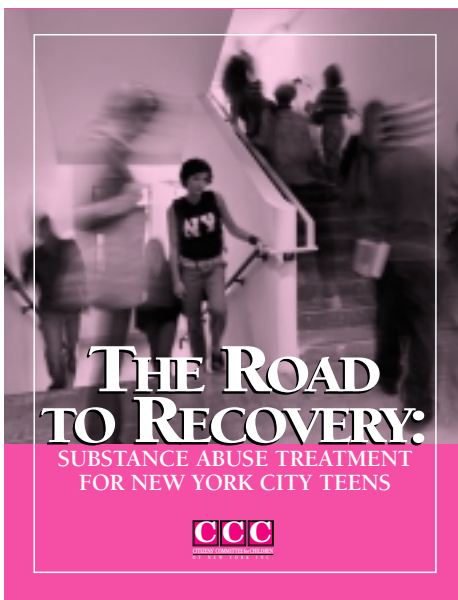




**CITIZENS' COMMITTEE for CHILDREN**  
O F N E W Y O R K I N C

## Three New Reports Focus on Improving Service Delivery to New York City Children and Families

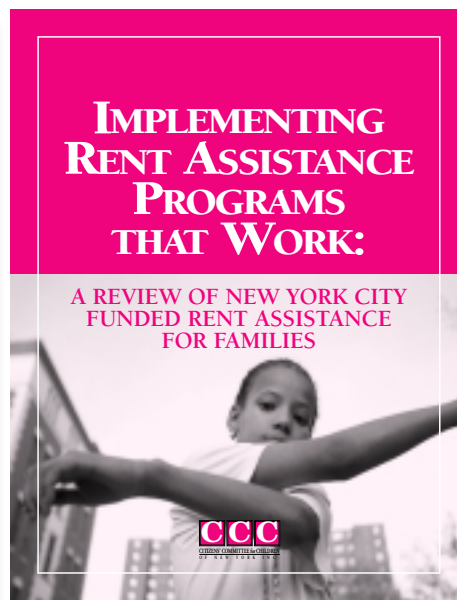


### **THE ROAD TO RECOVERY: Substance Abuse Treatment for New York City Teens**

Citizens' Committee for Children's advocacy in the area of children's mental health, juvenile justice, and child welfare focused our attention on the prevalence of substance use and abuse among children. Our preliminary investigation into the issue revealed a real lack of information about the substance abuse treatment services available to New York City teenagers and their families.

In the fall of 2001, CCC convened the

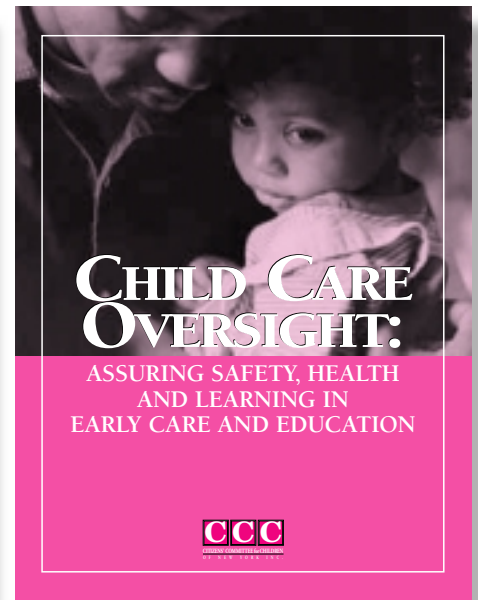
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### **IMPLEMENTING RENT ASSISTANCE PROGRAMS THAT WORK: A Review of New York City Funded Rent Assistance for Families**

Housing affordability is a primary concern for all families living in New York City. Market rents have increased far beyond what low and moderate income New Yorkers can afford and the consequences have been an unprecedented number of families entering homeless shelters and living in overcrowded, unsafe and expensive housing arrangements. The solution to New York City's housing crisis is two-fold: a long term gov-

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### **CHILD CARE OVERSIGHT: Assuring Safety, Health and Learning in Early Care and Education**

Turning a child over to another adult, often outside the context of family, friends and even community is an anxiety provoking proposition. Yet in order to provide for their families, thousands of parents have established this as a part of their daily routine.

For many children, child care is the setting in which they first learn to interact with other children on a regular basis and to establish bonds with non-familial adults. Research has

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## A Message from Board Leadership



Nancy Locker  
Chairman



Heidi Stamas  
President

Summer is a time for reflection. It gives us the opportunity to look back at the past year, to recognize CCC's accomplishments for New York City's children, to acknowledge our accomplishments and work that remains to be done. This newsletter clearly demonstrates all of CCC's efforts and forecasts some of the projects and directions for the coming year.

CCC's greatest strength is our unique partnership of smart, focused, professional staff members and committed hardworking volunteers. Especially in these difficult times in our city, state and country, all of us must work together to make New York City a better place to be a child. Please know how much we need you. Come to our Celebration breakfast at the Waldorf on October 16th and to our Preview Benefit of Works on Paper on February 25th, attend our fall Policy Briefings, join our Task Forces, advocate with us at City Hall and in Albany, participate in our press conferences, and lend your voices to our Kids First New York campaign.

We feel proud of the leadership role that CCC is playing in our city and of all that CCC has achieved. As we enter our 59th year, CCC remains dedicated to its mission of ensuring that every child is healthy, housed, educated and safe. Our city's children, especially those most vulnerable, require our strong voice and steadfast support. We look forward to working with you this coming year. Thank you for all that you have done and will continue to do for CCC and for New York City's children.

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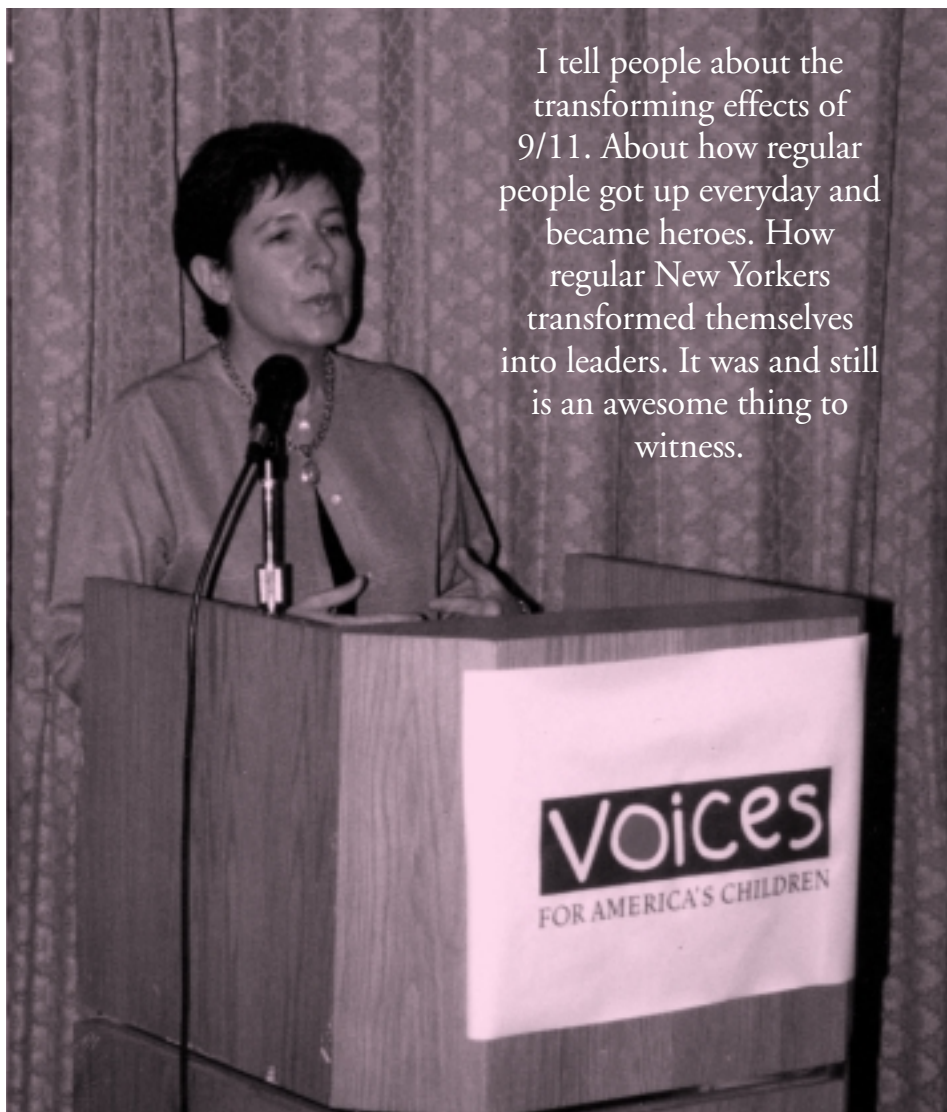
## Coming Soon

Check your mail for the schedule of CCC's fall  
2003 Policy Briefings

CCC's fall Community Leadership Course begins on  
Wednesday, September 17, 2003.

The fall Youth Community Leadership Course begins on  
October 20, 2003.

## CCC Executive Director Recognized for Achievements Benefiting Children



Gail B. Nayowith, CCC's Executive Director, accepts an award from Voices for America's Children.

On June 24, 2003, Voices for America's Children (Voices), a national organization committed to working at the state and local level to improve the well-being of children, awarded Gail B. Nayowith, CCC's Executive Director, the Florette Angel Memorial Child Advocacy Award. The Florette Angel Memorial Child Advocacy Award is given to a Voices member executive who has provided exemplary leadership in child advocacy, representing the interests of children and their families. An independent jury chose the winners from nominations made by Voices member organizations. Jury members included Harold Leibovitz from The Urban

Institute, Jan Richter from Connect for Kids, and John Schlitt from the National Association on School-Based Health Care.

In her acceptance speech, Ms. Nayowith spoke about the importance of leadership:

"Leadership is a funny thing. Conventional wisdom holds that leaders are born and not made. Maybe this truism persists because leadership is expressed and is evident at certain times – like during a crisis like 9/11 or when forging a coalition that secures the largest investment in children's mental health funding in state history or restoring \$25 million dollars in city funding for child care services when everyone tells you there is no money – or in the

thousands of ways that leadership emerges every day. Leaders benefit from being in the right place at the right time."

"But I believe that leaders are made, not born. Leadership is all about how you handle life experience, how you optimize opportunities for change, how you see the present and the future, how hard you work, how you treat people, and how much you care. Leadership is about effectiveness and feeling able to influence anything or anyone that comes your way. Leadership emerges and is tested through life experience."

"Leaders work in a particular time and in a particular place, and CCC, like the organizations you all represent, is that kind of place. CCC is an important organization in the fabric of civic life in New York City. When CCC was founded in 1944, people thought they had seen it all – a horrible war that tore the world in half, families under extreme stress and economic insecurity. I didn't live through World War II and what I know about life then, I learned through books and war stories. But I did live through 9/11 and I can tell you that nothing in life or fiction ever prepares you for the kind of destruction we witnessed that day and nothing prepares you for the economic and psychological fall out of a disaster like this on children and families. Virtually all New York City children witnessed the disaster first hand or later on television and we live with the consequences of this exposure every day. One child's comment sums it up: "There is a hole where our world was." Hearing that leaves you with no choice – step up or move aside. That is where leadership comes in. I tell people about the transforming effects of 9/11. About how regular people got up everyday and became heroes. How regular New Yorkers transformed themselves into leaders. It was and still is an awesome thing to witness."

"But it is life after 9/11, when our city has no money, when the majority of our elected leaders are new, when personal economic insecurity and worry about the future is the regular topic of dinner conversation; now this is where leadership really matters. And this is where getting up every day, putting one foot in front of the other, putting on a smile, rolling up your sleeves and figuring things out, now this is what leadership is all about."

# New York City Children, a Priority in the FY '04 Budget

On June 25th, the Mayor and the City Council agreed on a spending plan for Fiscal Year 2004 that totaled \$43.6 billion and closed the city's \$6.4 billion deficit -the largest in the city's history. While New Yorkers saw their taxes increase and spending by city agencies decrease, the negotiated budget restored \$180 million for essential services, ensuring that children would be protected and the city's vitality maintained.

As the new fiscal year begins, streamlined agencies and greater efficiencies are taking hold. The sound budget deal struck by our city leaders asks each New Yorker to dig deeper, for the sake of serving vulnerable children in foster care, and at risk of abuse and neglect; children needing supervision while parents work; uninsured children; and teens with substance abuse problems. New Yorkers' coming together to help one another in the wake of September 11th continues, as we tighten our belts

and support the city's children.

The city's FY'04 budget bears the imprint of CCC's advocacy efforts. Volunteers and staff worked tirelessly since last fall, to restore core services to children proposed for cuts this year. During May and June, a press conference on the steps of City Hall attended by over 300 of our colleagues and concerned New Yorkers, 25 meetings held with the Mayor's staff and City Councilmembers and staff, testimony delivered at 5 public hearings on the budget and a vigil on the steps of City Hall that encompassed 5 weeks, infused the budget-making process with CCC's priorities, data and analysis of the devastating impact on children of the proposed cuts. But perhaps most importantly, CCC's budget advocacy proposed revenue maximization initiatives that identified new state and federal revenue that contributed to the city's ability to close its budget gap and maintain important services to children.

## FY'04 City Budget Restorations to Vital Children's Services

### ACS: Child Care

- \$ 1.9 million eliminates a surcharge of up to 33% for parents with two or more children in subsidized child care however, the budget imposes fee increases for very low-income parents and increases the maximum fee for families above 200% of the poverty level from 10% to 12.5% of their income.
- \$ 9 million restores funding for 2,500 child care slots.

### Child Welfare

- \$7.9 million restores funding for general preventive service contracts, Beacon preventive service programs and homemaking services.
- \$15 million restores foster care rates and foster and adoptive parent stipends for six months and substance abuse and independent living programs for three months of FY'04. Moving forward, full funding for these programs will be based on the agency's ability to maximize federal revenue through improved claiming and eligibility determination.

### HHC

- \$2.9 million restores funding for 12 Child Health Clinics.
- \$1.5 million restores funding for two adolescent substance abuse prevention programs, one at Elmhurst and the other at Lincoln Hospital.

### DHMH

- \$ 2.8 million restores funding for the Infant Mortality Initiative.
- \$268,000 restores subsidies for five School-Based Health Clinics.
- \$200,000 restores funding for the Asthma Initiative.
- \$500,000 restores funding for the Lead Poison Prevention Program.

### DYCD

- \$ 8 million restores funding to the 80 Beacon schools.
- \$ 5.3 million restores baseline youth programs: City Council Initiatives (\$1.16 million) which include Virtual Ys, Sports and

Arts, Institute for Student Achievement; City Council Discretionary funding (\$3.2 million); and Street Outreach and Neighborhood Youth Alliance (\$968,000).

- \$ 2.5 million restores funding for the After-Three Initiative.
- \$10 million restores funding for the Summer Youth Employment Program to serve 10,000 young people this summer.

### DJJ

- \$500,000 partially restores Community Based Intervention Services for at-risk youth.

### DHS

- \$ 2.5 million restores funding for anti-eviction legal services and the program is transferred from HPD → DHS.

### Dept. of Education

- \$16 million restores funding for the Teacher's Choice purchasing program that reimburses each public school teacher/principal up to \$200 for classroom supplies/equipment.

### Government Consolidation Plans

- \$44 million for School-Age Child Care transferred from ACS → DYCD (*\$15 million PEG with a commitment not to reduce services*)
- Child Care Eligibility moves from ACS → HRA
- Youth Employment transferred from DOE → DYCD (*\$10 million PEG with a commitment not to reduce services*)
- PINS transferred from Probation → ACS
- Anti-Eviction and Homeless Prevention Programs (not including diversion teams) transferred from HRA → DHS
- Anti-Eviction transferred from OCJC → DHS
- Anti-Eviction (*\$2.5 million restored*) transferred from HPD → DHS

For additional information on the FY'04 City budget and its impact on children, visit [www.kfny.org](http://www.kfny.org).

# CCC Honors Champions for New York City Children

On June 3, 2003, CCC held its fifty-ninth annual meeting at the New York School of Interior Design. The meeting culminated the organization's work for the 2002-2003 program year and CCC recognized notable New Yorkers who are striving to make New York City a better place for children and families.

Commissioner Linda Gibbs of the New York City Department of Homeless Services (DHS) was presented with the Founders' Award for her dedication to reform within the homeless services system and taking on the mammoth responsibility of making DHS family and child friendly. Commissioner Gibbs has devoted much of her life to public service, working to improve the lives of New York City's children and families, especially those most in need. She has led the Department of Homeless Services, since January 2002, through a strategic planning process working with advocates and service providers, including CCC. "The Second Decade of Reform: A Strategic Plan for New York City's Homeless Families," was released in June 2002 and articulates system goals around homelessness prevention, shelter service provision, quality improvement initiatives, and permanent housing assistance and includes a timeline for implementation. CCC recognized Linda Gibbs' commitment and determination, her inclination to be creative and consider every option, her dedication to reform within the homeless services system, her management skills, and her willingness to see across agency boundaries and systems.

Dr. Katherine Lobach, CCC Advocacy Council member and Clinical Professor of Pediatrics at the Albert Einstein College of Medicine, Montefiore Medical Center was also presented with the Founders' Award. Dr. Lobach has worked tirelessly for over 40 years to ensure that poor and underserved children have access to quality health care and has been championing the cause of keeping the city's child health clinics open. She has been a leader in the health care field as a pediatrician, the developer and manager of innovative and well-run programs of comprehensive primary care for underserved children and their families and as an outspoken child advocate. She has been an active member of CCC's Advocacy Council since 1998, chairing and serving on multiple CCC Task Forces, attending city and state advocacy meetings, and this year, speaking in

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CCC recognized Sister Mary Paul Janchill's thirty-three years of service on the Board of Directors by making her an Honorary Director.



Linda Gibbs, Commissioner of the NYC Department of Homeless Services (DHS) was presented with the Founders' Award

Dr. Katherine Lobach (center), CCC Advocacy Council member and Clinical Professor of Pediatrics at the Albert Einstein College of Medicine, Montefiore Medical Center was presented with the Founders' Award. Nancy Locker is to her left and Heidi Stamas is to her right.



## CCC Honors Champions

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local communities as part of the release of the Millennium Edition of *Keeping Track of New York City's Children*. In 1965, Dr. Lobach was instrumental in creating the Comprehensive Family Care Center at the Albert Einstein College of Medicine and became its Director. In 1988, she became the Assistant Commissioner for Child and Adolescent Health of the New York City Department of Health. She is credited with transforming the city's child health clinics, expanding outreach, and providing full service primary care. During her tenure, she created a Medical Home for Asthma, helping redesign the Infant and Child Health Assessment Program to link at-risk infants to primary health care and initiated development of the Health Department's City Immunization Registry. She is currently a Clinical Professor of Pediatrics at Albert Einstein College of Medicine, Montefiore Medical Center where she does teaching, mentoring, writing and advising to students and house officers interested in public health.

We recognized Sister Mary Paul Janchill's thirty-three years of service on CCC's Board of Directors by making her an Honorary Director. Sister Mary Paul is a visionary and missionary regarding the needs of children and families and

challenges us all to be the best that we can be for New York City's youth. Her character, her life and her work, embody CCC's mission – to ensure that every child is healthy, housed, edu-

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**The stirring speeches and accomplishments of this year's honorees energized CCC to continue to be ever-vigilant in protecting children and educating New Yorkers. Our thanks to them for their enormous contributions to the city's children and for their commitment to continue their important work to improve child well being.**

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cated and safe. Sister Mary Paul is a forceful and outspoken advocate in all of these areas. She is Co-Founder of the Center for Family Life in Sunset Park, which is a renowned model of a community-based program with intensive, family-centered preventive services encompassing a range of clinical and social supports for

children, youth and parents. It offers counseling services, child care, extended day services, teen evening centers, summer day camp, a youth leadership program, an emergency food program, Summer Youth Employment, a neighborhood based foster family program, and other support services for families.

This fall, Sister Mary Paul steps down from her position as Co-Director, but not away from her work at the Center. Sister Mary Paul feels responsible for practice standards and accountability, for staff training and development, all efforts that CCC promotes. She has and continues to work with special needs children, crisis-intervention programs, programs for truants, and delinquency prevention programs.

Sister Mary Paul has been an active member of CCC's board since 1970 and was the first recipient of CCC's Annual Founders Award, for her commitment to improving the lives of New York City children, especially those burdened by poverty. She helps keep CCC's voice strong and focused, reminding us constantly of the critical link between advocacy and direct service.

The stirring speeches and accomplishments of this year's honorees energized CCC to continue to be ever-vigilant in protecting children and educating New Yorkers. Our thanks to them for their enormous contributions to the city's children and for their commitment to continue their important work to improve child well being.

# Celebration Breakfast 2003

**October 16, 2003, 7:30 to 9:15 am**

**The Waldorf Astoria, Grand Ballroom**

**Co-Chairs: Amy Bernstein, Priscilla Bijur, Jonathan A. Knee**

**Joel Klein**

NYC Schools Chancellor  
*Keynote Speaker*

**Sister Mary Paul Janchill**

Center for Family Life at Sunset  
Park, CCC Board Member  
*Eleanor Roosevelt Award*

**Henry Kravis**

Kohlberg Kravis Roberts & Co.  
*Samuel P. Peabody Award for Pro-  
Social Corporate Action*

**Maria Elena Girone**

Puerto Rican Family Institute  
*Samuel P. Peabody Award for  
Community Activism*

# Substance Abuse

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Task Force on Adolescent Substance Abuse Treatment Services, chaired by Board members Nancy Hoving and Chris Stern Hyman, Esq. As CCC's first foray into the field of substance abuse, the Task Force sought to identify the range and availability of substance abuse treatment programs serving most teenagers in New York City, to learn the pathways for teenagers to treatment services, to understand the components of the treatment programs, and the linkages between the substance abuse programs and other programs serving children and youth.

Our report describes what CCC learned through interviews with substance abuse treatment programs. We also conducted focus groups with teenagers served in substance abuse treatment programs. Most of these programs rely on insurance reimbursement, state financial assistance and, in a few instances on funding from New York City, to operate.

Our study shows that few substance abuse treatment options exist for New York City teens and that the information about these options is limited. These are serious concerns. When left undetected and untreated, substance abuse poses serious risks for teenagers. From a health and safety perspective, research has shown that substance abuse contributes to injury and in some cases death. It may also lead to involvement in other systems, most significantly the juvenile and criminal justice systems. And, as the programs and teenagers we interviewed reported, a strong correlation exists between substance abuse and declining interest and participation in high school.

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**One of the major benefits of treatment identified in our teen focus groups was improved family relationships.**

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According to our data the profile for a teenager participating in substance abuse treatment in New York City is likely to be: a 16 years old, who uses marijuana or alcohol, does not attend school regularly, and may have a history of juvenile or criminal justice involvement as well as involvement in the child welfare system.

Almost half of the programs surveyed reported that they do not run at full capacity. Sixty percent or more of the substance abuse

treatment programs reported that probation officers, schools and child welfare agencies represented the top three targets of their outreach efforts and 57.1% targeted mental health programs. However, little correlation existed between referral sources and outreach targets. A significant finding of our study was that only 0-10% of referrals emanated from the child welfare system. This is of particular concern since research shows that children who grow up in families with a history of substance abuse are more likely to use illicit drugs and that between 40-80% of child abuse and neglect cases involve a parent/caregiver with an alcohol or drug related problem.

One of the major benefits of treatment identified in our teen focus groups was improved family relationships. The youth further noted that family engagement was often

difficult to arrange given parents/caregivers busy schedules, embarrassment and in some cases lack of understanding about teenage substance abuse. Significantly, each focus group expressed the need for increased family engagement, including educating parents about the causes, warning signs, symptoms and treatment for teenage substance abuse.

For prevention strategies, teens called for the creation of peer education programs, and for the challenges posed when treatment ended, they recommended aftercare support from a counselor. Although insurance does not provide reimbursement for aftercare services, one third or more of the programs interviewed provided one of the following: peer support groups, family support groups, and/or referrals to outpatient

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## ROAD TO RECOVERY: Substance Abuse Treatment for New York City Teens

CCC's specific recommendations include:

### ***Expand Outreach and Education about Adolescent Substance Abuse***

- *New York State Office of Alcoholism and Substance Abuse Services (OASAS) and the New York City Department of Health and Mental Hygiene (DOHMH) should fund peer education programs to further the recovery of adolescents in treatment and help to prevent other teenagers from using or continuing to use;*
- *DOHMH should improve the linkages between adolescent substance abuse treatment programs and health and mental health clinics and work with the New York City Department of Education and the New York City Administration of Children's Services to promote cross-agency coordination and planning related to adolescent substance abuse issues; and*
- *DOHMH should develop on-line and written resources to educate parents/caregivers about the signs and potential consequences of adolescent substance use or abuse and how to access treatment services.*

### ***Ease Transition to Life After Treatment***

- *DOHMH and the New York City Department of Education should develop a seamless transition process from treatment to schools; and*
- *OASAS should work with other government agencies to develop or identify funding for completed substance abuse treatment.*

### ***Improve Insurance Coverage for Adolescent Treatment Services***

- *OASAS should adopt an outpatient Medicaid reimbursement rate that covers the cost of providing quality treatment and support services to adolescents;*
- *New York State should adopt a Medicaid reimbursement rate for long-term residential chemical dependence programs serving adolescents;*
- *The Governor, the New York State Legislature, OASAS and the New York State Department of Health (DOH) should monitor the implementation of the recently adopted reimbursement rates for outpatient chemical dependence programs to determine their adequacy; and*
- *New York State, DOH and OASAS should investigate the ability of substance abuse treatment programs to become members of health plan provider panels.*

For more information call Tara Sher, Esq., Senior Policy Associate for Health and Mental Health at 212.673.1800x16.

## Substance Abuse

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treatment or vocational services. Follow-up with youth tended to be informal with 13 of 21 programs having staff with this responsibility.

Substance abuse is an issue that cuts across child and family serving systems – the child welfare system, the legal system, the juvenile and criminal justice systems, education, health and mental health, and welfare. Without an adequate investment of resources to support adolescent substance abuse treatment and prevention serv-

ices, the cost of untreated substance abuse among teenagers will be born not only by the individual teenagers and their families and their communities, but also by other public systems. Efforts must also be made to strengthen the linkages between adolescent substance abuse services and other services for children, youth, and families. These kinds of efforts will enhance the understanding of substance abuse and its impact on youth development, promote cross-system training, and lead to earlier intervention and prevention and safer, healthier, more productive outcomes for New York City youth and families.

Citizens' Committee for Children of New York urges the Governor, the New York State Legislature, the New York State Department of Health (DOH) and Office of Alcoholism and Substance Abuse Services (OASAS), the Mayor, the New York City Council, and the New York City Department of Health and Mental Hygiene (DOHMH) to invest in adolescent substance abuse treatment and prevention services and improve the coordination between these programs and other child serving systems. In the absence of these efforts, the costs to adolescents, New York State, and New York City will remain too high.

## Child Care

continued from page 1

shown the link between thinking and feeling, and that children need to be protected not only from physical hazards, but equally important, from harsh, inattentive or distant relationships with caregivers.

Good quality child care is positively linked to social and emotional development for virtually every outcome that has been assessed, as well as positively linked with cognitive and linguistic development. High quality care also reaps tremendous cost-savings – with every dollar investment in early care and education saving six dollars in lower costs of special education, public assistance and crime programs.

Unfortunately, greater knowledge about children's first learning experiences has not resulted in a comprehensive system of quality early care and education. Studies of child care have found that the elements of high quality care are found in only 25% of child care settings.

Strong child care regulations are an important means of assuring child care quality. States that have more stringent licensing standards have fewer low quality child care centers, suggesting that raising standards raises quality of care. However, regulations are only effective when they lay out clear expectations for those held accountable and when accompanied by regular and thorough monitoring and technical assistance.

*Child Care Oversight: Assuring Safety, Health and Learning in Early Care and Education*, examines the role of the New York City Department of Health and Mental Hygiene (DOHMH), Bureau of Day Care both prior to and after implementation of the New York State Quality Child Care and Protection Act. Placing regulations and oversight in the

### CHILD CARE OVERSIGHT: Assuring Safety, Health and Learning in Early Care and Education

Some of the report's specific recommendations to build a system that supports quality child care include:

- *The Department of Health and Mental Hygiene (DOHMH) should develop a coherent plan to conduct timely inspections and to provide programs with the technical assistance needed to comply with city and state child care regulations.*
- *The New York State Office of Children and Family Services (OCFS) and DOHMH should improve public access to information about child care inspections and complaints.*
- *DOHMH and OCFS should ensure that the provider database is accurate in order to ensure timely payments to caregivers and to better assist parents searching for child care.*
- *New York State and City should improve interagency coordination. The provision of child care in New York City involves both state and city agencies. A child care liaison should be appointed to address interagency issues that inhibit the maintenance and expansion of quality child care.*
- *New York City should develop a career ladder for child care providers with financial incentives linked to qualifications and experience. Information about citywide training opportunities and career guidance should be coordinated by a single entity.*
- *New York State should increase the child care reimbursement rate to cover the cost of providing care to families with a child care subsidy.*

For more information call Candice Anderson, Senior Policy Associate for Education and Child Care at 212.673.1800x17.

context of child care financing, city and state quality initiatives, and recent legislation, *Child Care Oversight* assesses the quality of child care oversight provided by New York City's system of early care and education, and its implications for children and families.

In the fall of 2000, Citizens' Committee for Children of New York (CCC) convened a Task Force to study oversight and monitoring of child care. Chaired by Sue Nager and Leslie Yoo, the Task Force developed a questionnaire to gather data from child care programs and providers about DOHMH monitoring and

oversight. In addition, CCC held discussions with administrators at DOHMH, the Administration for Children's Services (ACS) – the agency responsible for child care administration – and obtained information from family child care networks.

Finding that family child care providers experienced a specific set of challenges with the registration and renewal process and difficulty obtaining information about compliance, CCC conducted a follow-up assessment of care in residential settings in the summer of

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# Rent Assistance

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ernment investment in the development and preservation of affordable housing to address New York City's housing shortage and the creation and expansion of rent assistance programs to help families afford permanent housing. CCC's newest housing brief focuses on how city and state funded rent assistance can improve access to permanent housing by helping low income families, families at risk of eviction and families in shelter, afford New York City rents.

In recent years, New York State and New York City have created a number of rent assistance programs for families ineligible for federal Section 8 vouchers and for times when such assistance is unavailable. Although small in scale, these programs represent a critical policy shift by New York City and New York State that acknowledges an affordable housing crisis and the need to help low income and homeless families secure permanent housing and remain housed.

Beginning in 2000, CCC engaged in a two-part project to identify the availability of various rent assistance programs and outline the eligibility requirements for rent assistance available to families in New York City. CCC's first report, *Government Rent Subsidy Programs for Families in New York City*, provided a basic guide to rent assistance programs for New York City families. While compiling this guide, a number of important questions arose about the availability of rent subsidies for families that need them. We found that rent assistance program eligibility criteria limited rent subsidies to families on public assistance, in homeless shelters, involved in the child welfare system or who are victims of domestic violence. This meant that every day thousands of low income families remained in doubled up and overcrowded housing arrangements and/or at risk of eviction, struggling to afford New York City's high market rents on their own.

The findings of this earlier project compelled us to study how to make better use of rent assistance resources and improve the management of these programs to increase the number of eligible families receiving rent assistance. *Implementing Rent Assistance Programs that Work: A Review of New York City Funded Rent Assistance for Families* supplements findings from our initial report on the availability of government rent subsidies and concentrates specifically on program implementation and guidelines that inadvertently make it difficult for low income and homeless families to access these subsidies. In the fall of 2001, CCC con-

## IMPLEMENTING RENT ASSISTANCE PROGRAMS THAT WORK: A Review of New York City Funded Rent Assistance for Families

Recommendations for the report include:

### **City, State, and Federal Policy Recommendations**

- *Establish a work group to examine how state and city rent assistance programs can work together to serve families.*
- *Provide rent assistance to low income families, including families at risk of eviction, non-leaseholder families, and families who do not qualify for federal section 8 vouchers.*
- *Streamline family application procedures and transfer rent assistance programs to one central agency.*
- *Allow families a seamless transition from city/state funded rent assistance programs to federal section 8 vouchers, when appropriate.*
- *Expand rent subsidy use to include living costs associated with moving into a new home or maintaining a home.*
- *Allow providers the flexibility to set rent subsidy levels that ensure families maintain adequate homes.*
- *Support New York City council legislation that would prohibit landlords from denying families apartments because they are rent subsidy holders.*
- *Amend federal TANF regulations to allow TANF funds to be used to support rent assistance programs without triggering federal time limits on public assistance.*
- *Eliminate the use of scatter-site apartments to house homeless families and convert these units to permanent housing.*
- *Invest in the development and preservation of affordable housing for low-income families.*

### **Program Management Recommendations**

- *Appoint an ACS agency liaison to help community-based organizations with the rent assistance application process, to provide application status, and troubleshoot rent payment issues.*
- *Provide more flexibility to larger and lower income families in regards to mandated rent contribution requirements.*
- *Streamline landlord application procedures to encourage them to rent apartments to subsidy holders.*
- *Provide community based organizations with additional funding for staff to assist families to secure and maintain permanent housing.*
- *Increase caseworker training so that providers are aware of and can help families access various types of rent assistance.*
- *Improve coordination among city agencies to build landlord and broker databases.*

For more information call Maria Toro, Senior Policy Associate for Housing and Income Security, at 212.673.1800x14.

vened a Task Force chaired by Board member Katherine Kahan, and Advocacy Council members Beverly Schneider and Susan Witter. The goal of the Rent Subsidy Task Force was to identify best practices for implementing rent assistance programs that make it possible for families to secure permanent housing and make recommendations to New York City and New York State on possible improvements to the administration of rent assistance programs.

To ensure that eligible families have access to rent assistance, several policy and program

issues needed to be addressed in this report. Recommendations focus on two areas: city, state and federal policy changes needed to expand rent assistance eligibility and accessibility and program management and operation improvements to increase coordination and communication between and among government agencies and community based organizations. Lessons learned can serve to guide city and state efforts to plan, manage and expand rent assistance programs for low-income families that need them.

# CCC's Task Forces, Analytic Projects and Advocacy 2003-2004

This year CCC has a number of Task Forces and Analytic Projects to advance the interests of New York City children.

## Task Forces

### *The Availability of Child Care for Children with Special Needs*

**Goal:** To assess the availability of child care opportunities for children with a variety of special needs. To determine the availability and extent of appropriate services provided to children with special needs in child care programs. To examine the availability of support to assist caregivers in their work.

### *Celebrating 60 years of Child Advocacy*

**Goal:** To celebrate New York City advances in service delivery to children and use gains made over the last 60 years to catalyze/motivate advocacy efforts to establish a broad child focused legislative/budgetary agenda in New York City.

### *Keeping Track – Informing the Community*

**Goal:** To provide community based briefings on child well being in select community districts.

### *Access to Health and Mental Health Services for Children in Foster Care: Congregate Care*

**Goal:** Interview voluntary foster care agencies operating congregate care programs (group homes, group residences, and residential treatment centers) to learn how they use the Medicaid per diem. Try to document capability (or lack thereof) of foster care agencies to provide clinical services and care coordination. Document how Medicaid per diem affects the quality of health and mental health services provided or secured for children in congregate care.

### *Examining the Service Needs of Youth in the Juvenile Justice System*

**Goal:** To study the service needs that youth have upon entry into OCFS detention (including health, mental health, substance abuse, and sex offender) and determine the adequacy of services provided to treat these conditions while in care and upon release.

## Analytical Projects

### *Understanding the Service Needs and Pathways to the Juvenile Justice System for Girls*

**Goal:** To identify and understand the trends in juvenile arrest and detention rates, lengths of stay, and service needs for girls in New York City including analysis of the pathways that lead to their involvement with the juvenile justice system, as well as the specific supports required to ensure successful re-entry into the community.

### *Outpatient Mental Health Treatment: Creating a Child and Family Focused Model.*

**Goal:** CCC and the Westchester County Department of Mental Health will jointly produce and circulate material that aligns Paving the Way's recommendations with Westchester County's survey findings on statutory and regulatory barriers to outpatient treatment to demonstrate the need for specific improvements in the regulation and delivery of children's outpatient treatment services. This material will help to form the basis of a targeted advocacy campaign to reform children's outpatient mental treatment services.

### *Keeping Track VII*

**Goal:** To track the well being of children across the 59 community districts in New York City and perform data collection and analysis in preparation for the release of the VII edition of *Keeping Track of New York City's Children*.

### *Children's Mental Health Services in a Managed Care Environment*

**Goal:** Working with the New York Forum for Child Health of the New York Academy of Medicine, CCC will seek to document the managed care reimbursement rates for mental health services provided to children enrolled in Child Health Plus A (Medicaid) and Child Health Plus B, determine how reimbursement rates are set, and whether these rates impede access to children's mental health treatment services in the community.

### *A Closer Look at Child-Only Cases in New York City*

**Goal:** To identify the economic and demographic characteristics of New York City's child-only caseload and develop recommendations to address the needs of this growing population.

### *ACS Child Care Subcommittee*

**Goal:** To implement the *Counting to 10 Plan* that aims to expand the availability of quality, affordable ACS child care and Head Start

Services in New York City. Focus will be on facilities expansion and development of a Training, Technical Assistance and Professional Development Institute, and building systemic supports for family child care programs and networks.

### *New York City Early Learning Project*

**Goal:** To support the work of the project and provide a forum to address systemic issues, CCC has been charged with leadership of the Early Learning Council, a working group of leaders from the public, private and non-profit sectors. To move New York City towards a more integrated and coordinated early care and education system for our youngest children and their families by promoting the development of high quality, innovative early care and education programs, improving parent access to information about quality child care options, ensuring cross-agency, citywide planning and coordination, and developing additional comprehensive, full-day programs in New York City neighborhoods.

## Advocacy

### *State Budget: Advocacy in Albany*

**Goal:** To impact the New York State FY2005 budget in order to garner increased resources and needed legislation for children youth and families. Meetings will take place in late February with State Senators, Assemblymembers and staff in the Governor's office.

### *City Budget: Advocacy at City Hall*

**Goal:** To impact the New York City FY2005 budget in order to garner increased resources for children, youth and families. Meetings will take place in the spring with City Councilmembers, City Council Finance Division staff and the Mayor's Office of Management and Budget.

### *Implementing Child Care Oversight and Quality Improvements*

**Goal:** To work with state and local policymakers to address key areas where policy changes are necessary to enhance child care oversight and quality. To identify strategies to more effectively implement safety and health regulations and encourage the provision of developmentally appropriate, high quality child care. Strategies and recommendations based on the *Child Care Oversight: Assuring Safety, Health, and Learning in Early Care and Education report*.

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On May 8th, 2003, over 400 New York City parents, community leaders, and concerned New Yorkers joined CCC on the steps of City Hall to thank the City Council, the Mayor and the New York State Legislature for devising a plan to raise revenue in order to prevent devastating doomsday budget cuts. The City Council and the Mayor were also urged to ensure that New York City's FY '04 budget protects vital children's services. Remarks made by parents and youth were augmented by the Honorable Gifford Miller, Speaker of the New York City Council and his colleagues on the City Council.

Sponsors of the event were: Agenda for Children Tomorrow, Child Care, Inc., Children's Defense Fund-NY, Citizens' Committee for Children of New York, Commission on the Public's Health System, Council of Family and Child Caring Agencies, Day Care Council of New York, Emergency Campaign for Child Care and Early Learning, Federation of Protestant Welfare Agencies, Human Services Council, Neighborhood Family Services Coalition, New York City Youth Alliance, The After School Corporation, UJA-Federation of New York, United Neighborhood Houses of New York, and the YMCA of Greater New York.

SEE BUDGET STORY, PAGE 4



Honorable Gifford Miller, Speaker of the New York City Council, speaking at the "Protect Our Children, Protect Our Future" press conference.

## Child Care

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2002 and summer of 2003.

Finally, CCC conducted a survey of model programs to gather information about initiatives that have improved child care quality in other localities in order to develop recommendations that show promise for replication in New York City.

The report's findings suggest the need to strengthen DOHMH's oversight and technical assistance role through better utilization of staff and expansion of the Bureau of Day Care. These changes should enable DOHMH to conduct timely inspections, keep licenses and registrations current and provide technical assistance. In addition, systemic investments and creative solutions must be developed to address low wages, and the high rates of provider turnover – a result of an under funded system of early care and education.

Perhaps the most troubling finding was

that both centers and family child care providers reported that inspections were often delayed, and programs frequently operated with expired licenses while waiting for inspections and/or required paperwork.

Programs reported that monitoring visits were thorough, however, responses indicated substantial variability in what was inspected. In fact, family child care providers expressed a need for increased access to information and technical assistance because monitoring visits often left them confused about inspectors' interpretation of child care regulations.

CCC found that existing staff and providers had acquired more than the mandatory level of training and desired additional professional development opportunities. While many respondents were uncertain about the feasibility of providing staff with additional training opportunities due to costs, difficulty recruiting and retaining qualified staff was a consistent theme. Center staff and providers repeatedly reported that lack of funds presented

difficulty in a number of areas including the ability to afford necessary repairs and materials.

In addition, DOHMH's outdated database of programs and providers risked further strain-

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ing program finances. Family child care providers worried about their eligibility to receive federal subsidies via the Child and Adult Care Food Program and payment from the city for serving families with child care subsidies.

Thousands of parents rely on the vigilance of city and state government to protect their children from harm. If we are to address these issues and take our children's safety and cognitive development seriously, additional investments are necessary at both the state and city levels. To ensure quality in a time of fiscal austerity; interagency coordination, better use of existing resources and cost-sharing are more important than ever.

## Task Forces

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### *Recommending Changes to Local and State Policy for Homeless Youth*

**Goal:** To develop a briefing document based on the 2002-2003 Homeless Youth Task Force surveys and field work and use findings to recommend local and state homeless youth policy changes.

### *Support for Low Income Families*

**Goal:** To continue to evaluate federal PRWORA proposals and advocate for changes based on recommendations made in *Responsibility and Risk: TANF Reauthorization Creates an Opportunity for Needed Improvements*. Also, to evaluate how changes in federal welfare legislation (yet to be enacted) will affect New York State and New York City welfare policy.

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## Peer Training by YouthAction NYC Members

CCC's YouthAction members have developed and field-tested a peer training curriculum for community-based youth programs in New York City. Using the community as a laboratory, and *Keeping Track of New York City's Children* as the text, youth learn about the risks to children living in their neighborhoods, and how their community's indicators of child well-being compare to others in New

York City. YouthAction members discuss with their peers, the programs and institutions that serve children and families in the community and from *Keeping Track*, public opinion polling and interviews, they research the unmet need among children living there.

Developing the knowledgebase and research skills is only the beginning. YouthAction's peer trainers then advance the curriculum to a discussion of community and then city government. Their civics lesson cul-

minates with government's most important process – developing a budget. Youth learn how to impact that process in order to get the resources that will help children and families they may have identified earlier as not having necessary child care, health care housing, or quality education.

YouthAction leaves their peers with a lot to think about and more importantly, a lot to do.

CCC's goal is to educate many more young New Yorkers about how to make their communities and city a great place to grow up. Today, more than ever, New York City youth need to know that they can understand complicated city budget issues, identify problems in their communities and help government develop the right solutions. CCC needs their young, powerful and passionate voices to enrich the debate on children's issues. Most importantly, youth need to know that their opinions are valued and can enhance public policy.

YouthAction NYC Peer Training is a vehicle for youth to reach-out directly to other youth and get them excited about making change in their communities. Developing young people's advocacy skills is one way to affect a more responsible adult citizenry. The by-product of this effort is that they start today!



Left to right: YouthAction NYC members Chris Gogos, Diana Garcia, Lilliana Germosen, Mariama Sidique, and Darlene Caro.



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