

# Preserving Services for Vulnerable Individuals and Families

---

*2011 Human Services Priorities*



**January 2011**

---

AARP Indiana  
accessABILITY Center for Independent Living, Inc.  
ARC of Indiana  
Area IV Agency on Aging and Community Action Programs  
Citizens Action Coalition of Indiana  
Children's Bureau, Inc.  
Elders At the Table Coalition  
Feeding Indiana's Hungry  
Hoosiers First, Inc.  
Indiana 211 Partnership  
Indiana Assisted Living Federation of America (IALFA)  
Indiana Association of Area Agencies on Aging (IAAAA)  
Indiana Assoc. for Community Economic Development (IACED)  
Indiana Association for Home & Hospice Care (IAHHC)

Indiana Association of United Ways (IAUW)  
Indiana Community Action Association (INCAA)  
IU School of Social Work  
Jewish Community Relations Council (JCRC)  
Lafayette Urban Ministry  
League of Women Voters of IN  
Marion County Commission On Youth, Inc. (MCCOY)  
Mental Health America of Indiana  
National Association of Social Workers - Indiana (NASW)  
New Horizons  
NOBLE of Indiana  
Planned Parenthood Advocates Indiana  
United Way of Central Indiana

---

---

## Preserving Services for Vulnerable Individuals and Families

### Overview of Priorities for 2011

---

---

The Indiana Coalition for Human Services (ICHS) is committed to enhancing the quality of life for all Hoosiers. ICHS recognizes the challenges faced by policymakers given the current economy and anticipated revenue forecasts; therefore, ICHS is not proposing new funding.

**Most importantly during 2011, the Indiana Coalition of Human Services seeks to protect vital human services in the state budget.** It is unwise to balance the budget on the backs of the state's most vulnerable and most in need. ICHS advocates that the state maintain current funding levels in evidence-based programs that work, looking for efficiencies and making cost-effective investments that slow the progression to Medicaid and other entitlements that create long-term costs for the State.

#### **ICHS Top Priorities for 2011:**

- **Protect vital human services in the State's budget.** Fund at current levels effective state programs that meet basic needs for Hoosier families. The State should maximize federal grant opportunities and invest in evidence-based, cost-effective services.
- **Increase transparency, effectiveness and accountability with government resources.**
- **Protect local emergency financial assistance at the county level** in any township reform efforts.
- **Support immigration policies** that preserve family integrity for children living in mixed status households, that do not disproportionately affect any one demographic group, and that do not place undue burdens on nonprofit human service providers.

*Other policies that ICHS and its members support:*

#### **Quality Health and Human Service Programs for Children and Families**

- ❖ Ensure adequate and timely funding for health, child welfare and human services.
- ❖ Provide sufficient resources to protect Indiana's vulnerable children and youth, people with physical, mental and intellectual disabilities, seniors and individuals working at low wages.
- ❖ Provide the policies and support necessary to ensure all Hoosiers can access 2-1-1 services.
- ❖ Ensure that reforms to the state's correctional system help ex-offenders to remain in or re-enter local communities prepared for a successful transition.

#### **Economic Security**

- ❖ Reform township poor relief by moving both funding and administration to the county level. Ensure the funds intended for poor relief are maintained for locally driven emergency financial assistance.
- ❖ Advocate to improve the public benefits eligibility determination process so that it works for Indiana's citizens.
- ❖ Ensure access to emergency food assistance for Hoosiers in need.
- ❖ Ensure that low-income and fixed-income customers have access to adequate and affordable home energy.
- ❖ Ensure Hoosier homeowners have access to high quality foreclosure prevention counseling and transparent foreclosure processes which maximize opportunities for saving Hoosier homes.

#### **Health Care Coverage and Services**

- ❖ Maximize the number of uninsured enrolled in Medicaid, Hoosier Healthwise and the Healthy Indiana Plan.
- ❖ Ensure Indiana is positioned to be in compliance with the federal Affordability Care Act (ACA), that the state actively pursues opportunities to expand health care coverage through increased federal matching dollars, and that consumers meaningfully participate in planning and implementation.
- ❖ Ensure the state publicizes Indiana's health care assistance programs and that they are patient-centered, offering access to primary and specialty care close to home.
- ❖ Maintain funding and resources for home and community-based services at least at current levels.

#### **Education**

- ❖ Ensure that education funding is divided fairly and that funding changes do not have unintended consequences on at-risk students and families served by community and faith-based organizations..
- ❖ Ensure that children in special education services receive fair and equitable treatment.
- ❖ Prioritize early education, early interventions and quality childcare to improve school readiness. Support full-day kindergarten for all children at no cost to their parents.

---

---

## Quality Health and Human Service Programs for Children and Families

### Provide necessary resources for vital programs

---

---

The Indiana Coalition for Human Services supports adequate funding for health and human services in the state budget to ensure the delivery of health and human services throughout the State of Indiana.

Children are entitled to protection, care and treatment under state and federal law; however, Indiana experienced an increase in the number of abuse and neglect cases in State Fiscal Year (SFY) 2009 when compared to 2008. In Indiana, 114,907 investigations of abuse and neglect were made during SFY 2009 as compared to 109,499 in 2008. Of these investigations, 21.5% were substantiated. In SFY 2009, the Child Abuse and Neglect rate in Indiana increased to 15.6 per 1,000 children, up from 12.6 per 1,000 in SFY 2008. In Indiana, 71.5% of all substantiated cases in SFY 2009 were for neglect. Providing adequate, well-trained staff and services is the best approach to protecting children, supporting families and providing timely, appropriate intervention.

**The Indiana Coalition for Human Services suggests the State of Indiana should:**

- **Sustain levels of investment in human capital through health and human services as part of Indiana's economic development plan.** All Hoosiers must be included in Indiana's economic development plans to strengthen Indiana's families and the workforce. Investing in health and human services generates business activity in local economies and helps individuals meet basic needs and reach economic self-sufficiency.
- **Ensure adequate and timely funding for health, child welfare and human services.** As poverty and joblessness in Indiana increase, so does the number of people needing health and human services. Reducing services during these times results in the inability of families to meet their basic needs of housing, food, health care, childcare and other vital resources. Contracted service providers should receive payment based on the actual cost of rendering services and in a timely manner as defined in existing service contracts.
- **Provide sufficient resources to protect Indiana's vulnerable children and youth.** Resources should be sufficient to comply with Indiana Code and best practice standards for programs and services. Timely payments to service providers, adequate adoption subsidies for special needs children and investment in community-based prevention services for youth and families must be made to decrease violence, neglect and juvenile delinquency.
- **Guarantee sufficient resources for support of people with intellectual and other developmental disabilities.** All persons with developmental disabilities and their families deserve programs, funding and public policies that will assist them in realizing their goals of learning, working and living in the community.
- **Allocate the funding necessary to ensure all Hoosiers can access 2-1-1 information and referral services.** 2-1-1 provides critical services comparable to 9-1-1 despite the lack of dedicated public funding. The economic downturn and disasters demonstrate the need for state support of comprehensive 2-1-1 services.
- **Enhance coordination and collaboration efforts through the Board for the Coordination of Services to Vulnerable Individuals.** All Hoosier children are entitled to fair and equitable services that will allow them to flourish in their families and communities. The Board for the Coordination of Services to Vulnerable Individuals was created in 2009 to encourage existing divisions to work together to ensure quality services for all children who are touched by the child welfare, education, juvenile justice and mental health systems. Continued efforts are needed to ensure that disparities are eliminated.
- **Enhance state revenue streams while leveraging as much additional federal funding as possible.** Indiana must find ways to maintain revenues to fund fully essential health and human services for its citizens. Indiana citizens pay more in federal taxes than the state receives in federal spending, making it a "donor" state. Thus, Indiana must maximize the amount of federal funding available for health and human services.
- **Ensure that reforms to the state's correctional system help ex-offenders to remain in or re-enter local communities prepared for a successful transition.** Opportunities for offenders to successfully transition back to the community are limited by insufficient housing and employment options, limited availability of substance abuse and mental health treatment services, and other ongoing supports. Corrections reforms must focus on helping non-violent offenders to secure the work skills for gainful employment, affordable housing options, increased availability of substance abuse and mental health services, and other appropriate supports.

---

---

# Economic Security

## Ensuring opportunity for Indiana's working families

---

---

As the country remains in a tough economic situation, Indiana's working families find themselves increasingly financially insecure. With the number of vulnerable citizens accessing public services continuing to grow, the foundations of opportunity -- living wages, job stability and upward mobility -- have been strained, endangering the future of thousands of Hoosiers. An economy that is struggling on many fronts requires both immediate and long-term solutions to help working families. Indiana must lay the groundwork for strengthening a "good jobs" economy: If Indiana's workers succeed, Indiana's economy will as well.

**The Indiana Coalition for Human Services suggests the State of Indiana should:**

- **Reform township poor relief by moving both funding and administration to the county level.** A major component of the safety net for low-income and vulnerable families, township poor relief should be reformed through county-wide administration, a standard eligibility determination framework, the ability of local units to contract with non-profit organizations to administer specific services and assurances that services can be readily accessed in communities throughout each of Indiana's 92 counties.
- **Work with all key parties to implement a public benefits eligibility determination process that works for Indiana's citizens.** As policymakers consider ways to improve Indiana's eligibility system, there must be one single desired outcome: a system that allows all individuals to apply for, maintain and sustain benefits for which they are eligible in a fair, fully accessible and efficient fashion.
- **Ensure access to emergency food assistance for Hoosiers in need.** As poverty rates increase, hunger and food scarcity become problematic for many Hoosiers. Ensuring the efficient administration processes of the federal SNAP (food stamp) program and encouraging public and private resources to invest in emergency food purchases and distribution are vital to ensuring that Hoosiers have access to nutritional food that will help them achieve success in school, at work and in life.
- **Ensure low-income and fixed-income customers have access to adequate and affordable home energy.** Low and fixed-income households are struggling with the increased burden of home energy bills. Access to adequate and affordable utility service is necessary for the health and safety of all Hoosiers families.
- **Facilitate mortgage foreclosure relief for Hoosier homeowners.** Even homeowners with good credit are falling behind on their payments in growing numbers. The State of Indiana must continue to help borrowers gain access to counseling and short-term financial resources to ensure a fair foreclosure process, encourage creditors to pursue foreclosure alternatives, protect against predatory and fraudulent foreclosure "rescue" practices and ensure creditor maintenance of vacant properties.

While the Indiana Coalition for Human Services recognizes the difficult financial situation, investment in hard-working, low income Hoosiers is prudent. **As resources become available, we suggest the state of Indiana do the following:**

- **Increase availability of Individual Development Accounts (IDAs).** IDAs provide working families matched savings for education, home purchase, home repair and business startup. The State estimates that only 10% of all eligible families participate in the current IDA program. An increase in the availability of IDAs will help more low-wage families attain economic self-sufficiency.
- **Establish a State Child and Dependent Care Tax Credit.** A state child and dependent care tax credit that is a percentage of the federal credit would help families enter and remain in Indiana's work force.
- **Provide adequate funding and income thresholds for Child Care Development Funds (CCDF).** Child Care Development Fund vouchers are an economic development tool that ensures parents can remain employed and provide for their families. Investing in child care will assist Indiana in expanding economic and workforce development initiatives for low-income workers.
- **Reinstitute the sales tax exemption on the Low-Income Heating Assistance Program funds.** LIHEAP is federal money which comes to the state for low-income heating assistance. All of it should be used for its intended purpose. Indiana should not collect sales tax on funds paying heating bills for low-income Hoosiers.

---

---

# Health Care Coverage and Services

## Adequate coverage of all Hoosiers

---

---

Hoosiers want a health care system that works for everyone. But our current health care system, which captures vast amounts of our state and nation's resources, employs many of its talented citizens, and promises both to promote health and relieve the burdens of illness, is failing far too many.

Over the past year, the number of uninsured across the country has grown by more than one million, and tens of millions more are underinsured and at immediate risk of financial ruin if they are seriously ill or injured. Individuals, families, employers and every level of government are feeling the financial pressure caused by rising health care costs. More often than not, people do not receive the best care that modern medicine has to offer. Many are bewildered by the complexity of health care and insurance coverage.

Current limits in public programs and gaps in employer coverage leave nearly 800,000 Hoosiers uninsured, resulting in substantial barriers to obtaining timely and appropriate health care. The federal Patient Protection and Affordable Care Act (ACA) can greatly reduce the number of uninsured individuals to the extent the state takes an active role in implementation efforts. These include effective outreach, a streamlined and consumer-friendly eligibility determination process, and strong regulatory oversight to ensure access, affordability, and quality care. Greater attention must also be paid to the long-term care needs of Indiana's aged and disabled citizens. The U.S. Census Bureau projects that the number of Americans age 65 and older will rise 36% from 2010 to 2020, compared with a 9% increase for the population as a whole. Efforts to serve more individuals in the home and community, instead of in institutional settings, are both cost-effective and preferable for those seeking long-term services and supports.

**The Indiana Coalition for Human Services suggests the State of Indiana should:**

- **Maximize the number of uninsured Hoosiers enrolled in Medicaid, Hoosier Healthwise and the Healthy Indiana Plan.** Continued efforts should be made to extend coverage to the largest possible number of people, including the working poor, uninsured adults without dependent children and parents of children already enrolled in Medicaid.
- **Ensure that Indiana is positioned for compliance with the ACA, that the state actively pursues opportunities to expand health care coverage through increased federal matching dollars, and that consumers meaningfully participate in planning and implementation related to access, affordability and quality of care.** The ACA provides significant opportunity to expand health care coverage to hundreds of thousands of uninsured Hoosiers. Moreover, active pursuit of selected grant opportunities can draw down additional federal dollars to expand health care programs and services. As key stakeholders, consumers should have ongoing and meaningful opportunities to participate in planning and implementation processes.
- **Ensure that the state publicizes Indiana's health care assistance programs and that they are patient-centered, offering access to primary and specialty care close to home.** Appropriate access to care is an essential element for both existing and new programs. The investment of sufficient resources to increase public awareness of available programs and services can reduce health care costs through earlier intervention and care.
- **Maintain funding and resources for home and community-based services and supports at least at current levels.** With adequate and readily available funding, older adults and people with disabilities can live safely in their homes and their community, avoiding unnecessary and more costly institutional care.

---

---

# Education

## Setting Hoosier children on a path for success

---

---

Indiana continues to rank far too low in critical areas of school readiness, grade-level reading competency, middle school success and high school graduation. While most Hoosiers agree that our educational system needs to be improved, the challenge is determining how to reform the system without hurting certain populations. The Indiana General Assembly has a duty “to provide, by law, for a general and uniform system of Common Schools, wherein tuition shall without charge, and equally open to all” (Indiana Constitution, Article 8, Section 8).

In 2009, 23,414 Indiana students did not graduate from high school, which cost the state \$6,087,640,000 in lifetime additional income (Alliance for Excellent Education). Data from 2004 indicates that dropouts are more than twice as likely as high school graduates to slip into poverty in a single year, are three times more likely than college graduates to be unemployed and are more than eight times as likely to be in jail or in prison than are high school graduates (America’s Promise Alliance). Certain children are more likely to dropout—minority children, special needs children and those at-risk because of family violence, homelessness, substance abuse, limited English proficiency.

Many researchers and experts agree that early education and appropriate intervention strategies improve overall outcomes in educational attainment. The early years build the foundation for a child’s development—in cognitive, linguistic, emotional, social, regulatory and moral capabilities. Higher quality child care has been found to lead to: higher test scores on early cognitive, language, and academic skills; higher graduation rates, increased labor force performance; lower teen parenting rates; and a return on investment of \$3.23 per dollar spent to \$17 per dollar spent (Elicker, Purdue University). Indiana’s current child care facility regulations are inconsistent depending on how the facility is categorized, which leads to confusion among parents and an unfair childcare market.

### **The Indiana Coalition for Human Services suggests the State of Indiana should:**

- **Enact reforms to Indiana’s Constitutionally-guaranteed public education system that improve outcomes for all Hoosier children, especially low-income, vulnerable and at-risk.** The State should involve various stakeholders in the development of education reforms.
- **Ensure education funding is divided fairly and that funding changes do not have unintended consequences on at-risk students and families served by community and faith-based organizations.** Over the past few years, both federal and state governments have placed many new demands on the K-12 education system. Funding decisions made regarding K-12 education should account for potential increases in demand for services provided to families of students served by community and faith-based organizations.
- **Ensure that children in special education services receive fair and equitable treatment.** There are an estimated 179,000 students in Indiana’s special education system. Children with special needs have the right to be educated with their peers in an inclusive educational setting, with appropriate supports, so they may earn a high school diploma to enhance their job placement and continuation of higher education.
- **Prioritize early education, early interventions and quality childcare to improve school readiness:**
  - **Support standardized health and safety requirements for child care providers as a first step towards quality child care.** Learning begins long before a child enters the classroom. Positive and enriching learning experiences that children have from birth to age six are crucial to shaping their academic future. The first step toward meeting the goal of all children entering school ready to learn is ensuring children under the age of six are being cared for by providers in healthy and safe environments. All child care providers—or at a minimum, child care providers that accept government vouchers for their care—should adhere to standardized health and safety requirements. Children have the right to high quality care to ensure their safety and that they enter school ready to learn.
  - **Seek creative funding alternatives to support full-day kindergarten for all children at no cost to their parents.** Both in Indiana and nationally, school districts have focused attention on the importance of early childhood education. Ensuring that all students are ready to learn by first grade will help reduce the achievement gap. A full-day kindergarten schedule provides opportunities that are more appropriate for children at all developmental levels. Full-day kindergarten programs result in both academic and social benefits. Teachers report significantly greater progress for full-day children compared to half-day students in literacy, math, general learning, and social skills.

---

---

# Immigration

## Policies that uphold equity and human rights

---

---

During the 1990's and early 21<sup>st</sup> Century, the United States' immigrant population increased significantly. According to the Census Bureau's 2009 American Community Survey, the U.S. immigrant population was 12.5% of the total U.S. population. In general, the number of immigrants living in the United States remained virtually flat in 2007, 2008 and 2009. There were an estimated 11.1 million unauthorized immigrants living in the U.S. in March 2009, a number that has declined by about one million since 2007(Pew Hispanic Center). Unauthorized immigrants comprise slightly less than 4% of the adult population of the U.S. Nearly one-quarter (23.8%) of the 70.9 million children in the U.S, under the age of 17 in 2009 had at least one immigrant parent. The number of U.S.-born children (37% based on the 2008 census data) in so-called mixed-status families (a family with at least one unauthorized immigrant parent and at least one U.S. citizen child) has expanded rapidly in recent years, from 2.7 million in 2003 to 4 million in 2008. By contrast, the number of children who are unauthorized immigrants themselves (1.5 million in 2008) hardly changed over the same five-year period and may have declined slightly since 2005.

In Indiana, the state's population increased by 37.3% between 2000 and 2008 (Migration Policy Institute). Also, in Indiana more than four in five (or 83% of) children in immigrant families were U.S. citizens in 2007 (Center for Social and Demographic Analysis at the University of Albany). Of the total immigrant population in Indiana, 25.6% entered during the 1990s, and 41.2% entered in 2000 or later.

According to the Census Bureau, there were 308 million people residing in the U.S. in 2010, up 9% from 2000. Overall, based on 2009 population estimates, Hispanics accounted for more than half (51%) of that growth. Among the nation's 48.4 million Hispanics in 2009, a record 20.1 million are eligible to vote. Some 15.5 million Hispanics are U.S. citizens 17 years of age or younger, and 12.8 million of all ages are not U.S. citizens. The number of the Latinos eligible to vote continues to grow.

### **The Indiana Coalition for Human Services believes that:**

- **Comprehensive immigration reform policies must not disproportionately impact any one demographic group on the basis of income level, level of education, ethnicity or national origin, health status, sexual orientation, religion or suspected immigration status.**
- **Comprehensive immigration reform policies must respect human rights and dignity for all those residing within our borders.**
- **Comprehensive immigration reform policies must make preserving family integrity for children who are U.S. citizens living in mixed-status families a top priority.**
- **Comprehensive immigration reform policies should not place undue burdens on not-for-profit human service providers with regards to employment, contracts and service provision.**
- **Keeping these principles in mind, comprehensive immigration reform is and should remain a national policy.**



## ICHS MISSION & CORE PRINCIPLES

### Mission

The mission of the Indiana Coalition for Human Services is to promote public policy that better the lives of those at risk and in need.

### Core Principles

The Coalition's work is guided by three core values in voicing the needs of vulnerable Hoosiers: inclusiveness, comprehensiveness, and quality. Specifically, ICHS advocates for:

- Inclusion of individuals and human service groups in priority setting, policy formulation, program development and evaluation;
- The development of comprehensive human services programming; and
- The delivery of quality human services programming in our state and local communities.

Coalition members voluntarily join together to communicate that all citizens are valued and to ensure that human needs are met. Members of the Coalition Cultivate, Advocate, Represent and Educate (CARE):

**CULTIVATE** relationships with state and local officials.

**ADVOCATE** with one unified voice.

**REPRESENT** Coalition issues before the General Assembly.

**EDUCATE** legislators, Coalition members, and the state-wide community about the issues affecting Indiana's most vulnerable populations.

=====

**David Sklar**

President

*(Jewish Community Relations Council)*

**Josephine Hughes**

Vice President

*(National Association of Social Workers)*

**Patti O'Callaghan**

Secretary

*(Lafayette Urban Ministry)*

**Paul Chase**

Treasurer

*(AARP Indiana)*

**Paulette Vandegriff**

Education Chair

*(League of Women Voters of Indiana)*

**Lucinda Nord**

Gov't Affairs Committee Co-Chair

*(Indiana Association of United Ways)*

**Mark St. John**

Gov't Affairs Committee Co-Chair

*(Indiana Association for Community*

*Economic Development)*

**Kim Dodson**

Immediate Past President

*(Arc of Indiana)*

=====

**Indiana Coalition for Human Services**

3901 N. Meridian Street, Suite 306

Indianapolis, IN 46208-4026

317-715-6719 (voice) • 317-921-1397 (fax)

[www.ichsonline.org](http://www.ichsonline.org)

*The Indiana Coalition for Human Services, comprised of 25 member organizations statewide, supports the approaches and recommendations stated in the 2011 Policy Position Statements in order to strengthen the safety net and improve both the access to and delivery of health and human services in Indiana.*