STATE OF CALIFORNIA GEORGE DEUKMEJIAN, *Governor*

COMMISSION ON CALIFORNIA STATE GOVERNMENT ORGANIZATION AND ECONOMY
1303 J Street, Suite 270, (916) 445-2125
Sacramento 95814

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THE CHILDREN'S SERVICES DELIVERY SYSTEM IN CALIFORNIA

Final Report

OCTOBER 1987

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Final Report

A Report of the
Commission on California State Government
Organization and Economy

OCTOBER 1987

I. INTRODUCTION

Children are an important resource that is vital to the future growth and prosperity of California. Although the majority of children in the State are well-provided for by their families, many families and children in California may need some help from children's services providers at some time.

California has recognized the value of children and acknowledged its responsibility for their protection and well-being by instituting numerous programs and committing significant resources to children's services and protection. The State of California, in cooperation with local governments, private agencies, and various non-profit organizations funds and administers an extensive children's services delivery system. However, due to the increased number of children in California, the increased number of children in need of service, and the number of children with multiple problems, the State's children's services delivery system is being strained to its limits.

Since the State of California plays such a large and important role in the funding and administration of children's services, and because of the significant resources involved in these programs, the Little Hoover Commission initiated a 17-month study to review California's children's services delivery system and determine how it could be strengthened and improved.

BACKGROUND

California has a large and growing children's population. Presently, there are an estimated 7.1 million children in California under the age of 18.[1] The number of children in the State is expected to continue to increase in the coming years. For example, between 1980 and 1985, the population of infants and children under six years of age increased by 25 percent, from 2.04 million to 2.55 million.[2] Moreover, the higher number of births that California has been experiencing in recent years is expected to prevail for the remainder of the 20th century.

The State of California, with the assistance of local governments, private agencies, and various non-profit organizations, such as churches or community groups, provides or administers a wide array of services for children, including health services, education, child protective services, financial assistance and many others. These services are designed to help families and individuals obtain basic services for their children, including nutrition, shelter, and medical care. For example, the Little Hoover Commission's

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[1] Department of Finance. 1986 Baseline Report 86P3: Population Projections for California Counties 1980 to 2020 with Age/Sex Detail to 2020, July 1987.

[2] California Assembly Office of Research. California 2000: A People in Transition. June 1986, p.7.

survey of State agencies identified 35 different State programs designed to serve children in need of child care services, runaway/homeless youth, and abused and neglected children. These 35 programs expend more than $1.2 billion annually.[3]

During the past four decades, there has been a dramatic change in the family environment in which children in California are living. Exhibit I.1 demonstrates this change.

EXHIBIT I.1

ANALYSIS OF THE NUMBER OF CHILDREN BY FAMILY TYPE
IN CALIFORNIA FROM 1940 TO 1980

(Numbers in Millions)

Family Type	1940	1950	1960	1970	1980	Percent Change 1940-80
Couple	1.37	3.84	4.77	5.44	4.88	256
Single Parent	0.16	0.29	0.49	0.97	1.21	656
TOTALS	1.53	4.13	5.26	6.41	6.09	298

SOURCE: Created from data appearing in Socio-Economic Trends in California: 1940-80, California Employment Development Department, 1986.

Exhibit I.1 shows that the number of children living in single-parent families rose by 656 percent in the last four decades, while the number of children living with two-parent families increased 256 percent. Thus, the number of children living in single-parent families increased more than 2.5 times faster than the number of children living in two-parent families between 1940 and 1980. Currently, approximately one out of every five children in California lives in a household headed by a single parent.

The dramatic economic and social changes in the past 40 years have had a striking impact on the family structure of certain ethnic groups. Exhibit I.2 illustrates this phenomenon.

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[3]Little Hoover Commission, "Catalog of State Government Programs Serving Abused and Neglected Children, Runaway/Homeless Youth, and Children in Need of Child Care Services," See Appendix B.

EXHIBIT I.2

ANALYSIS OF FAMILIES WITH CHILDREN IN CALIFORNIA
BY FAMILY TYPE FROM 1940 TO 1980

(Numbers in Thousands)

	Census Year					
Family Type	1940	1950	1960	1970	1980	Percent Change 1940 to 1980
Couple	691.7	1,669.1	2,061.8	2,347.6	2,410.5	248
Single Female	67.6	105.1	200.3	381.0	569.6	742
Single Female (Black)	2.6	10.7	25.2	68.1	118.5	4,457
Single Female (Spanish Surname)	6.0	12.9	21.3	48.0	99.1	1,552
Single Male	16.1	18.7	27.9	57.0	100.8	526

SOURCE: Adapted from data appearing in Socio-Economic Trends in California: 1940 - 1980, California Employment Development Department, 1986.

Exhibit I.2 shows that the number of families headed by single females increased by 742 percent from 1940 to 1980, while the number of families headed by couples increased 248 percent during the same time period. However, even more alarming is the fact that the number of families headed by single black females increased by 4,457 percent between 1940 and 1980 and the fact that the number of families headed by single females with Spanish surnames increased 1,552 percent during this time frame.

A consequence of the social and economic changes that have occurred in recent decades is an increase in the number of families that are living in poverty. For example, a study released by the California Senate Office of Research in April 1987 showed that the poorer families in the State have suffered economically in the past decade. The study determined that during the past 10 years there was a 9 percent decline in the real annual income of families which comprise the poorest 20 percent of all California families. Specifically, the median income of these families, stated in 1985 dollars, fell from $9,796 in 1977 to $8,919 in 1986, a decrease of $877.

The study conducted by the Senate Office of Research and other studies have confirmed the feminization of poverty and the increase in the incidence of poverty. For example, 1980 census data showed that approximately seven percent of all households in California were headed by single female parents. However, single females with children comprised 46 percent of the households

living on an income below the federal poverty threshold. In addition, 54 percent of the female-headed households in poverty had at least one child under six.[4]

Another study conducted by the Assembly Office of Research indicated that nearly one-half of the young children living in poverty live in homes headed by women. In addition, an estimated 57 percent of the three- to five-year old children living with a single-female parent live in poverty; among infants under three, it is 78 percent.[5]

The dramatic social and economic changes in the past four decades that have contributed to reshaping the makeup of families in California have placed great demands on government and other providers of children's services, such as private agencies, religious organizations, and other non-profit groups. While non-governmental agencies have actively provided many needed services for children, the sheer magnitude of the growing number of children in need of service combined with the increasing incidence of children with multiple problems have placed tremendous demands on government agencies.

The State of California has tried to respond to the challenge of providing services to children by enacting numerous individual programs to meet the basic needs of children. However, the size of the population served and the needs of the children have changed dramatically during the past 40 years. Due to the large number of programs in existence, the significant resources committed to these programs, and the dramatic change in the population of children in need of services in California, the Little Hoover Commission determined it was an appropriate time to undertake an indepth review of how the State of California delivers and administers its children's services system.

SCOPE AND METHODOLOGY

In June 1986, Chairman Shapell and members of the Commission initiated a study of the provision of children's services in California. At that time, Chairman Shapell appointed Commissioner Jean Kindy Walker as the Chair of the Subcommittee responsible for overseeing the detailed study field work. In addition, Commissioners Abraham Spiegel, Haig Mardikian, Albert Gersten and Assemblyman Phillip Wyman were appointed to the Subcommittee.

The purpose of the study was to examine the overall system for delivering children's services in California by focusing on three major groups of children: children in need of child care services; runaway/homeless youths; and abused and neglected children. Because of the complexity of the issues being reviewed, the Commission recruited 33 people that were identified as leaders in the field of children's services to participate on a "Blue Ribbon

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[4]California Senate Office of Research. Family Income in California. April 1987, p.4.

[5]California Assembly Office of Research. California 2000: A People in Transition. June 1986, p.8.

Advisory Committee" to provide the technical expertise for the study. Appendix A provides a listing of the members of the Committee. In addition, Capitol Associates, a private consulting firm, was selected to provide technical assistance for the study.

The role of the Blue Ribbon Advisory Committee was to assist the Commission in the following:

- Identify resources in the State committed to children's services;
- Review and critique the study methodology;
- Assist in the identification of major problems and issue areas; and
- Help identify potential solutions.

The study was divided into two phases. Phase I involved the collection and review of information regarding the current children's services delivery system in California and the identification of major problems and issues. Phase I resulted in a preliminary report that was released in March 1987.

Phase II of the study included additional detailed review relating to major problems and issue areas and the development of a complete set of recommendations for addressing the problems and issues identified in the study. This final report presents the overall results of Phase I and Phase II of the study.

As part of the study, the Commission held two public hearings--one in Los Angeles on July 30, 1986 and another in San Francisco on September 25, 1986. At these hearings, the Commission received testimony from experts and members of the public regarding system deficiencies. In addition, members of the Commission and the staff conducted site visits at children services providers throughout the State. The public hearings and site visits were supplemented by research conducted by the Commission staff and the consultants.

The Commission would like to express its sincere appreciation to the members of the Blue Ribbon Advisory Committee who worked for more than one year to complete this study. Their insight, candor, dedication, and diligence in discussing the problems and issues relating to children's services in California greatly enhanced the Commission's study.

STUDY CONSTRAINTS

The statistical information contained in the report regarding the survey of state-funded programs was based on information provided by specific State agencies. While the Commission has reviewed the data for reasonableness, the Commission did not verify the complete accuracy of the data.

The Blue Ribbon Advisory Committee assembled by the Commission to provide technical expertise and insight relating to issues and concerns in California's children's delivery system included individuals from a broad cross-section of disciplines, expertise, and backgrounds. While the Commission has given consideration to the ideas and concerns of all members of the Blue Ribbon Advisory Committee, the final report is a product of the

Commission and may or may not be consistent with the viewpoint of individual members of the Committee.

The Commission has included individual experiences in some places in the report to illustrate current conditions in California's children's services system. While each of these examples is based on factual accounts, the Commission has changed the names and disguised the location of the incidents in some cases to protect the anonymity of the individuals.

REPORT FORMAT

The report is presented in three chapters. The second chapter of the report presents the study findings in each of the following areas: the children's services delivery system in general; children in need of child care services; runaway/homeless youth; and abused and neglected children. The third chapter of the report presents the Commission's overall conclusions and recommendations for addressing the problems identified in the report. Finally, there are several appendices attached to the report that provide detailed information in support of the report.

II. STUDY FINDINGS

This chapter presents the Little Hoover Commission's findings in its study of children's services in California. It is divided into four sections, including: children's services system; children in need of child care services; runaway/homeless youth; and abused and neglected children. Each of these sections are discussed separately below.

CHILDREN'S SERVICES SYSTEM

Finding #1 - Lack of A Uniform State Policy And Well-Defined Organizational Structure For Providing Children's Services

The State of California has recognized the value and needs of children by establishing numerous programs and committing significant resources to children's services. A Commission-sponsored survey showed that California's children's services system spends more than $5.9 billion annually, excluding funds for K-12 education. However, due to the absence of an overall State policy for providing children's services, poorly defined roles and responsibilities of public agencies, and a fragmented service delivery system, children's services are not fully meeting the needs of the State's children and are not maximizing the use of scarce resources.

Expenditures for all State programs specifically designed for children exceed $5.9 billion annually before considering K-12 education funding. This includes more than $4 billion for Aid to Families with Dependent Children. The expenditures for these programs are presented in APPENDIX B. To gain insight into the magnitude of the State programs serving children in need of child care, runaway/homeless youth, and abused and neglected children, the Commission developed a survey requesting program information from all relevant State programs. APPENDIX C contains the complete results of the survey. The survey revealed that six state entities and all three segments of public post-secondary education operate and/or fund services for children in one or more of each of these three categories.

Exhibit II.1 summarizes the results of the survey and shows the State expenditures for children in need of care, runaway/homeless youth, and abused and neglected children.

Exhibit II.1

SUMMARY OF PROGRAMS AND EXPENDITURES BY STATE AGENCIES FOR CHILDREN IN NEED OF CHILD CARE, HOMELESS CHILDREN AND ABUSED AND NEGLECTED CHILDREN

Department/ Organization	Target Group	Number of Programs	Fiscal Year 1986/87 Expenditures
Social Services	Abuse/Neglect	6	$765,578,000
	Child Care	4	67,005,000
Education	Child Care	13	366,953,000
Office of Criminal Justice Planning	Abuse/Neglect	3	1,284,000
	Homeless	2	1,120,000
Housing and Community Development	Homeless	1	3,880,000
Child Development Programs Advisory Committee	Child Care	1	216,000
Justice	Abuse/Neglect	1	700,000
University of California System	Child Care	1	3,502,000*
California State University	Child Care	1	3,466,000*
Community Colleges	Child Care	1	4,026,000*
		1	736,000*
TOTALS		35	$1,218,466,000

Source: Little Hoover Commission Survey of State Agencies, January 1987.

*Some expenditures may also be included in the Education Child Care total.

Exhibit II.1 illustrates the breadth of the State's services for these three groups. For example, nine entities administer 35 programs and expend more than $1.2 billion.

In addition, there are many other State-operated and State-supported programs that expend resources to serve children who may also be in need of child care, runaway/homeless youths, or abused and neglected. However, such children are not specifically identified in one of the three target groups in statewide statistics. Thus, although individual service providers may know children in their caseloads who fit these definitions, these children are not included in formal statistics maintained by State-operated or State-supported programs. Additionally, some programs provide funding for children but do not collect data by age group to specify the resources it allocates for children and adolescents.

The private sector plays a significant role in delivering services to all three groups. Many of the State-supported programs rely on contracts with private entities to provide services. Some of these contracts are administered at the state level, while others are administered locally. In addition, many private agencies such as those funded through the United Way provide support for children's services in California. For example, during 1986, the United Way provided direct funding totaling at least $2.46 million for child care services, $2.10 million for services to abused and neglected children, and $1.1 million for services to runway/homeless youth. United Way's contribution to individual communities, provides millions of additional dollars for children's services.

Lack of State Policy for Children

State programs and activities affecting children span nearly the full range of the State's involvement in human services. These services include education, public health, and criminal and juvenile justice. Additionally, children are included in the populations served by programs which reduce poverty, mental and physical disabilities, and crime. However, children also have a set of needs and vulnerabilities which are peculiar to their age and dependent status. For example, if a parent or legal guardian is absent or incapacitated the child becomes a "dependent" of the State because they are not only below the age of majority but are unable to care for themselves. Thus, the State has assumed a diverse set of responsibilities for children. However, to a great extent the distribution of State responsibilities for children among administrative entities has been determined by the way in which the overall organization of human services in the State has evolved.

California State government has a variety of programs for children which are not always well-defined and well-integrated. California's human service administration is characterized by a fairly high level of specialization by department, and is reflected in the distribution of State responsibilities for children. They are dispersed among various agencies in government resulting in overlapping or contradictory mandates.

For example, there are significant differences among the child care programs licensed by the Department of Social Services and funded by the Department of Education, although they are supposed to be providing the same service.

Caregiver to child ratios, staffing qualifications and per child cost are prime areas of these differences.

For abused and neglected children, interventions may be determined by the intake procedure, not the type of abuse. Some children who could be placed in a less expensive foster care situation are retained in higher cost care facilities because lower cost situations are not available. In some cases, these situations may not be appropriate to their needs and result in the inability to serve other children needing special treatment or services.

For runaway/homeless youth there is no legal mandate or on-going program at the State level. Mandated programs available for the homeless population are limited to adults or families. Thus, until recently with the initiation of two State funded pilot projects, the State had not provided any services to this segment of the homeless population.

The absence of an overall policy for children ensures that programs for children are not well coordinated or integrated. With 42 different State plans that deal with children and youth, approximately 160 programs that provide services to this population, and at least 10 legislative and non-legislative committees charged with authorizing funding, or reviewing policies related to children, a unified State policy for children does not exist to prevent overlapping and contradictory policy decisions.[6]

Poorly Defined Roles and Responsibilities

Many of the problems in the children's delivery system reflect ambiguities in State law concerning the roles of public agencies and their responsibilities for providing publicly-funded services for children. With a wide variety of programs each operating with their own mandates, priorities, and constraints, it is often difficult to tell where the responsibilities of one agency end and another's begin. A major concern is what the roles of different levels of government should be in the provision of children's services.

For child protective services, these roles have fluctuated over time. For example, from 1976 to 1980, the federal government assumed a large part of the legal and financial responsibilities for child protective services. During this time, counties were required to provide the necessary 25 percent match to obtain federal Title XX funds and in return counties had a great deal of flexibility regarding the provision of services. Financial constraints at the local level, caused in part by Proposition 13, have resulted in a shift in responsibility from the county to the State. Currently, the State pays for 95 percent of all non-federal foster care costs and the county pays 5 percent. This increased State participation has raised questions regarding the degree of county flexibility that is appropriate and the degree of authority and responsibility that should rest with the State.

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[6]Unpublished data provided by the California Assembly Committee on Human Services, Assemblyman Tom Bates, Chairman.

Imprecise definitions of government responsibilities and unclear limits on services invite unrealistic expectations for public programs. In this situation, local entities and private service providers are able to assert that the State does not adequately fund its mandates. This is illustrated in the implementation of Senate Bill 14 (Chapter 978, Statutes of 1982). This bill increased the authority of the State over local services by requiring more prescriptive regulations and procedures. Specifically, SB 14 delineated specific programs to be implemented by County Welfare Departments, including the Emergency Response Program, the Family Maintenance Program, the Family Reunification Program, and the Permanent Placement Program. Although the goals of each program are clear, the bill does not clearly specify how or which services are used to accomplish the goals. For example, the Family Maintenance Program Services and the Family Reunification Program Services are addressed in the Welfare and Institutions Code and state that services to implement the program "shall include, but not be limited to, counseling, emergency shelter care, teaching and demonstrating homemakers, and transportation." While each of these terms are more fully defined in regulation by the State Department of Social Services (DSS), neither the bill nor regulations specify the services or combinations of services that must be offered. Additionally, neither specify procedures for evaluating the needed services for particular types of cases, nor do they require that counties submit implementation plans for programs. Thus, the manner in which family reunification is addressed can vary substantially from county to county because there is no way to equate the statutory requirement for service, the need in a given county, and the dollars appropriated to satisfy the requirement.

The lack of clarity of public agency roles, responsibilities, and functions severely hampers the ability of the public sector to provide service and the ability of the private sector to supplement public mandates. Unclear roles and responsibilities result in children or youth not obtaining the appropriate services.

Fragmented Children's Services Delivery System

Local entities, mainly the counties, are expected to operate children's services programs in a manner that is responsive to the multiple needs of individuals. However, the fragmented delivery system and the lack of coordination has led to problems in service delivery.

Difficulties in finding and obtaining the appropriate range of services needed by a child or family, accounts of children "falling through the cracks" of the service system, and the inability to hold any individual or agency accountable for the results of services are the chronic symptoms of a fragmented service system. For example, in some counties runaway/homeless youth that have been abused and neglected are not provided services through the protective service system unless they can prove that they are residents of the county.

The Department of Children's Services in Los Angeles reports that obtaining adequate mental health treatment for dependent children is very difficult because the Department of Mental Health has a unique set of priorities and programs. For example, staff of a residential home for children indicated that mental health needs for children are diagnosed by mental health staff

based on the number of beds that are available. If a counselor at a group home believes a child is suicidal and takes him/her to a mental health facility, he/she may only be diagnosed as suicidal if a bed is available. If not, the child may be sent back to the residential home after being diagnosed as depressed.

Moreover, the full range of services needed by many abused and neglected children such as food, shelter, clothing, and mental and physical health treatment are not necessarily provided to children that are in the children's services system. This is illustrated by the problems one family experienced. Upon learning that his sons had been sexually abused by his former wife, Mr. Evans (alias) obtained custody. After depleting his financial resources on psychiatric care for the boys, Mr. Evans went to a county mental health agency for assistance. He was told that the county could provide intensive help for the children if he relinquished custody. Unfortunately, after he relinquished custody to the county, the children were placed in a foster home where they did not receive appropriate treatment. Furthermore, while in the foster home, the children did not receive the support services they desperately needed. The natural mother later obtained temporary custody of the boys and moved to another state where she is now being investigated for child abuse.

This example illustrates the effect that a fragmented system can have on children. In some cases, it may be necessary for children to become dependents just to be able to obtain treatment. In other instances, children may be placed inappropriately and not receive the services they need. In either case, limited resources are being used inappropriately and resulting in ineffective services for children and youth.

Within the past two years, numerous county grand jury reports have looked at problems in the delivery of services to victims of child abuse and neglect. For example, the San Bernardino County Grand Jury Review of County Services for Children stated, "There is no one county board, committee or department that is responsible for coordinating and planning all children's services on a county-wide basis. The establishment of a single agency, such as an interagency children's policy and planning council, would assist in improving the long term efficiency and effectiveness of the county's services provided to children."[7] In addition, a management audit of Children's Protective and Placement Services (CPPS) for the San Bernardino Grand Jury stated, "CPPS administration lacks an adequate formal and informal information system to provide oversight and ensure implementation of policy procedures in various regions."[8] A State Attorney General report on the Kern County Child Abuse Investigation, dated September 1984, stated, "There was no coordinated plan

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[7] Report to the 1984-85 San Bernardino County Grand Jury. Review of County Services for Children, April 1985, p.9.

[8] Haskins and Sells Management Audit of Children's Protective and Placement Services for the San Bernardino Grand Jury, January 1986, p.2.

for the three agencies involved. Opposing philosophies on the reliability of children's statements also affected the investigation."[9]

The problem of providing continuing services to abused and neglected children is particularly difficult at the local level because many local agencies lack the authority to assure the provision of services across agency boundaries. This arrangement precludes adequate case management and operational control of individual cases and programs. As a result, many abused and neglected children many not receive effective services because there is no mechanism for insuring interagency cooperation and continuing responsibility.

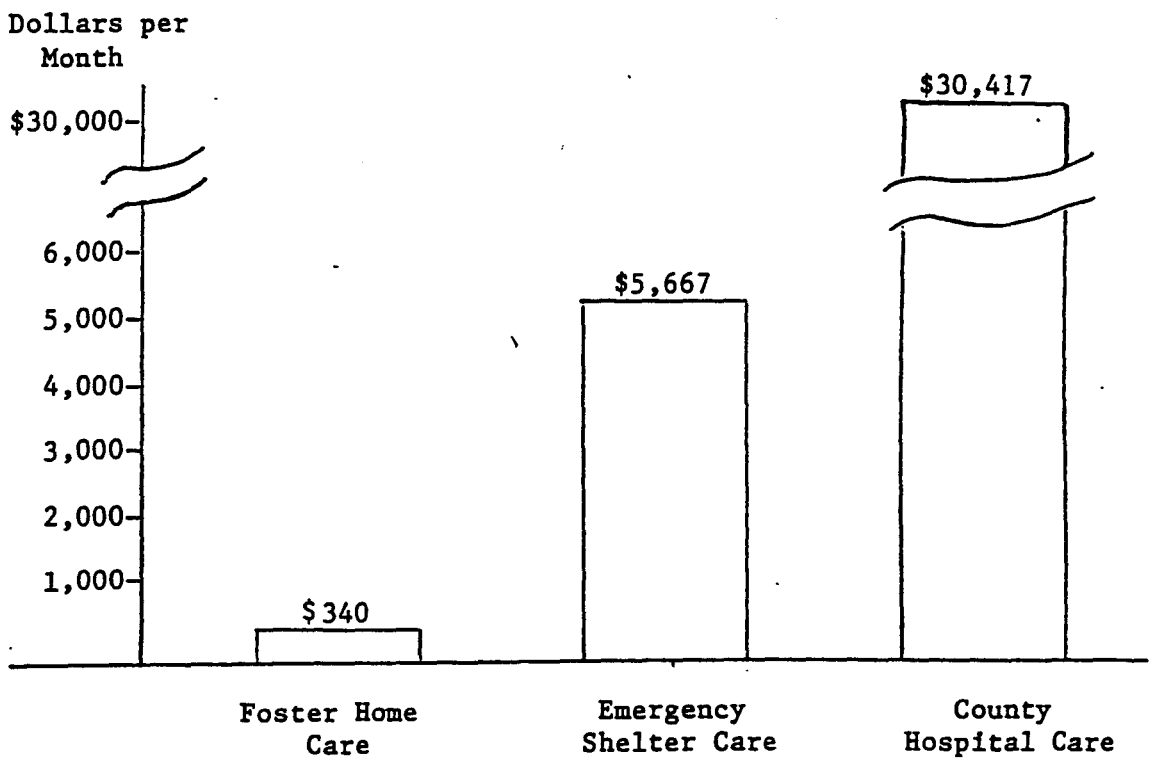
Failure to Use Funding in a Cost Effective Manner

The funding available for the children's services delivery system in California is frequently distributed in an unequitable manner that is not cost effective. A good example of this problem is the different ways used by various locales in the State to serve abused and neglected children and the significant variation in costs of services provided.

Exhibit II.2 shows that funding is not distributed in an equitable manner to ensure that each child is receiving the appropriate services or treatment.

EXHIBIT II.2

ANALYSIS OF VARYING COSTS OF TREATMENT
RESULTING FROM THE PLACEMENT OF ONE CHILD
IN ANY OF THREE TREATMENT ALTERNATIVES



[9]Office of the Attorney General Report on the Kern County Child Abuse Investigation, September 1986, p.iii.

As Exhibit II.2 illustrates, if a child is physically abused in California, depending on the availability of foster care and the services in the county that the child lives in, any one of the following placement decisions could be made by the social worker for the same child:

- The child could be sent to a county hospital where, due to a shortage of foster care openings, the child could remain at a cost of up to $1,000 per day, or an annual cost of $365,000 per year; or

- The child could be placed in a county operated "short-term" placement home where, due to a shortage of foster care openings, the child could remain indefinitely at a cost of $186 per day or an annual cost of $68,000 per year; or

- The child could be placed in a foster care home at a cost of $340 per month or an annual cost of $4,080 per year.

Thus, due to the inadequacies of the existing service delivery system and the lack of cost effective treatment alternatives, the number of dollars spent on children's services may not correlate with the severity of the child's problems or the quality of treatment the child needs. As a result, funds available for children's services may not be utilized efficiently.

Alternative Children's Services Delivery Systems

Some counties in the State have been trying to establish models to address some of these problems at the county level. In Ventura County, their model for mental health treatment represents a successful effort to coordinate mental health services for mentally disabled children. Initial screening is provided by Mental Health Services Coordination and is facilitated through an interagency network, and the use of formal interagency agreements. Private sector support is maximized by the use of in-kind donations from a wide variety of sources. Although this model has been an innovative step towards coordination of services for children, it is only applied to one service, mental health. Integrating public health, out-of-home placement or shelter care, probation, education, and youth authority into the structure would be necessary, if, in fact, the "whole child" is to be adequately served.

A second model of coordination is in Mendocino County. In this situation the County Office of Education has developed a coordinated county-wide individualized service system for "high-risk" youth. In this model, "high risk" youth are defined as those minors certified by the county probation department as being beyond parental control, having poor attendance records or adjudicated. Each youth participating in the Mendocino County Community Court School system has been referred by the probation department to the courts. The special services each student receives are determined by Area Casework Teams (ACTs) located in each school district. Each team is composed of a representative from the county probation department, local school district staff, youth service bureau, and the Mendocino County Office of Education. Although such models seem to have been relatively effective in small counties, it should be noted that their effectiveness has not been demonstrated in the large urban counties. Additionally, some states have developed a structural model to coordinate services for children.

In the State of Oregon, a structural model was recently implemented. Similar to California, Oregon's runaway/homeless youth between the ages of 12 and 18 are seriously in need of shelter, counseling and public health treatment. In Oregon, a state commission was established for at-risk children to correct the deficiency through prevention and other programs that are coordinated and facilitated at the local level with oversight by the state commission.

The benefit of this structure is that a single, local agency is responsible for establishing priorities for funding and programs and one single state commission is responsible for ensuring that the needs of at-risk children and youth are adequately addressed. Additionally, the benefit of this structure can be measured by the fact that Oregon was able to channel funding that was originally intended for a new youth correctional facility into prevention and early intervention services.

In recent years, several states have established commissions on children and youth in an effort to create organizationally a greater degree of coordination and integration of services across state agencies and departments responsible for children. At present, 32 states have in place a board, commission, council, institute, or office on children. These structures vary considerably in organizational history, membership, formal structure, formal authority, statutory power, and mandate. Exhibit II.3 displays the structure in five such states.

EXHIBIT II.3

SUMMARY OF SELECTED CHILDREN'S SERVICE AGENCIES IN OTHER STATES

State	Structure	Authority
New York - The State Council on Children and Family	Executive Agency - Comprised of one representative of each of 13 state agencies serving children, plus professional staff	Responsible for policy research; data collection and research; legislative development; program coordination and advocacy.
Massachusetts - The Office for Children	Executive Agency - Comprised of Director and professional staff, plus Advisory Council. Director and some Council members appointed by Governor; remainder of Council members appointed by regional councils. Reports to Secretary of Human Services Agency.	Responsible for licensing of both educational and non-educational child care; foster care licensing; policy research and advocacy; and oversight agency for children between agency jurisdictions.
Florida - Office of Children, Youth and Family	Executive Agency - Comprised of Director and professional staff, plus Advisory Council. Director and Council members appointed by and report to Secretary of Health and Rehabilitation Services Agency.	Responsible for standards development; quality control; legislative development; and monitoring of service agencies.
Michigan - Office of Children & Youth Services	Executive Agency - Comprised of Director and professional staff. Director appointed by Governor; reports to Director of Department of Social Services.	Responsible for policy development and setting; legislation; data collection and research; program coordination; funding control; and direct administration of the state's juvenile detention facilities.
Illinois - Citizen's Council on Children	Legislative/Executive Agency - Comprised of 16 members (8 Legislators and 8 public members appointed by the Legislature) plus professional staff.	Responsible for policy research and development; legislation; public children's issues hearings; and program coordination.

As Exhibit II.3 illustrates, although the structure may differ from state to state, in each case the responsibility of the Commission is to provide coordination at the State level. Most state commissions were created after 1980, with the exception of the New York State Council on Children and Families, the Oklahoma Governor's Commission on Children and Youth, the Maryland Office of Children and Youth and the Michigan Office of Children and Youth Services, which were all established in the late 1970's.

Most state commissions have a small staff and a modest budget and were created by the Legislature. Generally the Commissions have quasi-executive branch, cabinet or subcabinet status with the exception of the Connecticut Commission on Children, which is located in the state legislature.

In large states with county administrated systems, similar to California, such as New York, Texas or Florida, commission directors emphasize service integration from both the top down and bottom up. The policy loop is completed by improving planning and management at the state level under the direction of the state commission on children. Local county or regional councils for children build bottom up integration by linking services, programs and providers in response to children's needs.

The recent growth in state commissions on children reflects a strong interest by legislators and governors to express a substantive concern for children and youth.

CHILDREN IN NEED OF CHILD CARE SERVICES

Finding #2 - Child Care Has Become a Necessity For Working Families

The structure of California families has changed considerably in recent years. Today, the typical California family is comprised of more single parents or dual wage earners than ever before. Due to the change in the makeup of the families in the State, child care has become a necessity for working families. As a result, the demand for child care services has been on the rise. If the State does not respond to the growing need for child care, more parents may have to make the difficult choice between either leaving their children at home unattended, or foregoing work and thus undermining the family economic security.

Families in California as well as nationwide, have experienced a dramatic transformation in the past four decades. What was once thought of as the typical family -- one in which the husband was employed full time while the wife worked at home caring for the children and tending domestic matters -- now accounts for less than one-fifth of all American families.[10] In a struggle to obtain the once taken-for-granted dream of owning a home, or in many cases merely to put three square meals on the table, women are increasingly entering the work force. By 1985, 51 percent of California women with children under six and almost 60 percent of those with children ages six to 14 worked outside the home.[11] Moreover, a report recently released by the California Senate Office of Research indicates that middle income families have maintained their economic position over the past ten years only by becoming two-income families.[12]

A steady increase in the number of households headed by women has also contributed to the influx of women into the work force in California. In 1977 there were 565,000 female-headed households with at least one child under 18 years of age; by 1986, this number had increased to 648,000. The rate of increase of female-headed households with children has been sharpest in households with a child under the age of six, increasing from 168,000 in 1977 to 275,000 in 1985. Many of these women struggle for self sufficiency even though the wages they earn are often quite low. The average hourly wage for a single woman with children who works full time is $6.40 per hour. Those working less than 20 hours per week average only $5.00 per hour.[13]

Households with children that are headed by a single wage-earning parent and those in which both parents are employed constitute the increasing number of

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[10] Wallis, Claudia. The Child Care Dilemma, Time Magazine, June 22, 1987.

[11] Unpublished Data. Current Population Survey, March 1985. Provided by the Assembly Office of Research.

[12] Senate Office of Research. Family Income in California, April 1987.

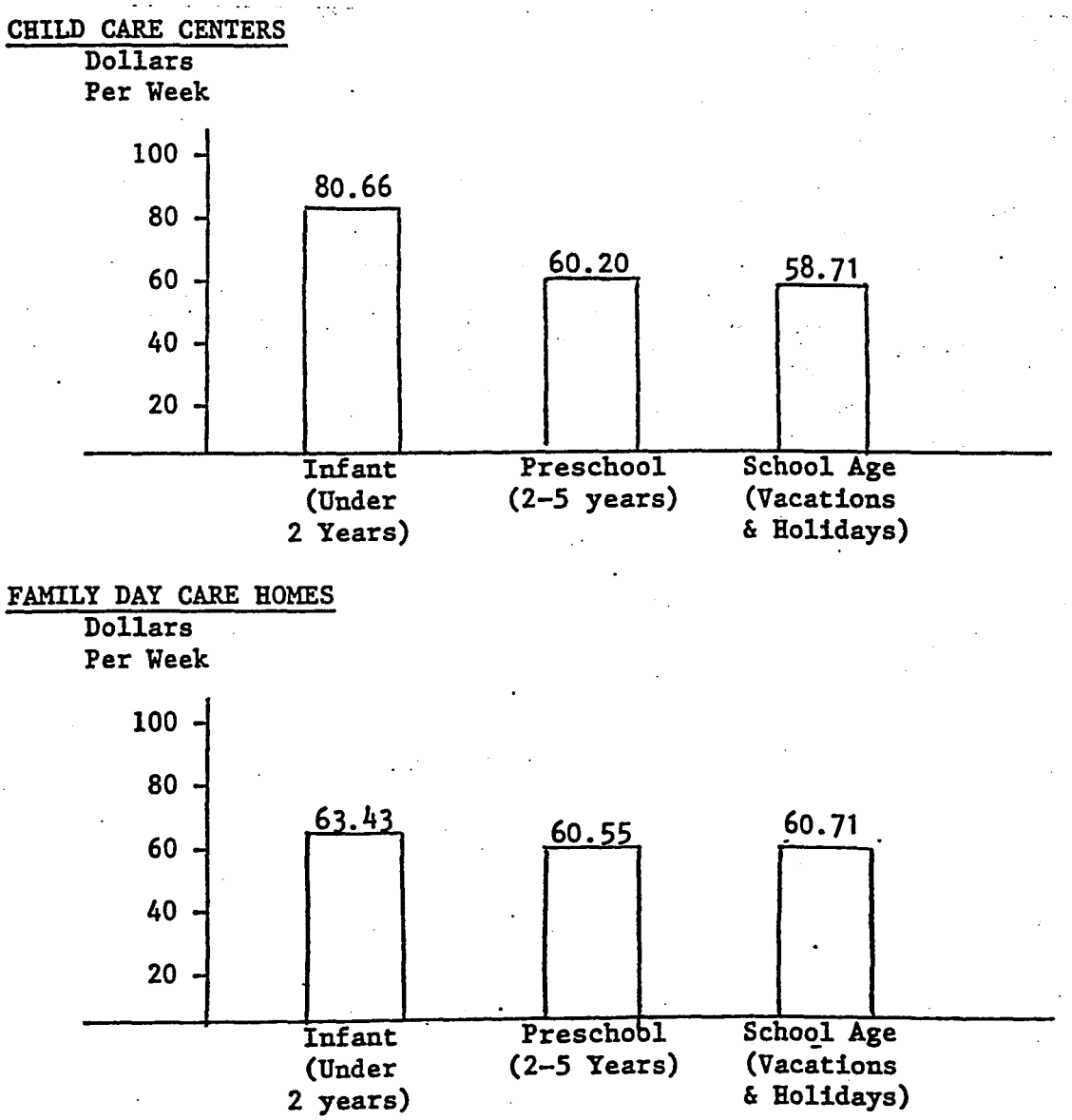
[13] Ibid, p.9.

"working families" in California. These families strive to fulfill their parental obligations by securing suitable child care for their children. While parents typically begin their search for child care with high expectations for an environment that is not only secure, enriching, affordable, and reflects some of their own values, they find that merely securing child care is often a difficult feat.

The cost of providing child care is also a problem for many families. Exhibit II.4 presents an analysis of the cost of child care in California in child care centers and family day care homes.

EXHIBIT II.4

AVERAGE STATEWIDE COSTS FOR FULL TIME CHILD CARE
BY CHILD AGE AND TYPE OF PROVIDER



Source: Compiled with data from California Child Care Resource and Referral Network, Preliminary Child Care Cost Results and Inventory of Child Care Facilities. February 1987.

Exhibit II.4 illustrates that the cost of child care can be quite high in California. It shows that the average cost of full-time infant care in child care centers is $80.66 per week, which amounts to almost $347 per month. These costs become more difficult for a family to pay if the family has two or more children. For example, using the figures from Exhibit II.4, a family with two children, ages 1 and 4, would pay an average of $140.86 per week or almost $606 per month for full-time center-based child care.

Many California families rely heavily on informal in-home child care arrangements by a parent, an immediate relative, or a friend. However, these arrangements have become less available as the labor force participation of females continues to increase. Some predict that within 10 years the number of children under six needing child care will increase by 50 percent.[14] According to Jay Belsky, professor of human development at Pennsylvania State University: "We are as much a society dependent on female labor, and thus in need of a child care system, as we are a society dependent on the automobile, and thus in need of roads." Indeed, given today's economy and changing family patterns, many women do not have the ability to choose not to work outside the home. Meanwhile, there is currently a serious shortage of licensed, quality child care in the State, even for families who are able to pay reasonable fees.

Some families have found that the hardships associated with remaining self sufficient don't pay off. One Los Angeles single mother of four provides an example of the dilemma. "Beverly Samuels" worked as a custodian for a local high school for five years. She earned about $1000 per month but was paying out $400 per month for child care. "We didn't buy anything," Beverly recalls. In an effort to cut down on expenses, she began bringing her children to work with her. While she scrubbed floors and emptied barrels of trash for eight hours each evening, she hid the children in an empty home economics classroom. "I'd sneak them in after the teacher left and check on them every 30 minutes or so," she explained. Beverly applied for State-subsidized child care assistance only to find that her name would be added to a waiting list with 3000 others. She finally resorted to welfare.[15]

Child care problems inhibit many families from being self sufficient. A 1982 United States Bureau of the Census Study found that 45 percent of the single welfare mothers surveyed indicated that an unmet need for child care kept them from working. Additionally, 20 percent of mothers of children under four, who were employed part-time, said that they would work more hours if suitable child care was available at reasonable cost.

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[14] Wallis, Claudia. The Child Care Dilemma. Time Magazine June 22, 1987.

[15] Ibid.

In fact, a 1980 study issued by Fries and Miller Associates found that child care programs can be cost-effective for the entire community. In their two-and-one-half-year study of Livermore families, they found that welfare costs were reduced by almost half when child care was available to enable parents to work. In addition, the study concluded that the overall increase in family incomes benefited community business by increased sales and sales tax revenues to State and federal governments.[16]

The economic and social changes in recent years have prompted a transformation of many California households into working families. Where child care was once a luxury for parents who wanted free time, it has become a necessity for working families. The challenge that California is presently confronted with is providing adequate, affordable, and available child care for the children in the State.

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[16] Fries, Ruth and Miriam Miller, An Economic Analysis of Valley Child Care. Fries and Miller Associates, 1980.

Finding #3 - There is a Shortage of Licensed Child Care Spaces in California

The lack of available subsidized and nonsubsidized child care spaces has reached crisis proportions in California. High capital costs for child care facilities and the limited profit potential of this industry have hampered private sector involvement. Even middle income families who can afford to pay for child care are sometimes unable to find it. The lack of availability of this necessary service has become a major obstacle for numerous working California families. As a result, many parents in California are forced to either leave their children unattended, use substandard care, or drop out of the work force.

Shortage of Child Care

While employment in dual-wage earning families and single parent families is an economic necessity, these families often have trouble finding suitable, affordable, quality child care for their children. The supply of child care is often overestimated because many family day care providers, in particular, licensed to provide child care are not actively doing so. For example, a study recently completed by the California Child Care Resource and Referral Network revealed that 41.8 percent of family day care homes were not open for business. The 7,617 active center providers have spaces for 350,000 children and the 18,326 active family day care homes provide spaces for 131,351 children. The survey also noted that the number of families on waiting lists for child care exceeds 136,000.[17] Since most families have more than one child, the number of children waiting for openings probably is even higher.

The shortage of child care is particularly acute for infants and school age children. In many parts of the state, parents are confronted with long waiting lists for child care programs. This is particularly true for infant care where some prospective parents place children on waiting lists shortly after conception. Infant care is more costly to provide mainly because the caregiver-to-child ratio required by State law is significantly lower than requirements for pre-school or school-age children. For example, Title 22 requires that private day care providers have one caregiver for every four infants, while Title 22 requires that pre-school age children have one caregiver for every 12 preschool child. Interestingly, space requirements for all ages are the same. It would be possible to provide more spaces for infant care without jeopardizing their supervision by reducing the outdoor play area square footage requirements for this age group since infants need significantly less outdoor space than toddlers because of their limited mobility.

California created legislation in 1985 to provide additional child care for school-age children.[18] However, despite this legislation for "latchkey"

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[17] California Child Care Resource and Referral Network. Preliminary Child Care Cost Results and Inventory of Child Care Facilities. February 1987.

[18] Chapter 1026, Statutes of 1985.

children, the demand for school-age care continues to far exceed the supply. For example, United Way reports that in Los Angeles County there are about 239,000 children aged 5 through 12, who have working mothers and need supervised care before and after school, yet there are only 46,621 licensed and unlicensed school age child care spaces.[19] Crystal Stairs Inc. in Inglewood reports 216,750 school age children needing care in Los Angeles County and 23,333 spaces available in licensed care.[20] A survey of employees in downtown Los Angeles revealed that 24 percent of children aged 7 to 9, and 79 percent of children aged 10 to 13, were left alone without any supervision for several hours each day.[21] Other families have utilized other arrangements for their children. For example, a 1984 survey of 92 Los Angeles County libraries revealed that 900 school-age children were using libraries as extended-care facilities.[22]

An increase in the number of low income children needing child care coupled with limited funding resources has resulted in a severe shortage of subsidized child care space. The State Department of Education estimates that between 90,000 and 110,000 children are currently receiving State subsidized child care.[23] The Governor's budget for fiscal year 1987-88 appropriates $323 million to provide subsidized child care and encourage nonsubsidized child care.[24] In February 1986, there were approximately 130,000 eligible families on waiting lists for subsidized child care.[25] Based upon current eligibility standards and assumptions concerning need, the unmet demand for State-subsidized child care for children under 14 years of age is approximately one million children.[26]

The fact that the private sector has not stepped in to meet the need for child care reflects the high costs of providing child care. High capital outlay costs along with necessary quality of care requirements that affect the well-being of children in child care contribute to the slow growth of the

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[19] United Way. School's Out in L.A. County, May, 1986, p.4.

[20] Hill-Scott, Karen. Triple Digit Deficit, Crystal Atairs. November 1987 in press.

[21] Ibid.

[22] Brownsey, Donne. Meeting the Demand for Child Care: How Cities Can Develop and Expand Programs with State Funds, Western City, July 1986.

[23] Department of Education. Triennial Report to the Legislature, September 1987.

[24] Department of Finance. Governor's Budget Summary, 1987-88, January 1987, p.27.

[25] Unpublished Data furnished by the State Department of Education.

[26] Assembly Office of Research. California 2000: A People in Transition. June 1986, p.13.

child care industry. For example, current State law sets regulations for indoor and outdoor square footage requirements, minimum child to caregiver ratios, minimum "teacher" qualification requirements, and a host of fire, safety and health requirements. These regulations, which protect the health and safety of children, combined with soaring insurance costs and constraints on how much an average working parent is able to pay, limit the profitability of child care as a business.

The expansion of the number of child care spaces is also hampered by difficulties in recruiting and retaining child care workers. Center-based child care workers rank among the lowest 10 percent of all wage earners in the United States.[27] A review recently completed by Orange County revealed that animal caretakers are paid more than child care workers. In 1984, for instance, Orange County nursery school attendants were offered $3.35 per hour, while animal caretakers were offered $4.00 per hour.[28] This low wage results in a high turnover with 6 out of 10 child care workers leaving within the first year.[29]

Insurance problems are having an impact on the availability of child care. Child care providers are experiencing an insurance crisis that may inhibit the growth of child care providers. Soaring insurance costs have forced providers to put added dollars into insurance that could have gone toward expanding child care spaces or providing better care for children. Since 1984, child care providers have experienced rate hikes of 300 percent or more.[30] In addition, the insurance policies often restrict the flexibility of the children's programs. One urban Sacramento child care center cannot take children in their care on field trips, including a walk around the block, because of insurance limitations.

The availability of quality child care is hampered by many factors. As families struggle to fulfill their parental obligations, they are encountering new obstacles to doing a good job of parenting. For many California families, the lack of availability of quality child care has become a major obstacle.

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[27] Working Parent Magazine.

[28] Ibid.

[29] Ibid.

[30] Unpublished data supplied by: Insurance for Child Care project, La Jolla, California, 1987.

Finding #4 - Some Work Policies Have a Negative Impact on the Ability of Parents to Provide Care For Their Children

Many California employers do not have flexible policies or programs supportive of working parents. While child development experts differ on their views regarding out-of-home care for children, parents are limited in their choices in how they can provide care for their children. As a result, many parents who would like to provide full or partial care for their children themselves cannot do so. They are forced to find substitute care because they cannot afford the loss of wages or employment repercussions, such as the loss of tenure, demotion, loss of promotion opportunities, or even the loss of their job.

Most child development experts agree that good quality child care for children over two years of age can be enriching and beneficial. There is considerably less consensus on the effects of child care on infants, particularly those under one year of age. Dr. Burton White, a psychologist at the Center for Parent Education in Newton, Massachusetts, and an outspoken opponent of child care for infants, states that children should be cared for by either parent or grandparents for the first six months of life. Following this, he recommends only part-time, high-quality care. Dr. White admits that he has no hard evidence to support his assertions except insights gained in his professional practice.[31]

Many parents who would like to take leave from work to care for their infants themselves are unable to do so because they cannot afford the loss of wages or would risk losing their employment or position. In fact, the number of women returning to work soon after childbirth is steadily growing. While this trend is growing among all occupation groups, a recent study by the Population Reference Bureau found that a greater investment of time and dollars in education was highly correlated with how rapidly a woman returns to work after childbirth. These women sought to minimize losses in earnings, as well as depreciation of job skills.[32]

Last January the Supreme Court ruled that states may require businesses to provide job-secured maternity leaves. Nationally, only 40 percent of working women currently receive such leaves. Parents who work for the State of California are currently entitled to unpaid, job protected, maternity leave benefits that can be used for up to one year following the birth of an infant. Other employers in the State are not required to offer such a leave.

The Family and Medical Leave Act of 1987, (H.R. 925/S249) addresses the issue of parental leave at the national level. The bill is being touted as an imperative pro-family measure. Sheila Kammerman, Professor of Social Policy and Planning at Columbia University, points out that the United States is the

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[31] Ricks, Thomas E., "Day Care for Infants is Challenged by Research on Psychological Risks," Wall Street Journal. March 3, 1987, p.35.

[32] Working Parent Magazine.

only western industrialized nation that does not guarantee a working mother the right to a leave of absence following the birth of an infant.[33]

As debates over the issue of infant care and the employers' responsibility for providing parental leave continue, parents are caught in the middle. While some new parents feel secure in returning to work soon after childbirth, and also obtain secure child care, many lament the fact that they are trapped into making the choice between being a full time parent or member of the labor force.

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[33]Kammerman, Sheila and Cheryl Hayes. Families that Work: Children in a Changing World. National Academy Press. Washington, D.C., 1982.

Finding #5 - The Public And The Private Sector Can Take Further Actions to Facilitate The Expansion of Child Care in California

California has an extensive and diverse child care system, but there is a persistent and growing unmet need for services. To address this growing child care availability crisis, both the public and private sectors can take additional steps to encourage the expansion of quality child care. In addition to contributing to the well-being of children and their families, the provision of expanded child care can result in improved morale and productivity, reduced employee turnover and lower absenteeism.

Employer Sponsored Child Care

Employer sponsored child care programs can produce positive outcomes for business. Business Week, The Wall Street Journal, and a host of other business periodicals have published numerous articles heralding the benefits of employer-provided child care programs. They have repeatedly reported that employees who are offered child care as a benefit show improved productivity, lowered absenteeism, and improved worker morale. It is also useful in recruiting and retaining desirable employees.

In his book, "Child Care and Corporate Productivity," John P. Fernandez studies the impact of child care and related problems on work productivity. Fernandez found that instances of missed days at work, tardiness, leaving work early to deal with family issues were positively correlated with employees' difficulties with child care and juggling dual family/work roles. His study concluded that corporations are losing a great deal of money because of employees' child care problems.[34]

Despite these facts, both public and private employers have been slow to offer child care services as a benefit to their employees. By 1986, only an estimated 2,000 employers nationwide offered any kind of child care assistance.[35] This assistance takes a variety of forms. Some offer on-site care or subsidies or vouchers to be used for off-site care; others arrange discounts for employees at selected child care programs. Additional options include: flexible benefits, information or referral programs, salary reduction, care for mildly-ill children, or policies that offer alternative work patterns that allow parents to share child care responsibilities or to be home when their school-age children need care. Some of these employers offer benefits "cafeteria style"--allowing employees to select the benefits that best suit their needs. For example, parents of young children may prefer to temporarily forego retirement benefits for child care benefits.

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[34] Fernandez, John. Child Care and Corporate Productivity, Lexington Books 1986.

[35] Diamond, S.J. With Tax Code Aid, Firms Ease Child Care Cost. Los Angeles Times. March 18, 1987, p.IV.1.

Some California employers are taking notable steps to provide child care benefits to their employees. American Savings and Loan Association in Stockton offers comprehensive child care benefits for their employees with children. In 1983 they purchased and renovated a church located near their work centers. The project cost American Savings and Loan $550,000. The child care center now serves 126 families from its work force of 2,200. The center provides child care five days per week from 7:00 a.m. to 7:00 p.m. and includes a preschool program for two-to-four-year old children, an accredited kindergarten and care for school-age children before and after school, with transportation to nine different school locations. The center also provides extended school-age child care during school holidays and summer vacation. The cost for these services, which includes two snacks and lunch each day, range from $235.00 per month for two-year-old children to $135.00 per month for school-age children. The center also allows employees to spend their lunch break with their children. American Savings and Loan found that child care helped employee retention by reducing the turnover rate for employees with children in the child care center to less than one percent.[36]

Other companies now offer similar benefits for their employees. For example, Syntex Pharmaceutical Company in Palo Alto helped build an employee child care facility in 1984. The Company is committed to paying some of the operating expenses for the center until it becomes self-supporting. In addition, Syntex employees can have child care payments deducted from their paychecks.[37] Hewlett-Packard, also in Palo Alto, assists employees by offering flexible work schedules and referral services. It also recently established a program to assist its employees with care for sick children.[38]

KPFA radio in Berkeley and Measurex in Cupertino provide financial assistance to offset the child care expenses of employees. O'Conner Hospital in San Jose has offered on-site child care to staff since 1982. The center provides moderately priced care seven days per week, from 6:00 a.m. to midnight and provides care for children from 6 weeks to 6 years of age. Bishop Ranch Office Park in San Ramon includes an on-site child care office that assists employees of businesses in the park in finding suitable child care. Many cities and counties also permit employees to use accumulated sick leave for care of sick children.[39] This sampling of existing programs demonstrates the wide ranging avenues that employers can use in response to the child care needs of their employees.

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[36] Testimony from Renee Becker, American Savings and Loan Association to Senate Select Committee on Women in the Workforce. Hearing Transcript Interim Hearing on Employer Sponsored Child Care, September 10, 1986.

[37] Stein, Ruthe, "Bay Area Companies that Provide Child-Care Benefits." Special Report, San Francisco Chronicle. June 16-20. 1986.

[38] Ibid.

[39] Ibid.

Private Non-Profit Child Care

Child care is provided through the aegis of many different organizations including proprietary, private non-profit, church related, and publicly sponsored child care programs. Private non-profit child care centers and churches have provided valuable contributions to child care programs. According to the United Council of Churches, more than 3 million American children are cared for in church-based child care programs.[40] In California, some churches administer their own denominational child care programs, while many lease facilities to child care providers. Some churches offer the use of their facilities at a reduced fee and others use facility leases as an important part of their income-generating programs.

The State of California, as an employer, offers on-site child care facilities in all new state buildings for operation by private non-profit corporations. The first on-site day care center established for State employees was located within the Department of Motor Vehicles. This successful center gives priority to State employees and provides child care for children ages 2 through 5, including an on-site kindergarten class. This was followed in 1983, by the DOT TOT Center, which provides priority for the children of Department of Transportation employees. The center is housed in a building that was used for office space during the capitol restoration project and donated by the Legislature for child care purposes. The DOT TOT Center serves 60 children ranging in age from six weeks to 5 years.

Public/Private Partnerships

Public/private partnerships have successfully contributed to the expansion of child care. Probably the largest of such joint ventures is the California Child Care Initiative. The program is funded by over 20 private businesses and foundations as well as contributions from federal, state and local governments. The Initiative funds child care supply building projects conducted by the California Child Care Resource and Referral Network. The project seeks to increase the number of quality family day care providers. Training for the providers is an integral part of the project. The program has shown remarkable success as six pilot projects generated 1,100 new child care spaces in 231 new family day care homes, as well as five new school-age programs in over 20 cities from Sacramento to Los Angeles. The project has recruited new family home day care providers from diverse populations that would not have provided care without recruitment.

The State of Connecticut has developed a consortium for child care that includes the cooperation of government, business, and non-profit agencies. The consortium funds a project that provides child care referrals and counseling for parents, recruitment of new child care providers, lobbying and helping private employers develop child care benefit programs. The consortium chairman stated: "I think that companies that participate in the consortium have a selling tool in their recruiting. We're competing for good people in the marketplace." He continued by stating that another impetus for

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[40] National Committee on Working Women. "Child Care Fact Sheet, Working Mothers and Children." Washington, D.C. Undated document.

private participation includes the retention of good employees--if child care worries are reduced, employees are more likely to stay with the company.

California presently has an excellent system of state-funded child care resources and referral agencies. These are located in each county in the State. The fact that these agencies are already established may make them an excellent vehicle for expanded services including more extensive recruiting programs, extensive child care counseling for parents and business, and a host of other support services. California may benefit from ideas presented by Connecticut's child care consortium. Extended services facilitated through local resource and referral agencies may be possible through joint funding ventures with businesses and private, non-profit agencies.

Expansion of Child Care

Local communities can be instrumental in encouraging the expansion of child care facilities. Hollywood, Concord, Sacramento, Yorba Linda, and San Francisco have formally recognized child care as a community concern through the enactment of building or redevelopment ordinances. These ordinances have encouraged the availability of child care facilities by requiring the integration of child care space in building plans.

For example, San Francisco's Office and Hotel Affordable Child Care ordinance requires project sponsors of office and hotel developments that exceed 50,000 square feet to include licensable space for child care or to make a specified donation to the "Affordable Child Care Fund" which is administered by the Mayor's Office of Community Development. Similarly, facilitating the growth of child care is an integral part of the Hollywood redevelopment project. This project allocates funding from tax increment financing through the Community Redevelopment Agency. These programs are beginning to recognize that child care is an "essential service" by integrating plans for child care services into community planning and development.

Other cities have utilized a variety of methods to help increase the availability of child care. Santa Monica has provided city land for the construction of child care facilities. Irvine has purchased portable buildings for child care use in parks and schools. Sunnyvale and Fremont have used city funds to purchase buildings for child care facilities, and San Francisco, Concord, and Davis have provided low-interest loans for the establishment, rehabilitation, or expansion of child care facilities. Los Angeles has provided $2 million in community development grant funds to subsidize 19 non-profit preschools.[41]

Section 129 of the Federal Internal Revenue Code allows employees to defer part of their salary in return for having their employers pay child care costs directly. This "salary retention" allows anticipated child care expenses to be deducted from the employees' paychecks, before taxes are

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[41] Brownsey, Donne. "Meeting the Demand for Child Care: How Cities Can Develop and Expand Programs with State Funds." Western City: July 1986, p.15, 20.

assessed, and deposited into an account. The employees can draw money from the account by filing "claims" for child care expenses. Employees pay no taxes on the deferred salary and employers pay no social security fees for that portion of the salary. The California Revenue and Taxation Code does not include a similar provision for deferring State taxes.

Additional approaches for expanding child care include: issuing State or municipal bonds; creating community facilities districts; encouraging tax increment financing in redevelopment areas; assessing Quimby funds in localities that have them; and creating a public trust.

One form of a bond issue that could be made available for expanding child care is a general obligation bond. General obligation bonds are backed by the full faith and credit of the State of California. These bonds could be repaid through the collection of State income and sales taxes in the event loans made from general obligation bond funds were to default, or if the funds were used exclusively for publicly-owned facilities such as schools. Prior to Proposition 13, the majority of bond issues were general obligation bonds. Currently, general obligation bonds constitute only about one-third of all bond issues because such bonds require a two-thirds vote for approval.

The revenue bond is another option available for expanding child care. The revenue bond is issued to support a particular project and is usually repaid out of revenues from that project. These bonds are used to finance different types of projects and are paid back by user fees. Approximately two-thirds of all bonds issued are revenue bonds. Revenue bonds require a majority vote for approval.

A second approach to expanding child care would be to create a community facility district. These districts are created by a local agency to develop services that are needed by that community. In many communities, these districts have been created for libraries, recreation areas and schools through the Mello-Roos Community Facilities Act of 1982. However, because the Act does not specifically name child care as an eligible service, an amendment to the original act may be necessary to include child care services.

Tax increment financing can also be used to increase child care services. Redevelopment agencies are public entities that are established to revitalize economically depressed or blighted areas in the community under the authority of the Community Redevelopment Act of California. The redevelopment agency increases tax revenues to the locality through increased property taxes as redeveloped property appreciates in value. The increase of tax revenue over the base revenue collected is tax increment revenue which reverts to the redevelopment agency for its own uses for up to 30 years. To encourage this avenue for the expansion of child care services, State law would have to be modified to specify child care facilities as an eligible project.

Local communities may be able to utilize Quimby Funds for the expansion of child care. The Quimby Fund Act of 1965, allows localities to establish park land dedication ordinances that require developers to pay fees or dedicate land for the purpose of developing new, or rehabilitating existing, neighborhoods or community park and recreational facilities to serve a subdivision. Although not all localities have passed Quimby ordinances, this

could be a useful mechanism for the expansion of child care by developing child care facilities on park land.

A final option that could be made available to expand child care services would be to create a public trust to encourage the expansion of child service facilities through bequests. The use of bequests to provide services has worked for churches and other groups such as conservation groups. If the bequest is a house or building, it could be used as a child care center, group foster home or any number of child-related purposes. The benefit of a public trust would be that no public contribution or government participation would be necessary. Although a public trust could be administered at the State or local level, State operation would be more difficult since the trust would be geographically removed from the children's services and property and would also remove the property from the county tax roll. The benefit of setting up the county as the public unit receiving the bequest is that there could be some return from leases to replace lost taxes. This option could be enhanced if the State allowed additional benefits to persons making a bequest prior to death.

There are a wide range of methods available to help expand the supply of quality child care. A successful effort will require that all sectors of the California economy work toward the goal of increasing the availability of quality child care.

Finding #6 - Quality Child Care is Beneficial to Children And Can Result in Long-Term Savings to The State

Quality child care is cost effective for the State and beneficial for children. Studies have shown that certain characteristics are indicative of quality child care which enhance the well-being of children in the child care setting. High quality child care can substantially reduce problems later in life such as juvenile delinquency or the need for special education programs. If quality child care is available to children while their parents work, the State will benefit in later years through cost savings.

Characteristics of Quality Child Care

With the best interests of children in mind, "child care" means more than mere supervision. Parents have been successfully caring for children for thousands of years, however, they usually care for a small number of children of varying ages. Child care centers typically care for relatively large groups of children who are often grouped according to age. When children with diverse values, interests and backgrounds are cared for in one location, special facility characteristics and trained caregivers are needed. Many children of working parents spend 10 hours or more per day in a child care environment. These children need to be provided with a secure, enriching, nurturing environment. Any standards for child care should be formulated to help ensure that children in child care obtain these basic necessities.

Certain characteristics within a child care center have been shown to have a positive impact on the well-being of children in care. Four particular characteristics are of special importance: group size, caregiver-to-child ratios, caregiver training and qualifications, and program environment and services.

Although not currently regulated by the State, group size in child care centers is an important component to quality child care. Studies have found that smaller groups are consistently associated with better care.[42] Preschool children who are cared for in small groups tend to engage in more creative, verbal, and cooperative activity. They also tend to do better on some standardized tests than children in larger groups. Preschool children in large groups often lack a consistent caregiver. This limits the ability of children to form a strong attachment to their caregivers and feel that they can depend on them. These children frequently are observed aimlessly wandering about and exhibiting more aggressive behavior.[43]

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[42] Travers, Jeffery, et.al. National Day Care Study, Abt Associates. Cambridge, MA, October 1980.

Ruopp, R., et.al. Children at the Center, Abt Books, Cambridge, MA, 1979.

Smith, P. and Connolly, K. The Behavior Ecology of the Preschool, Cambridge University, Cambridge, England, 1981.

[43] Ibid.

Child-to-caregiver ratios highly influence many aspects of the child care environment. In small groups with a small number of children per adult, children receive more attention, particularly in small clusters of two to nine children. The management of children is also improved in small groups as well as in larger groups with low child-to-caregiver ratios. Low child to caregiver ratios can help prevent harmful accidents by enabling caregivers to provide appropriate supervision.[44]

Low child to caregiver ratios are particularly important for infant care. Infant studies, performed in orphanages 40 years ago, demonstrate the effects of inadequate caregiver attention.[45] Infants who received adequate nutrition and health attention but, because of understaffing, were denied the benefit of social stimulation, including being held, smiled at, and spoken to, suffered irreparable harm. Numerous studies have confirmed that infants born normal and healthy but denied social stimulation suffered drastically, with increased morbidity rates, chronic medical problems, and serious social ailments later in life. This phenomenon is so widely recognized that physicians have diagnosed it as "failure to thrive."

The characteristics of the caregiver also have been shown to affect the quality of care given to the child. Caregivers who have education or training specifically related to young children, such as training in child psychology, child development, education, or day care, provide better social and intellectual stimulation to children than other caregivers. Children in their care also score higher on standardized tests.[46] There are important developmental needs for children of different ages that impact the care they should receive. While infants need cuddling and one-to-one social interaction, school-age children need the opportunity to run and engage in less structured, creative play with their peers. Because of these differences, caregivers need age-appropriate training and experience.

Child care work is a high stress job with low pay and few employee benefits. The Children's Defense Fund estimates that nationally, two out of three center-based caregivers earn below poverty-level wages, regardless of their

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[44] Clark, Stewart A. and Gruber, C. Day Care Forms and Features: Quality Variations in Day Care, RC. Ainslie, ed. Praeger, NY 1984.

Howes, C. Caregiver Behavior in Center and Family Day Care, Journal of Applied Developmental Psychology, Vol.4, p.99-107, 1983.

Howes, C. and Rubenstein, J. Determinants of Toddlers' Experience in Day Care: Age of Entry and Quality of Setting, Child Care Quarterly, Winter, 1985.

[45] Spitz, Rene A. Hospitalism: An Inquiry into the Genesis of Psychiatric Conditions in Early Childhood, The Psychoanalytic Study of the Child, Vol.1, p.15-74, 1945.

[46] Travers, Jeffery et.al. National Day Care Study, Abt. Associates, Cambridge, MA. October, 1980.

experience, training or education. Many family child care providers earn even less. Only 54 percent of teachers and 34 percent of assistants receive any type of health benefits. Few child care workers receive the employee benefits of health insurance, life insurance, or retirement plans. Most do not receive payment for attending staff meetings or compensation for planning time.[47] The most often cited reason for caregiver turnover is to accept a better paying job. Additionally, working conditions for staff are stressful. Child care is a job where one must always "be on." Constant demands from children are compounded by those from parents and supervisors. The noise level is often high. These factors influence the high annual turnover rate of 40 percent for child caregivers.[48]

Employee turnover can have a negative impact on the quality of child care. When a caregiver leaves and is replaced by a new person, children suffer because bonds of trust are broken and classroom routines are disrupted. These problems are exacerbated by the fact that vacancies are increasingly difficult to fill immediately so other staff must fill in the gaps.

Offering support services as part of child care programs can promote increased communication between child care providers and parents and enhance the child's well being. Often referred to as "parent services", these services can include: care for the child with mild illness, parenting workshops, and community health and service referrals. These services can benefit the entire family by reducing the risk of family problems and contributing to the overall well-being of children. A 1985, study by W. Paul Harder found that parent services to prevent crises, such as family breakup and child abuse, can save the State $240 per year for every family served.[49]

High quality developmental child care programs do make a difference. Small group size, low child-to-caregiver ratios, appropriate caregiver training and retention, and high quality child development programs and services are important to children. Quality child development programs have resulted in increased intellectual and language development, high levels of social adjustment, increased cooperation, and better interaction between caregivers and children.

Impact of Quality Child Care for Disadvantaged Children

While many studies have documented the benefits of high quality child development programs for disadvantaged children, the most comprehensive longitudinal study was conducted by High/Scope Educational Research

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[47]"Analysis of Wage and Salary Surveys for Selected California Day Care Centers." Unpublished data supplied by Child Care Employee Project. Berkeley, CA.

[48]Ibid.

[49]Harder, W. Paul. An Analysis of the Potential Savings of State Funds Associated with the Parent Services Project, URSA Institute, San Francisco, CA. March 1985.

Foundation. Their much cited work, "The Perry Preschool Program and its Long-Term Effects: A Benefit-Cost Analysis," showed dramatic benefits for both society-at-large and the children that participated in the program.[50]

The High/Scope study tracked 123 three and four-year old black children born between 1958 and 1962, until they were 19 years of age. Children were selected on the basis of race, low parental attainment and socio-economic status, and low scores on the Stanford-Binet Intelligence Test (61-88). Children were randomly assigned to either a "test" or "control" group. Those in the "test" group attended preschool programs designed to promote the "intellectual, social, and physical development" of each child.

Compared with the control group, children who completed the Perry Preschool Program showed:

- Significantly higher scores on I.Q. and Achievement Tests at age 15;
- Reduced need for special education classes;
- Substantially reduced school drop out rate;
- High percentage of high school graduation;
- Fewer teen pregnancies;
- Lower delinquency rates;
- Higher rate of self-support; and
- Higher employment rates.

High/Scope researchers took the study results and converted them into economic benefits, including costs avoided, and compared them with the combined costs of the preschool program which were about $5,000 per year for each child. The researchers also took into account the opportunity costs, i.e., the value of the invested dollars that could not be used for other purposes. Specifically, they concluded that for every $1,000 invested in the Perry Preschool Program, $4,130 has or will be returned to society after taking inflation into consideration. Furthermore, the lifetime benefit/cost ratio for children who attended one year of preschool was almost six-to-one.[51]

Other studies have confirmed the findings of the High/Scope Study. After analyzing data from 12 different preschool programs, Irving Lazar and Richard Darlington of Cornell University concluded that preschool education for children substantially reduced later problems for children like juvenile delinquency, grade retention, or the need for special education programs.[52]

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[50] Barnett, Steven W. The Perry Preschool Program and Its Long-Term Effects: A Benefit-Cost Analysis, Lawrence Scheinhart and David Weikart, eds. Ypsitanti, MI. 1985.

[51] Ibid.

[52] Lazar, Irving, and Richard Darling, Lasting Effects After Preschool, United States Department of Health, Education and Welfare, Office of Human Development. 1980.

These studies indicate that quality child care is very important for children and, in the long run, will provide economic benefits to the State.

Finding #7 - California Has Varying Guidelines And Requirements For Child Care Services

California has two different sets of goals and standards for providing child care for children in the State. The set of goals and standards for State subsidized programs serving income eligible families emphasizes child development and parent education and services. The goals and standards set for non-subsidized programs is primarily concerned with providing supervision for children to enable parents to work, receive training for work, or simply to provide the child with a preschool experience. Due to the different goals, standards, and requirements for providing child care in State subsidized and non-subsidized programs, the quality of child care that children with similar needs receive may be inconsistent. Moreover, because there is a difference in program operating standards, the cost of providing child care can vary considerably.

Varying Child Care Program Goals

Over the years, California has developed child care provisions that are diverse and far-reaching. The programs are offered through either the Department of Social Services (DSS) or the State Department of Education (SDE). Exhibit II.5 provides a summary of the child care programs that the State provides.

EXHIBIT II.5

SUMMARY OF THE STATE'S CHILD CARE PROGRAMS

Program Name	Ages Served	Eligibility/Fees	Other Information About Services	Funding	Administration
General Subsidized Child Care (center-based) ■ ●	Birth through age 13	Families receive services in this order of priority: 1) children who are abused, neglected, or at-risk 2) lowest-income families who are working or in training programs. Fees: sliding fee scale based on income, except for CPS-Referred children who attend free of charge.	Programs are required to provide an age-appropriate curriculum and activities, a nutritional program, parent counseling, and referrals.	State Department of Education, Child Development Division (SDE/CDD). Some have other private funding through foundations, United Way, cities, etc.	School districts, churches, or private non-profit agencies.
Alternative Payment Program ■ ●	Birth through age 13	Same as General Subsidized Child Care.	A vendor/voucher program which pays for care of parent's choice, whether in a center, a family day care home, or the child's own home. Meant to enhance parental choice; can also accommodate parents with unusual work schedules. Parent and provider education.	State Department of Education, Child Development Division.	Child care resource and referral agencies, family day care associations, or other private non-profit or for-profit agencies.
Respite Care ■ ●	Birth through age 13	Abused or at-risk children; must be referred by legal, medical, social service or other community agencies. Any combination of hours less than 24 hours per day. Fees: none	Short-term care, designed to help families who are in stress because of medical or emotional problems, or who are going through difficult transitions and need relief.	Limited funds from SDE/CDD (less than $1 million per year statewide).	Child care resource and referral agencies, which have respite grants to pay for the care, and which offer referrals and counseling to parents. Other agencies, such as Regional Centers, the Children's Home Society, and county welfare departments, may also have sources of respite funds, subject to different regulations.
Private Child Care Centers (non-subsidized) ■ ●	Any	No eligibility requirements, but eligible parents may use Alternative Payment. Fees: variable	Programs may call themselves a child care center, day care center, preschool, nursery school, day nursery, etc.		Various, including non-profit organizations, for-profit businesses, churches, military, and public or private sector employers.
Family Day Care ■ ●	Any	No eligibility requirements, but eligible parents may use Alternative Payment. Fees: variable	Family day care is care in a licensed home environment other than the child's own. There are two kinds of family day care licenses: for up to six children, or up to twelve.		Private
State Preschool Program ■ ●	Ages 3–5	Eligibility: low income. Abused or neglected children have top priority. Fees: none	A developmental preschool program, including parent education and participation, as well as health, nutritional, social and psychiatric services for children and families. Some programs are bilingual.	SDE/CDD; some federal funds.	School districts, colleges, universities, community action agencies, or private non-profit agencies.
Head Start ▲ ●	Ages 3–5	Eligibility: low income. Abused or neglected children have top priority. 10% of children in program must be children with special needs. Fees: none	A developmental preschool program, including parent education and participation, as well as health, nutritional, social and psychiatric services for children and families. Some programs are bilingual.	Federal Department of Health and Human Services.	Private or public non-profit agencies; school districts.
School-Age Community Child Care ●	Kindergarten through age 13	50% of children must be eligible for state-subsidized care (see "General Subsidized Child Care"); 50% no eligibility guidelines. Fees: same as General Subsidized Child Care.	Developmental and nutritional programs for school-age children before and after school.	SDE/CDD	School districts, local governments, private non-profit agencies.

GAIN (Greater Avenues for Independence) ■ ●	Birth through age 11	Children of AFDC recipients or applicants. Fees: parents will pay no fee as long as they are receiving only their AFDC grant.	Child care is one of the "supportive services" paid for by the GAIN program, an educational, job training, counseling and employment program for AFDC recipients or applicants. A GAIN participant's child care costs, for any child under age 12, must be paid for by the county welfare department if he or she needs such care to participate in GAIN. Parents can use the care of their choice, including care by relatives, friends or neighbors. Payments are made at the rate which is normally charged in that particular area. If the parent finds a regular job and goes off welfare, the child care must be subsidized for another three months if the parent needs it.	Department of Social Services.	County welfare departments or sub-contracting agencies.
Migrant Child Care ■ ●	Birth through age 13	Children of migrant farm workers; otherwise, eligibility and fees are the same as for General Subsidized Child Care.	Located in state-owned migrant housing camps or other facilities, and operated during peak agricultural periods. California also has three federally-operated migrant child care centers.	SDE/CDD; some federal funds.	School district, county offices of education, or private non-profit agencies.
Campus Child Care Centers ■ ●	Birth through age 13	For state-subsidized campus centers, parent must be enrolled at the college or university; eligibility and fees are the same as for General Subsidized Child Care. Some campus centers are not state-subsidized; some are also open to faculty, staff and/or the general community.	Programs are required to provide an age-appropriate curriculum and activities, a nutritional program, parent counseling, and referrals. Some campus centers are also training sites ("lab school") for Early Childhood Education/Child Development students.	SDE/CDD; some have additional University Regents or Student Association funds. Some campus centers are not state-subsidized; parent fees in these centers may be higher.	Colleges and universities.
School-Age Parenting and Development (SAPID) ■ ●	Primarily infants; but most SAPID programs serve any child of a school-age parent	Eligibility not based on income. Parent must be enrolled in high school. Fees: none	Located on or near a high school campus. Offers a developmental program for children, parenting education, and career counseling.	SDE/CDD	Public high schools or school districts.
Therapeutic Nursery Schools ●	Ages 3–4	Children with emotional or behavioral difficulties. Fees: variable. Subsidized programs charge low fees; some have sliding fee scales.	Individualized group care for children; parent counseling and education. program may also offer child and family therapy and continued case management services for a time after the child leaves the program. Some programs "mainstream" troubled children; some do not.	Variable, including DSS, community mental health funds, foundations, private contribution.	
Adult Education—Parent Participation ("Co-op" Preschools) ●	Ages 3–4	Parent enrolled in adult education classes. No income eligibility. Fees: variable	Parents are required to participate one day per week in the preschool program, and to attend parent education classes.	Parent fees and adult education funds.	Local private or public non-profit agencies.
Private Co-ops ●	Ages 2–5	No eligibility requirements. Fees: variable (may be relatively low because parents work in program).	Parents participate in program; many co-ops have a parent education component.	Parent fees	Private

■ Full Time ● Part Time ▲ Some programs offer a full day

In California, several child care funding mechanisms—the Alternative Payment Program, Respite Care, and Greater Avenues for Independence (GAIN)—can be used to pay for private, non-subsidized care.

Exhibit II.5 shows that the programs offered by the State include State Preschool, General Child Care, Respite Care, Migrant Child Care, Greater Avenues for Independence (GAIN) Program, Child Care, Alternative Payment Program and Campus Child Care. Additionally, State funded resource and referral programs are available in all 58 counties to help parents locate licensed child care. Many Resource and Referral Programs also facilitate educational workshops designed to inform parents how to choose child care and to explain what child care provider or other resources are available. Resource and referral services are provided to anyone seeking child care, regardless of income.

DSS is responsible for statewide licensing and monitoring of standards in child care facilities. DSS also administers some welfare-related subsidized child care subsidies and provides indirect subsidies for child care through an allowance in welfare grants. These funds are often facilitated through county welfare departments to provide funding for child care services to eligible Aid to Families with Dependent Children (AFDC) recipients. The primary function of these funds is to provide child care that enables the recipient to work or receive training or education.

There are significant differences among the child care programs regulated by DSS and the subsidized programs funded by SDE. The Education Code establishes goals for child care programs administered by SDE. Section 8201 of the Education Code summarizes legislative intent, program goals and operational goals, as follows:

- To provide a comprehensive, coordinated and cost-effective system of child care and development for children to age 14, and their parents, including a full range of supervision, health and support services through full and part-time programs.

- To encourage community-level coordination in support of child care and development services.

- To provide an environment that is healthy and nurturing for all children in child care and development programs.

- To provide the opportunity for positive parenting to take place through understanding of human growth and development.

- To reduce strain between parent and child in order to prevent abuse, neglect or exploitation.

- To enhance the cognitive development of children, with particular emphasis upon those children who require special assistance, including bilingual capabilities to attain their full potential.

- To establish a framework for the expansion of child care and development services.

This statement of legislative purpose, with its heavy child development emphasis, supports the view that the State's child care programs need to include child development and parenting components. Note that the goal of enabling parents to work is not explicitly mentioned. The Governor's Budget,

however, provides a different emphasis, accentuating work and family sufficiency.

The Governor's Budget for 1987-88 identifies the following major goals for the State's child care programs:

- To assist families in becoming self-sufficient by enabling parents to work or receive training to lead to employment by providing safe and appropriate environments for children.
- To enhance the physical, emotional and developmental growth of participating children.
- To refer families in need of medical or family support to appropriate agencies.

The stated goals of the SDE administered child care programs and the stated goals in the Governor's Budget are not incompatible, but the different focus of each of these goal statements can lead to different policy and program outcomes.

Differing Child Care Program Quality Standards

All licensed child care centers are subject to the minimum standards set in Title 22 of the Health and Safety Code and administered by DSS. Standards include basic health and safety provisions as well as requirements for caregiver to child ratios and staff qualifications. State preschool and other child care programs administered by the SDE are exempt from certain portions of Title 22 regulations and bound by sections of the Education Code. An error in these exemptions has led to a gap in ratio standards for SDE Centers. Section 101316.5C of the State Child Care Center Licensing regulations states: "Child development programs funded by the State Department of Education and Operating under the provisions of Title 5 of the California Administrative Code shall not be required to meet the teacher-child ratios specified above Title 5 ratios shall be applicable in such centers." While the Education Code statutes set ratio standards for SDE child care programs, Title 5 of the Administrative Code does not. The Legislature has given SDE until December 31, 1987 to develop ratio standards and other regulations.

Sections 8201, 8202, and 8203 of the California Education Code require cost-effective and high quality child care. The law mandates specific quality requirements for program standards, staffing ratios and staff qualifications. Specifically, "quality" as it has been defined takes precedence over "quantity" when demands for services exceed budgeted resources. Because these "quality" requirements entail additional costs, some providers view them as unfair and unrealistic. These critics argue that it would be preferable to serve more children, even if it means at a somewhat lowered standard, rather than not to serve some children at all.

Some also contend that the SDE Code standard of quality which is embodied in staff qualifications and staff/child ratios is unnecessarily restrictive. They assert that the State can operate adequate programs with lower ratios. In fact, one small State program, Alternative Payment, does respite care

subsidized in Title 22 centers. A persistent question that must be addressed is how many more children could be served even if "quality" requirements were decreased. Exhibit II.6 provides a comparison of existing staffing ratios in California.

EXHIBIT II.6

COMPARISON OF TITLE 22 AND EDUCATION CODE
STAFFING RATIO REQUIREMENTS FOR CHILD CARE CENTERS

STAFFING RATIOS

Title 22	Teacher/Adult:Child
Infants (0 to 2 years old)	1:4
Preschoolers (2+ year olds) (with one aide 1:15)	1:12
School Age (6 to 12 year olds)	1:15

Education Code	Adult:Child	Teacher:Child
Infants (0 to 2 years old)	1:3	1:18
Infants/Toddlers mixed (0 to 3 years old)	1:4	1:16
Preschoolers (3 to 6 years old)	1:8	1:24
School Age (6 to 10 years old)	1:14	1:28
School Age (10 to 14 years old)	1:18	1:36

As shown in Exhibit II.6, the Education Code ratios are more stringent than the Title 22 ratios for the preschool age child. The Education Code sets the adult-to-child ratio for preschool-aged children at 1:8, while Title 22 regulations contain ratios for this age group at 1:12. The age categories for regulating child care are sometimes ambiguous. For instance, there is a gap in Education Code regulations for preschool-aged children between the ages of 24 and 30 months. School-age regulations in both Title 22 and the Education Code begin at age six. Although most children begin kindergarten at age five, the law does not require that children begin school until they are six years old. For the purpose of regulating child care, we have heard concerns about applying this policy to child care. Since most five to five-and-a-half-year old children are in the school setting part day, and therefore in need of part-time care, some providers believe that their children should be governed by school-age ratios, not preschool ratios.

Proposed changes in Title 22 regulations have addressed this problem. Kindergartners in child care programs that care exclusively for children enrolled in grades kindergarten and above will be counted as school age. It is hoped that this change will help combat the "latchkey" problem of school-age children staying home unsupervised. Although kindergartners are developmentally more compatible with preschoolers, the intent of this change is to combat transportation problems from school site to child care center. Although the DSS licensing proposal states that the intent of the change is

to enable kindergartners "to remain on the school site instead of being transferred to a day care center", the proposed changes do not specify that the school-age program must be exclusively located on or near the school site.

The Title 22 child-to-caregiver ratios shown in Exhibit II.6 represent the minimum allowable ratios set by law. Numerous child care centers in California actually operate their programs with more stringent child-to-caregiver ratios. Child advocates have stated that the ratios and caregiver/teacher requirements dictated by Title 22 are not stringent enough to allow for an adequate quality program.

A review of the evolution of child-to-caregiver ratios reveals a decline in child care ratio standards for both SDE and Title 22 centers. For instance, in 1953, the ratio for Title 22-type child care centers for children aged two to five was 1:10. In 1970, these ratios changed to 1:12 for children aged 2 to 6. Between 1968 and 1980, the Federal Interagency Day Care Regulations (FIDCR) and programs receiving State funds, which both set more stringent child/adult ratios, required that child care centers that received federal or State funds were required to meet their prescribed ratios. Since many centers were receiving federal or State funds, it was not uncommon to find child care centers operating with much more stringent child care ratios than Title 22 required.[53]

Education Code standards have also been lowered over time. For example, from 1965 until 1977, child-to-caregiver ratios for children aged 3 to 5 years were 1:5. In 1977, ratios for preschoolers were changed to 1:7. These ratios were changed again in 1980 to the present ratio of 1:8.[54]

Many child professionals also assert that training requirements for teachers and aides or "adults" under Title 22 are too low. Exhibit II.7 provides a comparison of staff qualifications for child care provided under the Education Code and Title 22.

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[53] On the Capitol Doorstep. "History of Child Care Regulations." Undated document.

[54] Ibid.

EXHIBIT II.7

COMPARISON OF TITLE 22 AND EDUCATION CODE
REQUIREMENTS FOR
STAFF QUALIFICATIONS AT CHILD CARE CENTERS

	Title 22	Education Code
Teachers	Can be hired with 12 semester units in Early Childhood Education/Child Development (ECE/CD) and 6 months experience or Children's center permit issued by the California Commission on Teacher Preparation and Licensing	Can be hired with Children's Center Instructional Permit, which requires: 24 semester units in ECE/CD, and 16 units in general education, plus field experience and passage of a basic skills test or a Bachelor's degree
Provisional Teacher	Can be hired after completing 6 semester units, but must complete at least 2 units per semester until meeting the requirements	Can be hired with 12 units in ECE/CD and field experience, plus enrollment in a training program or Can be hired with 6 units in ECE/CD, field experience and field based assessment, plus a Child Development Associate credential

As shown on Exhibit II.7, the teacher qualifications prescribed by the Education Code are more than double the requirements for Title 22 teachers. These increased credential requirements may be partially offset by the lower teacher-to-child ratio prescribed for the centers which fall under the Education Code. For example, the teacher-to-child ratio for Title 5 children who are ages three to six is 1:24 while the teacher-to-child ratio for Title 22 Centers is 1:12. More non-teacher supervision may be utilized in the Education Code Centers. Teachers in Title 22 Centers are required to have considerably less training than those in SDE Centers. For example, a teacher can be hired under Title 22 with only two classes in child development. After employment, a teacher hired with these qualifications is required to complete two units each semester or quarter until he/she has completed a total of 12 post-secondary units (approximately 4 classes) of child-related education and acquired 6 months of child care experience. Despite this minimal training, the teacher is often responsible for planning the day-to-day curriculum, supervising the aides, substituting for the director when he/she is absent, and caring for children. Many child development

experts feel that the child care center is a unique environment that requires staff training in subjects from child development and education to emergency first aid and health issues.

Differences in Cost of Child Care

There are considerable differences in the costs of providing child care in California. Exhibit II.8 shows the range of rates and the average daily rates that the State Department of Education pays for different types of child care programs.

EXHIBIT II.8

RANGE OF REIMBURSEMENT RATES PAID BY THE STATE DEPARTMENT OF EDUCATION FOR DIFFERENT TYPES OF CHILD CARE*
1987-88 DAILY RATES

Type of Program	Low	High	Average	Monthly Average
General Child Care-School District	$14.70	$25.56	$18.67	$373.40
General Child Care-Private Agencies	$10.10	$18.85	$17.82	$356.40
Center Based Care	$ 9.99	$18.85	$16.89	$337.80
State Migrant Child Care	$18.85	$18.85	$18.85	$377.00

SOURCE: Compiled from data provided by the State Department of Education, Child Development Division

*This data is based upon pre-finalized fiscal year data, therefore, does not reflect rate increases, expansion funding, cost-of-living adjustments, or any other amendments.

Exhibit II.8 demonstrates that reimbursement rates can vary even within the same type of program. The State Department of Education states that the variation in rates is due to the fact that reimbursement rates cannot exceed the rate charged by the contractor to nonsubsidized children.

Exhibit II.8 further illustrates that school district programs, which are under the Education Code requirements, and migrant child care programs are the most costly. It should be noted that the daily rates were adjusted July 1, 1987. It also shows that the rates paid to private agencies and center-based care facilities are considerably less. The increased costs are due in part, to the wages paid to teachers. For example, wages paid to teachers and other staff at SDE school district child care centers, which

vary from school district to school district, are usually covered by collective bargaining agreements and therefore typically earn higher wages than those paid to staff in private child care centers.

Orange County recently completed a wage survey of child care teachers in SDE administered centers and found that the annual salaries paid in Orange County ranged from $11,666 to $26,000. The median maximum salary category was approximately $18,000 per year. These wages, usually for year round service, are considerably less than the average wage paid to kindergarten and grade school teachers who work on a nine-month schedule.[55] A 1985 Legislative Analyst's report found that the only child care teachers who earned enough to support a family of four at a "lower standard of living" were those covered by collective bargaining agreements.[56]

A frequent debate over child care quality revolves around the question of why some State subsidized child care programs serving the working poor have higher standards and costs than non-subsidized care. Critics of this dual system maintain that it creates unequal treatment for children based solely on the source of funding, thus making the expansion of new programs more difficult and more costly. Some assert that the so-called "Educational Model" fostered by the State Department of Education is responsible for the higher costs. However, others indicate that the education model serves multi-problem families and provides more services and programs. These people indicate that increased quality components and commensurate wages are needed because children with multiple problems served in SDE programs, such as abused children referred by the children's protective services system, and migrant children need more extensive programs. Even so, alternative payment programs, administered by SDE, are not required to meet the Education Code standards and serve a similar population of children.

It is important to point out that Title 22 licensing standards represent minimum standards, below which no program can operate legally. These minimum standards do not articulate what constitutes a quality child care program. It is not uncommon for private child care centers to utilize more stringent child-to-caregiver ratios and caregiver qualifications. Licensing standards serve a different function from funding standards. If SDE child care programs were requested to operate using Title 22 licensing standards, subsidized programs effectively would be restricted to operating at the lowest allowable standard of care.

A recent study by the Child Development Division of the State Department of Education entitled, "The Cost of State Subsidized Child Care in California," concluded that the considerable cost variations in the costs among child care contractors could be explained by the amount of time each day that children were enrolled, the ages of children enrolled, the difference in the prices

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[55] Orange County Department of Education. Survey of Child CarePositions-Teachers, 1986-87. Unpublished Data.

[56] Office of the Legislative Analyst. A Report on the Child Care Reimbursement System, July 1985.

that contractors had to pay for resources, agency size, and the quantity and quality of services provided.[57] However, they did find that some "fine tuning" could improve the current reimbursement system. The general conclusion of the cost study was that the current reimbursement system was sound, but the system would benefit from adjustments: "to ensure that providers are treated equitably and that care is provided efficiently".[58]

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[57] MPR Associates, Inc. and J.D. Franz Research. The Cost of State-Subsidized Child Care in California, September 1986, pg. 51.

[58] Ibid.

Finding #8 - The Number of Subsidized Child Care Spaces Available In California is Sufficient to Service The Working Poor

There is a shortage of subsidized child care spaces in the State of California. Estimates show that only 7 percent of the 1.1 million children eligible for subsidized child care receive it. This places many parents in the position of having to make a virtually impossible decision--accept inadequate care and supervision for their children, or stay home to care for the children and encounter unemployment. If the parent chooses to stay at home, the entire family may suffer economically or the State may have to help support the family.

Between 1977 and 1986, the poorest 20 percent of all California families experienced a 9 percent decline in real annual income.[59] Young children have been hit hardest by poverty. A full 25 percent of all children below the age of six live in families below the poverty level.[60] In families headed by single women, many women and children have become victims of the growing phenomenon referred to as the "feminization of poverty." Among families headed by women, an alarming 78 percent of children aged 0 to 2 and 57 percent of children aged 3 to 5 live in families with incomes below the poverty level.[61] Furthermore, 150,000 additional children live in families just above the poverty level.[62] While the price tag for child care provides minimal compensation for the costs incurred by providers, it is a sizable sum for families, especially working poor families. California does not provide sufficient subsidized child care to serve the vast number of children who qualify. In fact, the report by the Assembly Office of Research indicates that less than 7 percent of the children who qualify for state subsidized child care receive it.[63]

Mary Balimo is a single mother with two children--Nathan, 6, and Erin, an infant. She receives minimal child support from the children's father and now works at a bay area savings and loan. Following Erin's birth, Mary was struck with the fact that if she returned to work, child care would cost her $700 per month--for after school care for Nathan and full-time infant care for Erin. When Nathan was on summer vacation the cost would be close to $900.00. She earns $1,200.00 per month. Mary is one of the lucky ones, she received a subsidized child care space from the State Department of Education. "If I hadn't had this help," Mary confides, "I'll be honest, it

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[59] Senate Office of Research. Family Income in California, April 1987, p.2.

[60] Assembly Office of Research. California 2000: A People in Transition. June 1986, p.9.

[61] Ibid.

[62] Ibid, p.8.

[63] Ibid, p.13.

would have been more advantageous to go on welfare, and I could have stayed home with my kids."[64]

Families or children eligible to receive State subsidized child care include:

- Families on public assistance;
- Families with a monthly income at or below 84 percent of the State median income, as adjusted for family size; and
- Children who have been or are at risk of being abused or neglected as determined by and referred by a legal, medical, or social services agency.

In addition to the above eligibility criteria, families must establish a need for subsidized child care services in accordance with criteria set forth in Education Code Section 8263. These criteria include parents' employment status, incapacity of either parents or children, and the need for, or participation in, child protective services. Once eligibility has been established, the child's need for service is assessed in relation to other children who are eligible for care. An abused or neglected child receives first priority for available child care space. Other eligible families are assessed according to income. Children from the poorest families are placed above those that are relatively more fortunate. Once eligibility and relative need are assessed, the family will either be admitted into the program or, if no space is open (as is often the case), the family is placed on a waiting list. If space becomes available and the family enters the subsidized program, the family can remain until family income reaches 100 percent of the California median.

Families of children in subsidized programs pay fees on a sliding-fee schedule. For example, a family of three at the 84 percent median income level of $1,814 per month (just below the eligibility cutoff point), would pay a daily fee of $9.54, which amounts to $205.11 per month for full-time child care. Whereas, a family of three with monthly income of $1,080 would pay a daily fee of $.90 which amounts to $19.35 per month for full-time child care. Families with more than one child needing subsidized care are assessed fees for only one child. These sample fees reflect recent changes in the fee schedule made by the Department of Education in 1987.

Drastic shortages of spaces in subsidized child care programs prompted the Commission to consider possible ways to expand subsidized child care services. One option for filling the unmet demand for child care within budget constraints would be to increase the existing fee charged to families so that more families and children could be served. Another option would be to establish a limit on the number of years that families can receive subsidized child care. Other options would be to reduce the median income requirement or to discontinue services to families whose incomes exceed the 84 percent median income level ceiling. These proposals would reduce the pool of eligible children by removing those who are supposedly the best able

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[64] Marin Independent Journal, June 6, 1986, page D-2.

to pay. Another method to reduce costs to the State would be to assess child care fees for each sibling in a family instead of basing the assessment on only one child. These alternatives reflect attempts to address the issue of "equity", based upon the service priorities defined under existing law and given the present limitations on funding.

There have been assertions by numerous sources stating that these changes will result in a substantial increase in the number of subsidized child care spaces. For example, the Governor's 1987 budget summary states that changes that reduce staffing ratios and reduce minimum caregiver qualifications would result in 6,900 new subsidized spaces for infants and preschoolers. Other sources state that the effect of such changes would be minimal. However, there is only limited data available to support either of these assertions.

Critics of programatic changes to increase the availability of child care assert that negative results should be weighed against the possible increase of spaces created. For instance, establishing a limit on years of eligibility for subsidized child care could result in a revolving door, forcing the working poor to revert to public assistance. Additionally, equity issues must be balanced against the possible hardships these alternatives might impose upon children and families. It is possible that family income could fluctuate just above and below the income cutoff point. In a case like this, a child may be burdened with frequent drifts in and out of different child care programs. Additionally, if a child were terminated from the program, a lack of affordable alternative child care options may force the parent into unemployment or to leave the child unattended.

The pool of eligible working families in need of subsidized child care is likely to grow. Contributing to part of this increase may be previous welfare recipients with school-aged children who are required to receive job training and work under the Greater Avenues For Independence (GAIN) program. GAIN encourages welfare recipients with preschool children to enter the State's subsidized child care programs. While the GAIN program includes a subsidy for child care, eligibility ends three months after the GAIN participant is employed. It is probable that the employment gained by many of these participants will pay relatively low wages that may make paying the full costs of child care prohibitive.

There is a definite need for subsidized child care in California. Currently, the availability of subsidized child care falls far short of the demand. Programatic changes in the State Department of Education's funded programs, if deemed reasonable and cost effective, may be a first step towards fully addressing the unmet need.

Finding #9 - The Child Care Needs of Special Population Groups Are Not Being Met

There are severe shortages of adequate child care for families living in high density urban areas, children with disabilities, children determined to be at risk of abuse or neglect, and migrant agricultural worker families. Even parents that can afford to pay for child care for children in these special populations groups are often unable to find it. There is also a shortage of subsidized child care for children in these special population groups. For example, less than ten percent of the children of migrant farm workers needing child care are receiving it. Similarly, abused and neglected children often must wait two months or more for a space in a subsidized child care program. Due to their unique needs and the lack of sufficient subsidized and nonsubsidized child care spaces, the child care needs of these special population groups are currently not being adequately met in California's child care delivery system.

In high density urban areas, facility-related regulations inhibit the availability of child care facilities. Outdoor and indoor space is typically limited in high density urban centers. This limitation prevents child care centers, as well as family day care homes, from meeting standardized licensing requirements. As a result, the amount of available child care spaces in these areas is limited or remains unlicensed.

Section 8263 of the Education Code requires that children who are at risk of abuse or neglect be given first priority for subsidized child care services. However, because subsidized facilities are usually filled, long delays are not uncommon. A report issued last year by the Auditor General stated that children at risk of abuse or neglect "often must wait two months or more before they are enrolled in a subsidized child care program." The report added that three of seven respite care contractors contacted indicated that the average wait for subsidized child care is one year.[65]

Child care programs for the children of migrant farm workers are not meeting the desperate need for service. A 1980 report by the Department of Education stated that the number of migrant children that qualify for subsidized child care exceeds 358,000, yet less than 10 percent were being served. Researchers found that many children aged three through six were being left alone for an average of 50 hours per week while their parents worked.[66] Migrant families often live in areas where the presence of farm equipment and toxic farm chemicals may be attractive and potentially lethal play objects for these young children.

Another special population that is presently underserved is exceptional children with developmental disabilities. This problem may be rectified with

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[65] Office of the Auditor General. A Review of the State Department of Education's Administration of Child Development Programs, June 1986, p.11-12.

[66] California State Department of Education. A Survey of California Farmworkers' Child Care Needs, 1980.

the anticipated passage of AB 2666. The bill was drafted largely in response to the passage of federal legislation, PL 99-457. Title II of this law says that if states fail to implement a statewide early education program for all handicapped preschoolers aged 3 to 5 within four years, the State will lose all current funding for special education preschool programs. With full participation, the State will receive approximately $176 million in new federal funds over the next four years.[67] The law responds to the importance of prevention programs. Preschool education can prevent young children with disabilities from developing secondary handicapping conditions that often cause need for intensive services at a later age. Title I of PL 99-457 also includes a segment relating to care for handicapped infants.

It has been estimated that if parents of exceptional school-aged children, 5 through 14 years of age participate in the labor force in the same proportion as parents of non-handicapped children, then up to 130,000 school-aged exceptional children would need care and supervision for part of the day.[68] In 1985, over $15 million was allocated for school-age child care under SB 303, Education Code Sections 8460-8492. Although the statute specifies that provisions for handicapped children be included, the Commission has learned that some contractors are not doing so. For instance, at a recent child care hearing, it was revealed that although Orange County agencies received SB 303 awards, all but two agencies claim that they are unequipped to care for disabled children. The two remaining agencies are able to care for only very mildly disabled children.[69]

While the Department of Education's subsidized centers allow monetary compensation for children with special needs, such as disabled children, providers point out that the adjustment often is not sufficient to compensate for the staff time that must be devoted to some disabled children. For example, the adjustment factor for a handicapped child is one-and-a-half times the base rate. This means that one handicapped child will be funded and counted in caregiver to child ratios as 1.5 children. This adjustment factor may establish a standard that can't be uniformally implemented, particularly considering the wide range and extent of disabilities children may have. Typically, teachers and other caregivers do not receive additional training to work with handicapped children and there may be no difference in the child care program for handicapped children. As a result, programs may not admit handicapped children into their programs or serve them adequately.

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[67] On the Capitol Doorstep, June 1987.

[68] California Child Development Programs Advisory Committee. Child Care Needs of Exceptional Children, April 1983, p.1-3.

[69] Rhys Byrchill, Developmental Disabilities Board. Testimony to Gil Ferguson, California Child Care Today and Tomorrow, May 8, 1987.

Finding #10 - Child Care Programs Can Play An Important Role in Abuse Prevention

Child care can serve an important function for children in troubled families. Because of the on-going interaction between the caregiver, the child, and the family, the child care setting can provide an important stabilizing element to the child's life and help connect the child and family with needed services. By early identification of child abuse, child care can provide a first line of prevention that is much less costly than waiting until an abusive environment is out of control.

One prevalent modern day myth is that child abuse occurs most frequently outside the child's home, as in the child care setting. The fact is that most abuse occurs within a child's home and family. The American Humane Society reports that fewer than 1.2 percent of child abuse cases occur in the child care setting.[70] The child care environment can provide a useful setting for abuse prevention as well as in the detection of abuse or neglect. Child abuse experts point out that the early detection of child abuse or neglect can benefit the entire family. If parental child abuse and neglect is caught early, there is a greater chance that parents can change their abusive or neglectful behavior. In some cases, child care can also serve as an alternative to out-of-home placement for child victims of abuse or neglect, or as a stabilizing environment for the child who is placed temporarily in a foster home.

Over one-third of the reported cases of child abuse and neglect nationwide involve children who are less than six years old.[71] Child care staff, if properly trained in detecting the behavioral indicators of possible abuse and neglect, are in a unique position to provide treatment and preventative services to families. Caregivers in the child care setting have the opportunity to observe children in a variety of different settings--they observe children's eating habits, play, as well as parent-child interactions. They are in an excellent position to detect signs of family stress that can lead to abuse or neglect or to note signals that indicate that a child has already experienced abuse or neglect. Local resource and referral agencies administer $1 million statewide of respite child care funds which are used to provide short-term child care for at-risk families identified by medical, social service or child welfare professionals.

Survey results from a recent study by the Child Development Programs Advisory Committee (CDPAC) indicate that each subsidized child care and development program identifies an average of four children annually as abused, neglected, or at-risk. The survey also indicated that child care staff most often cited "knowledge of children's behavior patterns" as one of the three most important skills needed to serve abused, neglected, or at-risk children. The

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[70] Cited by the National Commission on Working Women. Child Care Fact Sheet, Undated document.

[71] Weinstein, Vivian. The Best We Have To Give. California Child Care Resource and Referral Network, 1987.

second and third most cited skills were identification of injury and identification of parental stress.[72]

When a family has been reported to authorities because of child abuse or neglect, the child can be affected in a number of ways. The positive aspect is that steps can be taken to stop the harm from being inflicted upon the child--often this is completed by removing the child from the home, but the child's world can also be turned topsy-turvey. Young children usually love their parents despite the abuse; their view of the parent often includes positive experiences. For example, one social worker related that when escorting five-year old William to court, they saw William's father in an adjacent hallway. The father had physically abused William since he was a toddler. William pointed to the father and commented to the social worker, "That's my Dad, he used to take me fishing".[73]

Separation anxiety may be compounded by placing the child in a foster home--or even a series of foster homes--where daily routines and surroundings are unfamiliar. The process may end with attempts to reunify the family. In this case, the family is under stress as parents attempt to correct their abusive or neglectful patterns by changing behavior that may be grounded in a long history of abuse--perhaps learned from their own parents. Children are negatively affected by the stresses and repeated changes that disrupt any semblance of routine in their life. The child care setting can serve as the only constant in the child's life during this period and may be particularly important during and after reunification with the family.

Child care staff interact with children and parents on a daily basis. This daily interaction often builds trust, not only with children, but with parents as well. This relationship may put caregivers and educators in a powerful position to help a family while there is still a good chance of changing harmful child-rearing practices. For parents that have been reported to Child Welfare Services for child abuse or neglect, the child care staff can work closely with social workers to increase the likelihood of successful family reunification or to help provide continuity for the child if reunification is not an imminent reality. Child care and child development programs can benefit abused and neglected children and their parents by providing support for the child, support for the parent, and by facilitating the coordination of community support services.

A number of agencies refer abused, neglected, and at-risk children to the subsidized child care programs currently offered by the State Department of Education. The CDPAC survey indicated that most referrals were made by Child Welfare Services, but referrals were also made by medical and health organizations, community service organizations, schools, and others. The survey further indicated that the subsidized child care and development

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[72] Child Development Programs Advisory Committee. The Role of Child Care in Child Abuse Prevention, Undated document.

[73] Pollack, Kent. Foster Homes Jammed with Forgotten Children. The Sacramento Bee. August 6, 1986, p. A-1, Name changed.

programs also provided important connecting services for abusive and at-risk families. Almost 70 percent of the programs provided parent education programs; other services included counseling for parents, and counseling for the child--25 percent of the programs hired special staff to work with abusive and at-risk families. The child care programs also connected the families with a variety of community support services, such as child guidance clinics, counseling facilities, and community social service agencies.[74]

Despite the pivotal role of child care, many staff in child care facilities need training in reporting child abuse. While child care can provide an important forum for facilitating the identification and treatment of abusive, neglectful, or at-risk families, their successes can be mitigated by inadequately trained staff. For instance, while CDPAC survey responses indicated most programs identified an average of four abused or at-risk children per year, they reported half that amount. State law requires that any suspicion of child abuse or neglect be reported to law enforcement or a social welfare agency. The CDPAC attributed the discrepancy between identified and reported suspicions of abuse and risk of abuse to "lack of technical assistance, lack of knowledge of the reporting law, fear of parental retaliation, and the lack of confidence in the reporting and investigatory system."[75] Respondents did indicate that families identified, but not reported to agencies, were carefully observed while in their program.

Child care can serve an important function for children from troubled families. Abuse, or the risk of abuse, can be identified and steps can be taken to better ensure that children are protected from such behavior. The child care setting can provide an important stabilizing element to the child's life and can help connect the child and family with needed services. Current programs have indicated that success in each of these areas can be achieved if staff are properly trained.

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[74] Child Development Programs Advisory Committee. The Role of Child Care in Child Abuse Prevention, Undated document.

[75] Ibid.

Finding #11 - Child Care is Necessary to Enable Welfare Recipients to Receive Training For Work But Concerns With Continuity And Quality of Care Persist

Greater Avenues for Independence (GAIN) is a relatively new state program that was enacted in 1985 to help welfare parents obtain training and employment. While there are many positive aspects of this program, there are some problem areas. Many fear that GAIN recipients may displace the children of the working poor who may already be awaiting child care slots in the State Department of Education's subsidized program. Without sufficient subsidized child care spaces for GAIN recipients, the goals of the GAIN program may be undermined.

GAIN legislation was enacted to help parents obtain the training and employment necessary to terminate their dependence on welfare. An important element of this legislation is a component that funds child care for GAIN recipients. This element of the program is crucial to the success of job training and employment. GAIN also funds child care during a three-month "transition" period--when the participant gains employment and is no longer an AFDC recipient.

Counties implementing GAIN are required to perform child care availability surveys and to advise participants of the child care information services provided by local resource and referral agencies. Through a contract with the Resource and Referral Network, a statewide study determining the number of active child care providers and costs was completed. The study included a useful county-by-county calculation of the market rates for child care. Counties have worked closely with local resource and referral agencies to develop child care availability assessments.

GAIN child care is premised on parental choice for child care arrangements. The preferred form of reimbursement for child care under the program is to provide vouchers to fund the child care arrangements preferred by the parents. Some concerns have been raised regarding the topic of choice. These concerns center on the issue of whether parents in all counties are consistently provided information on the different options open to them. Additionally, parents will not be given the opportunity to wait for a child care opening with their choice of providers, if a wait is necessary.

Although GAIN recipients are currently eligible for subsidized child care through the Department of Education, their use of this program will increase demand on an already over-burdened program. In addition, fears have been expressed that GAIN recipients may displace the children of the working poor who may already be awaiting child care slots in the State Department of Education's subsidized programs.

Many child advocates also have expressed concerns regarding the continuity of care for GAIN children once they no longer receive GAIN-funded child care services. The GAIN subsidy for child care ends 90 days after obtaining employment. Some people are concerned that GAIN graduates may not be able to find employment that pays them enough to maintain the costs of the child care arrangements that were funded under GAIN. Thus, recipients may be forced to find other child care arrangements or to leave their children unattended while they work. Since continuity of care is an important element for the

well being of children, this may have a negative impact on the children of GAIN program graduates.

RUNAWAY/HOMELESS YOUTH

Finding #12 - Problems of Runaway/Homeless Youth Are Not Fully Recognized

Although there are no accurate statistics available on the number of runaway/homeless youth in California, many experts believe that there may be as many as 20,000 to 25,000 runaway youth on any given day. Although these children have a multitude of problems, adequate programs and services are not available to them. Since a majority of these youths are often forced to engage in criminal activity, prostitution, and drug use as a means of survival, intervention may be a cost-effective means of dealing with these youth. If their problems are not addressed now, there is a strong likelihood that these youths will not become responsible, productive adults and may be a burden on the State the rest of their lives.

The actual number of runaway/homeless youth is difficult to estimate. The federal Department of Health and Human Services estimated in 1983 that the number of children who runaway each year throughout the United States is between 733,000 and 1.3 million.[76]

A study on California's runaway and homeless youth population conducted by the California Child Youth and Family Coalition (CCYFC)[77] confirmed that providing the exact figure of California's runaway and homeless is not possible.

However, the report illustrated that in 1984 there may have been as many as 250,000 homeless youth. Exhibit II.9 summarizes the estimates of runaway and homeless youth based on the CCYFC study.

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[76] Runaway and Homeless Youth National Program Inspection, Office of the Inspector General, Department of Health and Human Services, October 1983, page 4.

[77] Olson-Raymer, California's Runaway and Homeless Youth Population, A Study by the California Child, Youth and Family Coalition, 1986.

EXHIBIT II.9

SUMMARY OF ESTIMATES
OF RUNAWAY AND HOMELESS YOUTH

Agency Reporting	Estimated Number of Runaway and Homeless	Number of Youth Served or Handled
Law enforcement	57,323 (166 agencies in 40 counties)	18,812 (137 agencies in 37 counties)
Probation	17,703 (25 departments in 25 counties)	8,096 (18 departments in 18 counties)
Public Social Services Agencies	12,967 (12 agencies in 12 counties)	3,259 (7 agencies in 7 counties)
Specialized Youth Serving Agencies	127,702 (19 agencies in 12 counties)	7,214* (19 agencies in 12 counties)
General Youth Serving Agencies	36,275 (12 agencies in 4 counties)	2,445 (8 agencies in 4 counties)
TOTALS	251,970	39,826

* This figure represents the total of those in the study questionnaire on the client characteristic survey, 27 agencies in 15 counties reported serving 9,980 runaways and homeless youth.

Source: "California's Runaway and Homeless Youth Population" by California Child, Youth and Family Coalition.

Exhibit II.9 shows that a small percentage of the runaway/homeless youth population in California are actually receiving services. Local agencies reported serving only 39,826 of the estimated 251,970 runaway and homeless youth, or 15.8 percent.

A Bush Program study, conducted by the University of California, Los Angeles, entitled "Focus on Runaway and Homeless Youth" concluded that neither experts nor available records could provide a reliable approximation of the number of runaway and homeless youth in Los Angeles County. However, they were able to identify a lack of community resources to serve this population and observed

that the lack of resources hinders the reasonable provision of services to runaway and homeless youth.[78]

For the purpose of this study, an individual is considered a "runaway/homeless" youth if he or she meets the following criteria:

- Is under the age of 18;
- Is living on the streets as a result of intolerable home conditions or by choice; and
- Has no adequate legal means of support for daily necessities.

In comparing other programs available for runaway/homeless youth in other states, Florida is the only state with a specific budget line specified for runaway services. In North Carolina there is a statewide fund called Community Alternatives for Youth. This fund is allocated to each county based on a per capita formula and programmed to fund runaway centers and other youth service programs.

In South Carolina the state operates and funds runaway centers. Federal funds are allocated to the State Department of Youth Services which administers the funds and operates the programs. However, California, which may have as many as 25 percent of the total adolescent runaway/homeless population, has no ongoing program for these youths.

Health and Mental Health Problems

Runaway/homeless youth as a group are characterized by a high incidence of mental and physical health problems, including chronic depression, sexually-transmitted diseases, and substance abuse. In addition, it is estimated that a majority have histories of physical and/or sexual abuse that contributed to these problems. A recent study prepared by the Los Angeles Children's Hospital entitled "A Risk Profile Comparison of Runaway and Non-Runaway Youth,"[79] concluded that runaway/homeless youth are at much greater risk of acquiring a wide variety of diseases and problem-producing behaviors than their non-runaway/homeless counterparts. This study reported a high level of intravenous drug use by runaway/homeless youth. In fact, approximately 35 percent of these youths indicated that they had used intravenous drugs in the last six months. Since intravenous drug users represent a high-risk population for acquired immune deficiency syndrome (AIDS), and because runaway/homeless youth may engage in prostitution to support themselves, the health problems of these youths could have a significant impact on the overall community.

The consequences of homelessness also often include serious physical and mental health problems, for which treatment, if at all available, is costly.

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[78] Rothman, Jack and Thomas David. Status Offenders in Los Angeles Focus on Runaway and Homeless Youth. September 9, 1985.

[79] Yates, Gary; Mackenzie, Richard; Cohen, Eric; Brady, Michael "A Risk Profile Comparison of Runaway and Non-Runaway Youth" 1985.

According to the same study, 84 percent of the runaway/homeless youth seen at a medical clinic in Los Angeles were diagnosed as being depressed and 18 percent were diagnosed as having major mental health problems. Moreover, when compared to their peers, runaway/homeless youth were 4.5 times as likely to be actively suicidal.

The National Network of Runaway and Youth Services recently completed a study entitled, "To Whom Do They Belong? A Profile of America's Runaway and Homeless Youth and the Programs That Help Them." In this study, they found a tremendous need for comprehensive mental health services for runaway and homeless youth. Shelters in every state noted that they are seeing more youth with more severe mental health problems than they were four to five years ago. The problems include: drug and alcohol abuse, suicidal tendencies, family tensions, juvenile court involvement, and psychiatric problems.

Risk of Involvement in Crime

Runaway/homeless youth are exposed to a high risk of involvement in crime. They are frequently victims of specific exploitative crimes, such as prostitution and child pornography. Federal studies estimate that approximately 25 percent of runaway youth become homeless street kids who are often exploited by criminal elements.[80] The Commission's study showed that homeless street youth often lead a virtual underground existence in our State's major urban cities, where they sleep in abandoned buildings, take drugs to soften their harsh world, and can become involved in prostitution in order to survive on the streets.

The costs of administering the juvenile and adult corrections systems and incarcerating offenders are very high, ranging up to $30,000 per person annually. Thus, intervention and diversion may be a much lower-cost alternative by preventing the "drift" of homeless street youth into criminal activity. This cost savings could be significant based on a federal study conducted in 1983 by the Department of Health and Human Services.[81] This study indicated that 75 percent of the hard-core "street kids" engage in criminal activity to support themselves and 50 percent engage in prostitution. The need to address the problems of homeless youth can be further demonstrated by the current overcrowding problems at the youth authority. Exhibit II.10 shows the gap between the projected population and the design bed capacity for wards in the Department of the Youth Authority.

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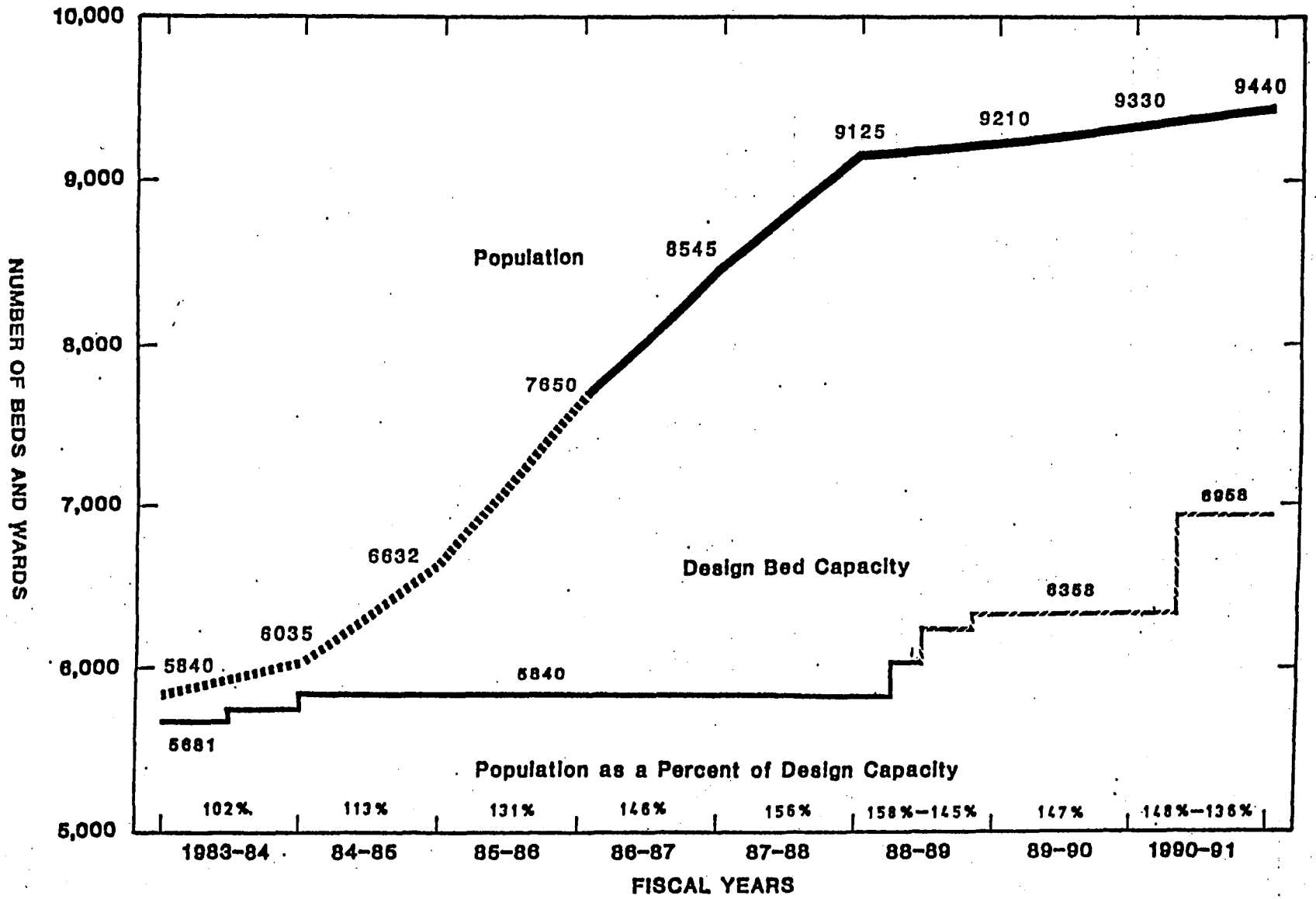
[80] United States Department of Health and Human Services Runaway and Homeless Youth, 1983.

[81] Ibid.

EXHIBIT II.10

Department of the Youth Authority

DESIGN CAPACITY AND POPULATION PROJECTIONS
FOR WARDS THROUGH FISCAL YEAR 1990-1991



Projected population

Initial funding approved in FY 1986-87 budget.

Revised 4/23/87

Exhibit II.10 shows that the gap between the projected population and the design bed capacity for wards in the Department of the Youth Authority is rapidly widening.

The population at Youth Authority is currently at the levels previously estimated for juvenile offenders for 1990. This is due in part to an increase in the average months served by a youthful offender for a crime. The Department of Youth Authority has identified four major strategies for youthful offenders:

- Reduction of intake;
- Reduction of institutional length of stay;
- Further crowding of existing capacity; and
- Expand existing capacity.

Presently, the youth authority is building a $58 million facility in Stockton that will provide 600 new beds. Whatever the strategy, it is clear that we can't build ourselves out of the dilemma. Prevention and intervention are the only mechanisms available to reduce the growth in juvenile offenders.

Finding #13 - Runaway/Homeless Youth Tend to "Fall Through The Cracks" of Public And Private Programs

California does not have an ongoing program for runaway/homeless youth. While the presence of runaway/homeless youth is a statewide phenomenon, relatively few state dollars are expended for these youth. Currently, the State is spending $1.1 million on projects specifically designed for runaway/homeless youth. This includes two pilot projects funded through the Homeless Youth Act, at a cost of $920,000 per year, and a Runaway Hotline costing $180,000 per year. Underfunding is partly due to a lack of understanding of these youths by the general population. Moreover, the current classification system in the Welfare and Institutions Code does not adequately recognize the needs of runaway/homeless youth for services. As a result, many runaway/homeless youths throughout the State are not receiving needed shelter, medical treatment, or counseling.

Level of State Effort

The low level of program activity targeted for runaway/homeless youth, both in the public and private sectors, suggests that the needs of this population are only beginning to be recognized. The survey of State programs identified only two State level programs designed to deal with this population--the Runaway Hotline and the AB 1596 Services to Homeless Youth Pilot Project, both of which are administered by the Governor's Office of Criminal Justice Planning. Funding for these programs is limited to short-term appropriations and there is, at present, no commitment of continuing financial resources. However, it is to the credit of the Governor and the Legislature that the State Runaway Hotline and the AB 1596 pilot projects have been initiated.

The current pilot projects serving runaway/homeless youth funded by AB 1596 (Agnos) provide the opportunity to demonstrate the effectiveness of integrated/coordinated services. The two projects authorized by the legislation are located in San Francisco and Los Angeles. These projects began operations as early as July 1986. During the first year of operation, demand for services is already reported to exceed capacity at both sites.

Lack of State Mandate for Services

While runaway/homeless youth could be subject to dependency hearings pursuant to Welfare and Institutions Code Section 300, in actuality this rarely occurs and is for the most part impractical. In addition, current public agency services provided pursuant to Welfare and Institutions Code Sections 601 and 602, and related provisions do not effectively direct resources to the needs of runaway/homeless youth.

Currently, "homelessness" does not qualify a youth for State-mandated services, such as welfare and food stamp programs, and there is no clear direction or mandate to local governments for serving this population. Being homeless does not, in itself, establish eligibility for youths. In the face of demands for funding from other better established programs, programs to serve the runaway/homeless youth population do not receive "secure" funding from the State. This is partly attributable to the lack of organization in state government charged with assuring the delivery of services to runaway/homeless youth. Thus, it is not difficult to see why this population

tends to "fall through the cracks" of the children's services delivery system.

Additionally, this population is difficult for traditional social programs to serve because most runaway/homeless youth are disconnected from their families or other sources of stability, such as school or work. The problem of serving the runaway/homeless youth population is compounded by the lack of reliable data concerning their numbers. The few programs designed to serve runaway/homeless youth consistently report an inability to serve the total number of youth seeking assistance. This is especially true for shelters in the Los Angeles area which turned away more than they were able to shelter between October 1986 and March 1987. For example, during the first nine months of the program, 2231 youth were sheltered. Of this amount, 1197 were sheltered at the Los Angeles Youth Network and 1034 in the Status Offender Detention Alternative Bed Program. An additional 2734 were turned away.

The Dependency Process

California has established a set of procedures whereby abused and neglected children are declared to be dependents of the Juvenile Court, pursuant to the provisions of Welfare and Institutions Code Section 300 et seq. The dependency process includes a court hearing conducted to inquire into the ability of their parents to provide for their welfare. In practice, this process is used mainly for children age 12 or under. Because social work professionals and court personnel believe that children in this age group are more susceptible than are older children to problems of abuse, efforts by social services agencies tend to focus on younger children.

A finding of dependency establishes eligibility for services funded through the Aid for Families with Dependent Children program (AFDC). As a practical matter, the pressure on public social service agencies to respond to reports of child abuse and to administer existing case load leaves little time for establishing dependency for runaway/homeless youth. Moreover, child protective service agencies typically are not used to working with older, more transient populations for whom it is difficult to establish eligibility for reimbursement for treatment services. It is a policy of many county Departments of Social Services to not provide services for out-of-county youth other than, in some cases, to provide transportation for them to return home. This is only of benefit to those runaway youth for whom family reunification is an option.

The Youthful Offender Process

Many of the runaway/homeless youth are known as "status offenders." These youth are classified as neither a criminal nor a delinquent, but rather a pre-delinquent. Until 1977, such youth could be incarcerated with ordinary juvenile criminals, even though they were legally innocent of any crime. However, AB 3121 (Dixon) was passed in 1977 which "decriminalized" runaways and other status offenders. Instead, runaways and other homeless youth now can not be detained more than 24 hours in most cases or up to 72 hours if they are being returned home. County Probation Departments were allowed, but not required, to establish separate facilities where runaway/homeless youth could be sheltered while attempts were made to return them to their home. The problem with helping these children is twofold.

First, there is a lack of necessary and adequate facilities. Outside the State foster care system, Commission staff have been able to identify the following:

- In Los Angeles County there are a total of 5 private non-profit runaway or homeless youth shelters with 48 beds plus a probation program with 25 beds in private foster homes available for a total runaway/homeless youth population which may be as much as 10,000 on any given day;

- In San Francisco with a homeless youth population estimated between 2,000 and 3,000 on any given day, there are 56 short-term shelter beds and 16 hotel voucher spaces available for homeless youth;

- Throughout the remainder of the State, there are 256 shelter beds available for runaway/homeless youth.[82]

The second problem is the confusion among the government agencies established to help these youth. It has been estimated that approximately one-third of California's homeless youth are victims of abuse or neglect.[83] However, status offenders come under the authority of the probation department and the juvenile justice system, while abused children are dealt with by the social service system on the state and local level. Therefore, when a youth is picked up by a police officer and tells the officer, "I'm a runaway because I was molested at home," the youth often is referred to the local social services agency as an abused child. The social services agency, in turn, may refuse to help the youth, saying that, as a status offender, this "problem child" belongs in the juvenile justice system. The youth needing help then "falls through the cracks" of the system. This dilemma appears to apply to many runaway/homeless youth.

Unique Problems of Minority Populations

Young people who find themselves "on the street" do not comprise a homogeneous population although they often share a distrust for public agencies and adult authority. This distrust may be compounded for members of cultural minorities, for whom cooperation from family and/or other community leaders may not be easy to obtain. For some youth, particularly newer immigrants, there are language barriers to obtaining service. Others will participate only in services that operate in non-traditional settings, such as programs for gay and lesbian youth and programs serving youth from different cultural backgrounds. Because runaway/homeless youth rarely are served pursuant to a court order which directs cooperation with a social service agency, active cooperation of participants is critical to the effectiveness of services.

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[82] Estimate provided by the Runaway Hotline.

[83] United States Department of Health and Human Services. Runaway and Homeless Youth, 1983.

Finding #14 - Models of Treatment Developed For Abused And Neglected Children or Youthful Offenders Generally Do Not Suit The Needs of Homeless Youth

Runaway/homeless youth generally require a wide array of services involving numerous agencies. Stabilization in a safe environment with a fixed responsibility for services is a key to effectively serving these youth. However, because few agencies are equipped to provide the whole range of services needed by youth, it is essential for these agencies to coordinate and provide referral services. Unfortunately, few communities provide this crucial coordination. As a result, many runaway/homeless youth are not served and for those that are served only a portion of their needs are met.

The services developed for assisting abused and neglected children and their families are often not appropriate for the runaway/homeless youth population. Unconventional means of connecting with these youths are often required to bring runaway/homeless youth to service programs, and few public agencies have the flexibility to use some of the techniques employed by successful private non-profit programs. Once contact has been established, runaway/homeless youth generally require a wide array of services, including food and shelter, health care, counseling and mental health services, education, job training and employment services. Since the runaway/homeless youth population also includes several subpopulations ranging from situational runaways to homeless street kids, different service approaches are required. There is a need for a variety of coordinated agency resources, operating on different models of service to effectively reach young people on the streets. Agencies involved could include:

- Community-Based Private Agencies;
- Law Enforcement;
- Social Services;
- Mental Health Services;
- Drug and Alcohol Services;
- Health Services; and
- Education.

Because few agencies are equipped to provide the whole range of services needed by these youth, active referral, follow-up and coordination are essential for an effective program. With the exception of the two pilot projects funded pursuant to AB 1596, no State programs are authorized or funded to coordinate services for this population.

The pilot project in Los Angeles brought together more than a dozen service agencies. These agencies have established an interlocking system of services for the county's runaway/homeless youth. This network includes community-based counseling centers, outreach agencies, law enforcement, public social services, education, emergency shelters, short-term shelters, placement agencies, and independent living programs. However, the Los Angeles effort is the exception, not the rule in working with runaway/homeless youth in California communities. Without adequate coordination, many youth will not receive appropriate treatment.

Finding #15 - Family Reunification is Not a Realistic Goal For Many Runaway/Homeless Youth

Family reunification, which is the primary objective of State-mandated child welfare services, is not a realistic goal for a significant portion of the runaway/homeless youth population who have been abandoned by their parents or who have left abusive family situations. In such cases, emancipation is a more realistic goal and this can be accomplished by independent living programs coupled with comprehensive services. However, few such programs are available for runaway/homeless youth. Other than limited-term emergency shelter facilities or foster care placements, there are insufficient stable, safe options for long-term shelter. Given this scarcity of resources, it is not surprising that so many youth remain on the streets.

The following case examples illustrate that the profiles of runaway/homeless youth are different and therefore require different approaches. Ann was referred to a community-based service program for runaway/homeless youth by a police officer who noticed her in a downtown neighborhood frequented by transients. She told program staff that she left home several weeks ago following a series of arguments with her mother over school. In addition, she had financial problems because she spent all her savings. She and her divorced mother "just don't get along." She is 16, and thinks she can take care of herself. She admits to being out of funds, but claims she knows she can get a job.

Another youth named Bob came to the attention of a mental health services worker through a referral from the emergency room of a large metropolitan hospital. He was receiving treatment for the third time in three months for a sexually-transmitted disease. The public health case worker became concerned over his safety after discovering that the youth was "surviving" through prostitution, and had no permanent residence. Through an initial counseling session, the mental health worker learned that Bob had been living on the streets for nearly six months after having been abandoned by his drug dependent mother. He is 15, has never attended school regularly, and has lived with his mother in many locations around the country. He cannot read above second grade level. He has a history of substance abuse problems and experiences severe depression.

Both these young people have come to the attention of a social services program. Both need help and assistance. There, the similarity ends. Ann's case presents the possibility of reunification with the family she left and to which she could possibly return. Her need for services is modest. In Bob's case, the reunification option is not present. He can only return to the streets or find an alternative living arrangement after leaving an emergency shelter program. Most importantly, Bob has a need for a range of treatment services, including substance abuse, mental health, and health care which are not currently available through emergency shelter programs that typically serve runaway/homeless youth.

While the level of resources committed to Ann's problem may not be sufficient to deal with every comparable case, there are, at least, the legal mechanisms and service mandates to address her problems. The same statement cannot be made in the case of Bob. Who is equipped to deal with Bob's problem?

As the previous examples illustrated, there are some runaway/homeless youth who potentially can be reunified with their families. However, there is another portion of the runaway/homeless youth population for whom family reunification is not a realistic goal. It is important to recognize the differences in the youth that make up the runaway/homeless youth population and to work with them accordingly.

Within the San Francisco Homeless Youth Network, there have always been a significant number of clients, 30 to 40 percent, who have continued or returned to the instability of street life because they were not ready to live independently in a stable environment. The Extended Care Program works with youth who have no viable options through their own family or other social service systems and are not immediately ready for independent living. The Extended Care Program has placement options including supervised placement in hotel rooms for older youth who are working; temporary intermediate and long-term foster care placement in a structured shelter for young women; and room and board in a halfway house for young men.

The Extended Care Program involves the following:

- Recruitment and selection of foster homes;
- Development of other community placement;
- Screening of youth for extended care;
- Case planning for youth;
- Placement directly into an extended care foster home, hotel voucher room, other appropriate residence, or referral to another agency for placement; and
- Support of youth as they make the transition from extended care placement to independence.

The Los Angeles Pilot Project has also been developing independent living programs through Job Corp and other training programs. In both instances, professionals are attempting to place youth in independent living and/or transitional programs to integrate them with society.

Finding #16 - Impediments Exist to Providing Services to Runaway/Homeless Youth at The Local Level

A variety of impediments exist that restrict the ability to provide services to runaway/homeless youth at the local level. These impediments include difficulty establishing or documenting residency for runaway/homeless youth, insufficient emergency and intermediate length shelter capacity, a lack of interagency cooperation and coordination, and inadequate continuing services for runaway/homeless youth. The Los Angeles pilot project found that only 29 percent of the youths that received shelter at the Los Angeles Youth Network were from within the city or county. As a result, many runaway/homeless youth do not receive needed services and must exist on the streets supporting themselves. This often includes resorting to criminal activity, drugs, and prostitution.

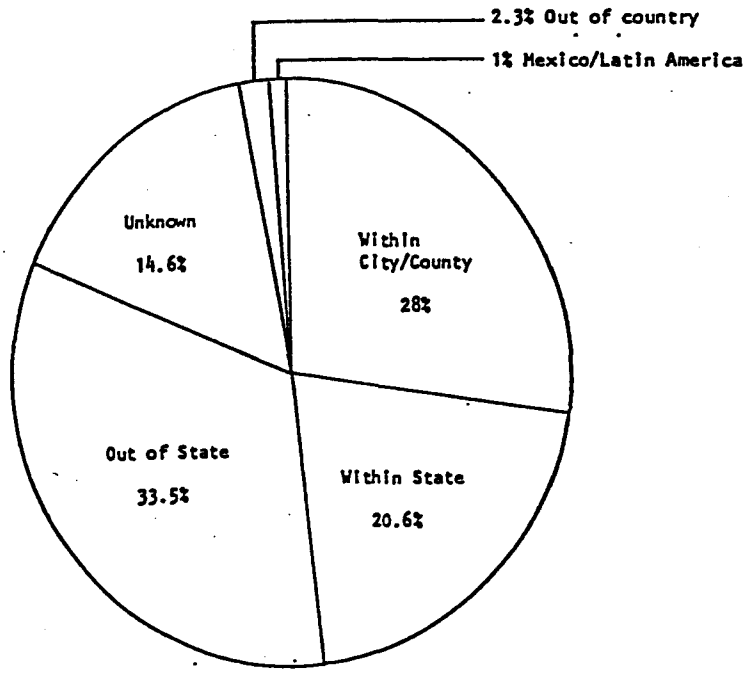
Residency and Other Administrative Requirements

Determination of residency and other administrative considerations complicate the provision of services to runaway/homeless youth in California. There is evidence that runaway/homeless youth who are unable to prove local residence have been denied services by public agencies.

Exhibit II.11 shows the origin of the youths that received shelter care through the Los Angeles Youth Network.

EXHIBIT II.11

ORIGIN OF YOUTH SHELTERED AT
LOS ANGELES YOUTH NETWORK



As Exhibit II.11 shows, 33.5 percent of the youth seen at the Los Angeles Youth Network were from out of state and almost 15 percent were from out of the country. Therefore, dealing with the homeless youth problem as a local rather than statewide program is not a viable solution.

In a written opinion dated October 23, 1986, California's Attorney General ruled that counties may not deny service to runaway/homeless youth simply because they are officially residents of some other county or state. Because runaway/homeless youth are under age 18, they are unable to receive financial aid from county general assistance welfare programs unless they have been declared emancipated by the court. Because securing legal emancipation is time consuming and requires more resources than are available to most runaway/homeless youth, few in this population will receive such assistance.

Runaway/homeless youth who are found to be dependent children are eligible for services under the AFDC foster care program, however, relatively few obtain service through this process because it requires time and the active cooperation that these youth are unlikely to provide. In addition, the priorities for dealing with reports of abuse and working with younger children limit the time social service workers have for dependency hearings for runaway/homeless youth. Service professionals who deal with this population observe that local jurisdictions rarely accept responsibility for coordinating services for runaway/homeless youth.

Insufficient Emergency and Intermediate Length Shelter Capacity

There is inadequate specialized emergency shelter capacity for runaway/homeless youth, and a lack of capacity or provision for intermediate length of stay facilities for youth lacking local "connections" or resources. Less than 75 beds are available in the greater Los Angeles area to serve a runaway/homeless population estimated to number in the thousands. In the San Francisco Bay Area, fewer than 60 short-term beds are available to serve a population also estimated in the thousands. Statewide, the number of specialized emergency shelter facilities equipped to serve runaway/homeless youth is not known. Based on a review of available data, such facilities also exist in Sacramento, Orange County and San Diego. The experience gained from the current pilot projects established pursuant to AB 1596 for runaway/homeless youth in San Francisco and Los Angeles may indicate the need for many more beds in these and other parts of the State.

Although state and federal funding has been provided for the operation and construction of some shelter facilities, length of stay is generally limited to two weeks under federal guidelines for facilities receiving federal funds. Two weeks does not provide sufficient time to stabilize a youth who has experienced multiple problems. Greater flexibility is needed regarding length of stay to serve those members of the runaway/homeless youth population who cannot be returned home and whose only alternative other than living on the streets may be to exchange sex for shelter, or resort to other criminal activities.

Local zoning, building codes, and land use requirements frequently have inhibited the location and operation of shelter facilities. Organizations seeking to open licensed emergency shelter facilities have found that opposition from neighbors and building code requirements have prevented the

use of existing available space in the locations most suitable--typically those in and around downtown areas. In addition, inflexible enforcement of State licensing requirements has limited the ability of certain programs to offer emergency shelter services.

Lack of Interagency Cooperation

New protocols between law enforcement and social service agencies are necessary in many communities to avoid "ping-pong" contacts with agencies and to avoid counter-productive administrative activity for law enforcement agencies. Because juvenile justice agencies no longer admit runaway/homeless youth into their juvenile halls upon referral, law enforcement agencies often have no place to send runaway/homeless youth picked up on the street. Youth often are picked up only to be released on the streets, a repetitive cycle that creates frustration and non-productive administrative workload for law enforcement. Some law enforcement organizations lack strong working relations with social programs, consequently referrals to social agencies does not always occur. The Governor's Office of Criminal Justice Planning has recognized this problem and is seeking a means to promote and encourage the transfer of information among law enforcement and social services agencies serving the runaway/homeless population through current AB 1596 projects.

Inadequate Continuing Services for Runaway/Homeless Youth

Most of the programs serving runaway/homeless youth are operated by private agencies. Because these programs are not always well integrated with established public programs, access to treatment services becomes complicated. In the absence of a state mandate to serve this population, the response has come from concerned individuals and agencies in communities where the problem has been most visible. Because runaway/homeless youth are unable to pay for services such as health care, some other agency must "pick up the tab" for such services. While local sources such as the United Way play a significant role in supporting services to needy populations, they are unwilling to assume complete continuing responsibility for funding what are generally perceived as "public agency responsibilities." The voluntary sector agencies which serve the runaway/homeless are often the only help available.

Finding #17 - The Homeless Pilot Projects Are Stabilizing Many Runaway/Homeless Youth

The state recently established two pilot projects through the Homeless Youth Act to serve the runaway/homeless population. In addition to providing a continuum of coordinated services for these youth, a secondary benefit of the pilot projects has been the collection of data identifying the origin of the youth, demographics, ethnicity and the status at intake. The result of the pilot project after the first year of operation is that the State is able to identify specific service needs of this population. Prior to the pilot project's integration and coordination of the service delivery for homeless youths was not possible. The Homeless Youth Act recognized a need for effectively planning services for youth.

Many homeless youths are living on the streets in the major urban centers of California without adequate food, shelter, health care or financial support. As the statistics show, many come from out-of-city, out-of-county, or out-of-state locations and have a history of physical or sexual abuse. The youths may have run away or been forced out of their homes and onto the streets. There they fall prey to drug abuse, prostitution and other illegal activities. There is a recognized need for providing at least a minimum level of remedial services to these youths. A vast majority of these homeless youths are not part of an extended family and are ineligible for most state programs which are aimed at homeless adults and families.

The Homeless Youth Act has been successful in meeting the proven need for creative, enhanced and expanded outreach services; increased food, shelter, and clothing availability; better access to medical assistance; increased counseling and long-term stabilization planning. With all shelters staying continually filled to capacity and youths having to be turned away from services, the need for programs such as the homeless youth pilot projects is obvious. Agencies involved in the pilot projects, after only one year, have shown how the networking of services for homeless youths can provide an environment conducive to keeping young people involved in programs and discouraging them from returning to the streets.

San Francisco Pilot Project

The San Francisco Homeless Youth Pilot Project Network includes five major agencies:

- Catholic Charities (administration of the grant and extended care);
- Diamond Street Youth Shelter (shelter, food, and counseling);
- Central City Hospitality House (shelter, food, case management, counseling, and independent living);
- Larkin Street Youth Center (outreach, drop-in, medical screening and counseling); and
- Huckleberry House/Youth Advocates (family reunification, shelter, food and counseling).

Youth service committees and advisory councils, as well as interagency working agreements in San Francisco, create an environment wherein other agencies not directly funded by the homeless youth pilot project grant become involved with the network activities. Agencies that are part of the San

Francisco network have developed good working relationships with local law enforcement, especially in the Polk Street-Tenderloin area. The San Francisco Police Department has been of great assistance in getting homeless youths referred to the service agencies.

All network agencies are well established and have histories of serving youth in San Francisco. These agencies also receive funds from other sources. The homeless youth grant funds are used to enhance or complement existing programs, consequently the start-up time was minimal and the pilot project became operational immediately after the grant award on July 1, 1986.

Outreach services to homeless youths in San Francisco are provided on a drop-in basis at Hospitality House, Larkin Street Youth Center or Diamond Street Shelter, and on a street outreach basis by staff of the Larkin Street Center and Catholic Charities. Not only is information disseminated to youths on the availability of services, but also on such important topics as AIDS. Through June 30, 1987, 4,967 contacts with youths had been made through outreach services in San Francisco.

Food is provided to youths involved with the San Francisco network through the use of meal vouchers accepted at participating food establishments or on-site meal preparation. All agencies in the network can provide food in one of these two ways. Through June 30, 1987, 17,067 meals were provided to homeless youths as a part of the homeless youth pilot project in San Francisco.

Shelter for homeless youths in San Francisco is provided by Diamond Street Youth Shelter, Huckleberry House and Hospitality House. Diamond Street is a 20-bed, 20-day emergency shelter and is the primary resource for the network in providing emergency residential placement for homeless youths while counseling services are provided. It provides the only emergency shelter for this population in San Francisco and would have closed down had it not been for the Homeless Youth Act funds. Hospitality House is a 10-bed, 60-day interim shelter for homeless youths which provides an initial step in the transition to a more permanent, stable living arrangement. Huckleberry House is a 6-bed, 48-hour emergency shelter working primarily with local runaways who need a place to reside temporarily while placement or family reunification plans are being developed. Through June 30, 1987, 1,063 youths were sheltered in the San Francisco network. All shelters in San Francisco operated at full capacity.

Medical screening is provided to street youths by Larkin Street Youth Center and Huckleberry House. This screening assists youths in problem diagnosis and guidance to an appropriate agency for mental or physical disorder services. Through June 30, 1987, 349 youth received medical screening services in the San Francisco network.

While all agencies of the San Francisco network provide counseling services to youths, the most comprehensive case management and day counseling programs are offered by Larkin Street Youth Center and Hospitality House. Through these programs, youths are provided assistance with education, employment, health and other personal needs. All youths in the shelter facility also must be involved with the day program by actively looking for employment,

working at a job or being involved with some component of the educational or counseling program.

All agencies in the San Francisco network assist youths in long-term stabilization planning. If family reunification is appropriate it will be the treatment of choice. However, because the homeless youths that these agencies work with often cannot go home, it is necessary to find alternative long-term placement for them. Often, a program such as independent living is the most suitable alternative, while at other times it may be a group home, foster care, or other out-of-home placement. Long-term stabilization programs funded partially or in total through this grant in San Francisco are an 8-bed, 60-day hotel voucher program for independent living administered by Hospitality House, foster care through Huckleberry House and Catholic Charities, and intermediate and long-term housing options with the goal of independent living through Catholic Charities. Through June 30, 1987, 258 youth were placed into long-term stabilization programs through the San Francisco homeless youth pilot project. The agencies of the network which place youths in long-term stabilization programs provide follow-up at 30-day intervals for six months or longer to assure that placements are continuing to work.

Finally, under the leadership of Catholic Charities, the network is gathering statistical data which will assist state executive and legislative decision-makers on the needs and continued funding of the programs. The statistics will also help agencies determine the most appropriate service needs for these youths.

Los Angeles Project

The Division of Adolescent Medicine of Childrens Hospital of Los Angeles is the lead agency and principal grant recipient for the homeless youth pilot project in the County of Los Angeles. A regional network had been developed over the past five years through the Hospital's High Risk Youth Project, which had been funded by the Robert Wood Johnson Foundation to provide consolidated health services to high risk youth in the Hollywood/Wilshire area. The project network includes the following agencies:

- Childrens Hospital of Los Angeles (administration of the grant, medical screening, counseling, and project evaluation);
- Los Angeles Free Clinic (medical screening);
- Los Angeles Youth Network (shelter, food, and counseling)
- Stepping Stone (shelter, food, and counseling)
- Aviva Respite Center (shelter, food, and counseling)
- 1736 Crises Center (shelter, food, and counseling)
- Options House (shelter, food, and counseling)
- Gay and Lesbian Community Services Center (outreach);

- Children of the Night (outreach);
- Angel's Flight (outreach);
- Teen Canteen (outreach);
- Triangle Project (foster care); and
- Hollywood YMCA (counseling, psychotherapy)

A key service provider of the Los Angeles pilot project, the Los Angeles Youth Network (LAYN), is new and was implemented through project grant funds. Therefore, although the grant was approved for Los Angeles on July 1, 1986, actual start-up of the project began in early October when the LAYN shelter and case management became operational.

Strong communication links have been developed among youth service providers, law enforcement and the Los Angeles homeless youth pilot project agencies. This has been accomplished through regular meetings of these organizations and establishment of interagency agreements that work to enhance the efforts of the pilot project. Presently, 20 agencies, from throughout L.A. County participate in a Coordinating Council for Homeless Youth Services. They provide advice in program design, function, and direction. A model agreement has been developed between the Los Angeles Police Department's Hollywood Division and the homeless youth pilot project wherein the police are taking an active role in working to get youths into the project and keep them there. Officers bring youths directly to the LAYN shelter and case management center. It is one of the few examples of local law enforcement directly making referrals to a private youth-serving agency.

A letter dated July 8, 1987 from the Commanding Officer of the Hollywood Detective Division illustrates the results of the coordinated effort. He stated that during the first nine months of the program, 59 youths were referred directly to the program and that the normal expenditure of time to handle a runaway is eight hours for each youth. The direct referral to the Los Angeles Youth Network can be completed in two hours per youth. Therefore, the net savings to the Hollywood area of the Los Angeles Police Department was 354 hours of officers time during the first nine months of the project. Specifically, the commanding officer stated that:

> Hollywood continues to be a mecca for homeless and runaway youth. Because of the mammoth ongoing revitalization undertaking in the Hollywood area, there are many vacant buildings. These buildings are being sought out by the homeless for shelters. Presently, approximately six out of every ten youth picked up by the Hollywood area police are being detained and processed through normal police channels because the Project Homeless Youth is unable to accommodate them. As I have previously indicated, if your project were to be tripled in size, the Hollywood Police Division would still be able to fill all your vacancies.

Outreach services to homeless youth in Los Angeles are accomplished through on-the-street contacts, drop-in centers and local telephone hotlines at the three contracted outreach agencies. Specific contractual agreements have

been signed with the Gay and Lesbian Community Services Center. Angel's Flight and Teen Canteen provide outreach as a part of the pilot project. Children of the Night also does outreach in cooperation with the project even though no grant funds are provided. From October 1, 1986 through June 30, 1987, 6,456 youth were contacted through the pilot project outreach program in Los Angeles.

Food is provided to homeless youths involved in the pilot project by the LAYN through restaurant vouchers or on-site meal preparation. Although many of the agencies associated with the pilot project have the capability to provide food, statistical data is only being kept on meals provided by the LAYN. From October 1, 1986 through June 30, 1987, 13,901 meals were provided to homeless youths by this component of the pilot project in Los Angeles.

Shelter is also provided by LAYN. This agency operates a 20-bed, 60-day long-term shelter. The shelter is only open at night. During the day the clients are seen at a separate case management facility. Kitchen and shower facilities are located at the case management center along with counseling and transportation to medical appointments. From October 1, 1986 through June 1987, 460 youth were sheltered at LAYN as part of the homeless youth pilot project. The average length of stay was approximately 30 days, and the shelter has operated at capacity since it became operational.

Medical screening is provided to street youth referred by LAYN and other collaborating agencies through Childrens Hospital of Los Angeles and the Los Angeles Free Clinic. A high emphasis is placed on the physician-patient relationship at initial intervention with street youths in Los Angeles. Although a youth may be served by a physician for a single medical problem, techniques used result in a youth sharing many other aspects of his or her life. This has allowed the physician to prescribe a wider range of services to deal with the youth's needs. Interdisciplinary teams have been established through the Division of Adolescent Medicine, Childrens Hospital of Los Angeles to allow for case review and appropriate medical referral. Through June 30, 1987, 561 youths received medical screening in Los Angeles as part of the homeless youth pilot project.

All agencies that are associated with the Los Angeles homeless youth pilot project provide some form of counseling services to youths. However, a comprehensive case management program offered by LAYN is the central long-term counseling component of the project. Its goal is to help young people acquire the necessary personal skills and stability to move off the streets. Through the case management program, youths are provided assistance and guidance in education, employment, living skills, and other areas that relate to their future well-being. All youths in the shelter facility also must be involved with the day program by actively looking for employment, working at a job or being involved with some component of the educational or counseling program.

Long-term stabilization planning for homeless youths in the Los Angeles pilot project is a part of the LAYN program. As discussed in the San Francisco project, if a family reunification is appropriate it will be the treatment of choice. Since the homeless youths these agencies work with often can not go home it is necessary to find alternative long-term placement for them. Often, independent living is the most suitable alternative, while at other

times it may be a group home, foster care or other out-of-home placement. A special unit of the Los Angeles County Department of Childrens Services, the Runaway Adolescent Pilot Project RAPP, is co-located with the LAYN case management center to facilitate foster and group care placement for eligible project clients and youths referred from collaborating agencies. The Los Angeles network has found through the first year of operation that one of the most viable long-term living arrangements for youths is independent living. An expanded program component to meet this need is included in Los Angeles' second year grant application. From October 1, 1986 through June 30, 1987, 212 youths entered the long-term stabilization program at the Los Angeles Youth Network.

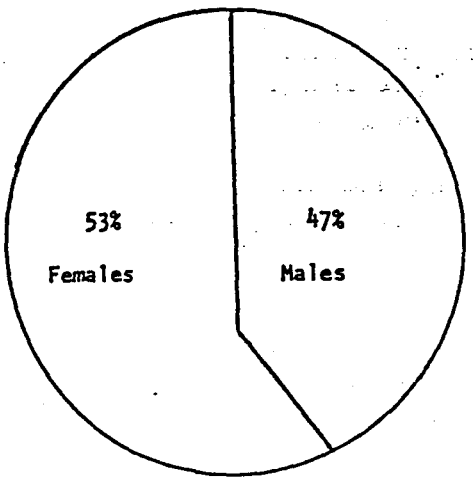
Childrens Hospital provides follow-up at 30, 60, 90, and 180-day intervals to assure that placements are continuing to work for youths placed in long-term stabilization living arrangements. Of the first 91 former clients due for follow-up after 90 days, 70 (or 77 percent) were contacted. Of those contacted, 87 percent were still at their original placement or in another stable living situation.

Exhibit II.12 presents profile data for youth sheltered by the Los Angeles Youth Network.

EXHIBIT II.12

PROFILE DATA FOR YOUTH SHELTERED
AT THE LOS ANGELES YOUTH NETWORK

Demographic



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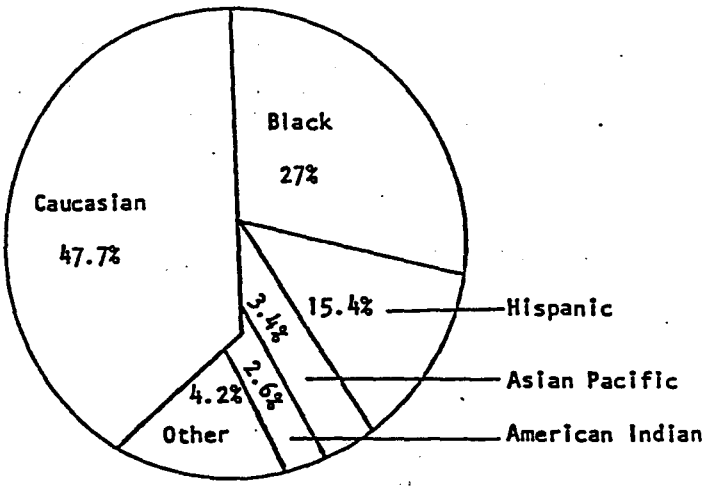
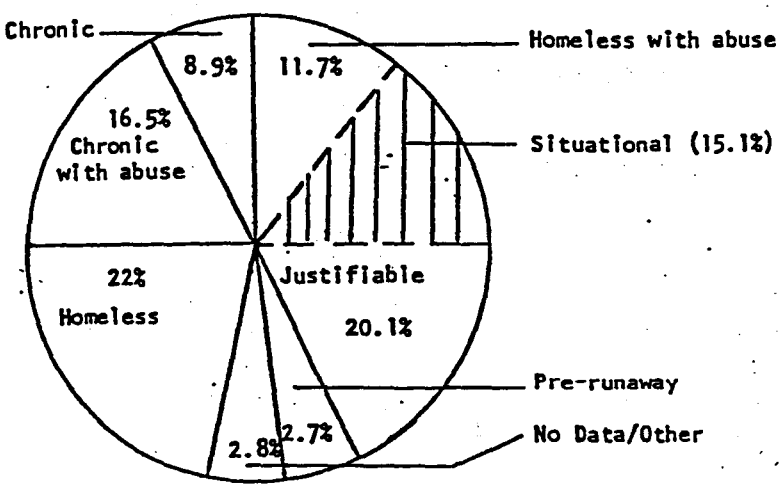


Status at Intake



As Exhibit II.12 illustrates, of those youths receiving shelter, 53 percent are young women and 47 percent are young men. It also shows that of the youth receiving shelter, only 15 percent are youth who ran away from family situations that can be worked out and only 29 percent are from Los Angeles City and County. In addition, the data collected shows that 33.7 percent of those sheltered were homeless with no home or out-of-home placement to which they might return and another 25 percent were chronic runaways who were unlikely to be returned home or to placement. This information, coupled with data showing the individual components of the Homeless Youth Act is presented in detail in Appendix D which provides categorical definitions and statistical information. The statistical information is valuable in planning future services for this homeless population.

Exhibit II.13 depicts the combined effort of the San Francisco and Los Angeles homeless youth pilot projects through the first three quarters of 1986-87.

EXHIBIT II.13

HOMELESS YOUTH PILOT PROJECTS STATISTICS
THE FIRST YEAR OF OPERATIONS ENDING JUNE 30, 1987

SERVICE	SAN FRANCISCO	LOS ANGELES	TOTAL*
Number Contacted	4,967	6,456	11,423
Meals Served	17,067	13,901	30,968
Number Sheltered**	1,063	1,197	2,234
Number Medically Screened	349	561	910
Number Placed in Long-Term Stabilization Programs	258	212	470

* The disparity in totals for Los Angeles and San Francisco are partially the result of the difference in operational implementation dates. Because San Francisco's homeless youth network was created from existing agencies they were able to begin tracking service delivery from the date of the grant award, July 1, 1986. In Los Angeles, data tracking began with the operational start-up of the Los Angeles Youth Network's shelter and case management center on October 1, 1986.

** In Los Angeles the homeless youth pilot project dollars fund a 20-bed, 60-day shelter facility in Los Angeles (Los Angeles Youth Network). There are other agencies that are a part of the Los Angeles homeless youth pilot projects that operate shelters. They include Stepping Stone, Aviva Respite Center, Options House, 1736 Projects and the Probation Departments Status Offender Dentention Alternatives (SODA) program which provide short-term shelter services.

In San Francisco the Pilot Project partially funds a 20-bed, 20-day shelter (Diamond Street) and a 10-bed, 60-day shelter facility in San Francisco. Also, Huckleberry House (6-bed, short-term shelter for local runaways) in San Francisco is providing long-term stabilization planning as a part of the project.

Exhibit II.13 shows that the two pilot projects sheltered 2,234 youths, provided 30,000 meals and placed 470 in a long-term stabilization program during fiscal year 1986-87.

The Homeless Youth Act has been successful in meeting the proven need for outreach services; increased food, shelter, and clothing availability; better access to medical assistance; increased counseling, and long-term stabilization planning. With all shelters staying continually filled to capacity and youths having to be turned away from services, the need for programs such as the homeless youth pilot projects is obvious. Agencies involved in the success of the pilot projects, after only one year, have shown how the networking of services for homeless youths can provide an environment conducive to keeping young people involved in programs and discouraging them from returning to the streets.

ABUSED AND NEGLECTED CHILDREN

Finding #18 - Increased Number of Reports of Child Abuse And Neglect Have Contributed to Workload Problems

California's children's protective service system is experiencing a dramatic rise in the number of reports of abuse and neglect. This trend has been influenced by recent changes in legislation and the public's increasing awareness of the plight of abused and neglected children. The increased number of reports that need to be investigated, combined with a shortage of needed services and a lack of interagency cooperation, have resulted in severe workload problems for child welfare workers and have reduced the level of services provided to abused and neglected children.

Increased Number of Reports

California's Child Abuse Reporting Law, Penal Code Sections 11165 through 11174, requires that school employees, medical personnel, child care workers, child welfare workers and all others who work with children must immediately report all cases of suspected child abuse. The law also requires that commercial film or photographic print processors report the depiction of any child under the age of 14 engaged in sexual conduct. All "mandated reporters", as they are called, are required to file prescribed reports with child protective agencies within 36 hours. Law enforcement and/or child welfare agencies must investigate the reports and copies must be provided to the Attorney General. A central registry of such complaints is maintained in Sacramento by the Department of Justice.

While there are problems with the system to protect abused and neglected children, such legislation is needed and useful. Studies across the nation have shown drastic reductions in child fatalities following the enactment of child protective legislation. For example, within five years of the passage of a comprehensive reporting law in the State of New York, there was a 50 percent reduction in child fatalities. In Denver, Colorado, deaths due to maltreatment dropped from 20 per year to less than one per year.[84]

Media attention to the importance of reporting cases of child abuse and neglect have deepened public concern and involvement in the problem. The result of this attention and concern has been a dramatic increase in the number of reported cases of child abuse and neglect. Exhibit II.14 summarizes the number of emergency responses from 1982 to 1986.

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[84] Besharov, Douglas, "Doing Something About Child Abuse: The Need to Narrow the Grounds for State Intervention." Harvard Journal of Law and Public Policy. Summer, 1985.

EXHIBIT II.14

SUMMARY OF TOTAL EMERGENCY RESPONSES IN CALIFORNIA FOR CHILD PROTECTIVE SERVICES FROM 1982 TO 1986

Year	Number of Responses	Increased Number of Cases	Percent Change
1982	73,473	-	-
1983	107,573	34,100	46.4
1984	250,271	142,698	132.6
1985	295,650	45,379	18.1
1986	342,001	46,351	15.7
Total Change from 1982 to 1986		268,528	365.5

Source: Compiled with data provided by Statistical Services, California Department of Social Services.

As shown in Exhibit II.14, the number of emergency responses to reports of child abuse and neglect swelled from 73,473 in 1982, to 342,001 in 1986, an increase of 268,528 reports, or 365.5 percent. These statistics indicate responses to reports of child physical, sexual and emotional abuse, general and severe neglect, as well as child exploitation and absence of a parent or guardian. While the dramatic increases in reports reflected in the statistics shown in Exhibit II.14 are indicative of a trend toward increased reporting experienced throughout the nation, there are numerous factors that cloud the accuracy of the statistics.

For example, the statistical services office of the State Department of Social Services maintains records of the number of responses that county child welfare agencies claim to have made to reports of various categories of child maltreatment. Exhibit II.14 presents such statistics. However, statistics reflecting the entire number of reports of abuse or neglect, including those are counted over the phone, are not maintained by any State office.

The Department of Justice maintains the Child Abuse Central Index which keeps statistics only on investigated reports of child physical or sexual child abuse or severe child neglect. For example, the Department of Justice reports that there were 60,627 investigated cases of child abuse in 1985. Additionally, various departments and statistics utilize only certain categories of child maltreatment in their statistics for comparative purposes.

There are other variations in current data collection techniques that make it difficult to get an accurate count of the magnitude of child abuse and neglect in the State. For example, all totals of child abuse and neglect include duplicate reports. This problem seems to be shared by most states. A report published last year by the American Humane Association indicated

that only five states in the Nation collect statistics on child maltreatment that do no include duplicate reports.[85]

The occurrence of duplicative reports can be compounded by the fact that reports of child maltreatment usually reflect the number of children reported. Several children who are maltreated by their parents, of course, would be counted separately. While statistics reflect the number of children maltreated, they do not reflect the number of people who abuse or neglect children. In a partial attempt to correct this, Statistical Services within the State Department of Social Services recently began maintaining statistics on the number of families receiving an emergency response for child maltreatment. For example, in 1985, there were 295,769 emergency responses for child protective services. These emergency responses involved 159,060 families.[86]

In recent years, there has been considerable discussion surrounding the percentage of child abuse and neglect reports that are "unsubstantiated". Although current recordkeeping procedures preclude precise calculation of cases that are "unsubstantiated", State Department of Social Services officials have stated that the percentage may be as high as 60 percent.[87] This figure can be deceiving, however, because interpretations of it can vary. For example, California defines an unsubstantiated report of child maltreatment as a report for which there was insufficient evidence to prove child abuse. It is not currently possible to determine how many unsubstantiated cases of abuse may be substantiated later with a subsequent report and investigation.

Similarly, there have been reports that the number of "false reports" of child abuse and neglect are increasing. A false report is not necessarily intentional. In fact, evidence suggests that in the zeal to protect children from harm, unintentional false reports have increased. There is some dispute, however, over the magnitude of malicious false reports of child abuse.

Recent attention has been directed to the possible increase of malicious reports of child abuse or neglect. This may occur in cases of family conflict, particularly marital disputes and child custody battles where a report is made in an effort to embarrass or discredit the other party. Such allegations typically involve accusations of sexual abuse. A recent

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[85] American Human Association, Highlights of Official Child Neglect and Abuse Reporting, 1984.

[86] Unpublished data provided by Statistical Services, California Department of Social Services.

[87] McMahon, Linda, Director, Department of Social Services. Testimony to Little Hoover Commission at Children's Services Hearing. September 25, 1986.

Suter, Loren, Department of Social Services. Testimony to Senate Select Committee on Children and Youth Hearing. December 4, 1986.

publication by the Association of Family and Conciliation Courts indicates that deliberate false allegations made to influence the custody decision or to cause harm to an ex-spouse are, in fact, rare. The study found that although malicious reports do occur, the amount of media and other attention directed to such cases is disproportionate to its actual practice. In fact, the report concluded that the amount of attention to the few cases of malicious reports may cause harm to reports of true abuse that are brought during child custody proceedings.[88] When allegations of abuse are brought after a custody suit or other court action begins, it is unreasonable to conclude that these cases have been made falsely. Any parent wishing to protect their child from abuse would wish the abuse to be a factor in custody decisions. Additionally, abuse may begin after separation or divorce.

Impact of Increased Reports on Case Management

According to the Director of the State Department of Social Services, State funding targeted specifically to child welfare services programs increased from $129,073,000 in 1982, to $266,683,000 in 1986.[89] However, the 1980's also brought reductions in the amount of local and federal funding for child welfare services. The impact of local funding constraints imposed by Proposition 13 combined with drastic reductions in Federal Title XX and Title IV-B allocations in 1981, caused a gradual yet drastic erosion of services to neglected and abused children. In part, the substantial increases in State funding in recent years came in response to public outcry about the lack of adequate services for neglected and abused children which resulted from decreased funding from other sources. However, there is still concern that the recent increases in funding have not kept pace with the increased case management workload and the demand for children's services.

A recent report on working conditions of social workers in San Francisco found that workloads for those handling child abuse and neglect cases are unmanageable. While national workload standards recommend 18 to 20 cases per worker, the average caseload per social worker in San Francisco is 30. Furthermore, those working in the permanency planning program consistently work 10 hours of overtime per week with no financial reimbursement. The report stated that, "Ultimately services to children must fall by the wayside".[90]

The State Department of Social Services is currently evaluating workload standards for various positions within child protective services. A report evaluating workload standards for investigators of foster and group homes

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[88] Thoennes, Nancy and Pearson, Jessica. Summary of Findings from the Sexual Abuse Allegations Project, The Association of Family and Concilitory Courts. Denver, CO, 1987.

[89] McMahon, Linda. Testimony at Little Hoover Commission Hearing, San Francisco. September 25, 1986.

[90] Supervisorial Staff, Family and Children's Division. Every Three Hours. Unpublished Document, June 18, 1986.

concluded that present standards were inadequate. The report, issued by the Department of General Services recommended that caseloads be reduced from the present level of 115 to 89.1 facilities per evaluator.[91]

A recent Los Angeles County survey indicated severe workload problems in adoption services. The program has been handicapped by insufficient funding. State funding for adoption services is closed-ended and does not increase with the level of services offered. At the same time, Los Angeles, like other California counties, has experienced an increase in hard-to-place children, increased numbers of court cases, and State required services. In Los Angeles, the result is that at the end of June 1987, 550 legally freed children awaited adoption and approximately 2,000 more were under study for possible adoption. Using state-mandated workload guidelines, the report found that Los Angeles County should have funds for 150 professional adoptions staff; however, the State allocated funding for only 89.[92]

Adoption workers in San Francisco also experience severe workload problems. A recent report estimates that the over 20 functions required of adoption workers requires a minimum of a 55 hours per work week, barring any unexpected problems or crises which could add up to 15 additional hours. Like adoption workers elsewhere in the State, San Francisco adoption workers can have adoptions pending in a variety of different states. One overburdened worker in San Francisco stated, "I have index cards to keep the names straight. I barely have enough time to shake a child's hand, let alone hug or provide him some kind of meaningful conversation."[93]

The problems involved with excessive caseloads are compounded by severe shortages of services for children. When placement is necessary, an ideal situation would allow the social worker to choose a foster home that is most suitable to the child's personality and needs. However, placement shortages often mean that the social worker must spend his or her time searching for any available opening, regardless of its compatibility with the child's needs. Even the best trained and experienced social worker is unable to accommodate the needs of children when services are lacking.

Due to the limited capacity to provide services, current workload pressures can have disastrous effects on children and families. In fact, the resulting procedural delays and limited spaces in appropriate programs combined with the lack of time and resources to appropriately educate caseworkers, have led to the alarming fact that reporting abuse or neglect does not assure a child's safety. During its study, the Commission heard numerous

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[91] Department of General Services, Department of General Services, Community Care and Licensing: County Evaluators Staffing Standards, April 1986.

[92] Unpublished Report of the Funding Sources Subcommittee of the Children's Budget Implementation Coordination Committee, 1987.

[93] Supervisorial Staff, Family and Children's Division Every Three Hours, Unpublished Document dated June 18, 1986, p.11.

heartbreaking accounts of children who are denied services they desperately need, as well as accounts of other children who were unnecessarily removed from their home. These problems attest to the fact that deep-rooted problems exist in our current child protective services system.

Increased reports of abuse and neglect, combined with inadequate funding, have contributed to unmanageable workloads throughout the State. Workers that are overwhelmed are hard-pressed to perform well, even when training efforts are adequate. But, current conditions are such that training provided is often inadequate. The result is that, too often, cases are inappropriately handled and needed services are not delivered.

Finding #19 - Current Approaches For Abuse And Neglect May Prove Damaging to Families and Children

Incorrect judgements, staff with inadequate training, and unnecessarily complicated service delivery systems are too common in dealing with abuse and neglect cases. County child welfare workers are faced with making extremely difficult decisions in the investigation and resolution of reports of child abuse and neglect. The sheer volume of cases currently being referred for investigation combined with inadequate training for workers and a lack of necessary services have contributed to the fact that some families who are reported to child welfare services are harmed by unnecessary and inappropriate treatment. In addition, the negative interactions that some children and their families experience with the child welfare system in California cause problems for children and families that could often be avoided.

Difficult Decisions Regarding Abuse and Neglect

Staff members within county child welfare departments have significant responsibilities when investigating a report of child abuse and neglect and determining how to resolve the case. When a report of child abuse or neglect is received it demands prompt action. Investigators must decide whether or not children can remain safely in their homes. They must often base their decisions on incomplete and conflicting information. Then the investigators are forced to make a decision with possibly devastating consequences. If they leave children in their homes they may be further abused or killed. If they unnecessarily remove them, families can be torn apart by the allegations and the often long, grueling process that can be involved in reversing the error.

The large and growing number of reports of child abuse and neglect in California compound the problem of investigating and responding appropriately to child abuse and neglect reports. As previously mentioned, the State Department of Social Services has reported that the number of emergency responses for child protective services increased from 73,473 in 1982, to 342,000 in 1986, an increase in reports of 268,528, or 365 percent over a five-year period.[94] This dramatic growth in the number of reports has strained the ability of county welfare departments to provide the required investigation and support services.

During a Little Hoover Commission hearing in San Francisco on July 30, 1986, the Commission heard heartbreaking testimony from parents whose families were torn apart as a result of alleged mishandling of reports of child abuse and neglect. The Commission has also received numerous letters from families complaining that they had been wrongly accused of child abuse and had suffered from unnecessary treatment in the child protection services system in California. The situation endured by the Jones family exemplifies features common to the complaints we received.

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[94] Unpublished data furnished by Statistical Services of the State Department of Social Services.

The Jones' family became involved with the child protective services system after Robin Jones brought her four-year old daughter Sandy to the doctor. The doctor who treated Sandy reported the case to authorities as a possible case of child molestation. The doctor misdiagnosed Sandy's vaginal infection as being sexually transmitted. The Jones' were disturbed by the handling of the case from the start. Robin says that from the very beginning, she and her husband were treated as though they were responsible for the molestation of their daughter. The doctor's report had been accepted as proof that molestation had occurred.

The false report of child molestation left no member of the family untouched. Sandy's 11-year old sister, Shelley, was pulled out of her classroom at school for questioning. The social worker told Shelley that her sister had been molested and was asked numerous questions that embarrassed her. Sandy was forced to undergo repeated vaginal examinations even though each time the diagnosis indicated "no evidence of sexual abuse." Sandy was questioned repeatedly by the social worker who tried to get Sandy to show her what happened by using anatomically-correct dolls. Both parents were required to undergo psychological tests--in each case professionals saw no presupposition to abuse. The father, Bill, was told by authorities to leave his family residence even though no criminal charges were brought against him. But the most painful experience for everyone was when Sandy was removed from the family's home and placed in a foster home. The four-year old was forced to spend 10 days in the foster home before she was finally permitted to return home. It was seven months before a judge ruled that the Southern California County had no right to be involved in the family's affairs. The Jones' were forced into bankruptcy to pay legal and other costs--which amounted to over $20,000.[95]

While this case depicts the damage from unnecessary treatment, the experiences of children who were justifiably brought into the child protective system and placed in abusive foster homes, or denied services they desperately needed are sometimes harder to chronicle. Children usually lack the skills to fully articulate the injustices they have experienced. In fact, their injustices are sometimes brought to the public's attention under the most dire circumstances. Last year, the death of 14-month old Nathan Moncrief shook the community of San Francisco. The toddler was beaten to death by foster parents who were in the process of adopting him.[96] This extreme form of harm within the system is, fortunately, rare. It lies at the far end of a continuum of harms some children experience while in "the system". Sandra Baker of the Sacramento Child Sexual Abuse Treatment Program recently stated, "The child abuse system affects the very core of our society. We're messing around with families. If you do it one way, you leave children in a situation that will make them into monsters eventually.

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[95] Complaint to Little Hoover Commission. Received October 14, 1986. Names changed.

[96] Daniels, Lon. "Man, Male 'Wife' Charged in Baby Death". San Francisco Examiner. June 17, 1986, p.2.

On the other hand, you have the power to destroy a nuclear family unnecessarily."[97]

Indeed, there is no doubt that a system for the protection of children who are abused or neglected is needed. When children are subjected to severe beatings, intentionally burned with cigarettes or heated metal, or are sexually molested and raped, they clearly need to be protected from repeated abuses. But children need a system that will not only protect them from severe danger, they need to be treated for the physical, emotional and psychological remnants of abuse or neglect.

Lack of Support Services

Some County Child Welfare Service Departments do not provide the moral support and security that children who have been abused or neglected so desperately need. Not only is child abuse itself traumatic, the events following a report of abuse can be frightening, troubling and confusing for the child victims and their families. The child may be subjected to a number of investigatory interviews, displaced from familiar surroundings and sometimes involved in court proceedings against the offender. A social worker who is skilled, familiar to the child and family, and able to spend needed time with the child, can lend the support necessary to lessen the hardship of these procedures. However, case processing procedures often preclude children from receiving this needed, basic support. In fact, one therapist recently stated, "Lots of kids tell me if they had to do it over again, they wouldn't have disclosed their abuse because it was too negative of an experience."[98]

SB 14 requires that counties provide a set of stipulated programs and timely procedures. Many counties have responded to the requirements of SB 14 by assigning each specific function to individual workers. These procedures can result in the involvement of as many as 22 child welfare professionals, each of whom must interview and review a child's case separately.[99] This extended process is not only duplicative, it can be very damaging to the welfare of the child and result in great frustration and potential psychological damage, as a child is forced to recall accounts of pain and suffering. In addition, families grow mistrustful as they are denied the ability to work consistently with one social worker.

Some children, who can only be protected from abuse by removal from their home, find the turmoil of uncertainty extends to their daily living arrangements. Many California counties have severe shortages of foster care

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[97] The Sacramento Bee, August 4, 1987, p. A7.

[98] Goldston, Linda. "Considering the Victim First". San Jose Mercury News. May 31, 1987, p.16A.

[99] Wilsey, Kermit and members of the Child and Family Coalition. Testimony to Senate Select Committee on Children and Youth. Hearing on Child Abuse Reporting Laws and Dependency Statutes. December 4, 1986.

homes. These shortages often force children to be shuffled from short-term foster home to foster home as space becomes available, or to remain in placements intended for very short-term, emergency use. A recent report by the Family and Children's Division in San Francisco entitled, "Every Three Hours", found that nearly one quarter of all children in emergency shelter were there two months or longer. Among these children, 20 percent were there 76 days or longer. The report discusses the harm children suffer from tenuous shelter placements: "When young, time does not fly. Clearly a growing number of children perceive themselves as growing old in shelters. Indeed they are. The question begs: Is the injustice we pull children from worse than the injustice we place them in?"[100]

A 1985-1986 grand jury report for San Luis Obispo County found that the lack of training of those who provide services to victims of child abuse and neglect can lead to faulty decisions concerning children. They concluded: "In some cases, training will ensure that the abused or neglected child who currently does not receive county attention will be brought into the system. In still other cases, children concerned will avoid becoming victims of the very system designed to aid them."[101]

Alternative Approaches for Child Abuse and Neglect Intervention

The Children's Advocacy Center in Huntsville, Alabama utilizes a model approach for minimizing the trauma of multiple interviews and other procedures on victims of abuse. The center provides a safe, secure setting for children who have been sexually abused and needed to be removed from their home. The design puts children's needs up front by requiring the myriad of agencies involved in sexual abuse cases to come to the victims. This avoids unnecessary shuffling and also provides a coordinating network that can track the needs and services of the child.[102]

One of California's models that attempts to minimize trauma to the child victim and offer services to the entire family is a hospital-based program. San Francisco General Hospital treats child sexual abuse victims at the Child and Adolescent Sexual Abuse Resource Center (CASARC). The program utilizes a trained multi-disciplinary staff to implement a 24-hour crisis intervention program for sexually abused children and adolescents. The main functions of CASARC are to provide prompt medical examinations and treatment, to offer immediate psychological support, to collect evidence for the court at the time the molestation is reported, and to provide follow-up counseling for the child and family. Each child is provided a counselor. Part of the counselor's role is to prepare the child for court and to be available as a

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[100] Supervisorial Staff, Family and Children's Division. Every Three Hours. Unpublished Document, June 18, 1986.

[101] 1985-86 Grand Jury Report, San Luis Obispo County. Health/Social Services section, p.21.

[102] Goldston, Linda. "Considering the Victim First". San Jose Mercury News, May 21, 1987, p.1A.

support during the court proceedings. CASARC promotes community awareness and training, as funds permit, by providing consultation and education to community agencies.[103]

In some cases, especially those involving sexual abuse, when the child is removed from the home it reinforces the common feeling that the report of abuse by the child, as opposed to the act of abuse, has caused family disruption and turmoil. In some reports where there is suspicion of one parent, it may not be best to remove the child from the non-accused parent and siblings. In fact, it is often best if these family members also receive counseling and related services.

Some have suggested that "safe houses" should be an option in such cases. This would provide the option of allowing the non-abusing spouse to accompany the child or children to a project location that provides support, therapy, and security for both the child victim and the non-abusing parent. The practice of removing the children from the home often reinforces the guilt young victims feel as they blame themselves for family disruption.

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[103] Hanson, Graeme and Delmer J. Pascoe. "Intervention with Sexually Abused Children: The Child Adolescent Sexual Abuse Resource Center of San Francisco". MOBIUS, Vol.5, No.1. January 1985, p.65-69.

Finding #20 - Lack of Comprehensive Training For Child Welfare Professionals, Foster Parents And Mandated Reporters

There is limited training for child welfare professionals, foster parents and those required by law to report suspicions of child abuse or neglect. This lack of training combined with high caseloads contributes to faulty investigations, inadequate recognition of the needs of abused and neglected children, as well as inappropriately prescribed services and case management. As a result, children and their families suffer from a system that is often unresponsive to their needs.

Inadequate Training for Child Protection Workers

Child welfare staff who work directly with families where child abuse and neglect have been reported often have varying degrees of professional training and experience. Only 50 percent of the professional staff providing emergency response and family maintenance program services are required to have a Masters Degree in social work or a related field. In addition, current regulations do not specify qualifications for staff involved with family reunification and permanent placement services.[104] According to the National Association of Social Workers, many counties employ child welfare workers without professional training in social work. They cite the basic problem as being no uniform statewide standard for professional staff.[105]

The academic curriculum in schools of social work provides students with a foundation in the theory, principles and methods of social work. This curriculum is designed to prepare students for a wide variety of professional occupations. However, coursework that addresses specific areas of work that apply to public child welfare agencies are often lacking. Social workers who are employed in public child welfare agencies need training in interviewing and investigating allegations of child abuse and neglect, applicable civil and criminal justice procedures (particularly the legal requirements of child protection), as well as a host of general interventive strategies that are essential to the well-being of children and families.

When SB 14 was signed into law in 1982, it made major modifications in the system of services provided to families where child abuse or neglect has occurred. The measure required that a host of programs be established to provide the services necessary for family reunification, or to plan for a permanent, stable alternative for children who could not be reunited with their families. These changes, combined with the rapid increase of reported cases of child abuse in recent years, have yet to be matched with training to meet the new responsibilities.

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[104] Collins, Wanda R., President, National Association of Social Workers. Letter to Nathan Shapell, Little Hoover Commission Chairman, dated April 16, 1986.

[105] Ibid.

Lack of Training for Mandated Reporters

Training in the detection and reporting of child abuse and neglect is not offered consistently to other professional groups including physicians, educators, psychologists, clergy and others who may be involved in the treatment of child abuse and who are required or "mandated" by law to report suspicions of child abuse and neglect. In the absence of such training, these professionals may not have a clear understanding of reporting laws.

Section 11166 of the California Penal Code requires that mandated reporters should report cases where a "reasonable suspicion" of abuse exists. Because mandated reporters do not routinely receive training in detecting abuse, the interpretation of this law is sometimes quite broad. For instance, the Commission found from some reporters that a common interpretation was that "any possibility" of abuse should be reported. This problem is sometimes compounded by the fact that some people broadly interpret laws defining what constitutes abuse. Many agree that spanking a child doesn't necessarily constitute abuse, but when it leaves a bruise or other markings, it may be. This leads to difficult questions concerning when bruising or markings should be considered grounds for charges of abuse. While decisions like these fall to the professionals, we find that their interpretations can also be broad.

Although physicians typically receive little or no training in detection and reporting requirements, they make referrals regarding cases of child abuse and are sometimes requested to verify the possibility of sexual molestation or physical abuse. In some instances, these judgments have resulted in unwarranted intervention and have had disastrous effects on families and children. For example, as an apparent side affect of chicken pox, 3-year old Helen Gray developed a vaginal infection. Helen's mother brought her to a doctor who reported the case to authorities as a possible sign of sexual molestation. The following day, Helen was forcibly removed from her parents' home and placed at MacLaren Hall in Los Angeles. It took over two months for the false charges to be dropped.[106]

This tragic event should not have taken place. In fact, training could have prevented it from happening. Training for the physician could have prevented the initial misdiagnosis. But beyond this, training in investigative techniques, and assessment criteria would have alerted the social worker to the incorrect allegations of abuse.

While it is unfair to blame doctors for trying to fulfill their legal obligations to report suspected abuse cases, part of this problem can be solved through properly educating physicians on detection and reporting of child abuse. Furthermore, there needs to be a recognition that many doctors do not have the expertise to accurately verify abuse. When medical attention is needed to verify cases of sexual or other forms of abuse it is important that only doctors who have expertise in detecting abuse and neglect be utilized.

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[106]Complaint to Little Hoover Commission. Received October 29, 1986. File Number 80. Name changed.

Insufficient Training in the Legal System on Abuse and Neglect

Judges and lawyers who work with child victims of abuse and neglect influence decisions with life-long consequences that are ostensibly made in the best interests of the child. Despite this, judges and lawyers who deal with cases of child abuse and neglect are not required to have specific education or training in the non-legal aspect of their work. The entire court process, particularly testifying, can be traumatic for the child victim. Training in appropriate interviewing techniques and other aspects can minimize the negative experiences the court process can impose on a child who has been sexually or physically abused or severely neglected.

Inadequate training for social workers can affect the outcome of child abuse court cases. Some social workers may utilize "leading" when interviewing children regarding allegations of child abuse. Because children often do not make spontaneous disclosures of abuse to parents or investigators, obtaining necessary information involves a substantial degree of probing -- without training this can be done inappropriately. For example, in a recent child abuse case in San Francisco, a psychiatrist told news reporters, "In my opinion the interviewers put words in the child's mouth; they virtually accused the child of holding back secrets when the information they wished was not forthcoming."[107] When practices like these are uncovered, they raise questions regarding the validity of child abuse charges regardless of their truthfulness.

Lack of Foster Parent Training

Most counties in California do not routinely offer or require foster parents to complete training. Historically, the assumption has been that parents do not require special skills to fulfill their role, therefore foster parents do not need special training. While effective parenting of any child requires skills, the child placed in foster care has been subjected to a potentially traumatic ordeal that requires special sensitivities on the part of the foster parent. Children in foster care can suffer from separation anxieties and other stresses that can result from lack of security.

In recent years, there has been a gradual shift in the expectations of foster parents from being responsible solely for basic substitute parenting to playing a major role in the treatment support of very troubled children and youth and for supporting the goals of permanency planning. Since the passage of SB 14, the population of children who remain in foster family homes has changed dramatically. Children who are the most severely abused or neglected, and those who exhibit the most serious physical, psychological or developmental damage, are the children least likely to be candidates for family reunification or to be adopted. These are also the children most likely to become foster care or group home placements.

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[107] San Francisco Examiner. "Going to Trial Despite Questionable Probe". September 28, 1986, p.8.

Exhibit II.15 illustrates the minimal training requirements that exist in California counties for foster parents.

EXHIBIT II.15

SUMMARY OF FOSTER CARE PRE-SERVICE TRAINING REQUIREMENTS IN CALIFORNIA

Training Required	Number of Counties	Percent
No Required Training	31	54
One to Six Hours	15	26
Seven to 12 Hours	9	16
Thirteen to 18 Hours	2	4
Totals	57	100

Source: Constructed with unpublished data from the Chancellor's Office, California Community College Foster Training Program. Survey information current to February 26, 1987. Fifty-seven of the State's 58 counties participated in the survey.

Exhibit II.15 shows that only 26 counties in the State require any training before becoming a foster parent. Additionally, of those counties that require training, most require less than six hours. It also shows that no county requires more than 18 hours of training. Not shown in Exhibit II.16 is the fact that only 19 percent of all California counties require additional, in-service training following licensure as a foster parent.

Some officials believe that the reason for the minimal foster parent training requirements shown in Exhibit II.15 is that increased requirements may inhibit the growth of foster family homes. There are currently concerns regarding the difficulty in recruiting and retaining foster families. For example, a recent California Foster Parent Survey revealed that nearly 50 percent of the foster parents surveyed indicated that they were uncertain about their interest in remaining foster parents.[108] In addition to being paid very little, foster parents are not routinely offered a support system or respite from their stressful jobs.

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[108] California Foster Parent Training Survey. Prepared for the Foster Parent Training Program, California Community Colleges by Center for Foster and Residential Care; Child Welfare Institute, Atlanta, Georgia. June 13, 1986.

Successful Family Reunification

There are numerous, dedicated social workers throughout the State who have gained admirable skills through years of experience. While training can enhance their skills, the success stories should not go unnoticed.

The Baker family represents a successful reunification effort. Linda Baker had been sexually molested by her father for years, but when he began molesting her youngest sister, Ann, Linda called the authorities. "I didn't want her life to be ruined" she explained. Not all sexual abuse cases are likely candidates for reunification, but the social worker felt that an attempt at reunification was appropriate for the Baker family. The social worker referred the Bakers to Parents United, a support group that offers programs for each family member. The Bakers also received professional individual counseling.[109]

With the help of others, Sam Baker has taken responsibility for the pain he caused his family and has taken steps to correct many of the circumstances that led to the abuse. Through Parents United and other counseling services, the Bakers learned that some of their family dynamics made the abuse possible. Sam was very domineering and expected his wife and children to be subservient to him. "I used to think that I owned my family.... like you would a car," Sam said. Likewise, family members feared him and felt that he was "king ruler" of the house. Before the abuse report, Sam's wife, Kathy, was unaware of the abuse but daughter Linda felt that her mother would have been powerless to stop it if she had known.

Today, the Baker family continues therapy and Parents United. They are still working at healing the wounds caused by the sexual abuse. But their labor is diligent and they all feel that family reunification has been worthwhile and successful.

Training Strategies

While there is currently no uniform, statewide training program or curriculum for those working in child protective services, there are numerous State funded projects in different localities. The Office of Criminal Justice Planning funds two child sexual abuse prevention training centers. One is located at the Institute for Community as Extended Family in San Jose and the other is located in the Children's Institute International in Los Angeles. Since their inception in 1984, these programs have trained nearly 2,000 professionals. Additionally, the Office of Child Abuse Prevention (OCAP) and the California Consortium of Child Abuse Councils provides training for a limited number of child welfare professionals.

In an attempt to train mandated reporters, the State Department of Social Services recently spent $400,000 on video tapes designed to train specified mandated reporters. The videos are well-designed and represent a commendable

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[109] Ware, Ciji, Host. "Generations of Violence", KCET Broadcast. May 30, 1984. Names changed.

effort to address training needs. There remains a need to ensure wide distribution and use of these training tapes. For example, one video cassette was specifically made for child care workers. This cassette is available for loan in each county through Child Care Resource and Referral Centers. Despite the availability of this cassette, many child care centers lack the equipment necessary to view the video.

Michael Wald, Professor of Law at Stanford and contributor to the drafting of major child abuse and neglect legislation, advocates massive statewide training efforts. Wald and others have stated that the agency responsible for training police officers, Police Officer Standards and Training (POST), provides an excellent model for training child protective workers. POST is responsible for ensuring consistent, quality training for those in law enforcement positions. The agency develops standards for training and establishes criteria for certifying courses and the schools and academies that offer them. It is also responsible for enforcing compliance with the set standards. A similar agency may be useful in ensuring statewide standards for those working in child protective services and related fields. It could facilitate the development of different training standards that are applicable to specific professionals including social workers, foster parents and certain mandated reporters. Such training could contribute to more consistent application of child welfare procedures and services and provide a forum for certification of social workers and foster parents as well as facilitate professional enhancement seminars.

The training needs of social workers, foster parents and mandated reporters vary in depth and content, but training is essential for all groups to ensure that child protective laws and procedures are appropriately applied. Increased training efforts will ensure better protection for abused and neglected children and contribute to the well-being of children and families.

Finding #21 - The Court System is Experiencing Difficulties in Dealing With Cases of Abuse And Neglect

The court system is experiencing difficulties in dealing with the increasing number of cases involving abused and neglected children, including cases of dependency and the need for juvenile court supervision of "status offenders." Recent legislation reforms, including SB 14 in 1982 and subsequent measures, were intended to bring about needed changes and to expedite dependency proceedings. However, these reforms have not fully addressed problems of court delay and in some cases have exacerbated existing problems. As a result, delays in the court system can further traumatize abused and neglected children because the ultimate placement decision may be prolonged.

Involvement of the Courts

One critical concern of social welfare professionals is to avoid the unnecessary removal of a child from his or her home. SB 14, addressed this concern by strengthening requirements for the burden of proof necessary to remove a child from his or her home, requiring the consideration of family reunification, and requiring the use of more timely and appropriate court proceedings. This legislation requires that when a child is removed from his or her home, the county is responsible for proving, in court, that the child is in danger at home and cannot be protected without removal. Further, at each subsequent court hearing the county must verify that danger to the child persists. County welfare agencies are required to make every effort to return children to their natural families. A hearing must be conducted every six months to review the case until a permanent arrangement like family reunification or adoption has been completed. All of these actions are civil proceedings, usually conducted in juvenile court.

Following the confirmation of child abuse or neglect by Child Welfare Services, a social worker or probation officer must file a "Dependency Petition". This petition provides information regarding the child's situation, including support for the decision that the child falls within the provisions of Welfare and Institutions Code Section 300. Dependency petitions must be filed within three weeks and can be filed regardless of whether a child is taken into custody. A "detention hearing" must take place within a 24-hour period of the "judicial day" following the filing of the dependency petition. The purpose of the hearing is to determine sufficient reason for a "Jurisdictional Hearing." Conducted within 15 judicial days of the detention hearing, or 30 days of filing the petition if the child is not in custody, the jurisdictional hearing determines whether there is a "preponderance of the evidence" that a child has been maltreated within the definitions of Section 300.

If a child is found to be a "300" and made a dependent of the court, the decision of whether the child is to be maintained with the parent under particular conditions or whether the child is removed from the parent, is finalized in the dispositional hearing. A "permanency planning hearing" must be conducted within six months if a child under three is removed from the home, or within twelve months in other cases. This hearing is conducted to determine permanent plans for the child. In some cases, an additional permanency planning hearing is set, such as when there is substantial probability that the child will return home within six months. Permanent

placement should include one of the following (in order of precedence): adoption; legal guardianship; or long-term foster care. An additional hearing to terminate parental rights is also conducted when it is determined that children are better off if placed for adoption or guardianship.

Permanency planning hearings mandated by SB 14 often duplicate the termination of parental rights proceedings dictated in Civil Code Section 232. This can delay the resolution of the case for some abused or neglected children. Procedural delays, in the form of petitions and continuances, also delay the timely decision intended by the SB 14 reforms. In some jurisdictions, lengthy delays in the permanency planning for children frustrate the achievement of the goals in the law. For example, a recent letter dated September 16, 1987, from the Los Angeles County clerk and Executive Officer of the Superior Court which stated, "A combination of increased child abuse and neglect filings, mandated reporting laws and requirements of Senate Bill 14 to conduct judicial reviews every six months has placed a tremendous strain on the dependency court. Over the years, the number of courts handling dependency cases has not kept pace with the growing workload." To illustrate this, Exhibit II.16 compares the increased number of dependency judicial reviews over the last 11 years and the increased number of dependency courts.

EXHIBIT II.16

LOS ANGELES SUPERIOR COURT

Fiscal Year	Dependency Judicial Reviews	Dependency Filings	Judicial Manpower
1976-77	8716	3553	5.4
1977-78	8984	5819	6.5
1978-79	11386	6419	6.2
1979-80	12308	6789	6.3
1980-81	11610	8355	6.8
1981-82	15059	8483	7.0
1982-83	27553	8712	7.2
1983-84	30113	12331	8.4
1984-85	28874	15197	13.0
1985-86	39943	16118	15.0
1986-87	38215	17472	15.0
Percentage Change	338%	391%	177%

Exhibit II.16 shows that the number of dependency judicial reviews increased 338 percent and the number of dependency filings increased 391 percent in the past ten years. However, the judicial manpower to handle these cases increased only 177 percent.

While this issue is clearly part of the larger problem of workload excesses and calendar delays facing our court system, the special needs of abused and neglected children may require alternative administrative arrangements within the court system.

Few Cases are Criminally Prosecuted

In proportion to the number of "300" cases heard in juvenile court, few are criminally prosecuted. This fact frustrates some in the child abuse field. The dilemma is especially trying in child sex abuse cases. In these cases, the court routinely considers factors like whether imprisonment of the offender will affect the family's economic situation or whether the abuse caused long-term damage to the victim. Paul Crissey, Project Director of the California Consortium of Child Abuse Councils recently told a news reporter: "We should treat children with more respect than we do. If someone robs a mom-and-pop store and slugs the owner and you catch the person, we don't then ask whether putting him in prison would harm his family life, but we do with child abuse."

Santa Clara County Superior Court Judge Robert Foley agrees. "If a fellow forces a lady to have sexual intercourse with him, we call it rape, if she's 14 years or older," says Foley, "but if a fellow forces a girl to have sexual intercourse, for some reason we do not call that rape. We call it child molestation." The difference in the two cases, Foley points out is, "For rape, there is mandatory prison and you go to prison now, no probation. If the victims are 13 and younger, they do not go to prison. I cannot explain why not. We are supposed to treat people the same."[110]

Court delays for criminally prosecuted cases of child abuse can amount to one to two years or more and the prosecution process can be grueling for a child to endure. Children usually must testify during the hearing and undergo cross-examination by the defense attorney. The attorney representing the child, the prosecutor, is often unable to take the time to develop a supportive relationship with the child. For example, Barbara, the mother of a daughter whose father repeatedly abused her, recently recounted her experiences in the courts to a news reporter, "It was gross, really, the way she was treated, especially by the defense attorney." Barbara complained that the prosecutor was too busy to give her daughter's case proper attention. "He told me he had so many cases that mine would have to wait for his full attention until the actual trial," Barbara said: "You should see the poor guy's desk. It's piled with cases."[111]

Barbara and other non-perpetrator parents are often frustrated by the court process because the procedures frequently do not take into consideration what is best for child victims. California has passed laws aimed at easing the

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[110] Goldston, Linda. Considering the Victim First. San Jose Mercury News May 21, 1987.

[111] Pollack, Kent. "System Leaves Trail of Anguish". The Sacramento Bee, August 5, 1986, p.A1. Names changed.

pain for children. For instance, Penal Code Section 1346 states that video tapes of children are legally permissible as testimony. Penal Code Section 868.5 permits child victim witnesses under age 16 to have a parent, guardian or sibling present for support during testimony at the preliminary hearing and trial. However, because these methods have not been widely used and tested in courts, many prosecutors are hesitant to use them. Prosecutors fear that using untested methods will risk a loss of the case on appeal. Many feel that the best method of easing the pain children endure in courts is by minimizing their court time. Meanwhile, existing requirements may encourage unnecessary use of the courts.

Avoiding the Use of Civil Court Proceedings

Strategies for reducing the use of civil courts currently exist. One method involves utilizing an administrative review process. Federal law requires that a permanency planning review hearing take place twice each year; however, in many cases, the six-month review can be facilitated administratively. The Federal Adoption Assistance and Child Welfare Act of 1980 (PL 96-272), stipulates that states have the option of reviewing cases either by court hearing or by an administrative review hearing.

Ten counties in California currently utilize administrative review panels in lieu of court hearings for the six-month review process for foster care cases that have had a permanency planning hearing. A survey of these counties performed by DSS reveals that they view the process favorably and that it cuts down on the use of the courts while freeing the court for hearing more complicated cases.

A recent study by the Center for Dispute Resolution (CDR) found that in some child welfare cases the court can be avoided by utilizing a mediation process. Trained mediators work with parents and caseworkers to negotiate differences and develop agreements that are signed by the parties involved. The States of Massachusetts, Connecticut and Rhode Island currently utilize this strategy as a pretrial procedure or to avoid going to trial altogether. In the CDR study, parents and caseworkers who used the mediation process tended to view it favorably. Although CDR found that the mediation process expedites the development of a treatment plan and has positive outcomes for many cases, they caution that it is not a cure all. In fact, they concluded that the overall assessment of the mediation process must be "moderate."[112]

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[112] Pearson, Jessica, et al. Mediation of Child Welfare Cases. Family Law Quarterly, Vol. XX, No.2, Summer 1986, p. 303-322.

Finding #22 - Lack of Emphasis on Prevention of Abuse and Neglect is Resulting in Long-Term Problems For Children And Increased Cost to The State

There are various commonly accepted prevention strategies available to reduce the incidence of child abuse and neglect. Child abuse and neglect prevention programs can be cost beneficial to the State of California because these programs can eliminate the need for more costly remediation services in the future, such as health and mental health services, out-of-home placement, or juvenile justice programs. Many of these prevention strategies are not being fully implemented in California's children's services system. As a result, the State is incurring current and long-term social program costs that could be avoided.

Prevention Strategies

There are a variety of prevention strategies that are used to help reduce the incidence of child abuse and neglect. Prevention can be facilitated by family members, churches, schools and the community. These various methods of prevention are commonly characterized as primary, secondary, and tertiary prevention strategies. Primary Prevention includes those basic strategies that encourage appropriate parenting. Primary prevention includes helping parents to avoid the stresses caused by financial conditions or other outside factors. It also can include parent education through example, or teaching parents the proper needs and expectations of children at particular ages. Primary prevention is targeted at reducing the incidence of general neglect which comprises the largest single category of referrals for emergency response service for children.

Secondary prevention includes supportive services for families with risk factors for child abuse and neglect. Risk factors have been well established. They include:

- Environmental stresses caused by financial problems, unemployment, marital difficulties, physical illness, untimely child bearing, or other problems;
- Social isolation, particularly lack of a network of supportive relationships;
- Parents previous experience of maltreatment as a child; and
- Poor parenting skills that include strict discipline through a firm belief in corporal punishment, often coupled with inappropriate expectations of children.

These major social factors influence and combine with psychological factors such as poor coping skills, extremely low self-esteem and sense of incompetence, drug or alcohol dependency, poor interpersonal skills and a reluctance to trust others and seek help.

Secondary prevention strategies focus on a narrow population that show risk factors for possible abuse. According to a recent report by the United States Department of Health and Human Services, secondary prevention programs

work best when participation is voluntary and focuses on the particular stresses of identified parents.[113] These programs tend to be more problem-focused than primary prevention programs. Some examples of secondary prevention strategies include support programs for teenage parents and programs for parents of infants with special problems, such as birth defects or prematurity.

Tertiary prevention or treatment is the predominant focus of California's Child Welfare System. These services are focused on children who have already been abused or neglected. Tertiary prevention strategies include strategies that range from permanently removing the child from the home where successful family reunification is not possible, to treatment programs for abusive and neglectful parents. Tertiary programs for these parents include counseling, teaching, or modeling parents appropriate parenting skills, or in-home services which support parents efforts to care appropriately for their children.

A comprehensive approach to prevention which incorporates primary, secondary and tertiary strategies is not only good for children, it can save the State significant funds through reducing the need for future, more costly, intervention strategies. Out-of-home placements are necessary when parental abusive behaviors are untreated. Additionally, the scars from child maltreatment often manifest themselves in poor school performance, prompting the need for costly remedial classes and low self-esteem which can contribute to juvenile delinquency. Former Secretary of the United States Department of Health and Human Services, Margaret Heckler, stated that "90 percent of our juvenile delinquents have been, or are currently, abused children." In fact, she continued by saying, "These wounded teenagers are headed for an adulthood of chaos and trauma . . . The saddest statistics in the growing literature on child abuse are those which trace the "like father like son" -- "like mother like daughter" syndrome. Generation after generation."[114]

Model Prevention Programs

There are a host of prevention programs throughout the State that are administered by private non-profit entities. Para Los Ninos in Los Angeles, Florence Crittenton Services in San Francisco, Early Parenting Project at San Francisco General Hospital, and the Parent Services Program (PSP) with agencies throughout the Bay Area are among the prevention programs that incorporate comprehensive services for at-risk families into a quality child care program. Such services often include parental stress reduction through employment development workshops, sick child care, counseling and mental health workshops, training in parenting skills, pediatric care, community service referrals, and respite child care.

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[113] Ragan, Cynthia et.al. Child Protection Providing Ongoing Services. United States Department of Health and Human Services; National Center on Child Abuse and Neglect. Undated Document.

[114] Perspectives on Child Maltreatment in the Mid-80s. The Department of Health and Human Services. No. (OHDS) 84-30338, Pg. 1.

A study of PSP services recently verified the financial savings that programs like these can provide the State of California. The study, by W. Paul Harder found that for every family served by Parent Services, the state saves an average of $240.00 per family in unemployment benefits, child abuse costs, mental and physical health services, AFDC benefits, spouse abuse services, and substance abuse services.[115]

The need for primary prevention programs may be growing as families have decreased in size and contact with extended family members is often minimized by travel distances. When families were larger and had more frequent contact with relatives who had children of varying ages, adolescent-aged children were able to learn about the needs of small children by observing and helping in the care of young siblings and cousins. This exposure now occurs less and less frequently. One forum for complementing the parenting skills children learn at home can be provided through the media and schools. Some schools have programs that allow students to interact with infants whose parents have volunteered to participate in the worthwhile cause.

Probably the most fundamental right every child should enjoy is the freedom from abuse and neglect. When this fundamental right is denied or jeopardized, a comprehensive child maltreatment prevention plan is necessary. While various agencies in California currently offer certain prevention programs, additional emphasis on early detection and treatment of child abuse and neglect could avoid the need for more costly intervention strategies at a later date.

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[115] Harder, Paul W. An Analysis of Potential Savings of State Funds Associated with the Parent Services Project. URSA Institute. March 1985.

Finding #23 - Shortage of Services And Placement Resources For Abused And Neglected Children And Their Families

There is a shortage of necessary services in California for abused and neglected children and their families. Specifically, the State is experiencing a need for increased family support services, health services, foster care services, services for children with special needs, and group home services. In addition, the State does not have a systematic method of collecting data on treatment outcomes from abused and neglected children and their families. As a result, children and their families who are in need of services are not receiving them. Furthermore, State and local governments have only limited means of evaluating the cost-effectiveness of the services which they are providing.

Inadequate Family Support Services

Federal legislation, P.L. 96-272, enacted in 1980, demanded that states receiving federal funds alter previous procedures for treating children who have been maltreated at home. The law dictated that these children be provided with case plans that prioritize family reunification, where possible, or take actions to ensure that the child who cannot be reunited is provided with a stable permanent living situation - this process is referred to as "permanency planning." In 1982 California enacted SB 14 to comply with this federal law.

Studies have shown that family reunification can be accomplished without placing the child at probable risk of further maltreatment only with the provision of services to help parents change past abusive or neglectful patterns. There are numerous approaches to providing services to support family reunification. One method involves the use of in-home intensive treatment services. This type of program and other services to help change the behavior of abusive parents work best if they are coupled with a stable child day care program.

Much of the research on intensive in-home treatment services has been based on innovative, established programs that utilize well-trained and supervised parent aides. As para-professionals, parent aides work intensively on a one-to-one basis with individual families and help abusive and neglectful parents develop positive parenting and other skills that positively contribute to a healthy functioning family unit. If correctly implemented, intensive programs like the Parent-Aide programs can make successful Family Reunification a reality.[116]

For a variety of funding and other reasons, have inhibited the implementation and growth of family maintenance services in California has been slow. Without these services successfully family reunification may not be a realistic outcome. California families who may be likely candidates for reunification have not been able to take advantage of family maintenance

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[116] Gifford, Carla et al. Parent Aides In Child Abuse And Neglect Programs. U.S. Department of Health, Education and Welfare. August, 1979.

programs because they are not available. Some counties in the State are attempting to correct this problem.

Orange County is developing a comprehensive approach. In order to monitor and improve services, the county plans to assign its deputy director control over all resources for preventative services, and out-of-home care to expanding alternatives to 24-hour out-of-home care. The alternatives will include establishing programs using intensive supervision, child day care and other preventative services. Financial and other supports are being targeted for family maintenance programs. For example, the county is using State money from SB 1733 and SB 2994 to provide counseling, parent aides, and respite child care.

Private, non-profit family maintenance programs are available in various locales. For example, Children's Home Society of San Francisco County operates the Emergency Family Care Program (EFC) which provides 24-hour, 7-day a week, in-home support services to at-risk families. The program includes in-home services that teach parenting and home management skills. During 1985-86, the EFC program served 579 families with 1400 children. Without the EFC program, most of these children would have been placed in out-of-home care situations.[117]

Within Solano and Los Angeles counties new programs are being established to support family reunification. Families First, Inc., of Solano County, provides intensive in-home services to families referred by the County Child Welfare Department. The service teaches parents parenting and home-management skills in addition to providing counseling by highly trained staff members. Workers are able to concentrate their efforts on the families they work with because they are assigned a caseload of only two families. The staff member works with the family for 10 to 15 hours per week and is available to the families 24 hours a day as needed for the first month. Despite these attempts to address the need for family reunification and maintenance programs, needed services are severely lacking throughout the State. For instance, testimony given at December 1986 hearing on Child Abuse Reporting Laws and Dependency Statutes revealed that Los Angeles county has had severe problems funding ancillary services required by SB 14.

The Los Angeles County Director of Children's Services testified that funding mechanisms often preclude the implementation of the needed ancillary services. He stated that State funding mechanisms do not provide the "starting-up" funds necessary for the innovative programs that support family reunification and maintenance. As a result, funds are used to expand current, more traditional programs instead of those envisioned by SB 14. In most counties, such services are provided by private non-profit agencies using charitable funds or under contract with public sector agencies. Further investigation of such joint public/private arrangements is desirable; these services can be adapted to the needs of local communities utilizing the most appropriate existing service providers through active joint planning.

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[117] Foster Care Network News. Published by Children's Research Institute of California. Sacramento. July, 1987.

The use of quality child care services has been an important component to successful family reunification programs. Numerous reports have documented the contributions of daytime child care as an alternative to foster care.[118] Such child care provides a respite for abusive or neglectful parents and provides the parents with child care workers who can serve as alternative role models. Programs that include parent services such as parenting workshops, social gatherings and support groups contribute to the likelihood of healthy family functioning. Unfortunately, there are severe shortages in subsidized child care programs throughout the State and the costs of quality child care often prohibit families from utilizing the service without public assistance.

Inadequate Health Services

Numerous recent reports have brought attention to the lack of health services for children who are in out-of-home shelter and foster care systems.[119] Efforts directed at securing evidence of abuse and other child welfare procedures may be diverting attention from the ongoing medical health care needs of children. Reports, both at the national and State level, have found that the health problems of foster children include disproportionately high rates of chronic physical illnesses, emotional problems, developmental disabilities and signs of previous medical neglect.[120]

Insufficient medical care for children in foster and shelter care situations stems from a number of different causes. The medical needs of foster children are usually funded by Medicaid or Medi-Cal programs. The physician reimbursement rates for medical services are low and usually involve considerable paperwork and delayed financial compensation. These

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[118] Anchorage Child Abuse Board, Inc. Child Protection Respite Child Care Project. Anchorage, Alaska. May 28, 1987.

Broadhurst, Diane D., et al. Early Childhood Programs and the Prevention and Treatment of Child Abuse and Neglect. U.S. Department of Health, Education and Welfare. August 1979.

Weinstein, Vivian. The Best We Have to Give. California Resource and Referral Network. 1987.

[119] White Paper on the Health Care of Children in Foster Care. Result of the "Colloquium on Health Care for Children in Foster Home Care," convened by The Child Welfare League of America and the American Academy of Pediatrics, 1987.

Nalfon, Neil. Health Care of Foster Children In California. San Francisco 1986.

Health Services For Foster Children. United Way Health Services for Foster Children Technical Committee, Los Angeles. January, 1987.

[120] Ibid.

disincentives to treating foster children have prompted a shortage of private physicians that are willing to treat them.

It also is difficult to acquire documented health histories of children in foster care due to frequent movements of foster children. As a result, foster children may not receive health care that is comprehensive and continuous.[121] Moreover, existing mechanisms do not encourage the development of integrated systems of health care for foster children. For example, the State has no standards for assessing the quality of health care provided. Additionally, child welfare agencies usually are not set up to adequately monitor the health care received by foster children in their charge.

Dental care and mental health services for foster children are particularly lacking. Insufficient funds and the resulting lack of provisions have lead to long waiting lists for those referred for care. The result is a system of services where only the most severe problems are addressed. The services then become more costly as they must attempt to repair the damage of previous neglect. The system of health care for foster children is so inadequate that a recent study in Los Angeles concluded that the "failure to adequately diagnose, treat and immunize these children allows community neglect to replace parental abuse and neglect."[122]

Shortage of Foster Care

There is a growing statewide shortage of foster care homes, particularly those that provide short-term emergency care for abused and neglected children. This shortage often prompts the inappropriate use of more costly emergency care placements for children. The lack of emergency foster care causes children who could be placed in a less expensive care situation to be placed in institutional or other higher cost care facilities that are inappropriate to their needs. As these spaces are filled for emergency placements, children needing special treatment and services provided by institutional or other settings are unable to obtain the services they need.

Most young children who need out-of-home care are referred to foster homes. The family-type environment possible in foster care has many positive aspects that can't be achieved in the institutional setting. Children who are referred to foster care typically come from troubled homes. They need skilled care to build back their self esteem and to rebuild the ability to trust others. In any given month during fiscal year 1986-87, there were 39,600 children in foster care in California.[123]

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[121] Halfon, Neil. Health Care of Foster Children in California. San Francisco. 1986.

[122] Ibid, p.1.

[123] Unpublished data furnished by the State Department of Social Services.

While there are many dedicated, effective foster parents, there are also some ineffective ones. The wide variation in foster parent quality is, in part, due to the fact that training requirements vary widely by county. Becoming a licensed foster care parent often requires little more than a fingerprint check to verify that the applicant has no criminal record. However, even a past criminal record does not necessarily make a person ineligible for foster parent licensing.

Foster care pay rates, a poor public image, lack of support services and respite child care, and a tendency among social workers to treat foster parents as clients rather than service workers, combine to create disincentives for becoming a foster parent. The State sets basic rates paid for foster family care. The rates were set to reflect the basic costs for providing a child with food and basic living necessities. Counties can pay higher rates to foster families based on "special needs" as defined by the county. Exhibit II.17 displays the basic rates for foster care by age of child.

EXHIBIT II.17

BASIC RATE STRUCTURE
FOR CALIFORNIA FOSTER CARE

Age	Rate/Month
0 - 4	$294
5 - 8	$319
9 - 11	$340
12 - 14	$378
15 - 20	$412

Source: State Department of Social Services, 1987.

As indicated in Exhibit II.17, the rate paid for 24-hour care, 7 days per week, for a child aged 0 to 4, is $294. This rate is actually less than the rates that many working California families pay for daytime child care. A recent survey by the California Resource and Referral Network found that the average cost of center child care for "infants" aged 0 to 2 approaches $350.00 per month. The average monthly cost of center care for "preschoolers" aged 2 to 5 is approximately $259.00.[124] Foster parents are not routinely given any respite from their job.

In addition to the low rates paid to foster parents, the pool of traditional families potentially able to provide foster care is shrinking. A majority of California families today do not have a parent who assumes the full time role of homemaker. Working families who need child care cannot afford to offer their services as foster parents because of child care costs. Abused and neglected children who are in the foster care system are eligible for

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[124]Unpublished data furnished by the California Child Care Resource and Referral Network, San Francisco, CA. February 1987 to present.

enrollment at State-subsidized child care centers. However, long waiting lists at many of these facilities dictate that children who might be served in this fashion cannot normally expect to receive this service, particularly on short notice.

Foster parents often have a wide range of obligations. They frequently end up attempting to coordinate services for the child. This is often considerably more difficult than it would be for a parent to juggle the needs of their natural child. Obtaining and facilitating a routine health exam requires numerous phone calls and sometimes cumbersome paperwork. Purchasing needed clothing with limited funding or attempting to ensure that a child is provided with a birthday cake and gift can become major chores. With the many difficulties involved in obtaining items like these many foster parents end up paying for the items themselves. Given the minimal rates they receive for their services, foster parents may resent such out-of-pocket expenses. This contributes to the many disincentives for not remaining a foster parent. Pursuant to SB 2218, Chapter 1094, Statutes of 1986, the State Department of Social Services is currently conducting a study to establish a new basis for foster care rates. This study will be completed by January 1988.

Lack of Services for Children With Acute Special Needs

The shortage of capable, trained foster families is a statewide problem, one which limits the ability of child welfare agencies to place children in settings where they will receive both a secure environment and an appropriate treatment program. This scarcity is particularly acute with regard to children who have experienced severe abuse and neglect or have additional problems. This population of children with acute special needs includes children who have been abused or neglected as well as children who are:

- Drug addicted infants;
- Physically disabled children;
- Children and youth who have had multiple foster placements;
- Children with AIDS; and
- Children who have grown up in foster care.

The number of children with acute special needs who require services may be growing due to the overall growth in abused and neglected children entering the system. Another factor that has increased the number of children with acute special needs involves increased medical technologies that have improved the longevity of medically fragile infants whose parents either cannot afford medical costs or have relinquished responsibility of their infants. In addition, there has been an alarming growth in the number of infants with drug addicted mothers. For example, from 1981 to 1985, Los Angeles County experienced a 453 percent increase in minors and infants referred because of drug ingestion problems.[125] Infants experience drug withdrawal symptoms after birth that sometimes persist for months. The

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[125] L.A. County Department of Children's Services. Written testimony to Senate Select Committee on Children and Youth Hearing on Child Abuse Reporting Laws and Dependency Statutes. December, 1986.

infants are difficult to care for because they require considerable attention, cry frequently, and do not respond to the typical methods used to calm a normal, healthy baby.

The growth in the number of infants born to drug addicted mothers has heightened concerns about the issue of foster care placement and the Acquired Immune Deficiency Syndrome (AIDS). Intravenous drug users are at considerably higher risk of contracting AIDS and the disease can be passed on prenatally. Fear of contagion to themselves, or other children, has prompted some parents of children with AIDS to relinquish responsibility for them. When space is available the foster care system is first in line to care for these children who do not require hospitalization. State agencies do not collect data or track the number of children in foster care with AIDS. However, the State Health Department estimates that there are a total of 42 children and teenagers in California who have been diagnosed with the disease.[126] Additionally, a growing number of children have contracted a non-fatal relative of AIDS called ARC (AIDS-Related Complex). This involves an immune system deficiency that prompts the development of low grade infections and colds.

There is currently no statewide policy concerning AIDS children in the foster care system. There is no routine system for testing and diagnosing children who are at-risk of having the disease and foster parents who may be caring for children with AIDS do not routinely receive training. The National Center for Disease Control in Atlanta has developed recommendations and guidelines for controlling the possible spread of the disease and suggests that there is a considerable need for strict procedures and training in caring for children with the disease. For example, the guidelines caution that although the risk is low, a child with AIDS who has a behavior problem like biting should not be in contact with other children. There is a need for routine screening of at-risk children and training of foster parents who provide emergency care for children. The recent experience of foster parent, Rosa Gutierriz, illustrates this need.

Late one evening Rosa received a call from a placement worker asking if she had room for one more infant. The infant needed shelter because her single mother was at the police station being booked on a narcotics charge. Calls like this are not uncommon for emergency home care providers like Rosa. She often welcomes children who need temporary shelter and care into her home on a moment's notice with little information about the child's history and health.

When the tiny infant arrived, she looked pale and listless, her eyes appeared glassy and unfocused. While changing her diaper, Rosa was struck by the oozing diaper rash on the baby's bottom and thighs. There were also grayish colored sores on the baby's tongue and gums. Rosa's husband cared for the

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[126] Hadley, Nola. "Foster Care and AIDS: A Bundle of Questions." Children's Advocate. January-April, 1987.

other children while Rosa brought the sick infant to the hospital emergency room. The baby had an undiagnosed case of AIDS.[127]

Policies and procedures for handling children in the foster care system who have AIDS, or are at risk of having AIDS are lacking in part because of the many unanswered questions about the disease. Michael Pesche of Alameda County Department of Social Services states, "We don't even know how to think about planning for these kids. We don't know if it makes sense for all children to be tested. We don't know if it's a good idea to put AIDS and ARC children together. We don't know if children who have been tested antibody positive, but who have not yet developed either AIDS or ARC, should be put in the same homes with children who have already developed symptomatology of the disease."[128]

An additional, important question has to do with confidentiality. While foster parents need to be informed of an AIDS or ARC diagnosis, if other children learn of it, the ill child or the entire foster home may be socially ostracized. Many vital community services, education and social interactions could be impaired as well.

Abused and neglected children with multiple problems such as those mentioned above require a host of special services for their physical injuries, emotional problems, and other problems resulting from cumulative trauma and deprivation. While these children are a minority of the total dependency population, they are frequently the most difficult to serve. Finding suitable placements for special need populations is often difficult. In an effort to serve children with chronic problems, emergency shelter facilities are often utilized as long-term maintenance facilities. For example, during an on-site visit at San Francisco General Hospital, the Commission observed drug addicted babies that were forced to remain in the hospital for extended periods of time because foster parents who were adequately trained and willing to care for these babies could not be found. As the limited spaces in such facilities are utilized in this manner, their use for new emergency placements is preempted. In addition, the cost of taking care of these children increases significantly.

Varying Quality of Group Homes

Licensing requirements for group homes vary according to the size and composition of the group homes. A family can provide 24-hour care in the licensee's family residence for six or fewer children who are mentally disordered, developmentally disabled or physically handicapped. Small family homes are bound to the regulations set in specified sections of the 83000 series of the Community Care Licensing Code. Group Homes include non-residential care facilities that provide 24-hour non-medical care and supervision for children as well as residential facilities that provide 24-hour care for seven or more children. They are bound to specified

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[127] Ibid. Name changed.

[128] Ibid.

regulations in the 84000 section of Community Care Licensing Code. Homefinding and adoption agencies are an additional part of the network of out-of-home care services for children. They are county and private non-profit agencies that recruit and license foster homes, small family homes and group homes for children.

The quality of group homes varies widely. This has much to do with the policies of particular homes. Some group homes are run on a "for-profit" basis and some are run by private non-profit organizations. Neither category is, by itself, an indicator of the quality of care provided to children. Staff characteristics and policies are often highly correlated with the quality of care children receive. The wages paid to group home social workers is often low. Because of the low pay they are frequently inexperienced. In addition, supervisory staff who are not social workers are often paid little more than minimum wage. As a result, there is often a high turnover of staff in group homes.

Fees paid to private non-profit as well as for-profit group homes vary widely. Although the rates are paid according to the range and extent of services provided, they are not based on any statewide formula. In fact, the wide variations in rates paid are not consistently linked to either higher quality care or the individual needs of the child.

State law requires that group home facilities be audited once every three years. A list of audits provided by the State Department of Social Services representing only a small percentage of group homes in the State displayed overpayments that amounted to nearly $8 million.[129] Additional concerns have been raised regarding payments to agencies outside of the State who care for children who are legal residents of California. These agencies are not required to be audited and no audits have recently been performed.

Current rate structures and reimbursement policies may not adequately consider the additional services that a child with acute special needs requires. For example, mental health services are frequently unavailable for this vulnerable group of children. They often receive mental health services only when there is an acute crisis, and then it may only be for short-term intervention. Furthermore, there are few financial incentives for providers to serve many of these children given the constraints on reimbursement and the high costs of care.

Other special need areas include children from ethnic minorities and gay and lesbian youth. Different value systems and concerns over discrimination or prejudice mean that children from minority backgrounds often require attention different from that customarily provided. The concerns and needs of children and youth from ethnic and sexual minorities require greater attention from public and private social welfare agencies.

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[129] Table of audits from SDSS, forwarded to the Commission by California Senator Richardson's Office.

Insufficient Information in Treatment Outcomes

One very basic problem with the current system of services for abused and neglected children and their families is that the State lacks a systematic method of data collection to provide useful information about the outcome of treatment services. Although the State collects information on the disposition of foster care cases, such as adoption, guardianship, and emancipation, there is no comparable data on the effectiveness of family reunification services or prevention services intended to avoid the necessity of out-of-home placement for abused and neglected children. Therefore, the State does not have information to help policymakers decide whether the major policy changes have improved services to children, and which administrative and treatment approaches are most productive. In an attempt to evaluate the impact of policies on children, a research team from Stanford University conducted a longitudinal study comparing abused and neglected children who remained in their homes to those who were placed in foster care. The study concluded that there are a wide range of essential services that children need in either situation. They found that the options currently available to children leave them in great distress. The authors state that:

> "If the only goal of public policy is to prevent severe physical harm to the children, the current system is justifiable. However, if legislators are concerned with children's academic, social and emotional development, as we believe they should be, our data suggest that legislators have to do more than adopt a preference for home or foster care. Under present policies, children remain at serious risk in both settings. We believe that they and their caretakers must be provided extensive services to help the children overcome the developmental problems associated with abuse and neglect."[130]

Some professionals in the child protective services field believe that part of the existing problems are inherent to the delicate nature of the service. In fact, the problem of "underserving" some and applying unnecessary or inappropriate intervention to others is not unique to California. In reviewing data on national trends in child abuse programs, Douglas Besharov, former director of the United States Center on Child Abuse and Neglect, notes that child protective cases have reached unprecedented levels. He asserts that in trying to protect too broad of a population of maltreated children with inadequate funds, the system may end up causing more harm to many families than it helps. Moreover, Besharov states that oftentimes pragmatic program restraints lead to intervention that is unwarranted, harmful to families, and traumatic to children.[131]

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[130] Wald, Michaels, et al. Protecting Abused/Neglected Children: A Comparison of Home and Foster Placement. Stanford University, 1985, p.165.

[131] Besharov, Douglas. "Doing Something About Child Abuse". Harvard Journal of Law and Public Policy. Summer 1985.

III. CONCLUSIONS AND RECOMMENDATIONS

This chapter presents the Commission's conclusions in its study of the Children's Services System in California. It also presents the Commission's detailed recommendations for addressing the problems and issues identified in the study.

CONCLUSIONS

The Commission found that the State of California has recognized the value and needs of children by instituting numerous programs and committing significant resources to children's services. A survey conducted by the Commission showed that California's Children's Services system spends more than $5.9 billion annually, excluding State funds for K-12 education. Of this amount, approximately $1.2 billion is earmarked for 35 programs serving children in need of child care services, runaway/homeless youth, and abused and neglected children. In addition, various private and nonprofit agencies spend millions of dollars annually on children's services.

While the State has made a significant commitment of resources to providing children's services, there is no overall State policy which establishes goals and priorities for providing the wide range of State-supported children's services programs. The Commission's study revealed that there are at least 42 different State plans that are concerned with children, 160 programs that serve children, and at least 10 committees in the Legislative and Executive Branches of State government involved in establishing and reviewing policies relating to children.

Although the majority of children in the State are well provided for by their families, all families and children in California may need help from children's services providers at some time. The State of California, in cooperation with local governments, private agencies, and various non-profit organizations funds and administers an extensive children's services delivery system. Due to the increased number of children in California, the increased number of children in need of service, and the number of children with multiple problems, the State's children's services delivery system is being strained to its limits. Specifically, the problems that the Commission identified in the three areas it reviewed, children in need of child care services, runaway/homeless youth, and abused and neglected children, are summarized below.

Children in Need of Child Care

The structure of California families has changed drastically in recent years. Due to the increase in the number of single parents and dual-wage earners, child care has become a necessity for working families. The lack of subsidized and nonsubsidized child care spaces has reached crisis proportions. Even middle income families that can pay for child care are often unable to obtain services. In addition, many California employers do not have policies or programs supportive of working parents. As a result, many parents who would like to take child care leave cannot because they cannot afford the loss of wages or the negative impact it may have on their employment.

To address the growing child care availability problems, both the public and private sectors can take additional steps to encourage the expansion of quality child care. For employers, the development of child care-related programs and policies can result in improved morale and productivity, reduced turnover and lower absenteeism. Quality child care is cost-effective to the State and beneficial for children. High quality child care can substantially reduce problems later in life that if left unattended will result in increased costs such as juvenile delinquency and the need for special education programs.

Unfortunately, the lack of subsidized child care spaces has meant that only seven percent of the 1.1 million children eligible for subsidized child care receive it. Even more severe are the shortages of adequate child care for special populations such as children with disabilities and migrant labor families. Due to the lack of sufficient subsidized and nonsubsidized child care, the needs of these special groups are not being met. If the public and private sectors do not respond to the growing need for child care, many parents will have to make the difficult decision of leaving children unattended or foregoing work.

In addition to allowing families to work, child care can serve an important function for children in troubled families. By early identification of child abuse, child care can provide a first line of prevention that is less costly than remedial services.

Runaway/Homeless Youth

There are an estimated 20,000 to 25,000 runaway/homeless youth on any given day in California. These youth have a multitude of problems, including the need for shelter, medical treatment and counseling. In addition, many of these youth are forced to engage in criminal activity, prostitution, and drug use to survive. Presently, the State is spending only $1.1 million to fund two pilot projects specifically designed for runaway/homeless youth and a runaway hotline. Due to the lack of adequate programs and services for runaway/homeless youth, there is a strong likelihood that these youth will not become responsible, productive adults and may be a burden to the State for the rest of their lives.

Runaway/homeless youth generally require a wide array of services involving numerous agencies. A key to effectively serving these youth is providing stabilization in a safe environment with fixed responsibility for services. Unfortunately, few communities provide this crucial coordination. As a result, many runaway/homeless youth are not served, or only have a portion of their needs served.

Family reunification is a primary objective of state-mandated child welfare services. It is not a realistic goal for a significant portion of the runaway/homeless youth population who have been abandoned by their parents or who have left abusive family situations. While emancipation is a more realistic goal for many of these youth, few independent living programs exist that provide the comprehensive services needed by multiple-problem youth. As a result, it is not surprising that so many runaway/homeless youth remain on the streets.

The recent efforts by the State of California to begin to address the problems of runaway/homeless youth have had promising results. Two pilot projects for serving runaway/homeless youth were established in fiscal year 1986-87, one in San Francisco and one in Los Angeles. These pilot projects had contact with approximately 11,400 youth during the first year of operation and have shown the ability to meet the youth's need for outreach services, food, shelter, clothing, medical assistance, counseling, and long-term stabilization planning. However, due to their limited shelter capacity, the two pilot projects have had to turn away numerous youth.

Abused And Neglected Youth

The children's protective services system in California is experiencing a dramatic rise in the number of reports of abuse and neglect. Between 1982 and 1986, the number of emergency responses for child protective services rose from 73,473 to 342,001. This is an increase of 268,528 responses over a five-year period, or an increase of 365.5 percent. The increased level of reporting of child abuse and neglect is partially due to recent changes in State law relating to when potential abuse and neglect should be reported to the public's heightened awareness of the problem of child abuse and neglect. Increased reporting, combined with a shortage of needed services, and a lack of interagency cooperation, has resulted in severe workload problems for child welfare workers and has reduced the level of services provided to abused and neglected children.

County child welfare workers have to make difficult decisions in the investigation and resolution of reports of child abuse and neglect. Because of the sheer volume of cases currently being referred for investigation and a lack of support services, some children and their families often have extremely negative interactions with the State's child welfare system causing problems for children and families that could be avoided.

There is limited training of child welfare professionals, foster parents, physicians, educators, and others who must report suspicions of child abuse and neglect, investigate allegations, and provide case management. This lack of training contributes to faulty investigations, inadequate recognition of the needs of abused and neglected children, as well as inappropriate prescribed services and case management. As a result, children and their families may be subjected to unnecessary suffering by the child protection system.

The court system is experiencing difficulties dealing with the increasing number of cases involving abused and neglected children. Although recent legislative reforms, including Senate Bill 14, were intended to bring about needed changes to expedite case proceedings, these reforms have not fully addressed the problem of court delay and in some cases have exacerbated existing problems. As a result, delays in the court system can further traumatize abused and neglected children because the ultimate placement decision may be prolonged.

Various prevention strategies exist to help reduce the incidence of child abuse and neglect. Programs that utilize these strategies can be cost beneficial to the State because such programs can eliminate the need for more costly remediation services in the future, such as health and mental health

services, out-of-home placement, and juvenile justice programs. Many of these prevention programs and strategies are not being fully implemented in California. As a result, the State is incurring current and long-term social program costs that could be avoided.

There is a shortage of services for abused and neglected children and their families in California. Specifically, the State needs increased family support services, health services, foster care services, services for children with special needs, and group home services. In addition, the State does not have a systematic method of collecting data on treatment outcomes for abused and neglected children and their families. As a result, children and their families who are in need of services are not receiving them. Furthermore, State and local governments have only limited means of evaluating the cost-effectiveness of the services which they are providing.

RECOMMENDATIONS

This section presents the Little Hoover Commission's detailed recommendations for addressing the problems identified in the report.

Children's Services System

1. Establish a Commission on Children and Youth or a Children's Czar

The Governor and the Legislature should take action to establish a Commission on Children and Youth or a Children's Czar to address the problems in the State's children's services delivery system.

One alternative available to the Governor and the Legislature would be to establish a Commission on Children and Youth to allow California to set priorities, coordinate services, eliminate duplication of effort, and reduce gaps in services. The Commission should function as an oversight authority and be responsible for adopting an overall policy for the provision of children's services and protection in the State of California.

The Commission on Children and Youth should be responsible for the development of a coordinated children's services delivery system by performing the following activities.

- Acting as advocate for policy development and implementation of children's services;
- Enhancing the coordination of children's services among state local and private agencies and service providers;
- Providing fiscal review and service analysis for children's programs including the identification of ways to better utilize existing resources; and
- Proposing legislative action to enhance the provision of children's services.

The Commission on Children and Youth should be a bipartisan Commission composed of 13 members.

- Five members appointed from the private sector by the Governor;
- One member appointed from the private sector by the Attorney General;
- One member appointed from the private sector by the Superintendent of Public Instruction;
- One member appointed from the private sector by the Speaker of the Assembly;
- One member appointed from the private sector by the Senate Rules Committee; and

- Four legislative members:

  - Chairman of the Senate Appropriations Committee;
  - Member of the Senate appointed by the Senate Rules Committee;
  - Chairman of the Assembly Ways and Means Committee; and
  - Member of the Assembly appointed by the Assembly Speaker

No member of the Commission should be affiliated with an organization that receives public funds for children's services. Although the Commission would technically be a part of the Executive Branch of state government, it would function independently as an oversight committee and report to the Governor, the Attorney General, the Superintendent of Public Instruction, and the Legislature. By statutory design, no more than seven of the thirteen members should be from the same political party.

To carry out its functions, the Commission should appoint an Executive Director and employ a small technical staff.

Another alternative available to the Governor and the Legislature to facilitate the coordination and control of children's services in California would be to appoint a Children's Czar to oversee and direct the activities in state government related to services for children and youth. Specifically, the Children's Czar would be responsible for developing a consistent state policy for children that was followed by state agencies. The Children's Czar could oversee an interagency task force of department directors responsible for administering programs for children and youth.

2. Adopt a Uniform Children's Services Policy to Address the Needs of the Whole Child.

The Legislature should adopt a joint resolution establishing a statewide policy for children's services. The policy should provide, at a minimum, the following:

- Every child has the right to shelter, safety, security, basic physical, and mental health care and adequate nutrition;
- Every child has the right to adequate quality care and supervision when parents are at work, school, job training, or are incapacitated;
- Every child has a right to a nurturing relationship with a caring adult;
- Families should be the primary providers of support to children. Thus, the State should ensure a good future for all children by promoting the well being of families and providing support for families that are not self-sufficient;

- There is an appropriate government role to provide prevention and early intervention services to families and children to maintain healthy families and prevent future long-term costs;

- Services to children must be undertaken in a purposeful, coordinated, intergrated manner offering services cost effectively and ultimately benefitting the user and taxpayer; and

- State resources to children should be equitably utilized in a cost-effective manner.

Children in Need of Child Care Services

3. Include Child Care in Community General Plans as an "Essential Service."

The Governor and the Legislature should require that all local planning, development, and redevelopment projects include plans for adequate child care space or provide evidence that child care is not needed. The plan should include an analysis of supply and demand.

4. Modify the California Revenue and Taxation Code to Provide Income Deferment for Child Care.

The Governor and the Legislature should adopt an income deferment allowance modeled after Section 129 of the Federal Internal Revenue Code. This would allow employees to defer part of their salary for child care costs. The deferred amount would not be taxed as income for the employee and the employer would not pay social security on the deferred portion of income. The deferment should be allowed for both on-site and off-site child care. Once adopted, the State should encourage the use of the income deferment by publicizing its availability.

5. Encourage the Expansion of Quality Child Care.

The Governor and the Legislature should reward high quality child care programs by including program quality in the eligibility criteria for State subsidized programs. When evaluating applications for any state funded child care provider assistance program, including low interest loans, grants, portable buildings, etc., the quality of the child care program should be a consideration. Criteria used to evaluate program quality should include the following:

- Health and safety;
- Physical environment of facility and grounds;
- Child care staff retention rates;
- Staff development through training and other methods;
- Diversity of child population served, such as low income, disabled, urban, and single parent;
- Curriculum;
- Nutrition and food services;
- Services provided to families including, but not limited to: fee reduction programs for families who need them, including work

offset options; parenting classes; regular parent-teacher conference periods; and social events;

- Fees charged to clientele as compared to the average center or family day care programs in the area; and
- Administration.

6. Perform a Study Evaluating the Effects of Modifications to Subsidized Child Care Formulas on the Availability of Child Care Spaces.

The Governor and the Legislature should require that a study be performed to evaluate the effects of income formulas and parent fee modifications on the number of children served in subsidized child care. This study should address the effects of the potential modifications:

- Increasing the co-payment fee charged to families in each income category; and

- Changing the "family rate" charged for subsidized child care to an individual child rate so that fees will be charged for each child enrolled in a subsidized child care program.

The State should consider the results of this study in determining how to maximize the limited resources and provide quality child care.

7. Establish a Pilot Project to Evaluate the Impact of Caregiver-to-Child Ratios on the Quality of Child Care.

The Governor and the Legislature should establish a pilot project to evaluate the impact that differing caregiver-to-child ratios have on the quality and cost of child care. Specifically, this study should evaluate the following:

- Impact that Education Code, Title 22 and other caregiver-to-child ratios have on the quality of child care;

- Impact that Education Code, Title 22 and other caregiver-to-child ratios have on the cost of child care;

- Feasibility of adopting a single set of caregiver-to-child ratios for child care services in California; and

- Opportunities to modify the existing caregiver-to-child ratios to expand the number of subsidized and nonsubsidized child care spaces in California.

8. Establish Statewide Minimum Training and Educational Requirements for Center-Based Child Care Teachers and Caregivers.

The Governor and the Legislature should establish one set of minimum caregiver and teacher requirements for center-based child care providers in the State. Specifically, these standards should require the following:

- Teachers must have:

- 24 semester units in Early Childhood Education/Child Development (ECE/CD) of which three units must be a course that focuses on the specific age grouping that the teacher is hired to teach, and 12 months experience; or

- 18 semester units in ECE/CD and two years experience; or

- Children's center instructional permit which requires: 24 semester units in ECE/CD, as well as 16 units in general education, experience, and passage of a basic skills test, or an associate's or bachelor's degree.

A teacher may be hired after completing 6 semester units with 6 months experience but must complete two or more units per semester until meeting the requirement.

In each case, three units in a course that centers specifically on the age grouping that the teacher is hired to teach must be included in the completed teacher requirements. The three units, in each case, may be substituted for six months experience working, during which at least three-fourths of the time is spent working directly with the age grouping the teacher is hired to teach.

o Caregivers must be age 18 or older, unless they are high school graduates or are enrolled in a regional occupational program. In addition, caretakers must work at all times in the presence of a qualified teacher and must have:

- Within six months of being hired, caregivers should have participated in an approved training or academic courses dealing with at least four of the following areas:

  (1) First aid and emergency procedures;
  (2) Communicable diseases;
  (3) Child development;
  (4) Discipline;
  (5) Nutrition;
  (6) Child abuse/neglect, including obligations as a mandated reporter;
  (7) Early childhood education; or

- Six semester units in early childhood education/child development.

9. <u>Evaluate the Feasibility of Recognizing a Variety of Innovative Child Care Training Methods</u>

The Governor and the Legislature should require that a study be implemented to evaluate a variety of innovative training methods including the Child Development Assistant (CDA) program and approved and verifiable in-service training programs; establish criteria for recognizing program certification, if deemed appropriate, and establish consistent procedures for acquiring a California Childrens Center permit.

10. Expand Respite Child Care Programs for Families Who Show Risk Factors for Child Abuse or Neglect.

The Governor and the Legislature should expand respite child care programs for children who are at risk of abuse and neglect by doing the following:

- Encouraging the expansion of respite child care spaces provided through State Department of Education resource and referral programs;
- Conducting intensified recruitment, training and specialized certification for recruiting family home day care providers to provide services for these children;
- Increasing the number of child care centers that offer respite care;
- Ensuring that child caregivers are specially trained or have academic training on the needs of children who have been abused or neglected; and
- Encouraging respite child care contractors to provide parent support services and education.

11. Decrease Outdoor Square Footage Regulations for Infant Care.

The Governor and the Legislature should help stimulate the expansion of the number of infant care spaces offered by child care providers by reducing the minimum outdoor space requirements for centers providing infant care.

12. Require Employers to Grant Unpaid Job-Protected Leaves to New Parents Who Desire Them.

The Governor and the Legislature should require employers to grant unpaid but job-protected parental leaves of six months, following the birth or adoption of a child. Small businesses with few employees should be exempted from this law.

13. Enforce SB 303 Legislation That Requires Contractors to Provide Child Care for Disabled Children.

The State Department of Education should ensure that school-age child care programs receiving SB 303 funds under Education Code Sections 8460-8492 are providing care for disabled children, as currently required by statute.

14. Make Training Materials Available and Disseminate to Those Caring for Handicapped Children.

The State Department of Education should make training materials available to child care providers throughout the State regarding working with handicapped children.

15. Ensure That GAIN Participants are Fully Informed of the Child Care Options Open to Them.

The Governor and the Legislature should require that all GAIN participants are provided with a comprehensive list of local family day care providers and child care centers available through the State Department of Education and other providers. Additionally, participants should be verbally informed of the child care arrangements available to them and directed to consult the provider list for their full range of options.

16. Ensure that GAIN Participants Are Not Given Preferential Entitlement to SDE Subsidized Child Care.

The Governor and the Legislature should require that GAIN child care participants should not be given preferential treatment for subsidized child care. They should be treated in the same manner as all other applicants for subsidized care.

17. Provide a Mechanism for Stimulating Public-Private Partnerships to Increase the Availability of Child Care and to Improve the Quality of Existing Child Care Programs.

The Governor and the Legislature should develop a plan through the resource and referral agencies for creating local child care consortia which include participation from private employers, private non-profit agencies, and concerned private citizens. The purpose of the consortia should be to expand upon services currently provided by the state and local governments and community organizations. The local consortia should focus on developing financial support for increasing the availability of child care and improving the quality of existing child care programs.

18. Amend the Mello-Roos Community Facilities Act of 1982

The Governor and the Legislature should amend the Mello-Roos Community Facilities Act of 1982, to specifically name child care as an eligible service. This will allow residents of an area to become a community facility district and retire debt incurred to build a facility through the use of a special tax.

19. Modify State Law to Specify Child Care Facilities as Eligible for Tax Increment Financing

The Governor and the Legislature should modify State law to provide that child care facilities are eligible for tax increment financing. Currently, redevelopment agencies authorized under the Community Redevelopment Law of California are public entities established to revitalize economically depressed or blighted areas in a community. However, child care facilities are not specifically listed as an eligible service for such financing.

20. Amend the Quimby Act to Allow for the Funding of Child Care Facilities on Park Land

The Governor and the Legislature should amend the Quimby Act to explicitly denote that child care facilities could be built on park land and be eligible to qualify for State funding.

Runaway/Homeless Youth

21. Continue The Homeless Youth Act Pilot Projects

The Governor and the Legislature should continue the pilot projects as an on-going program at the current level of funding. The first year of operations has demonstrated the need for emergency services to thousands of homeless youth who are living on the streets of our State's largest cities. Services provided by each agency have been created or greatly enhanced through the Homeless Youth Pilot Projects. The youth services agencies have established a solid network which has successfully contributed to helping many youth who otherwise would have remained on the streets. To discontinue these projects would eliminate one of the only sources of funding targeted to this homeless population and would likely result in these youth returning to the streets and becoming involved with prostitution, theft, drugs, and many other illegal activities resulting in a much higher cost to society.

22. Require That Both Pilot Projects Funded Through The Homeless Youth Act Coordinate Public And Private Sector Services.

The Governor and the Legislature should require that both pilot projects coordinate public and private sector services. This may be accomplished in San Francisco by expanding the YES Coalition to include public sector agencies.

23. Require an Annual Report From The Office of Criminal Justice Planning (OCJP) Regarding the California Runaway Hotline to Provide a Continuing Analysis of The Need And The Programs in The State.

The Governor and the Legislature should require OCJP to provide an annual report on the Runaway Hotline Project to demonstrate and document the need for shelter, outreach, and medical services for youth. The report should include statistics regarding demographics, origin of youth, ethnicity, and status at intake.

24. Require Implementation of The Attorney General's Opinion Relating to Services to Runaway/Homeless Youth.

The Governor and the Legislature should require full implementation of the Attorney General's opinion. In a written opinion dated October 1986, the California Attorney General recently ruled that counties may not deny service to runaway/homeless youth simply because they are officially residents of some other county or state. However, many service providers continue to report that counties are refusing to provide services for this reason.

25. Reassess The Definitions of Status Offenders and Abused and Neglected Children.

The Governor and the Legislature should assess the definitions of 601s and 300s to avoid continuation of youth "falling through the cracks." Current statutory definitions impede the process of providing services to the homeless. These classifications impose distinctions which dictate the manner in which services could be provided. Currently, many local departments of social services do not recognize homeless youth as abused and neglected as provided for in the Welfare and Institutions Code, but rather insist that the youth are status offenders because they left home.

Abuse and Neglected Children

26. Give Priority to Programs that Prevent Child Abuse and Neglect

The Governor and the Legislature should give priority to programs that prevent abuse and neglect through primary, secondary, and tertiary intervention. Prevention programs should be designed to give family support a high priority. Programs will focus on the protection of children through enabling at risk families to better function well.

27. Ensure that SB 14 Services are Fully Implemented

The Governor and the Legislature should ensure that the services delineated in SB 14 have been fully funded and implemented. These services should include the following:

- Family reunification;
- Prompt investigations;
- Timely permanency planning; and
- Provision of counselling and other support services to the entire family.

28. Evaluate and Develop Funding Streams that Promote Interagency Cooperation and Coordination

The Governor and the Legislature should direct the newly formed Commission on Children and Youth to oversee the development of a plan to coordinate funding for children's services. This will focus on creating funding streams that require interagency cooperation to assure the best treatment of troubled children and youth.

29. Require the Use of Court Mediators, Where Appropriate

The Governor and the Legislature should require the use of court mediators, where appropriate, in order to minimize the use of the court system. To ensure proper direction for all involved in the mediator process SDSS should develop plans that:

- Clearly define the process to all participants;
- Clearly state the situations qualifying for use of a trained, professional mediator; and

- o Assure that the mediator or appointee will monitor adherence to agreements for a specified period of time.

30. Require That All Counties Develop And Implement an Administrative Review Process For Children in Out-of-Home Care Who Have Had a Permanency Planning Hearing

The Governor and the Legislature should require that an administrative review process be used to encourage better and more personalized monitoring of case plans and to allow the views of parents or others close to the child to be considered, and to avoid use of the courts when appropriate. Counties will be given some discretion in planning but must adhere to clear guidelines set by SDSS, including:

- o Composition of review panel: Personnel from county child welfare services (CWS) personnel shall be at least at the Social Worker II level. At least 60 percent of panel should be those not working directly with the case; county CWS are encouraged to utilize non-CWS or SDSS employees to serve on the panel.

- o Cases exempt from the administrative review process include:

  - Cases that have been referred for adoption planning or legal guardianship;
  - Cases in which the child's parents request a court review;
  - Cases involving a change in the court ordered plan; and
  - Other cases with special circumstances that are deemed inappropriate for administrative review.

31. Require the Use of Video or Audio Tapes in Investigations of Child Abuse And Neglect

The Governor and the Legislature should require that video or audio taping be performed on initial interview with CWS worker and child, and that extreme efforts should be made to minimize the need for repeated, non-therapy related interviewing of child victims. Such taping should be required with clear guidelines for its use, including:

- o Tape shall run continuously through interview;
- o Child interviewing should be handled by the social worker assigned to the case; and
- o Interviewer should be supportive of the child, but avoid asking leading questions.

32. Encourage Continuous Case Management For Abused And Neglected Children After Emergency Response

The Governor and the Legislature should require caseworker consistency and minimize duplication of multiple interviews by children's services professionals. In addition, the Governor and the Legislature should encourage pilot projects that develop appropriate service models based on continuous case management and multi-disciplinary team involvement.

33. Encourage The Statewide Use of Multi-Disciplinary Teams

The Governor and the Legislature should ensure that following the initial intake referral a multi-disciplinary team of professionals evaluate the child's needs and make an appropriate case plan. The primary caseworker should remain an integral part of this process.

34. Establish a State-Supported, Multi-Faceted Interdisciplinary Training Program

The Governor and the Legislature should establish an interdisciplinary training program to assure that those individuals that work with abused and neglected children have the knowledge and skills necessary to bring about the best possible outcomes for children and their families. These efforts should include training for mandated reporters in prevention and protection, for foster parents and child care staff of group homes and residential facilities, and for professional groups serving abused and neglected children. The training program should include the following:

- Identification of high risk families and children;
- Early intervention strategies;
- Guidelines for what they must legally report;
- Clear definition of roles;
- Feedback on quality of reports;
- Information about and access to resources; and
- Clarification of role in providing information.

In addition, the State should encourage other training that is needed, including:

- Training in interviewing and investigating allegations of abuse or neglect for professionals in social work, law enforcement and probation;

- Relevant child abuse and neglect training in professional education programs;

- Interdisciplinary workshops to transfer skills and knowledge among involved professions;

- Training for judges who will be hearing child abuse and neglect cases; and

- Training for foster parents and child care staff who work in group homes and residential facilities, including:

  - minimum standard of preservice training;
  - standard of in-service training;
  - a clear definition of the role of the foster family; and
  - options for upgrading the entry level hiring and training standards for group homes.

35. Require Certification For Caseworkers

The Governor and the Legislature should require certification that includes both initial and ongoing training beyond professional education for all those who work with abused and neglected children. Specifically, this certification should include:

- Such training will allow some statewide, uniform, base of information regarding investigative techniques and state procedural guidelines. With this base, counties can then train workers in those areas which allow county discretion;

- SDSS should clarify regulations for non-clerical staff involved with family reunification and permanent placement services. This should include a requirement that a minimum of 50 percent of such staff possess a Masters in social work; and

- California regulations should require that for each certification renewal, staff attend a specified number of workshops, seminars or professional meetings.

36. Ensure That Health Needs of Children in Out-of-Home Care Arrangements Are Adequately Met and Maintained on a Regular Basis

The Governor and the Legislature should modify current payment policies for medical services for foster children to supplement Medi-Cal payments, when necessary, for routine and/or on-going physical, mental and dental health care of children in out-of-home care.

APPENDIX A

LISTING OF ADVISORY MEMBERS

APPENDIX A

CHILDREN'S SERVICES BLUE RIBBON ADVISORY COMMITTEE

Mrs. Jean Kindy Walker
Chairman, Children's Services Subcommittee

Mr. Albert Gersten, Jr.
Commissioner
Little Hoover Commission

Mr. Haig Mardikian
Vice Chairman
Little Hoover Commission

Mr. Abraham Spiegel
Commissioner
Little Hoover Commission

The Honorable Tom Bates
Member of the Assembly

The Honorable Marian Bergeson
Member of the Senate

The Honorable Sunny Mojonnier
Member of the Assembly

The Honorable David Roberti
Member of the Senate

Ms. Hida Avent, Director
Stepping Stones
Santa Monica, California

Ms. Susan Brock, Executive Director
The Children's Alliance
Sacramento, California

Mr. Jerry Buck
Chief Probation Officer
Contra Costa County
Martinez, California

Mr. Brian Cahill
Hathaway Children's Village
Pacoima, California

Mr. Robert Chaffee, Director
Department of Children's Services
County of Los Angeles

Mr. Tony Cimarusti
Assistant Director
Crime and Delinquency Prevention
Sacramento, California

Ms. Nancy Daly
Los Angeles Children's Commission
Bel Air, California

Mr. Thomas David, Ph.D
Children's Hospital of Los Angeles
Division of Adolescent Medicine
Los Angeles, California

Mr Jed Emerson, Executive Director
Larkin Street Youth Center
San Francisco, California

Ms. Patricia Gardner
Department of Education
Sacramento, California

Mr. Paul Green
Probation Department
County of Alameda
Oakland, California

Mr. George Al Howenstein, Jr.
Executive Director
Office of Criminal Justice Planning

Dr. Kenneth Kizer, Director
Department of Health Services
Sacramento, California

Ms. Kathy Kubota, M.S.W.
National Association of Social Workers
Pasadena, California

Ms. Antonia Lopez, Chair
The Migrant Coalition
Foundation Center
Sacramento, California

Ms. Sarah Maina
Executive Director
Florence Crittenton Services
San Francisco, California

Ms. Rosemary Mans
Vice President
Bankamerica Foundation
San Francisco, California

Ms. Jacquelyn McCroskey, DSW
School of Social Work
University of Southern California
Los Angeles, California

Mr. Herb Paine
United Way of California
San Francisco, California

Ms. Nancy Pompei
Attorney General's Crime
Prevention Unit
Sacramento, California

Ms. Brenda Posten
Catholic Social Services
San Francisco, California

Ms. Karen Hill Scott, Ph.D.
Crystal Stairs
Inglewood, California

Ms. Melinda Sprague, Chair
Governor's Advisory Committee on
Child Development Programs
Los Angeles, California

Mr. Loren Suter
Department of Social Services
Sacramento, California

Ms. Deanne Tilton
State Social Services Advisory
Board - ICAN
El Monte, California

Mr. Ed Warren
Professional Association of
Childhood Education
San Francisco, California

Ms. Vivian Weinstein
Mayor's Advisory Committee on
Child Care
Los Angeles, California

Mr. Gary Yates
High Risk Youth Project
Los Angeles Children's Hospital
Los Angeles, California

APPENDIX B

CATALOG OF STATE GOVERNMENT PROGRAMS SERVING ABUSED AND NEGLECTED CHILDREN, RUNAWAY/HOMELESS YOUTH, AND CHILDREN IN NEED OF CHILD CARE

DEPARTMENT OF SOCIAL SERVICES

Program

Aid to Families with Dependent Children
-Family Group (AFDC-FG)
-Unemployed Parent (AFDC-U)

Administered By:

Welfare Program Division

Statutory Authority

Welfare and Institutions Code, Sections 11000, 11050, 11201, 11205, 11250, 11450

Federal: SSA Title IV, Part A; 42 usc 601 et seq

Year Enacted: State: 1937; Federal: 1935

Estimated 1986/87 Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Local funds
Administration	$ 8,114	$ 8,367	$ 0
Payments	$1,659,272	$1,861,493	$200,135
Other	$ 100,346	$ 197,603	$107,190
TOTALS	$1,767,732	$2,067,463	$307,325
Personnel years	248.9		

Estimated Clients Served

1,687,200 Persons

Objectives

To provide reasonable financial assistance to eligible, needy families with dependent children.

Eligibility

Eligibility is limited to those eligible families in which the children are deprived of one or both parents due to the parent's incapacity, death, other continuing absence, or to the unemployment of a parent. Eligibility is further linked to meeting other specified criteria as follows:

- must be a legal resident;
- family must have eligible child under the age of 19 years old (with limits for 18 year olds);
- must not have property valued in excess of $1,000, excluding primary residence and certain other personal property
- must not have gross income in excess of 185% of the Combined Minimum Basic Standard of Adequate Care (MBSAC) and the value of any special needs.

Program Activity

Under the state plan, the AFDC program in California is administered by the State Department of Social Services through county welfare departments. AFDC program benefits are provided to eligible families upon approval of application. Benefits consist primarily of cash assistance. Program services also include referrals to: family planning, child health and disability prevention, and other social services.

DEPARTMENT OF SOCIAL SERVICES

Program

Aid To Families with Dependent Children-
Foster Care (AFDC-FC) Program

Administered By:

Welfare Program Division

Statutory Authority

Public Law 96-272 (42 USC 671)
Welfare and Institutions Code, Sec. 11400 et seq
(Chapter 977, Statutes of 1982)

Year Enacted: Federal: 1980; State: 1982

Estimated 1986/87 Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Local funds
Administration	$ 2,843	$ 2,317	$ 0
Payments	$ 265,293	$ 82,891	$ 14,177
Other (county administration)	$ 7,569	$ 8,655	$ 8,144
TOTALS	$ 275,705	$ 93,863	$ 22,291

Personnel years 99

Estimated Clients Served

Objectives

To provide maintenance payments for children who have been removed from their homes and placed in foster care. These children may be placed in foster family homes or in group homes, the latter generally offering more intensive treatment

Eligibility

In order to receive AFDC-FC payments, authority for placement must be established by: court order (dependency proceedings), relinquishment of parental rights (court proceeding), nonrelated legal guardianship (court proceeding), or voluntary placement supervised by the CWD. In addition, specified AFDC eligibility requirements (such as age, residence, child support referral, etc.,) must be met.

Program Activity

The AFDC-FC program provides statewide maintenance payments for children who require 24-hour out-of-home care because they are abused, neglected or exploited and their own families are unable or unwilling to care for them. Payments are made to the providers of board and care for these children. AFDC-FC eligible children must receive specified child welfare services which are funded under Title IV-B.

These services include:

- preplacement preventive services

- written assessment and service plan
- family reunification or permanent placement services
- six month visits by Care workers
- periodic reviews
- permanency planning hearings

The AFDC-FC program is administered nationally by the U.S. Department of Health and Human Services. The state establishes eligibility standards for the state-only AFDC-FC program. The program is administered by the counties under the supervision of DSS. DSS establishes individual rates for group homes and homefinding agencies. Foster family home rates are established by age group category through the Budget Act.

DEPARTMENT OF SOCIAL SERVICES

The estimated average monthly caseload of children receiving AFDC-FC funding is 39,900

DEPARTMENT OF SOCIAL SERVICES

Program

Supplemental Security Income/State Supplementary Program (SSI/SSP)

Administered By:

Welfare Program Division

Statutory Authority

Welfare & Institutions Code, Section 12200(f)
(Chapter 1216, statutes of 1973)

Year Enacted: 1973

Estimated 1986/87 Fiscal Year Expenditures (in thousands)

	State funds	Federal funds	Local funds
Administration	$ 782	*	0
Payments	$ 40,801	$ 89,152	0
Other	0	0	0
TOTALS	$ 41,583	$ 89,152	0
Personnel years	9.7		

* Direct administrative costs are 100% federally funded; dollar amount unavailable

Estimated Clients Served

27,024 disabled minors (under 18 years of age and living with parent(s)). Figure is average monthly caseload from November, 1985 - October, 1986

Objectives

To provide financial assistance to aged, blind, or disabled California residents in supplementation of the federal Supplemental Security Income (SSI) benefit. The SSI/SSP grant is intended to meet the recipient's basic needs of food, clothing and shelter and, through linked benefits, to provide assistance and services which will enlarge their opportunities or independence

Eligibility

Disabled minors must be under age 18, and have a physical or mental impairment that is comparable in severity to one that would prevent an adult from working and is expected to last at least 12 months or result in death.

Program Activity

The SSI/SSP program is a cash assistance program funded by both federal Social Security Administration (SSI) and state (SSP) monies. SSI/SSP is administered by the federal Social Security Administration (SSA) which takes applications at district offices throughout the state. SSA is responsible for determining eligibility, computing grants, and sending out the combined monthly federal/state benefit check. Administrative costs of the program are borne by the federal government. The state Department of Social Services monitors and provides input on SSA's program policy and procedure, federal and state legislative and regulatory proposals that affect the program; responds to inquires form the private and public sectors; manages the fiscal and budgetary aspects of the SSP Program; negotiates contract agreements with SSA; etc.

DEPARTMENT OF SOCIAL SERVICES

Program

Greater Avenues for Independence (GAIN)

Administered By:

Employment and Community Services Division, Employment Programs Branch, GAIN Implementation Bureau

Statutory Authority

Welfare and Institutions Code, Section 11320.36 (Chapter 1025, Statutes of 1985)

Year Enacted: 1985

Estimated 1986/87 Fiscal Year Expenditures (in thousands)

	State funds	Federal funds	Local funds
Administation	$ 2,061	$ 2,059	0
Payments (Allocations to counties)	$ 22,550	$22,550	0
Other	0	0	0
TOTALS	$ 24,611	$24,609	0
Personnel years	37.7		

It is estimated that the GAIN program will register 97,000 participants during SFY 1986-87. Also, it will cost approximately $13.1 million to reimburse these participants for child care costs during this period. In addition it is estimated that it will cost an additional $2.5 million to provide transitional child care cost reimbursement for those participants who acquire unsubsidized employment.

Estimated Clients Served

The total number of children served is estimated at 52,000. Approximately 10,000 children are to be served under transitional child care during 1986-1987.

Objectives

To provide a full range of employment-related services (including child care services) that are designed to provide Aid to Families with Dependent Children (AFDC) program applicants and recipients with the types of skills that will allow them to acquire unsubsidized employment.

Eligibility

A GAIN participant with a child under 12 years of age who has indicated the need for child care. Reimbursement for costs is available for licensed child care or child care exempt from licensure

Program Activity

This program is state (and federal) funded, coordinated at the state level by the Employment and Community Services Division, and administered locally by county welfare departments (CWDs). The CWDs have the choice of directly providing child care services or contracting with existing public or private programs, such as Resource and Referral agencies, to provide any or all of the child care services. Participant costs are reimbursed up to the regional market rate as determined annually in accordance with local Resource and Referral programs and the Alternative Payment program administered by the State Department of Education. Advance payments are available to participants whenever necessary and desired by the participant. Payment for child care services is also available for a transition period of three months when a GAIN registrant terminates AFDC dependency due to unsubsidized employment.

DEPARTMENT OF SOCIAL SERVICES

Program

Win Demonstration (WIN DEMO) Program-
(child care)

Administered By:

Employment Programs Branch

Statutory Authority

Welfare and Institutions Code, Section 11437
(Chapter 522, Statutes of 1984)

Year Enacted: 1984

Estimated 1986/87 Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Local funds
Administation	$ 127	$ 687	0
Payments (County costs)	$ 9,354	$20,028	$ 753
Other	0	0	0
TOTALS	$ 9,481	$20,695	$ 753
Personnel years	14.6		

Note: It is estimated that approximately $400,000 annually is expended on child care services.

Estimated Clients Served

The number of WIN DEMO registrants at the end of June, 1986 totaled 206,000. Based on the estimated costs of child care included in the GAIN program, these funds would be adequate to provide child care services to approximately 300 children per month.

Objectives

To enable employable AFDC recipients to participate in employment activities while assuring that their children receive adequate child care at no cost to them.

Eligibility

Parents of children receiving WIN DEMO-funded child care must be AFDC recipients and must be participating in a WIN DEMO-funded or approved employment activity. Most able-bodied persons receiving AFDC who have no children under age six are required to participate in employment-related activities. Individuals who are not required to participate may do so voluntarily.

Program Activity

WIN DEMO child care is provided though vendor payment system for children of parents who are participants in approved WIN DEMO employment activities. Providers must be licensed or exempt from licensing.

DEPARTMENT OF SOCIAL SERVICES

Program

Refugee Demonstration Project (RDP)
-Child Care

Administered By:

Employment and Community Services Division, Office of Refugee Services, Refugee Employment Programs Bureau, Policy Unit

Statutory Authority

Federal Authority: Fish Amendments to HR 3729 (Refugee Assistance Extension Act of 1983);

State Authority: Education Code, Section 8252 (Chapter 1352, Statutes of 1985)

Year Enacted: 1985

Estimated 1986/87 Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Local funds
Administration	0	$ 137	0
Payments	0	$1,401	0
Other	0	0	0
TOTALS	0	$1,538	0
Personnel years		N/A	

Estimated Clients Served

Caseload Data: 34,235

Objectives

To enable Refugees to participate in Refugee Demonstration Project employment activities while assuring that their children receive adequate child care at no cost to them.

Eligibility

The RDP requirements were established using existing provisions contained in the Federal Refugee Cash Assistance Program in combination with mandatory participation in all available and appropriate employment training and placement programs

Program Activity

The intent of the RDP is to encourage refugees to accept entry level minimum wage jobs and to ensure their access to, and participation in , employment training and placement programs specifically designed for refugees.

Eligible RDP participants receive RDP Supportive Services consisting of child care, transportation, and work-related expenses if necessary to allow them to participate in employment and employment-related training services.

DEPARTMENT OF SOCIAL SERVICES

Program

Unaccompanied Minor Program

Administered By:

Employment and Community Services Division, Office of Refugee Services, Refugee Support Management Bureau, Policy Unit

Statutory Authority

Federal Office of Refugee Resettlement Child Welfare Regulations (45 CFR Part 400, Subpart H, Sections 400.110-120)

Year Enacted: 1986

Estimated 1986/87 Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Local funds
Administration	0	$ 200	0
Payments	0	$2,643	0
Other	0	0	0
TOTALS	0	$2,843	0
Personnel years		N/A	

Estimated Clients Served

Average Monthly caseload: 272

Objectives

To establish protective legal custody of unaccompanied refugee children and ensure the child receives the full range of child welfare benefits and services provided to non-refugee children in Foster Care.

Eligibility

Children are eligible for the Unaccompanied Minor Program if: they have not reached the age of majority; they have entered the country unaccompanied by a parent or immediate adult relative; have no parents in the country and; meets the definition of a Cuban or Haitian Entrant.

Program Activity

This program is federally funded and locally administered through the County Welfare Department which is vested with the primary responsibility for the child's welfare. Services may include, but not limited to: initial assessment and development of a service plan, coordination and supervision of the activities listed in the plan, referral to other service activities, and selection and placement activities to insure the appropriate placement of the child.

DEPARTMENT OF SOCIAL SERVICES

Program

Child Abuse Prevention

Administered By:

Office of Child Abuse Prevention (OCAP)

Statutory Authority

Welfare and Institutions Code,
Section 18950-18979

Year Enacted: 1982-85

Estimated 1986/87
Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Local funds
Administration	$ 1,928	$ 265	0
Payments	22,938	1,383	0
Other	0	0	0
TOTALS	$24,866	$1,648	0
Personnel years	30		

Estimated Clients Served

Population targeted for service varies from project to project, program to program. At their broadest, OCAP programs seek to reach the entire school age population with prevention services. At their most limited, they focus on a small number of high risk parents and seek to ameliorate explosive situations.

Objectives

To increase child abuse prevention activities (including those directed to professional training and public awareness); to improve communications among the various elements of the child abuse and neglect prevention network; to contribute to the body of knowledge in the area of child abuse and neglect; and to ensure equity in the geographic distribution of child abuse and neglect prevention resources.

Eligibility

All 6.8 million children in California are eligible for Child Abuse Prevention services. Emphasis is given to children under 14 years of age.

Program Activity

The Child Abuse Prevention and Intervention Program provides $10.4 million per annum for the funding of projects, through local, private non-profit organizations operating programs tailored to meet needs of locally defined priorities.

The Child Abuse Training Act of 1984 provides $10.2 million annually. Children in over 5,000 schools statewide form preschool through high school are being taught child abuse prevention skills in the classroom.

Innovative demonstration service models provide $1.5 million annually. Services provided by these three year funded projects include Intensive in-home services and training for families in which self-care of children is used.

DEPARTMENT OF SOCIAL SERVICES

Program Activity

(continued)

Examples of State Children's Trust Fund Programs Include:

- Perinatal programs to enhance the positive bonding of high risk parents to prevent future abuse and neglect

- Production of training videos for the clergy and Hispanic community

DEPARTMENT OF SOCIAL SERVICES

Program

Agency Adoption Program
Independent Adoption Program

Administered By:

Adult and Family Services Division
Adoptions Branch

Statutory Authority

California Civil Code, Sections 221-239;
Welfare and Institutions Code, Sections 16100-16150, (Chapters 2-2.5)

Year Enacted: 1872* with substantial amendments to subsequent years

Estimated 1986/87 Fiscal Year Expenditures (in thousands)

	State funds	Federal funds	Local funds
Administration (state operations ONLY)	$ 6,697	$ 505	$ 0
Payments	12,107	3,936	0
Other (Local Assistance- Administration)	14,727	6,223	0
TOTALS	$33,531	$10,664	0
Personnel years (state only)	132.7		

Estimated Clients Served

Agency Adoptions: 2,599 Placements in FY 85/86;
Independent Adoptions: 2,710 Court Reports Filed, approval recommended in 2220 cases.

Objectives

Agency Adoptions -to place children who are unable to be raised by their birth parents in suitable adoptive homes.

Independent Adoptions -to assure that when the placements are made by the birth parents, the adoptive family is suitable.

Eligibility

In general adoptive services are available to those in need of them. Subsidy is available to families adopting special-needs children who otherwise could not be placed for adoption.

Program Activity

Adoption Services are provided directly by the Department of Social Services, by licensed county adoption agencies and by private adoption agencies. Public agency services are provided by counties in large counties and by the state in small, rural counties. Independent adoptions are investigated by the state except in eight counties where the county adoption agency is responsible for the investigation. The Department has five contracts with private agencies for recruitment of minority adoptive homes and seven for maternity home care of pregnant minors.

Program

Child Welfare Services

Administered By

Family and Children Services Branch,
Adult and Family Services Division

Statutory Authority

Welfare and Institutions Code, Section 16500-16514, (Chapter 978, Statutes of 1982)

Year Enacted: 1982

Estimated 1986/87
Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Local funds
Administation(1)	$ 1,941	$ 1,417	$ 0
Payments	0	0	0
Other(2)	162,771	62,550	55,259
TOTALS	$164,712	$63,967	$55,259

Personnel years(3) 53.4

(1) State Operations Only
(2) Local Assistance -Administration
(3) State Only

Estimated Clients Served

Program serves Children and Families
(figures represent Average monthly active cases)

Emergency Response Program:	27,549
Family Maintenance Program:	33,101
Family Reuinification Program:	21,215
Permanent Placement Program:	15,127

Objectives

To protect children from abuse, neglect and exploitation by providing services safely in the home, to remove the child if necessary and to reunite the child and family within specified time limits. If the child cannot by reunited with the family, to arrange as permanent a living situation as soon as possible

Eligibility

Any child reported to be, or in danger of being, abused, neglected or exploited.

Program Activity

This program is state supervised through the Family and Children Services Branch, Adult and Family Services Division, and locally administered through the County Welfare Departments. Eligibility and needs assessment are handled by the county. Four Service programs, provided by either the county or private contractors, include:

Emergency Response Program --provides initial intake services and crisis intervention through immediate in-person response, 24 hours a day, to reports of abuse, neglect, or exploitation

Family Maintenance Program --provides time-limited protective services to prevent or remedy child neglect, abuse, or exploitation. Services are provided to the child and family while the child remains in the home with caseworker supervision

Family Reunification Program --provides time-limited protective services when the child cannot safely remain at home while services are provided to reunite the family

Permanent Placement Program --provides and alternate permanent family structure for children who because of abuse, neglect, or exploitation cannot safely remain at home and who are unlikely to ever return home

DEPARTMENT OF SOCIAL SERVICES

Program

Child Support Enforcement Program

Administered By:

Welfare Program Division
Child Support Program Management Branch

Statutory Authority

Welfare and Institutions Code, Section 11475
(Chapter 2, Statutes of 1975)

Year Enacted: 1975

Estimated 1986/87
Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Local funds
Administation(1)	$ 2,913	$ 5,816	$ 0
Payments(2)	16,819	24,408	(41,227)
Other(3)	0	100,630	44,895
TOTALS	$ 19,732	$130,854	$ 3,618
Personnel years	70.8		

Estimated Clients Served

Total active caseload statewide: 940,480 cases
(welfare and nonwelfare)

Objectives

To enforce the obligation of parents to support their children and determine paternity in the case of a child born out of wedlock.

Eligibility

Services are provided for all children receiving public assistance (AFDC/Foster Care) where there is absent parent deprivation or where paternity has not been established.

Services are also provided on behalf of children who do not receive AFDC, upon completion of an application.

Program Activity

Clients are provided direct services for the location of absent parents, establishment of paternity, enforcement of support orders, and medical support enforcement. District attorneys utilize a variety of enforcement techniques including wage assignment, contempt actions, and tax intercepts

Support collections for aid related cases are assigned to the state and are used to reimburse assistance payments that have been paid to the family. Collections made on behalf of nonaided children are paid directly to the family.

The program provides services statewide through the local county offices, which operate under a Plan of Cooperation with SDSS.

DEPARTMENT OF SOCIAL SERVICES

Program

Day Care Center and Family Day Care Home Licensing

Administered By:

Community Care Licensing Division

Statutory Authority

California Child Day Dare Facilities Act, Health and Safety Code, Sections, 1596.70-1597.621

Prior to 1985, governed by the community Care Facilities Act, commencing with Section 1500

Year Enacted: 1985 Child Care Facilities Act
1973 Community Care Facilities Act

Estimated 1986/87 Fiscal Year Expenditures (in thousands)

	State funds	Federal funds	Local funds
Administration (state operations)	$11,923	0	0
Payments	0	0	0
Other (local assistance admin.)	$ 3,924	0	0
TOTALS	$15,847	0	0
Personnel years	220		

Estimated Clients Served

429,012 Day Care Center licensed capacity
227,130 Family Day Care Home licensed capacity

Objectives

To protect the health and safety of children in day care facilities by enforcing standards, screening applicants and taking administrative actions against those facilities which jeopardize the physical and/or mental welfare of children in care.

Eligibility

Children (birth through 17 years of age) in need of out-of-home care. Placement is voluntary on the part of parents.

Program Activity

Community Care Licensing program activities include the following:

- Application review/screening
- Complaint investigation
- Evaluation of facilities to determine compliance with licensing standards
- legal/administration actions against substandard facilities
- Orientations for potential applicants
- Renewal application screening and evaluation
- Renewal facility visits
- Follow-up facility visits to ensure the correction to previously cited deficiencies have been made (plan of Correction visits)
- Unlicensed facility visits

DEPARTMENT OF SOCIAL SERVICES

Program

Group Homes, Small Family Homes, Foster Family Homes, Foster Family Agency, Adoption Agency Licensing

Administered By:

Community Care Licensing Division

Statutory Authority

Health and Safety Code, Section 1500
Civil Code, Sections 221-230.8

Year Enacted: 1973 Community Care Facilities Act

Estimated 1986/87 Fiscal Year Expenditures (in thousands)

	State funds	Federal funds	Local funds
Administration	$ 3,832	$ 4,252	0
Payments	0	0	0
Other	$ 4,073	$ 4,072	0
TOTALS	$ 7,905	$ 8,324	0
Personnel years	70.7		

Estimated Clients Served

11,990 Group home Licensed capacity
4,720 Small Family Homes licensed capacity
25,340 Foster Family Home licensed capacity
56 Adoption Agencies licensed (no capacity limitations)

Objectives

To protect the health and safety of children in day care facilities by screening applicants, enforcing standards on a ongoing basis through facility visits, and taking administrative actions against those facilities which jeopardize the physical and/or mental welfare of children in care.

Eligibility

Children (birth through 17 years of age) in need of out-of-home care.

Program Activity

Community Care Licensing program activities include the following:

- Application review/screening
- Complaint investigation
- Evaluation of facilities to determine compliance with licensing standards
- legal/administration actions against substandard facilities
- Orientations for potential applicants
- Reneval application screening and evaluation
- Reneval facility visits
- Follow-up facility visits to ensure the correction to previously cited deficiencies have been made (plan of Correction visits)
- Unlicensed facility visits
- Post licensing visits (except foster family homes)

DEPARTMENT OF EDUCATION

Program

General Child Care

Administered by:

Child Development Division

Statutory Authority

Education Code, Section 8200 et seq
(Chapters 16 & 923, statutes of 1943)

Year Enacted: 1943

Estimated 1986/87 Fiscal Year Expenditures (in thousands)

	State funds	Federal funds	Local funds
Administration	$ 4,100	0	0
Payments	$206,886	0	0
Other	0	0	0
TOTALS	$210,986	0	0
Personnel years	55		

Estimated Clients Served

Average Daily Enrollment: 41,228

The Average Daily Enrollment for County Welfare Department Child Care is unavailable and is not included in the above figure.

Objectives

To assure the continuing nurture and development of children during their parents' absence due to vocational pursuits or compelling social or medical necessity.

Eligibility

Must meet one or more of the conditions in each of the following two sections:

Section One:
a. Child at risk of abuse or neglect
b. Public assistance recipient
c. Income eligible

Section Two:
a. Referred by legal, medical, or social service agency because of abuse or neglect
b. Parent in training, employed, or seeking employment
c. Mental or physical incapacity of the parent or child.

Program Activity

General child care and development is composed of four basic program types using child development center and , occasionally family day care homes. These facilities provide basic supervision, age-appropriate development, nutrition, parent education and involvement, staff development and social services. The four General Child Care programs are:

General Child Care and Development Programs - Public Agencies

General Child Care - Private Agencies

Center-Based Title 22 Child Care

Family Day Care

County Welfare Programs

DEPARTMENT OF EDUCATION

Program

Migrant Child Development

Administered by:

Child Development Division

Statutory Authority

Education Code, Section 8230-8233
(Chapter 34 & 35, statutes of 1946)

Year Enacted: 1946

Estimated 1986/87
Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Local funds
Administration	0	0	0
Payments	$6,616	$2,140	0
Other	0	0	0
TOTALS	$6,616	$2,140	
Personnel years	0		

Estimated Clients Served

2,758 Average Daily Enrollment

Objectives

To provide for the care and nurture of children whose parents move frequently, or who have in the recent past moved frequently, to work in agriculture or fishing.

Eligibility

Families must, in the twelve months preceding the date of application, have earned at least 50% of their income from agriculture, agriculturally related work, or fishing. They must, in addition, meet eligibility and need requirements as specified under General Child Care.

Program Activity

Through contracts with public and private agencies the Migrant Child Care and Development program serves children while their parents are employed in fishing, agriculture, or agriculturally related work. Migrant child care centers are open for varying lengths of time during the year depending upon the growing/harvest season in each area.

DEPARTMENT OF EDUCATION

Program

State Preschool Program

Administered by:

Child Development Division

Statutory Authority

Education Code, Section 8235
(Chapter 1248, statutes of 1965)

Year Enacted: 1965

Estimated 1986/87
Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Local funds
Administration	$ 439	0	0
Payments	$36,583	0	0
Other	0	0	0
TOTALS	$37,022		
Personnel years	7		

Estimated Clients Served

Average Daily Enrollment: 19,264

Objectives

To provide a part-day comprehensive developmental program for children ages 3-5 years from low income families, to prepare them for successful school participation.

Eligibility

Family income less than 84% of the state median income, adjusted in consideration of family size.

Program Activity

State preschool programs provide a part-day comprehensive developmental program for three to five year old children from low income families. The program includes educational development, health services, social services, nutritional services, parent education and participation, evaluation, and staff development. State Preschool programs are administered by private agencies as well as school districts and County Offices of Education.

DEPARTMENT OF EDUCATION

Program

Alternative Payment Program

Administered by:

Child Development Division

Statutory Authority

Education Code, Sections 8220-8224
(Chapter 344/76, statutes of 1976)

Year Enacted: 1976

Estimated 1986/87 Fiscal Year Expenditures (in thousands)

	State funds	Federal funds	Local funds
Administration	0	0	0
Payments	$25,999	0	0
Other	0	0	0
TOTALS	$25,999	0	0
Personnel years	0		

Estimated Clients Served

Average Daily Enrollment: 4,881

Objectives

To increase options for choice by eligible parents regarding the location of child care (near home or work) and the type of care (family day care home, in the family's home, or in a center) selected.

Eligibility

Must meet one or more of the conditions in each of the following two sections:

Section One:
a. Child at risk of abuse or neglect
b. Public assistance recipient
c. Income eligible

Section Two:
a. Referred by legal, medical, or social service agency because of abuse or neglect
b. Parent in training, employed, or seeking employment
c. Mental or physical incapacity of the parent or child.

Program Activity

Alternative Payment programs offer an array of child care and development arrangements that include in-home care, family child care homes, and center care. Monthly payment to the child care provider selected by the family is made by the Alternative Payment agency in the form of a vendor payment.

DEPARTMENT OF EDUCATION

Program

Resource and Referral Program

Administered by:

Child Development Division

Statutory Authority

Education Code, Sections 8210-8214
(Chapter 344, statutes of 1976)

Year Enacted: 1976

Estimated 1986/87 Fiscal Year Expenditures (in thousands)

	State funds	Federal funds	Local funds
Administration	0	0	0
Payments	$7,335	0	0
Other	0	0	0
TOTALS	$7,335		
Personnel years	0		

Estimated Clients Served

N/A

Objectives

To assist parents to select, from among community resources, the most appropriate child care arrangement for their children.

Eligibility

All families are eligible apart from any consideration of eligibility or need.

Program Activity

Resource and Referral programs provide information to parents about available child care and coordinate community resources for the benefit of parents and local child care providers. Typically services are provided over the telephone; walk-in service is also available. As of January, 1986, 59 contracts have been awarded, providing at least one resource and referral site per county.

DEPARTMENT OF EDUCATION

Program

Severely Handicapped Program

Administered by:

Child Development Division

Statutory Authority

Education Code, Section 8250

Year Enacted: 1976

Estimated 1986/87
Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Local funds
Administration	0	0	0
Payments	$ 711	0	0
Other	0	0	0
TOTALS	$ 711	0	0
Personnel years	0		

Estimated Clients Served

Average Daily Enrollment: 166

Objectives

To provide child development services for children who, because of handicapping conditions, cannot adequately be cared for in regular child development programs.

Eligibility

The existence of a physical, mental, or emotional handicap, documented by a licensed physician, of such severity as to require care from specially trained staff.

Program Activity

Special programs for the severely handicapped provide supervision, care, therapy, youth guidance, and parental counseling to the eligible children served by the contracting agency.

DEPARTMENT OF EDUCATION

Program

School-Age Parenting and Infant Development
(SAPID)

Administered by:

Child Development Division

Statutory Authority

Education Code, Section 8390-8397
(Chapter 1504, statutes of 1974)

Year Enacted: 1974

Estimated 1986/87 Fiscal Year Expenditures (in thousands)

	State funds	Federal funds	Local funds
Administration	0	0	0
Payments	$6,668	0	0
Other	0	0	0
TOTALS	$6,668		
Personnel years	0		

Estimated Clients Served

Average Daily Enrollment:

842 -Infants
876 -Parents
184 -Pregnant Students, Practicum & theory
66 -Students, Practicum & theory

Objectives

To facilitate completion of a high school education for school-age parents. To provide young parents and pregnant students with parenting skills.

Eligibility

Child care component: Parent mother must be currently enrolled in a secondary school and working toward the completion of a diploma

Parent education component: In addition to participation parent mothers, this component is also open to parent fathers and other interested students

Program Activity

Through contracts with the State Department of Education, these programs are administered by 55 school districts and six county offices of education.

This program enables student parents to complete work toward a high school diploma by providing supervised infant care on or near the school campus. Infant care activities are identical to those in other infant development centers funded by the Child Development Division. Infant centers also serve as a laboratory for parenting education classes.

In addition to infant care parent students and pregnant students receive instruction to improve their ability to care for and relate successfully to their children. In addition to parenting and general education instruction, career development courses are offered to help assure eventual economic independence.

DEPARTMENT OF EDUCATION

Program

Campus Child Development

Administered by:

Child Development Division

Statutory Authority

Education Code, Section 8225
(Chapter 1767, Statutes of 1971)

Year Enacted: 1971

Estimated 1986/87 Fiscal Year Expenditures (in thousands)

	State funds	Federal funds	Local funds
Administration	0	0	0
Payments	$10,231	0	0
Other	0	0	0
TOTALS	$10,231	0	0
Personnel years	0		

Estimated Clients Served

Average Daily Enrollment: 2,058

Objectives

To provide child development services for children of parents enrolled in higher education programs at two-year and four-year campuses.

Eligibility

Eligibility is identical to that stated for general Child Care. Children of students enrolled at the campus administering the child development program are given priority for admission.

Program Activity

Primarily, these programs provide general child care for the children of students enrolled in college. They are intended to permit parents to complete educational programs. They may also serve as a "hands on" classroom experience for students enrolled in child development classes. The centers are operated by either student associations or the college administration.

DEPARTMENT OF EDUCATION

Program

State Preschool Incentive Grant

Administered by:

Child Development Division

Statutory Authority

Chapter 795, statutes of 1975
(uncodified statute)

Year Enacted: 1975

Estimated 1986/87
Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Local funds
Administration	0	0	0
Payments	$ 300	0	0
Other	0	0	0
TOTALS	$ 300	0	0
Personnel years	0		

Estimated Clients Served

N/A

Objectives

To provide training in child development for staff employed by Child Development Division Contractors.

Eligibility

Staff of State Child Development Division Child Care contractors.

Program Activity

This program provides complete or partial reimbursement to staff of the State Preschool Program (working directly with preschool children) for completed college course work in Early Childhood Education.

DEPARTMENT OF EDUCATION

Program

Child Care and Employment Act (JTPA)

Administered by:

Child Development Division

Statutory Authority

Education Code, Section 8420-8429
(Chapter 1282, statutes of 1983)
(Chapter 1602, Statutes of 1984)
(Chapter 1066, Statutes of 1986)

Year Enacted: 1983, 1984, 1986

Estimated 1986/87 Fiscal Year Expenditures (in thousands)

	State funds	Federal funds	Local funds
Administration	0	$ 65	0
Payments	0	$2,500	0
Other	0	0	0
TOTALS	0	$2,565	0
Personnel years		2	

Estimated Clients Served

Data Not Available

Objectives

To provide child development services in support of parents' participation in the Job Training Partnership Act.

Eligibility

Referral for child care services by a local Private Industry Council.

Program Activity

The Job Training Partnership Act is the federal jobs program replacing the Comprehensive Training and Employment Act (CETA). In 1983 the Child Care and Employment Act was established to help direct JTPA recipients into the subsidized Child development system with the expectation that for many parents the subsidy could continue when JTPA eligibility for supportive services expired. As an incentive to Private Industry Councils to refer families to Child Care and Employment Act contractors, provision was made for a 50-50 funding match between the PICs and the Child Care and Employment Fund contractors.

DEPARTMENT OF EDUCATION

Program

School-Age Community Child Care

Administered by:

Child Development Division

Statutory Authority

Education Code, Sections 8460-8492
(Chapter 1026, Statutes of 1985)

Year Enacted: 1985

Estimated 1986/87 Fiscal Year Expenditures (in thousands)

	State funds	Federal funds	Local funds
Administration	0	0	0
Payments	$15,629	0	0
Other	0	0	0
TOTALS	$15,629		
Personnel years	0		

Estimated Clients Served

The total child population served is 13,788; one-half are non-subsidized. Note figure is not presented as ADA.

Objectives

To provide care and supervision of school age children before and after normal school hours.

Eligibility

Must meet one or more of the conditions in each of the following two sections, in order to receive financial assistance. (There are no eligibility standards for nonsubsidized participation.)

Section One:
a. Child at risk of abuse or neglect
b. Public assistance recipient
c. Income eligible

Section Two:
a. Referred by legal, medical, or social service agency because of abuse or neglect
b. Parent in training, employed, or seeking employment
c. Mental or physical incapacity of the parent or child.

Program Activity

Under the School Age Community Child Care Program, the Superintendent of Public Instruction contracts with child care providers (including school districts, private providers, public or private colleges, and other) to provide state-subsidized child care services before and after school for children in Kindergarten through grade Nine. (These services are commonly known as extended day care or "latchkey" child care. Services also are available to children from families not eligible for financial subsidy. In addition, participants in the State's GAIN program, administered by the Department of Social Services, may enroll their school-age children in this program.

The legislature appropriated $8 million (half-year funding) is SB 303 to support the SACCC program in 1985-86. The Legislature continued this level of funding (on an annualized basis) in the 1986 Budget Act, appropriating $15.7 million for the program in 1986-87. In addition, SB 303 appropriated $36.5 million for capital outlay grants to extended day care providers.

DEPARTMENT OF EDUCATION

Program

Child Care Capital Outlay

Administered by:

Child Development Division

Statutory Authority

Education Code, Section 8277.2, 8485, and 8493 through 8498 (Chapter 1026 & 1440, statutes of 1985)

Year Enacted: 1980 & 1985

Estimated 1986/87 Fiscal Year Expenditures (in thousands)

	State funds	Federal funds	Local funds
Administration(1)	0	0	0
Payments	$43,750	0	0
Other	0	0	0
TOTALS	$43,750	0	0
Personnel years	0		

(1) The Department has submitted a request for administration funds, which has not yet been approved

Estimated Clients Served

N/A

Objectives

To provide funds for relocatable facilities and for minor renovation and repair of existing buildings.

Eligibility

Agencies must be current state contractors for child development services.

Program Activity

Through a competitive application process the State Department of Education selects from among eligible applicants those which meet the criteria for funding. The State Allocation Board administers the purchase and lease of relocatable facilities and the allocation of funding for minor renovation and repair to selected agencies.

The funding distribution is as follows:

$14 million for School Age Community Child Care contractors

$22.2 million for facilities serving the school age children of Greater Avenues for Independence (GAIN) participants

$7.5 million for nonextended day care facilities

Note: These are one time funds.

Chapter 798, statutes of 1980 established under Education Code, Section 8277.3 a revolving loan fund for capital outlay. At the beginning of the 1986-87 fiscal year the balance in that fund was $185,291. That amount is in addition to the amount shown in the fiscal summary.

DEPARTMENT OF EDUCATION

Program

Protective Services (Respite) Child Care

Administered by:

Child Development Division

Statutory Authority

Education Code, Sections 8210-8214
(Chapter 344, statutes of 1976)

Year Enacted: 1976

Estimated 1986/87 Fiscal Year Expenditures (in thousands)

	State funds	Federal funds	Local funds
Administration	0	0	0
Payments	$7,335	0	0
Other	0	0	0
TOTALS	$7,335		
Personnel years	0		

Estimated Clients Served

N/A

Objectives

To reduce the risk of abuse or neglect of children by providing parents with respite from their children's care for part of the day.

Eligibility

These services are provided when a child has been abused, neglected or exploited or is at risk of abuse, neglect or exploitation and (1) is a recipient of child protective services and has a written referral from the county welfare department, or (2) has a written referral from a legal, medical or social service agency which states that the child is abused, neglected, or exploited, or at risk of abuse, neglect or exploitation.

Program Activity

Through contract with resource and referral agencies, money is made available for the placement and support of children in need of protective services who could not be accommodated using other designated funds.

DEPARTMENT OF MENTAL HEALTH

Program

Mental Health Services
to Children and Adolescents

Administered by:

Special Populations Branch

Statutory Authority

Welfare and Institutions Code, Section 5704.6

Year Enacted: 1978

Estimated 1986/87 Fiscal Year Expenditures

	State funds	Federal funds	Local funds
Administration	0	0	0
Payments	$113,311		
Other	0	0	0
TOTALS	$113,311		
Personnel years	33.5		

Estimated Clients Served

Unknown

Objectives

To allocate a significant amount of the Short-Doyle mental health augmentations for services to children and adolescents.

Eligibility

Persons under 18 years old are eligible to obtain needed mental health services through the Short-Doyle Program.

Program Activity

The State Department of Mental Health provides State Short-Doyle funds used by county mental health programs for services to children and adolescents. County programs, directly or through contract, provide for an array of mental health services such as: short term crisis, long term residential , day treatment, socialization, case management, medication, in-patient psychiatric, and other care.

The provision of mental health services by each county is individualized, based on locally identified needs. This means that one county may have completely different compared to another county.

The State Department of Mental Health, for the most part, provides 85% of the funds for hospital in-patient services and 90% of other Short-Doyle mental health services. There is a correlating 15% and 10% county match requirement.

DEPARTMENT OF HEALTH SERVICES

Program

Child Health and Disability Prevention (CHDP)

Administered by:

Child Health and Disability Prevention Branch
Family Health Division

Statutory Authority

Health and Safety Code Part 1, Chapter 2,
Article 3.4, Sections 320-322.5

Year Enacted:
Federal EPSDT Program: 1967
State CHDP Program: 1975

Estimated 1986/87 Fiscal Year Expenditures (in thousands)

	State funds	Federal funds	Local funds
Administration	$ 1,379	$ 1,396	0
Payments	$34,673	$25,939	0
Other	0	0	0
TOTALS	$36,057	$27,335	0
Personnel years	33.5		

Estimated Clients Served

Estimated for FY 86/87: 800,000 Served
informing of eligibles at local welfare departments

Objectives

To improve the health status of children through (increased) access to complete and periodic health assessments/ immunizations, and cost containment of future medical costs through early intervention of potentially disabling diseases.

Eligibility

Medi-Cal eligible recipients from birth through age 20.

Infants from birth through 13 months of age whose income is at or below 200% of the Minimum Basic Standard of Adequate Care (MBSAC)

Children 18 months prior to 90 days after first grade entry whose family income is at or below 200% of the MBSAC

Children participation in Head Start or State Preschool programs

Program Activity

CHDP offers health assessment services including health history, physical examinations, immunizations, vision and hearing tests. CHDP health assessments are provided by a wide range of providers including county health departments, local school districts and private providers such as pediatricians and family practitioners.

Services also include annual preventive dental care for Medi-Cal eligible children three years of age and over provided by dentists participating in the Denti-Cal Program.

In addition to the health assessments services offered by the CHDP program, local programs provide case management and and follow-up services. Families are assisted through the CHDP program in obtaining diagnosis and treatment services when necessary. Cooperative interagency agreements with the Department of Social Services provides for.

DEPARTMENT OF HEALTH SERVICES

Program Activity

(continued)

of services available and offering assistance with transportation and scheduling.

The program also utilizes outreach and health education to communicate the benefits of program participation

DEPARTMENT OF HEALTH SERVICES

Program

Adolescent Family Life Demonstration Program (AFLP)

Administered by:

Maternal and Child Health Branch

Statutory Authority

1985 Budget Act, Items 4260-111-001 and 4260-111-890

Year enacted: 1985

Estimated 1986/87 Fiscal Year Expenditures

	State funds	Federal funds	Local funds
Administration	0	0	0
Payments	$ 1,818	$ 3,182	0
Other	0	0	0
TOTALS	$ 1,818	$ 3,182	0
Personnel years	0		

Estimated Clients Served

4,000 pregnant and parenting teens

Objectives

To assure the health of both mother and infant, to prepare young parents for parenting, to help them postpone subsequent, unplanned pregnancies, and to help them to develop self sufficiency through education or vocational training.

Eligibility

Pregnant adolescents and adolescent parents who are 17 years of age or under, and their families.

Program Activity

The Maternal and Child Health Branch contracts with county health departments, hospitals, and private agencies to provide case management services to pregnant and parenting teenagers. Activities of case managers primarily concern linking teenage clients to services and agencies already existing in the community.

DEPARTMENT OF HEALTH SERVICES

Program

High Risk Infant Follow-Up Program

Administered by:

Maternal and Child Health Branch

Statutory Authority

1980/81 Budget Item 7363-7012-AD2033
1986/87 Budget Item 7329-7012-AD2024

Year enacted: Transferred 1980

Estimated 1986/87 Fiscal Year Expenditures

	State funds	Federal funds	Local funds
Administration	0	0	0
Payments	0	0	0
Other	0	0	0
TOTALS	$ 1,103	$ 838	0
Personnel years	0		

Estimated Clients Served

4,500

Objectives

To provide, direct, or arrange for appropriate assessment and intervention services for the infants formerly in Neonatal Intensive Care Units to reduce the potential impact of a handicapping condition.

Eligibility

Any infant aged birth to 36 months who because of biological, environmental or psychosocial factors or combination thereof are at high risk of becoming handicapped.

Program Activity

These agencies will identify and enroll infants at risk, assess their need for care, coordinate or provide services to prevent or ameliorate illness or disability, inform and instruct providers in methods of care, and perform planning functions for local health needs, of statewide planning.

DEPARTMENT OF THE YOUTH AUTHORITY

Program

County Justice System Subventions

Administered by:

Administrative Services Branch

Statutory Authority

Welfare and Institutions Code, Section 1805

Year enacted: 1978

Estimated 1986/87 Fiscal Year Expenditures

	State funds	Federal funds	Local funds
Administation	0	0	0
Payments	0	0	0
Other	0	0	0
TOTALS	$67,298	0	0
Personnel years	0		

Estimated Clients Served

All young people in contact with the juvenile justice system.

Objectives

To augment county funds expended on the juvenile justice system.

Eligibility

All counties receive state subvention funds.

Program Activity

The County Justice System Subvention funds are bloc grants to the counties. Intended to augment county juvenile justice programs, grants are awarded with few controls over the specific use of Subvention funds.

DEPARTMENT OF ALCOHOL AND DRUG PROGRAMS

Program

School-Community Primary Prevention Program (SCPPP)

Administered by:

Department of Alcohol and Drug Programs and Department of Education

Statutory Authority

Health and Safety Code, Section 11755

Year Enacted: 1982

Estimated 1986/87 Fiscal Year Expenditures (in thousands)

	State funds	Federal funds	Local funds
Administration	$ 36	0	0
Payments	$ 1,055	0	0
Other	0	0	0
TOTALS	$ 1,091	0	0
Personnel years	0		

Estimated Clients Served

1.7 million

Objectives

To develop, implement and sustain a joint school-community primary prevention program at the county level. In accordance with legislation, the SCPPP covers three broad areas:

- School and classroom-oriented programs that are designed to encourage sound decision making, awareness of values, awareness of drugs and their effects, enhanced self-esteem, social and practical skills that assist students toward maturity.

- School or community-based nonclassroom programs that include positive peer group programs, programs involving youth and adults in constructive activities designed as alternatives to drug use and programs for special population groups such as women and ethnic minorities.

- Family-oriented programs that are aimed at improving family relationships and involving parents constructively in the education and nurturing of their children, as well as in preventing drug abuse.

Eligibility

Targeted youth enrolled in selected schools in the counties that are awarded funds are eligible to participate

Program Activity

Prevention Curriculum development and distribution, parenting classes, peer counseling and education, establishment of youth educators and cross-age helper programs, information dissemination, inservice training for school personnel, development of parent handbooks, youth symposiums, development of parent groups, communication skill training, peer tutoring, community forums and theater, multicultural community activities, and newsletters.

DEPARTMENT OF ALCOHOL AND DRUG PROGRAMS

Program

Services for Drug Clients
18 years of Age and Younger

Administered by:

Drug Division

Statutory Authority

Health and Safety Code, Section 11755

Year Enacted: 1984

Objectives

To provide treatment and prevention services for clients including youth 18 years of age and younger

Eligibility

Must be socially dysfunctional because of drug abuse or in danger of becoming dysfunctional because of drug abuse

Program Activity

Outpatient counseling
Residential (24 hours per day) care
Prevention

Estimated 1986/87
Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Local funds
Administration	$ 0	0	0
Payments:			
ODF	$ 764	$ 864	$ 180
RFD	$ 685	$ 554	$2,152
PRVN	$ 267	$ 620	$ 199
Other	0	0	0
TOTALS	$1,716	$2,038	$2,531
Personnel years	0		

ODF = Outpatient Drug-Free
RDF = Residential Drug-Free
PRVN = Prevention

Estimated Clients Served

4,075 Admissions

DEPARTMENT OF ALCOHOL AND DRUG PROGRAMS

Program

Children Recovery Services for Problems Related to Alcohol

Administered by:

Division of Alcohol, Licensing and Certification Unit

Statutory Authority

Health and Safety Code, Section 11755(a-o)

Year Enacted: 1978

Estimated 1986/87 Fiscal Year Expenditures (in thousands)

	State funds	Federal funds	Local funds
Administration	$ 0	0	0
Payments	$ 370	$ 54	$ 200
Other	0	0	0
TOTALS	$ 370	$ 54	$ 200
Personnel years	4.5	0.5	2.0

Estimated Clients Served

1400

Objectives

To enable individuals to learn to live without using alcohol

Eligibility

Individuals experiencing living problems related to alcohol/drug abuse.

Program Activity

Programs providing these services offer individual, group, and family counseling sessions for varying lengths of time. The initial phase of these programs primarily involve alcohol education sessions and individual counseling sessions. Group and family counseling generally follows.

DEPARTMENT OF ALCOHOL AND DRUG PROGRAMS

Program

Statewide Youth Coordination Project

Administered by:

Division of Alcohol Programs

Statutory Authority

Health and Safety Code, Section 11755(o)

Year Enacted: 1985

Estimated 1986/87
Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Local funds
Administration	$ 68	0	0
Payments	$ 49	0	0
Other	0	0	0
TOTALS	$ 117	0	0
Personnel years	1.0		

Estimated Clients Served

Minimum of 750 - 1,000 per year

Objectives

To reduce deaths and injuries due to alcohol-related traffic crashes.

Eligibility

California high school students and adult advisors; student activist groups; and citizen activist groups

Program Activity

The California Youth Coordination Program, a new statewide demonstration project, began operation November 12, 1985. The project operates under the auspices of the California Department of Alcohol and Drug Programs, through funds provided by the Office of Traffic Safety. Funds are used to Plan and contract for various youth regional conferences and workshops across the state; issue a statewide newsletter twice a year; and provide technical assistance to local communities and programs on the establishment and operation of youth drinking and driving prevention programs.

DEPARTMENT OF ALCOHOL AND DRUG PROGRAMS

Program

Youth Technical Assistance Project

Administered by:

Division of Alcohol Programs

Statutory Authority

Health and Safety Code, Section 11755(o)

Year Enacted: 1984

Estimated 1986/87
Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Local funds
Administration	$ 0	0	0
Payments	$ 50	0	0
Other	0	0	0
TOTALS	$ 50	0	0
Personnel years	0		

Estimated Clients Served

N/A

Objectives

To complete statewide needs assessment, identification of effective program models and strategies, and identification of barriers to services for youth. Year two will provide technical assistance statewide to disseminate information and explore possible means of removing barriers to services.

Eligibility

N/A

Program Activity

The goal of the Youth Technical Assistance Project is to increase opportunities for the target population to solve its alcohol-related problems and to ensure that services currently being provided are operating as effectively as possible.

The Center for Human Development, under contract to ADP, conducted a needs assessment regarding specific services for youth, identification of effective models and strategies for providing services, and identification of barriers to services. Under year two of the project, effective strategies identified will be shared on a statewide basis to counties wishing to develop comprehensive programs for youth.

DEPARTMENT OF ALCOHOL AND DRUG PROGRAMS

Program

Public awareness and prevention campaigns:

"Learn to Say NO"
Friday Night Live
NIAAA Youth Media Campaign
Positive Role Model Project

Administered by:

Division of Drug Programs
Executive Office
-- Office of public affairs

Statutory Authority

Health and Safety Code, Section 11755(o)

Year Enacted: 1984 & 1986

Estimated 1986/87 Fiscal Year Expenditures (in thousands)

	State funds	Federal funds	Local funds
Administration	$ 97	0	0
Payments	$ 402	$ 14	0
Other	0	0	0
TOTALS	$ 499	$ 14	0
Personnel years	2.0	0.0	

Estimated Clients Served

The number of targeted youth varies with the program from as few as 4,000 to as many as several million.

Objectives

To reduce the incidence of alcohol and drug abuse by California youth, and foster development of an attitude of intolerance for abuse of alcohol and/or drugs; to reduce teenage deaths and injuries caused by teenagers who are diving under the influence of alcohol or drugs; to increase awareness of the general population regarding issues surrounding adolescent drinking; and to increase knowledge in education and health in ways in which we identify and provide information and curriculum for addressing the needs of children of alcoholics

Eligibility

N/A

Program Activity

Key media campaign elements consist of television and radio public service announcements in English and Spanish featuring celebrity role models conveying the campaign theme and positive messages of life alternatives to drug and alcohol abuse; design of programs to reduce teenage-caused driving under-the-influence deaths and injuries; and presentation of these programs during high school assemblies.

DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT

Program

Emergency Shelter Program

Administered by:

Division of Community Affairs

Statutory Authority

Health and Safety Code, Section 50800

Year enacted: 1983

Estimated 1986/87
Fiscal Year Expenditures

	State funds	Federal funds	Local funds
Administration	0	0	0
Payments	$ 3,880	0	0
Other	0	0	0
TOTALS	$ 3,880		
Personnel years	0		

Estimated Clients Served

Unknown

Objectives

To provide grant money for emergency shelter providers to assist homeless persons.

Eligibility

An applicant must:

- Be either a government agency or nonprofit corporation that is a current and continuous provider of shelter to homeless persons, or a current continuous contractor with recognized community organizations that provide shelter to homeless persons;
- provide shelter which is temporary and available to residents for no more that 60 days, including extensions, or up to 180 days for clients certified to be seniors, or mentally or physically handicapped;
- practice non-discrimination in all program; not require participation in a religious or philosophical service;
- not require a fee or donation as a condition of receiving shelter; apply for fund activities which will meet all local government standards.

Program Activity

Each region of the State has been allocated a portion of the total appropriation based on a formula (number of persons unemployed and number of persons living in poverty), similar to the Federal Emergency Management Agency (FEMA) distribution formula.

After local review and prioritizing, the application will be submitted to ESP for final review and award announcement. In regions where there is no local board, applications must be submitted directly to ESP for review and ranking.

DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT

Program Activity

(continued)

Activities eligible for funding:

- Rehabilitation/Renovation/expansion of existing shelter facilities (no new construction)
- site acquisition
- equipment purchase
- program costs (maintenance, utilities, or staff providing direct client services)
- vouchers
- one-time rent to prevent eviction
- administration

UNIVERSITY OF CALIFORNIA

Program

Campus Child Care

Administered by:

Campus Administration at each campus

Statutory Authority

Education Code, Section 8225
(for SDE funding only)

Year enacted: 1971

Estimated 1986/87 Fiscal Year Expenditures (in thousands)

	State funds	Federal funds	Other funds
Administation	-	-	-
Payments	-	-	-
Other (Operations)	($1,101)	-	$2,401
TOTALS	($1,101)	-	$2,401
Personnel years	N/A		

Note: State funds shown are provided from approrpriations made to the State Department of Education.
Other funds shown are from the following sources: Registration fees ($1,195,000), Parent fees ($996,200), Donor funds ($55,700), and other ($154,000)>

Estimated Clients Served

877 children served
830 families served

Objectives

Primarily, to provide child care for the children of University students. Secondarily, to provide child care for University staff and faculty.

Eligibility

Generally, one parent must be a registered University student or, in some cases, a University staff or faculty member. (Guidelines vary from campus to campus.

Program Activity

Activities are contingent upon individual program type, funding, and age group of the children served. The child care centers are operated by either student associations or the college administration. The following activities apply to most campus child care programs.

- Provide Developmental Child Care Services
- Maintain Administrative Services
- Provide Parent Orientation and Education
- Provide a Food Services for children in the program
- Supervise and Train career and casual staff
- Provide Research and Volunteer Opportunities
- Outreach to the campus and wider communities

CALIFORNIA STATE UNIVERSITIES AND COLLEGES

Program

Campus Child Care

Administered by:

Dean of Academic Affairs
Dean of Students

Statutory Authority

Education Code, Section 8225
(for SDE funds only)

Year enacted: 1971

Estimated 1986/87
Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Other funds
Administation	0	0	0
Payments	$1,306	0	$2,160
TOTALS	$1,306	0	$2,160
Personnel years			

Other funds include parent fees, student fees, and private contributions.

Estimated Clients Served

1800 children

Objectives

Primarily, to provide child care for children of University students. Secondly, to provide child care for University staff and faculty.

Eligibility

Depending on the individual program, eligibility standards tend to vary. Basically, one parent must be a registered University student or, in some cases, a University staff or faculty member.

Program Activity

Activities are contingent upon individual program type, funding, and age group of the children served. The child care centers are operated by either student associations or the college administration. Some or all of the following activities apply to most campus child care programs.

- Provide Developmental Child Care Services
- Maintain Administrative Services
- Provide Parent Orientation and Education
- Provide a Food Services for children in the program
- Supervise and Train career and casual staff
- Provide Research and Volunteer Opportunities
- Outreach to the campus and wider communities

CALIFORNIA COMMUNITY COLLEGES

Program

Cooperative Agencies Resources for Education (CARE)

Administered by:

Student Services/Special Programs Division

Statutory Authority

Education Code, Section 79150
(Chapter 1029; Statutes of 1982)

Year enacted: 1982

Estimated 1986/87 Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Local funds
Administration	$ 25	0	0
Payments	$ 711	0	0
Other	0	0	0
TOTALS	$ 736	0	0
Personnel years	0		

Estimated Clients Served

1200 single parent AFDC Recipients and their children (average 2 or 3 children each)

Objectives

To provide educational opportunities to single parent, head of household AFDC recipients who seek to enhance their employability and minimize their welfare dependency through enrollment in a vocationally oriented program; to provide necessary support for their academic success and retention; and to assist them in their pursuit of career and vocational goals.

Eligibility

Participants must be at least 18 years old, be a single head of household, be receiving AFDC for at least one consecutive year, lack marketable skills, and desire to complete their high school education or pursue job relevant curricula. The participant must have at least one child under the age of six years, or have completed job search activities under the supervision of the county welfare department and not have secured employment.

Program Activity

Through the Chancellor's Office of the California Community Colleges, Student Services and Special Programs Division, funds are allocated to community college districts for operation of the program. Funds are used primarily for child care expenses, transportation costs, books and supplies, and for support services including tutoring, assessment and placement. It is a cooperative effort involving the community college, local county welfare departments and employment development offices. Currently, 22 community colleges serving 24 counties receive supplemental funds to provide CARE services and activities.

CALIFORNIA COMMUNITY COLLEGES

Program

California Community College Campus Child Care Development Centers

Administered by:

Student Services/Special Programs Division

Statutory Authority

Education Code, Section 79120

Year enacted: 1980

Estimated 1986/87 Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Local funds
Administration	0	0	0
Payments	$(4,026)	0	0
Other			
TOTALS	$(4,026)	0	0
Personnel years	N/A		

Estimated Clients Served

Approximately 6000 children

Objectives

Service: To provide child care which is developmentally oriented for the children of student parents to enable them to attend college.

Instructional: To provide community leadership in child development through the training of child teachers, educating parents and potential parents, and setting up model child development centers which exemplify the best practices in child development.

Eligibility

Notwithstanding any other provision of law, children under two years of age whose parent or parents are students may attend child development centers consistent with the priorities established pursuant to law. Highest priority shall be given to student families with the greatest income deficit.

Program Activity

Three types of child care programs are currently administered by California's community colleges. They are: Child Development Schools, which serve as training programs for students pursuing child development and early childhood education careers; Campus Child Care and Development Programs, which not only serve the child and family support needs of student parents, but also promote the cognitive, physical, social and emotional growth and development of the children enrolled; and Combination programs, which focus equally on child development instruction and services.

Among the eighty-two (82) colleges providing child care service, combination programs presently account for sixty-nine percent (69%) of the child care and development services offered.

OFFICE OF CRIMINAL JUSTICE PLANNING

Program

Youth Emergency Telephone Referral Project
(California Runaway Hotline)

Administered by:

Juvenile Justice Division

Statutory Authority

(Chapter 1614, statutes of 1984)
(AB 3075)

Year Enacted: 1984

Estimated 1986/87
Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Local funds
Administration	$ 20	0	0
Payments	$180	0	0
Other	0	0	0
TOTALS	$200	0	0
Personnel years	.25		

Estimated Clients Served

6,000-10,000 youth and adult callers per year

Objectives

The California Runaway Hotline has been implemented to serve as a free, nonthreatening , telephone referral service for runaways, directing them to available resources, including shelter, meals, clothing, counseling, and other services necessary for their will-being and to be a message center for runaways who wish to communicate with their parents.

Eligibility

The California Runaway Hotline is avialable to California youth and parents who request its service.

Program Activity

A contract for the implementation of the California Runaway Hotline has been awarded to the California Child, Youth and family Coalition, a non-profit organization located in Sacramento.

The Hotline became operational on September 2, 1986 and is presently receiving calls from youth and parents seeking services. The Hotline has the capablity to patch the caller directly in to services located in the caller's area. The Hotline also acts a a message referral center for parents, guardians, or youth seeking to get a message to one another but not wanting to talk directly.

OFFICE OF CRIMINAL JUSTICE PLANNING

Program

Homeless Youth Pilot Project

Administered by:

Juvenile Justice Division

Statutory Authority

Welfare and Institutions Code, Section 13700

Year Enacted: 1985

Estimated 1986/87
Fiscal Year Expenditures
(in thousands)

		State funds	Federal funds	Local funds
Administration		$ 48	0	0
Payments	SF	$368	0	0
	LA	$552		
Other		0	0	0
TOTALS		$920	0	0
Personnel years		.5		

Estimated Clients Served

1,500 (San Francisco Project)
1,500 (Los Angeles Project)

3,000 Total

Objectives

To establish a Homeless Youth Emergency Sercvices Pilot Project in the County of Los Angeles and in the City and County of San Francisco. Each of the pilot projects is to include but is not limited to the following:

- Food and access to an overnight shelter
- Counseling for immediate emotional crisis
- Outreach services to locate homeless youth and link them with services and drop-in facilities to make the services accessible to the street population
- Screening and referral for basic health need
- linkage to other agency services
- long term stabilization planning
- followup services

Eligibility

Eligibility limited to private, non-profit agencies which demonstrate an ability to meet the objectives listed above and demonstrate a history of coordination with other public and private agencies in the service region that provide services to homeless youth.

Program Activity

Grants were awarded to the Catholic Social Services in San Francisco and the Children's Hospital in Los Angeles. Both of the recipients are joined in their respective projects by several other youth-serving agencies to provide a network of services that meet the required objectives.

OFFICE OF CRIMINAL JUSTICE PLANNING

Program

Child Sexual Abuse Prevention Program

Administered by:

Sexual Assualt/Child Sexual Abuse Unit

Statutory Authority

California Penal Code, Section 13837

Year Enacted: 1980

Estimated 1986/87
Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Local funds
Administration	0	0	0
Payments		0	0
Los Angeles	$103		
San Pablo	$ 64		
Stockton	$ 26		
San Jose	$ 57		
Other	0	0	0
TOTALS	$250	0	0
Personnel years	0		

Estimated Clients Served

300 Latino Children (Los Angeles Project)
2,200 Children (San Pablo Project)
264 Children (Stockton Project)
1,000 Parents (San Jose Project)
600 Educators (San Jose Project)

Objectives

To develop effective prevention, identification, and intervention programs which can be replicated, and to increase the level of knowledge about child sexual abuse and exploitation.

Eligibility

Agencies funded under this program must be rape crisis centers which operate 24-hour telephone counseling services for sex crime victims.

Program Activity

The grants for the Child Sexual Abuse Prevention Program were awarded for a two-year perid beginning July 1, 1985. The awards were made to East Los Angeles Rape Hotline, Rape Crisis Center of West Contra Costa, Sexual Assault Center of San Joaquin County in Stockton, and the YWCA in San Jose.

OFFICE OF CRIMINAL JUSTICE PLANNING

Program

Child Sexual Abuse Prevention Training Centers

Administered by:

Sexaul Assualt/Child Sexual Abuse Unit

Statutory Authority

(Chapter 1664, statutes of 1984)
AB 3684 (Vasconcellos)

Year Enacted: 1984

Estimated 1985/86
Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Local funds
Administration	0	0	0
Payments		0	0
Los Angeles	$350		
San Francisco	$350		
Other	0	0	0
TOTALS	$700	0	0
Personnel years	0		

Estimated Clients Served

Total Number of Persons Trained: 1,979
Total Number of Training Hours Provided: 30,611

Objectives

To increse the level of knowledge about child sexual abuse treatment among professionals in the field.

Eligibility

AB 3684 (Vasconcellos), Chapter 1664, 1984 statutes authorized the establishment of two training centers to provide training and technical assistance to multidisciplinary teams of professionals providing intervention services to sexually abused children and their families

Program Activity

The statute required two centers to be funded in Northern and Southern California. The Institute for Community as Extended Family (ICEF) in San Jose and Childrens Institute International (CII) in Los Angeles were selected for funding.

OFFICE OF CRIMINAL JUSTICE PLANNING

Program

Child Sexual Abuse and Exploitation Treatment Projects

Administered by:

Sexual Assualt/Child Sexual Abuse Unit

Statutory Authority

California Penal Code, Section 13837

Year Enacted: 1982

Estimated 1986/87 Fiscal Year Expenditures (in thousands)

	State funds	Federal funds	Local funds
Administration			
Payments			
San Diego	$ 84		
Los Angeles	$150		
Sacramento	$100		
Other			
TOTALS	$334		
Personnel years			

Estimated Clients Served

Los Angeles Project:	600
Sacramento Project:	86
San Diego Project:	600
Total	1,286

Objectives

To continue the State's leadership in developing new approaches, services or products ion the area of child sexual abuse. Each of the projects may incorporate the following suggestions:

- innovative adolescent prevention programs;
- child sexual abuse treatment programs;
- developing evaluation tools for school-based prevention programs;
- provide treatment to juvenile sex offenders who are victims of child sexual abuse.

Eligibility

An agency eligible to apply for funds to operate a child sexual prevention and exploitation treatment project must be a nonprofit agency or a unit of local government with a demonstrated record of success in the delivery of services to victims of sexual abuse.

Program Activity

The grants for the Child Sexual Abuse Prevention and Exploitation Program were awarded for a two-year period beginning July 1, 1985. The awards were made to Children's Hospital and Health Center in San Diego, Harbour - UCLA Medical Center in Los Angeles, and Sacramento Child Sexual Abuse Treatment Program.

DEPARTMENT OF JUSTICE

Program

Child Abuse Central Index
(CACI)

Administered by:

Division of Law Enforcement

Statutory Authority

Penal Code, Sections 11169-70

Year Enacted: 1965

Estimated 1986/87
Fiscal Year Expenditures
(in thousands)

	State funds	Federal funds	Local funds
Administration	$ 700	0	0
Payments	0	0	0
Other	0	0	0
TOTALS	$ 700		
Personnel years	23		

Estimated Clients Served

Unknown

Objectives

To direct child protective investigators to records held by other child protective agencies.

Eligibility

Child Protective Agencies, including Law Enforcement, Welfare, Probation and District Attorneys.

Program Activity

The Child Abuse Reporting Law requires that Child Protective Agencies (CPA) submit reports of their investigations of child abuse incidents to the Department of Justice in order to determine if the persons involved in the alleged incidents have been involved in child abuse. The Department of Justice must immediately notify contributing CPAs and district attorney's offices which request notification of any prior history information and must extract information from the reports for inclusion in the Child Abuse Central Index (CACI).

When a Child Abuse Investigation Report is received by the Department of Justice, the Child Abuse Central Index is searched to determine if the suspects or victims in the incoming reports have prior histories of child abuse involvement.

CACI information directs an investigator to complete investigation reports held by contributing CPAs. The complete investigation reports assist the investigator in determining whether or not a child should be removed from an endangering situation and provides details about a suspect's prior behavior to enhance the current investigation.

CHILD DEVELOPMENT PROGRAMS ADVISORY COMMITTEE

Program

Child Development Programs Advisory Committee (CDPAC)

Administered by:

Child Development Programs Advisory Committee

Statutory Authority

Education Code, Section 8286

Year Enacted: 1965

Estimated 1986/87 Fiscal Year Expenditures (in thousands)

	State funds	Federal funds	Local funds
Administration	$ 216	0	0
Payments	$ 0	0	0
Other	0	0	0
TOTALS	$ 216		
Personnel years	3.3		

Estimated Clients Served

34,039 Family day care providers
7,364 Center based care programs

Objectives

To provide public review of child care and development programs; to review child development program policy; to report to the Legislature on program effectiveness and recommend areas for program expansion and restructuring; to advise the Governor, State Superintendent, the Legislature, and Department heads as appropriate.

Eligibility

All California children in need of child care.

Program Activity

Statutory History

1965 - Established to review and assist the State to establish a preschool program similar to Head Start.

1970 - Added responsibility to review day care and child development.

1972 - Added functions emphasizing evaluation of new alternative child care programs.

1984 - Required Committee to assist in developing guidelines for establishing a division of child day care licensing and a statewide child care ombudsman program.

1985 - Added responsibility to serve in an advisory capacity to the Superintendent of Public Instruction and the Governor for program policy decisions on Chapter 1026.

CHILD DEVELOPMENT PROGRAMS ADVISORY COMMITTEE

Program Activity

(continued)

In the past the Committee has been involved in a variety of tasks:

- Prepared child consumer education material (videos, brochures, workshops) for parents;

- Monitored the implementation of the Community School Age Child Care Act (SB 303) Monitored the implementation of the DSS Title XX Child Abuse Training Program for child care providers.

- Produced reports:

  The Role of Child Care in Child Abuse Prevention

  School Age Child Care Report

  Second Language Learning by Young Children

Future plans include:

- developing methods to assist children with special needs and determine existing resources

- gathering data on teenage pregnancy and assess available resources

- investigating possibility of establishing a telephone information hotline for all children's services

- exploring with DSS methods to increase licensing evaluations and enforcement of licensing regulations
- reviewing teacher requirements for early childhood education,

- continuing distribution of child care consumer education materials

- comparing the activities of agencies which investigate child abuse in child care facilities.

APPENDIX C

SUMMARY OF SURVEY RESULTS

BY PROGRAM AND TARGET POPULATION CATEGORIES

APPENDIX C

SUMMARY OF SURVEY RESULTS, BY PROGRAM AND TARGET POPULATION CATAGORIES

Agency Department of Social Services	Code*	State $ (in 1000's)	Federal $ (in 1000's)	Local $ (in 1000's)	Total $ (in 1000's)
AFDC-Family Group; Unemployed Parent	4	$1,767,732	$2,067,463	$ 307,325	$4,142,520
AFDC-Foster Care Program	1	275,705	93,863	22,291	391,859
Supplemental Security Income/State Supplementary Program	4	41,583	89,152	—	130,735
Greater Avenues for Independence (GAIN)	3	24,611	24,609	—	49,220
Work Incentive Program (WIN)**	3	400	—	—	400
Refugee Assistance/Child Care	3	—	1,538	—	1,538
Unaccompanied Minor Program	1	—	2,843	—	2,843
Child Abuse Prevention Program	1	24,866	1,648	—	26,514
Agency/Independent Adoption Program	1	33,531	10,664	—	44,195
Child Welfare Services	1	164,712	63,967	55,259	283,938
Child Support Enforcement Program	4	19,732	130,854	3,618	154,204
Day Care Center & Family Day Care Home Licensing	3	15,847	—	—	15,847
Group Home, Foster Family Licensing	1	7,905	8,324	—	16,229
Subtotal DSS		2,376,624	2,494,925	388,493	5,260,042
Department of Education					
General Child Care	3	210,986	—	—	210,986
Migrant Child Development	3	6,616	2,140	—	8,756
State Preschool Program	3	37,022	—	—	37,022
Alternative Payment Programs	3	25,999	—	—	25,999
Child Care Resource and Referral Programs	3	7,335	—	—	7,335
Severely Handicapped Program	3	711	—	—	711
School-Aged Parenting & Infant Development (SAPID)	3	6,668	—	—	6,668
Campus Child Development	3	10,231	—	—	10,231*
State Preschool Career Incentive Grant	3	300	—	—	300
Child Care & Employment Act (JTPA)	3	—	2,565	—	2,565
School-Age Community Child Care	3	15,629	—	—	15,629
Child Care Capital Outlay	3	43,750	—	—	43,750
Protective Services (Respite)	3	7,335	—	—	7,335
Subtotal SDE		372,582	4,705	—	377,287
Department of Mental Health					
State Hospitals and Local Programs Total	4	113,311	—	—	113,311
Department of Health Services					
Child Health & Disability Prevention	4	36,057	27,335	—	63,392
Adolescent Family Life Demonstration Program	4	1,818	3,182	—	5,000
High Risk Infant Follow-up Program	4	1,103	838	—	1,941
Subtotal DHS		38,978	31,355	—	70,333
California Youth Authority					
County Justice System Subvention	4	67,298	—	—	67,298

*Some portion may be double counted

Agency	Code*	State $ (in 1000's)	Federal $ (in 1000's)	Local $ (in 1000's)	Total $ (in 1000's)
Department of Alcohol and Drug Programs					
School-Community Primary Prevention Program	4	1,091	—	—	1,091
Services for Drug Clients Age 18 & Younger	4	1,716	2,038	2,531	6,285
Children Recovery Services for Problems Related to Alcohol	4	370	54	200	624
Statewide Youth Coordination Project	4	117	--	--	117
Youth Technical Assistance Project	4	50	--	--	50
Public Awareness & Prevention Campaigns (Total)	4	499	14	--	513
Subtotal A&DP		3,843	2,106	2,731	8,680
Department of Housing & Community Development					
Emergency Shelter Program	2	3,880	--	--	3,880
University of California					
Campus Child Care Programs	3	1,101	--	2,401	3,502
California State University					
Campus Child Care Programs	3	1,306	--	2,160	3,466
California Community Colleges					
Cooperative Agencies Resources for Education	3	736	--	--	736
Campus Child Care Development Centers	3	4,026	--	--	4,026
Subtotal		4,762	--	--	4,762
Office of Criminal Justice Planning					
California Runaway Hotline	2	200	--	--	200
Homeless Youth Pilot Project	2	920	--	--	920
Child Sexual Abuse Prevention Program	1	250	--	--	250
Child Sexual Abuse Prevention Training Centers	1	700	--	--	700
Child Sexual Aubse & Exploitation Treatment Projects	1	334	--	--	334
Subtotal OCJP		2,404	--	--	2,404
Department of Justice					
Child Abuse Central Index	1	700	--	--	700

Agency	Code*	State $ (in 1000's)	Federal $ (in 1000's)	Local $ (in 1000's)	Total $ (in 1000's)
Child Developoment Program Advisory Committee	3	216	--	--	216
Total Neglected/Abused (Code 1)		508,703	181,309	77,550	767,562
Total Runaway/Homeless (Code 2)		5,000	--	--	5,000
Total Child Care (Code 3)		420,825	30,852	4,561	456,238
Total for Three Target Groups		934,528	212,161	82,111	1,228,800
Total Other Childrens Services (Code 4)		2,052,477	2,320,930	313,674	4,687,081
Grand Total-Childrens Services		2,987,005	2,533,091	395,785	5,915,881

*Legend

Code 1 = Programs specifically for Neglected and Abused Children
Code 2 = Programs specifically for Runaway/Homeless Youth
Code 3 = Child Care and Child Development Programs
Code 4 = Other Services for Children

**Figure represents only child care portion of program. Delineation of funding sources was not available.

APPENDIX D

HOMELESS YOUTH PILOT PROJECT

CATEGORICAL DEFINITIONS AND STATISTICAL INFORMATION

APPENDIX D

HOMELESS YOUTH PILOT PROJECT CATEGORICAL DEFINITIONS AND STATISTICAL INFORMATION

SITUATIONAL RUNAWAY:	YOUTHS WHO RUN FROM ISSUES/FAMILIES THAT CAN BE WORKED WITH
JUSTIFIABLE RUNAWAY:	YOUTHS WHO RUN FROM UNACCEPTABLE HOME ENVIRONMENTS DUE TO SUCH FACTORS AS ABUSE, NEGLECT, ETC.
CHRONIC RUNAWAY:	YOUTHS WHO HAVE RUN REPEATEDLY (THREE OR MORE TIMES) FROM HOME OR PLACEMENT
CHRONIC WITH ABUSE AND/OR NEGLECT:	SAME AS ABOVE BUT HAVE A HISTORY OF ABUSE AND/OR NEGLECT
HOMELESS YOUTH:	(a) SINGLE, UNDOCUMENTED/MIGRANT WORKERS; OR (b) THROWAWAYS/PUSHOUTS, YOUTHS TOLD TO LEAVE OR INDUCED TO LEAVE BY PARENTS OR GUARDIANS; OR (c) "NOMADIC YOUTH," FAILURES OF THE MENTAL HEALTH SYSTEM WHO DRIFT; OR (d) ESSENTIALLY EMANCIPATED YOUTHS WHO NEED TO FIND A JOB/HOME; OR (e) YOUTHS WHO HAVE BEEN LIVING ON THE STREETS TWO OR MORE MONTHS.
HOMELESS YOUTH WITH ABUSE AND/OR NEGLECT:	SAME AS ABOVE BUT HAVE A HISTORY OF ABUSE AND/OR NEGLECT
PRE-RUNAWAY:	CHILDREN/YOUTHS THAT WOULD HAVE RUN AWAY IF THERE HAD NOT BEEN INTERVENTION

Utilizing the categorical definitions above and statistical data gathered from youths at the intake interview, pages 9-11 provide a profile look at the youth seen at outreach, shelter and medical screening over the past year throughout the entire system of care in Los Angeles.

OUTREACH AGENCIES
LOS ANGELES SYSTEM OF CARE HOMELESS YOUTH PROFILES

OUTREACH: (October 1, 1986 - June 30, 1987)

NUMBER OF AGENCIES REPORTING	4
NUMBER OF YOUTH SERVED	8,003
NUMBER OF YOUTH TURNED AWAY	402*

DEMOGRAPHIC DATA		ETHNICITY	
MALES	69.5%	CAUCASIAN	60.0%
FEMALES	30.5%	BLACK	14.7%
10-11 YEARS	0.4%	HISPANIC	20.3%
12-13 YEARS	4.5%	AMERICAN INDIAN	2.1%
14-15 YEARS	17.2%	ASIAN/PAC. ISLAND	1.4%
16-17 YEARS	77.9%	OTHER/UNKNOWN	1.5%

ORIGIN		STATUS AT INTAKE	
WITHIN CITY	3.6%**	SITUATIONAL	17.1%
WITHIN COUNTY	19.2%	JUSTIFIABLE	3.9%
WITHIN STATE	15.8%	CHRONIC	5.2%
OUT-OF-STATE	44.4%	CHRONIC WITH ABUSE	3.9%
MEXICO/LATIN AMER.	14.4%	HOMELESS	51.0%
OUT-OF-COUNTRY	.9%	HOMELESS WITH ABUSE	15.3%
UNKNOWN	1.8%	PRE-RUNAWAYS	.8%
		NO DATA/OTHER	2.9%

* OUTREACH AGENCIES, BY DEFINITION, TRY NOT TO TURN ANY CLIENTS AWAY. THEY MAY NOT BE ABLE TO PROVIDE FOR ALL THEIR NEEDS, BUT THEY HAVE "SERVED" THEM IF ONLY BY OUTREACH CONTACT OR REFERRAL TO OTHER RESOURCES. YOUTH TURNED AWAY ARE REPORTED BY ONE AGENCY ONLY FOR RUNNING OUT OF FOOD AND BUS TOKENS.

** TWO AGENCIES DO NOT DIFFERENTIATE BETWEEN CITY AND COUNTY.

SHELTERS
LOS ANGELES SYSTEM OF CARE HOMELESS YOUTH PROFILES

SHELTER: (October 1, 1986 - June 30, 1987)

NUMBER OF AGENCIES REPORTING	6
NUMBER OF YOUTH SERVED	1,197
NUMBER OF YOUTH TURNED AWAY	2,743*

DEMOGRAPHIC DATA		ETHNICITY	
MALES	47.0%	CAUCASIAN	47.4%
FEMALES	53.0%	BLACK	27.0%
9-11 YEARS	0.3%	HISPANIC	15.4%
12-13 YEARS	6.6%	AMERICAN INDIAN	2.6%
14-15 YEARS	36.9%	ASIAN/PACIFIC ISLAND	3.4%
16-17 YEARS	56.2%	OTHER/UNKNOWN	4.2%

ORIGIN		STATUS AT INTAKE	
WITHIN CITY	29.0%	SITUATIONAL	15.1%
WITHIN COUNTY	36.7%	JUSTIFIABLE	20.1%
WITHIN STATE	11.2%	CHRONIC	8.9%
OUT OF STATE	19.4%	CHRONIC WITH ABUSE	16.5%
MEXICO/LATIN AMERICA	0.9%	HOMELESS	22.2%
OUT OF COUNTRY	1.7%	HOMELESS WITH ABUSE	11.7%
UNKNOWN	1.1%	PRE-RUNAWAYS	2.7%
		NO DATA/OTHER	2.8%

* THE HIGHEST PERCENTAGE OF YOUTH TURNED AWAY FROM THE SHELTERS (AROUND 80%) IS THE RESULT OF ALL SHELTERS BEING FULL. OTHERS ARE TURNED AWAY AS NOT BEING APPROPRIATE FOR BEING SHELTERED IN A YOUTH FACILITY.

LOS ANGELES SYSTEM OF CARE HOMELESS YOUTH PROFILES

MEDICAL SCREENING: (October 1, 1986 - June 30, 1987)

NUMBER OF AGENCIES REPORTING	1
NUMBER OF YOUTH SERVED	561
NUMBER OF YOUTH TURNED AWAY	0

DEMOGRAPHIC DATA		ETHNICITY	
MALES	51.0%	CAUCASIAN	52.2%
FEMALES	49.0%	BLACK	25.5%
9-11 YEARS	0.0%	HISPANIC	11.3%
12-13 YEARS	4.6%	AMERICAN INDIAN	4.0%
14-15 YEARS	25.0%	ASIAN/PACIFIC ISLAND	3.0%
16-17 YEARS	69.4%	OTHER/UNKNOWN	4.0%

ORIGIN		STATUS AT INTAKE	
WITHIN CITY/COUNTY	27.9%	SITUATIONAL	6.0%
WITHIN STATE	20.6%	JUSTIFIABLE	5.0%
OUT OF STATE	33.5%	CHRONIC	7.6%
MEXICO/LATIN AMERICA	1.0%	CHRONIC WITH ABUSE	4.0%
OUT OF COUNTRY	2.3%	HOMELESS	43.1%
UNKNOWN	14.6%	HOMELESS WITH ABUSE	24.5%
		PRE-RUNAWAYS	0.0%
		NO DATA/OTHER	9.3%

APPENDIX E

STATEWIDE DATA EMERGENCY RESPONSE

FOR CHILD PROTECTIVE SERVICES CHILDREN

EXHIBIT E

STATEWIDE DATA EMERGENCY RESPONSE FOR CHILD PROTECTIVE SERVICES CHILDREN

	1982*	1983*	1984*	1985*	1986
Types of Abuse					
Physical Abuse	21,142	31,679	72,025	86,654	101,611
Sexual Assault/Abuse	8,093	14,379	43,056	54,102	58,458
General Neglect	29,401	36,331	78,804	97,735	110,159
Exploitation	1,097++	679	2,987	1,920	1,332
Caretaker Absence	5,863	8,147	18,406	26,600	30,791
Child's Disability/ Handicap	615++	464	+	+	+
Severe Neglect		4,013++	18,660	19,107	30,135
Emotional Abuse		1,502++	7,415	9,532	9,515
Parent/Child Conflict		1,405++	3,008	+	+
Other	7,262	8,974	5,910	+	+
TOTAL	73,473	107,573	250,271	295,650	342,001

* Report form changed from previous year
\+ Category dropped from report form
++ Category added to report form

Compiled with Data from Statistical Services, State Department of Social Services.

APPENDIX F

CATAGORIES AND DEFINITIONS OF ABUSED AND NEGLECTED CHILDREN AND SERVICES

EXHIBIT F
CATEGORIES AND DEFINITIONS OF SERVICE CHILDREN

Physical Abuse - Means non-accidental bodily injury that has been or is being inflicted on a child. It includes, but is not limited to, those forms of abuse defined by Penal Code Sections 11165(d) and (e) as "willful cruelty or unjustifiable punishment of a child" and "corporal punishment or injury."

Sexual Abuse - Means the victimization of a child by sexual activities including, but not limited to, those activities defined in Penal Code Section 11165(b) as "sexual assault".

General Neglect - Means the negligent failure of a person having the care or custody of a child to provide adequate food, clothing, shelter, or supervision where no physical injury to the child has occurred.

Exploitation - The act of forcing or coercing a child into performing activities for the benefit of the caretaker which are beyond the child's capabilities or capacities or which are illegal or degrading. Exploitation includes forcing workload on a child in or outside the home so as to interfere with the health, education and well-being of the child.

Caretaker Absence or Incapacity - Means absence of caretaker (defined as parent/guardian) due to hospitalization, incarceration or death, incapacity of caretaker (defined as parent/guardian) to provide adequate care for the child due to physical or emotional illness, or disabling condition.

Severe Neglect - The negligent failure of a person having the care or custody of a child to protect the child from severe malnutrition or medically diagnosed non-organic failure to thrive. "Severe neglect" also means those situations of neglect where any person having the care or custody of a child willfully causes or permits the person or health of the child to be placed in a situation such that his or her person or health is endangered, as prescribed by Penal Code Section 11165(d), including the intentional failure to provide adequate food, clothing or shelter.

Emotional Abuse - Means non-physical mistreatment, the results of which may be characterized by disturbed behavior on the part of the child, such as severe withdrawal, regression, bizarre behavior, hyperactivity, or dangerous acting-out behavior. Such disturbed behavior is not deemed, in and of itself, to be evidence of emotional abuse. Emotional abuse includes willfully causing or permitting any child to suffer, or inflicting thereon mental suffering, or endangering a child's emotional well-being as described in Penal Code Section 11165(d).

Compiled with data from Statistical Services, Department of Social Services.

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OCT 20 1987
LITTLE HOOVER COMMISSION

Statement of Commissioner M. Lester Oshea

While this report reflects much worthwhile study and includes some good recommendations, I must disassociate myself from it in the light of what I consider very serious flaws, particularly in the child care area.

In this area, the report not only seems to be based on the assumption that it is the responsibility of the State to provide subsidized child care for all those of lower income who work outside the home and wish it, but explicitly advocates this position in Recommendation #2.

If the "State" were a rich uncle, and childless to boot, this position would have more appeal; but since "the State" in this context means the taxpayers of the State, many of whom are themselves of limited means yet are paying for their own child care needs or foregoing earning a second income to fulfil their parental responsibilities, in addition to funding what is already one of the most generous welfare systems of any state, I strongly disagree.

In this connection I must say that the report seems out of tune with generally held values when it refers in Finding #8, to "a virtually impossible decision...accept inadequate care... or stay home to care for the children and encounter unemployment." This is to say the least a very strange way to refer to the traditional role of the mother in child-raising. While Exhibit I.1 does show a dramatic increase in the number of single-parent families since 1940, saying that "there has been a dramatic change in the family environment in which children are living" rather overstates the situation, since the table shows a ratio of better than 4 to 1 between two-parent and single-parent families.

Recommendations 1 and 2 - creation of a series of "rights" and of a commission to advocate them - represent a proposal for a massive increase in welfare spending in California: the State (that is, the taxpayer) should provide "support for families that are not self-sufficient."

One of the tragedies of our times is the proliferation, much discussed recently in the national press, of "children having children," leading to a breakdown of constructive family structure and a downward spiral of poverty, dependency, and crime. Even at present levels, welfare (AFDC) payments often serve as an inducement to young women to have children so as to acquire their own income and independence.

For the report to advocate in effect "throwing more money at the problem," without addressing the obvious need such "families" have for supervision and guidance so as to provide a real

prospect of breaking the "poverty cycle," does a disservice. The author of the report would do well to read Charles Murray's excellent study, Losing Ground.

Recommendation 3 is not called for; 5 is a proposal for increased State child care spending; and 12 is an unwarranted intrusion into employer/employee relations.

The report discusses the homeless/runaway youth problem at some length; but not all of this section provides new insights. One hopes that the "study" cited in Finding #12, which "concluded that runaway/homeless youth are at much greater risk of acquiring a wide variety of diseases and problem-inducing behaviors than their non-runaway/homeless counterparts," was not overly expensive.

But absent is any significant recognition of the "you can lead a horse to water, but you can't make him drink" problem. Testimony at our Los Angeles hearing revealed that of a group of runaway/homeless youth placed in touch with appropriate help, only one continued to avail herself of the assistance available. Pursuant to 1977 legislation, the authorities have no power to require the cooperation of runaway/homeless youth in rehabilitation efforts. The report is remiss in not addressing the issue of whether changes in the law in this area should be considered. Under present circumstances, providing "services" to "runaways" may be a relatively hopeless objective for government.

RECEIVED
OCT 21 1987
LITTLE HOOVER COMMISSION

MEMORANDUM

TO: Recipients of the Report on Children's Services Delivery

FROM: George Paras
Barbara Stone

SUBJECT: Children's Services

The Commission on California State Government and Economy has issued a report on Children's Services. While the report reflects a great deal of effort and contains some reasonable recommendations, we find that we cannot support it as a whole. A number of the recommendations are inappropriate and/or are not supported by the data presented. The most important of these are:

*Recommendations #1: Establish a Commission on Children and Youth. If there is a need for co-ordination of services at the state level, it should be performed by appropriate executive branch personnel. The proposed commission is appointed by too many and is responsible to none. A much better solution is found among the models presented by the report itself: the model of New York, which has an inter-agency task force made up of one representative from each agency serving children. Such a group could be required to file periodic reports of its activities, and the Little Hoover Commission could perform any necessary watchdog functions.

Recommendation #2: Adopt a Uniform Children's Services Policy to Address the Needs of the Whole Child. While the report makes a case for the co-ordination of services (although in most

cases we believe this is achieved better at the local level), it offers no substantiation of the need for such a policy. The recommendation is based on the faulty premise that children in most cases can be separated intellectually from their families. Indeed, most of the services discussed are services to adults (AFDC-so families can stay together; child care so adults can enter or stay in the work force) from which children hopefully benefit. Furthermore, research has shown that the best way to keep adults and children from falling into poverty is to have stable families in which the parents are high school graduates, and government programs that aid and support the entire family are far superior to fragmented programs that provide aid only to children.

Recommendation #12: Require Employers to Grant Unpaid Job-Protected Leaves to New Parents Who Desire Them. This is highly controversial and virtually not discussed in the report.

There are other questionable recommendations: for example, #8 never really comes to grip with the possibility that addressing one problem (professionalism) will exacerbate another (too few places), and #16 doesn't address the policy implications for GAIN (workfare) recipients of reducing the number of child care places available to these welfare mothers. For these reasons, we must dissent and disassociate ourselves from the recommendations.

*This recommendation is based on the final draft copy of the report circulated to the Commissioners. It is our understanding that subsequently the chairman has modified the recommendation to offer as alternatives a commission or a task force. The task force is acceptable; the commission is not.

PLEASE REPLY TO:
☐ STATE CAPITOL
SACRAMENTO, CA 95814
(916) 445-3266

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BAKERSFIELD, CA 93309
(805) 395-2673

☐ 566 W. LANCASTER BLVD., NO. 1
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OCT 21 1987
LITTLE HOOVER COMMISSION

October 21, 1987

Mr. Nathan Shapell, Chairman
Little Hoover Commission
1303 J Street, Suite 270
Sacramento, CA 95814

Dear Nathan:

I have read thoroughly the Commission's majority report on California's children's services system. While the report raises many legitimate problems and suggests a number of studies and solutions which are highly appropriate, there are some fundamental areas where I simply must disagree. Therefore, I must join with Commissioner Stone in offering a dissenting opinion.

In a broad sense, I find it impossible to accept the assumption, made throughout the majority report, that the only solution to our children's problems is increased government intervention. I do not believe the Commission should even be suggesting the formation of a new, politically appointed commission to attempt to oversee all of California's children's services. In fact, as Commissioner Stone points out, the body of the report clearly demonstrates that inter-agency task forces, rather than independent commissions, have been highly effective in other jurisdictions. I would have much preferred that an inter-agency task force be our only recommendation in this area.

I also find it absurd that, at a time when we face a severe shortage of child care workers in California, the draft report advocates boosting standards for those who might want to enter the field. We need to find ways to provide new incentives for talented people to open day care centers; we don't need to make things even more difficult.

In addition, I cannot support the recommendation for a mandated, six-month maternity leave for all employees. I have opposed legislation in this area in the past, because I believe that such a requirement could place an unreasonable burden on many employers, particularly owners of small businesses.

These, then, are my major concerns with the majority report. In the future, I would prefer to see the Little Hoover Commission put more emphasis on ways to keep families together and to encourage greater parental involvement, rather than continually advocating massive new state programs and greater governmental intervention in families' lives. Many children in this state are in trouble, but we should not always assume that the only solution is more government.

Sincerely,

PHILLIP D. WYMAN

PDW:bl

STATEMENT OF RICHARD R. TERZIAN

October 23, 1987

Although I agree generally with the goals of the children's services study and have acquiesced in its issuance, I must express here the same reservations I voiced at the special meeting of the Commission held October 23, 1987. My reservations are threefold:

1. With respect to findings Nos. 2 through 11, I do not believe that the two hearings we held in 1986 adequately covered the subject matter of these findings. Most of our hearings revolved around the problems of abused, neglected and runaway children. Although in general the sentiments expressed in those findings are probably valid, a number of them are flawed by lack of adequate evidentiary support or analysis.

2. As I have stated before, it is easy to make a case for more funding for any vital public need and children's services are no exception. A similar case can be made for education, transportation, hospitals, prisons and the like. However, limited fiscal resources prevent funding all perceived needs to the fullest extent requested. The people of this State have voted to limit the power of government to tax and spend. If all needs are to be funded to the fullest extent requested, this report, and our other reports, should make it clear that additional taxes will have to be imposed or existing taxes increased.

3. The key recommendation of the report is formation of a children's services commission. Some persons have indicated a preference for a task force. I care less about what the entity is called than whether it will achieve the goal of providing cost-effective children's services. The proposed commission bears a striking resemblance to the Little Hoover Commission. I do not think our Commission is an appropriate model, since we are engaged primarily in an oversight, investigatory function, rather than administering programs. I am all for an effective means of delivering as much children's services to as many recipients as possible by effective use of current funding. I think a commission may well be the best way to do it, but have some doubts as to whether the commission proposed in this report is the most effective.