

PART I - January 27, 1976 17 people present

1. The LWV supports legislation and administration of programs and facilities which will enable Illinois to fulfill its responsibility to meet basic child welfare needs. We concur.
2. Family counseling, homemaker, day care and diagnostic and treatment services in particular, should be made available to serve the child who lives at home. We concur. It was suggested that we seek the cooperation of industries to help workers with problems.
3. More small residential facilities should be available to serve specific needs, including foster care, of the child who has to live away from home.  
Answer: While we generally agreed that the small residential facility is an excellent facility concept, they have not worked out well when they have tried to operate in most residential neighborhoods. How small is small? How about the economics involved and the 24 hour supervision required, especially with older children? There was some question about supporting a "Kaleidscope" if it came to Decatur. Still, most felt that some sort of small facility should be available.
4. Day care should be available for all children whose families wish to use it, with priority given to those in greatest economic need.  
Answer- yes. All children, yes, if enough centers are available. Income is a factor. Transportation and location of the center is important. There seems to be a waiting list for day care of the low income child which seems to indicate that their needs are not being met.  
There was some discussion about opening the public schools for care of three year olds. The Area Vocational Center Program was thought to be excellent way of training high schools students for work in day care facilities.

PART II - February 25, 1976

5. The LWV supports child welfare legislation and programs for the effective rehabilitation and care of young people who come before the court.  
Answer - we concur. Some care should be taken that a juvenile has his legal right to an attorney during proceedings. Concur with the first point of the consensus.
6. The LWV supports the thrust of the Illinois Juvenile Court Act to provide the opportunities for effective rehabilitation and care of young people and to protect the legal rights of the child and his parents.  
Answer- we concur. But believe a complete diagnostic workup is necessary to determine what kinds of facility is necessary for each individual.
7. Smaller correctional and treatment facilities and programs should be developed to serve the varied needs of the child who has been removed from his home.  
Answer- we concur.
8. Effective treatment services within the community should be provided for the child returned by the court to his own home.  
Answer - we concur.
9. Probation services for juveniles should be of high quality, responsive to the special needs of juveniles, and uniform throughout the state.  
Answer - we concur.



- 10. Education, such as an opportunity for a young person to complete his high school requirements or to receive realistic vocational training, should be available to youngsters who have come before the court.

Answer: we concur. Some kind of central recording keeping or feedback between service agencies to get adequate figures in order to evaluate services.

- 11. State agencies should constantly evaluate on-going programs, upgrade staff, and search for new methods to improve the treatment of children.

Answer: we concur. Some special provisions are necessary to work with kids with problems. Preventive measures for parental understanding and acceptance are necessary.

PART III - April 28, 1976 - 15 members and 4 guests.

- 12. The state should stimulate the provisions of increased services for the emotionally disturbed child.

Answer- we concur. The state should stimulate the provisions of increased services for the emotionally disturbed child.

- 13. Effective delinquency prevention services should be available, and local communities should take the initiative in developing these, cooperating wherever possible with the local school system in developing a overall plan.

Answer- we concur. The consensus of the group was that the state should, indeed, stimulate such services. We concur that effective delinquency prevention services should be available. We feel that is is the local community's responsibility to coordinate effective delinquency prevention services.

- 14. The Juvenile Court, as a judicial institution whose primary function is the protection, treatment and rehabilitation of children in trouble, depends upon judicial leadership and court staff of appropriate qualification; effective utilization of supportin services including social case work, psychological and psychiatric services, and detention control based on national standards; adequate public financing and community support.

Answer; we concur.

- 15. The Juvenile Court should have original and exclusive jurisdiction over the juveniles whose cases call for a judicial determination of legal rights and issues, with clearly defined safeguards established by law for the protection of the rights of children and parents; and that responsibility for dependency and truancy cases and the related administrative and supporting services should be transferred to a public administrative agency.

Answer; we concur.

- 16. That there should be provided for children temporarily detained for whatever reason a variety of separate facilities to provide them with the different types of services and environment suited to their respective needs. That there should be provided for dependent and neglected children both protective services and shelter care separate from detention, in different types of facilities suitable to their needs, including small temporary care facilities and foster homes.

Answer; we concur.



Consensus Reply on Child Welfare ' Level of Services'

How can the level of services by state agencies to children and their families be upgraded in the following areas:

a) Administration of state services

We agree with the LWV's present state position that the Director should be appointed by the Governor with advice and consent of the Senate. We think that qualifications should be set up to include experience in direct services as well as administration. We favor a four year contract, renewable, not to coincide with the election of the governor. The Director should be removed from office only for good cause (publicized).

We approve of one agency to deal with children (our present position) to avoid overlapping services. Our own local Council of Social Agencies might better publicize the services available to children.

b) Staffing

Staff should be qualified. We ask for adequate in-service training, preferably with full state funding.

c) Planning

We like the Welfare Services Planning concept. A plan should include ~~also planning between agencies that deal with children~~ - better coordination with the roots of the agency; it should also include planning between agencies that deal with children. We feel that there is a need for better dissemination of information about public-input hearings.

d) ~~It~~- Development of Resources

It was pointed out that resources exist if properly funded.

We approve a program similar to the Comprehensive Emergency Service (The Nashville Plan).

e) Advocacy

We support coordination between existing statutory groups and coordination with private groups which provide services.

Perhaps a Directory of Services could be compiled, with the Department of Children and Family Services as the compiler.

Consensus Reply on Child Welfare ' Level of Services'

How can the level of services by state agencies to children and their families be upgraded in the following areas:

a) Administration of state services

We agree with the LWV's present state position that the Director should be appointed by the Governor with advice and consent of the Senate. We think that qualifications should be set up to include experience in direct services as well as administration. We favor a four year contract, renewable, not to coincide with the election of the governor. The Director should be removed from office only for good cause (publicized).

We approve of one agency to deal with children (our present position) to avoid overlapping services. Our own local Council of Social Agencies might better publicize the services available to children.

b) Staffing

Staff should be qualified. We ask for adequate in-service training, preferably with full state funding.

c) Planning

We like the Welfare Services Planning concept. A plan should include ~~also planning between agencies that deal with children~~ better coordination with the roots of the agency; it should also include planning between agencies that deal with children. We feel that there is a need for better dissemination of information about public-input hearings.

d) ~~It~~ Development of Resources

It was pointed out that resources exist if properly funded.

We approve a program similar to the Comprehensive Emergency Service (The Nashville Plan).

e) Advocacy

We support coordination between existing statutory groups and coordination with private groups which provide services.

Perhaps a Directory of Services could be compiled, with the Department of Children and Family Services as the compiler.



CONSENSUS REPLY ON CHILD WELFARE "LEVEL OF SERVICES"  
Due in State Office March 10, 1977

(Please Type)

How can the level of services by state agencies to children and their families be upgraded in the following areas:

a) Administration of state services

We agree with LWV's present state position that the Director should be appointed by the Governor with advice and consent of the Senate. We think that qualifications should be set up to include experience in direct services as well as administration. We favor a four-year contract, renewable, not to coincide with the election of the Governor. The Director should be removed from office only for good cause (publicized.)

We approve of one agency to deal with children (our present position) to avoid overlapping service. Our local Council of Social Agencies might better publicize the services available to children.

b) Staffing

Staff should be qualified. We ask for adequate in-service training, preferably with full state funding.



## c) Planning

We like the Welfare Services Planning concept. A plan should include better coordination with the roots of the agency; it should also include planning between agencies that deal with children. We feel that there is a need for better dissemination of information about public-input hearings.

## d) Development of Resources

It was pointed out that resources exist if properly funded. ~~An example is the Unified Code of Correction.~~

We approve a program similar to the Comprehensive Emergency Service (The Nashville Plan)

## e) Advocacy

We support coordination between existing statutory groups and coordination with private groups which provide services. Perhaps a Directory of Services could be compiled, with the Department of Children and Family Services as the compiler.



LEAGUE OF WOMEN VOTERS - Attendance

Date Feb. 23, 1977 Time 7:30 p.m. Place Westminster  
Topic Child Welfare Hostess Sally Lantz

Members on program:

- |                       |    |    |
|-----------------------|----|----|
| 1. Brenda Sensenig    | 4. | 7. |
| 2. Betty Jacobsen     | 5. | 8. |
| 3. Margaret Coleridge | 6. | 9. |

Other members: (address only if changed)

- |                   |     |
|-------------------|-----|
| 1. Leann Mueller  | 13. |
| 2. Wimpied Loewen | 14. |
| 3. Sally Lantz    | 15. |
| 4. Sue Campbell   | 16. |
| 5. Karen Jensen   | 17. |
| 6. Elise Hunt     | 18. |
| 7. Earl Brown     | 19. |
| 8. Sue Meyerson   | 20. |
| 9.                | 21. |
| 10.               | 22. |
| 11.               | 23. |
| 12.               | 24. |

Guests:

	<u>Name</u>	<u>Address</u>	<u>Phone</u>	<u>Who or what interested you in LWV?</u>
1.	Marilyn Reed	1031W Packard	423-3154	Child welfare issues
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				



LEAGUE OF WOMEN VOTERS - Attendance

Date Feb. 23, 1977 Time 9:30<sup>AM</sup> Place Westminster

Topic Child Welfare Hostess Ellen Cantow

Members on program:

- |    |    |    |
|----|----|----|
| 1. | 4. | 7. |
| 2. | 5. | 8. |
| 3. | 6. | 9. |

Other members: (address only if changed)

- |                             |     |
|-----------------------------|-----|
| 1. <u>Mildie Protzman</u>   | 13. |
| 2. <u>Blenda Sensenig</u>   | 14. |
| 3. <u>Margaret Campbell</u> | 15. |
| 4. <u>Elaine Beals</u>      | 16. |
| 5. <u>Laura Verbanac</u>    | 17. |
| 6.                          | 18. |
| 7.                          | 19. |
| 8.                          | 20. |
| 9.                          | 21. |
| 10.                         | 22. |
| 11.                         | 23. |
| 12.                         | 24. |

Guests:

	<u>Name</u>	<u>Address</u>	<u>Phone</u>	<u>Who or what interested you in LWV?</u>
1.	<u>Chris Gullett</u>	<u>2125 W. Main 62522</u>	<u>422-7371</u>	<u>M. Protzman</u>
2.	<u>Adenne Neuschwander</u>	<u>RR7 Box 162</u>	<u>864-3592</u>	<u>M. Protzman</u>
3.				
4.				
5.				
6.				
7.				
8.				
9.				



## DEVELOPMENT OF RESOURCES

State agencies see their role as service providing by purchasing care for youth where possible and providing it themselves where it can't be purchased. The philosophy behind service is that most children would be better off served in their own home or at the least in their own community whenever possible.

Many community based services exist but too often the right service for a particular child does not. Care must be taken that community placement does not occur to save money or shift responsibility. Services should be carefully chosen on knowledge of what's best for an individual child. It should be remembered that there will still be some children who cannot be served with in-home or community alternatives but will need residential treatment.

Community ~~XXXX~~ awareness of lack of facilities or programming and community cultivation of resources is very lacking particularly for the highly acting out adolescent.

To go into programs and alternatives around Illinois could take all day, but a short discussion of Macon County is in order. Macon~~NY~~ County is, fortunately, beginning to offer many services for ~~problem~~ youth <sup>in crisis</sup> through both public and private agencies utilizing both professional and volunteer staff. Even a discussion of all services here could take a morning and be very confusing without an explanation of what each agency does. I will name a few just to give you an idea of what we have and you may be familiar with many of these:

2  
Decatur Mental Health Center  
Department of Children & Family Service  
Public Aid  
Volunteers in Court  
Day Probation and Diversion  
Catholic Charities  
Webster-Cantrell Hall  
Youth Advocate Program  
Unified Delinquency Intervention Services  
Vocational Alternatives Program  
Progress School  
Call For Action  
Status Offender Program

These are still not all inclusive and don't take into account police and sheriff's department, the probation office, and hospitals or special educational programs for problem kids through public schools.

You can see the magnitude that cooperation takes on when facing all the different philosophies, funding sources, and service provision of the many agencies. This is where the problem lies. No coordination and in many cases duplication of some casework! Many of the newer alternatives are making an extreme effort not to duplicate services and are making explicit service agreements with the purchasing agency which in Macon County would be normally DCFS or Macon County Probation Office(Courts).

An attempt is being made by representatives for many agencies in Macon County to come up with a plan for a comprehensive emergency service that could respond on a 24 hour basis to any crisis involving families with children in an attempt to preserve the family intact until a more long range treatment plan could be agreed upon. This group working through the Council of Community Services is asking League's help in putting this plan, when it is agreed upon,



3

to the community and making the community aware of the need for such a service. In fact it has been agreed that if groups like League do not become involved, this coordinated effort can never come about. Leagues have been instrumental in getting a plan of this sort started in Nashville, Tenn. and other cities throughout the United States.

I'd like to present two examples of what would happen in the middle of the night to a child in Macon County in two different situations:

CASE I: Parents call police at 1:00 A.M. because their 14 yr. old son has not come home and they think he has run away following an argument earlier in the evening. Police pick up the boy at 3:00 A.M. in a car with other minors. He could be released to his parents, but if parents refuse to come for him, he will be locked up in the detention facility on the 5th floor of the County Building. He may be held no longer than 36 hours without a hearing, but if at the hearing his parents insist on a petition as a Minor In Need of Supervision, he could be held in jail for 10 days while other alternatives are investigated before another hearing would be required.

There are other services that could be secured on an emergency basis for this child in order to keep him out of jail ( ex. Youth Advocate, Alternatives to Detention, Status Offenders, Macon County Diversion) but much of the time they are not used unless he's a client of that service already, and they are not equipped to handle the youth if he must be removed from his home.

5

These were just two examples of how our concern for children is often not carried off in the manner that might be considered best for the individual child involved. We need to decide whether we as League are going to be in favor of continued development of coordinated resources to serve families with children in crisis situations.

LOOK AT DISCUSSION QUESTIONS ON P. 34 & 35.



4

After July, 1977, Illinois will not be in compliance with Federal Standards if it locks up status offenders and could lose much federal funding for juvenile programs. This is an important issue in Macon County because you all are aware that the 5th floor facility is absolutely unacceptable under any standards.

ANY DISCUSSION!

CASE II: Three children, age 3, 5, and 10 are discovered to be at home alone about 2:00 A.M. by a neighbor who hears crying. The police discover that the father's whereabouts are unknown and the mother was jailed earlier in the day on a petty theft charge. (shoplifting for 4th time in a month).

The Department of Children and Family Services is called and a worker comes to remove the children and place them in a foster home. If one or more of the children appears ill or abused, the worker can have them taken to a hospital for an examination and have them admitted if necessary. DCFS now has temporary custody of these children and must petition the court for a longer term custody or in some extreme neglect or abuse cases, guardianship. All the children in the family may not be placed in the same foster home. It would depend on openings available since some homes take very young children or older children only.

You can see the trauma that might be caused unnecessarily! The CES plan in Nashville includes an emergency homemaker service that in this case would go into the home at least for the night and then a plan for further homemaker service, or relatives taking over, or mother's return, etc. could be made the next day.

## PLANNING

What has been needed is a coherent approach to planning. Planning efforts have been spotty, and generally geared to a paternal service.

Some departments have outside groups come in for planning purposes, such as The Nation Clearing House for the Department of Corrections and The American Humane Association for DCFS. The Illinois Commission on Children has had some planning responsibility.

In 1975 the Welfare Services and Rehabilitation Act was passed by the General Assembly. It requires the eight human service agencies to come up with a 3-year plan.

Illinois is the first state to have such legislation. The first plans were submitted last April and must be updated and submitted each April. (The Department of Mental Health must have a 5-year plan.)

There was little or no coordination of the plans even though the purpose of the legislation is to coordinate planning.

Most planning was based on state budgets, thus relying on what could be accomplished rather than what needs to be accomplished.

### Discussion Questions:

1. Do you think the Welfare Services Planning Act is a worthwhile concept to build on?
2. Should state agencies plan to meet the need or meet the budget?



Advocacy can take many forms. One form is the interactions among levels of government. The legislature is involved in appropriation of funds, passing new legislation - reviewing old.

The courts act as an advocate. The courts are mandated to review the placement of juveniles every two years.

Within Illinois, the Illinois Commission on Children is a statutory advocacy group, with both public and private <sup>members</sup> groups. Among the public members are the directors of agencies that deal with children, bi-partisan members of the Legislature, and judges who deal with juveniles. There are also professional people and citizens at large. The commission does in-depth studies of children's programs and has on-going observation of the Legislature and committees which deal on bills relating to children.

There are also advisory groups appointed by the governor and approved by the Senate; to act as an advisory to the Department Director. For example, the DCFS Council meets monthly, the Department of Corrections has a council for the juvenile division which meets bi-monthly. The Mental Health Department has a citizens' advisory council for community health services, and also one to help with their 5-year plan.

DCFS has advocates within the agency. One kind is found in the Guardianship Unit. With a state Guardianship Director and 14 assistants spread throughout the state, the Unit has the responsibility for decisions (medical, legal, etc!) affecting a ward. It acts on behalf of the child - not the agency.

The Department of Corrections employs 2 youth advocates, who deal with complaints of youths and their families. Within the legal system public defenders, private attorneys serve as advocates. At times the court may appoint a guardian to act as an advocate for the youngster.

Outside the government:

To mention a few groups there are:

John Howard Association (in correctional field)  
Day Care Crisis Center  
Parents Anonymous  
League of Women Voters  
National Council of Jewish Women

There are many, many other groups - probably anyone of you could name several.

Refer to questions on page 37.

In Decatur we have meetings being conducted by a group whose members represent many agencies or other groups interested in children. They are studying a program called Comprehensive Emergency Services.



In Illinois, during the 19th century, services for children were dominated by small voluntary groups. The groups were most often religious or sectarian oriented homes, orphanages, industrial schools or other institutions that came into being because of the feeling that a child could be helped by removal from home in the case of desertion or death or other problems.

Any state services operated on the same theory. Thus you had institutions such as the Chicago Reform School for Delinquent Boys, the Reform School at Pontiac - later called the Illinois State Reformatory (in 1888 housed 500 boys), the Soldiers' and Sailors' Orphans Home in Normal, or many children who became dependent on the state found themselves in county almshouses or jails. In 1890, 13% of the population of county almshouses were children. The tendency was to remove a child from his home regardless of the circumstances.

In 1890 Illinois passed the Juvenile Court Act. The court was set up to deal with three categories of children, delinquent, dependent, neglected. In 1965 Illinois revised this act to give some procedural right of due process to children and their families (right to counsel, right to be heard, cross-examine witnesses).

The present state departments which have a director appointed by the governor and confirmed by the senate came into being in the 1960's. First, Department of Mental Health in 1961, the Department of Children and Family Services in 1964, the Department of Corrections in 1970.

In 1964 DCFS had about 3,000 children under its care - today nearly 30,000. The juvenile division of the Department of Corrections has about 2,000 youths and the Department of Mental Health has about 455 children in its regional in-patient programs.

In the 60's the Illinois assembly also created the Illinois Commission on Children, the only statutory commission with the responsibility for study, planning, promoting, coordinating and stimulating services on behalf of Illinois children.

The commission has taken the leadership in developing major legislation under which we now operate - such as the legislation creating DCFS and the Department of Corrections, and the Juvenile Court Act of 1965 and its later amendments, the Child Abuse Act and its amendments.

The commission has made reports for the White House Commission

on children as well as reports in areas such as out-of-state placement, young children in correctional institutions and the age of majority. It is currently studying legislation affecting the rights of minors.

In the early 70's, we have moved away from institutionalizing a child unnecessarily, we have also seen the mandating of additional categories of persons designated to report possible child abuse (which has increased 3 times and to which DCFS must respond). The General Assembly has also inquired into the reasons for placements of hundreds of children out of state by DCFS and the Department of Mental Health - a move is now underway to return these children and to discover why Illinois does not have the resources to help them. The General Assembly also passed legislation mandating the human services agencies to plan on a 3 year basis and to publish the plan. The 3 agencies are moving toward "community based services" and trying to combine public and private resources. The tendency is to keep families intact - children in the home, if possible.

Legislation the league may be asked to support includes - the right to place an emergency homemaker in the home with or without permission of the parents (this covers neglected children).

Bills coming from the Commission of Children on the rights of minors include:

1. Right to medical treatment
2. Right to access of medical records
3. School discipline act (expulsion and suspension procedure)
4. Juvenile justice covering the officers information file
  - a. Kind of information to contain
  - b. Use of file
  - c. Access to belong to whom



D.C.F.S.

The legislation creating DCFS says the agency is to:

1. Provide social services to children and their families
2. operate children's institutions
3. provide rehabilitation and residential services and direct child welfare services not available through other public or private programs

The department may provide programs such as - adoption, foster care, group home care, services to unwed mothers, home-maker services and return of runaway children.

It must investigate child abuse reports and provide services to prevent further abuse, regulate and license child care facilities, provide a state day care plan, protect the interest of Illinois children placed out of state and out of state children placed in Illinois.

The department operates schools for the blind and deaf and for children with orthopedic and neurological handicaps.

The caseload of the department has increased ten fold in its twelve years of operation because of:

- A. Increase in population of children
- B. Expansion of services such as day care, and protective services.
- C. The turning over of responsibilities for children by other agencies - example: Cook County Public Aid turned over its 6,000 child case load in 1969
- D. Many children formerly served by mental health now come under DCFS
- E. A 1973 amendment to the Juvenile Court Act mandates DCFS to service delinquents under age 13 - some who previously went to the department of corrections
- F. Another amendment place minors in need of supervision under DCFS. These youngsters can no longer be sent to the Department of Corrections.

DCFS is headed by a director (appointed by governor) with four deputy directors, 18 area offices and 105 field offices. Staff numbers about 3,200 - total budget of \$106 million - more than half federal funding - \$58 million state - \$4 local.

In Cook County 75% of services are purchased from private agencies - downstate less than half.

Major services provided by DCFS include:

- A. Daycare - provides daycare for low income, mobile migrant, and public assistance families. Service is purchased for about 10,000 children, most of whom are not under DCFS care - \$9 million is allotted.
- B. In-Home Services - Homemakers can be used in child abuse cases, family illness, etc. Advocates are big brother/sister youth who keep in touch with youngsters who come to the attention of DCFS - Funds are used to buy private services or staff services - budget approx. \$13 million.
- C. Child Abuse - Soon to be called Child Protective Services. The department has been mandated to provide 24-hour response to child abuse reports, the follow-up services are being coordinated into one unit in Cook County (1/2 of all child abuse cases happen). There is now a move to keep children in the home via home-maker services.

DCFS has 11,000 children in foster homes, 4,800 are over the age of twelve. It includes dependent, neglected and MINS - Budget \$19.5 million.

Adolescent training and support - program for 16 and over and in school - provides financial aid with supervision for youth - half is given in job hunting.

Institutional care and group homes - provides 24-hour residential care usually including professional treatment.

The department must also monitor children placed out of state. At the end of August 1976, DCFS had 83 children placed out of state, and about 200 out of state children placed in Illinois.

The department placed more than 1,200 wards in adoptive homes.

The department is required by law to license all day care facilities in the state, whether voluntary child welfare agencies, maternity centers, foster homes, day care centers, group homes (those falling under other agencies also).



Administration: Consider whether:

- 8
- A. Should children's programs be administered separately from adult's?
  - B. How can agencies coordinate their services?
  - C. The relationship of politics and children's services

Illinois is the only state with a separate child welfare agency with a director who reports directly to the governor. The director is appointed by the governor and approved by the Senate. He is required to have no special training or education, an advantage is the response of citizen's pressure of a politically appointed person. A disadvantage is the frequent changes that take place as the political party in charge changes - this brings upheaval for the staff, and changes for the agency.

Many new child care workers report little if any training before they assume their responsibilities.

The Department of Corrections has a Corrections Training Institute on Chicago's south side - without enough money to operate as planned - also personnel are trained at <sup>each</sup> a facility of the Juvenile Division.

The Department of Mental Health has no one in charge of this area. (Training)

Federal funds over and above the Illinois ceiling of \$133 million for social services are available - but are not being utilized to the fullest extent.

For the first time Illinois will have a vehicle for long range planning. The Welfare Services and Rehabilitation Act passed in 1975, requires 8 state agencies to come up with 3-year plans (the Department of Mental Health must have a 5-year plan). The plans, after being developed, must be updated each year and submitted for public comment before going to the legislature in April.

( A major advocacy group is the statutory Illinois Commission on Children.)

Child Welfare Committee of Decatur League of Women Voters 1976-77  
Area of Mental Health Services for children in Decatur

"--- In spite of our tender sentiments, we do not really like children in practice.

This quotation is from a speech before the American Orthopsychiatric Association in February, 1976, by Kenneth Kenniston, Mellon Professor of Human Development at the Massachusetts Institute of Technology.

I suspect that your reaction is the same as mine: I feel a guilty discomfort and a sincere wish that I could say that this isn't true of our practice in Decatur. Experience as a teacher in Decatur schools, newspaper reading, informal conversations, talk shows heard on local radio, and just plain hearsay had prepared me to accept the idea that there was a lot of room for improvement in our child welfare services, but it took my first activity as a member of League of Women Voters to convince me of a specific area where I might dig in to help.

At the Bicentennial Conference on Children in Washington in February 1976, Marian Wright Edelman, Director of the Children's Defense Fund said in part,

We ought to stop being global. It's crucial to advocacy that we be specific. I don't believe that broadside approaches to change are going to change things for children. People get overwhelmed. You start saying, "My Lord, look at the problems of children in this country." And we all say, "Yes," but everybody gets paralyzed into inaction because they don't know where to begin to do something. And what our job is, as advocates, is to break down these big problems that children and families have into bite size pieces, so that people can find a way to get involved at the local level and at other levels."

In a telephone interview (due to very bad weather!) on January 12, 1977, Jim Turner, director of children's services at the Decatur Mental Health Center, was able to make cogent remarks in response to our list of study questions..

Since there was no witness to our conversation, I am quoting Mr. Turner directly only occasionally, when I reminded him that I would do so. Otherwise this information is paraphrased by me from that telephone call.



1. What programs are innovative and/or going well in your community? Describe briefly (who they serve, how staffed and funded, how they developed in your community).

For the most part, we will set aside the retarded children who are served well by Progress Day School. The local MHC does serve some mentally retarded as outpatients, for they may have emotional problems, too. The Center also serves their families in a counselling capacity. The Herman M. Adler Mental Health Center (state funds) gives very fine care on a full time bases for all sorts of childhood mental and emotional problems.

The DMHC helps on a "purchases time" arrangement in the area of child abuse (funds from C.F.S..) The Center offers group counselling and one-to-one visits with parents and adolescents. There is also an advocacy program in which college students are assigned to give intensive help to a family in crisis (under direction from DMHC). Such families need a great deal of one-to-one attention. Parents Anonymous. DMHC also helps with this, although there is currently no paid professional working with this group. Funds are lacking. The DMHC also has some contact with some members of Decatur Boys Club, which Mr. Turner says is "doing good very well." This group gets publicity and training from the national organization (to which the local group sends funds!) Some of the staff are paid by funds from CETA, the rest are volunteer. There is also a Youth Advocate Program funded by CFS.. People from DMHC work with some status offenders like runaways, etc.

2. What mechanisms for coordination and/or planning are operating in your community?

I gather that there is little coordination of services that is systematic. Attempts have been made, but they have always been dropped. There is one-to-one cooperation between individual counselors for various agencies, but nothing official.

3. What resources are need in your community?

I inferred that (a) the educational system needs "something". The unique child encounters problems much sooner than there is any mechanism to deal with him. Those in age group 14-16 need some early help toward vocational education before they drop out at 16. The DMHC would help if asked. (b) Many of the crisis families being helped by MHC have medical and dental problems. There is no dental help for people in Decatur who are on public aid; they must go to Springfield. The medical situation is almost as bad. (c) The juvenile detention facility is, in Mr. Turner's words, "inhumane, worse than the jail." A status offender (such as a runaway) is put into a situation much worse than what an accused murderer would face. The counselor for DMHC finds 4 in a cell with no private corner for the counselor to work with the juvenile. He says "Please, go and see for yourself."

4. Do you have any specific suggestions for ways the League can be an advocate in your community?



4. Do you have any specific suggestions for ways the League can be an advocate in your community?

There may be bigger problems than that of the juvenile detention center, problems that involve more people, but this is severe yet manageable. The League's advocacy on behalf of a new juvenile detention center could do the job. Other possibilities, -- advocate a good crisis intervention service and expanded day care service.

Other people to whom I talked (who didn't want to be identified except as members of the Bar Association) told me that if we did become involved in advocacy for an improved juvenile facility we would learn what the term "run-around" really means. Judging from what the Child Welfare Committee Guide for LWV quotes of Mrs. Edelman's speech (mentioned before) the League is no stranger to the run-around.. She said,

Change is dull, hard, day to day work. It means reading regulations that nobody else wants to read. It means pestering bureaucrats who do not want to change. It means going back again and again to a public that doesn't want to hear. If reform on behalf of the nation's children is going to occur, it's going to take hard, sustained work by professionals and non-professionals in a lot of communities throughout America for a long time...."

Sounds like worthwhile exercise, this running-around in good company!

DEPARTMENT OF CORRECTIONS - JUVENILE DIVISION

The Unified Code of Corrections specifies a Juvenile Division and an adult division with an assistant director heading each, however, since 1973 there has been no assistant director for either. The juvenile division is headed by an administrator who is responsible for field services and institution services. The staffs of the once separate divisions are now combined into one in the Division of Staff Services.

STAFF SERVICES INCLUDE:

chaplancy  
volunteer services  
Apprehension Unit (runaways & escapees)  
medical services  
program services  
Youth Advocate  
Correctional Training Academy for staff training  
Vocational & Educational Services - must provide opportunity for high school diploma. Juvenile Division is not presently included in a DOC school district that is set up for, at present, adult education.

DOC's Bureau of Detention Standards and Services monitors and enforces minimum standards for conditions of detention facilities - You are all probably aware of the problem with the Macon County Detention Facility. Hopefully, there will finally be some action on it within the next few months.

The Department has recently regionalized for delivery of services and established 4 regions in the state. We are in REGION III which includes judicial circuits 5 through 11 with the central office of this region being in Peoria. One residential facility is in this region, the VAST (Vocational,



Academic, Social Training) Program housed in a wing of Meyer Mental Health Center here. (Average daily enrollment in VAST is 11)

IF ANYONE ASKS - Region I = Cook County

Region II = Northern Judicial Circuits 12-19

Region IV = Southern - Judicial Circuits 1-4 & 20  
(1 residential center)

The objectives of Regionalization are:

- 1) to move in the direction of community - based corrections and provisions of state resources to local level by regional auspices.
- 2) to provide direct services to youth committed to the division.
- 3) to divert, whenever possible, institutional placements.
- 4) to assist in the development of local resources.

WHAT KIND OF DOC JUVENILE POPULATION ARE WE TALKING ABOUT?

There has been a decline, unlike adult prison populations, in the last few years. (REASON: more local services, available, judges willing to try other possibilities, and change in the law giving responsibility to DCFS of minors under 13 and Minors In Need of Supervision)

POPULATION IS APPROXIMATELY 2,000 WITH 800 INSTITUTIONALIZED.

What happens is that on commitment to DOC a youth is assessed to determine whether he will be served in the region or sent to one of the 9 institutions in the state. In the regions, individualized programs will be devised that will utilize available services in the region. Example of available services include, regional residential facility, a group or foster home, advocacy programs, purchase of educational,



Academic, Social Training) Program housed in a wing of Meyer Mental Health Center here. (Average daily enrollment in VAST is 11)

IF ANYONE ASKS - Region I = Cook County

Region II = Northern Judicial Circuits 12-19

Region IV = Southern - Judicial Circuits 1-4 & 20  
(1 residential center)

The objectives of Regionalization are:

- 1) to move in the direction of community - based corrections and provisions of state resources to local level by regional auspices.
- 2) to provide direct services to youth committed to the division.
- 3) to divert, whenever possible, institutional placements.
- 4) to assist in the development of local resources.

WHAT KIND OF DOC JUVENILE POPULATION ARE WE TALKING ABOUT?

There has been a decline, unlike adult prison populations, in the last few years. (REASON: more local services, available, judges willing to try other possibilities, and change in the law giving responsibility to DCFS of minors under 13 and Minors In Need of Supervision)

POPULATION IS APPROXIMATELY 2,000 WITH 800 INSTITUTIONALIZED.

What happens is that on commitment to DOC a youth is assessed to determine whether he will be served in the region or sent to one of the 9 institutions in the state. In the regions, individualized programs will be devised that will utilize available services in the region. Example of available services include, regional residential facility, a group or foster home, advocacy programs, purchase of educational,



vocational, legal, medical or mental health program.

*Another commission in the state - mainly for funding is*

ILLINOIS LAW ENFORCEMENT COMMISSION

Distributes funds to various groups to develop programs in local communities to improve the Criminal Justice System. It is the planning agency that distributes the federal LEAA (Law Enforcement Assistance Administration) money. It also administers funds to implement the Juvenile Justice and Delinquency Prevention Act (1974). The Act provides funds for new programs and techniques particularly diversion and prevention programs for juveniles. Illinois share this year will be \$2.5 million.

*A new commission that League is watching closely is:*

COMMISSION ON DELINQUENCY PREVENTION

Created by General Assembly in 1975. Has a \$1.8 million appropriation for 1977 and plans to grant \$450,000 to community groups to organize and maintain diversion and prevention programs for youth throughout the state. It also plans to expand the Juvenile Officers Identification File. League has been concerned with this file and will be watching legislation concerning it. Concern is for confidentiality being breached concerning juvenile records and passing information from city to city. Kind of like a school record following a child through the school system and influencing his educational expectations.



HISTORICAL BACKGROUND OF SERVICES TO YOUTH IN ILLINOIS

ORIGINAL IDEA TO CARE FOR CHILDREN OUT OF HOME OR FAMILY ENVIRONMENT WITHOUT REGARD TO WHAT NECESSITATED REMOVAL. COULD HAVE BEEN DELINQUENT, UNRULY, AN ORPHAN OR OTHERWISE DEPENDENT.

- 1869 ILLINOIS SOLDIERS & SAILORS' ORPHANS HOME
- 1871 CHICAGO REFORM SCHOOL FOR DELINQUENT BOYS
- 1880's ILLINOIS STATE REFORMATORY
- 1894 GENEVA (for "wayward" girls)
- 1899 ILLINOIS PASSED FIRST JUVENILE COURT ACT IN THE NATION
- 1901 ST. CHARLES ( for delinquent boys)
- 1917 STATE DIVISION OF CHILD WELFARE - TO FIND PLACEMENTS FOR THOSE COMING OUT OF HOMES
- 1917 INSTITUTE FOR JUVENILE RESEARCH - TRAINING & SERVICES THROUGHOUT THE STATE INCLUDING SERVICES FOR HANDICAPPED.
- 1954 ILLINOIS YOUTH COMMISSION - was to consolidate all existing state services for delinquency prevention & treatment.

IT BECAME EVIDENT IN FIRST HALF OF 20TH CENTURY THAT STATE NEGLECT WAS SOMETIMES SUBSTITUTING FOR PARENTAL NEGLECT.

- 1960's SUPREME COURT MADE DECISIONS TO GIVE RIGHTS OF DUE PROCESS TO CHILDREN.
- 1965 ILLINOIS REVISION OF JUVENILE COURT ACT
- 1960's PRESENT DIVISIONS OF SERVICES CAME INTO BEING:
- 1961 DEPARTMENT OF MENTAL HEALTH
- 1964 DEPARTMENT OF CHILDREN AND FAMILY SERVICES
- 1970 DEPARTMENT OF CORRECTIONS

PRESENT SERVICE NUMBERS: DCFS = 30,000  
JUVENILES DOC - 2,000  
DMH&DD - 455 (inpatient)



CONSENSUS  
PROTECTIVE SERVICES

- 1.. When injuries to a child appear to have been inflicted by parents or others responsible for his care, what should the individual or institution do? The injuries should be reported.
2. Should there be a law requiring that a report be made? Yes. If yes, to whom should such a requirement apply? To hospitals, doctors and schools (as an institution, not as individual represented by principal).
3. Should the law provide immunity from charges of liability to persons and institutions making such reports? Yes.
4. What means, in addition to a mandatory law, would you suggest as a step toward resolving the "battered child" problem? Making the services of social agencies more available.

THE CHILD AND THE COURT

1. Do you support a court system for handling juveniles which has different goals and techniques than those of the criminal court? If so, what goals should be included? Majority of group supported this above mentioned type of court system, believing its goals to be rehabilitation and protection of the child and the public. A minority group believed that the principle goal of the criminal court also was rehabilitation, but that the techniques used in reaching the goals of the two courts were different.
2. Should safeguards for the legal rights of the child and his parents in court proceedings under the Family Court Act be stated in the law? If so, which of the following should be included?
  - a. notice to parents should be sent. No consensus on specific content of petition.
  - b. child should have right to be represented by attorney.
  - c. court should provide attorney when family is unable to pay for one.
  - d. no consensus on separate hearings; some thought yes, some no, some didn't feel they really understood the matter.
  - e. child should have right to appeal.
  - f. law should state that stenographic record proceeding should be available as basis for possible appeal.
3. Do you think juvenile probation services in Illinois need to be improved? Yes. If so, would you support:
  - a. Provision in statute as to qualifications for education and training of probation personnel? Yes, and with commensurate salary increases.
  - b. A state program to assist the staff training and development of probation services for juveniles? Yes.
4. Which of these sources of financing probation services for juveniles would you approve? Please indicate order of your preference. Group varied between thinking D (counties with financial aid for the state predicated on state standards for personnel) their first choice and a suggestion that instead of individual counties, the circuit district should be the basis for operation. There was no consensus of the whole group on order of preference of B and C. A, financing on a county basis, came at the bottom of the list.



RESOURCE COMMITTEE NEWS

**HUMAN RESOURCES**--This committee will meet at 9:30 a.m., Thursday, January 14, in the home of Mrs. Frank Dilley, chairman, 1417 W. Macon St. There will be baby-sitting available for 50 cents per mother at the Decatur Art Center (upstairs).

**LIBRARY**--The library committee will meet every Thursday in January at 9:30 a.m. in the home of the chairman, Lucille Crow, 76 Colorado Dr. In addition, separate interviews have been scheduled with the Library Board and the city manager, John Dever.

**URBAN RENEWAL**--The next meeting will be held at 7:30 p.m., January 19, in the home of Mrs. John J. Molloy, 2671 W. Macon.

**CITY OF DECATUR TOWNSHIP**--This group will be meeting throughout January to prepare for the January unit presentation and then at regular intervals after that, so new members are always welcome. Call Marge Unger, 877-6379, or Lou Cole, 428-8703, if you are interested.

WITH APOLOGIES. . .

In the list in the November bulletin of League members serving on various government boards or commissions, one member's name was inadvertently missed. Mrs. Verne Roby is serving as secretary of the Macon County Board of Health.

NEW LEAGUES?

There is considerable interest in Macomb and Westchester for organizing provisional LWV. If you know any women in these areas who might be interested, please contact Elise Hurst.

NATIONAL EMERGENCY ITEM  
ON APPORTIONMENT PROPOSED

Apportionment is receiving considerable attention and concern throughout the nation. Under present League procedures we are unable to take action nationally on this subject because the League, as a whole, has no position. However, the LWV of Tennessee is urging that an emergency item be adopted at the National Council Meeting in May: "A study of apportionment in state legislatures and the U.S. Congress including the protection of each citizen's constitutional right to equitable representation."

Two delegates from the state board will be representing all Illinois Leagues at this meeting and the Decatur LWV needs to decide if we want this proposal added to the national agenda at this time. Therefore, we will be discussing this at the January units.

CONSENSUS REPORT ON CHILD WELFARE, PART 2

The report on the next page is the consensus reached by the Decatur League at the November unit meetings and approved by the local board. This report with the one on Aid to Families with Dependent Children has been sent to the state League for evaluation with similar reports from all other Leagues in Illinois to determine state consensus.

Members of the resource committee participating in the child welfare study last fall included: Myra Becker and Ann Limerick, co-chairmen, Irene Homan, Sara Kessler, Ann Pettee, Ann Martin, Ruth Ritter, Marilyn Tenney and Pat Turner.



RESOURCE COMMITTEE NEWS

**HUMAN RESOURCES**--This committee will meet at 9:30 a.m., Thursday, January 14, in the home of Mrs. Frank Dilley, chairman, 1417 W. Macon St. There will be baby-sitting available for 50 cents per mother at the Decatur Art Center (upstairs).

**LIBRARY**--The library committee will meet every Thursday in January at 9:30 a.m. in the home of the chairman, Lucille Crow, 76 Colorado Dr. In addition, separate interviews have been scheduled with the Library Board and the city manager, John Dever.

**URBAN RENEWAL**--The next meeting will be held at 7:30 p.m., January 19, in the home of Mrs. John J. Molloy, 2671 W. Macon.

**CITY OF DECATUR TOWNSHIP**--This group will be meeting throughout January to prepare for the January unit presentation and then at regular intervals after that, so new members are always welcome. Call Marge Unger, 877-6379, or Lou Cole, 428-8703, if you are interested.

WITH APOLOGIES. . .

In the list in the November bulletin of League members serving on various government boards or commissions, one member's name was inadvertently missed. Mrs. Verne Roby is serving as secretary of the Macon County Board of Health.

NEW LEAGUES?

There is considerable interest in Macomb and Westchester for organizing provisional LWV. If you know any women in these areas who might be interested, please contact Elise Hurst.

NATIONAL EMERGENCY ITEM  
ON APPORTIONMENT PROPOSED

Apportionment is receiving considerable attention and concern throughout the nation. Under present League procedures we are unable to take action nationally on this subject because the League, as a whole, has no position. However, the LWV of Tennessee is urging that an emergency item be adopted at the National Council Meeting in May: "A study of apportionment in state legislatures and the U.S. Congress including the protection of each citizen's constitutional right to equitable representation."

Two delegates from the state board will be representing all Illinois Leagues at this meeting and the Decatur LWV needs to decide if we want this proposal added to the national agenda at this time. Therefore, we will be discussing this at the January units.

CONSENSUS REPORT ON CHILD WELFARE, PART 2

The report on the next page is the consensus reached by the Decatur League at the November unit meetings and approved by the local board. This report with the one on Aid to Families with Dependent Children has been sent to the state League for evaluation with similar reports from all other Leagues in Illinois to determine state consensus.

Members of the resource committee participating in the child welfare study last fall included: Myra Becker and Ann Limerick, co-chairmen, Irene Homan, Sara Kessler, Ann Pettee, Ann Martin, Ruth Ritter, Marilyn Tenney and Pat Turner.



CONSENSUS  
PROTECTIVE SERVICES

- 1.. When injuries to a child appear to have been inflicted by parents or others responsible for his care, what should the individual or institution do? The injuries should be reported.
2. Should there be a law requiring that a report be made? Yes. If yes, to whom should such a requirement apply? To hospitals, doctors and schools (as an institution, not as individual represented by principal).
3. Should the law provide immunity from charges of liability to persons and institutions making such reports? Yes.
4. What means, in addition to a mandatory law, would you suggest as a step toward resolving the "battered child" problem? Making the services of social agencies more available.

THE CHILD AND THE COURT

1. Do you support a court system for handling juveniles which has different goals and techniques than those of the criminal court? If so, what goals should be included? Majority of group supported this above mentioned type of court system, believing its goals to be rehabilitation and protection of the child and the public. A minority group believed that the principle goal of the criminal court also was rehabilitation, but that the techniques used in reaching the goals of the two courts were different.
2. Should safeguards for the legal rights of the child and his parents in court proceedings under the Family Court Act be stated in the law? If so, which of the following should be included?
  - a. notice to parents should be sent. No consensus on specific content of petition.
  - b. child should have right to be represented by attorney.
  - c. court should provide attorney when family is unable to pay for one.
  - d. no consensus on separate hearings; some thought yes, some no, some didn't feel they really understood the matter.
  - e. child should have right to appeal.
  - f. law should state that stenographic record proceeding should be available as basis for possible appeal.
3. Do you think juvenile probation services in Illinois need to be improved? Yes. If so, would you support:
  - a. Provision in statute as to qualifications for education and training of probation personnel? Yes, and with commensurate salary increases.
  - b. A state program to assist the staff training and development of probation services for juveniles? Yes.
4. Which of these sources of financing probation services for juveniles would you approve? Please indicate order of your preference.  
Group varied between thinking D (counties with financial aid for the state predicated on state standards for personnel) their first choice and a suggestion that instead of individual counties, the circuit district should be the basis for operation. There was no consensus of the whole group on order of preference of B and C. A, financing on a county basis, came at the bottom of the list.