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A NEW VISION: EMPOWERING PEOPLE FOR CHANGE

MAINE'S MODEL FOR UNIFYING STATE SERVICES FOR CHILDREN & FAMILIES

FINAL REPORT OF THE PRESIDENT'S & SPEAKER'S
BLUE RIBBON COMMISSION ON CHILDREN & FAMILIES

AUGUST 1991

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DEDICATION

DONALD V. CARTER

1927-1990

VISION — CARING *Our Late Colleague: The Epitome of a Dedicated & Caring Person*

As Maine and the Nation debated the dilemmas faced by children and families, State Representative Don Carter was one of the first with vision.

With his customary quiet wisdom, Representative Carter testified on June 7, 1989:

"It is especially important that State policy emphasize helping children before a serious problem exists. Today, most state funds and programs offer to help children after a problem exists... All too often we deal with the symptoms of child abuse, juvenile delinquency, or infant mental health. Many kids have problems that come from similar root causes. We must deal with root causes."

In recognition of Don's life, his service to all Maine citizens, and his caring for children, we dedicate this report to him with our sincere appreciation and deep affection.

We will deal with root causes.

Our thanks to Representative Donald V. Carter.



Charles P. Pray
President of the Senate

John L. Martin
Speaker of the House

114th Maine Legislature

President's and Speaker's
Blue Ribbon Commission On Children And Families
State House Station #155
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August 1991

Hon. Charles P. Pray
President of the Maine Senate
State House Station #3
Augusta, Maine 04333

Hon. John L. Martin
Speaker of the Maine House of Representatives
State House Station #2
Augusta, ME 04333

Dear Mr. President and Mr. Speaker:

We are pleased to submit the report of the Blue Ribbon Commission on Children and Families. This is the product of lengthy discussions, reviews, rewrites, and further deliberations on the part of the members, the staff, and interested parties. We commend the work of those individuals.

This report should be seen as part of a continuing process. The Commission designed a schematic plan, not a detailed plan. We provide a foundation for an appointed Commissioner to use when moving forward into the more detailed ingredients for implementation. The end result should be a more efficient and focused approach to meeting the needs of children with problems, but more importantly, an approach which emphasizes prevention and early intervention as a means for reducing those problems.

Other states which have moved to the separate state agency approach have tended to develop agencies to serve special problem children, adolescents, and their families. The enclosed report outlines an approach which addresses children in general, with a coordinated approach to not only treating already established problems, but to reducing future problems. This is an approach which has the potential to be a national model.

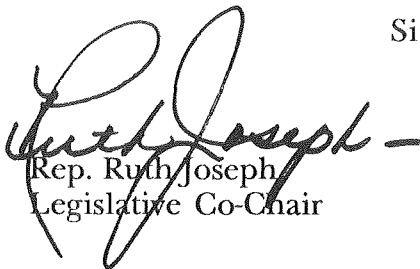
Our major recommendations include the establishment of a Department for Children and Families, a list of existing entities to be transferred into such an agency, a time frame and process for the more detailed planning and implementation phase, a Joint Select Committee of the Legislature to address children's issues, a permanent Commission to assist with monitoring and advising state government, a Family Foundation to support the Department by conducting research current to the needs of children and being involved in training, planning, and advocacy activities, a summary of revenue sources to support a transition to and operation of the Department, and principles and guidelines for its establishment.

It should be emphasized that the purpose of this recommended approach is to provide a new focus and efficiency in conducting services for children and families. It should not be seen as a lack of recognition for those State employees who have toiled long and hard in support of Maine's children within the present structure.

Due to the establishment of the Special Commission on Governmental Restructuring, we have made the assumption that this report will move to that body prior to any legislative action. Therefore, we have not prepared legislation as part of the content of this report. We have printed a number of the enclosed report for distribution, while the more detailed addendum which contains supporting materials will be printed in very limited quantities. It was felt that the cost of printing at this time should be reduced by proceeding in this manner.

We are available to respond to any questions or to participate as a part of any future deliberations related to the content and goals of this report.

Sincerely,



Rep. Ruth Joseph
Legislative Co-Chair



John Rosser
Chair

**PRESIDENT'S AND SPEAKER'S BLUE RIBBON COMMISSION
ON CHILDREN & FAMILIES**

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TABLE OF CONTENTS

PROLOGUE	1
CHAPTER ONE: Executive Summary.....	5
CHAPTER TWO: Introduction	13
CHAPTER THREE: Findings.....	17
CHAPTER FOUR: Recommendations.....	21

PROLOGUE

It was difficult to select the basic words and phrases to explain and describe our **New Vision: Empowering People for Change** to help children. It was difficult to concisely describe the culture of Maine, its impact on children and families, the kinds of problems which affect them, and the complex bureaucracies which are intended to help children and families. It was equally difficult to enumerate fundamental principles to guide our model for change. Yet, the Commission firmly believes that with a positive method of implementation, it is possible for the essence of our vision and its language to become the daily approach for helping children.

The Blue Ribbon Commission recommends action to empower people to ensure that children have better opportunities for fulfilling their potential, for people to attain family well-being, and for sustaining society. The Commission found that the following definitions are essential to the foundation for our vision and to understanding easily the language used throughout this report.

1. AT-RISK

The greatest struggle for the Commission was to agree on terms to describe the problems affecting children and families. We made a conscious decision not to use words that label or stigmatize. The report tries not to use terms such as "delinquent," "substance abuser," or "abused child." We decided not to refer to singular, pigeon hole problems, categorical names for programs, or "brand name" labels for problems.

The Commission found that the most appropriate way to refer to people who need help is children at-risk, families at-risk, or adults at-risk. We all know parents at-risk, people at-risk.

"**AT-RISK**" is used throughout this report as an encompassing term to describe any person or group of persons with one or more conditions which diminish their capacity to fulfill their potential, or to participate fully in the daily life and business of the community.

A child at-risk or a family member at-risk is a person who has an identifiable, measurable "need" involving one or more of the basic building blocks — the essential components of child development, or who is affected by levels of "competence" or one of the conditions, disorders, or problems discussed on the next page in 2.

2. CONDITIONS

Throughout this report "conditions" is used to refer to any of the multiple problems affecting children and families. Because of our commitment to emphasize positive child development, healthy family functioning, and family well-being we made a conscious attempt to use language which highlights strengths rather than weaknesses. We do not wish to label youngsters or families by phrases that may inadvertently contribute to reinforcing problems, diminishing competencies, or predicting unacceptable performance. By underlining the positive, we do not want to confuse.

The conditions to which we refer include a variety of problems which can negatively affect children and families including those listed in the next paragraph. The Commission believes that the following conditions do negatively impact children and deserve the attention of the State:

Poor pre-natal care, infant deprivation, early childhood problems, pre-school handicaps, alcoholism, low aspirations, adult or child abuse and neglect, drug abuse, family problems, childhood health handicaps, juvenile delinquency, mentally ill children, emotionally disturbed youth, mentally retarded youngsters, kids in poverty, school dropouts, special education conditions, special needs, spousal abuse, truancy, teen pregnancy, teen suicide, and a host of other matters related to the essential components of child development or other human problems.

The Blue Ribbon Commission was charged with preparing legislation to implement its recommendations for establishing a department to have unified responsibilities for offering functionally integrated services. This task was delayed because of the current debate about the roles and responsibilities of government and by the current fiscal crisis. We offer our recommendations for unified services and the reduction of duplication and fragmentation. We also recognize that the significant consolidation and functional integration we propose to attain through reorganization must be carefully timed and planned to fit into other policy and restructuring proposals. Therefore, the Blue Ribbon Commission has not included draft legislation in this report. We respectfully urge the Governor and the Legislature to fully implement our recommendations in a prudent and timely manner of their choosing.

Acknowledgement

We acknowledge the diligent and extended work done by members of the Blue Ribbon Commission. Commission members possess broad, in-depth knowledge and comprehensive practical experience. Their greatest strength was in outlining the essential components of child development and the fundamental necessity of describing a new vision for empowering people to change Maine's services for children and families. The greatest gift the members offered Maine's citizens is their unrelenting commitment to challenge government, society, and themselves to better fulfill responsibilities for children.

Our very special appreciation goes to the panel of editors, professional and support staff who contributed to this report. They unselfishly invested productive ideas and many uncompensated hours far beyond the call of duty to assure a successful conclusion of the Blue Ribbon Commission's endeavor.

CHAPTER 1

EXECUTIVE SUMMARY

Editor's Note: The Blue Ribbon Commission recognizes that due to the extensive debate about the state budget and the anticipated recommendations of the Restructuring Commission, the proposed recommendations and timetables may need to be adjusted when implemented.

MISSION OF THE BLUE RIBBON COMMISSION

The Blue Ribbon Commission on Children and Families was initiated in early May, 1990 by the Honorable Charles P. Pray, President of the Maine Senate and the Honorable John L. Martin, Speaker of the Maine House of Representatives. Its mission was to:

- Develop a plan to establish a distinct cabinet-level Department for Families and Children;
- Prepare legislation implementing a department with unified responsibilities for offering integrated services to Maine's children and families;
- Define the principles and components essential for State services to be well coordinated to fully attain a functionally integrated pattern of unified and consolidated administration and service delivery; and
- Identify methods of service delivery which are holistically oriented, child-focused, and family-focused.

BACKGROUND

During the 1980's the issue of "children and families at-risk" evolved into substantial and unresolved public policy debate. Our fellow citizens, educators, law enforcement personnel, business people, clergy, state leaders, and others became concerned. Simple questions were asked with increasing frequency.

"What's wrong with kids today?"

"Can't that family control their kids?"

"How do we sustain our society when children and families are at-risk?"

*"Are kids learning to fulfill their potential?"
"Who's raising our children?"*

The Blue Ribbon Commission conducted 16 meetings from May 1990 through April 1991. We attempted to answer some of the above concerns. All meetings were open to the public and included parents and community members. The basis for the Commission's formation and deliberations was L.D. 1666, which the Legislature considered in 1989 and 1990. The legislation proposed the establishment of a Department for Families and Children.

National authorities who addressed the Commission provided information on programs and planning efforts in other states about services for children at-risk and their families. Their presentations included information about strategies developed at the national level, the laws of all states, the plans and policies of other states, and their own hands-on experience. The twenty members of the Commission deliberated major policy issues at length, using work sheets, consulting with key administrators of children's programs, and conducting research of their own. Members reached consensus on the findings and recommendations which are included in this report.

Our report, **A New Vision: Empowering People For Change — Maine's Model For Unifying State Services For Children And Families** documents the fact that children and families at-risk are matters of national and state concern. Maine and the nation are engaged in a public policy debate regarding the best methods to address problems and potential problems associated with child development and family life. There is emerging consensus on principles to encourage positive child development, positive family life, and for guiding and restructuring service delivery. There is a growing field of information about how government and communities can become more supportive of at-risk families and children. Actions taken by other states provide a sound foundation for building a positive future. The need for innovative public and private action in Maine is becoming increasingly clear.

Our report consolidates the latest knowledge and best experience. We build on the work of national authorities and other states.

SUMMARY OF FINDINGS

The Blue Ribbon Commission on Children and Families finds:

1. **THERE IS A NEED TO ASSURE THE AVAILABILITY OF SERVICES FOR MAINE'S CHILDREN AND FAMILIES.** Many Maine children do not have adequate opportunities for personal development. Families in Maine are often isolated and lack natural support networks and other ties to the community. This isolation contributes to a

diminished capacity to fully and productively participate in the public and private life and business of the community. Isolation compounds the proliferation of problematic conditions such as poverty, substance abuse, illiteracy, and other human problems which significantly limit the potential for health family life and individual development. In addition, the Commission finds that current services are overloaded and not able to meet the needs of Maine's at-risk families and children.

2. **STATE GOVERNMENT HAS RESPONSIBILITIES FOR AND ROLES TO PERFORM IN PROVIDING SERVICES FOR MAINE'S CHILDREN AND FAMILIES.** When children and families are severely affected by poverty, substance abuse, illiteracy, and other human problems that diminish their ability to fully participate in the public and private life of the community, the State has roles to fulfill. These roles involve encouraging healthy child and family development, coordinating a range of supportive services for children and families at-risk, providing financial assistance, intervening to protect children who are abused and/or neglected, and making other services available to families and children who need them.
3. **CURRENT PRACTICES FOR PROVIDING SERVICES FOR CHILDREN AND FAMILIES IN MAINE LACK COORDINATION AND PURPOSE.** There are a number of state agencies currently providing services for children and families. These agencies are not coordinated, share no unified mission, and offer no single point of entry, responsibility, or accountability. The Legislative and Executive branches of government have responsibilities for developing policy and providing services for children and families. Neither branch of government has coordinated, unified, or efficient mechanisms for carrying out its responsibilities.
4. **CURRENT STATE POLICIES RELATIVE TO FUNDING SERVICES FOR CHILDREN AND FAMILIES ARE INCOMPLETE AND INEFFECTIVE.** The State currently fails to maximize the use of federal dollars and previously has not claimed all available federal matching for both administrative and supportive service costs. We recognize recent policy and budgetary actions to claim federal funds more appropriately. It is estimated that over \$40 million in federal dollars could be obtained if the state chooses to seek them.
5. **THE STATE CURRENTLY WASTES RESOURCES THROUGH PIECEMEAL POLICIES, FRAGMENTED, INEFFICIENT, AND COSTLY DUPLICATION OF SERVICES, ORGANIZATIONAL UNITS, AND ADMINISTRATIVE PRACTICES.** Over 1,000 state employees provide services for Maine's children and families at a cost of over \$100 million dollars a year. Many of these employees carry out duplicative efforts, doing the same work that counterparts in separate agencies

perform. Significant savings would result from the consolidation of duplicative services, organizational units, administrative practices, service contracts, and administrative oversight and audits.

6. **A LACK OF VISION LEAVES SERVICES WITHOUT AUTHORITY OR CAPACITY.** Maine's policy of maintaining multiple state agencies, side-by-side similar state functions, and overlapping responsibilities provides at-risk children and families services which are fragmented, inefficient, costly, and lacking in well-defined authority. Because the present piecemeal state approach lacks unified vision to guide child development and comprehensive family services, the state's ability to encourage appropriate and adequate community supports and community resources for children at-risk is compromised.

SUMMARY OF RECOMMENDATIONS

The Blue Ribbon Commission on Children and Families makes the following recommendations:

1. Adopt a Unified Mission Statement

The Blue Ribbon Commission recommends that the State adopt the following mission statement to govern its roles in the provision of service to children and families:

The State of Maine declares that each family has primary responsibility to provide for the developmental and human needs of its members and that state government has a responsibility to help families fulfill that obligation when they are unable to do so. Children have the right to a consistent nurturing environment and to the opportunity to attain their potential for development.

The mission of government is to complement the roles of families, support networks and society in order to enhance their strengths. State government has the responsibility to intervene on behalf of children at-risk and to encourage the return to, or creation of, a nurturing family environment. The state's response should include supportive services and interventions that offer a functionally integrated continuum of appropriate and reasonable support, either directly or in concert with private organizations. Services should address the cognitive, educational, emotional, health, physical, and social needs of children and their families. The state's intervention is subject to the rights of

families and children, their preferences, statutory authorization, and the availability of funds.

NOTE: The Commission recognizes the efforts of the Governor's Task Force to Improve Services for Maine's Children, Youth and Families in the development of the mission statement.

2. Define the Roles of Government

The Blue Ribbon Commission recommends that the roles of State government in providing services for children and families be more concisely defined and that the State base the services it provides in well articulated principles. These guiding principles are outlined later in this report, as are the responsibilities that the Commission believes reside with State government.

3. Creation of Joint Select Committee for Children & Families

The Commission recommends the establishment of a Joint Select Committee for Children and Families to be a focal point for public policy discussion of children's and families' issues and to offer oversight of state administered services. The Commission recommends that the Joint Select Committee for Children and Families be created by Joint Order during the 1991 session of the Legislature as an eventual companion to legislation enacting a Department for Families and Children.

Members of the Commission have divided opinions about the effective date for establishing the Joint Select Committee. Some recommend the effective date for the formal transition period to a unified department be the same as that for the establishment of the Joint Select Committee (i.e., October 1, 1991). Others recommend that the two occur separately, creating the Committee effective immediately upon passage of the joint order (i.e., June, 1991.)

4. Establish a Unified Department for Families & Children

The Commission recommends that a distinct department for children and families be established to unify responsibilities for providing integrated delivery of functionally consolidated supportive services for families and children who need them. The department should be formed by consolidating, transferring, and revitalizing existing programs, administrative practices and personnel.

The programs and agencies recommended for consolidation are currently housed in the Department of Corrections, the Department of Education, the Executive Department, the Department of Human Services, the Department of Mental Health and Mental Retardation, and the Interdepartmental Council. As part of this consolidation, the Commission also recommends initiating a unified case management

system which is holistically-based, comprehensive, designed to stress education, human development, and preparation for the job market, and organized around the needs of high-risk children and their families. Members of the Commission strongly recommend that the transition to and full operation of the new unified department take place by January 1, 1993.

5. Consolidation of Existing Committees

The Commission recommends the consolidation of ten existing committees into a single independent advocacy organization for children and families. (Those committees and commissions are listed fully in the body of this report.) The Maine Commission for Children and Families should be an independent group designed to advocate for children and families and to provide an additional check and balance between the public and the State.

6. Creation of a Family Foundation

The Commission recommends the establishment of the Maine Family Foundation. This foundation is envisioned as a public-private partnership established to develop and promote positive family life, positive child development, primary prevention, early intervention, improvements in state policy and services, effective program administration, and research relative to children.

7. State & Local Education Coordination

In order to assure improved educational outcomes for all school age children, particularly those served by the Department for Children and Families, the Blue Ribbon Commission recommends that significant and substantial actions be taken to define, develop, and increase the coordination and cooperation between special education services personnel at the local level and the personnel and services of the Department for Children and Families.

8. Medicaid for Children

The Commission recommends full exploration of the transfer of the administrative responsibilities for the Medicaid program to the Executive Department.

9. Transition Services for Children At-Risk

The Commission believes that all children who are receiving supportive services through the Department for Children and Families and preparing to live independently should be eligible for transition services, modeled on the Transition Committee's program. The Commission recommends that the department's transition policy and

program be designed to prepare all service recipients for independence from the Department's supportive services. This process and policy should be implemented after January 1, 1993.

10. Unified School District within the Department

The Commission recommends that during the transition process, the Department for Children and Families undertake an exploration of the establishment of a unified school district or intermediate educational unit within the Department.

11. Pineland Center

The Commission recommends that the goals, principles, and purposes that guide services for the Department for Children and Families be applied to services provided to the small number of children residing at Pineland Center.

12. Primary Prevention & Other Services

The Commission recommends that state supportive services focus on primary prevention and early intervention. Prevention and early intervention should be components of a comprehensive continuum of services and should be offered in concert with other private and public resources in the community.

Summary

The Blue Ribbon Commission believes that the creation of a unified Department, a Family Foundation, an independent advocacy and oversight commission, a unified case management approach, and closer coordination with school systems will contribute to preventing the development of significant, life-long problems and difficulties that negatively affect the well-being of many Maine children and families.

The Commission also believes functional integration and consolidation of state administration and services within a unified Department for Families and Children will result in services which will help at-risk people more efficiently and be delivered more cost effectively.

CHAPTER 2

INTRODUCTION

The members and staff of the Blue Ribbon Commission on Children and Families searched for words and phrases to describe their vision for addressing the complicated, recurring, and sometimes unpleasant conditions that can and do affect families and children in Maine. The difficulty arose from trying to succinctly describe the kinds of multiple problems which face families and children and from problems associated with recognizing differing views of what constitutes appropriate remedies, a growing volume of professional jargon, and, deeply rooted ideological convictions and beliefs. The Commission has attempted to submit a final report which is clear, does not stigmatize or label, and is consistent in the language that it uses to describe the problems and concerns it has identified and the changes that it envisions.

Commission members believe that all children in Maine deserve equal access to opportunity, regardless of their socioeconomic status, cultural and racial background, or other individual histories or characteristics. The Commission members also believe that state government, families, communities, schools, health care providers, places of worship, and places of work all contribute to the lives of children and families and to the opportunities available to them.

This report is predicated upon these and several other basic beliefs: that the well being of Maine's children and families is important to the overall health of society; that each segment of society contributes to family life and the well-being of children; that society has a role to fulfill in addressing the causes of, and consequences for, families and children at-risk.

The Blue Ribbon Commission believes that a full range of resources need to be available for children and families. Members believe that all segments of society can be service delivery networks and support families and children so that they may fully participate in the opportunities that are crucial to their well-being and to the health of the community and the state. This report recommends enhancing the lives of children and families through reorganizing, revitalizing, and consolidating government programs and services and increasing the

involvement of communities and members of the general public in the development and delivery of services to children and families at-risk.

GUIDING PRINCIPLES OF THE COMMISSION

The following principles and beliefs guided the work of the Commission:

1. All segments of Maine society should be empowered to participate in serving as supportive networks for families and children with, or without the participation of State government. Voluntary, private, and joint-public-private efforts should exist.
2. Society as a whole benefits when there is a strong sense of shared community responsibilities for the well-being of children and families, respect for individual differences, and a commitment to helping all members of the community become active and productive participants in the public and private life and business of the community.
3. Improving the participation of communities and the efficiency of government programs and services will take time. Improvements will be implemented gradually through a well designed plan of action.
4. Resources and service delivery networks should exist to encourage community involvement in the well-being of its children and families and to provide direct help to children and families at-risk or in need.
5. All segments of society are interdependent and can be sources of support and service delivery for families and children. Community involvement can contribute significantly to family well-being, development, and the protection and care of children.
6. Changes in economic, social, and family patterns have a significant impact on children and families. Services for families and children should be flexible so that they can respond to and address changes as they occur.
7. Poverty, illiteracy, substance abuse, physical and sexual abuse, and other social and human ills contribute to the break-down of families and to a host of other problems for children. These problems can cross generations and are basic to many at-risk children and families experiencing significant difficulties becoming productive participants in the public and private life and business of the community. Public policies which ignore these root causes and fail to offer preventive actions may be ineffective.

8. There is a need for a concentrated and coordinated effort to increase opportunities for children and families at-risk and to empower communities and society as a whole to participate in this effort. The State has significant roles and responsibilities to fulfill in this effort.
9. Primary prevention of, and early intervention in, problematic conditions which affect children and families is crucial to the success of any government response.
10. Services for families and children should be appropriate for the age and developmental level of the child involved, holistically oriented, and child- and family-centered. Interdisciplinary teams are an effective way to deliver services.

FACTORS AFFECTING FAMILIES & CHILDREN IN MAINE

Rapid changes in the economic, social, and family patterns of our society have a significant impact on children and families in Maine.

Many families now consist of one parent, generally a mother. The numbers of women with children who enter the work force have increased dramatically and have radically altered the traditional model of family life known to us for the past thirty years. Far fewer children in the 1990s grow up in established nuclear and extended families with grandparents and other supportive family members available for help than did in the 1950s. In addition, nuclear families are increasingly disengaged not only from extended families, but also from the support of other segments of society.

Close knit neighborhoods, extended families living in close proximity, active school and community groups, a consistent work presence over a long period of time, and conditions more supportive of family life, were common twenty years ago. They are increasingly less common in 1991.

In addition to changes in social and family structure, in Maine today and across the country, growing numbers of families and children struggle with poverty, some form of abuse, poor pre-natal or newborn care, health conditions that consume family resources, difficulty with learning or completing school, and other human difficulties which limit their capacity to participate fully in their community. The cost in human potential, state and community services, and other vital resources is enormous.

According to the 1989 report of the Maine Committee on Primary Prevention:

- 10,000 juveniles are arrested each year;
- 2,100 come under the supervision of the Department of Corrections;
- 16,250 are chemically dependent or at risk of becoming chemically dependent;
- 2,600 drop out of high school;
- 25,000 are referred for child abuse or neglect;
- 15,000 experience serious emotional problems;
- 480 are seen in hospitals because of self-destructive threats or attempts; and
- 2,800 become pregnant.

These figures attest to the significance of the problems facing Maine's children and families and to the costs for society. They also point to the importance of providing help and supportive services that are effective and to the need for government to fulfill its roles.

CHAPTER 3

FINDINGS

A. A NEED EXISTS FOR SERVICES FOR FAMILIES & CHILDREN

There are growing numbers of children and families in Maine who are mired in poverty, substance abuse, illiteracy, and other human problems which significantly affect their ability to fully participate in the opportunities for productive participation in the public and private life and business of the community. Growing numbers of children are referred to the State for a wide range of conditions and problems. Service providers and state programs are overloaded with requests for assistance that cannot be met within existing resources. The need for services is greater than the services available.

B. GOVERNMENT HAS ROLES & RESPONSIBILITIES TO FULFILL

The Blue Ribbon Commission on Children and Families believes that the State has roles to fulfill in:

- Encouraging healthy child development through programs such as child development services, Head Start, intervention for children with developmental disabilities, family support programs, public health nursing, and the Women, Infants, and Children's Program (WIC).
- Defining and coordinating the range of supportive services which are necessary to protect and help children and families at-risk.
- Supplementing financial and other resources for families who are unable to adequately provide for their children.
- Offering children with special needs appropriate early intervention, home-based care, family support, and other community services.
- Providing protection, residential care, and treatment for children who are abused or neglected.
- Making services available for persons with mental illness and children with emotional disabilities in, or as close as possible to, their home communities.

- Developing and assuring the availability of community corrections and corrections programs for juvenile and adult offenders which are responsive, rehabilitative and habilitative, and which provide sufficient space and programming.

C. CURRENT STATE SERVICES FOR CHILDREN & FAMILIES LACK COORDINATION & PURPOSE

State policies and supportive services for children are currently conducted through a wide variety of organizational fiefdoms, spread throughout an array of state bodies, agencies, and administrative committees. There is no unified mission, no coordinated well defined public policy, and no "single case manager" responsible for addressing the increasingly complex needs of children and families in Maine. There is also no single, strong, independent voice of advocacy or expertise.

The Legislative and Executive Branches of government both lack a single authority which is accountable for policy development, oversight, outcomes, and action related to State and community involvement in the lives of Maine's children and families.

The Legislative branch has at least five joint standing committees which have significant defined roles and responsibilities for selected policies affecting children. They are: Appropriations and Financial Affairs, Corrections, Education, Human Resources, and State and Local Government. No single legislative committee has unified responsibility for oversight and policy considerations affecting children and families.

The Executive Branch has at least five major departments with significant roles and responsibilities for operating selected programs affecting children and families. There is no single administrative department or commissioner with full-time responsibility for managing state programs affecting children and families. Current services are fragmented, uncoordinated, inefficient, and delivered inappropriately to children whose needs have been inadequately defined or whose needs have been defined by labels, not individual assessment. Some Commission members believe that the current fragmentation of services contributes to, rather than ameliorates, the problems of Maine's children and families.

The Commission heard from parents of at-risk children and service providers about the lack of a single state organization with authority to make decisions and to which requests for help can be addressed. Legislators expressed concern that there is no coherent policy. Rather, there are a number of divergent policies and contradictory bureaucratic voices defending individual turfs and separate priorities at appropriations and other public policy hearings. The Commission found that many state bureaucrats have limited understanding of how proposals tie

together to create a single mission or unified agenda for children and families. Children with multiple needs are served by multiple agencies with multiple workers and multiple case plans. Services are disjointed and fragmented.

The Commission believes that state supportive services should not continue to be operated by a wide array of state agencies and administrative committees. Service delivery should not continue to be coordinated by numerous inter-agency administrative committees with little authority, which are further limited by turf issues. The Commission believes that the many administrative committees are time consuming, expensive, and relatively unproductive.

D. STATE FUNDS CAN BE SAVED & INVESTED IN CHILDREN'S SERVICES

The Commission found that through more efficient use of state dollars, savings can be realized. The resulting savings can be used to increase services for children and families. Eliminating administrative duplication and inefficiency will make more money available for service delivery.

In addition there are millions of dollars available in federal funds that previously have gone unclaimed.

We recognize recent policy and budgetary actions to claim federal funds more appropriately. The Commission believes that its recommendations will result in savings which are significant. Policy-makers will be called to decide how to invest the savings – return it to the general fund, redirect it to other programs, or invest it in services for children and families. The Commission strongly recommends that the savings which result from consolidation and unification be reinvested in programs for children.

E. FISCAL POLICIES INCOMPLETE & INEFFECTIVE

In many programs, significant amounts of state general fund dollars have financed 100% of *administrative* costs even though federal matching funds could have covered as much as 50% of the cost. For every \$500,000 of state general fund dollars that now pay fully for administrative costs, the Blue Ribbon Commission finds that 20% could be recouped from the federal government. In some programs, this percentage of uncollected federal money may be as high as 60%.

The Interim Plan for Development of a Medicaid Plan for Children and Families of Maine, written by The Institute for Human Services Management and C.A.R.E.S., Inc. and published in 1991, presents detailed information on the State's failure to obtain available federal revenues. This report indicates that a \$2 million investment will result in additional federal funds for children totaling \$46 million in the first three years, and an additional ongoing annual revenue of \$20 million. One reason for these shortcomings is the fragmentation of services and the lack of coordination between agencies and departments.

There are substantial combined total savings to be gained from restructuring, unifying, reducing duplication, and making fuller use of federal funds.

Long-term savings can be attained through enhanced prevention and early intervention services for children and families. Clearly, it is feasible to reduce the future number of at-risk people who may become participants in the criminal justice, corrections, mental health or welfare systems of local and state governments at great expense to taxpayers.

With a unified Department for Families and Children, a family-focused approach, interdisciplinary teams, unified case management, and a Family Foundation, it is possible to prevent more at-risk children from becoming at-risk adults who participate in government programs. If we prevent five children from becoming adult patients at a state institution for people who are mentally ill, we will reduce future costs for taxpayers by an average of \$350,000 per year.

It is better to pay a little now than to pay a lot more later. More importantly, it is better to care for children today than to treat adults who are mentally disabled tomorrow.

F. STATE RESOURCES WASTED THROUGH DUPLICATION

During the fiscal year ending June 30, 1990, more than 1,000 state employees located within five state agencies utilized over \$100 million dollars a year offering supportive services for at-risk children and their families. Of those employees, 168 carried out only administrative functions. The Commission finds that these administrative costs could be significantly reduced through the creation of a unified Department and the elimination of duplicative administrative functions. For example, four of the five state agencies providing services to children and families currently contract with the same community providers for the provision of residential care and treatment. These four departments utilize four separate contracts, budget requirements, and audit procedures. In a unified department, these overlapping requirements and costs would be significantly reduced. A savings for State government and for community providers would be realized.

CHAPTER 4

RECOMMENDATIONS

The Blue Ribbon Commission on Children and Families calls for a redefinition of the roles and responsibilities of government, a redirection of resources, more use of community and other non-state support networks and resources, a consolidation of state government's children's bureaus, organizations, and administrative practices, and the functional integration of state administered services for children.

The Commission believes these steps will unify and focus state services for children and families and establish reasonable limits on the roles and responsibilities of State government. The Commission believes that adoption of these recommendations will increase the number of children in Maine who live in healthy families, who thrive, who are supported and encouraged by nurturing natural support networks, and, will reduce the numbers of children who rely on state-delivered supportive services. The Commission also believes that these changes will result in state services which are more efficiently and effectively administered, less costly, more capable of offering child- and family-centered help, and more reliant on local, family, and community-based resources.

The Commission makes the following recommendations.

I. ADOPT A UNIFIED MISSION STATEMENT

The Blue Ribbon Commission recommends that the State adopt a unified mission statement governing its roles in providing services to children and families. That mission statement is as follows:

The State of Maine declares that each family has primary responsibility to provide for the developmental and human needs of its members and that state government has a responsibility to help families fulfill that obligation when they are unable to do so. Children have the right to a consistent nurturing environment and to the opportunity to attain their potential for development.

The mission of government is to complement the roles of families, support networks and society in order to enhance their strengths. State government has the responsibility to intervene on behalf of children at-risk and to encourage the return to, or creation of, a nurturing family environment. The state's response should include supportive services and interventions that offer a functionally integrated continuum of appropriate and reasonable support, either directly or in concert with private organizations. Services should address the cognitive, educational, emotional, health, physical, and social needs of children and their families. The state's intervention is subject to the rights of families and children, their preferences, statutory authorization, and the availability of funds.

II. DEFINE THE ROLES OF GOVERNMENT

The Blue Ribbon Commission recommends that the roles of state government in providing services for children and families be more concisely defined and that the State base the services it provides in well defined principles. These guiding principles, outlined on pages 14 and 15 of this report, guided the work of the Commission and should be adopted by the State to serve as the principles that guide its programs and services.

The Commission also recommends that the roles of government be clearly defined to include the following: (1) encouraging child development through a variety of programs and services, (2) increasing opportunities for children with developmental disabilities, (3) providing family support services, (4) providing public health nursing, (5) defining and coordinating the range of supportive services which are necessary for children and families at-risk, (6) providing financial and other resources to families who are unable to adequately provide for their children, (7) offering children with special needs appropriate early intervention, home based care, family support, and other community services, (8) providing protection, residential care and treatment for children who are abused or neglected, (9) making services available for persons with mental illness and children with emotional disabilities in, or as close as possible to, their home communities, and (10) developing and assuring the availability of community corrections and corrections programs for juvenile and adult offenders which are responsive, rehabilitative and habilitative, and which provide sufficient space and programming.

III. ESTABLISH A UNIFIED DEPARTMENT FOR CHILDREN & FAMILIES

The Commission recommends that a distinct department for children and families be established with unified responsibilities for

providing integrated delivery of functionally consolidated supportive services for children and families in need. The Commission has identified programs within five state agencies that form parts of Maine's response to the needs of children and families. The Commission strongly believes that the fragmented pieces can be revised and integrated as the functional heart of a unified Department for Families and Children. The Commission recommends that the following programs be transferred out of their existing agencies and into a unified Department for Families and Children:

CORRECTIONS: Juvenile correctional services including youth detention, the Maine Youth Center, juvenile probation and parole, juvenile community corrections services.

EDUCATION: Child development services including the Interdepartmental Coordinating Committee for Pre-school Handicapped Children, 0-5 programs, and PL 99-457 programs.

EXECUTIVE DEPARTMENT: Head Start, children's substance abuse programs funded by the Office of Substance Abuse.

HUMAN SERVICES: Bureau of Child and Family Services including child care and purchased social services, Bureau of Health including the Public Health Nursing Program, Maternal and Child Health Program, Adolescent Pregnancy & Parenting, Family Planning Program, Genetic Disease Program, Handicapped Children's Program, Women, Infant & Children Program, Pre-natal Program, and the Family Preservation Program of the Bureau of Income Maintenance.

MENTAL HEALTH AND MENTAL RETARDATION: Bureau of Children with Special Needs including the Elizabeth Levinson Center, Military & Naval Children's Home, Infant Development Center, and community services for children, Bureau of Mental Health's AMHI adolescent Unit or its successor(s), Bureau of Mental Retardation children's programs except those provided at Pineland Center.

SERVICES HOSTED IN SEVERAL AGENCIES: Committee on Transition and Interdepartmental Council.

ADDITIONAL RECOMMENDATIONS FOR THE UNIFIED DEPARTMENT INCLUDE:

Creation of a Unified Case Management System

The Blue Ribbon Commission places great emphasis on functionally integrating and improving the delivery of state administered services. The Commission believes strongly that developing a unified case

management system which is holistically based, comprehensive, designed to stress education, human development, and preparation for the job market, is necessary to appropriately address the needs of children and families at-risk.

One case manager per child/family is recommended as part of the consolidation of service practices including case management focused on primary prevention, early intervention, and other help designed to improve family well-being. In addition, the Commission recommends extensive utilization of interdisciplinary teams capable of offering a comprehensive range of integrated supports and resources which address the needs of children and families.

Employee Preparation

Employee preparation and retraining for all affected state employees and non-state agency employees is strongly recommended. This training should take place well in advance of November 30, 1992. The Commission also believes that extensive employee participation in planning and implementing the consolidation of administrative and service delivery functions is crucial to a successful outcome.

Transition Process & Timetable Recommended

The Commission strongly recommends the transition to the unified department include the following key actions and preparations in the sequence and of the duration suggested below. *(Editor's Note: The Blue Ribbon Commission recognizes that due to the extensive debate about the state budget and the anticipated recommendations of the Restructuring Commission, the dates outlined in this timetable will need to be adjusted)*

- Legislation authorizing transition enacted – June 1991
- Joint Select Committee authorized – June 1991
- Commissioner and other key leaders appointed – October 1, 1991
- Enabling legislation enacted including transfer of funds and statutory change – April 1992
- Administrative plan completed – September 30, 1992
- Employee preparation and training complete – November 30, 1992
- Department operational (all programs and staff transferred – January 1, 1993).

The Commission recommends that key leaders be appointed by October 1, 1991 and that the administrative plan for the Department be complete by September 30, 1992, with four Interdepartmental Council positions transferred to work with the Commissioner to complete the administrative plan and facilitate the transition. Existing bureau directors, division directors, program managers, and regional managers should participate as members of a senior workgroup for administrative

planning. The responsibility for funds, program management, and service delivery should be transferred and operational simultaneously, unifying the department no later than January 1, 1993.

To functionally consolidate services, the Commission recommends the integration of 0-5, child development services, 3-5, Headstart, 0-18 health programs, 0-18 children's mental health and mental retardation programs, the integration of child welfare, juvenile justice, and juvenile substance abuse, and increased coordination with special education programs and the development of a unified school district plan.

Guidelines for Department Implementation & Operation

The Commission believes that implementing a unified Department for Children and Families will require a transition plan and implementing legislation. The plan should be consistent with the unified mission statement recommended earlier and should include:

- Direction to offer educational, developmental, health, medical, mental, social, and correctional services for children and families. The Department should be authorized to address issues related to family functioning, child development, and conditions affecting children including, but not limited to, adult or child abuse and neglect, drug or alcohol abuse, preschool education, early childhood development, low aspirations, family problems, family violence, juvenile delinquency, medical problems, mental health problems, emotional disturbance, mental retardation, poverty, school dropouts, special education, spousal abuse, truancy, teen pregnancy, suicide, and other conditions which place children and families at-risk.
- Authorization for the Commissioner to develop a plan which is consistent with the Blue Ribbon Commission on Children and Families' recommendations and recommendations of the Joint Legislative Committee for Children and Families. Subject to the availability of funds, the plan must include services which are family-and child-focused, which focus on strengthening natural and community support networks, which are holistic in nature and designed to restore the capability of the nuclear family. The plan should create a one-case manager-one-family approach, consolidate the administrative and service functions of government which help children and families, eliminate unnecessary layers of bureaucracy, and offer a comprehensive continuum of care with unified access points, application process, assessment practices and casefile, strong accountability and quality assurance, a procedure for evaluating outcomes, pilot programs and model projects, and a service delivery model which integrates the administrative and service functions of government at the regional and central office levels. The plan should identify cost savings.

Organization & Staffing

More than 1,000 existing state employees will be involved in the transition to a unified Department for Children and Families. The Commission recommends that the first step for the Commissioner of the new department is to prepare an organization and staffing plan, well defined lines of communication and responsibility, a reliable inventory of resources, and an assessment of the target populations to be served.

The Commission's review of the current staffing and financial resources highlighted the need for flexibility and the necessity for restructuring government in the immediate future. In November of 1989, it was estimated that by June 30, 1990, the five major state agencies offering help for children had 7,338 staff positions and funds totalling \$1,681,000,000. By April of 1990, the same five agencies, as part of their fiscal year 1991 funding, had 7,265 staff positions and \$1,792,000,000.

By March 14, 1991, the total general fund resources available for fiscal year 1991 dropped by \$43 million in some accounts and rose by \$65 million in others. Federal allocations dropped by \$7.3 million in some accounts and increased by \$37 million in others. Also, several hundred staff positions were abolished or vacant and all staff were required to take five days off during the final three months of the fiscal year. The March 1991 changes had an enormous impact on agencies providing services for families and children. The budgets for 1992 and 1993 are still undecided at the time this report was prepared.

This changing fiscal picture makes it difficult for the five child-serving agencies to estimate their actual costs or resources or to document the number of unduplicated children and families which they serve. Each agency, and frequently each program within an agency, maintains separate data not readily comparable or compatible. It is also difficult to determine if, for what purpose, how frequently, or how well one child or one family is served by these five agencies.

Because of the changing nature of funding and staffing patterns in government, the Commission makes the following additional recommendations relative to the establishment of the unified Department:

- One Commissioner should be designated to the Department for Children and Families. This individual should work in cooperation with the other affected Commissioners to secure resources for the effective and efficient management of the unified Department. Funds for indirect administrative allocations for the unified Department should be based upon the present average percent of indirect administrative costs across the transferred agencies and services. This percent should be applied to define the funds to be transferred from the Department of Human Services,

the Department of Mental Health and Mental Retardation, the Department of Corrections, the Department of Education, and other agencies to the unified department.

- The Department should include at a minimum one Commissioner, two deputy commissioners – one for finance and one for program, secretarial and support staff, an appropriate number of assistant attorney generals, purchase of service staff, financial support staff, quality assurance staff, and others.
- The bureaus, units, regional staff, space allocations, support budgets and program budgets presently assigned to those units designated for transfer should be transferred in total to the unified department.
- Personnel costs, all other dollars, and capital funds for the new department should come via a direct transfer from existing agencies and programs targeted for consolidation. When administrative costs for a program are now located in undifferentiated accounts, a percentage share should be determined and transferred.
- For all transferred programs and services, the transfer of administrative and support resources should apply to all organizational levels: departmental, central office, bureaus, regions, itinerant locations, and indirect costs such as the state-wide cost allocation plan.
- The Commissioner should be appointed prior to the formal transition process and should, at a minimum, prepare a transition plan which includes: A financial package and the transfer of resources; organizational charts and proposed staffing, plans for reducing duplication of programs and staff, utilization of staff to be transferred during the transition period for the preparation of plans, transition costs and cost savings, a five year plan for enhancing the services and programs for children and families, and a break down of service types, needs, geographical areas, costs, and community participation.

IV. CREATION OF JOINT SELECT COMMITTEE FOR CHILDREN & FAMILIES

The Commission recommends the establishment of a Joint Select Committee for Children and Families to be a focal point for public policy discussion of children's and families' issues and to offer oversight of state administered services. The Commission recommends that the Joint Select Committee for Children and Families be created by Joint Order during the 1991 session of the Legislature as a companion to eventual legislation enacting a Department for Families and Children.

The Committee should consist of 13 members of the Legislature, including 3 members of the Senate appointed by the President of the Senate and 10 members of the House of Representatives appointed by the Speaker of the House of Representatives as follows: 2 members of the Joint Standing Committee on Appropriations and Financial Affairs, 2 members of the Joint Standing Committee on Education, 2 members of the Joint Standing Committee on Human Resources, 2 members of the Joint Select Committee on Corrections, 2 members of the Joint Standing Committee on State and Local Government, and 3 additional members of the Legislature. Members should be compensated in accordance with Title 3, M.R.S.A., section 2 and the Legislative Council should provide staffing for the Committee within existing resources.

V. CREATION OF A FAMILY FOUNDATION

The Commission recommends the establishment of the Maine Family Foundation. This foundation is envisioned as a public-private partnership established to develop, encourage, enhance, and promote positive family life and positive child development. This will be accomplished through the development of primary prevention and early intervention proposals, support for applied research in the fields of family life, child development, program administration, information collection and dissemination, evaluation, training and coordination, and policy and program recommendations. The Foundation should also conduct, commission and/or publish studies, and participate in local, state, and national research efforts designed to benefit children and families.

The Foundation should make recommendations relative to the management and delivery of family and children's programs and assure a continuing commitment to positive family development and the well-being of Maine's children and families. The Foundation should be funded by public dollars and private contributions.

VI. CONSOLIDATION OF EXISTING COMMITTEES

The Commission recommends the consolidation of ten existing committees into a single independent advocacy organization for children and families.

The Advisory Committee on Children with Special Needs, the Child Welfare Advisory Committee, the Child Care Advisory Committee, the Committee on Primary Prevention, the Juvenile Justice Advisory Group, the Maine Advisory Committee on Mental Retardation (transferring adult mental retardation functions to the Developmental Disabilities Council), the Residential Treatment Centers Advisory Group, the Task Force on Children's Mental Health, the Task Force on Early Intervention, and the Task Force on Family Support should be merged

together into the Maine Commission for Children and Families. This consolidation will, the Commission believes, bring more effective, efficient, and accountable family and children's participation in oversight and planning.

The Maine Commission for Children and Families should be an independent group designed to advocate for children and families and to offer an additional check and balance for the public and the State.

The Commission believes that approximately \$250,000 is spent each year administering and maintaining eight of the ten identified committees. Members recommend that \$175,000 of this amount be used to fund the Maine Commission on Children and Families and \$75,000 be returned to programs and services provided by the unified department. It is recommended that the Commission be authorized to hire three staff persons: an executive director, analyst, and secretary.

VII. STATE & LOCAL EDUCATION COORDINATION

In order to assure improved educational outcomes for all school age children, particularly those served by the Department for Children and Families, the Blue Ribbon Commission recommends that significant and substantial actions be taken to define, develop, and increase the coordination and cooperation between special education services personnel at the local level and the personnel and services of the Department for Children and Families.

"Child find", needs identification, and referral activities should be increased and, where appropriate, case management services should become available in cooperation with the Department for school children who are at-risk. In addition, pupil evaluation practices and policies should be evaluated and revised, advocacy and assistance for children and parents should be improved prior to, and during, the pupil evaluation process, and a comprehensive range of services should be cooperatively developed based on the needs identified through the pupil evaluation process.

VIII. MEDICAID FOR CHILDREN

Access to basic health care is crucial to the well-being of our children. The Commission recommends full exploration of transferring administrative responsibilities for the Medicaid program to the Executive Department. This proposal extends beyond the mission of the Blue Ribbon Commission thus the concept was not discussed in depth. However, the Commission recommends further consideration be given to this idea, particularly as the discussion of restructuring government continues.

IX. TRANSITION SERVICES FOR CHILDREN AT-RISK

Children at-risk who have special needs are eligible for educational supportive services through State government until they reach the age of 20. The State Committee on Transition coordinates services for selected children who "age out" of eligibility by preparing them and their families for the world after school. The Commission believes that all children at-risk who are receiving supportive services through the Department for Children and Families and preparing to live independently should be eligible for transition services, modeled on the Transition Committee's program. That program includes preparation and follow-up utilizing an interdisciplinary support network of community resources and specialists. The Commission recommends that the inclusion of all at-risk children who are preparing to live independently from Department services take place following the January 1, 1993 start-up of the Department for Children and Families.

X. UNIFIED SCHOOL DISTRICT WITHIN THE DEPARTMENT

The Commission recommends that the Department for Children and Families undertake during the transition process, an exploration of the establishment of a unified school district or intermediate educational unit within the Department. This district should enable local education units and the Department to meet legal mandates appropriately and to fully access available and appropriate funding, particularly federal resources. A unified school district should ensure that students who are in the care of the Department for Children and Families receive educational services in a consistent and equitable manner and assure continuing educational growth while within the jurisdiction of a local educational unit, regardless of whether or not students reside in a facility directly administered or funded by the Department.

XI. PINELAND CENTER

The Commission recommends that the goals, principles, and purposes that guide services for the Department for Children and Families be applied to services provided to the small number of children residing at Pineland Center.

XII. PRIMARY PREVENTION & OTHER SERVICES

The Commission strongly supports primary prevention programs and early intervention as components of a comprehensive continuum of supportive services. Primary prevention and early intervention should be offered in concert with private and public resources, involve all

segments of society, and include networks of private and public service providers.

Closing Summary

The Blue Ribbon Commission believes that the creation of a unified Department, a Family Foundation, an independent advocacy and oversight commission, a unified case management approach, and closer coordination with school systems will contribute to preventing the development of significant, life-long problems and difficulties that negatively affect the well-being of many Maine children and families.

The Commission also believes functional integration and consolidation of state administration and services within a unified Department for Families and Children will result in services which will help at-risk people more efficiently and be delivered more cost effectively.

Declaration of Responsibility for Maine's Children

More than ever before, we, the people of Maine, must accept our responsibility to guarantee the well-being of all Maine's children. Daily we hear reports of children being abused, living in poverty, becoming homeless, and growing up illiterate and unable to earn a legitimate wage. Our private interests and public policies put our children's welfare secondary to the demands of technological change, economic uncertainty, and the needs of adults who were themselves shortchanged as children. In defiance of these conditions, we assert that our children come into the world with certain inherent rights:

- To be cherished and accepted in their families.*
- To be nurtured by their families in a way that meets their individual needs, so that they can grow in ability to reach their fullest potential.*
- To receive sensitive, continuing help in understanding, accepting and developing pride and confidence in their ethnic and religious heritage.*
- To grow in trust in themselves and others through continuing, loving care and respect as unique human beings.*
- To grow up in freedom and dignity in a community of people who accept them with understanding, respect, and friendship.*
- To receive help in overcoming any deprivation in their physical, emotional, intellectual, social, or spiritual growth.*
- To be given education, training, and career guidance to prepare them for a useful and satisfying life.*
- To receive preparation for citizenship and parenthood.*
- To be raised in an atmosphere free from the suffering of physical and emotional abuse.*
- To be loved.*

(Adapted, with permission, from the Bill of Rights for Maliseet Children, Houlton Band of Maliseet Indians)

By protecting these rights, communities create nurturing environments for children. Promoting such nurturing environments will bring strength to our families, our communities, our state, and our nation.

Our children's lives are at stake. Maine's future prosperity is at stake. Our own honor is at stake. We must act to leave our children a world better than the one we inherited. As we value life, prosperity, and honor, we pledge to win for Maine's future generations those ideals that we ourselves hold most dear: the expectation of well-being for all Maine families, the hope for peace, and self respect.

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