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a magazine of the Illinois Department of Human Services **we're part of**

## inside:

Meet Our New Team Members

DHS Internet Gets Complete Makeover

Then and Now —  
The world of social services

Above the Call of Duty —  
at Work and Beyond



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## **Message from Secretary Carol L. Adams, Ph.D.**



***"The best way to predict the future is to invent it."***

***Alan Kay***

Looking back over the years since the founding of DHS, there's much to reflect upon, much to celebrate and much to admire. This department has come a long, long way from those first days, and achieved a great deal. You have all worked to make this agency what it was intended to be – a one-stop service provider, treating families holistically, no matter which office door they knock upon first. So let's take this moment to reflect on our accomplishments.

We're getting closer to the one-stop goal all the time – when we implement the Framework Project we will, in effect, re-invent this agency, making dramatic rather than incremental changes that will take us to the "no wrong door" finish line. It's a huge undertaking, and while we're engaged in that effort, the world around us will keep right on changing, and demanding new responses from us.

The Alliance for Children and Families published their annual report on trends in human services provision earlier this year, and I'd like to share some of their findings with you.

- The gap in income equality continues to widen dramatically.
- Some 28 percent of Iraq War veterans return with health problems that require medical or mental health treatment.
- The U.S. has the highest infant mortality rate and the lowest life expectancy after age 60 of any industrialized country – and a concomitant finding: a record number of Americans have no health insurance.
- Technology is making us more connected in the virtual world, but making us more isolated socially.
- Suicide is the third leading cause of death among young people aged 10-24.

There's more, but I think you see my point. We're committed to addressing the diverse and innumerable needs of our customers. Doing more will be possible only if we do our work smarter.

The good news is that there is another trend in social services that offers hope. All of the disciplines are adapting and applying the lessons learned by businesses in the previous decade to the development of new approaches. Concepts like quality and outcome-management, process re-engineering, and knowledge management have infiltrated the social services vocabulary. If we can appreciate the lessons learned by business, and add our own ingenuity, we may just meet the challenges ahead.

So, our rallying cry must be Collaborate! Consolidate! Innovate!

Or, as Assistant Secretary Grace Hou might put it – we all need to become synergizer bunnies!

As always, it's an honor to serve with you.

A handwritten signature in black ink that reads "Carol L. Adams". The signature is written in a cursive, flowing style.

**“We need to feel the cheer and inspiration of meeting each other, we need to gain the courage and fresh life that comes from the mingling of congenial souls, of those working for the same ends.”**

**Josephine St. Pierre Ruffin**

## Meet Our New Team Members

by Mamie Rodgers



Name: **Randy Wells**  
Position: Director of Legislative Affairs  
Degree: B.A., Sangamon State University

Basic Duties: Representing the Department's interests in the General Assembly

Favorite Part of Job: Developing legislation strategies to further the department's goals

Fun Fact: Born in Nigeria. Parents were missionaries. He lived there until he was nine years old.



Name: **Rikeesha Cannon**  
Position: Communications Manager  
Degree: M.A. and B. A., University of Illinois at Springfield

Basic Duties: As spokesperson for the Department, responsibilities range from proactively disseminating positive stories, to responding to media inquiries

Favorite Part of Job: Uncovering positive stories

Fun Fact: Currently spending weekends preparing for her April wedding, choosing between two shades of green (sage or celadon) and selecting the right china



Name: **Agueda Corona**  
Position: Director, Office of Hispanic/Latino Affairs  
Degree: Northeastern Illinois University

Basic Duties: Serving as a bridge between the Department and the Latino community

Favorite Part of Job: Having such access to DHS services and departments; bringing the services to, and partnering with, the Latino community

Fun Fact: Enjoys spending time with her family. Coming from a family of ten, she likes the fact that she can have a party without inviting anyone else.



Name: **Catalina Soto**  
Position: Assistant Secretary  
Degree: J.D., Loyola School of Law, M.A., University of Chicago, B.A., DePaul University

Basic Duties: Directly supervises operational divisions in the Department, with a particular emphasis on budget, fiscal and management information services

Favorite Part of Job: Likes analyzing and solving problems, and working with people and bringing the best out of them

Fun Fact: Enjoys children, learning languages, traveling, dancing, and reading about food, even though she does not cook



Name: **Lilia Teninty**  
Position: Director, Division of Developmental Disabilities  
Degree: Masters of Public Affairs, Indiana University

Basic Duties: Oversight of services and supports for 45,000 people receiving services from the Division of Developmental Disabilities. Establish a future plan for the Developmental Disabilities delivery system to include more enhanced person-driven settings and services

Favorite Part of Job: Meeting the people we serve and their families

Fun Fact: Worked for 4 years at the San Francisco Zoo



Name: **Ivonne Sambolin-Jones**  
Position: Director of Community Health and Prevention  
Degree: B.S.W, Aurora University

Basic Duties: Overseeing a unique and multifaceted division that partners with communities to build healthy environments in which children and families can realize their full potential

Favorite Part of Job: Being a part of the decision-making that positively impacts the lives of individuals in the state of Illinois

Fun Fact: Likes to create songs to entertain her dancing and finger-snapping one year old

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## “What a Difference a Friend Makes”

by Susan Locke

**According to the National Institute Of Mental Health (NIMH)**, about one in four adults suffers from a diagnosable mental disorder in any given year. When applied to U.S. Census residential population estimates for ages 18 and older, this figure translates to 57.7 million people. Of that group, *less than half* will seek professional assistance, and only 10% will receive adequate treatment.

**Given that the incidence of mental disorders** outpaces the common cold, why is it that so few individuals with mental health issues seek treatment?

**Perhaps the following will suggest** an explanation: While the majority of Americans (85 percent) believe that people with mental illnesses are not to blame for their conditions, only about one in four agrees that people are generally caring and sympathetic toward individuals with mental illnesses. Further, only a fourth of young adults believe that a person with a mental illness can recover, and only slightly more than half who *know* someone with a mental illness believe that treatment can help those people lead normal lives.

**What this adds up to is a lot of apprehension**, misinformation and misunderstanding about mental illnesses, their treatment, and the likely outcomes. Is it any wonder that so many people experiencing a mental health problem are reluctant to seek help? Applying the NIMH statistics to Illinois' population, the 180,000 people with mental illness served annually by DHS are just the tip of the iceberg.

**Dr. Lorrie Jones, director of DHS Mental Health Services**, thinks that there is much we can do to change this situation: “First, it’s important that we get the message out – mental health treatment has advanced to the point that recovery and a normal life are the *expected* outcome. If we can remove the



stigma and misconceptions around mental illness, we can increase the likelihood that those who are experiencing mental health problems will seek – and get – the help they need.”

**The results of the study** cited above prompted SAMHSA and the CDC to launch a television and radio campaign “*What a Difference a Friend Makes*,” aimed at alerting the general public to the role each of us can play in helping a friend coping with a mental illness move toward recovery. DHS has embraced the national campaign, promoting the use of its PSAs and offering interviews with mental health professionals on Illinois media. They’ve even taken their message to the streets, with a presence at the annual “Taste of Chicago.”

**Our participation in this nationwide effort** will leverage the impact of our own, highly-focused three-year campaign. DHS has joined forces with the Children’s Mental Health Partnership to craft the campaign messages for adults and children, and has engaged the Metropolitan Group to assist in strategic planning and execution.

**The development phase for the campaign** is drawing to a close and DHS expects to review the research and recommendations from the Metropolitan Group.

**The new campaign will debut** after the first of the year. Dr. Jones believes that, in time, it will have an effect on public perceptions. She notes that “there are multiple reasons, many of them embedded in cultural attitudes about mental illness, that might keep an individual from seeking help. But there’s no question that the associated stigma can make ‘going public’ about a mental health problem a high-stakes proposition. A better understanding of mental illness and the effects of treatment can lower many of those barriers.”



**“The test of the morality of a society is what it does for its children.”**

**Dietrich Bonhoeffer**

## **DD Children’s Waivers Help Kids and Parents**

by Thomas Green

**DHS and members of the Illinois Autism Society** brought together a diverse group of stakeholders to craft applications to the U.S. Department of Health and Human Services for two new waiver programs serving children with developmental disabilities. After laboring countless hours to create over 270 pages documenting the requests, Illinois was awarded \$8.6 million in federal matching funds for services to prevent or delay the need for institutional care.

**In announcing the award on June 15th,** Governor Blagojevich observed that, “It’s often a struggle for families who have children with special needs to make sure their kids have the best care possible. The approval of these two new programs means many families will now have access to tools and services to give their kids the care they need and keep them at home with their families.”

**Families with young people** ages 3 to 21 with developmental delays or other related conditions such as cerebral palsy, autism spectrum disorder, and epilepsy, will be able to use the resources under the support services waiver to extend their capacity to care for their children at home. Six hundred children, who might otherwise require a transition to an intermediate care facility, will be able to delay or entirely prevent the need for a future move to residential care.

**The program offers families a great deal** of flexibility in determining which services meet their particular needs. They will receive a monthly allocation of funds to use in purchasing an array of services, including training, respite and personal care, home and vehicle accessibility and modifications, adaptive equipment and assistive technology, training and counseling services for unpaid caregivers, behavior intervention, and treatment and service facilitation.

**Another 175 to 200 families** whose children require out-of-home care will also benefit from the residential support waiver.

**“We appreciate the support** of the legislators, advocates and families who helped obtain these new waivers. They will enable more young people with developmental disabilities to enjoy meaningful



relationships with family and friends and experience personal growth and development,” noted DHS Secretary Carol L. Adams, Ph.D. “The variety of services will provide opportunities for the young people to exercise more choice about how they live their lives.”

**The new waivers are approved** for a three-year period beginning July 1, 2007 and can be renewed at the end of that time.

## A Warm Welcome for Illinois Immigrants

by Silvia Villa

**As a result of the collaborative efforts** of DHS, the Governor's Office of New Americans, and the Illinois Community College Board, the first Illinois Welcoming Center serving new immigrants and refugees opened on July 26th at 1708 Main Street in Melrose Park. This is the first of what will be a state-wide network of one-stop service centers, created pursuant to the Governor's New Americans Executive Order 2005-10 charging Illinois agencies to identify and address the needs of our state's newest residents. More than 200 people attended the ribbon-cutting ceremony that was by turns solemn, celebratory and poignant.

**Illinois has established itself as a leader** in transforming the lives of immigrants by providing quality programs through an integrated service model. The goal of the Illinois Welcoming Centers is to expedite the integration of immigrants and refugees to life in Illinois by providing one-stop centers dedicated to providing the services newcomers most often need. Illinois recognizes the great cultural, social, and economic value immigrants bring to the state and seeks to capitalize on this potential.



Left to right: Silvia Villa, Patricia Granados, Jose Luis Gutierrez, Father Claudio Holzer, Grace Hou, Mireya Hurtado, Mayor Roy Serpico, Sergio Suarez.

**Welcoming Centers have the potential** to ease the acclimation process for immigrants, and to provide them with a comprehensive structure for accessing essential services such as health care, employment, housing, public transportation, childcare, English language training, and education and nutrition information. Staff may also provide referrals on immigration-related matters.

**To avoid duplication and to help** new residents connect with community resources, Welcoming Centers offer information, workshops and orientation. Further, they will provide space for community-based and non-profit organizations to conduct legal clinics and host job fairs for customers and their families.

**For people who don't live in a community** where a center is located, a central mobile unit is available for processing inquiries and for travel throughout Illinois during "Welcoming Days."



Left to right: Jose Luis Gutierrez, Grace Hou, Silvia Villa.

**“Remember always that all of us, and you and I especially, are descended from immigrants and revolutionists.”**

**Franklin Delano Roosevelt**

**The Welcoming Centers serve** as a centralized resource for services that maximize benefits for immigrants and refugees who live in Illinois by helping them:

- learn about gaining citizenship
- learn how to speak English
- participate fully in their communities
- apply for critical social services
- locate housing
- start and expand businesses
- gain job skills
- secure affordable healthcare
- find meaningful employment
- share in their children’s education
- advance their education
- understand different cultures

**It is of critical importance to engage**

community leaders in the Welcoming Centers process. Each Welcoming Center will convene a Community Leaders’ Council comprised of local elected officials, leaders from the faith-based and non-profit communities, businesses, and immigrant advocates. The director of the Welcoming Centers will staff these councils as they work to develop local directories, raise awareness of the services available locally and



*The Illinois Department of Public Health provided a health van to conduct a series of screenings for conditions such as hypertension, diabetes, cholesterol and prostate cancer during the recent open house for community members.*

the promote the Centers. The councils will also tailor workshops and orientation sessions based on local needs.

**Welcoming Centers represent a multi-agency** collaborative that includes active participation from these Illinois agencies: Department of Commerce and Economic Opportunity, Department of Employment Security, Healthcare and Family Services, Department of Children and Family Services, Department on Aging, Department of Financial and Professional Regulations, Department of Human Rights, the Community College Board and the State Board of Education. The impact of the centers will be directly related to the quality of collaboration among state agencies.

**Silvia Villa is the Director of the Welcoming Centers.**



*The Children’s Museum hosted an outside activity tent and conducted a series of workshops for children during the Center’s recent community open house.*

## McClain County FCRC Has An "Open Door"

by Maureen Farmer

**The Region 4 SmartPath Leadership Team** has been working with Morgan County DHS staff since June 2006 to create the first service-integrated model office.

**Morgan County was selected** for several reasons – it's a relatively small county, but every DHS division provides services in the area and has staff physically located in the county. Also, the county is close to Springfield and the leadership team. Additionally, the Leadership Team identified Morgan County as having excellent potential for staff to come together to focus on common work efforts, relationships with providers and to streamline work efforts.

**The vision** is that Morgan County Office frontline workers will be able to give the correct service and contact information to customers or to service providers for any program, providing the most seamless service delivery possible.

**The Region 4 SmartPath Leadership Team** asked the Morgan County Model Office members to work together to identify common issues and needs; get to know each other; share resources and tools; cross-train on application and eligibility procedures; become familiar with common forms; and examine referral issues in a coordinated and comprehensive manner. During the past year, substantial progress has been made toward completing these tasks.

**The Team and the project**, which has been tagged "MCMO," have entered into the next development phase – structuring tangible work products. One project is the development of a video-based presentation, which outlines each DHS division's services and contact information. The presentation is tailored to community and consumer needs and is intended for use in Morgan County's DHS offices, other county community service agencies and public venues.

**Symbolically, the intent** is that the video will illustrate to the community how DHS works as one cohesive department, rather than six different and

separate program divisions. Functionally, the intent is to simplify and improve the consumer's understanding of what DHS services are offered for Morgan County and where those services can be accessed.

**Currently, the MCMO Team is charged** with exploring the feasibility and merit of divisional co-location possibilities. Permanent co-location, scheduled rotation of staff and the co-location of staff on an as-needed basis are under discussion. Additionally, using technology to support these efforts is under consideration, as well as the evaluation referral tools.

**Also, the MCMO Team presented the co-location divisional concept** to the Morgan/Scott/Greene County Planning Committee in October 2006, and invited other providers and agencies to join in this endeavor. The following agencies are now represented on the team: Community Childcare and Service Center Association, Wells Center, Pathway Services, Early Years, Aging, Midwest Youth Services, Community Childcare and Service Center, Regional Office of Education, Epilepsy Resource Center, and Illinois Employment and Training Center.

*(SmartPath is an umbrella initiative with a series of projects aimed toward greater integration.)*

**Maureen Farmer is the Region 4 Director of Community Health and Prevention.**

**“In every community, there is work to be done... In every heart, there is the power to do it.”**

**Marianne Williamson**

## **Doing Good In The ‘Hood (with a little help...)**

by Mamie Rodgers

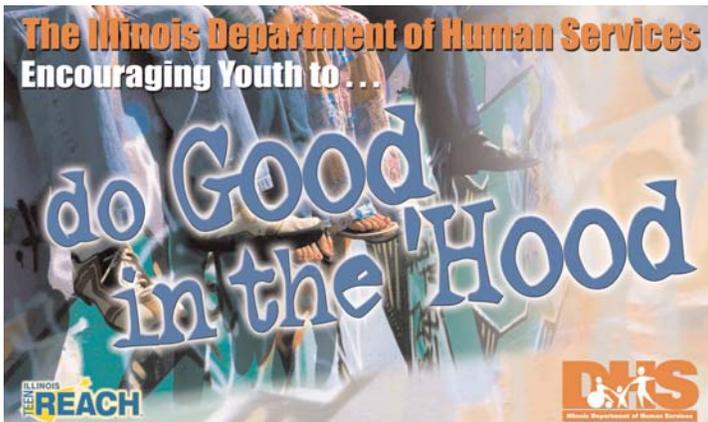
**In June we challenged Chicago youth** to spend time doing positive things in their neighborhoods over summer vacation, and to complete a *Doing Good in the ‘Hood* pledge card detailing what they intended to accomplish. Reporting their activities to DHS qualified them to win a \$100 gift card or an iPod Shuffle with an iTunes gift card.

**Two of our winners**, Johnnie Butler (16) and Lanette Smith (17), worked to clean up their Englewood neighborhood, and worked on the Jean Carter-Hill Community Garden, a neighborhood beautification project at 60th and Peoria. Johnnie said of his commitment - - “It’s my community...it’s my responsibility.”

**Their work was interrupted – briefly –** by an August 22nd break-in that left them without the tools and plants used to maintain the garden. However, Pastor James Dukes, of Liberation Christian Center, and one of our TEAM Illinois/Englewood partners, heard of the teens’ plight, and replaced the stolen items so the gardeners’ good work could go on. DHS commends Pastor Dukes for *Doing Good in the ‘Hood!*

*The list of winners includes:*

1. Diane K. Bullock
2. Johnnie Butler
3. Ashley Evans
4. Keai Gatewood
5. Dwayne Golden
6. Raven Johnson
7. Lanette Smith
8. Geneva Perkins
9. Mercedes McKinnis



### **Imagine Englewood If...**

By Johnnie Butler

**I imagine** Englewood if it had less gangs and more police committed to helping our community

**I imagine** Englewood with fewer drugs and less teenagers doing and selling them

**I imagine** it with more parents being more concerned about what their children are doing

**I imagine** Englewood with less lead in our soil and water and more people willing to help clean our community

**I imagine** Englewood with healthier foods in our stores and less junk that they sell to us

**I imagine** Englewood with safer places for kids to play and less shootings happening

**I imagine** Englewood with less negative things being said about it and more positive things being said

**I imagine** Englewood with less good things being taken out and not anymore bad things being brought in

**I imagine** Englewood with less talk about what the government is going to do and more of the government doing what they say they’re going to do

**I imagine** Englewood with more education funds and less schools closing down

**I imagine** Englewood with less obese children and healthier children

**I imagine** Englewood with less problems solved with violence and more communities coming together to solve it

**And finally, I imagine** Englewood to be where you wouldn’t have to imagine to enjoy a safe and healthy life.

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## DHS Internet Gets Complete Makeover

by Susan Locke

In August DHS rolled out a new website design – One Web – one of the largest “On-Line Not In Line” projects designed specifically to improve customer access to services. With more than 1200 pages and over 22,000 links to contend with, revamping the website was a formidable task, requiring the cooperation of virtually every division, bureau and office.

The new design uses three portals – one for customers, another for providers, and a third with information about DHS and state government. The content for each segment of the site is geared to a specific audience, with all of the information they are likely to search for, without the clutter of additional content intended for other user groups.

However, the new, clean, inviting look of the site is just the beginning.

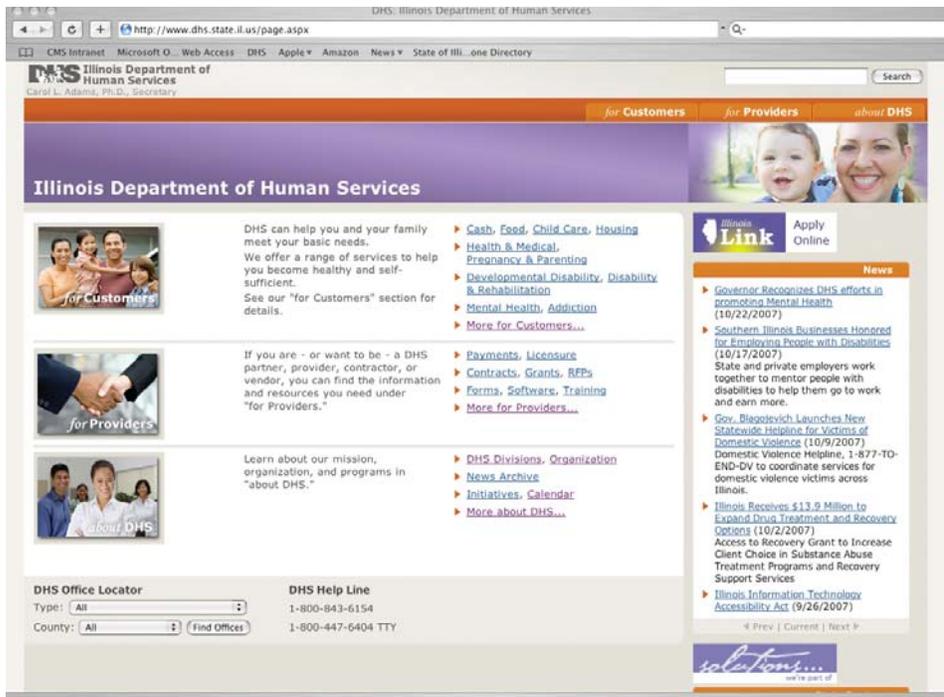
In addition to the new organization, the website designers (from the Smartpath project and the Web Works Committee), wanted to create a site that is fully accessible and user-friendly not only for people who use assistive technology to access the web, but also for users who have limited English proficiency, are not skilled readers, or are unfamiliar with web conventions and navigation. Another change in the section for customers is that services are presented by category (e.g., “food,” “housing,” “medical treatment”), rather than dividing them up by the division providing the services.

Now, new customers need only know the type of service or benefit in order to apply for assistance.

The design will include further refinements and features, as users visit the DHS site and give us their reactions and suggestions. One addition will be a translation of the entire site into Spanish, along with translation information for customers speaking one of the ten or twelve other languages commonly spoken by Illinois residents. Another enhancement will be the opportunity to search databases of forms, publications and other documents by different criteria – language, title, form or publication number, and so on.

Since the new website is very much a work in progress, we urge all of you to visit <http://www.dhs.state.il.us/page.aspx>, click on the

<http://www.dhs.state.il.us/page.aspx?item=29757> link, and tell us what you think, give us your suggestions, or register any complaints.





**T**he sweeping changes dictated by welfare reform legislation passed in 1996, along with the recommendations of then-Governor Jim Edgar’s Human Services Task Force provided the impetus for a dramatic reorganization of Illinois’ human services infrastructure. All of the state-administered human service agencies were brought under one roof, creating the Department of Human Services. The intentions behind the formation of this mega-agency, the largest in the state, was to provide a single source for all of the services intended to help families find work and become self sufficient.

In these pages you’ll find an analysis of the changes in the social services landscape over the last ten years. *E Pluribus Unum*, Latin for “Out of Many, One,” can be used to describe the evolution of DHS as we know it today. “Then and Now” offers reflections from people who were involved with DHS from the beginning and provides an accounting of new challenges posed by the TANF Reauthorization Bill.

## Then and Now — The world of social services

by Sharisse K. Jones

**We’ve asked some of the people** who were engaged in the effort to devise a new delivery system to share their thoughts about that process and about the outcome from the vantage point of ten years later.



**Illinois initially engaged** in an examination of its human services delivery system during the Thompson administration, according to Paula Wolff, and Governor Jim Edgar continued and expanded upon this examination, establishing the Task Force for Human Services Reform to address the concerns raised by the

impending federal legislation to revamp America’s welfare system. Illinois was determined to take all necessary steps to ensure that the state’s transition would be as efficient and effective as possible.

**The Task Force was charged** with re-thinking human services delivery to improve the lives of children and families and streamline the system. “Creating services in the context of a new model of supporting people, meeting their basic needs, and allowing them to move away from reliance on public assistance” was our essential challenge, Paula Wolff remembers. This was in contrast with the old model which provided people with financial and other assistance within a very strict regulatory design.



**Audrey McCrimon, another member** of the Task Force, echoed this sentiment and noted that in Illinois, the focus of reform was serving people better, not merely cutting numbers from the welfare rolls. She recalls the numerous regional meetings across the state, during which providers and community members shared their experiences, and offered

suggestions in a town-hall setting. “What made these meetings different was the stakeholders’ engagement in problem resolution. The collaborative work of the Task Force paid off when the federal law was enacted,” Ms. McCrimon recalls.

**Illinois achieved early success** in the implementation of Welfare to Work, with an 85 percent reduction in the welfare rolls. This remarkable turnaround was due in large part to an approach recommended by the Social Services Advisory Council, the entity created to advise and assist DHS in its efforts to develop and implement policy and procedures. The approach involved an incremental journey from full benefits to complete self-sufficiency, so that finding work didn’t trigger an immediate reduction of benefits. With supportive services like TANF, child care assistance, and food stamps still in



place, families with newly employed parents didn't falter at the first obstacle – a flat tire, a sick child, a decent outfit to wear to an interview.



**Brenda Hampton**  
Region I Executive  
Director  
DHS Division of  
Mental Health

**This gradual approach to success** represents a paradigm shift that occurred in the last ten years. Brenda Hampton sees an increase in the focus of helping clients on their journey toward recovery. Also, Ms. Hampton observed that human services delivery has moved from a provider-driven system to a consumer-driven system.

**Ms. McCrimon echoes** this characterization and delineated three major areas of change actualized because of a customer-centric approach: access, efficiency and inclusion.

**She cites** Secretary Adams' emphasis on the innovative and efficient use of technology to better service clients as a major way in which DHS has improved access. One example is the DHS website redesign, which groups service information according to the users – customers, providers, government, rather than by the division that provides the service.

**A second example is the drive to serve** customers on line, rather than having them wait "in line." Everything that can be done via the web is being done, in terms of communication and information dissemination.

**The technological changes** also have implications in terms of increased efficiency. Gaps in efficiency were among those most frequently highlighted issues for both clients and providers during the Task Force Regional Meetings. According to McCrimon, DHS has responded in many ways, including setting up an 800 number to automate payroll for childcare providers, developing a unique identifier for each recipient (RIN), and implementing co-location measures to place more DHS division offices in the same space to encourage problem-sharing and solving – between divisions.

**Ms. Hampton agrees** that under Secretary Adams' leadership, DHS has enjoyed an increase in collaboration between divisions and cites SmartPath

(an umbrella initiative with a series of projects aimed toward greater integration) as an example. One of the Smartpath projects created five service regions that are now shared by all divisions, enabling closer communication and collaboration.

**Poor customer service** was a major complaint voiced in the regional meetings. One method of addressing this concern was to make the staff delivering human services more inclusive. When the federal legislation outlining the welfare to work policy passed in 1997, Ms. McCrimon recalls that there was a notable lack of diversity among professionals in the State's human service agencies. As part of an on-going effort to improve customer service, DHS is committed to the highest standards of diversity and inclusion.



**Eileen Durkin**  
Chief Executive  
Officer  
Neumann  
Association

**Over the past ten years,** there has been a notable increase in the inclusion of individuals with disabilities in the private sector workplace. Eileen Durkin asserts that the inclusion of more individuals with disabilities in all areas of the workplace is a major advance of the past ten years. She notes that "Many employers are hiring people with disabilities, recognizing their value as employees." She estimates that the labor pool of people with disabilities has doubled in the past ten years. Neumann Association attributes this increase in part to a business model approach, showing potential employers that there is a benefit in hiring individuals with disabilities, and it is not just a charitable act.



**Judy Fried**  
Chief Executive  
Officer  
Northern Illinois  
Council on  
Alcoholism and  
Substance Abuse

**Judy Fried** has seen a similar change in the Division of Community Health and Prevention. She noticed an increase in professionalism as well as an overall shift from merely disseminating information to a more outcome-based approach, informed by research. Ms. Fried states that prevention services have moved from making sure people have the information on avoiding high-risk

behaviors to changing mindsets and attitudes. "There is more collaboration in the prevention community, due to the recognition by all stakeholders that parents, community-based organizations, and schools have to work together to make prevention work.



**The increased integration of services** and information has been the hallmark of DHS for the past ten years.



**David Whittaker**  
Chief Executive  
Officer  
Chicago Area Project  
(CAP)

**That effort to ensure greater collaboration** with the community of service providers has served DHS well in times of transition. David Whittaker, whose service on the the DHS Transitional Task Force and the Social Service Advisory Council spans three administrations, notes that there have been changes in priorities and philosophy as one administration departs and a new one takes on the task of governing.

**From his perspective**, the real challenge was ensuring that each administration was aware of the community needs and priorities. Community and organization leaders had the responsibility of educating the administration so that the administration could work hand in hand with the communities to develop programs that work for the people they are intended to serve.

**Mr. Whittaker thinks that**, for the most part, he and his fellow advocates have met that challenge. "The key has always been to engage the community by working from neighborhood to neighborhood – getting their input, and helping them understand the different policies, programs, and the changes taking place within a different administration so we can work collectively. This gives them a sense of ownership with whatever process comes out of these meetings, as well as feeling vested in the process of community change."



**Joe Antolin**  
Vice-President and  
Executive Director  
Heartland Human  
Care Services, Inc.

**The question remains**, after ten years of measured improvement, how can DHS remain on the cutting edge of human services delivery? Joe Antolin pointedly observes that DHS has become the victim of its own success. After transitioning a significant number of people from welfare to work, DHS is faced with

the challenge of continuing to provide the same high quality service to this newly employed population. "As

welfare to work was successful, it had the impact of growing the ranks of the working poor—these workers need income supports, training, career planning and to benefit from economic development that creates new, better paying jobs," Antolin states. "For those still needing work to leave welfare or to successfully reenter the community, we need to expand proven solutions such as transitional jobs and bridge programs, and not settle for easier but ineffective strategies. DHS must determine how to draw on its best competencies in order to remain effective, develop new partnerships, and empower people," says Mr. Antolin.

**When asked about the challenges** of the future, Mr. Whittaker offered his take on the current business model: "I think economics will be our biggest challenge because it will require a change in mindset. Historically, maximizing profits has always been the bottom line. So here we are talking about shifting values and, in addition to profits, we're looking to rebuild struggling and neglected communities like Englewood, Woodlawn, South Chicago and other places in the state. Investing in those communities will take a long-term strategy, which requires deferring profits. We must continue to fight to change attitudes, values, and minds. Ultimately, we can win this battle. I appreciate where the current administration is taking us in DHS."

**The challenge will continue** over many years to come, but with continued visionary leadership, DHS will advance its evolution to ensure the application of best practices so that its customers continue to receive the most effective, efficient and relevant human services delivery possible.

**Sharisse K. Jones is a freelance writer. Mamie Rodgers contributed to this article.**



## ***E Pluribus Unum***

by Susan Rans

**The last ten years** have brought monumental changes in the way human services are perceived and delivered in this country. Almost nothing about the system that existed before 1996 remains, and its attitudes, activities and allies have changed. Funding has been dramatically reduced but so has much of the red tape. Outcomes are documented, scrutinized and evaluated in ways not seen before.

**A dramatic shift has also occurred** in the distribution of responsibilities. Once, federal programs were designed in Washington, with service administration carried out on a state level. Now the actual design of the system has been delegated to the states, and in many states (including Illinois), partnerships at the community level are key to effective service delivery. The rubber is much closer to the road today.

**How did this come to be** and what does it mean for the next ten years? Does it work better than the old ways? Let's start answering these questions by reviewing some recent history.

### ***The Personal Responsibility and Work Opportunity Reconciliation Act of 1996***

**When Congress passed** the Personal Responsibility and Work Opportunity Act in 1996, they ended a 61-year federal welfare system that guaranteed cash and other benefits to needy families. As a candidate, then-Governor Bill Clinton promised to "end welfare as we know it" by moving welfare recipients into the mainstream economy. **Welfare-to-work** became the catch phrase for this initiative,



planned and refined over the entire first term of Clinton's presidency.

**Dismantling the welfare system** was a formidable task. The system, beginning with Aid To Families With Dependent Children (AFDC), started during the Depression and was created to serve women and children whose husbands and fathers were killed during World War II. By 1994, that number had grown to 14 million children and parents for AFDC alone. Furthermore, federal programs had added non-cash benefits such as Food Stamps and Medicaid, expanding the beneficiaries for these programs beyond AFDC families to the elderly and the disabled. In 1974, Supplemental Security Income (SSI) was established to provide cash assistance to those populations as well.

**By the 1990's**, 15% of the nation's children were receiving AFDC. Many critics of the system pointed to the generational poverty among AFDC recipients, and the social ills that accompanied it. Others decried the burdensome welfare bureaucracy and dispiriting encounters with it for families in need.

**Although 70% of recipients collected** a welfare check for less than two years, the myth of the work-adverse 'welfare queen' dominated the political dialogue. Although it never consumed more than 1% of the federal budget, welfare was seen by many as an unfair burden upon hard-working taxpayers.

**Clinton proposed putting a time limit** on benefits and tying receipt of a welfare check to a search for work. Opponents argued that there just weren't enough entry-level jobs to absorb the welfare population, many of whom had few skills and little work experience. In addition, they argued, the entry-level jobs that did exist did not pay enough to support a family.

**In the ensuing three years** of discussion and debate, the final proposal took shape. AFDC was replaced by Temporary Assistance for Needy Families (TANF), funded by federal block grants and state money. The states were given the authority to design their own welfare programs and to move recipients to work, but strict work requirements were tied to the federal block grants:

- Adults receiving family cash-aid benefits had to move to work within two years. States could exempt a parent with a child under a year old for no more than 12 months.



## Welfare-to-Work Successes

### *From Client to Caseworker*

Sixteen years ago, Amy Marx was a teenage wife, mother and public aid recipient. Her need for assistance increased when she left her violent marriage and found herself on her own, with limited means of supporting herself and her two young children.

Amy experienced the creation of DHS as a client and traded her paper stamps for the LINK card ten years ago. Still, Amy wanted more for herself and her children. She started attending college part-time, while working and caring for her children.

It took ten years, and it was not always easy, but Amy was diligent and persevered. All of her hard work paid off when she received a Bachelor's Degree in International Relations/Law from Bradley University in Peoria, Illinois.

Shortly thereafter, her journey came full circle when she started a new career as a caseworker at the Peoria County Family Community Resource Center, where her unique perspective makes her a compassionate and caring caseworker. "Sometimes a person just needs to have someone who knows what it is like to be in the same situation," is Amy's philosophy.

- States had to have 25 percent of their welfare caseloads at work in 1997 and 50 percent of their caseloads at work by 2002. States that failed would lose 5 percent of their federal block grants.
- Each adult would have a lifetime limit of no more than five years of cash assistance. States could exempt up to 20 percent of their caseloads from this limit.

**In addition, the Act reduced** food stamp benefits for all welfare recipients and low-income working families. At the same time, eligibility standards were tightened for disabled children receiving Supplemental Security Income (SSI). Finally, the Act eliminated all benefits for most legal immigrants.

**Seen as draconian by many**, the new law posed serious difficulties for social service providers. The \$15 billion reduction in funding was more than the collective donations to all major non-profit social service organizations for any given year. There was justifiable fear that many would fall into deep poverty without the safety net provided by the previous system.

### *The Challenge to the States*

**The new law assigned the lion's share** of implementation responsibilities to the states and gave them the latitude to design programs to meet their specific needs. The TANF block grant has an annual cost-sharing requirement for states, referred to as maintenance of effort (MOE). Failure to meet MOE requirements would result in the reduction of the TANF block grant. Reduction penalties could also be levied if the state failed to meet dozens of other requirements.

**The stakes were very high.** The new law called upon states to move families from welfare to work, something that had not previously been the goal of their services. The new law also mandated that this move take place faster than seemed possible and with less money than had been available under the old system. For large bureaucratic organizations, this kind of change was almost unimaginable.

**The funding consequences for failure** were grim, but the human consequences were almost unthinkable. With a five-year welfare limit for most families, failure to achieve self-sufficiency within that time frame could open a gaping hole in the family's safety net. What would happen to those families whose poverty seemed intractable? Would the non-profit emergency service system be able to absorb them? If not, what would be the social cost to communities?

**The pressure to change** and change quickly was now imperative, and an intensive search for solutions began. Luckily, a parallel search had already begun.



## Discovering What Works

**For almost a decade**, a quiet revolution had been brewing in what seemed an unlikely place—poor and distressed communities themselves. As federal funding of all kinds disappeared in the 80’s, it became clear that any local change would have to occur without many external resources. As a consequence, organizations and agencies and unaffiliated groups of neighbors took matters into their own hands in communities around the country. Housing and economic development, youth development, crime prevention—all were being addressed increasingly by



local groups, using locally-driven solutions. As a matter of necessity, these programs often used little more than the skills and talents of local residents.

**What was driven by necessity** soon revealed an old, but forgotten truth: the people closest to the problem usually know best how to solve it. And the more people came together to address the issues facing their communities, the stronger the communities became. And the stronger the communities became, the less susceptible they were to problems, as everyone felt a responsibility to make the communities work.

**Slowly, anecdotally, stories** of local success began to “filter up”. Academics began to take note as the evidence mounted. One pioneering endeavor at Northwestern University involved gathering stories of success from communities around the nation and the world and determined that they had three things in common: they were *asset-based, internally focused*

*and relationship driven.*<sup>1</sup> Communities looked to their strengths, found the resources they needed to make change internally, and in doing so, built relationships among people who were previously marginalized. Called “asset-based community development,” this analysis burst on the scene just as welfare reform was coming into being.

**A new literature in “best practices”** in community change emerged. Could these community successes be replicated? What were their components? How could they be judged? And how could they be used by the human services bureaucracies now charged with welfare reform? In Illinois, answers to these questions brought about systemic changes in powerful ways.

## Integrated Services

**A key “best practice” to emerge** from the literature was both simple and revolutionary. Often, a given community would have dozens of non-profit service providers, each focused on a specific population or a specific challenge. In addition, the state and federal human service agencies targeted specific populations as well. Navigating these intertwined and often redundant institutions was nearly impossible for those they intended to serve. The navigation became more mystifying if individual needs crossed invisible service boundaries. Child welfare agencies interfaced relatively well with the Department of Children and Family Services, for example, but if the child had mental health problems as well, the Department of Mental Health became involved. And if the family needed food, then federal food stamp programs and faith-based emergency services were engaged, and on and on.

**Creating a kind of “one-stop shop”** that analyzes the entire reality for an individual or family and brings a seamless continuum of care into play using all available resources is often called a **community system of care**.

A Community System of Care is the organization of public and private service components within the community into a comprehensive and interconnected network in order to accomplish better outcomes for a defined population.<sup>2</sup>

<sup>1</sup> Kretzmann, J. and McKnight, J., *Building Communities from the Inside Out*. Also see [www.northwestern.edu/ipr/abcd.htm](http://www.northwestern.edu/ipr/abcd.htm)

<sup>2</sup> Best Practice Briefs No. 9, 1998-1999, Michigan State University. Pg. 1



## Welfare-to-Work Successes

### *Persistence Makes it Possible*

When Beverly Coleman qualified for TANF after losing her job due to medical problems, DHS referred her to Public Image Partnership and she enrolled in its employment and vocational training program.

Despite health challenges, she continued to report and was actively engaged in her job search. Ms. Coleman interviewed with employment agencies and employers, but did not receive any job offers.

Then she was diagnosed with gout and severe arthritis in both feet, but she didn't give up.

She continued coming to Public Image and never relaxed her job search. Finally, on October 25, 2006, Beverly Coleman proudly announced that she had a job with Standard Parking at O'Hare Airport. She has been employed on a full-time basis since that time and continues to enjoy her position. Beverly's story is one of tenacity in the face of multiple challenges and is evidence that persistence pays off.

**A community system of care places** the recipient's particular story at the center and organizes all the disparate resources of the community around that story in ways that can best address the needs. It cuts red tape and frustration. And it often seeks to build upon the assets and talents of the recipient of care.

**For this kind of system to work**, agencies not only have to communicate, they have to work across old boundaries. They have to rely on new kinds of knowledge—the knowledge of the community as well as the knowledge of service providers. And, to be truly “one-stop,” a community system of care has to have all the tools it needs at hand.

**Several states, Illinois included**, re-examined their organization of human services. Maybe, rather than several discrete agencies addressing unique problems, a single, inclusive

structure could be created that brought all the available resources to a recipient at once. In Illinois, this reform is referred to as **integrated services**, and its implementation began before the welfare-to-work mandate.

### *Making Change in Illinois*

**In 1993, Governor Jim Edgar appointed** a Task Force on Human Services Reform. That ‘reform’ was needed is certainly an understatement. Six separate government agencies, each with their own set of regulations, their own administrative structure, and their own area of expertise served the families of Illinois. From the outside, this maze of organizations was almost too complex to understand, much less to navigate. Yet most families in need had to do both.

**Welfare checks came** from the Department of Public Aid, but most families had to have some additional interactions with any or all of the Departments of Children and Family Services; Mental Health and Developmental Disabilities; Public Health; Alcohol and Substance Abuse or Transitional Services. Programs administered by these agencies often overlapped. Many were subcontracted to large, private social service organizations. Also, people in need and community-based agencies found that interaction with the entire system could be exhausting and demeaning. Change was needed.

**And change was in the air.** The Governor's Task Force hit the ground running with a mandate for sweeping reform.





## Welfare-to-Work Successes

### ***Determined and Drug Free***

Katrina was referred to the Community and Economic Development Association of Cook County (CEDA) after suffering a severe heroin addiction. Her addiction came with a high price -- prostitution, destroyed family relationships, and lost custody of her children.

Prior to Katrina's referral to CEDA, she was making strides to improve her life and receive treatment for her addiction, but encountered obstacle after obstacle. Housing issues prevented her from receiving her GED and Katrina had to stop her rehabilitation program because it was cost prohibitive (\$500 per month).

With CEDA's help, Katrina has been drug free and has liberated herself from a life of prostitution. She is employed full-time at Lawrence Fisheries, and has moved into her own apartment. CEDA is helping Katrina to rebuild her relationship with her children, and is also helping Katrina obtain a GED or high school diploma through one of its partner programs.

Katrina attributes her success to not forgetting how far she has come and by treating her whole self, not just her addiction. Katrina also makes a conscious effort to surround herself with positive people and is active in her church community, which helps her remain employed and encourages her to complete her high school education. Katrina's formula for success is definitely working and there are certainly great things in store as she continues on her path to remain drug free.

**In his book**, *Make a Difference*<sup>3</sup>, Gary MacDougal tells the story of the Task Force that he chaired. The former Chairman of Mark Controls Corporation, MacDougal had been interested in human services

<sup>3</sup> MacDougal, Gary, *Make a Difference: How One Man Helped Solve America's Poverty Problem*, St. Martin's Press: 2000.

delivery issues long before taking on the work of the Task Force. He combined his political capital with his interest in and knowledge of issues facing poor children that he gained as a Board member of the Annie E. Casey Foundation, and brought both to the work of the Task Force.

**The Task Force consisted** of a broad coalition of government representatives and agency heads, as well as business, academic and community leaders. It spent its initial meetings developing a series of principles that would guide the reform efforts. The principles defined an overall mission that would focus on "client self-sufficiency, supported by a one-stop, family-centered system at the local level, strong community involvement and clearly measured performance outcomes."<sup>4</sup>

### ***Discovering What Works***

**Interviews with clients**, service providers and community leaders, as well as contributions on best practices from organizations like the Casey Foundation, convinced Task Force members that nothing short of a complete restructuring would do the job. In addition, it was clear that one size didn't fit all. Addressing the needs of people in Chicago neighborhoods required different strategies and approaches than addressing the needs of poor rural residents of downstate counties. If the focus was to shift to family self-sufficiency, then emphasis had to shift to what worked for those families. And what worked for families was local knowledge, so the restructuring had to take place from the ground up.

**Five pilot areas were chosen**. They represented very different kinds of service delivery needs. They were in the Chicago neighborhood of Grand Boulevard; the City of Waukegan; the seven southernmost counties of Illinois, the state's poorest rural area; DuPage County; and the City of Springfield.

**Each area convened** a community collaborative, which set its own agenda, identifying a problem facing poor families in the community and setting about finding ways that the state agencies could assist in solving it. In this way, the Task Force hoped to discover what was needed on the ground, so that the restructured human services system could have a real impact.

<sup>4</sup> Ibid., pg. 132



**The results of this process** were enlightening. Every collaborative chose to address barriers to job placement. They raised fundamental issues – child care, transportation, and few available jobs. And most advocated a one-stop approach for case management.

**A desire to change** the punitive nature of the old system—if you found work, you lost benefits, which usually defeated the purpose of work—brought about



the changes in Illinois policy that slowly reduced welfare payments while increasing support for child care as a recipient gained experience and income in a new job. Slowly, from actual experience, the way to change became clear.

**“One stop” was best served** by one agency responding to the specific conditions of local communities. Local offices, with strong community connections and support, could provide the best access to the many things needed to move from dependency to self-sufficiency. Better information services, equipped to manage all aspects of a case, were needed to cross the once-impenetrable walls between agency computers. The family must be at the center of the all these efforts, with all agencies collaborating on a comprehensive plan. Success had to be measurable and measured. With the stakes so high, every method implemented had to have a proven track record of success.

## **Creating DHS**

**The Department of Human Services** was created by Executive Order in January 1996. Many different interests had a stake in the debate: AFSCME, the larger state-contracted service providers, and legislators. In addition, the existing management structures of the six departments were going to be conflated into one. This wasn't entirely popular. In the end, a Legislative Task Force was added to the bill to provide oversight for the creation of the new super-Department, removing most of the roadblocks to passage. The Department of Human Services Act was signed into law on July 3, 1996.

**With that, Illinois became the first state** to have a “fully integrated family-centered, community-linked, outcome-driven” human services system within the parameters of the federal regulations of Clinton’s reforms. Much was expected of the new department and its new relationships. Between 1996 and 1999, the welfare caseload dropped by 40% and over 50% of the caseload families had at least one member that worked. It seemed “what works” was working.

## **TANF Ten Years Later**

**This year marks the tenth year anniversary** of the TANF program, and is an appropriate time to evaluate its impact. The nationwide welfare caseload is now less than half of what it was ten years ago, and supporters of the original legislation are quick to point to this as proof of the system’s value, especially in comparison to the old AFDC system.

**However, there are some disturbing numbers** clouding this assessment. By 2002, after a first five-year cycle, only 42% of those leaving welfare were leaving because they had a stable job<sup>5</sup>. A small number transferred to SSI, and another small number lived with a working partner or spouse. But the majority were clocked out or sanctioned out of the system without finding permanent employment.

**Reasons are various**, but all of them point to a difficult reality: some families are easier to transition to self-sufficiency than others, and the “tough cases” are the ones facing state agencies now. A study of 2,500

<sup>5</sup> Best Practices Brief No. 27, pg 2. Published by Michigan State University, October 2003.



low-income families in Boston, Chicago and San Antonio found that the women remaining on welfare were:

- Less likely to have graduated from high school
- More likely to report a health condition that keeps them from working
- More likely to report problems with depression and domestic violence
- Less likely to have strong social networks of support<sup>6</sup>

**An estimated 10 percent** of the total welfare population has prison records<sup>7</sup>, another significant barrier to employment. Clearly, more than job and



readiness training will be required to help these families confronting multiple significant impediments achieve self-sufficiency. Working with these families is often a slow and expensive process, rife with false starts and relapses. Those who fall out of the system are often lost to view—they move in with relatives or become part of the homeless population or simply leave the state.

### Differences Between States

**Developing an accurate** national assessment of TANF's success is further complicated by the marked differences between state programs and services offered under TANF. In July 2006, a publication released by the Urban Institute<sup>8</sup> made statistical

comparisons that showed how being poor was easier or harder depending on where you live.

Some striking facts from this report include:

- The maximum earning level allowed for eligibility for a family of three varies considerably, ranging from \$269 in Alabama to \$1,641 in Hawaii, with a median of \$704 (In Illinois, the maximum is \$396.)
- As of 2003, a family of three with a parent working 20 hours a week earning \$446 a month (federal minimum wage) still receives TANF in most states. Benefits vary from \$7 in Mississippi to \$755 in Alaska, with a median benefit of just over \$200. (\$247 in Illinois)
- On the most basic level—the time limit imposed on recipients—states vary widely, from a lifetime limit of only 21 months, to the rules in seven states that impose no time limit at all; Illinois provides the full 60 months.

**The conclusion drawn** from these differences is that although discussion of TANF often takes place in generalities, almost nothing about the program can be generalized.

### Reauthorization Tightens Requirements

**In addition to the increasing difficulties** of “tough cases,” states were handed a new group of challenges when the Deficit Reduction Act of 2005 included the ten-year reauthorization of TANF. For political reasons, TANF reauthorization was included in an omnibus deficit reduction bill, eliminating debate on its merits alone and preventing some proposed reforms that might have eased the burden of the legislation. Instead, the TANF regulations were tightened in many ways. States now face a higher hurdle in order to maintain federal TANF funding.

**Given all of these factors**—the barriers to work for much of the remaining welfare caseload; the new, tougher federal requirements; and the wide variance between state programs—how is Illinois planning to meet the challenge? For some insight, see the following article.

**Susan Rans is a freelance writer.**

<sup>6</sup> R.A. Moffit & A. Cherlin, *Disadvantage among Families Remaining on Welfare*, LCPR Policy Briefs, Vol. 3 (12), Chicago, IL: Northwestern University/University of Chicago, Joint Center for Poverty Research. Cited in Best Practices Brief No. 27, *Ibid*.

<sup>7</sup> Cited in MacDougal, Gary, *Make A Difference*, St. Martins Press: 2000, Pg 295.

<sup>8</sup> Gretchen Rowe and Linda Giannarelli, *Getting On, Staying On, and Getting Off Welfare: The Complexity of State-by-State Policy Choices*, The Urban Institute, Series A, No. A-70, July 2006.



## Reauthorizing TANF

by Dianne Barghouti Hardwick

**Temporary Assistance for Needy Families**, the state-federal program that provides cash assistance to low-income families, was reauthorized in 2005, but along with that extension of the program came more stringent requirements for recipients, and greater responsibilities for states.

**TANF provides states** with a federal block grant to operate the program – in Illinois, about \$585 million per year. The state must spend another \$430 million in Maintenance of Effort (MOE) funds.

**Illinois has been remarkably successful** at getting people employed and on a pathway to improve self-sufficiency using a comprehensive, integrated approach, emphasizing a gradual transition from assistance to full-fledged independence. In 1996, our TANF caseload was 188,069; by May of this year, the caseload was 33,031.

(For additional background on TANF and Illinois' approach to its "welfare to work" requirements please see *E Pluribus Unum* article, page 16).

**Work participation** for each TANF recipient must now be tracked, verified and reported. A plan for doing so must be submitted to the federal government for approval.

**The new regulations curb state flexibility** by limiting the set of work activities that can count towards participation rates. Each state must meet a 50 percent threshold for work participation – that is, half of all the "available to work" clients must be engaged in federally-approved activities. The required family participation rates increase by 5% annually, reaching 70% in 2010. There are additional limits upon activities that were allowed in the past:

- Only six weeks of substance abuse, mental health or other rehabilitation may be counted toward the work participation rate in any 12-month period.
- Higher education programs as well as related non-supervised study time will no longer count toward participation rates.
- Vocational education and ESL programs have an increased priority and more readily count as participation.

**All of these requirements** present Illinois with considerable challenges. Our past successes at moving recipients into the work force means that a large proportion of the people now on our TANF roster are those who have multiple barriers to securing stable employment and achieving independence.

**DHS intends to be up to that challenge.** Our network of partners and providers in communities around the state remain an essential resource. Work already underway will allow DHS to use new processes supported by technology, to free caseworkers from routine tasks and allow them to focus upon our harder-to-serve recipients.

**Creative use of our existing resources** will help us meet the federally-mandated benchmarks. In fact, we've already begun. **First**, under an agreement with AFSCME, DHS has been able to place TANF recipients in local FCRCs working on defined tasks to meet the increased work experience requirements under reauthorization.

**Second, DHS partnered** with Chicago Public Schools, placing TANF recipients in 20 grade schools as attendance monitors. Each monitor attends a week-long training class and is then assigned to a school within walking distance of her home. The monitors go directly to students' homes to talk with parents and guardians about the importance of school attendance. This year, CPS had the highest first day attendance on record – and while our attendance monitors may not be responsible for all of that achievement, they have certainly had an impact. The program is so popular with the schools that other districts are asking to be included in the program.

**The challenge of TANF Reauthorization** won't necessarily be easy, but this is important work, and we will succeed!

**Dianne Barghouti Hardwick is Manager of the Field and Customer Support Unit within HCD.**

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## **Above the Call of Duty — at Work and Beyond**

by Mamie Rodgers

**Hilda Frontany, Director of Monitoring and Customer Service, Human Capital Development, Chicago**

**Diane Bradie-Gregoire, Bureau Chief of Title XX.**



When Diane and Hilda learned that it costs only pennies to manufacture a pill that treats ailing school-age children in Africa, they were compelled to get DHS involved. At issue is a disease called schistosomiasis, commonly known as snail disease, which is a disease

transmitted by river parasites. While seldom fatal, it is a serious disease that has never been a governmental funding priority. However, a single dose of a drug called praziquantel costs only \$2 and can reverse some of the effects of the disease, including blood-filled urine and severe pain, and prevent the development of other major diseases. Diane and Hilda started a penny drive. DHS employees, their families, friends and associates pitched in and raised \$1,503.67. Those funds will provide medication for 752 children.

**Hero Tameling (left), Acting Director of Business Services, Springfield,**



received the President's Volunteer Service Award for his dedication to volunteer services, his hours of serving the community, and his commitment to strengthening the nation. Hero has donated at least 4,000 hours to serving others. The President's Council on Service and

Civic Participation presented the award.

**Congratulations to Mary Giliberti, Human Service Caseworker, Winnebago**

for her personal contributions and care to refugees and participants of Reformers Unanimous. Mary buys gifts for the clients and has inspired DHS retirees to save their hotel toiletries and bring them to the clients.

**Andrew Ryal (right of sign), Bureau Chief of Chicago Metro Area Networks, Developmental Disabilities, Chicago,**



volunteers his services to teach youth with disabilities a sport that many individuals who are not physically disabled would not dare to try - - SCUBA diving. Through SCUBA diving, the youngsters enjoy an unimaginably exciting pastime while building their self-esteem, enhancing their communications and problem-solving skills, and reaching their full potential. The National Association of Black SCUBA Divers recently presented Andrew with a distinguished *Service To Diving Award* in recognition of his dedication to advancing aquatic education among youth.

**Gary Reynolds (left), Multi-Media Manager, Community Relations, Springfield,**



received the *Jackie Hanback Award* from the Illinois Rehabilitation Association for his advocacy and countless hours of volunteer work on behalf of people with disabilities. Through his single-handed efforts and his hosting annual telethons, Gary has

raised over \$70,000 for the United Cerebral Palsy fund. He has also adopted 11 children, nine of whom have significant disabilities.

**"Full use of your powers along the lines of excellence"**

**— definition of happiness by John F. Kennedy**

# On Another Note



## **Hispanic Heritage Celebration 2007**

Panamanian dancers, vendors, games, and a closing luncheon were all part of a series of festivities that took place during this year's celebration of Hispanic Heritage Month. This year's theme focused on honoring Afro-Latino roots.



## **DHS employee Dino Guardiola and**

**volunteers** from School of Ministry of New Life Covenant Church provided a day of hope and joy for the "Team Illinois" community of Pembroke, Illinois. With donations from DHS employees and many other caring individuals, the volunteers delivered 260 bags of groceries with a turkey, over 200 hats & gloves and 25 book bags full of school supplies.



## **Congratulations to the 2007 Graduating Class of the Illinois School for the Visually Impaired.**

Front Row: Katie McCoy, Heather Poppleton. Second Row: Ember Thompson, Brandon Kozak, Sean McKinney, Tye Garrett. Third Row: Jacob Sexton, Jovan Benson, Jimmy Orr, Steven Hobbs. Fourth Row: Janet McGovern, Principal; Joan Forney, Interim Supt.; Anna Bergsschneider and Denise Kerhlikar, Class Sponsors. Not pictured: Monyi Clark, Judith Brown and Roosevelt Bradley



## **Kudos!!!**

The Illinois School for the Deaf high school basketball cheerleaders captured first place at the cheerleading competition held during the Central State Schools for the Deaf Tournament. Squad members include (bottom row; left to right): Shauntia DeBerry, Makisha Velez, Katie Moore, Natalie Liles, Christina Cogswell, Danielle Laugal, Chelsey Lambie (top row; left to right) Monica Frederick, Crystal Haislip, and Domonique Wilson. The squad is coached by Carol Christensen and Jill Whitmore.

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## Governor's Day at the Illinois State Fair and Teen REACH

On August 15, 2007, Governor Rod R. Blagojevich hosted

"Step up for Healthcare," an effort to raise awareness about the importance of leading a healthy lifestyle. "Step up for Healthcare" featured Teen REACH Youth from Decatur hula hooping it up, to promote healthy living with fun activities.



**Several hundred kids competed** in the Fit 4 Life Jump Rope Olympics at this year's State Fair. Medals were awarded to the most creative, fastest, longest, and

senior jumpers. There was also a special competition for Double Dutch teams.

**Students from the Illinois School for the Deaf** attend Senator Barak Obama's announcement to run for U.S. President at the state capitol in February.



## The Illinois Department of Human Services congratulates

the students from the Illinois Center for Rehabilitation and Education-Roosevelt (ICRE-R) for winning 24 gold and silver medals during their participation in the 2007 Chicago Special Olympics Spring Games at Soldier Field.



## Action Photo of the Year!!!

ISVI student Bria Franks, dives for a save during the 2007 Goalball season. Goalball is a game for people with visual impairments where a team of three try to stop a ball (with a bell inside) from crossing their goal.



A mask is worn so no one has an advantage. It all works on hearing the ball roll toward them. This game is played in high schools and colleges around the country.



**The Illinois Department of Human Services Assistant Secretary Grace Hou (center)**, together with Sen. John Cullerton (sponsor of the state's human trafficking law), Wendy Cohen of the Governor's Office of Women's Affairs, Maribeth Swanson of the Salvation Army, and consulate representatives, kicks off the Second Annual Anti-Human Trafficking Outreach Day.

**“Without a sense of caring, there can be no sense of community.”**

**Anthony J. D’Angelo**



**DHS participates in the 78th Annual Bud Billiken Day Parade.**

DHS took its message on safe schools and safe communities “to the street” during this year’s end-of-summer celebration down Martin Luther King Drive in historic Bronzeville, on Chicago’s south side. This presentation featured two intertwining proclamations designed to encourage



people to take responsibility for purging communities of crime, guns and violence. **See Something? Say Something!!!** was the DHS manifesto that petitioned everybody to

reject the destructive “Don’t Snitch” code that too often prevails in our neighborhoods, enabling crime to grow, fester, and destroy.

**Don’t Dis Your Ability**

was the “shout out” to all people who are disabled, as more than 70 wheelchair users joined



our contingent along the 16-block parade route, forming human billboards under the banner: **Come Roll with Us . . . Make a Difference in Your Community.** Poignant reminders of deadly crimes and irrevocable consequences, these participants represent a growing population of young people who are disabled but committed to independence and increased productivity. The assistance they receive from DHS Rehabilitation Services helps make this goal a reality.



**Disability Pride!!!!**

The Division of Rehabilitative Services sponsored a float in the Disability Pride Parade in Chicago on August 21, 2007.



**Asset\$Illinois is a proactive initiative** to assist families with saving money and building wealth by accumulating financial assets. This initiative offers qualified, moderate-income working people the opportunity to become first-time homeowners. Those who take advantage of this initiative will be required to open an Individual Development Account (a savings account) for which the state will provide matching funds up to \$2,000. In addition, the program focuses on vocational education, microenterprise initiatives and advocacy for public policy to address issues related to the advancement of economic stability and self-sufficiency for all Illinoisans.

**African American Heritage Celebration.**

Staff from the Illinois Department of Human Services recently dressed up as their favorite Motown celebrities as part of this year’s African American Heritage Celebration. Crowds gathered at the Clinton building in Chicago to see stellar performances from Ike and Tina Turner, the Supremes, and Aretha Franklin, to name a few.



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## Appreciation Tours

Secretary Adams and executive staff members recognize state-operated mental health and developmental disability staff for their hard work, longevity, and valuable contributions. Starting at the top going clockwise: Chicago-Read Mental Health Center, Tinley Park Mental Health Center, Elgin Mental Health Center, Howe Developmental Center, McFarland Mental Health Center, and Shapiro Developmental Center.



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