

**SOCIAL EXCLUSION IN THE UNITED STATES:
POLICY IMPLICATIONS FOR COMMUNITY SOLUTIONS**

By:

Suzanne Bronheim, PhD

Phyllis Magrab, PhD

Raymond Crowel, PsyD

Georgetown University Child Development Center
Center for Child Health and Mental Health Policy

The Legacy of Fragmented, Centrally Controlled Policies

1. During the 1960's, beginning with the Great Society initiatives of the Johnson administration, there was an enlargement of existing policies and creation of new policies and programs to address the issue of poverty in the United States. In the 1970's a series of policy changes also began to address the issues of individuals with disabilities and their right to education, housing, employment and access. These policies tended to be developed at a national level and then were "delivered" to states and communities where they were implemented through the input of a federal agency, sometimes through a state equivalent of that agency. There are two common threads to many of these policies that had an unintended impact of sustaining or increasing social exclusion for children and youth living in poverty and children and youth with disabilities. First, the "rules" for these programs came from federal legislation and regulation with little opportunity for communities to provide input about the usefulness, the potential negative impacts and the appropriateness of these programs and policies for their citizens. Second, these policies and programs generally focused on only one problem—lack of affordable housing—rather than taking a coordinated approach to the context of poverty or exclusion due to disability. As a result, over thirty years later, we still find extensive evidence of children and youth in situations that lead to long term social exclusion and indicators of many health, education and other social outcomes that reflect that continued exclusion for children and youth who live in poverty and children and youth with disabilities.

2. Using Baltimore, Maryland as the example for cities in the U.S., it is notable the significant extent to which the aggregation of poor, primarily minority people in the core of large and middle sized cities in this country continues to suffer from poor education, poor health, stressed families and low employment and socioeconomic status. Nationally, the high school drop out rate in 1998 was 4.7% while in the city of Baltimore in 1998 it was 10.5% (with higher rates in given neighborhoods). Nationally, 24.4% of the population over 25 are college graduates; in the Baltimore metropolitan area only 15.5% and again, lower in many inner city neighborhoods. Infant mortality rates nationally in 1996 were 7.2 per 1000 live births, while in Baltimore the rate in 1997 was 14.4. While the percent of single parent families nationally was 27.3%, in the Baltimore metropolitan area it was 53.7%. On the economic side, unemployment rates in Baltimore are about twice the national average and poverty rates in Baltimore are also well above the national average. The one bright spot nationally and in Baltimore is a continuing decrease in teen births; an important issue in light of the impact on teen mothers and exclusion from school and work. Analysts credit some of this decrease to increased use of contraception and later start of sexual activity related to programs that create a network of peers in the community to support young women in taking control of these issues. (U.S. Census Bureau, 1998; Ventura, et al., 1997; U.S. Census Bureau, 1990; Maryland Department of Health and Hygiene, 1996; Bureau of Labor and Statistics, 1999; National Center for Health Statistics, 1999; Havemann, 1999; Piccinino, 1998)

3. Children and youth with disabilities in the U.S. also face the risk of significant social exclusion. While eighty percent of the non-disabled population who are not college graduates are working, only about 24% of those with a severe disability are employed. If disabled children and youth are included in training and socialization experiences in such a way that they can attend and graduate from college, they have a greatly increased chance of employment. Approximately forty-eight percent of individuals with severe disabilities who have a college education are employed. Even those with employment face exclusion in terms of income. The median annual income for men with no disability is \$26,280, while for men with disabilities the median is \$15,144. A similar wage disparity exists for women with disabilities. It has been reported that this wage disparity may be due to inappropriate education and training. Thus it is important to scrutinize the ways in which children and youth with disabilities are included or excluded from formative experiences and education that helps them be appropriately employed. (Keck, 1999; U.S. Department of Education, 1998)

4. This report will address the issue of social exclusion for children and youth in poverty and those with disabilities by addressing the issue from three perspectives. First, it will briefly review the history of three federal policies designed to address poverty and disabilities in terms of their impact on children, youth and their families and communities. This analysis will provide a contrast to the newest approaches being undertaken. Second, it will utilize the city of Baltimore, Maryland as an example of a city taking a community driven, grassroots approach to the issues of children living in poverty and children with disabilities to address social exclusion. Third, the report will detail the activities of one neighborhood in Baltimore—Historic East Baltimore—in implementing a model of community driven, coordinated, collaborative efforts to rebuild a community that will support all children and youth (including those with disabilities) and their families in ways that include them in the broader opportunities of the society. Within that community, the example of this approach to serving a specific group of children and youth with disabilities—those with severe emotional and behavioral problems—will be utilized to demonstrate how seeing the community as a resource and enhancing its capacity can also reduce the tangible social exclusion of children with disabilities. The group of children and youth with severe emotional disturbances was chosen, because in the U.S. they have been one of the most difficult segments of the group of children and youth with disabilities to serve in ways that promote social inclusion. There has been a legacy of out-of-home and out-of-community placement for these children and youth. In addition, those with externalizing behaviors such as aggression, explosive anger, anti-social behavior and poor social interactions often end up in the juvenile justice system in this county and contribute to juvenile crime. Thus youth with emotional disabilities are often tracked into a system that does not value nor support social inclusion. In addition, children with emotional disturbances are more likely to be at risk for social exclusion due to other environmental risk factors. Compared with other students who have disabilities, those with severe emotional disturbances are more likely to be male, African American and economically disadvantaged. (U.S. Department of Education, 1998)

Federal Antipoverty Policies—A Historical Perspective

5. As already noted, many federal government policies were designed to assist individuals living in poverty, particularly many families from minority groups living in the core of big and middle sized cities, beginning as early as the 1930's with response to the Great Depression, but accelerating in the 1960's with the Great Society and after. In order to illustrate the nature and impact of these policies, two particular programs/policies are chosen—public subsidized housing policies and a specific programmatic response to youth not having skills and education to be employable, the Job Corps. Both illustrate the issues of targeting only one specific part of the problem and lacking a community enhancing or community driven approach.

Federal Public Housing Policy

6. It is perhaps more accurate to talk about *housing policies*, since over the sixty years that the federal government has addressed the issues of housing a myriad of frequently changing programs and policies have developed. A 1994 analysis of the Department of Housing and Urban Development noted some 200 programs that had accumulated over time. In addition, levels of funding fluctuated over time, depending on the political views of any current administration. There were ongoing foci of the program, however, over time. The first was funding for the construction or rehabilitation of rental housing units for low income families, persons with disabilities and the elderly. Second, was funding for direct grants to families to pay for rent in low income or affordable rent units. Almost no funds or regulations provided for integration of low income housing within communities (e.g. mixed housing development), but generally led to construction of low income units in concentrated parts of the city. Until very recently, these construction dollars went to build high density models—multiple high rise buildings in one concentrated

area separated from the rest of the community. Not until the 1980's was the issue of supporting home ownership for low income families incorporated in federal housing policy and even then, many were skeptical that families living in poverty could realistically achieve home ownership. (Nenno, 1996; Nenno, 1997)

7. This set of policies did provide roofs over the heads of low income families. It also had the unintended effect of setting the stage for significant social and economic exclusion for those living in the housing—particularly children and youth. First, the high density approach led to enclaves of poverty with associated problems of crime, gang activity, substance abuse and a lack of role models for children of adults who worked and had access to the broader social and economic benefits of society. Second, and perhaps more important, these policies further eroded communities. Development of rental properties and a focus on only housing, not the broader community issues related to poverty, made many inner city communities way stations for temporary residents. Home ownership may help stabilize communities and create a base of long-term, interested constituents who have a stake in building the community and keeping it a healthy, functioning place for families and children. There developed an “up and out” phenomenon for these communities—when families achieved any level of economic success, they moved out and the result was that inner cities were more and more left with only the poorest residents who themselves became more and more excluded as businesses and jobs followed the flight out of the city in pursuit of their economic base. Thus while children and youth may have had housing, they were even more excluded than before.

Developing Job Skills—Job Corps

8. Initiated in 1964 as part of the flurry of Great Society program development, the Job Corps is a program that has provided more than 1.7 million young people from low income families with the integrated academic, vocational, and social skills training they need for inclusion in further education, employment, etc. It, too, is a program that was designed from a federal perspective and targets one very specific aspect of social exclusion for youth—lack of education, job and life skills that will lead to employment. While Job Corps talks about its interface with communities, it is primarily from the perspective of what Job Corps brings to the community such as a labor force that can help with community projects and consumers of goods and services in the community. The young people typically served in a Job Corps Center are not from the community in which it exists. It is a model that takes youth out of their families and communities and brings them to residential centers (typically outside their area—about 10% remain at home for the program) to provide discipline, support and counseling, additional education and training. It takes a view that it is important to remove these young people from their families and communities to succeed—one qualification for eligibility is that the young person (ages 16-24) comes from a disruptive environment. (Job Corps, 1999a; Job Corps, 1999b) This concept of removing the young person from his environment has two complications. First, it may serve to further isolate the young person and make long term inclusion more problematic. Second, it does nothing to address the broad community issues that led to the young person's need for Job Corps—that is, there could be a steady stream of youth from a community to the program, but no impact for the long term on enhancing the social inclusion of all children and youth in communities.

Federal Policy to Serve Children and Youth with Disabilities—A Historical Perspective

9. Prior to 1975, in the US children and youth with disabilities were typically excluded from the education systems. School systems in the U.S. are all almost completely under local control, however, federal and state funding and thus regulation does impact what happens in those schools. In that year, a revolutionary piece of federal legislation was passed that now provided children with disabilities an entitlement to a free and appropriate public education. Local school systems had to develop processes and

programs that guaranteed children with disabilities assessments that would lead to development of an individualized educational plan to be implemented and funded by the local school system. A set of parental rights was also included to ensure that families had control and also a way to advocate for their children's needs. This act led to the development of special education programs at the state and local levels across the country. While the law required that children be served in the least restricted environment, in reality much of this early development of special education was around setting up special classes and special centers (including residential centers) to serve children with special needs. Thus, while this policy reduced children's exclusion from school, it often continued exclusion from social and some more enriching academic experiences in regular education settings.

10. Despite a new emphasis in the 1997 reauthorization of the law that specifies that children with disabilities need to be educated in inclusive settings (not separated classes or facilities), it has been difficult to make that switch. One group of children with disabilities, children and youth with severe emotional and behavioral disorders, has been particularly a challenge to school systems and they remain in very excluded circumstances. In the United States, within all legislation related to disabilities, emotional disturbance/mental illness is recognized as a major disability group. Serving children and youth with significant mental health problems continues to be a major challenge for this country. Many times young people with mental health problems are not only excluded in school, but their behavioral problems bring them into the juvenile justice system and the child welfare system leading to further exclusion. For this reason, this paper will focus on this type of disability as an example of how social isolation in relation to youth with disabilities can be more effectively addressed by community based models.

11. In 1995 and 1996, less than 2% of all children in special education within the U.S. and less than 3% of such children in Maryland were in residential or hospital settings for their schooling. In addition, less than 4% nationally and less than 2% in Maryland of all children with disabilities are in special schools—that is with no contact with non-disabled peers. In comparison, 15% of children nationally with severe emotional problems are in separate schools and 6% are in residential or hospital settings. In the state of Maryland (where the community example of Baltimore is located) 30% of children with severe emotional disturbance are in special schools and almost 11% are in residential or hospital settings. (U.S. Department of Education, 1998) It is quite common for residential facilities to be not only outside the child's community, but out of state creating a tremendous breach with their long term social context. Again, as with the Job Corps approach, this separation has been by design—the child's family and context were often seen as the cause of the problems and treatment involved removing them from those influences.

Shift in Policy to a Community Up Perspective

12. There has been a shift in federal policies and in states and communities approaches to the issues of children and youth in poverty and those with disabilities that recognizes the essential element of communities developing solutions that fit their needs and that are "owned" by and driven by community members to ensure appropriateness and sustainability. This recognition of the key role of communities and the importance of the community as a support to families and thus to children and youth is reflected in a number of areas in legislation.

13. In recent years, there has been a shift in housing policy in the U.S. States and communities, who gained experience in housing issues by administering the federal policies of the past began to develop a capacity, a desire and a vision for developing and implementing housing policies and programs that made more sense for their local needs. A major focus of these policies has been on considering housing issues within the broad context of all community needs and goals. In addition, increasing home ownership in communities has often been a goal. (Nenno, 1997; Nenno, 1998)

14. In the area of policy related to serving children with disabilities and their families, all major legislation and policy relating to special education, services to children with special health care needs, services to individuals with developmental disabilities, services related to child protection and foster care systems and mental health services require a family-centered, community-based approach and require or support in some way community-based planning of services to fit the needs and goals of communities and the families and children that live in them. For some policies, funding is tied to demonstrating the presence of structures to implement community-based, family-centered services and states are required to report data that reflects this shift in emphasis.

Baltimore, Maryland: City that Believes in Community Development and Control

15. Information about Baltimore's efforts to prevent social exclusion for children living in poverty and those with disabilities is gained from several sources. Documents, reports and Web sites from the various programs have been utilized in preparing this report. Where information is obtained from those sources, citations are provided. Much of the information for this report was provided by interviews with the following key informants in Baltimore were utilized:

- Raymond Crowel, Psy. D., Director of Child and Adolescent Services, Baltimore Mental Health Systems
- Sherri Killens, Operations Director, Empower Baltimore Management Corporation
- Janis Parks, Executive Director, Family League of Baltimore City
- Michael Seipp, Executive Director, Historic East Baltimore Community Action Coalition

16. Baltimore, MD is a city of approximately 654,000, located in the growing megalopolis of urban/suburban areas stretching from Washington, DC in the south to New York, NY in the north. Like many cities, it has lived through a cycle of the economic and social decline of much of the inner city. Baltimore, however, was very successful in the 1970's in turning this change around in its downtown/waterfront area. A revitalization process fueled by public/private partnerships has resulted in a downtown with recreation, business and office buildings. The Baltimore Harbor is a major tourist destination and the original project has been augmented with the building of museums, hotels, and a new convention center. Baltimore is now utilizing a number of federal and privately funded projects to bring this revitalization to its inner city neighborhoods. (Paige, 1999) The importance of these initiatives is that they recognize the importance of community decision-making and community involvement for success. Two Baltimore city efforts will be highlighted in this paper to exemplify the concrete realization of the changes in public policy from federally driven initiatives to local control and design. The first is Baltimore's approach to implementation of its Empowerment Zone program. The second is a city-wide effort to improve communities to better nurture and support their children and youth. While both of these are programs that work across communities in the city, they both provide an infrastructure to support the goals and activities of individual communities and neighborhoods within Baltimore.

Empower Baltimore—A Neighborhood Focused Empowerment Zone Approach

17. The Empowerment Zone/Enterprise Community (EZ) initiative of the U.S. Federal government is an excellent example of the move to community driven and community owned responses to poverty. This program was designed as a key element in a job creation strategy for America. It is different from previous urban revitalization programs in that it is designed so that the community drives the decision making. The

community sets its quantifiable goals. The Federal government then empowers the community by providing tax incentives and performance grants to fund the community-chosen activities. In 1994, 72 urban areas were designated Empowerment Zones. These communities and 33 rural Empowerment Zones or Enterprise Communities are receiving more than \$1.5 billion in performance grants and \$2.5 billion in tax incentives. Each urban Empowerment Zone received \$100 million in performance grants. Employers are eligible for \$3000 in tax credits for each employee hired who lives in the Empowerment Zone. Businesses in the Empowerment Zone are also eligible for increased tax expensing for equipment purchases. The program also enables the zones to receive tax-exempt bond financing to finance business property and land, renovations or expansions. Less tangible benefits to the communities are efforts by Federal agencies to reduce red tape and provide flexibility in relation to regulations and an on-line communication network and other ways for the communities to share experiences and ideas. (U.S. Department of Housing and Urban Development, 1999)

18. Empower Baltimore, Inc. the EZ program in that city has been noted as a widely recognized model of a successful implementation of this program. It appears that its success is related to Baltimore taking to heart the concept of community control—the city administration has encouraged independence for the communities within the Zone. While Baltimore has anchored its program on three separate zone districts, Empower Baltimore has gone even further with the concept of local planning and implementation. Baltimore is a city with neighborhoods that have very strong identities and highly specific needs and histories. The Baltimore EZ effort has seen this as a strength and built on it by having six Village Centers which provide the infrastructure for community planning and development. Director of Empower Baltimore, Diane Bell is quoted as saying, “We don’t see ourselves as touchers; we are facilitators.” (Paige, 1999; Guidera, 1997).

19. A sample of the initiatives of Empower Baltimore will be presented to illustrate the job creation and the support for businesses that characterize the EZ philosophy. In each case, the EZ creates programs that can support the goals and decisions of the six Village Centers—the infrastructure designed to help those communities take control. These initiatives include Customized Services for Workforce Development and a loans program. In addition Empower Baltimore has been involved with a few efforts directed specifically toward children and youth, including after school programs and youth crime diversion. Much of the work, however, is planned and implemented within the communities connected with the Village Centers. An example of how one of those Village Centers has effectively taken this community-driven model from the Empowerment Zone program and wed it with its own specific overall community goals and strategies will be presented in the next section of this paper, as well—the Historic East Baltimore Community.

Customized Services for Workforce Development

20. Customized Services for Workforce Development is designed to help businesses find and train new staff or upgrade skills of current employees. In providing this service the EZ also creates job opportunities for residents and helps residents develop specific marketable skills that will lead to a job in the business given these services. Empower Baltimore provides assessment of workforce needs; analysis of specific job skills; funding for new employee training; screening of potential employees; skill enhancement for existing employees and employer specific on-the-job training. These services are available for any business in the area that has full-time jobs with benefits to fill. Communities within the EZ can use this service to support businesses in their area and find jobs for their residents. (Empower Baltimore, 1998).

21. An example of the kind of job and job skills development that has arisen from this approach is a program to train EZ residents for laboratory jobs in the high-tech sector that the state is counting on to fuel

economic growth in the next decade. With neither a science nor technology background, many East Baltimore residents are excluded from these types of jobs of the future. Empower Baltimore developed a joint venture involving Johns Hopkins University, Baltimore City College and the potential employer to screen, select and train nine EZ residents for laboratory jobs. The employer will also receive \$3,000 tax credits on the wages paid to program trainees who are hired. Once participants have completed the training and passed the final exam, they will be employed as lab technicians for \$20,000 a year. Even more important, a whole new career track is opened to them. (Guidera, 1997)

Loan Programs

22. Empowerment Zone funding is used to promote economic opportunities including small business expansion, entrepreneurial initiatives, job creation, and business retention within the Zone. Empower Baltimore has designated the Community Lending Group, which is an affiliate of the Development Credit Fund, Inc. to manage the Empowerment Zone Finance Vehicle Track Loan Fund. Loans from the \$1.5 million revolving fund are available for periods of one to ten years with flexible payment plans and favorable rates of interest. In addition, the Community Lending Group works cooperatively with other lending and loan servicing organizations to provide financial and technical assistance to small businesses within the Zone. Communities within the Zone can utilize this program to meet specific local goals in keeping, expanding or attracting businesses to their area.

Child and Youth Oriented Activities

23. Empower Baltimore has partnered with the Baltimore School Board to provide funds to individual schools for after school programs. In a matching funds approach, schools and communities could design a program and apply for the funds. After school programs can play an important role in keeping children safe and constructively involved during hours that may not be supervised. In addition, it keeps children engaged with activities that may build skills and relationships that will keep them included within school and later work. Again, there is community opportunity to plan and implement these programs.

24. Within the EZ, an innovative approach to dealing with juvenile crime has been developed that draws on strengths and supports within the community. Vandalism is often considered an entry level crime—the first step into illegal behavior. If youth can be diverted from the juvenile justice system and prevented from going into more serious criminal activity it goes a long way toward preventing the ultimate social exclusion in adulthood—incarceration. This exclusion comes not only in the form of physical removal from the general society, but with long lasting effects that continue this exclusion. It is difficult for individuals with a criminal record to obtain jobs and those convicted of a felony crime (in the United States crimes are classified at two levels—minor crimes are misdemeanors and more serious crimes are felonies) lose voting rights for life. For the neighborhoods in most of the EZ in Baltimore, such an approach is particularly important due to the high percentage of African-American youth living in these neighborhoods. This group of youth are at particular risk of being involved with the Juvenile Justice system. While African-American youths constitute 15 % of the 10 to 17 year olds, they account for 26% of juvenile arrests. Perhaps more striking is the fact that 41% of those detained as delinquents are African-American. (Rasberry, 1999) Within the EZ, there is a program where video cameras are used to catch youth committing acts of vandalism. Community members help identify the youth involved in the activity. The youth, however, are not turned over to the Juvenile Justice system. Instead, resources within the community are used to work with these young people to help them avoid further criminal activity. In this way, the community works to prevent potential isolation for its youth and at the same time enhances the quality of life for all community members by working to reduce crime.

Baltimore's Plan for Children and Families

25. While the Empowerment Zone activities help support the development of communities to support children and youth, Baltimore also has a major initiative with a specific focus on children, youth and families.

26. The Family League of Baltimore City, (a private, non-profit organization) is the designated governance entity for children and family services. As the local management board (a structure developed in the state of Maryland to allow for more community control in the administration of programs for children and families), it is charged with developing and overseeing a comprehensive system of services for families and children in Baltimore City. The initial step in this process was the development of a set of six Results for Children and Families which describe what outcomes Baltimore wants for its children and families. In addition, 23 Indicators have been established which will be used to measure progress on impacting the Results. One of the primary functions of the Family League is to develop a critical mass of energy and investment in moving the measures related to the Indicators.

27. A strong partner in this process is the Safe and Sound Campaign. This city-wide planning and action effort directed at making children "safe and sound" is one of five urban initiatives funded by the Robert Wood Johnson Foundation. The Safe and Sound Campaign has developed five major strategies, which when implemented, will bring substantial investment to the six Results.

28. Both efforts were developing goals, outcomes and plans through a process that involved significant community input. Wisely, in Baltimore, these two efforts were brought together with coordination through the Family League of Baltimore City to develop one set of goals, plans and data collection and reporting efforts.

29. The vision for Baltimore City is that all initiatives and service delivery programs directed at family and children will fit within the framework of the six Results, which are:

- Children live in nurturing families
- Children enter school ready to succeed
- Children and young adults are educated
- Children and their families are healthy, with youth avoiding high-risk behaviors
- Children live in safe and supportive communities and neighborhoods
- Children's families are self-reliant.

30. These goals all contribute to factors that can alleviate long-term social exclusion of children and youth. Again, these goals reflect a broad-based, integrated and community rooted approach, rather than a piecemeal set of efforts directed at any one specific problem or issue. Healthy communities are seen as a key to supporting and nurturing children and youth. From these six goals, a set of 23 key indicators were developed and baseline data gathered on these key indicators. A series of action plans have been developed to address these goals.

31. The twenty-three key indicators for Baltimore are:

- third grade reading levels

- school attendance rates
- high school program completion
- school readiness
- unemployment rate
- poverty rate
- homelessness in children and families
- infant mortality
- low birthweight births
- prenatal care
- teen births
- pre-term births
- juvenile violent crime
- juvenile crime
- school-age children’s use of time
- young adults’ use of time
- rate of child and adolescent substance abuse
- child abuse and neglect
- placement of children and youth out of home
- juvenile violent death rate
- exposure to crime/victimization
- child and adolescent adverse effects injuries.

32. These efforts have just begun and there is only historical and baseline data. Thus the effects of the initiatives described in this paper are yet to be documented in relation to the key indicators.

33. One important recognition of the effectiveness of Baltimore’s planning and data efforts related to children and families is Baltimore being chosen one of thirteen communities in the United States for Vice President Gore’s Boost4Kids initiative. Boost4Kids Partners (the communities and state and federal agencies) will work to achieve better opportunities and outcomes for children by working to cut bureaucratic rules and regulations that prevent communities from effectively using resources and programs to meet the needs of their citizens. Boost4Kids will help communities measure results; find ways to pool

administrative savings from discretionary grant programs to use for improving outcomes; streamline administration and provide greater flexibility to communities in administering grant funds; address barriers in legislation and regulation at all levels and maximize the use of resources for children and families. Communities were chosen for Boost4Kids through a competitive nomination process. Baltimore was chosen as a partner that had the existing mechanisms to implement this effort and to teach other communities about successful approaches.

34. These city-wide efforts, however, do not mean one approach to obtaining these goals for the whole city. Neighborhoods are actively engaged in planning and developing the actions within their own communities. Data on the 23 core indicators of children's health and well-being were collected not only city-wide, but also baseline data and ongoing collection of data are broken down by neighborhood. Safe and Sound, for example, invited up to 15 neighborhoods in Baltimore, based on data of these core indicators, to participate in community-based planning. Up to eight of the communities responding will receive planning grants, technical assistance and support to develop their own local strategies for implementing the Safe and Sound family support program. Finally, six of those communities will receive implementation grants. The funding of these neighborhood efforts is a collaborative effort as well with Family League of Baltimore City supplying funds for the planning grants and United Way of Central Maryland providing resources with other partners for the implementation of neighborhood-based service delivery.

35. The Family League of Baltimore City also supports community development by serving as a grants clearinghouse. This process helps get information to community organizations about grant opportunities, coordinates applications among interested organizations, serves as a research and technical assistance resource and thus helps increase funding coming into Baltimore City to better serve and support children and families.

36. As already noted, the Baltimore's Results effort is focused on outcomes and sees planning as a data-driven process. (Baltimore Data Collaborative, 1998; Baltimore Data Collaborative, 1999) One barrier for many local community planning and development efforts for children and families is the lack of data that relates to the specific area or neighborhood in question. Much Federal and state data focuses only on state, city or county level units. Other data may relate to Census tracts and sometimes ZIP codes, but these externally imposed geographic designations often do not correspond to organic communities and neighborhoods. The Family League of Baltimore in partnership with the Safe and Sound Campaign of Baltimore and the Maternal and Child Health Community Health Science Consortium of the Johns Hopkins University School of Hygiene and Public Health established the Baltimore City Data Collaborative in 1998. Other participating organizations include the Baltimore City Health Department, the Maryland Department of Health and Mental Hygiene and the Urban Institutes National Neighborhood Indicators Project. The Data Collaborative tracks the 23 core indicators to monitor progress toward the six goals or results developed for Baltimore. With the Family League of Baltimore City, the Data Collaborative provides status reports about progress toward Baltimore's Six Results for Children and Family. A web page provides city-wide summary data, but also provides the support needed by individual communities within the city with community-specific geomapped data and listings of community resources. Thus, the support for local community planning has been built and reflects an unusual level of commitment and concrete support for allowing these community planning efforts to blossom.

From Philosophy to Implementation

37. The remaining portion of this report will present how the philosophy of community driven, comprehensive planning efforts that can impact social exclusion for children living in poverty and those with disabilities is being implemented in one community in Baltimore. The Historic East Baltimore

community has taken the various opportunities provided through the Empowerment Zone as well as the city-wide plan for children and families and woven those in with its own ongoing community partnership efforts to create its own effective approaches to building an economically viable, healthy and nurturing community in which children can grow and develop.

Historic East Baltimore Community Action Coalition An Example of Implementing the Community-Driven Model

Description of Historic East Baltimore

38. The community represented within HEBCAC has a census (1990) of approximately 43,000. It encompasses 218 blocks in an area that has historically been primarily residential with a hub of businesses and industries. The economy of the neighborhood had depended on blue collar jobs in bakeries, breweries, etc. The closing of these industries, decreases in population and a shift in economics and demographics have led to the exodus of business and industry (and thus many jobs) and a decline in the upkeep and occupancy rates of its classic brick rowhouses. Between 1992 and 1997 the number of vacant houses grew from 800 to 3,000 providing growing opportunities for criminal activity. Owner occupancy rates within the seven Development Areas of HEBCAC's community range from 20 to 60%. In addition, many business sites remain vacant as well as space previously involved in industrial uses. (HEBCAC, 1999, 1999a)

39. As East Baltimore plans for its revitalization, it must contend with the effects of the community becoming more and more isolated from jobs (many of which moved to the suburbs, not easily accessible from this area) and opportunity. Those who were economically able, left the community to follow jobs or to "escape" the declining living conditions in the community. All community institutions were affected—even churches saw their leadership and membership moving out of the community. This process has led to a continued spiral of effects that left the youth of this community cut off from opportunities and a vision of adult roles that are connected to economic development in many ways. Forty-three percent of the residents of East Baltimore live in poverty. Fifty percent of residents have a high school diploma or high school equivalency (compared with a national rate of 82.2% and a city wide rate in Baltimore in 1990 of 60.7%). Seventy five percent of families have only a single head of household and it is estimated that between 40-45% of men between the ages of 18 and 54 are unemployed. (HEBCAC, 1999a, 1999b)

A Community Coalition for Action

40. The Historic East Baltimore Community Action Coalition (HEBCAC) is one of the six Village Centers designated by the Empower Baltimore Empowerment Zone. HEBCAC, however, has a history that predates the Empowerment Zone effort in Baltimore. It is a community based, grass roots effort that held its very first meetings in August of 1992. At that time, representatives from neighborhood associations, elected officials, Johns Hopkins Medicine, Kennedy Krieger Institute (a special interdisciplinary center that serves individuals with disabilities and their families), businesses, churches and other leaders came together to develop a strategy for rebuilding the East Baltimore community. Working through the initial distrust from a long history of strained relationships among these constituents, by the end of 1993 there was enough consensus to work together to implement a plan of action and HEBCAC, Inc. was born. The city of Baltimore, the state of Maryland and Johns Hopkins Medicine (the Medical School and health care system of Johns Hopkins University) agreed to collaborate to support the administrative costs of HEBCAC for the first five years. The first staff were hired in December of 1994 and a series of community-chosen and community-directed projects were identified, resources to support them were sought and work was begun. Thus, HEBCAC was well positioned to respond as a Village Center to the Empower Baltimore

efforts with a strong sense of community direction and community control and it was awarded a 38 million-dollar grant from Empower Baltimore to revitalize the community. This grant provided a strong economic engine to which the total work plan for the community could be attached. In addition, its strong organizational capacity has attracted an Annie E. Casey Foundation Neighborhood Transformation/Family Development Partnerships Grant, resources from the Baltimore Safe and Sound program and other funding that can be used to meet community defined goals in community driven ways.

41. HEBCAC attributes its success to date to a very specific set of principles and values and a very specific and somewhat expanded view in defining community. HEBCAC achieves all its goals and plans all its efforts as collaborative efforts of important partnerships among the stakeholders in the community. It provides a structure to facilitate cooperation and communication, to broker services and to advocate for positive changes. HEBCAC does not “do things *for* the community”, it provides a structure within which the community identifies and directs the efforts needed to revitalize the area. Using this approach is very time consuming—it takes time and trust for partners in the community to build consensus and develop effective working relationships. The payoff, however, is that coordinated efforts address the needs that the community perceives and the community owns and supports the solutions. This approach is in sharp contrast to past policies used to address the problems in the inner cities of the U.S. which were often top-down, piecemeal, federally or state designed efforts that were imposed on communities.

42. HEBCAC’s view of the community and those that must be involved in its well-being and benefit from its progress is broader than the people who reside in the neighborhoods. This perspective is key to its potential success. Thus the partnership involves a broad spectrum of individuals and institutions key to the rebuilding of the community. HEBCAC sees residents, patients and employees at Johns Hopkins University’s affiliated medical center that lies within the community, business owners, the minister who commutes into the community to lead his church, neighborhood and community development and advocacy organizations, as well as city agencies, schools, and non-profit organizations as partners in the efforts. Government officials are also included in the partnership and the current Chair of the Board of Directors of HEBCAC is the area’s delegate to the state legislature in Maryland. The inclusion of Johns Hopkins in the view of community has been both a difficult connection to make based on historical relationships and, at the same time, a key to success in many endeavors planned by the partnership.

43. Johns Hopkins Medicine (which includes the East Baltimore campus that includes the Johns Hopkins Medical School, the School of Nursing, the Johns Hopkins Hospital and numerous affiliated programs in the Johns Hopkins Health System, including the Kennedy-Krieger Institute) occupies 44 acres in the southwest portion of the community. A premier research and training medical facility, it employs approximately 30,000 physicians, nurses, and other staff and trainees. Johns Hopkins Medicine, the parent organization of all the health care activities of the University is a \$1.7 billion enterprise and thus a major economic force in the city and state, not to mention within the community of East Baltimore. (Johns Hopkins University, 1999) Despite its location within the East Baltimore community, Johns Hopkins has not historically seen itself as part of the community, nor has the community viewed it as an integrated part of its life. A long history of mutual distrust existed between the University and the community. The Hopkins complex is fenced off from the community with a large security force designed to protect its employees, the patients that come there for care and its students from the potential crime within the surrounding community. Past efforts at supporting the community surrounding the University have been within the spirit of giving their resources or expertise to the community, not working as a partner within the community. From the community’s perspective, many of the forays into their neighborhoods were seen as efforts that benefited the University (research projects, etc.) and did not enhance the community or bring needed resources to it. In addition, those efforts were seen as being designed and directed by the University, not the result of community assessment and consensus. HEBCAC saw as one of its key goals changing both the University’s and the community’s perceptions of one another and changing the “culture” at the University to view itself as an integral part of the community that was both responsible for its well

being, but also benefited from its growth and development. The success in achieving this goal will be seen in the descriptions of HEBCAC's efforts that follows.

44. HEBCAC has just completed a strategic planning process to guide its policies and actions over the next five years. (HEBCAC, 1999c) All address issues to revitalize the community and to increase its resources and ability to support the development of children and youth in ways that will decrease social exclusion and enhance their move into higher education, jobs, home ownership, access to financing to support business development and to decrease their involvement in crime, dropping out of school, substance abuse and other factors that lead to the greater exclusion of youth and young adults in many inner cities in the U.S. It has targeted seven development areas, which continue current successful activities and propose new areas for development. The Seven Development Areas are:

- Education
- Economic
- Employment
- Family
- Community
- Physical
- Administration

45. It should be noted that Education is the only area that appears to impact only children and youth. Even in that area, a broader conceptualization is part of the plan. The building of a total community that is healthy, economically thriving, provides models of adults in roles that lead to a positive future vision for children and youth and that decreases the effects of risk factors such as parental substance abuse, physical and sexual abuse of children, and crime is viewed as ultimately the best way to insure the social and economic inclusion of children and youth. Many of the capabilities needed to be socially included throughout the life span are learned not only in formal education in schools, but through the family and modeling by other adults within the community. Bringing healthy growth and change to the community is viewed as the route to decreasing social exclusion for children and youth.

46. The following section will highlight successful and/or innovative approaches related to some of the first six of the Development Areas (the last relates to specifics of administration within the organization). Not all efforts and planned efforts will be discussed, but those that demonstrate the types of innovative and community oriented solutions that a "bottom-up" approach can generate will be highlighted. These efforts are then tied to social exclusion for the children of this community, because they build and strengthen the context for supporting these children's growth and development.

Education

Community Control of Schools

47. A key to social inclusion in the U.S. is the development of educational skills—reading, math, language arts, etc. In East Baltimore, only 3.9% of children leaving elementary school in fifth grade to

move on to middle school have grade level academic skills. Failure of children to achieve in the city's schools has been seen as the result of problems in management, in teacher performance and under funding. Current approaches to improving the schools in the City of Baltimore have included the state takeover of the schools in return for greatly increased funding. Once again it is a top down approach that targets only the specific issue and institution involved and one that runs the risk of using a cookie-cutter approach with the same solutions and approaches used in all parts of the city. There has been no visible change in the effectiveness of the schools in East Baltimore and with three school commissioners in three years, there has been no consistent direction in leadership for the effort.

48. While HEBCAC agrees that school management is a key to improving the schools (they have advocated for and achieved the relocation of eight school principals in the community), the HEBCAC partners have a very different view of how to improve education for the children of East Baltimore. Within Maryland and Baltimore law, there is provision for private management of schools. Several schools in the city are already being run under a contract to an outside organization. The East Baltimore partners do not want to wait until children fail academically or drop out of school to intervene. They believe in making changes from preschool on up. HEBCAC sees this approach as a way to implement their vision of needed changes to support education. Again, this vision is a community-wide, collaborative approach and not simply a "fix things within the walls of the classroom" strategy. HEBCAC sees the educational failures in the schools as connected with the problems that circle the schools. The schools, working alone as primarily educational institutions, are ill-equipped to deal with the many forces in the community that make it difficult for children to focus on education. Over one-third of children relocate during the school year; many face the stresses of the poverty of their families, of parental substance abuse or parental incarceration, or of fear for their safety due to crime, etc. In addition, there is such a long history of poor educational outcomes in the schools of the area, that parents do not have a high regard for education as the way out of poverty; they were not well served by the schools and have few expectations. Solutions related to educating children effectively must deal with the context as well as the classrooms.

49. HEBCAC is seeking to take over the management of its local schools through the mechanism of private management. One of the partners, Kennedy-Krieger Institute of Johns Hopkins University has taken the lead in the process. The vision for schools in East Baltimore is one of a full service institution. Schools would be open 365 days a year from 6 AM until 9 PM. There would be a connection between school and home, including home visiting and bringing parents into the school. The school would provide all meals and an array of after-school and support services through other community partners and organizations such as the YMCA's Living Classroom program, Big Brothers and East Baltimore Youth Services. HEBCAC had developed the proposal and identified a funding source to begin implementation in four schools, however, they were turned down on their first attempt to gain approval from the city school bureaucracy. The partners are continuing to pursue this approach.

Increasing Prestige of Community Educational Strengths

50. Baltimore City has a magnate school program. The magnate school concept was developed in the U.S. as a strategy to address racial imbalances in school populations. The idea is based on developing schools that focus on specific topics or areas of specialization (e.g. arts, music, science) and are centers of excellence with special funding and administrative prerogatives. These Centers would then draw students from out of the geographic location of the school to it, helping to bring about a better racial balance in the school. One of Baltimore City's magnate schools—Dunbar High School—is in East Baltimore. It is small (1000 students) and has a focus on health sciences. It gets support in the form of teaching time and provision of equipment from Johns Hopkins Medical School. (One of the results of changes in the Hopkins culture related to its involvement with HEBCAC is its commitment to give equipment that is not up to date for a high powered research institution, but wonderful for high school labs to this magnate school.) While

it is a good program, it does not have as much status as other magnate schools in the city. In addition, only 3% of the students are from East Baltimore. The partnership has several goals in relation to Dunbar High School. First, they seek to improve its quality, perhaps through more local control and support, so that it will be a marketing tool for the community to draw in families with higher incomes and high educational aspirations. Families will want to move to this area to be near a school of excellence. Second, the group wants to maintain the high academic standards of Dunbar, while improving the feeder schools in the area to increase acceptance rates of local children into the program, giving them the needed skills and supports to decrease potential social exclusion.

Raising the Educational Level of Adults in the Community

51. Children and youth will have better opportunities if adults in their families and neighborhoods are better educated. As already noted, only half of adults in East Baltimore have a high school education or equivalency. As the partnership began to address the issue of education for high school dropouts, the participation of the many community members had a strong hand in shaping the approach for East Baltimore. In many instances in the U.S., those without a high school diploma are encouraged to take an equivalency exam and provided with preparation for that exam. While technically, that equivalency serves as the credential needed for jobs or further training, it is not a substitute for a full high school education. In East Baltimore, partners identified two key aspects of their approach to addressing high school dropouts. First, they wanted an approach that was not just targeted at youth; many adults wanted an opportunity to complete their high school education. Second, residents felt strongly that they wanted an education, not an equivalency certificate. HEBCAC's partners are creating an academy that will provide a high school education to youth and young adults who have dropped out of high school. The model of the importance of education and learning and the message that there is another chance at education for youth who have dropped out are important influences on the views of children and youth in the community about education and long-term potential for inclusion in economic development.

Economic and Employment

52. These two Development Areas are described together, because the strategies for addressing them are intertwined. Approaches to employment are tailored to the community, its needs and its resources. Rather than providing training on general job skills, training can be targeted to develop skills needed by community businesses and employers. At the same time businesses within the community can be supported and new business development can be driven by community needs and values. When such development is not regulated, poor areas of city cores can end up with a liquor store on every corner, yet no grocery store or pharmacy within accessible distance.

Supporting Community Businesses

53. HEBCAC has several strategies in place to support current and potential businesses in the community. Three examples are noted here. First, they encourage other members of the community to use local businesses for their needs. An example is the encouragement for Johns Hopkins University offices to use the local printing business—giving the community its business patronage is far more effective than giving money and it also benefits the University. Second, HEBCAC can use its Empowerment Zone funds to support local businesses (in exchange for employment for residents). Third, the community group is involved with renovating and now leasing former industrial space to new businesses in the community. Finally, HEBCAC is working to develop a community bank that will have its roots in the community, be run by the community and thus will be able to be responsive to its needs and goals. Johns Hopkins has

pledged that if the bank gets going, it will bring \$6 million of its funds into the bank. Just within these few examples, it is clear how HEBCAC's broadening of the community partnership to include Johns Hopkins greatly benefits them. By building businesses in the community, HEBCAC can provide children and youth with access to more goods and services. These young people will also have many models of adults who are included in the workforce, in taking leadership in the community and in creating opportunities for themselves and others to be included in the general economy and society.

54. HEBCAC runs a program called Gaining Access to Training and Employment (GATE) with Empowerment Zone funds to provide career support and training to residents. It is a link between job seekers and employers. Sixty percent of its participants were placed within the first six months. This Career Center had placed 235 persons by January 31, 1999. In addition, it participates in Bridges to Work, a program that helps place community residents in jobs in the suburbs and provides transportation and a job retention coach to help with difficulties on the job. It is in its third year and so far has a 70% job retention rate. (HEBCAC, 1999b) This type of approach begins to broaden the horizons of the neighborhood and gives children contact with adults who have become included in a broader society and workforce. A second type of approach to increasing employment for community residents is the First Source Hire Agreements between employers and HEBCAC. Local employers identify personnel needs and specify the types of skills needed to fill those positions. HEBCAC then works to find appropriate applicants and may, if needed, provide training to ensure they have the needed skills. Only if they cannot find an appropriate applicant does the employer look outside the community. They currently have such agreements with some departments within Johns Hopkins and have made them a condition for receiving development support for businesses from the community.

55. The combination of these approaches develops the economy of the community to reconnect it and thus its children and youth with the broader economy and society. It also provides a vision of inclusion and real opportunities for children and youth in their futures.

Family and Community

56. Domestic violence—spouse and child abuse—is an area addressed in HEBCAC's plans and activities. It is linked with the Baltimore-wide efforts of the Family League of Baltimore City described previously and the Safe and Sound Campaign. There is also a Men's Center to provide services to the abusers. In addition, family violence, crime and unemployment are very much tied to problems with substance abuse within the community. HEBCAC estimates that 20% of adults in the community are active substance abusers. (HEBCAC, 1999b) Thus, the community is looking to address this issue. Again, however, it is not seen as an issue in isolation. Clearly treatment for substance abuse is needed and they are working to better coordinate the fragmented resources they do have. HEBCAC is looking at a more integrated approach as well. They may receive \$6 million in funding from the Soros Foundation to develop an integrated approach for substance abusers. It will include medical treatment for addiction, employment training and placement, housing services and support for a 24-month period. In addition they hope to work with families of addicted persons via home visiting and may decide to help them find other housing arrangements if necessary to prevent relapse.

57. Recreation opportunities for children and youth are a key to keeping them involved and giving them skills and experiences they will need. Again HEBCAC is looking to make sure that recreation programs serve their specific community needs. The types of programs that might be helpful elsewhere in the city or in suburban areas, may not be what the East Baltimore Community believes it needs. HEBCAC is seeking to share control and management of local public recreation program in its community. The YMCA in the community that is a partner in HEBCAC would be the managers. The community wants to build recreation opportunities that support and interact with the families of the children being served.

Physical Development

58. HEBCAC has done the most in this area, although it is not necessarily considered the highest priority. It is, however, the area of development easiest to find funds through the Empowerment Zone and other avenues. Five hundred houses are being renovated and another 1,000 dilapidated and/or abandoned units are being torn down. A main goal of the community is to increase the number of home owners living in the neighborhoods with a goal of increasing home ownership by 50%. It is planned that the 500 rehabilitated units will be for home ownership. (HEBCAC, 1999a) Financial incentives provided by funds through an Empowerment Zone program and through a Live-Near-Your-Work program help make the dream of home ownership a reality to more families. The latter program is funded by the city, the state and by Johns Hopkins University in its role as leading employer in East Baltimore. Having a stable workforce nearby is an asset to the University. Again, the community is making decisions about what to keep and what to demolish and decisions are being made that enhance the community and help stabilize and revitalize it.

The East Baltimore Mental Health Partnership

A Community Collaborative Model to Prevent and Reduce Social Exclusion of Children with Disabilities

59. As already noted, one of the groups of children with disabilities that faces extensive social exclusion is the group of children and youth with severe emotional and behavioral problems. With mental health problems seen in a medical treatment framework, programs and policies to help these children and their families focused on providing treatment in hospitals and long-term treatment facilities that removed the patient from his/her environment. This approach created significant social isolation for these young people who were removed from their communities and often their states for treatment. They were removed from normal educational and social experiences and put in situations where their only peers and role models had problems as severe as their own. At the same time, the factors within their families and communities that may have fostered or exacerbated their difficulties remained unchanged. The problems of this group of children are further complicated by their involvement with the Juvenile Justice system, often resulting in their being denied access to mental health care, as well as removing them from their communities.

60. The Johns Hopkins East Baltimore Mental Health Partnership is one of 41 grantees of the Comprehensive Community Mental Health Services for Children and their Families Program. This five-year-old federal effort is administered by the Center for Mental Health Services of the Substance Abuse and Mental Health Services Administration of the U.S. Department of Health and Human Services. This program is designed to fund models to demonstrate how communities can develop systems of care to better serve children and youth with severe emotional problems within their communities by mobilizing the resources in the community and shifting the emphasis on partnership between families and communities to support this group. This program again reflects the shift in policy in the U.S. towards supporting communities to find local solutions and toward taking an integrated community approach to solving specific problems that affect children and youth.

61. As with the other efforts developed within the East Baltimore community, the Partnership is based on broad involvement of many stakeholders. It does not try to deal with mental health issues in isolation and without the input and support of a broad base of constituents. Begun in 1993, the East Baltimore Mental Health Partnership was born of the collaboration of many. State departments of Juvenile Services, Social Services and the Mental Hygiene Administration were at the table, as well as the mayor's

Office and the Local Management Board. In addition, a number of community groups and resources were involved, including Johns Hopkins University, Johns Hopkins Hospital, University of Maryland, Clergy for the Renewal of East Baltimore, Families Involved Together and the Alliance for the Mentally Ill.

62. The East Baltimore Partnership works on multiple levels within the community to support the mental health of children, youth and families and to reduce the potential social exclusion of those young people with mental health needs. The Partnership has developed an innovative prevention program called Community Oriented Policing Services (COPS) to help children and youth who have witnessed violence deal with the psychological sequelae before they develop serious difficulties. Second, they have developed mental health services within the schools so that they are an integrated part of the child's life and community and available when problems are smaller and may be more amenable to intervention. The EBMHP has worked to develop a network of community support services designed to work with children who are at greatest risk for out of home/community placement. Finally, the EBMHP developed an across agency and community coordination network, designed to promote better access to and coordination of services to children and families.

COPS-A Community Mental Health Prevention Model

63. Children and families living in East Baltimore are exposed to chronic and severe violence. Of nine districts in Baltimore, the Eastern Police District has had the highest crime rate in recent years. Violent crimes, including 78 murders in 1997 and over 250 reported incidents of domestic violence per month create an environment that has a negative impact on the mental health of children growing up in this community. The East Baltimore Partnership has implemented a program modeled after one offered by Yale University and the New Haven, CT police. (Crowel, 1999) This model does not view mental health intervention in isolation from the community and does not see mental health professionals or mental health agencies as solely responsible for preventive psychosocial intervention. The Partnership works with police (who are typically the first ones on the scene of a violent incident that has been witnessed by a child), natural community helpers and mental health providers to create a team that can provide flexible, on-call support to meet the unique needs of children and families in relation to violence. The use of existing individuals in the community who acted as counselors to families and children is an important key to the success for this program.

64. COPS is implemented through a process of identifying police and community members as well as mental health clinicians to take part in a intensive process of cross training. During each 11 week cycle, representatives of each group are invited to a one day training session to discuss their concerns about violence, to learn about the impact of violence on children and to plan innovative approaches to preventing violence in the community. After several of these one-day training sessions, 5 representatives from each constituency are chosen for an intensive 7-week, 30 hour training to increase knowledge and a sense of collaboration and shared goals. Graduating "fellows" become the members of the teams for the trauma and community response efforts of COPS.

65. When a police officer is involved in a situation that has included children exposed to violence, the officer activates the response team; the members are chosen based on the specifics of the situation. The COPS team does not begin providing services until the officer-in-charge of the crime scene certifies that all evidence has been collected. If team members deem it necessary, after gathering information at the crime scene, they can contact the on-call mental health clinician. The response team works with the family and child to determine the type and level of mental health and support response needed and within 24 hours the intervention is under way.

66. COPS builds on community strengths and looks beyond treating mental health problems once they have become severe. It addresses a specific need in relation to mental health needs of children in this inner city environment and builds on the specific strengths of the community “counselors”. As noted by the former Director of the Partnership, Dr. Raymond Crowel, “The resulting program incorporated the authority of the police department, the child development knowledge of the mental health system, and the existing work of the community into a single dynamic response to violence in East Baltimore.”

School-based Mental Health Services

67. The Partnership recognizes that schools are where children are and need to be if they are to gain the education and socialization needed for inclusion in the society as adults. Mental health services that pull them out of school or the classroom may be counterproductive. In addition, it is not always effective to try to address the mental health problems of one child without addressing the community context, in this case the classroom and school. Thus, the Partnership has moved mental health professionals into the 19 schools, elementary through high school, in the East Baltimore community. (Woodruff, et al., 1999) There, professionals are integrated into the school and each clinician sees the whole school as the client. Services focus on multiple levels: individual interventions, classroom interventions, school-wide interventions and support and services for the families of the children in the schools. Typically, the mental health professional will be working on all of these levels. An individual child may be receiving help with anger management and self-esteem, while the classroom teacher receives consultation on how to reduce teasing and negative behaviors within the class and the child’s parents work on parenting skills or understanding the child’s concerns and needs. The problems of the community impinge on the schools and at times classroom or school wide interventions are made to help children deal with their reactions to parental drug use or other problems.

68. Since mental health professionals are in the school, they can observe and intervene quickly with children who have even more significant problems and provide supports to families and teachers to keep that child in the regular school environment. The mental health professionals are also involved in after school activities and can help children with behavior problems, home work, etc. The Partnership also runs a summer camp program for children and youth with severe emotional and behavioral problems who would otherwise be excluded from such educational and recreational activities.

Family Resource Coordination Unit

69. The Family Resource Coordination Unit of the Partnership tackles the greatest challenge—keeping children with severe emotional and behavioral problems within their communities rather than excluding them in hospitals and residential treatment centers away from home and, often, out of state. (Smith-Hill, 1999) This aspect of the project, as the others, is not solely based on treatment by mental health professionals, but provides the partnership and skills of other programs and community members. Two components of the project are targeted at providing children and youth with opportunities to keep them connected and included in ways that all children can be in the community. The other three comprise an innovative, community-based and community supported approach to treat children and youth with severe emotional problems within the community or to bring them back to their community.

70. Because of their extremely problematic behaviors, children and youth with severe mental health problems are often excluded from school and from opportunities for mentorship within the community. As a result, they lose out on opportunities to develop the kinds of skills and relationships they will need to be included socially and economically as adults. The Partnership has a Therapeutic Tutorial Program where professionals, volunteers, community organizations (e.g. Families Involved Together) partner to provide

special assistance to help children served by the Partnership improve on their academic skills and catch up on learning that may have been missed. Their parents are also involved and are viewed as a key to the children's success. Educational and support groups for the families are provided. The children receive help with homework, social skills training and exposure to recreational or cultural events by tutors trained to deal with their difficult and often interfering behaviors. The goal is that after one year in this specialized program, children can move into general community after school and tutoring programs. The Partnership also has a specialized Mentoring Program that is designed especially for the needs of this population, who may not be able to participate in other community mentoring programs. Volunteer mentors must commit for a full school year. They receive training in general mentoring, working with children with severe emotional disturbance, individualized training to help them work effectively with their mentees and ongoing training to reinforce their relationship with their mentees.

71. The Partnership has also developed a strong set of programs to deal with the issues that lead to institutionalization and exclusion for children with severe emotional disturbance. First, there is a Mobile Crisis Response Unit that will respond to calls within 10 minutes and respond to the crisis within one hour. Typically, it is some crisis for the child or family, where behavior is out of control and there is a concern about safety, which begins the cycle of institutionalization or reinstitutionalization for children and youth with severe emotional problems. When problems can no longer be handled in traditional outpatient services, the response had been to remove the child to secure everyone's safety and move him/her to a place where intensive services could be provided. In East Baltimore, the cycle is broken by collaborative efforts to provide crisis response to stabilize the situation and then connection with the Mobile Treatment Program that provides intense services flexibly in various community settings determined by the strengths and needs of the individual child and family. These teams are comprised of both professionals and community liaisons and they focus on the individualized needs of each child and family, finding the community resources and natural supports that will help them through the crisis and back to a situation where less intense outpatient services suffice. In addition families receive ongoing case management services to ensure a comprehensive and integrated approach to the child's and family's needs (frequently these children and families are receiving services from multiple agencies and sources). In order to bring children back to the community from out of state placements, an intensive approach to case management is used to wrap all of these and any other needed services around the child and family, rather than trying to make the child and family fit into existing programs and models.

72. As with the other types of approaches to addressing social exclusion for children and youth in East Baltimore, the Partnership draws on principles of utilizing community resources, partnering across the community to address issues and seeing the community as a place that can sustain and nurture children and youth. It also is an approach that is developed in light of the particular needs of the community by community partners, rather than being a solution imposed from the city, state or federal level.

Inclusive Approach to All Children with Disabilities

73. Other programs within Baltimore, of course, address the issues of youth with other types of disabilities. There is, as already noted, a move to provide services to children with disabilities within inclusive regular education settings, where the special services they require are delivered within the classroom. Often, other students may benefit from the extra supports. An example of this approach in Baltimore benefits both children with disabilities and those living in poverty in the same high schools. A program developed by TransCen, a private nonprofit organization created to develop programs to enable young people to successfully transition from school to work. They have implemented a program in Baltimore City Public Schools, called Baltimore Work-Based Learning 2000 Initiative, that assures transition supports for students with disabilities, by focussing on ensuring that *all* students, through participation in vocational, career education and school-to-work activities make a successful transition to

being included in employment. Program staff work with regular classroom teachers and school guidance counselors to provide lessons and experiences related to getting and holding a job. This program reflects the growing understanding at the policy and services level that all children, including those living in poverty and those with disabilities, are at risk for being excluded due to a lack of knowledge and skills that lead to employability.

Two Groups of Youth at Risk for Exclusion—A Unified Approach

74. There are clearly differences in the specific needs of youth with disabilities and those living in poverty to prevent social exclusion. It is, therefore, not surprising that the Federal and state policies that have developed to address the issues of these two groups reflect a contrast in philosophies. Policies related to children and youth with disabilities have come from a rights based model. Whether it is related to access to education, to other community services and activities or the right to treatment, the programs and legislation that serve children and youth with disabilities has been framed within the context of individual civil rights. Most programs and policies are based on an entitlement to services if the child/youth meets a specific set of criteria related to disability—e.g. education, and early intervention policies, supplemental disability income through Social Security policies. These policies establish a set of rights for individual youth and children and provide a process for ensuring those rights.

75. In contrast, policies that are targeted to support children and youth who live in poverty, have been developed from more of a population based model with policies and legislation targeted to enhancing the common good. Programs and policies target improving general social conditions and do not address the rights of individuals or even groups of children and youth. Characteristics of the Federal and state policies that are directed to youth in poverty have the following, contrasting characteristics:

- there are no entitlements or sets of rights related to these services.
- funding goes to support programs (even in the case of Job corps or other job training programs that serve individuals) rather than following individual youth to fund the specific services they might need.
- programs are created to address societal problems—crime, housing, unemployment, rather than individual needs.

76. Despite these two approaches to policy development at the Federal and state level, successful community models to address the prevention of social exclusion of both youth with disabilities and youth living in poverty, such as those in Baltimore, take the “all children” and community wide approach to the issue of social exclusion. As is well illustrated in the Baltimore examples, neither type of policy approach from the Federal and state level is sufficient to address social exclusion. It is the approach of building a strong community that ensures that all children and families needs are met within the community and by the community with the resources it can garner that is most promising. Single programs to address one societal issue or services developed to address the needs of individual children alone cannot build the supporting framework that addresses social inclusion for the next generation. Communities must take the approach that HEBCAC has used, which entails identifying the community’s needs and then weaving together from these many disparate policy strands the cloth of their community’s approaches to preventing social exclusion for its members.

77. At the Federal policy level there is a beginning recognition that strengthening communities and allowing them to build their own approaches and systems to support children and families may be the more fruitful approach. Boost4Kids, developed as part of Vice-president Gore’s Reinventing Government

initiative is supporting this philosophy in its chosen communities. The Federal government is developing partnerships with 10 State and local governments that are working together to enhance positive outcomes for children, youth, and families. These partnerships are designed to support the chosen communities to:

- Manage for results for children;
- Streamline administration;
- Address barriers at the federal, State and local levels--in ways
- allowable under current law--to better provide needed services and
- supports for children;
- Maximize the use of resources for services for children; and
- Share lessons with other communities.

78. With this type of direct working relationship among the Federal government, states and communities to successfully implement policy for children, youth and families, the United States may begin to see a shift in policy to reflect the pivotal role of community in addressing social exclusion and a range of other issues affecting our children, youth and families. With the models of communities such as Baltimore and its Historic East Baltimore neighborhood, there will be rich examples of how this shift in policy can support families and children in ways to reduce social exclusion for all our youth. When communities bring their strength and resources together to support children and families, even the most vulnerable of our youth will be able to enter the broader society and the arena of work and other economic opportunities.

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