through regional meetings, are providing training on the use of these data throughout the state. Identifying both best practices and barriers based on comparative data.

**Streamlining Bureaucracy:**

Oregon is one of five Ed-Flex States, meaning the Secretary of Education has devolved authority to grant Goals 2000 waivers so that the state can grant waivers to local school districts without coming back to the U.S. Department of Education for permission.

**Improving Accountability:**

Oregon Benchmarks measure progress toward state's vision of well-being, enabling citizens and policymakers to focus on desired results in setting priorities and improving effectiveness of programs and services. Benchmarks are tied to a growing movement toward performance measures for state agencies.

The Oregon Option is a federal, state, local partnership begun in 1994 to improve the intergovernmental service delivery system by focusing on results, implementing the best strategies to achieve results, breaking down barriers to results, and measuring results. Focusing on 27 benchmarks in three cluster areas: healthy children, a well-developed and educated workforce, and stable families. Supporting clusters on data/statistics and communication, information technology.

Oregon Commission on Children and Families, in partnership with local commissions is responsible for promoting the well-being of children and families. Authorized by state statutes. Includes departments of human resources, state superintendent of public instruction, county juvenile department directors association, public, and local commission members, social service professionals, and business. The Commission has selected 11 core benchmarks to address through county comprehensive community-based plans for children and families. The Commission is developing results-oriented goals around the social service system, especially in assessing the effectiveness of integrated services, school-linked services, and family resource centers.

Multnomah County -- uses performance contracts for social service providers

Oregon Health plan: Oregon's Medicaid demonstration program expands Medicaid eligibility to 100 percent of the federal poverty level and shifts delivery of services into fully and partially capitated plans and primary care case management programs. Oregon used a public prioritization process to establish the service package provided under the demonstration. Oregon's Medicaid reform project expands coverage to 126,300 additional low-income Oregonians.

## **Vermont**

### **Building Capacity:**

Enterprise Community: Burlington

### **Improving Accountability:**

Human services/education collaborative: The primary objective of the partnership between the Agency for Human Services and the department of education is to improve outcomes for all children and their families by developing a system of community supports and services. Current status: Have developed outcomes for children and families at both the state and community level. Have developed regional children and family governance teams throughout the state. Have developed a training curriculum to support communities in community development processes.

Vermont Early Education Services promotes the healthy development of younger children, prepares them to succeed in school; enhances the social, economic and personal well-being of the whole family; empowers the family to use existing community services more effectively; and works collaboratively with families and communities to expand, improve and link those services. Recent statistics on 30 families who have been in the program and tracked since 1990 indicate average family earned income has increased from \$7,377 to \$22,934. Statistics on larger groups are consistent, though somewhat lower, for families served for a shorter period of time. Vermont is continuing and expanding the services of what was the Comprehensive Child Development Program as an Early Head Start program.

Success by Six home visiting. In 1992 Vermont introduced a "Success by Six" program which greatly expanded its capacity to reach every preschool child and family in the state. Services, including home visiting, were delivered through Parent Child Centers, the Health Department, and school nurses. Vermont's child abuse rates have dropped by 22% over 3 years.

## **West Virginia**

### **Financing Comprehensive Strategies:**

WV examining financing models at both the state and local levels which pool funding across programs to support integrated family based services. The State legislature passed a law giving the Governor's Cabinet on Children and Families the ability to pool state funds for children. A pooled fund, "Family Resource Planning Fund", has been created at the state level drawing on various federal and state funding streams for the purpose of sharing the costs of collaborative local level planning and evaluation through FRNs. Some FRNs have been successful in negotiating local level agreements among service providers to pool funds to help support the FRN activities as well as direct service delivery.

### **Building Capacity:**

Child Family Services Plan to guide community planning efforts, support and enhance existing services, create new services, and provide a framework for services integration. Have formed Child/Family Services Plan Implementation Council, made up of equal numbers of state officials, consumers and local community representatives, to implement the state's Five Year Child/Family Services Plan.

Enterprise Communities: West Central; Huntington; McDowell

### **Streamlining Bureaucracy:**

Governor's Cabinet on Children and Families oversees the system reform efforts. Want to create a better system of services, one that actively solicits community input and begins to allow decision making at the lowest possible level. Striving to create a system that is family focused, coordinated, integrated, and accessible. One of primary means to do this is to establish local community organization (family resource network) in all counties to conduct local level assessment, planning and evaluation across programs and systems. To date, 7 family resource networks formally recognized to serve 11 counties; 19 under review to serve 24 additional counties. Six FRNs have designed and implemented family resource programs which incorporate or are developing single point of entry intake and family assessment procedure and all focus on early identification of family needs and preventive approaches.

Consolidated plan for children and families, which identified 199 federal programs serving children and families, submitted to the President.

## ***PARTNERSHIPS FOR STRONGER FAMILIES***

draft 03/12/96

In his State of the Union Address, President Clinton said: "Our first challenge is to cherish our children and strengthen America's families. Family is the foundation of American life. If we have stronger families, we will have a stronger America." This effort -- Partnerships for Stronger Families -- is about meeting that challenge and strengthening families. The following principles offer guidance about how to do so:

**Invest Early and Prevent Crises.** Early intervention can help to avoid the need for long-term supports. Attention and resources should focus on providing early help and support to enhance the strengths of families and prevent crises.

**Respond to Families not Problems.** Rather than drawing rigid boundaries between services and supports for families, government must be able to respond flexibly. Families do not come in neat packages, the supports they need do not fall into discrete programs, and governments cannot respond with "one size fits all" policies. Each member of a family must be seen in the context of their family and community -- not as a disconnected individual with isolated problems.

**Account for Results.** Success of these partnerships should be measured by results -- good indicators of the strength of families and the growth of children -- not by inputs such as dollars spent or numbers of people serving or being served.

**Facilitate and Support Local Efforts.** The Clinton Administration is committed to supporting bottom up reform. Families live and work in communities, and efforts to improve results should build on local initiatives. To be successful, partnerships for stronger families must engage all stakeholders at the local level: neighborhood and community leaders, schools, nonprofit and for-profit organizations, local government, the faith community, the media and families themselves.

**Provide Opportunities for Parents to Meet Their Responsibility.** In the end, successful partnerships for stronger families must build on the fundamental role of both parents in raising their children. Mothers, fathers, and other caregivers must accept their responsibility as nurturers, first-teachers, partners with schools, mentors of their adolescents, and coaches during life transitions. Federal, state and local policies should reinforce that critical responsibility and provide parents the opportunity to fulfill it.

**WHITE HOUSE WORKING MEETING  
ON  
PARTNERSHIPS FOR STRONGER FAMILIES**

**AGENDA**

Co-hosted by  
the White House Domestic Policy Council,  
the National Performance Review,  
the U.S. Department of Education and  
the Institute for Educational Leadership

*March 12-13, 1996  
Washington, DC*

***Tuesday, March 12, 1996***

- 5:30 p.m.     Registration and Display Tables**  
*Hall of the Americas, Organization of American States Building,  
17th and Constitution Avenue, NW*
- 6:00 p.m.     Reception**
- 6:30 p.m.     Dinner**
- 7:30 p.m.     Building Partnerships for Results—Discussion with Cabinet Members and Other  
Administration Officials**

*Cabinet Secretaries and other Administration Officials will discuss important  
efforts of their Departments to assure that federal programs and policies  
effectively promote Partnerships for Stronger Families.*

*Panel Participants:*

*Secretary Henry Cisneros, Department of Housing and Urban Development  
Secretary Richard Riley, Department of Education  
Attorney General Janet Reno, Department of Justice  
Peter Edelman, Assistant Secretary of Planning and Evaluation,  
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Ellen Haas, Under Secretary for Food, Nutrition and Consumer Services,  
Department of Agriculture  
Elaine Kamarck, Senior Policy Advisor to the Vice President*

*Moderator: Carol H. Rasco, Assistant to the President for Domestic Policy*

- 8:45 p.m.     Wrap-up and Overview of Wednesday's Meeting (Logistics)**

**Wednesday, March 13 \***

**\* Please note that security clearance to enter the Old Executive Office Building (OEOB) can take up to 15 minutes. Make sure that you have some form of identification with photo, date of birth and social security number. Also, for security reasons, participants may not come and go from the OEOB throughout the day.**

**8:00 a.m. Introductions and Networking (Small Groups)**

**Continental Breakfast Will Be Served**

*Small group assignments are in each participant's packet of information.*

*Old Executive Office Building, 17th and G Street, NW*

*Group # 1. Room 472 (Breakfast in Room 474)*

*Group # 2. Room 476 (Breakfast in Room 474)*

*Group # 3. Room 211 (Breakfast in Room 211)*

*The National Performance Review, 750 17th Street, NW  
(Between Pennsylvania & H Street)*

*Group # 4. Second Floor Conference Room (Breakfast in Conference Room)*

*Group # 5. Sixth Floor Conference Room (Breakfast in Conference Room)*

**8:30 a.m. Understanding State and Local Reforms for Children and Families (Small Groups)**

*Same small groups and locations as the 8:00 a.m. session*

*In small groups, state and local participants will outline, for the group, key aspects of their efforts to improve the lives of children and families. The groups will focus on two questions: What factors are essential to success? How could changes in federal, state and local roles and relationships enable greater success?*

**9:45 a.m. Break**

**10:00 a.m. Federal Action to Support Partnerships for Stronger Families (Small Groups)**

*Same small groups and locations as 8:00 a.m. session*

*The small groups will focus on the draft "Framework for Federal Action." Are the major issue areas the ones that are most significant to states and communities? If not, how should they be revised? How do effective state and local initiatives relate to these issue areas? Which actions are most important to foster and support effective state and community strategies for children and families?*

**12:00 p.m. Lunch and Networking**

*The Indian Treaty Room, Room 474, The Old Executive Office Building,  
17th and G Street, NW*

*The lunch is informal, providing a time for networking and talking with colleagues from other states and organizations.*

**1:00 p.m. A Focus on the Issues: Identifying Next Steps (Small Groups)**  
*Small group assignments are in each participant's packet of information.*

*Old Executive Office Building, 17th and G Street, NW*

*Group # A. Room 472—**Building Capacity**  
Group # B. Room 476—**Strengthening Data & Information Systems**  
Group # C. Room 211—**Improving Accountability**  
Group # D. Room 180—**Streamlining Bureaucracy**  
Group # E. Room 450—**Financing***

*Each small group will look intensively at one issue area. The groups will focus on the following question: What steps at the federal, state and community levels would be most important to improve results for children and families? Each group should identify one to two major ideas or issues to share with the large group during the "town hall" session.*

**2:15 p.m. All Participants Proceed Immediately to Room 450**

**2:30 p.m. Town Hall Meeting**  
*Room 450, The Old Executive Office Building, 17th and G Street, NW*

**3:45 p.m. Break**

**4:00 p.m. Moving Ahead: Building Intergovernmental Partnerships**  
*Room 450, The Old Executive Office Building, 17th and G Street, NW*

**5:00 p.m. Conclusion of the Working Meeting on Partnerships for Stronger Families**

As of 3/11/96

WHITE HOUSE WORKING MEETING ON CHILDREN AND FAMILIES  
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**DRAFT**  
**Compilation of State/Local Innovations**  
**March 11, 1996**

***PARTNERSHIPS FOR STRONGER FAMILIES***

**States and Localities Invited to March 12-13 White House Working Meeting**

**Examples of Their Innovations**

State and local representatives from fourteen states have been invited to the March 12-13 White House Working Meeting on Partnerships for Stronger Families: Arkansas, Colorado, Connecticut, Indiana, Iowa, Kentucky, Maryland, Minnesota, Missouri, North Carolina, Ohio, Oregon, Vermont, and West Virginia.

From each state, at least one local representative, one person from the education community, and at least one additional representative from the human services, health, economic development, labor, or justice field have been invited to participate to share their innovations with each other and with their federal partners and to provide input into plans for further action.

The invited states and localities were selected because of their innovations either directly in the children and family area or in developing a tool for use in another area that could be applied to improving results for children and families. For the purposes of the March 12-13 meeting, the following is a description of some of the innovations from these fourteen states and localities in each of the five issue areas to be discussed:

***Building Capacity***  
***Strengthening Data/Information Systems***  
***Improving Accountability***  
***Streamlining Bureaucracy***  
***Financing***

These summary descriptions are designed to show the diversity and creativity among States and localities. This list is not meant to be complete either in terms of the innovations among these States and localities or to infer that there are not innovations within the other 36 States.

## **Building Capacity:**

### **Arkansas**

Enterprise Communities: East Central; Mississippi County; Pulaski County

### **Colorado**

Denver is a Project PACT (Pulling America's Communities Together) Site. Project PACT is a multi-agency federal/local partnership designed to empower communities to reduce crime and violence. Two key principles of PACT: (1) Local communities, not the federal government, play the lead role in crafting solutions to address local problems; and (2) Government actors at all levels must establish coordinated, multidisciplinary approaches to reduce crime and build healthy communities. The resources of the federal departments of justice, education, health and human services, housing and urban development, and labor, and the office of national drug control policy support PACT communities through technical assistance, planning, identification of best practices, and provision of information. Metro Denver PACT brings together the Governor's office, the mayors' offices of Denver and Aurora, Representative Schroeder's office, and the county commissions for Adams, Arapahoe, Boulder and Jefferson Counties. Some of Denver's activities include a metro-wide curfew, an illegal firearms enforcement strategy, and a risk factor training session which focuses on the risk factors associated with violence.

Enterprise Community: Denver

### **Connecticut**

Living/Learning education campus in New Haven public housing for low-income, at-risk families to empower people to take control of their lives, treat families holistically, and be accountable for goals for family growth and development.

Enterprise Communities: Bridgeport; New Haven

### **Indiana**

Local Step Ahead Councils convened in all 92 Indiana counties to complete needs assessments and develop their own plan of action for strategies that work in their local communities.

Enterprise Community: Indianapolis

### **Iowa**

Enterprise Community: Des Moines

### Kentucky

Empowerment Zone: Kentucky Highlands

Enterprise Communities: Louisville; Scott and McCreary Counties [with Tennessee]

### Maryland

Baltimore--Community Building in Partnership in Sandtown-Winchester area of Baltimore is a partnership among residents, government, and the enterprise foundation to transform the neighborhood. The goal is to transform the systems of support that are not working for residents, including housing, education, health and human services, employment, and public safety. CBP partners with city agencies, community-based organizations, and state and federal agencies to implement housing, comprehensive health care, youth programs, family support, public safety, and employment initiatives.

Empowerment Zone: Baltimore

### Minnesota

Interagency Technical Assistance: At the Governor's level, Minnesota has created a Children's Interagency Technical Assistance Team to serve the community-level family service collaboratives. Some of this team's responsibilities include:

- Funnel and receive technical assistance requests to focus teams. Focus teams formed in areas of: integrated service delivery; funding and finance; evaluation; governance; and information management.
- Anticipate technical assistance needs of collaboratives and respond to them.
- Identify appropriate persons and agencies to solve specific problems.
- Remove barriers that impede systemic change by eliminating administrative rules and policies and making recommendations to the Children's Cabinet on changes in state and federal policies.

Enterprise Communities: Minneapolis; St. Paul

### Missouri

Enhanced Enterprise Community: Kansas City, Kansas and Kansas City, Missouri

Enterprise Communities: East Prairie; St. Louis

### North Carolina

Enterprise Communities: Charlotte; Halifax, Edgecombe and Wilson Counties; Robeson County

Ohio

Supplemental Empowerment Zone: Cleveland

Enterprise Communities: Akron; Columbus; Greater Portsmouth

Oregon

Enterprise Communities: Josephine; Portland

Vermont

Enterprise Community: Burlington

West Virginia

Child Family Services Plan to guide community planning efforts, support and enhance existing services, create new services, and provide a framework for services integration. Have formed Child/Family Services Plan Implementation Council, made up of equal numbers of state officials, consumers and local community representatives, to implement the state's Five Year Child/Family Services Plan.

Enterprise Communities: West Central; Huntington; McDowell

## **Strengthening Data and Information Systems:**

### **Minnesota**

Automated Children's Services Report Cards: Minnesota developed an on-line children's report card for every community in the State. Minnesotans can view information on-line from a variety of data bases, such as health, education, demographics and crime, and compare their communities' performance with that of other locations, regions and the state as a whole. Citizens can look at the results of a citizen survey about experience and attitudes towards crime or at maps of community progress for children based on 21 indicators. In February 1996, Minnesota announced a World Wide Web site which includes this information.

### **Oregon**

As part of the Oregon Option healthy children cluster, Oregon has produced automated county maps for seven healthy children benchmarks (e.g., teen pregnancy rate, immunization rate, low birth weight). Through regional meetings, Oregon and federal partners are providing training on the use of this data throughout the state. Identifying both best practices and barriers based on comparative data.



## **Improving Accountability:**

### **Colorado**

Denver Family Opportunity--welfare reform effort of over 100 public and private partners, working to move families to complete self sufficiency through training, child care, and job placement.

### **Indiana**

Through the Indiana Collaboration Project, a problem-solving process at the local, state, and federal levels is being implemented to resolve locally-identified issues, decrease bureaucracy and improve services to children. As a result of this process, the following outcomes have been achieved:

- Implemented an Electronic Network to provide counties with a communication system to access local, state, and federal officials to resolve barriers quickly via the InterNet and electronic mail;
- Expanded child care services to all 92 counties, serving an additional 31,000 children;
- Blended existing federal funds across several agencies to implement the Healthy Families Initiative;
- Created the Symposium on Child Care Financing bringing together seventeen counties to develop alternative funding strategies for child care;
- Pooled funding to expand school-age child care;
- Developed a common intake/release of information form across eleven state agencies.

### **Iowa**

Welfare reform -- "responsibility with consequences" theme -- begun in 1993. Provides incentives for employment. Iowa now has 35% of welfare cases working and welfare caseloads/expenditures lowest they have been in 10 years. Department of health visits all families sanctioned for non-cooperation.

### **Kentucky**

Comprehensive education reform begun in Kentucky in 1990:

- Establishes student performance results for all students, and requires schools to help all students successfully meet them.
- Holds educators accountable, with positive and negative consequences, including monetary rewards, the possibility of dismissal, etc. Professional development funds earmarked to help teachers prepare for changes.
- Preschool programs for at-risk 4 year olds, with parents as part of the program.
- Primary school replaces K through 3rd grade, with students progressing at their own pace. Students move into 4th grade when they master skills necessary to succeed in 4th grade.
- Extended school services provide extra instructional time for students who need it-- before, after school, weekends and during the summer.

- Technology for instruction, communication and information.
- Family Resource and Youth Services Centers provide access to needed services in every school catchment area.

How this works: Kentucky schools assigned an accountability index derived primarily from measures of student performance (test scores), but also dropout rates, transition to work, and post secondary education. Baselines used to calculate "threshold improvement goals" for the next two years. Schools that exceed their goals receive monetary rewards and school staffs decide how the money will be spent. Schools improving (maintaining their baseline or showing some improvement but falling short of their goal) develop an improvement plan and have an additional two years to attain their improvement goal. Schools that show declining test scores must develop improvement plans and are eligible for monetary and technical assistance from the state. Eventually, the state expects to designate schools that chronically fail to attain achievement targets as "schools in crisis" and to take corrective action. Each school where 20% of student population eligible for free lunches funded to establish a family resource or youth services center.

### Maryland

Maryland's Tomorrow High School Program, a partnership among businesses, schools and the state, operates in 75 sites, serving about 8,000 students around the state. Primary goals are to prevent dropouts and to help graduates make the transition successfully into the workplace or higher education. Provides comprehensive services, including working with students year-round and for one year after graduation, skills development, personal development, sustained parental involvement, business involvement, and staff development. Each school has a teacher or case manager who advocates for the students, defusing any crisis that might lead a student to quit school. Students identified based on factors such as low academic achievement, histories of grade retention.

### Minnesota

Kids Can't Wait Vision, 1992: Individuals, communities, neighborhoods and institutions (including state agencies and programs) devise strategies and goals to enhance their support of families. Goal is comprehensive systemic change in the way services for children and families are delivered in all Minnesota communities, assuring services are family-centered, comprehensive, culturally-appropriate, community-based, inclusive, and coordinated, so that outcomes for children and families are improved. The 1994 Kids Can't Wait Progress Report shows a number of improvements over 1992 indicators.

Minnesota Milestones sets forth a vision and measurable goals for the state's future based on what Minnesotans said were their hopes for the state and their communities. The purpose of Minnesota Milestones is to determine where the state wants to be in the future and to measure long-term results over the next 5, 10 and 20 years. It gives Minnesotans a way to focus on the future and hold leaders accountable for how the state gets there. The result of a citizen-based planning process with 45 meetings across the state was a planning document, "Minnesota Milestones: A Report Card for the Future", which includes a vision for the future, 20 broad

goals and 79 ways to measure progress towards these goals. For example, under the broad goal "Families will provide a stable environment for their children" are 7 measures with specific targets such as teen pregnancy rate, runaways per 1,000 children, percentage of students attempting suicide, divorce rate, percentage of students who move more than once a year, etc.

### Missouri

The Family Investment Trust, established by Executive Order in Missouri, is bridging efforts between state agencies and local communities to create a more responsive system of services for children and families. The Trust is a public/private partnership with participation by state departments of education, health, mental health, and human services, and business and civic leaders. The Trust is working toward a set of desired results for children and families. Communities interested in working in partnership with the state designate different priorities from each of the broad categories of core results (healthy child and youth development, strong neighborhoods and families, and parents working). Communities designated for Community Partnerships with the state will be empowered to negotiate new relationships with state agencies to provide a variety of services for children and families.

Missouri community education centers such as the Clay School/Friedens Haus Community Education Center in Hyde Park neighborhood of North St. Louis. Includes after-school tutoring, club and mentoring groups for children, teen leadership and job training, parenting groups, health centers, university, business, foundations, and law enforcement among the partners. Clay School has increased student attendance (from 80% to 96%) and parental involvement and volunteerism, improved academic achievement, decreased student discipline referrals, decreased student mobility, and decreased violent crimes against people by 15% in the Hyde Park community.

### North Carolina

Education reform: Setting performance standards in schools. Each school must make progress against its own baseline, not system averages. Flexibility to schools regarding how to meet the standards. Cut centralized bureaucracy and shifted costs savings into local schools. Schools will get bonus funds if they meet or exceed the standards. If a school repeatedly fails to make progress, the state can take over.

### Ohio

Cleveland Works, a non-profit organization that delivers job training and placement and comprehensive family services to people seeking permanent employment and an increase in their standard of living, including the opportunity to move off the public assistance rolls. Established in 1986 to provide training to adult AFDC recipients in Cuyahoga County in Cleveland. Programs of Cleveland Works centered around three cornerstones: family health, quality education, and gainful employment. Five major programs: job placement and retention, job preparation and training, "Beat the Streets", legal services, and the family development project. Through these programs, Cleveland Works provides educational

opportunities, legal services, family education, on-site health clinic, and on-site child care. Uses federal JOBS, JTPA, Head Start funds, and Food Stamps. Also, state, county, city, foundations, private contributions, and corporations. Tracks 6 results including job readiness, entry wage, job retention rates, and cost per placement.

### Oregon

Oregon Benchmarks measure progress toward state's vision of well-being, enabling citizens and policymakers to focus on desired results in setting priorities and improving effectiveness of programs and services. Benchmarks are tied to a growing movement toward performance measures for state agencies.

The Oregon Option is a federal, state, and local partnership begun in 1994 to improve the intergovernmental service delivery system by focusing on results, implementing the best strategies to achieve results, breaking down barriers to results, and measuring results. Focusing on 27 benchmarks in three cluster areas: healthy children, a well-developed and educated workforce, and stable families. Supporting clusters on data/statistics and communication/information technology.

Oregon Commission on Children and Families, in partnership with local commissions is responsible for promoting the well-being of children and families. Authorized by state statutes. Includes departments of human resources, state superintendent of public instruction, county juvenile department directors association, public, and local commission members, social service professional, and business. The Commission, has selected 11 core benchmarks to address through county comprehensive community-based plans for children and families. The Commission is developing results-oriented goals around the social service system, especially in assessing the effectiveness of integrated services, school-linked services, and family resource centers. Multnomah County, Oregon uses performance contracts for social service providers.

Oregon Health Plan: Oregon's Medicaid demonstration program expands Medicaid eligibility to 100 percent of the federal poverty level and shifts delivery of services into fully and partially capitated plans and primary care case management programs. Oregon used a public prioritization process to establish the service package provided under the demonstration. Oregon's Medicaid reform Project expands coverage to 126,300 additional low-income Oregonians.

### Vermont

Human services/education collaborative: The primary objective of the partnership between the Agency for Human Services and the Department of Education is to improve outcomes for all children and their families by developing a system of community supports and services. Current status: Have developed outcomes for children and families at both the state and community level. Have developed regional children and family governance teams throughout the state. Have developed a training curriculum to support communities in community development processes.

Vermont Early Education Services promotes the healthy development of younger children, prepares them to succeed in school; enhances the social, economic and personal well-being of the whole family; empowers the family to use existing community services more effectively; and works collaboratively with families and communities to expand, improve and link those services. Recent statistics on 30 families who have been in the program and tracked since 1990 indicate average family earned income has increased from \$7,377 to \$22,934. Statistics on larger groups are consistent, though somewhat lower, for families served for a shorter period of time. Vermont is continuing and expanding the services of what was the Comprehensive Child Development Program as an early Head Start program.

"Success by Six" home visiting: In 1992 Vermont introduced a "Success by Six" program which greatly expanded its capacity to reach every preschool child and family in the state. Services, including home visiting, were delivered through Parent Child Centers, the Health Department, and school nurses. Vermont's child abuse rates have dropped by 22% over 3 years.

## **Streamlining Bureaucracy:**

### **Arkansas**

Recently formed a Governor's Partnership Council for Children and Families to support local community capacity to produce children who are in supportive, nurturing, healthy families, and children who succeed in school. Co-chaired by the departments of health, education and human services. Membership: parents and other consumers of services; state, local and community-based public and private nonprofit agencies; professional and advocacy organizations; elected officials; and businesses. Will link existing reform initiatives across systems, focus on building stronger relationships between communities and state agencies, plan and budget across agencies, develop performance measures, provide technical assistance to communities, and identify state financial and regulatory barriers to local service integration. Five target communities identified for initial phase of work.

### **Colorado**

Denver--school-based clinics, home visitation for first time mothers, paternity identification, Medicaid managed care initiative

### **Connecticut**

Connecticut recently passed the Neighborhood Revitalization Act, a law similar to the Local Empowerment and Flexibility Act, but at the state level. Law allows municipalities and state to work with neighborhoods that come forward with comprehensive strategic plans and measurable goals for economic development and neighborhood revitalization, and to waive municipal and state codes and regulations that impede success. The federal government and Connecticut just entered into a partnership so that federal solutions and barriers to economic development and neighborhood revitalization would also be addressed.

### **Indiana**

Step Ahead: Indiana Collaboration Project encourages coordination and cooperation among federal, state, local and private programs; discourages duplication of services; and allows local flexibility regarding program implementation. State government employees are moving to a facilitating role rather than a monitoring, regulatory role.

Indiana and West Virginia submitted to the President consolidated plans for children and families, which identified 199 federal programs serving children and families.

### **Iowa**

Council for Human Investment (CHI) created through legislation in 1993. Members appointed by Governor include departments of economic development, education, human services, and health, and public, private, and legislative members. Two responsibilities include developing a long-term human investment strategy with broad policy goals and

benchmarks, and conducting customer satisfaction surveys of the users of public services. Initial focus on economic development, work force development, and strong family.

### Kentucky

Commission on Families and Children, recently established by Executive Order, responsible for “planning, implementation, and direction of a family-oriented system of community supports and services” for children and families. Includes all state-level departments that serve children, members of local communities, the private sector, and parents.

### Maryland

Governor’s Subcabinet for Children, Youth, and Families, originally established by Executive Order, then by State law in 1993, responsible for overall planning, coordination, and monitoring of children’s and family services. Includes departments of human resources, education, health and mental hygiene, juvenile services, and budget and fiscal planning, and the office for handicapped individuals. Reforming services on an interagency basis through local management boards. Required to phase in a statewide system of interagency budgeting and funding by 1998. The Subcabinet operates under five principles:

- Increase local authority to implement and monitor services on an interagency basis.
- Maximize family-centered, home- and community-based services, including interagency case management and a single point of access to multiple agency services.
- Shift resources to prevention and early intervention efforts.
- Ensure that the interagency budget for children and families reflects Subcabinet and local priorities and that agency budgets have the flexibility to address common priorities.
- Ensure system-wide oversight, monitoring, collaboration and accountability through the Subcabinet.

### Minnesota

State level: the newly-created Department of Children, Families and Learning [includes former department of education]; the Children’s Cabinet; the Legislative Commission on Children, Youth and Families; the Pew Charitable Trusts-funded integration project; the Children’s Interagency Technical Assistance Team; the public/private Action for Children Commission; the Minnesota Family Investment Program; MinnesotaCare; the Department of Human Services Children’s Initiative.

Local level: the family services collaboratives; children’s mental health collaboratives; family preservation and support project; early childhood family education and learning readiness programs; and Head Start’s project cornerstone.

### Missouri

Missouri’s Caring Communities, a school-based effort to link or co-locate health and human services with education reform efforts within the schools. Attempting to integrate educational improvement efforts with human service reform. Goals are to create a culture within the

school building that teaches the whole child, and to develop community systems that support and encourage community learners. Have identified 60 school sites in 7 communities -- supported by \$24 million budget crossing five agencies (the departments of elementary and secondary education, health, mental health, labor and industrial relations, and social services). Desire partnership with communities in the truest sense, which means the state devolves authority to the community.

### North Carolina

Smart Start early childhood initiative started in North Carolina in 1993. An effort to reshape human services and improve the health and well-being of young children and families through a collaborative "top down" and "bottom up" strategy and a public-private partnership. Includes several goals and objectives, all driven by the overriding goal that every child start kindergarten healthy and ready to learn. Not focused only on young children, but on families and, less directly, on the role communities play in mobilizing efforts and resources on behalf of young children and families. Provides child care, health care and other services to children, and a variety of family support services. Looks to find new approaches to governance and the delivery of human services. The North Carolina Partnership for Children oversees Smart Start. Local programs are planned and initiated by county partnerships for children. Twenty-four such partnerships representing 32 counties are receiving Smart Start funds.

Project Uplift began as a pilot in North Carolina in 1987 to work with families in a public housing community in Greensboro. Includes a full-day child development center; a family resource center which offers adult education and job training, transportation, child care, parenting education, nutrition services, health care, and social and emotional development programs; and a literacy program for mothers and children.

### Ohio

Ohio is one of five Ed-Flex States, meaning that the Secretary of Education has devolved authority to grant Goals 2000 waivers so that the state can grant waivers to local school districts without coming back to the U.S. Department of Education for permission.

Lucas County, Ohio Family and Children First Council supports strong, nurturing and healthy families by creating and implementing an innovative, family centered and community responsive collaborative system of services. Council includes executive and direct service staff from all the publicly funded youth and family serving systems, United Way, and a broad representation of community family advocates, consumers of services, service providers and community leaders. Providing family centered services at neighborhood-based Family Resource Centers, with outplacement of service resources from all the publicly funded family service systems.



### Oregon

Oregon is one of five Ed-Flex States, meaning that the Secretary of Education has devolved authority to grant Goals 2000 waivers so that the state can grant waivers to local school districts without coming back to the U.S. Department of Education for permission.

### West Virginia

West Virginia Governor's Cabinet on Children and Families oversees the system reform efforts. Want to create a better system of services, one that actively solicits community input and begins to allow decision making at the lowest possible level. Striving to create a system that is family focused, coordinated, integrated, and accessible. One of the primary means to do this is to establish local community organization (family resource network) in all counties to conduct local level assessment, planning an evaluation across programs and systems. To date, 7 family resource networks formally recognized to serve 11 counties; 19 under review to serve 24 additional counties. Six FRNs have designed and implemented family resource programs which incorporate or are developing single point of entry intake and family assessment procedure and all focus on early identification of family needs and preventive approaches.

Consolidated plan for children and families, which identified 199 federal programs serving children and families, submitted to the President.

## **Financing:**

### **Iowa**

Scott County, Iowa Child Welfare Decategorization Project: Beginning with two counties in 1987 and later expanding to any interested counties, Iowa has passed legislation allowing counties to decategorize funds and to carryover funds from one fiscal year to the next. The purpose of the initiative is to protect children through early intervention and the use of the least restrictive services to meet client needs. Funds are freed for the development of less restrictive services by reducing the use of expensive residential care and relying more heavily on community-based services. In Scott County, decategorization creates a child welfare fund by combining funds from the Iowa Department of Human Services, the Seventh Judicial District Court, and Scott County. Funds are not actually pooled; however, clients are served as if this were the case. A plan of service is developed for the client, and the agencies have funding flexibility (through the Iowa state legislation) to provide the services that are needed, rather than based on narrowly defined categories. The legislation has allowed the agencies more flexibility in how state dollars are spent. Iowa has attempted to create flexibility in federal programs through available means (e.g., waivers; the new definition of Early and Periodic Screening, Diagnostic, and Treatment).

### **Minnesota**

Minnesota Family Services Collaboratives grant program. Consolidates funding of some federal programs.

Minnesota is also establishing integrated funds, or pooled resources, within the local family service collaboratives.

### **North Carolina**

Budgeting by key function rather than by department. North Carolina is moving toward an outcomes budget. Have organized the work of the state by 11 functions. This year, 8 of the 11 functions are part of the state's new performance budget. Tried to realign the legislative committee structure to match the 11 functions but were not successful.

### **West Virginia**

West Virginia is examining financing models at both the state and local levels which pool funding across programs to support integrated family based services. The State legislature passed a law giving the Governor's Cabinet on Children and Families the ability to pool state funds for children. A pooled fund, "Family Resource Planning Fund", has been created at the state level drawing on various federal and state funding streams for the purpose of sharing the costs of collaborative local level planning and evaluation through Family Resource Networks (FRNs). Some FRNs have been successful in negotiating local level agreements among service providers to pool funds to help support the FRN activities as well as direct service delivery.