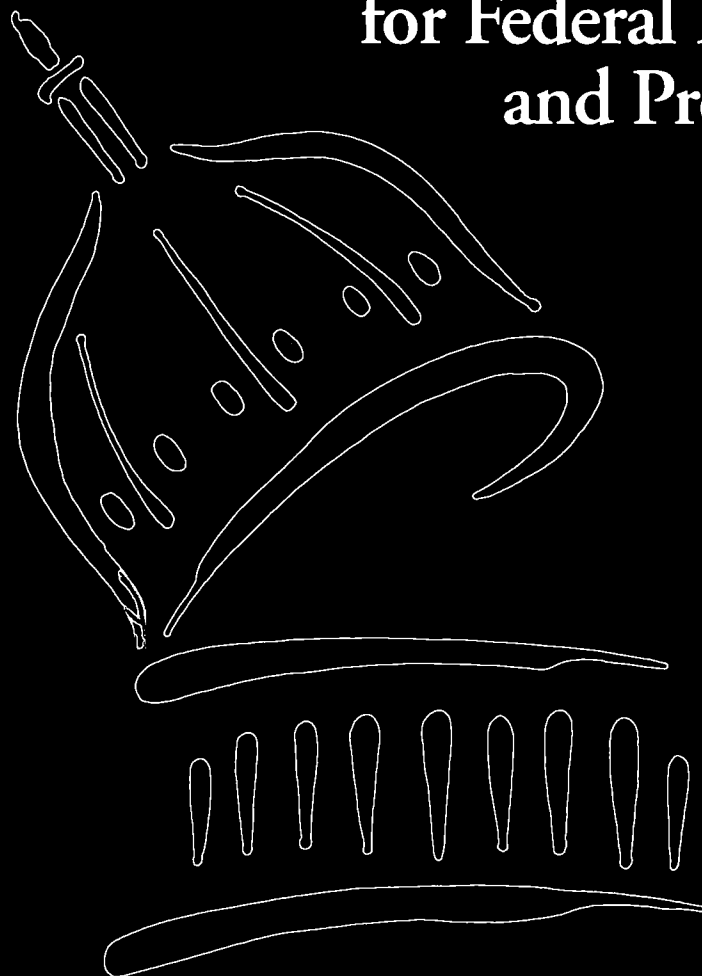


Targeting Youth

The Sourcebook
for Federal Policies
and Programs



By Janet R. Reingold and Beverly R. Frank

Published by Charles Stewart Mott Foundation

Targeting Youth

The Sourcebook
for Federal Policies
and Programs



Prepared under the auspices of the
Institute for Educational Leadership

By
Janet R. Reingold and Beverly R. Frank
Reingold & Associates, Inc.
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November 1993

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Preface

The federal government has adopted an enormous number of policies and programs to respond to the needs of American youth. These initiatives span numerous agencies and reflect a bewildering fragmentation of services. Evaluation data to assess the merits of most programs are elusive at best.

It is a poignant irony that at a time when increasing numbers of youth are in crisis, our response as a nation continues to be uncoordinated, the outcomes of our efforts remain largely unsubstantiated, and our ability to direct the necessary resources to these issues has become less certain.

We are at a critical juncture. Our nation cannot afford to continue to support an uncoordinated system of youth services with unclear outcomes. Clearly, a new approach to national youth policy is needed.

This report meets two purposes. The first is to set a stage for reform. We need to have a comprehensive understanding of what is out there and where the dollars are now flowing, in order to develop and enact effective reform agendas. Second, by providing fast access to information on federal initiatives, the report provides data that should be of immediate use to practitioners, policymakers, and others interested in youth with special needs. The report complements the Youth Practitioners' Guide Series published with Foundation support by Public/Private Ventures, Inc.

To my knowledge, this report is the first compilation of its type. The Foundation is indebted to Janet Reingold and Beverly Frank for an extraordinary effort.



Jon R. Blyth
Program Officer
Charles Stewart Mott Foundation

Foreword

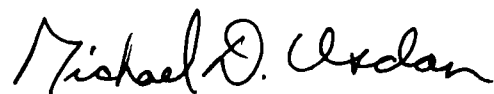
The Institute for Educational Leadership (IEL) is proud to sponsor this publication by Janet R. Reingold and Beverly R. Frank of Reingold & Associates. The authors have completed a monumental task with great effectiveness and clarity. In this remarkably readable compendium, they have made a unique and important contribution to furthering understanding of the too often fragmented and disjointed welter of federal programs that serve youth.

IEL has a special interest in this publication. Our diverse programmatic efforts to connect the schools with other youth-serving agencies in the health, social services, and employment and training fields are making it increasingly clear that categorical approaches to the complex problems confronting young people are not working satisfactorily. Indeed, demographic change and the burgeoning growth of poverty and economic marginality among young people are exacerbating an already dismal situation.

The still embryonic efforts to "reinvent government," as projected in the recent National Performance Review report, and the "bubbling up" of collaborative, interagency initiatives represent significant national trends indicating that the traditional means through which youth services are delivered are being reassessed and encouragingly rethought throughout the country.

We certainly must know where we are in order to know where we want to go. The trends identified by the authors are encouraging. We are moving towards the provision of more coordinated, community-based services, more family and private sector involvement, more focus on prevention and accountability, and more holistic strategies. If these laudable trends are to be sustained and institutionalized, we must build upon our knowledge and understanding of the existing panoply of federal youth programs.

The authors have completed a massively complex organizational assignment with remarkable cogency and skill. We are in a stronger position to progress in efforts to rationalize youth programs as the result of this work. IEL is delighted to have such an important document published under its imprimatur and is grateful to the Mott Foundation for its generous support.



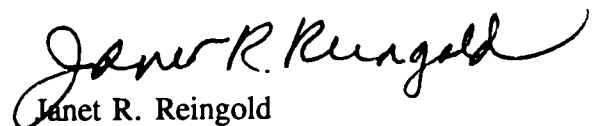
Michael D. Usdan
President
Institute for Educational Leadership

Acknowledgments

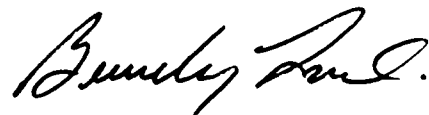
The authors are grateful to our colleagues at the Charles Stewart Mott Foundation and the Institute for Educational Leadership—their guidance and insight throughout the research and writing process was invaluable. We owe special appreciation to Jon Blyth, Program Officer, Charles Stewart Mott Foundation, for his commitment to this project, and his thoughtful guidance and support throughout the process. Special thanks are also due to Michael Usdan, President, Institute for Educational Leadership, and Louise Clarke, Chief Administrative Officer, for facilitating our work administratively.

The authors are grateful to the more than 300 federal officials who helped us collect and make sense of who is doing what—at the federal level—for American youth. Without their knowledge, interest, cooperation and input, this publication would not have been possible. In addition, we especially thank the more than 60 federal officials who reviewed our draft and provided helpful comments and additional information. We did our best to incorporate this feedback within the parameters of this project.

Readers should be aware that the material contained in this publication is not intended to evaluate program effectiveness nor to assess the adequacy of funding levels. Readers should also be aware that while each agency was given the opportunity to review a draft of this report prior to publication, their comments constitute neither an authorization nor an endorsement of the report. Responsibility for the content—and any errors or omissions—rests solely with Reingold & Associates.



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Reingold & Associates, Inc.

A Road Map to This Report

This report summarizes and synthesizes the programs, policies, research and evaluations that serve or target youth. It examines the youth-serving activities and initiatives of nine federal agencies—the United States Departments of Health and Human Services, Education, Labor, Justice, Agriculture, Interior, Housing and Urban Development, Defense, and Commerce—as well as ACTION, and the Commission on National and Community Service. To help you use this report effectively, we offer the following tips for finding the information you need.

To find out what is in the report, we recommend that you take a minute to read the introduction. Throughout the research, writing and editing stages, we faced difficult decisions relating to content and format. The introduction provides important information on how we made those decisions, what is included in the report, and what is not.

For those readers interested in the programs and activities of a particular federal agency, the detailed Table of Contents can help you locate the information you seek. For those more interested in a certain subject or issue which may cut across several federal agencies, the comprehensive subject Index at the end of the report will provide valuable assistance.

How This Report Is Organized

- | | |
|---------------------|---|
| Introduction | The introduction provides important background information on how we made decisions relating to content and format—what is in the report, what is not, and why. |
| Chapters | The agencies and their programs are arranged, not in alphabetical order, but in order of magnitude of their youth programs. Each chapter describes the youth programs of one federal agency, and is organized to reflect, to the extent possible, the internal organization of that agency. To help readers better understand the relative placement of different program offices and the overall structure of the agencies, we have provided agency organizational charts at the beginning of each chapter. In addition, for the longer chapters, we have provided an overview of the programs covered in the chapter. Program Overview charts highlight the major youth-serving programs included in the chapter, providing key information on each program as well as the page numbers where more detailed entries can be found. |
| Appendix A | Agencies' State Funding Allocations. This Appendix contains State funding allocation tables for a number of block grant, formula grant and entitlement programs of several federal agencies listed in this report. Readers interested in following the flow of federal dollars to their State may find these tables helpful. |

Appendix B

Clearinghouses. This Appendix contains an index of federal clearinghouses and resource centers listed by federal agency. These centers can provide a wide range of materials relating to a number of youth issues.

Appendix C

Resource Organizations. This Appendix contains a listing of national organizations that serve youth. These organizations can help readers identify other key players in the youth service and policy fields.

Appendix D

Selected Bibliography. Readers interested in additional reading on the issues covered in this report may refer to the bibliography of selected publications relating to youth service and policy.

Appendix E

Report Funders, Sponsors and Authors. This Appendix contains information about the Charles Stewart Mott Foundation (funders), the Institute for Educational Leadership (sponsors), and Reingold & Associates, Inc. (authors)

Appendix F

Index. Readers with an interest in a particular topic or issue should consult the comprehensive subject Index at the end of this report. Subjects are listed for easy cross-reference.

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I. Introduction

A. Responding to Unmet Needs

The condition of America's youth has made it to the top of the national agenda. The connection has been made between the shocking statistics on poverty, homelessness, substance abuse, HIV/AIDS, poor school performance, dropout rates, and the future of our nation. As a nation, we have come to realize that we cannot afford to ignore the serious problems that plague far too many of our young people. While the large majority of young people are studying, working, helping their families and communities, and preparing for adult responsibilities, many face substantial challenges. These are the young people toward whom the federal government directs its energies, resources, and programs.

While the federal government devotes substantial resources to youth and young adolescents, results to date are not encouraging. The numbers tell the story, and the lives behind the numbers tell an even more compelling one.

- **Poverty:** One in five American children—12 million in all—lives in poverty.¹ Of eight industrialized countries, the United States has the highest child poverty rate. Poor teens are more than three times as likely as non-poor teens to drop out of school.²
- **Education:** Some 68 percent of those arrested, 79 percent of welfare dependents, 85 percent of dropouts, and 72 percent of the unemployed are functionally illiterate.³ In 1992, among youth not going on to college, half as many black recent high school graduates (33 percent) were employed compared to their white counterparts (67 percent).⁴
- **Adult/Parental Attention:** Half of our sixth graders and almost 60 percent of junior and senior high school students spend two or more hours a day at home without adult supervision. One study found that adolescents spend an average of just five minutes a day in one-on-one interaction with their fathers, and 20 minutes of such time with their mothers.⁵
- **Homicide:** Homicide is now the leading cause of death for African American males and females aged 15-24.⁶ The homicide rates among young Native American and Hispanic males are at least 4 times higher than for other white males.⁷
- **Teen Pregnancy:** Every day teenagers give birth to 1,336 babies and teens younger than 15 give birth to 29 babies.⁸
- **Suicide:** Suicide is now the second leading cause of death among young white men, ages 15-24.

- **Crime:** In 1990, 1.1 million juveniles were taken into custody.⁹ Teenagers are the age group most victimized by crime in the U.S. Teens are victims in three of ten violent crimes and one of four thefts.¹⁰ Approximately one of every five high school students now carries a firearm, knife, razor, club, or other weapon on a regular basis. Many of them carry these weapons to school.¹¹
- **Substance Abuse:** The United States has the highest rate of teen alcohol and drug abuse of any industrialized nation.¹² Alcohol-related trauma is the leading cause of death for U.S. youth age one to 19 years.¹³
- **Child Abuse:** In 1992, an estimated 1,261 children were known to have died from child abuse. That same year, an estimated 2.9 million suspected child abuse incidents were reported in the United States.¹⁴

The same questions still resonate loudly throughout the country. How do we, as a nation, best identify, prioritize, and address these problems? How do we coordinate our efforts to ensure the best use of our resources? What works? How do we reach and save our children? Where do we go from here?

If it were possible to weave together all of the policies, programs, research and evaluation that serves or targets youth from each federal agency, the tapestry would reflect great wealth and a substantial measure of national commitment. But at present, youth resources are more of a patchwork quilt than a tapestry, and finding the bits and pieces requires a good deal of time, money, persistence, and luck. Until now, youth serving agencies and organizations seeking information about how and in what areas our federal government is focusing the nation's resources for young people have not had one source for that information.

This report is a review and synthesis, department-by-department, of current federal policies, programs, research and evaluations that serve or target youth. It examines the youth-serving activities of nine federal agencies—the United States Departments of Health and Human Services, Education, Labor, Justice, Agriculture, Interior, Housing and Urban Development, Defense, and Commerce—as well as ACTION, and the Commission on National and Community Service. These agencies were chosen as the most likely sources of programs and resources for our nation's young people.

B. Issues and Challenges

To accomplish our goal of providing the youth serving community with a comprehensive overview of federal programs, policies, research and evaluations for youth, we conducted a systematic and careful review of each agency's services and programs. To gather information from all likely agency repositories, our

research involved telephone and in-person interviews with approximately 300 federal employees from various agencies' program, budget, public information, research, and policy offices. Each contact was informed about the subject and scope of the project and asked for information, materials, and suggested contacts. In addition, research was conducted in a variety of library and resource centers. Collected materials were then reviewed, analyzed, and synthesized to provide a clear and crisp presentation of information.

This report is the result of months of digging, collecting, distilling, consulting, reviewing, synthesizing, thinking and rethinking. Throughout the process, we confronted and wrestled with several issues relating to content and organization. With guidance from our partners at the Charles Stewart Mott Foundation and the Institute for Educational Leadership, we weighed each issue and consideration against our primary objective: to create a report that will be useful for its target audience—the youth serving organizations and policy makers who will be referring to it.

1. Defining Youth

The primary focus of this effort is on policies and programs for adolescent teens and young adults. However, federal programs often target different age groups (youth in the range of 10-21, 12-18, or 16-24), or populations that include adolescents (children 0-18, women of childbearing age, or families with children). Consequently, we did not limit our research to one specific age range, as we believed that would be both arbitrary and difficult to disaggregate. Rather, to ensure a comprehensive overview of federal initiatives, we concentrated on adolescent youth and young adults, but included, where warranted, programs that serve among their target populations large numbers or proportions of youth.

2. Deciding What Programs to Include

Virtually all federal policies and programs affect the lives of youth. This report, however, looks at those federal initiatives which address issues specific to the needs of America's adolescent population, or which provide significant and direct benefits to that population. Aside from those programs aimed directly at adolescents, it was difficult to establish a litmus test for determining which programs to include in this report. In making our determinations, we considered the intent or focus, as well as the outcome, of each program.

Programs that target traditionally underserved or needy populations that have high proportions of adolescents (low-income pregnant women or injecting drug users) are included when they also focus on specific subpopulations, like adolescents. For example, programs aimed at preventing HIV/AIDS are not all included, but those HIV/AIDS prevention programs that include a focus emphasis on adolescents, are included.

Similarly, many federal programs target needs associated not with age, but with factors such as poverty or health. These programs are not all included in this report. However, those major programs that serve large numbers of youth are included. For example, the federal government funds community health care centers that provide health services to low-income people. These centers ensure the delivery of health care services to people of all ages, including children and youth.

Many federal programs provide assistance to needy families with children to help minimize the impact of poverty and to support their efforts to achieve self-sufficiency and independence. Some of these programs directly address the health and social needs of children, like Aid to Families with Dependent Children (AFDC), Food Stamps, and Medicaid. Others focus on helping parents with assistance, training, education and employment opportunities to better equip them to support their families. We chose to include only those family assistance programs that provide direct benefits to children, or serve significant proportions of young adults. The Low Income Home Energy Assistance program, administered by the Department of Health and Human Services' Administration on Children and Families, provides block grants to States, territories, Indian Tribes and tribal organizations to assist low-income households in meeting home energy costs. While the program assists an estimated six million families annually, the program does not target youth, nor does it serve youth as individuals. Consequently, it was not included in our chapter on the U.S. Department of Health and Human Services.

The federal government supports training programs for individuals who work with youth. While these programs benefit youth, they do not directly serve youth and thus are not mentioned or are mentioned only briefly.

Several federal agencies support numerous initiatives to encourage youth, in many cases minority youth, to pursue careers or study in a particular field. For example, the National Institutes of Health spend approximately \$40 million annually on fellowships, grants, and other activities that expand opportunities for minority youth in the life sciences. While other federal agencies also support similar initiatives, cataloging every one would have greatly expanded the scope of this report. Consequently, these programs and initiatives are given only brief mention.

Finally, many federal programs focus on improving the health and social welfare of young children. Clearly, these initiatives are designed to encourage a healthier outcome for these children as they go through adolescents and adulthood. For example, federal immunization and lead poisoning programs reduce the risk of preventable disease and disability for young children. Undoubtedly children who benefit from these programs will continue to benefit throughout their lives. However, these programs which focus on young children are outside the scope of this report and are therefore not included.

3. Reporting Funding Levels

There is little consistency in the way federal agencies and programs report funding levels. Some use Fiscal Years, and other use Program Years. Neither of these is in synchronization with calendar years or school years. Funding for some demonstration programs may be reported in a multi-year lump sum. Agencies also refer to funding figures representing authorizations, appropriations, allocations, or estimated and actual expenditures. Consequently, it is almost impossible to compare funding levels across agencies.

We have reported funding levels as they were provided by agencies, and have attempted to specify the time period covered. Funding levels provided in this report are intended to approximate the size of programs. In addition, funding levels reported represent the budget for an entire program and do not reflect the funding amount each program allocates to youth services.

4. Organizing the Information

Despite our efforts to detail programs and organize chapters consistently throughout this report, our research, and consequently our final product, were driven largely by materials provided by federal agencies and interviews conducted with federal employees. Our information is synthesized from an abundance of fact sheets, budget tables, program descriptions, abstracts, regulations, funding announcements, annual reports, interviews and legislation. Consequently, the level of detail varies from program to program, and from agency to agency, and is not intended to reflect any judgment on the size, importance, effectiveness or success or any given program.

This report is organized into chapters, with each chapter representing one federal agency. In addition, a variety of appendices provide the following: a listing of agencies' State funding allocations for a number of block grant, formula grant and entitlement programs; a listing of federal clearinghouses and resource centers; a listing of selected national resource organizations that serve youth; and a bibliography of selected publications, federal and non-federal, that may be of interest to the reader. Finally, a detailed Index is provided in the back of the report to help guide the reader to subjects of greatest interest, regardless of which agency administers the program.

C. Some Observations on Federal Funding for Youth

Our extensive contact with key federal program and policy people, and our extensive review of federal program materials, have enabled us to identify several trends in federal funding of social service programs. It should be noted that these

observations are general and somewhat subjective. While they can be illustrated with anecdotal examples, they represent movements-on-the-margins, rather than a massive re-direction of federal effort.

- 1) **Greater Emphasis on Coordinated and Integrated Social Services.** More and more, federal funding is targeting coordinated and integrated services or systems approaches for social service programs. Different agencies call it different names, and emphases vary, but there is clearly a trend toward increased investment in identifying and assessing ways to integrate and coordinate social services.
- 2) **Greater Emphasis on Community-Based Solutions.** Another significant program focus is on supporting community-based solutions to address community-specific needs or problems. In a number of areas, federal funding encourages community-wide involvement in identifying and addressing social needs.
- 3) **Greater Emphasis on the Role of the Private Sector.** The role of the private sector, in particular business and industry, is shifting from the sidelines to a greater partnership with government in addressing many issues that affect youth, such as workforce preparation and quality education. While some may view this as an effort to shift the burden from the public to the private sector, both government and business leaders understand these issues as global, economic ones which affect our nation's productivity and thus, our vitality.
- 4) **Greater Emphasis on Holistic Strategies.** Increasingly, federal initiatives seek to address multiple needs of youth, recognizing that many of their problems are interrelated. A teenager using drugs or alcohol is likely to have problems in school and looking for a job. A pregnant teenager is likely to be a dropout, unemployed, and poor. Thus, federal programs appear to be placing greater emphasis on holistic approaches to youth development.
- 5) **Greater Emphasis on Family Involvement.** Likewise, federal programs are increasingly emphasizing family involvement in addressing individual needs of one or more of its members. This approach is intended to strengthen the family, improve the success and effectiveness of the program, and ultimately to improve outcomes for family members.
- 6) **Greater Emphasis on Prevention Rather Than Treatment.** Recognizing that an ounce of prevention is worth a pound of cure, there is increasing discussion about the relative importance of prevention-oriented approaches in social services. However, funding priorities have not yet shifted to the extent that the rhetoric has toward earlier and preventive measures, and away from treatment approaches that take effect after a problem has

surfaced. The key issue remains striking an appropriate balance between the two.

- 7) **Greater Emphasis on Evaluation and Accountability.** In these times of scarce resources, program operators are increasingly recognizing the importance of evaluation and accountability. To attain adequate financial support, whether from the public or the private sectors, it is increasingly important to document and disseminate program results. Likewise, policymakers and the public want and need to make meaningful distinctions among programs that work, and those that do not.

D. Policy Issues for Further Consideration

It is apparent by the sheer volume of programs we have uncovered that the federal government is contributing a huge amount to the well-being of youth and to youth services. Nevertheless, there does not yet appear to be a coordinated and focused federal youth agenda. Following are some of the factors that serve to hinder coordinated and targeted youth efforts:

- Because many programs do not specifically target youth but serve youth within a broader population, the percentage of government resources directed specifically toward youth is difficult to ascertain.
- Because federal resources often are funneled through State governments before they reach youth serving agencies, it is often difficult to trace where and how federal money is spent, exactly what services are provided and exactly who is served.
- Up-to-date and current information on federal programs is hard to find. The lags in availability of information make it difficult to determine at any given time whether there is sufficient and appropriate federal action on behalf of youth. It is also difficult and costly to collect net impact data and qualitative evaluations of programs and services. Thus, answers to questions of quality and impacts are often more anecdotal than systematic and universal.
- Finally, there is no consistency throughout federal legislation and agencies with regard to how one defines "youth." And there is still the larger question of whether it would be better to create a uniform and consistent definition of youth or to let program-specific goals determine youth definitions on a program by program basis.

¹*From the Center on Hunger, Poverty & Nutritional Policy at Tufts University.*

²*From the Children's Defense Fund's publication, The Adolescent & Young Adult Fact Book.*

³*From "A Report Card on American Youth," by the National Collaboration for Youth.*

⁴*From The Condition of Education 1993, published by the U.S. Department of Education.*

⁵*From a study cited by the Carnegie Council on Adolescent Development.*

⁶*From Office of Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services.*

⁷*From Division of Planning and Policy Implementation, Office of Policy and Program Coordination, SAMHSA.*

⁸*From the Children's Defense Fund's publication, The Adolescent & Young Adult Fact Book.*

⁹*Source Book of Criminal Justice Statistics, 1991, Bureau of Justice Assistance*

¹⁰*Bureau of Justice Statistics, Office of Justice Programs, U.S. Department of Justice, 1991.*

¹¹*From a speech by the Honorable Richard W. Riley, U.S. Secretary of Education, July 20, 1993.*

¹²*According to the U.S. Department of Health and Human Services.*

¹³*According to the American Public Health Association.*

¹⁴*National Committee for Prevention of Child Abuse, 1993.*

II. U.S. Department of Health and Human Services

Overview

The Department of Health and Human Services (HHS), created in 1979 as the successor to the Department of Health, Education and Welfare, is responsible for improving the quality of life and advancing the health of all Americans. To fulfill its mission, HHS administers programs and supports activities to control and treat disease; improve the quality and increase the availability of medical personnel and facilities; reduce the impact of poverty on children and families; assist families and individuals to achieve self-sufficiency and independence; conduct health and social research; support health care for Native Americans; provide rehabilitation services; control occupational health hazards; inspect food, drugs and cosmetics for safety; and provide elderly with financial security and medical care.

With a budget of approximately \$592 billion in Fiscal Year 1993, HHS is the largest federal agency in terms of annual spending. The Department's three largest entitlement programs—Medicare, Medicaid and Social Security—account for nearly nine tenths of its overall budget.

Fiscal Year 1994 Budget Proposal

The President's Fiscal Year 1994 budget request includes \$641 billion for HHS, an increase of \$49 billion (including \$44 billion in Social Security, Medicare and Medicaid to match inflation) over Fiscal Year 1993. The new plan targets increased spending in the following areas: \$800 million, up from \$400 million, for immunizations; \$4.2 billion, an increase of \$1.4 billion, for Head Start; a new \$60 million block grant designed to strengthen troubled families; \$1.4 billion, up \$328 million, for women's health programs; and \$10.7 billion, up \$1.2 billion, for disease prevention.

HHS

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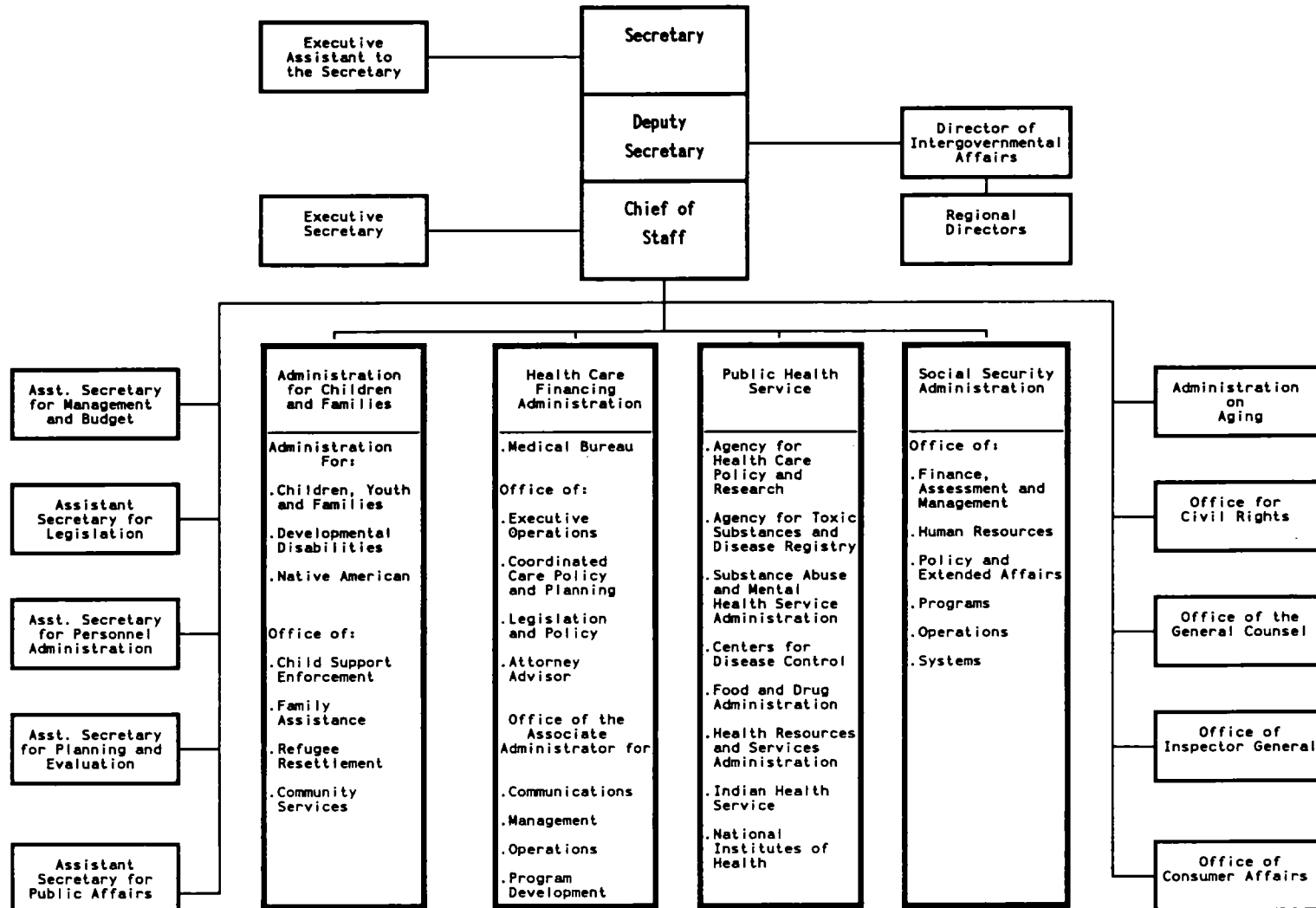
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Health careers?
Substance Abuse?
18

A. Department of Health and Human Services Organization Chart



B. Department of Health and Human Services Program Overview

Program	Age Eligibility	Target Youth Population	FY 1993 Funding (in millions) ¹
Administration for Children and Families			
Child Welfare Services	Under 21	Abused, neglected, homeless, and troubled children	\$295
Foster Care & Adoption Assistance	Under 18 ²	Children needing placement and foster care	\$2,800
Independent Living Program	Over 16	Youth in foster care	\$70
 Youth Gang Drug Prevention	Under 18	Program priorities determined annually	\$10.64
Runaway and Homeless Youth Basic Centers	Under 18	Runaway and homeless youth, at- risk youth	\$35.1
Drug Abuse Prevention Program	Under 18	Runaway and homeless youth	\$14.9
Transitional Living Program	16-21	Runaway and homeless youth	\$11.8
Child Abuse Basic State Grants	Under 18 ³	Abused and neglected youth	\$20.5
Child Abuse Discretionary Program	Under 18	Abused and neglected youth	\$16.6
Child Abuse Challenge Grants	Under 18	Abused and neglected youth	\$5.3
Children's Justice Grants	Under 18	Abused and neglected youth	NA

Program	Age Eligibility	Target Youth Population	FY 1993 Funding (in millions)
AFDC	Under 18 ⁴	Low-income youth, low-income families with children	\$12,400
JOBS	N/A	Young adult AFDC recipients	—
AFDC-Unemployed Parent Program	N/A	Teen parents	
Emergency Assistance	Under 21 ⁵	Low-income youth, low-income families with children	\$155
At-Risk Child Care	N/A	Teen parents	\$300
Child Support Enforcement	N/A	Teen parents	\$8 (FY 92)
Community Services Block Grant	N/A	Low-income youth	\$372
* National Youth Sports Program	10-16	Low-income youth	\$9.5
* Comm. Econ. Development ⁶ Youth Opportunities Unlimited	N/A	Youth in targeted high poverty urban and rural areas	\$1
Disadvantaged Youth	16-24	Economically and socially disadvantaged youth	\$2.5
* Demonstration Partnership Prgm	N/A	Homeless individuals and families, female heads of households, <u>young minority males</u> , teen parents, at-risk <u>school-aged</u> youth, and low-income families	\$3.8
Social Service Block Grant	N/A	Youth at-risk of abuse, neglect, or exploitation	\$2,800

Program	Age Eligibility	Target Youth Population	FY 1993 Funding (in millions)
Family Violence Prevention	N/A	Victims of family violence	\$24.8
 Job Opportunities for Low-Income Individuals	N/A	Low-income youth	\$5 (FY 92)
Emergency Comm. Services Homeless Grant Program	N/A	Homeless children and youth	\$19.8
Developmental Disabilities Programs	N/A	Youth with developmental disabilities	\$109.2
Programs for Native Americans	N/A	Native American and Alaska Native youth	\$34.5
Public Health Service⁷			
Healthy People 2000	N/A	Children (1-14) and youth (15-24)	N/A
 Minority Male Initiative	N/A	Youth at-risk of substance abuse, dropping out of school, unemployment, early fatherhood, suicide, homicide, STDs, family dysfunction	\$5 (FY 92)
?? Adolescent Family Life Program	 10-19	Pregnant and parenting adolescents	\$7.6
National Family Planning Program	N/A	Sexually-active women of child-bearing age	\$173
IHS Regional Treatment Centers	10-19 ⁸	American Indian and Alaska Native youth	\$12 (FY 92)
IHS Health Care Improvement Grants	N/A	American Indian and Alaska Native youth	\$28

Program	Age Eligibility	Target Youth Population	FY 1993 Funding (in millions)
IHS Adolescent Health Centers Youth	10-19	American Indian/Alaska Native out-of-school youth	\$0.8 (FY 91)
IHS HIV Prevention	N/A	American Indian and Alaska Native youth in schools	
IHS Maternal and Child Health	N/A	American Indian and Alaska Native teen mothers	
Maternal/Child Health Block Grant	N/A	Children 0-19 with special needs	\$665
Community Integrated Service Systems	N/A	Pregnant women and infants, rural populations, children with special needs	9
Special Projects of Regional and National Significance (SPRANS)	N/A	Children 0-19, priorities determined annually	10 —
Emergency Medical Services	0-18	Children with emergency medical conditions	—
Injury Prevention Program	0-21		—
Hemophilia and Pediatric AIDS	0-21	Children with hemophilia and pediatric HIV	—
Community/Migrant Health Centers	N/A	Disadvantaged youth 1-17	\$616
Health Care for the Homeless	N/A	Homeless youth	\$58
Primary Health Services for Homeless and At-Risk Children	0-18	Homeless youth, youth at risk of homelessness	\$5

Program	Age Eligibility	Target Youth Population	FY 1993 Funding (in millions)
Primary Care School Health Program ¹¹	Students K-12	Youth in areas with high incidence of poverty, lack of access to primary care, high proportion of racial-ethnic minorities, and poor health status indicators	—
Comprehensive AIDS Resources Emergency Assistance	N/A	Youth with HIV/AIDS	\$284.7
Special Projects Nat'l Significance	N/A	People with HIV infection ¹²	\$10
 Health Careers Opportunity Prgm	N/A	Students from disadvantaged backgrounds	—
 High-Risk Youth Demo Program	5-20	Youth at risk for alcohol, tobacco, and other drug use	\$56.4
Pregnant and Postpartum Women	Women 15-44	Low-income, substance-abusing women	\$50.4
 Comm. Partnership Demo Grant	N/A	Youth at-risk for substance abuse	\$105.1
 CSAP Programs Nat'l Significance	N/A	Disadvantaged youth	\$3.2
CSAT Adolescent Initiative	10-19	Adolescent substance abusers	N/A
 Substance Abuse Block Grant	N/A	Adolescent substance abusers	\$1,130 ??
Residential Treatment Program for Pregnant and Postpartum Women	Women 15-44	Substance abusing adolescent females	\$24.6

Program	Age Eligibility	Target Youth Population	FY 1993 Funding (in millions)
Residential Treatment Program for Women & Children	N/A	Alcohol and drug dependent adolescent females, minority women, residents of public housing, homeless women, women in rural areas, women with infectious diseases	\$13.9
 Critical Populations	N/A	Youth 10-21, substance abusing women over 12 and their children, minorities, residents of public housing, homeless people	\$29
 Target Cities	N/A	Adolescents, minorities, pregnant women, female addicts and their children, residents of public housing	\$30
 Treatment for Non-Incarcerated Criminal and Juv. Justice Pops	N/A	Juvenile offenders 10-22	\$7.6
Treatment for Correctional Pops	N/A	Incarcerated adolescents 10-22	\$12.5
Treatment Campuses	N/A	Adolescent substance abusers 12-17	\$18.5
Community-Based Outreach and Intervention Demonstration	N/A	Injecting drug users and their sexual partners	\$10.5
Mental Health Services Block Grant	N/A	Youth with mental health needs	\$277.9
 Child/Adolescent Service System	0-22	Youth at risk for mental/emotional/behavioral disorders	\$8.2

Program	Age Eligibility	Target Youth Population	FY 1993 Funding (in millions)
Comprehensive Community Services for Children with SED	0-22	Youth with emotional, behavioral, mental disorders	\$4.9

¹Funding levels of programs that do not have age eligibility requirements do not indicate portion of funding allocated for services to youth.

²Under the Adoption Assistance Act, children under age 18 are eligible for services except where mental or physical disabilities require continuation to age 21.

³The Child Abuse Prevention and Treatment Act defines child abuse and neglect as "the physical or mental injury, sexual abuse or exploitation, negligent treatment or maltreatment of a child under the age of 18, or except in the case of sexual abuse, the age specified by the child protection law of the State..."

⁴States may chose to pay benefits to high school students until they turn 19.

⁵States may set lower age eligibility parameter.

⁶The Fiscal Year 1993 Urban and Rural Community Economic Development discretionary grants program creates two set-asides for economically and socially disadvantaged youth.

⁷The Centers for Disease Control, the National Institutes of Health and the Agency for Health Care Policy and Research are not included in this section. These agencies support a broad range of scientific and survey research.

⁸The Indian Health Service health care providers generally accept as their definition of youth, adolescents 10-19 years of age.

⁹When the appropriation for the Maternal and Child Health Services Block Grant exceeds \$600 million, 12.75 percent of the amount in excess of \$600 million is set aside for Community Integrated Service Systems.

¹⁰Fifteen percent of the amount appropriated for the Maternal and Child Health Block Grant is set aside for SPRANS.

¹¹The Bureau of Primary Health Care is currently developing a proposal for the Primary Care School Health Program.

¹²In Fiscal Year 1993, the Bureau of Health Resources Development is accepting grant applications only for adolescent services projects.

C. Office of the Secretary

HHS supports a number of programs, activities, research and initiatives that directly serve or target youth, most of which are coordinated by various agencies and program offices in the Administration for Children and Families and the Public Health Service. Both the Health Care Financing Administration, which administers the Medicare and Medicaid programs, and the Social Security Administration, also provide benefits to eligible youth. In addition, several initiatives that target youth, and other populations that include a large proportion of youth, are coordinated from policy offices within the Office of the Secretary. In particular, the Office of the Assistant Secretary for Planning and Evaluation, and the Office of the Inspector General, support research and initiatives focusing on children and youth.

a. The Minority Male Initiative

The Minority Male Initiative is a special Department-wide project started by former Secretary of HHS Louis Sullivan, M.D., to address the serious health and social problems that afflict minority males at rates far in excess of the population at large. It targets youth who are at-risk of substance dependency, dropping out of school, unemployment, early fatherhood, homicide, suicide, sexually transmitted disease, and family dysfunction. Based on the principle that effective strategies for addressing these serious problems originate in the community, the initiative supports a variety of activities to encourage community-based efforts, including "seed money" for neighborhood and community groups, conferences to enhance the exchange of information, technical assistance for community organizations and local governments, research and evaluation, and specific prevention and intervention projects.

The Minority Male Initiative Task Force, a group of senior-level Department officials, develops policies, oversees and coordinates all activities, while individual programs are administered by the appropriate operating divisions of HHS. Since its inception in 1990, funding for all programs under the Initiative has exceeded \$100 million per year. The program is jointly funded by the Administration on Children and Families, the Health Care Financing Administration, the Public Health Service, and the Social Security Administration, and administered by the Office of Minority Health in the Public Health Service.

b. Cities in Schools

Cities in Schools (CIS) is a public/private partnership demonstration program that helps prevent students from dropping out of school by creating a comprehensive support system for at-risk youth. Local government, school officials, and private business assess community needs and social workers, counselors, recreational directors, health professionals, teachers, and others provide supportive services and activities for youth to reduce their risk of dropping out of school. The program seeks to provide for the social, educational, health, and emotional needs of each at-risk

child. Since its inception more than 10 years ago, CIS has served more than 18,500 youth. CIS is funded by the U.S. Departments of Labor, Education, Justice and Health and Human Services.

1. Office of Assistant Secretary for Planning and Evaluation

The Division of Children and Youth Policy within the Office of the Assistant Secretary for Planning and Evaluation (ASPE) supports research in a variety of subject areas to produce information on the organization, financing, and delivery of services to children and youth, particularly among disadvantaged groups. Recent work includes studies of issues related to the children of participants in the JOBS program, understanding the needs of drug-exposed and HIV-positive children as well as those of homeless families with children; children's mental health services, family preservation programs, and the educational needs of drug-exposed children. In addition to this research, the Division also has recently supported a series of grants to stimulate and support efforts to integrate health and human services for low-income families as a means of improving the access to and effectiveness of these services. Although ASPE's new priority areas are not as yet determined, early indications suggest that welfare reform and health care reform will be at the top of the agenda. Following is a partial listing of recent initiatives by subject area.

a. Child Abuse/Neglect, Child Welfare, Foster Care

- Intensive Family Reunification Services. (Contractor: Macro International, Inc.). This project examines reunification strategies and their availability in a number of States and localities prior to and during the time in which a foster child returns home.
- Community-based Mental Health Services for Children in the Child Welfare System. (Contractor: Macro International, Inc.). This study looks at how children in the child welfare system receive mental health services, what type of services are available, how mental health services are coordinate with other agencies' services, the role of the family, the costs and funding sources, barriers, and the role of different government and non-government entities.
- Evaluability Assessment of Family Preservation Programs. (Contractor: James Bell and Associates, Inc.). This project is aimed at developing the capabilities of the child welfare field to conduct important and useful evaluation of innovative services, and developing consensus on key evaluation, policy and program issues surrounding family preservation.

b. Adolescents

- **Changes in Marriage and Fertility Behavior: Behavior Versus Attitude of Young People.** (Contractor: Child Trends, Inc.). This report, completed in July 1989, examines a variety of data regarding current trends in adolescents' sexual fertility, and marital behavior and discusses evidence regarding the permanence of these trends. The report suggests that policies which can bring adolescents' actions in line with their attitudes may be able to affect the disturbing increases in adolescent sex, premarital sex, abortion, and non-marital childbearing.
- **Comprehensive Service Integration Programs for At-Risk Youth.** (Contractor: Urban Institute). This recently completed study examines programs that provide comprehensive, integrated prevention services to youth aged 10-15 who are at risk of delinquency, substance abuse, violence, early and unprotected sexual activity, or dropping out of school. The study highlights effective methods and identifies common barriers to providing integrated services, and looks at program evaluation issues.

c. Families

- **Homeless Families with Children: Programmatic Responses by Five Communities.** (Contractor: Macro Systems, Inc.). Completed in 1991, this study examines the configuration of services and programmatic systems in place to support homeless families in five cities. The final report, issued in two volumes, describes the specialized needs of homeless families and factors contributing to homelessness, presents an overview of findings from the five site visits, and discusses issues and barriers to service delivery. The five sites are: Atlanta, Baltimore, Boston, Minneapolis, and Oakland.
- **Programs Serving Drug-Exposed Children and Their Families.** (Contractor: Macro Systems, Inc.). This study, completed in 1991, examines ways in which existing programs or service delivery systems in four cities have adapted to meet the needs of drug-exposed children. Case studies were conducted in St. Petersburg, Florida; Portland, Oregon; Los Angeles, California; and Chicago, Illinois.

d. Service Integration

In addition to the following service integration projects, ASPE has supported a number of local projects in Florida, Georgia, California, Minnesota and Ohio.

- **Facilitation of Community-Based Service Integration Planning: An Urban Network.** (Contractor: Institute for Educational Leadership). Through the Institute for Educational Leadership's network of cities participating in the Collaborative Leadership Development Program (supported by the Danforth and Mott Foundations in addition to other public and private resources), this project supports community problem-solving and negotiations exercises, combined with a leadership development strategy, to facilitate service integration planning at the local level.
- **National Resource Center for Community-Based Service Integration.** (Contractor: Mathtech, Inc.). This resource center, made up of a consortium of organizations, was put together to carry out the following major functions: 1) to review and summarize past efforts to integrate health and human services; 2) to serve as a clearinghouse for information about community integration efforts; 3) to provide technical assistance to communities; and 4) to promote local integration efforts.
- In April 1993, HHS, in collaboration with the Department of Education, released a how-to book for communities, *Together We Can: A Guide for Crafting a Profamily System of Education and Human Services*. The book is designed to help communities improve and coordinate their education, health and social service programs for at-risk children and their families.

2. Office of the Surgeon General

The Surgeon General serves as the principal medical authority in the federal government, and advises on and developing priorities on key health policy issues. In recent years, the Office of the Surgeon General has focused on several health areas that affect youth: substance abuse, alcohol labeling, tobacco use, and AIDS. The substance abuse initiative included a series of reports on aspects ranging from underage drinking to the effects of advertising on adolescents. Reports on alcohol labeling suggested that teens often did not know what they were consuming and were likely to ignore warning labels. The Surgeon General is preparing a report for publication in the Fall of 1993 that looks at why teens are more likely to start smoking at age 11 or 12 years. To help State and local policy makers, the Office of the Surgeon General put together a compilation of all AIDS-related programs for adolescents. In addition, the Surgeon General chairs an HHS panel on AIDS,

Adolescents, Women and Children. The panel looks at the special needs and characteristics of youth populations, legal and ethical issues, and issues relating to care and treatment.

3. Office of the Inspector General

Departmental Inspector Generals are responsible for identifying and reporting program fraud and abuse, criminal activity, and unethical conduct in the federal government. The Inspector General for HHS also conducts research on key health issues as directed by the Secretary and Surgeon General. The following are examples of reports completed by the Office of the Inspector General that focus on youth.

- **Youth and Alcohol: Summary of Research on Alcohol Advertising's Effect on Youth.** This report, ordered by the Surgeon General, summarizes research on ways in which alcohol advertising affects youth. Among the findings are: 1) while some researchers believe that alcohol advertising does affect youth attitudes about alcohol's role in society, there is no consensus about the interpretations of these findings; 2) there is a link between alcohol advertising and adolescents' consumption patterns; 3) youth may be influenced by celebrity endorsements for alcohol; and 4) students like ads that are humorous, feature attractive models, make drinking look fun, and are in attractive and exotic settings. This report was published in 1992.
- **Adolescent Steroid Use.** This paper examines the non-medical use of steroids by adolescents, suggests appropriate education or intervention strategies to prevent steroid use, and presents the following findings: 1) despite the fact that it is illegal, more than 250,000 adolescents, primarily males, use or have used steroids for non-medical purposes; 2) adolescent steroid use starts early and often leads to prolonged and intensive use; 3) adolescent steroid use is motivated by socially accepted values and concerns about appearance and peer approval; 4) while research is inconclusive, steroid use is linked to serious psychological and physical health problems; and 5) testing and controlled substance status are potential deterrents to non-medical steroid use. This paper was issued in 1991.
- **HIV Infection among Street Youth.** This study examines the scope of HIV infection among street youth, and services that address the problem. Findings include: 1) thousands of young people have been infected with HIV, and street youth are in particular danger because of the risky behaviors that are part of their lifestyle; 2) street youth often are distrustful and reluctant to engage in treatment; 3) gaps in knowledge about street youths' sexual behaviors, the numbers infected, and treatments may hinder efforts to prevent HIV infection among this population; 4) even when services are available, problems such as

fragmented funding sources and different ideological approaches impose barriers to service delivery; and 5) at the federal level, response to this problem is inadequately focused and coordinated. This report was published in 1991.

D. Administration for Children and Families

Overview

In 1991, the Administration for Children and Families (ACF) was created within the Department of Health and Human Services to join together organizationally those federal programs that promote economic and social self-sufficiency for children and families. ACF combined the responsibilities of the Office of Human Development Services (OHDS) and the Family Support Services Administration (FSA). The program consolidation was intended to reflect the federal government's commitment to providing strong leadership and emphasis on coordination in meeting the needs of children and families.

1. Administration on Children, Youth, and Families

Nearly 25 percent of children younger than six were living in poverty in 1991.¹

The Administration on Children, Youth and Families (ACYF) is the federal focal point for programs, activities, and initiatives designed to improve the quality of life for children, youth, and families. ACYF's programs are administered through three bureaus and one center: the Head Start Bureau, the Children's Bureau, the Family and Youth Services Bureau, and the National Center on Child Abuse and Neglect.

a. Children's Bureau

The Children's Bureau administers grants to strengthen child welfare services provided by State and local public welfare agencies. The Bureau also administers the Child Care and Development Block Grant, which provides grants to States to support child care services for low-income families.

i. Children's Programs

Child Welfare Services. Authorized under Title IV-B of the Social Security Act, Child Welfare Services provides grants to States to establish, extend, and strengthen child welfare services for abused, neglected, homeless, and otherwise troubled children under 21 years of age and their families, without regard to income. The primary goal of child welfare services is to keep families together. State agencies provide the following services: preventive interventions aimed at keeping children in their homes; alternative placements, such as foster care or adoption, if children cannot

remain at home; and, reunification services so that children can return home if at all possible. Each State receives a base amount of \$70,000 and additional funds are distributed in proportion to the State's population of children under 21 and average per capita income. There is a State match requirement of 25 percent. In Fiscal Year 1993, \$295 million was appropriated for this program, up from \$274 million in Fiscal Year 1992.

Additional funding is appropriated for related child welfare programs, including:

- The Child Welfare Research and Demonstration program awards grants and contracts to public and private agencies for research, demonstration, and technical assistance activities for children and youth in four basic areas: placement prevention, reunification, foster care, and specialized foster care. Funding is also made available for the National Child Welfare Resource Centers. In Fiscal Year 1993, \$6.47 million was appropriated for child welfare research.
- The Child Welfare Training Program awards discretionary grants to public and nonprofit agencies of higher education institutions to develop and improve education and training programs and resources for child welfare service providers. The Fiscal Year 1993 budget included \$4.44 million for this program.
- The Adoption Opportunities program makes grants and contracts available to public and private nonprofit agencies to help eliminate barriers to adoption and help find permanent home for children who would benefit from adoption, especially those with special needs who are hard to place. Fiscal Year 1993 funding for this program totaled \$12.16 million.
- Crisis Nursery and Respite Care Demonstration Project Grants, authorized by the Temporary Child Care for Children with Disabilities and Crisis Nurseries Act of 1986, provide grants to States to fund: temporary non-medical child care for children with special needs such as disabilities or chronic illness; and crisis nursery services for children who have experienced or are at risk of abuse or neglect. In Fiscal Year 1993, \$11.94 million appropriated for grants and the ARCH Resource Center.

The Foster Care and Adoption Assistance. The Foster Care and Adoption Assistance programs, authorized under title IV-E of the Social Security Act, provide assistance to States in providing care for children under 18 years of age who need placement outside their homes, in foster care, or in institutions. The programs facilitate the placement of hard-to-place children in permanent adoptive homes, preventing long, inappropriate stays in foster care. States also receive funds to assist adoptive children with special needs, including older children, sibling groups,

minority children, or physically, mentally or emotionally challenged children. To be eligible for assistance under these programs, children must receive or be eligible for AFDC or SSI benefits. The funds are provided to States as matching funds based on the State's per capita income and the program is administered through the State agency that oversees child welfare. Based on 1991 average monthly data, benefits were paid on behalf of approximately 200,000 foster children. In Fiscal Year 1993, approximately \$2.8 billion is available to States.

Independent Living Program. To compliment the Foster Care and Adoption Assistance program, the federal government offers grants to States under the Independent Living Program. This program assists children over the age of 16 in making the transition from foster care to independent living through activities such as education and employment training, and training in daily living skills such as budgeting, locating housing, career planning and job searching. In Fiscal Year 1993, \$70 million out of the funds appropriated for Foster Care and Adoption Assistance was allocated to the Independent Living program.

Child Care and Development Block Grant. The Child Care and Development Block Grant (CCDBG) program makes funds available to States, Indian Tribes, and Territories to increase the availability, affordability, and quality of child care services for low-income families. CCDBG emphasizes the role of the parents in selecting the care best suited to the needs of the family by supporting a variety of child care options including center-based, family and in-home care, care provided by relatives, and sectarian providers. Grantees are required to meet a number of program and eligibility requirements. Only children under 13 are eligible for child care services under CCDBG. Seventy-five percent of funds must be spent on activities to improve the availability and quality of child care and the remaining 25 percent is set aside for early childhood development, and before- and after-school care. In Fiscal Year 1993, \$892.8 million was appropriated for the CCDBG program.

ii. Children's Evaluations

To assure that child welfare and adoption assistance programs are effective, the Children's Bureau supports a number of evaluation projects. Following are evaluation projects currently funded by ACYF.

- The Evaluation of Efforts to Recruit Families and Achieve Adoptive Placement of Waiting Minority Children will assess the effectiveness of current projects, and identify models which are most effective in recruiting families and placing minority children waiting for adoption. Total funding for this project was just over \$400,000. (Grantee: James Bell Associates).
- The study of Adoption Assistance Impact and Outcomes was designed to address two primary objectives: 1) to determine the impact of State agency adoption assistance in policies on increasing the adoption of

special needs children; and 2) to study the impact of the adoptive placement on the child and the adoptive family. The final report is expected to be completed early in 1993. Funding for this project totaled approximately \$750,000. (Grantee: Westat, Inc.).

- A National Study of Maltreatment of Handicapped Children and Child Maltreatment in Substance Abusing Families is designed to provide information on: 1) the estimates of national incidence of child abuse and neglect among children with disabilities and among children who have substance abusing families; 2) how decision making processes affect services offered to abused children with disabilities and to children from substance abusing families; 3) possible ways to prevent the maltreatment of these children; and 4) the incidence of children developing disabilities as a result of maltreatment. The study has been completed and three Reports to Congress currently are being reviewed by ACF. Total funding for this project was approximately \$500,000. (Grantee: Westat, Inc.).
- A contract is expected to be awarded for Phase I of the National Study of Residential Care. This study will provide information on the characteristics of residential foster care providers, the range of services provided, the characteristics of children being served, and whether residential foster care providers provide permanency planning services. Total funding for this project is \$300,000. ACYF is expecting to award the contract in April 1993.
- ACYF is planning on awarding a contract for a National Study of Outcomes for Children Placed in Foster Care with Relatives to examine 1) outcomes for children in family and non-family foster care; and 2) the associated costs of relative foster care versus the costs of non-relative foster care. ACYF anticipates awarding this contract in the Spring of 1993.

b. Family and Youth Services Bureau

An estimated 500,000 to 1.5 million young people run away from or are forced out of their homes annually. An estimated 200,000 are homeless and living on the streets.

Overview

The Family and Youth Services Bureau (FYSB) provides national leadership on youth issues and assists individuals and organizations in providing effective, comprehensive services for youth in at-risk situations and their families. FYSB's programs seek effective prevention and intervention strategies that ensure the safety and maximize

the stability and self-sufficiency of youth. FYSB funds three programs for runaway and homeless youth, one program to prevent youth involvement in gangs, a number of support services, and a number of program evaluations.

i. FYSB Programs

The Youth Gang Drug Prevention Program. The Youth Gang Drug Prevention Program was authorized by the Omnibus Anti-Drug Abuse Act of 1988 in response to the increase in youth participation in gangs involved with illicit drugs and related violence. Funds are available for community-based programs that reduce and prevent youth involvement in gangs through social-service, cooperative approaches to service delivery. The program funds activities that: prevent and reduce youth involvement in gangs; promote youth involvement in lawful activities; prevent drug abuse among youth; support local law enforcement efforts to conduct educational outreach activities; inform gang members and their families about drug abuse treatment and rehabilitation services; facilitate federal and State cooperation with local schools to assist at-risk youth; and facilitate local, multi-disciplinary efforts to prevent youth involvement in gangs.

Funding priorities for the programs are identified annually. In Fiscal Year 1992, FYSB identified the following 5 funding priority areas: Community-Based Consortia; Adolescent Females At Risk of Gang Participation; Employment Programs for Youth At Risk of Gang Participation; New Immigrant and Refugee Youth Gangs and "Gang Proofing" Young Children. Research projects were funded in 2 areas: Gang Families; and Identification of Factors which Predispose a Youth to Avoid Gang Involvement.

In addition to funding grants, the Youth Gang Drug Prevention Program supports technical assistance and evaluation activities to promote both the successful implementation of local prevention projects and to increase knowledge about effective prevention practices. A national Youth Gang Drug Prevention Technical Assistance project provides on-site technical assistance and training, hosts an annual conference, facilitates local forums, provides resources and referral information and disseminates information to organizations involved in youth gang drug prevention. An evaluation of the original 52 prevention projects funded in Fiscal Year 1989 currently is being conducted to determine the impact and effect of the projects.

Since 1989, more than \$50 million has been awarded to fund 112 grants to States and local agencies in urban centers as well as in small towns. Fiscal Year 1993 appropriations for the Youth Gang Drug Prevention Program totaled \$10.64 million.

Runaway and Homeless Youth Programs. According to ACF data, an estimated 500,000 to 1.5 million young people run away from or are forced out of their homes, and an estimated 200,000 are homeless and living on the streets. Ages of these runaways range from younger than 11 to over 18, with more than half aged 15 or 16 years. The Family and Youth Services Bureau administers three programs for

runaway and homeless youth and their families that fund over 400 community-based youth service agencies across the country. The three programs are: Basic Centers, the Transitional Living Program, and the Drug Abuse Prevention Program.

- 1) **Basic Centers.** Runaway and Homeless Youth Program Basic Centers were established in 1974 under the Runaway Youth Act, Title III of the Juvenile Justice and Delinquency Prevention Act (JJDPA) to provide resources to States to support non-punitive social services to youth under age 18 who are in at-risk situations. The program has been expanded and changed since then, and was most recently authorized through fiscal year 1996 by amendments to JJDPA in 1992.

Three-year Basic Center grants are awarded annually on a competitive basis to support agencies that provide crisis intervention services to runaway and homeless youth outside the traditional juvenile justice and law enforcement systems. Grantees are required by law to provide short-term emergency shelter, direct outreach activities, service linkages with community agencies for the provision of services that are needed but not available directly from the grantee, counseling for youth and family members, recreational activities, and follow-up services to strengthen families and provide further assistance as needed. The program also supports 10 coordinated network grants which provide training and technical assistance to individual basic centers.

In Fiscal Year 1992, \$35.1 million in appropriations supported more than 350 Basic Centers, serving more than 64,000 runaway and homeless youth and their families. In addition, each federal dollar leveraged, on average, more than two dollars of State and local resources for services to this population. In Fiscal Year 1993 another \$35.1 million was appropriated for this program.

- 2) **Drug Abuse Prevention Program.** The Drug Abuse Prevention and Education Program for Runaway and Homeless Youth (DAPP) was created by the Anti-Drug Abuse Act of 1988 and subsequently reauthorized through fiscal year 1994. DAPP makes discretionary grants available on a competitive basis to public and private nonprofit agencies, organizations and institutions, to carry out research, demonstration and community-based service projects which focus on expanding or improving drug prevention, education and intervention services for runaway and homeless youth (under age 18) and their families. DAPP funds may be used for a variety of activities including: individual, family or group counseling; peer counseling; community education; support groups for at-risk youth in rural areas; information and training for service providers; coordination of local services; and the development of model approaches.

In Fiscal Year 1992, the \$14.9 million appropriated for DAPP supported more than 100 projects nationwide. Program activities are provided predominantly in conjunction with emergency shelter or transitional living facilities. The Fiscal Year 1993 budget included \$14.9 million for DAPP.

- 3) **Transitional Living Program for Homeless Youth.** The Transitional Living Program for Homeless Youth (TLP), established in 1988 by amendments to Title III of JJDP, provides for long-term, supportive assistance to runaway and homeless youth who cannot return to their homes for reasons such as abandonment, severe family conflict, neglect, or abuse. TLP is intended to help youth, aged 16 to 21, make a successful transition to self-sufficient living and avoid long-term dependency on social services. Discretionary grants are awarded on a competitive basis to local agencies to provide young people with comprehensive services in a supervised living arrangement for up to 18 months. By law, programs must provide safe, supportive living accommodations, individualized transitional plans, basic living skills education, employment preparation and job placement services, mental and physical health care, and the opportunity for educational advancement.

Since the first TLP was funded in 1990, the program has funded a total of 86 projects, most receiving up to \$600,000 for a three year period. A majority of the organizations offering services through the TLP also use program funding to operate temporary shelter and counseling services for runaway and homeless youth. In Fiscal Year 1993, \$11.8 million was appropriated for TLP.

Runaway and Homeless Youth Support Activities. In addition to the three programs for runaway and homeless youth, FYSB funds a number of other activities designed to support local youth service programs. These activities include 1) research and demonstration grants, 2) a program monitoring system, 3) a management information system, and 4) a clearinghouse, toll-free hotline, and resource center. *(See Appendix for further information on the clearinghouse, hotline, and resource center.)*

- 1) **Research and Demonstration.** FYSB awards research and demonstration grants to increase knowledge about issues and services related to at-risk youth. In 1991, responding to the need for current information on State and federal laws affecting adolescents, FYSB commissioned the American Bar Association's Center on Children and the Law to conduct a 50-State survey of runaway and homeless youth statutes and other relevant laws to identify legal and service provision issues, to develop a national reference for local youth service agencies, and to identify laws and programs that might affect at-risk youth as part of a wider target population (i.e., the McKinney Act, AFDC, WIC, and Food Stamps). The final report is expected to be released at the end of Fiscal Year 1993.

- 2) **Runaway and Homeless Youth Program Monitoring System.** In April 1992, FYSB awarded a contract to develop and implement a comprehensive system for assessing the performance of FYSB-funded programs. The purposes of the Program Monitoring System are 1) to improve the quality of services to runaway and homeless youth and their families by enhancing the administrative and programmatic capacities of federally funded programs; and, 2) to provide a thorough basis for analyzing issues related to program performance to guide the development of future policies and priorities. The monitoring instrument currently is being tested in ten programs around the country.
- 3) **Management Information System.** To assist local agencies meet data collection and reporting requirements, FYSB is funding the development of a national Management Information System. Organizations funded under the Runaway and Homeless Youth Programs must maintain client statistical records and submit annual program reports. In addition, some are required to profile the children and youth they serve and to provide an overview of the services they provide. The purpose of the Management Information System is to expand and improve existing knowledge regarding runaway and homeless youth and the problems they face, as well as to track the services and aftercare provided by FYSB-funded agencies. The system will be fully implemented by October 1993.
- 4) **Training and Technical Assistance Provider System.** To coordinate training efforts to assist federally funded local programs in the delivery of services to runaway and homeless youth, FYSB supports the Training and Technical Assistance Provider System. Through this system, ten regionally based organizations provide on-site consultations, regional, State, and local conferences, information sharing, and skill-based training to programs and agencies serving runaway and homeless youth. The system is intended to enhance the skills and effectiveness of youth service providers by facilitating information exchange on programmatic and operational procedures critical to runaway and homeless youth programs.

ii. FYSB Evaluation

To assess the effectiveness of the more than 400 Runaway and Homeless Youth programs and the approximately 60 Youth Gang Drug Prevention programs, the agency funds a number of evaluation projects to expand knowledge about specific issues, services or programs related to at-risk and runaway and homeless youth. The following evaluations are currently underway:

- The Evaluation of the Runaway and Homeless Youth Programs: A Follow-up Study will assess the impact of the Basic Center program on the youth it serves and determine policy, program, and service delivery issues that impede or facilitate the program's goals. Started in Fiscal

Year 1991, the pretest of the proposed data collection has been completed and it is expected that data collection for this study will begin in April 1993. Total funding for this evaluation is approximately \$1.1 million. (Grantee: Westat, Inc.).

- The Evaluation of the Transitional Living Program for Homeless Youth will determine the numbers served by the Transitional Living Program (TLP), the types of activities offered, and the whether youth receiving TLP services do better than those who do not. Data collection is expected to begin in May of 1993. Total funding for this evaluation is approximately \$1 million. (Grantee: CSR, Inc.).
- The Evaluation of Prevention Projects Related to Drugs and Youth Gangs will assess the impact and effect of the Youth Gang Drug Prevention Program through process, policy and outcome evaluations. Data collection was in progress in December 1992. Total funding for this evaluation is approximately \$1.2 million. (Grantee: Development Services Group, Inc.).
- The Incidence and Prevalence of Drug Abuse Among Runaway and Homeless Youth will investigate drug abuse and suicide by runaway and homeless youth. This project will also examine the role of family drug abuse on youth and their behavior. Data collection occurred between October and December 1992, and analyses of the data is being prepared. Total funding for this evaluation is approximately \$1.1 million. (Grantee: Research Triangle Institute).
- The National Evaluation of Home-Based Service Programs will look at the cost, effect and approaches of projects that were funded with FYSB's discretionary grants in Fiscal Year 1991 and that provide home-based services for runaway and homeless youth .An impact evaluation will be conducted in the fall of 1993 after data collection instruments are approved by the Office of Management and Budget. The evaluation will cost approximately \$275,000. (Grantee: KRA Corp).
- The Study of the Underlying Causes of Youth Homelessness will examine the causes and consequences of youth homelessness, as well as the intervention and related services needed to prevent and end youth homelessness. The final report is expected to be released in 1993. Total funding for this study is about \$265,000. (Grantee: Macro Systems, Inc.).

- The Evaluation of the Impact of Homelessness on FYSB Programs will assess the impact of homelessness on programs administered by FYSB to identify successful service models that address the problem. Data collection is expected to begin in May of 1993. Total funding for this evaluation is approximately \$900,000. (Grantee: Price Waterhouse).
- The Simulation Model for Youth Programs was a six-month project to assess the feasibility of designing national and local simulation models to help program administrators forecast the potential impact on FYSB-funded programs of changes in socio economic conditions. The Final Report was completed in October 1992. (Grantee: Cygnus Corp.).

c. National Center on Child Abuse and Neglect

The Child Abuse Prevention and Treatment Act defines child abuse and neglect as "the physical or mental injury, sexual abuse or exploitation, negligent treatment or maltreatment of a child under the age of 18, or except in the case of sexual abuse, the age specified by the child protection law of the State...."

Nationally, an estimated 1.5 million reports on abused and neglected children and youth are substantiated annually.

In 1990, more than 2.5 million children were reported abused or neglected and over 1,200 died as a result.

In 1986 the National Incidence Study found that 917,200 children were involved in child maltreatment cases of neglect and 590,800 children were involved in cases of abuse.

Overview

The National Center on Child Abuse and Neglect, established in 1974 by the Child Abuse Prevention and Treatment Act and authorized under the Child Abuse Prevention, Adoption, and Family Services Act of 1988, administers funds to help States improve and expand services for the prevention and treatment of child abuse and neglect and to draw public attention to the problem of child maltreatment. NCCAN is involved in a variety of activities including conducting research; collecting, analyzing and disseminating information; and providing assistance to States and communities in developing programs and activities related to the prevention, identification and treatment of child abuse and neglect. In Fiscal Year 1992, NCCAN awarded \$69.4 million in federal grants and contracts to States, local governments, public and private nonprofit agencies, universities, and voluntary organizations. NCCAN also funds two resource centers and two clearinghouses.

i. NCCAN Programs

Basic State Grants. Basic State Grants help States develop, strengthen, and implement child abuse and neglect prevention and treatment programs; and improve and strengthen responses to reports of medical neglect. The grants are authorized under Part I of the Child Abuse Prevention, Adoption, and Family Services Act of 1988 (Public Law 100-294), as amended, which also authorizes State grants for disabled infants. Over the past five years, the basic grants have helped States build the capability to respond to reports of child abuse within 24-hours; to establish parent aide and self-help programs; to recruit and train volunteers; and to develop Statewide crisis hotlines and public awareness campaigns. In Fiscal Year 1992, grant awards were made to 48 eligible States and Territories. The Fiscal Year 1993 budget included \$20.5 million for State Grants.

Child Abuse Discretionary Program. The Child Abuse Discretionary Program is designed to improve and increase national, State, community and family activities which prevent, identify, and treat child abuse and neglect. This program focuses on research, demonstration, service improvement, information dissemination, and technical assistance. In Fiscal Year 1993, \$16.6 million was appropriated for this program.

Child Abuse Challenge Grants. The Child Abuse Challenge Grants program is designed to encourage States to establish and maintain trust funds or other funding mechanisms, including direct State appropriations, to support child abuse and neglect prevention activities. A State is eligible for funding if it has established or maintained such a trust during the previous fiscal year. By Fiscal Year 1991, 47 States had established trust funds for this program. The Fiscal Year 1993 budget included \$5.3 million for Challenge Grants.

Children's Justice Grant Program. The Children's Justice Grant Program helps States improve the handling of child abuse cases, particularly cases of sexual abuse, so that trauma to the child is minimized. Funds from this program can also be used to improve the investigation and prosecution of child abuse cases. Funding is allocated from deposits made into the Crime Victim's Fund, administered by the Department of Justice.

Emergency Child Abuse Prevention Services. The Emergency Child Abuse Prevention Services program offers States and local agencies discretionary funds for activities that improve the delivery of services to children whose parents abuse alcohol or drugs, particularly those children whose parents are crack cocaine abusers.

ii. NCCAN Research

In addition to funding demonstration projects and training programs, NCCAN supports and conducts research into the causes, prevention and treatment of child abuse and neglect, and on appropriate and effective investigative, administrative and

judicial procedures for cases involving child abuse and neglect. In recent years, NCCAN has funded child abuse and neglect projects in the following areas: graduate research fellowships; research on juvenile sexual offenders; research on the neighborhood impact on child maltreatment; a longitudinal study to examine both the antecedents and consequences of neglect in a high-risk group of children; research on the prevention and identification of maltreatment in children of cocaine-using mothers; a follow-up study to determine the relationship between the childhood victimization of boys and later offending behavior; and a project to review and synthesize research on child abuse and neglect and to recommend research priorities for the future.

Following are examples of currently funded research projects:

- As required by legislation in 1988, NCCAN has developed the National Child Abuse and Neglect Data System (NCANDS), a national data collection and analysis program on child maltreatment. NCANDS consists of two parts: 1) the Summary Data Component is a compilation of key aggregate indicators of State child abuse and neglect statistics, including data on reports, investigations, victims and perpetrators; 2) the Detailed Case Data Component is a compilation of case-level data that allows for more detailed analysis of State data. The first report on Summary Data was published in 1990 as a working document to serve as the basis for developing future reports.
- An Evaluation of Nine Model Comprehensive Community-based Child Abuse and Neglect Prevention Programs will assess nine NCCAN-funded comprehensive community-based child abuse and neglect prevention programs. Started in September 1992, this evaluation is expected to take 3 years with a total contract amount of approximately \$925,000. (Grantee: CSR, Inc.).
- A Study of the Impact on Service Delivery of Families with Substance Abuse Problems will assess the size and nature of the impact of substance abuse on ACYF's various service delivery systems. The two-year study will include a survey of approximately 1,700 service providers and site visits to four major metropolitan areas to conduct in-depth assessments of service delivery systems. Data collection is expected to begin in April of 1993. Total funding for this project is approximately \$500,000. (Grantee: Cygnus Corp.).
- A study on the Validation and Effectiveness of Legal Representation Through Guardian Ad Litem will determine the various role and responsibilities of guardians ad litem (GALs), the court-appointed legal counsel for abused or neglected children involved in civil judicial proceedings. Data collection is scheduled to begin in March of 1993 and the study is expected to take 18 months at a total cost of approximately \$730,000. (Grantee: CSR, Inc.).

2. Office of Family Assistance

The United States has a higher child poverty rate than seven other industrialized western countries. One in five U.S. children — 14.3 million — are poor, making them the poorest group of Americans.²

The Office of Family Assistance is responsible for administering Aid to Families with Dependent Children and related programs at the federal level.

a. Aid to Families with Dependent Children (AFDC)

AFDC, authorized under Title IV-A of the Social Security Act, provides temporary financial assistance to needy children (under the age of 18, or 19 in some States) and their families. Within broad federal guidelines, States are responsible for administering the program and determining benefits. Eligibility for benefits varies by State and is based on the State's standard of need as well as the income and resources available to the recipient. To be eligible for AFDC, a family must have a dependent child who is under the age of 18, deprived of parental support or care, and living in the home of a parent or other specified close relative. A family eligible for AFDC generally is also eligible for Food Stamps and Medicaid coverage, as well as for participation in the School Lunch and School Breakfast programs.

The cost of the program is shared between the federal and State governments with the federal government paying for approximately 54 percent of benefit costs and 50 percent of administrative costs. In 1992, approximately 12.6 million Americans, including 8.6 million children, received AFDC benefits. The Fiscal Year 1993 federal appropriation for AFDC is \$12.4 billion.

b. Job Opportunities and Basic Skills Training

The Family Support Act of 1988 created the Job Opportunities and Basic Skills Training (JOBS) program to reorient the welfare system to provide recipients with job training, work experience, education and related services as a way to become self-sufficient. All adult AFDC recipients are now required, unless otherwise exempt, to participate in JOBS. JOBS programs are targeted toward those welfare recipients who are expected to stay on welfare the longest, such as young parents who did not finish high school and who have little job experience. Special emphasis is put on participation of teen parents in appropriate educational activities. JOBS also provides necessary support services, such as transportation and child care, which allow recipients to participate actively in the program. Transitional Child Care services are also available for up to one year for those who have moved off AFDC into employment.

c. AFDC-Unemployed Parent Program

The Family Support Act of 1988 also requires all States to operate an AFDC-Unemployed Parent Program. This program offers assistance to two-parent families in which a child is deprived because the household's principle earner, whether the mother or the father, is unemployed.

d. Emergency Assistance Program

Authorized under Title IV-A of the Social Security Act, the Emergency Assistance (EA) Program helps States provide temporary financial assistance and social services to needy families and children. The assistance is intended to "avoid destitution" of children and to provide living arrangements for them if necessary. It is separate from, and has different eligibility rules from AFDC. In States that offer an EA Program, assistance is available for a needy child under age 21 (or a lower age set by the State) and other members of the household in which the child is living. Other eligibility requirements apply. States have a great deal of flexibility in defining the emergency situations they will cover and the services they will provide. The federal government reimburses State for 50 percent of EA costs. In Fiscal Year 1991, 33 States and territories provided Emergency Assistance, with an average monthly caseload of 58,600 cases, and an average monthly payment of \$492.17. In Fiscal Year, 1993 \$155 million was appropriated for this program.

e. At-Risk Child Care Program

The At-Risk Child Care program provides child care to low-income, working families who are not receiving AFDC benefits. Authorized by the Omnibus Reconciliation Act of 1990 to help families avoid welfare dependency, this program allows States to provide child care to low-income families who are not receiving AFDC, need child care in order to work, and would otherwise be at risk of becoming eligible for AFDC. In Fiscal Year 1993, federal funding for this program totaled \$300 million.

3. Office of Child Support Enforcement

On the average day, 1,295 babies are born to girls under 20 years old. Unwed teen mothers are the most likely group to need AFDC, child support and paternity services.

The poverty rate for all women with children from absent fathers was 32% in 1989. The poverty rate for women under 30 was 49.2%.

7.4% of teenage males become fathers before they are 20, slightly over 80% do not live with their child and most never come into contact with the child support enforcement program.

a. Child Support Enforcement Program

Established in 1975 under Title IV-D of the Social Security Act, the Child Support Enforcement (CSE) Program, is a federal/State/local effort to ensure that children are financially supported by their parents. CSE services are available automatically to families receiving AFDC benefits, and to non-AFDC families who apply. While State and local governments handle the day to day operations of the program, the federal government provides funding, develops policies, ensures that federal requirements are met, and coordinates with other federal agencies that help support the CSE program. The four major services provided under CSE are: 1) locating absent parents; 2) establishing paternity; 3) establishing child support obligations; and, 4) enforcing child support orders. In Fiscal Year 1992, just under \$8 billion in child support payments was collected under this program and paternity was established for more than 515,000 children.

The Family Support Act of 1988 recognized that child support and program coordination are key components of welfare reform and called for changes in the structure and delivery of services provided under CSE. The changes were designed to improve paternity establishment services and enforcement procedures to help reduce welfare dependency. As a result of the legislation, the Office of Child Support Enforcement has been working to help States develop strategies and programs that address the special needs of young families.

Through Program Improvement Demonstration grants and the Measuring Excellence through Statistics initiative, OCSE is supporting projects that target young families. Grants have been awarded to two prenatal clinics to establish paternity shortly after birth, especially with teenage mothers. Another demonstration project, funded in collaboration with the U.S. Department of Labor and private foundations, will test the effectiveness of combining job training, employment services, education, financial incentives, with a component that addresses the role and responsibilities of fathers. OCSE also has issued several papers that examine innovative practices developed by States in the area of paternity establishment, research in paternity establishment and program evaluations that specifically target adolescent parents. In addition, OCSE supports research in paternity establishment, program evaluations, training assistance for hospital workers, and outreach efforts targeting adolescents.

4. Office of Community Services

The Office of Community Services assists States and local communities in developing and implementing services for low-income individuals and families. OCS administers the Community Services Block Grant, the Social Services Block Grant, the Demonstration Partnership Program, and Family Violence Prevention and Services program. Many of these programs support activities that target youth, especially at-risk youth.

a. Community Services Block Grant

The Community Services Block Grant (CSBG) Program provides funds to States, territories, Indian Tribes and tribal organizations for distribution to community action agencies for services to assist low-income individuals and families. Agencies are required to provide a range of services and activities having a "measurable and potentially significant effect on the causes of poverty in their community." These services and activities may address the following needs: employment, education, income management, housing, nutrition, energy, health and emergency services for the poor. Fiscal Year 1993 funding totaled \$372 million.

In addition to the Community Services Block Grant, OCS has the discretionary authority to provide assistance to States, public agencies, and private nonprofit organizations for rural housing facilities, economic development, assistance to migrants and seasonal farmworkers, and programs designed to provide instructional activities for low-income youth. Through discretionary programs, OCS currently supports the following two programs for youth.

b. National Youth Sports Program

Through grants to the National Collegiate Athletic Association (NCAA), the National Youth Sports Program provides 61,000 low-income youth aged 10 to 16 with a summer of supervised sports instruction and enrichment activities on participating college and university campuses across the country. The primary goal of the program is to motivate disadvantaged youth to earn and learn self-respect through a program of sports instruction and competition. The enrichment component of the program provides the youngsters with information relating to career and educational opportunities, personal health, drug and alcohol abuse education, and nutrition as well as complete medical examinations. Fiscal Year 1993 funding for this program is \$9.5 million, down from \$12 million in Fiscal Year 1992.

c. Community Economic Development

The Fiscal Year 1993 Urban and Rural Community Economic Development discretionary grants program creates two set-asides for economically and socially disadvantaged youth.

- The Youth Opportunities Unlimited Program set-aside makes \$1 million available to improve the integration, coordination and continuity of HHS-funded services available for poor families and youth in targeted high poverty urban neighborhoods and rural counties. Projects funded under this set-aside must coordinate with recipients of funding from the Department of Labor's Youth Opportunities Unlimited Program, and provide jobs with wages that enhance the long-term economic and social environment of the target area.

- The Disadvantaged Youth Set-Aside designates \$2.5 million in grants in Fiscal Year 1993 to address the plight of unemployed youth who are economically and socially disadvantaged. The purpose of the set aside is to create new employment opportunities and job training in depressed urban communities for disadvantaged youth, particularly those belonging to minority populations between the ages of 16 and 24 who are ineligible for JOBS and who have been unemployed for one year.

d. Demonstration Partnership Program

The Demonstration Partnership Program (DPP) was established by Congress under the Human Services Reauthorization Act of 1986. The purpose of the program is to stimulate the development and implementation of new and innovative approaches that address the critical needs of the poor and promote economic self-sufficiency. Grants have funded projects which focus on small business ventures, self-employment, minority youth life skills, case management, comprehensive integrated services and early intervention and prevention. Target populations include homeless individuals and families, female heads of households, young minority males, teen parents, "at-risk" school-aged youth, and low-income families. In Fiscal Year 1991, \$4.05 million funded 15 grants, 6 of which targeted youth. In Fiscal Year 1993, \$3.8 million was appropriated for this program, down from \$4.5 million in Fiscal Year 1992.

e. Social Service Block Grant

The Social Service Block Grant (SSBG) program provides federal funds to States for social services under the authority of Title XX of the Omnibus Budget Reconciliation Act of 1981. The program is based on two principles: 1) that State and local governments and communities are best able to assess their needs; and, 2) that social and economic needs are interrelated and must be met simultaneously. The program funds social services that prevent, reduce or eliminate dependency; prevent neglect, abuse, or exploitation of children and adults; prevent or reduce inappropriate institutional care; and provide admission or referral for institutional care when other forms of care are inappropriate. Data collected on the SSBG show that the most frequently provided services are: home based services; social support services; child day care; child protective services; adoption services; special services for the disabled; protective services for adults; foster care services for children; prevention and intervention services; and adult day care.

Grants are awarded directly to States, based on a statutory formula that is based on a State's population. Up to 10 percent of the grant can be transferred to other block grant programs to support health services, health promotion and disease prevention activities, and low-income energy assistance. Within federal guidelines, each State has the flexibility to determine what services will be provided, who is eligible and how funds are distributed. The Fiscal Year 1993 budget included \$2.8 billion for the Social Services Block Grant.

f. Family Violence Prevention and Services

The Family Violence Prevention and Services Act, enacted by Congress in 1984 and most recently amended in 1992, authorizes federal grants to assist States to prevent family violence and provide immediate shelter and related assistance to victims. Grants also fund training, technical assistance and data collection, and support the development of educational, training and public information materials on family violence. The program supports the Clearinghouse on Family Violence, administered through the National Clearinghouse on Child Abuse and Neglect. In Fiscal Year 1993, \$24.8 million was appropriated for this program.

g. Job Opportunities for Low-Income Individuals

The Job Opportunities for Low-Income Individuals (JOLI) is a demonstration program authorized under section 505 of the Family Support Act of 1988 for the purpose of creating new employment and business opportunities to enable low-income individuals (many youth) and/or families to achieve self-sufficiency. In Fiscal Year 1992, \$5.0 million was available to fund 10 grant projects.

h. Emergency Community Services Homeless Grant Program

The Emergency Community Services Homeless Grant Program (EHP), established by the Stewart B. McKinney Homeless Assistance Act in 1987, makes grants available to States and Indian Tribes to fund community action agencies, and other eligible entities, to provide services to the homeless. The Act was intended to fill gaps in existing services and establishes 6 broad categories of activities for which the funds can be used, including referring homeless children and individuals to violence counseling, and providing violence counseling training to support services staff. In Fiscal Year 1993, \$19.8 million was appropriated for this program.

5. Administration on Developmental Disabilities

Developmental disabilities are defined as severe, chronic disabilities attributable to mental and/or physical impairment which are manifested before age 22; are likely to continue indefinitely; and result in substantial limitations in several areas of major life activity.

There are nearly four million Americans with developmental disabilities.

Overview

The Administration on Developmental Disabilities (ADD) is responsible for planning and carrying out programs which promote the self-sufficiency, productivity, community integration, and protection of the rights of persons with developmental disabilities. ADD programs address all elements of the life cycle, including

prevention, diagnosis, early intervention, therapy, education, training, employment, community living, and leisure opportunities. Authorized under the Developmental Disabilities Assistance and Bill of Rights Act, P.L. 101-496, ADD administers four grant programs: the Basic State Grant Program; Protection and Advocacy Program; University Affiliated Program; and Projects of National Significance. In Fiscal Year 1992, \$109.5 million was appropriated for the four grant programs; in Fiscal Year 1993, appropriations totaled \$109.2 million.

While ADD programs are geared to assist individuals with developmental disabilities of all ages, many ADD activities focus on or directly serve children and youth. For example, in Fiscal Year 1992, ADD worked with the Office of the Assistant Secretary for Planning and Evaluation and the National Center for Child Abuse and Neglect to develop a Model System of Representation of Infants and Children with Disabilities on Issues of Care and Treatment; supported training programs for parents and family members of individuals with developmental disabilities; and funded youth leadership development activities.

a. ADD Programs

i. Basic State Grant Program. This program provides grants to States to help them develop plans for comprehensive and coordinated systems of services that enhance the lives of persons with developmental disabilities and their families. In Fiscal Year 1992, fifty-six States and jurisdictions received \$67.7 million in Basic State Grants. According to federal law, States must spend at least 65 percent of grant funds in the following priority areas: employment, case management (coordinating lifelong range of assistance needed), child development, and community living. Child development activities assist in the prevention, identification, and alleviation of developmental disabilities in children. Funding in Fiscal Year 1993 totaled \$67.3 million.

ii. Protection and Advocacy Program. The Protection and Advocacy Program provides for the protection and advocacy of individual rights through categorical grants awarded to States based on a formula specified in the Developmental Disabilities Assistance and Bill of Rights Act. In Fiscal Year 1993, States received \$22.5 million in formula grants for a wide range of protection and advocacy activities and services.

iii. University Affiliated Programs. University Affiliated Programs (UAP) is a discretionary grant program for public and private, non-profit agencies affiliated with a university. Awarded annually, grants fund interdisciplinary training, exemplary services, technical assistance, and information/dissemination activities. Of the nearly 110,000 consumers served by the UAP network in Fiscal Year 1992, more than 80,000 are under the age of 11, approximately 28,000 are 22 years of age or older, and more than 60,000 represent minority groups. In Fiscal Year 1993, \$16.1 million was appropriated for UAP.

iv. Projects of National Significance. Under the Projects of National Significance (PNS) program, grants and contracts are awarded to public or private non-profit agencies to increase and support the independence, productivity, and community integration of persons with developmental disabilities. Identified priorities over the years have included data collection, technical assistance, educating policy makers, minorities and minority health, youth leadership, family support, and community integration. In Fiscal Year 1993, PNS funding totaled of \$3.2 million.

b. ADD Research

In 1990, ADD prepared a special national report, as required by the Developmental Disabilities Assistance and Bill of Rights Act, on the impact of federal and State program policies on the lives of persons with developmental disabilities. The report summarized principal findings and recommendations of the State Planning Councils' reports. Major findings, presented within a framework of the goals of independence, productivity and integration, related to a wide array of issues including learning (education), working (employment and income), housing, health, civil rights and related supports to individuals, their families, and communities.

6. Administration For Native Americans

Authorized by the Native American Programs Act of 1974, the Administration for Native Americans (ANA) promotes the social and economic self-sufficiency of American Indians, Alaska Natives, Native Hawaiian, and other Native American Pacific Islanders, including American Samoans. ANA provides grants, training and technical assistance to eligible tribes and Native American organizations representing 1.6 million individuals. In Fiscal Year 1993, a \$34.5 million budget supported a number of community-based development programs that strengthen tribal economic and social bases.

ANA uses discretionary funds to support priority areas and activities such as alcohol and substance abuse prevention projects and youth entrepreneurial projects. ANA discretionary funds currently support UNITY, United National Indian Tribal Youth, a program designed to foster the spiritual, mental, physical and social development of American Indian and Native Alaskan youth. UNITY, in operation since 1976, sponsors conferences and youth leadership activities.

E. Public Health Service

Overview

The Public Health Service (PHS) is responsible for promoting the protection and advancement of physical and mental health, developing national health policy, administering programs to develop health resources and improve the delivery of health

services, preventing and controlling communicable diseases, conducting and supporting research in medicine and related sciences, and protecting against unsafe and impure foods, drugs, and cosmetics.

The Assistant Secretary for Health administers PHS and oversees the activities of all its components, including the Substance Abuse and Mental Health Services Administration, the Centers for Disease Control, the Food and Drug Administration, the Health Resources and Services Administration, the Agency for Health Care Policy and Research, the Indian Health Service, and the National Institutes of Health. A number of initiatives and programs managed by the Assistant Secretary and other PHS administrations focus on health issues associated with adolescence.

1. Office of the Assistant Secretary for Health

The Office of the Assistant Secretary for Health (OASH) is responsible for overseeing all PHS programs and related health activities. There are several offices within OASH that support programs and activities that directly serve or target youth—the Office of Disease Prevention and Health Promotion, the Office of Minority Health, the Office on Women's Health, the Office of Population Affairs, and the President's Council on Physical Fitness. In addition, to better focus and coordinate initiatives that target adolescents, OASH chairs the PHS Steering Committee on Adolescent Health. This group, assisted by the PHS Working Group on Adolescent Health, convenes to discuss ways to identify and meet the health needs of American youth. The Committee currently is developing a listing of all PHS youth-related programs and activities to help them direct policy and improve services.

a. Office of Disease Prevention and Health Promotion

The Office of Disease Prevention and Health Promotion (ODPHP) coordinates HHS activities in disease prevention, health promotion, health and education, and preventive health services. A number of ODPHP activities target youth. For example, in 1991, ODPHP completed a study *Evaluating Effective Communication Strategies for Health Information to High-Risk Youth Outside of School*, that assesses the effectiveness of various strategies for communicating disease prevention messages to high-risk youth not in school. In addition, ODPHP co-chairs the Interagency Ad Hoc Committee on Health Promotion through the Schools with the Department of Education's Program on Comprehensive School Health Education. The Committee, established in 1983, meets regularly to share information about programs and activities relating to school health. The Committee recently completed an update of the 1983 survey on school health activities. In Fiscal Year 1993, \$4.8 million was appropriated for ODPHP.

i. Healthy People 2000. In 1990, ODPHP published *Healthy People 2000: National Health Promotion and Disease Prevention Objectives*, the result of a three-year national effort, facilitated by ODPHP, of federal and State governments, national organizations and health professionals. Healthy People 2000 is a set of 300 national

health promotion and disease prevention objectives that focus on increasing the span of healthy life for Americans; reducing health disparities among Americans; and achieving access to preventive services for all Americans.

The Healthy People 2000 goals are organized in 22 priority areas, grouped into 3 broad categories: health promotion; health protection; and preventive services. In addition, a special category on surveillance and data systems was established to improve efforts to monitor progress toward reaching the objectives. Finally, a category was developed to group the objectives by four age groups: children (ages 1-14), adolescents and young adults (ages 15-24), adults, and older adults.

To promote the Healthy People 2000 Objectives that focus on age and at-risk populations, ODPHP has funded 9 national organizations including two that target youth:

- The American Association of School Administrators launched the School Health Initiative to make children's health a priority by helping schools design and implement comprehensive school health education programs. These programs are designed to meet community needs and can include direct instruction, health services, and a healthy school environment. The initiative promotes those programs that begin in Kindergarten and continue through grade 12, have a research and evaluation component, include teacher training, and are coordinated by a health educator.
- The American Medical Association's (AMA) Healthier Youth by the Year 2000 Project includes the publication of a newsletter, *Target 2000*, and the creation of the National Adolescent Health Promotion Network (NAHPNet), a network of several thousand individuals who share information on adolescent health and serve as consultants to community efforts.

**Healthy People 2000
Priority Areas**

Health Promotion

1. Physical Activity and Fitness
2. Nutrition
3. Tobacco
4. Alcohol and Other Drugs
5. Family Planning
6. Mental Health and Mental Disorders
7. Violent and Abusive Behavior
8. Educational and Community-based Programs

Health Protection

9. Unintentional Injuries
10. Occupational Safety and Health
11. Environmental Health
12. Food and Drug Safety
13. Oral Health

Preventive Services

14. Maternal and Infant Health
15. Heart Disease and Stroke
16. Cancer
17. Diabetes and Chronic Disabling Conditions
18. HIV Infection
19. Sexually Transmitted Diseases
20. Immunization and Infectious Diseases
21. Clinical Preventive Services

Surveillance and Data Systems

22. Surveillance and Data Systems

Age-Related Objectives

Children
Adolescents
Adults
Older Adults

b. Office of Minority Health

In 1987, homicide was the 12th leading cause of premature mortality for the general population, but the leading cause of death for young Black males ages 15-24.³

Over three times as many Black children live under the poverty line as white children.⁴

The Office of Minority Health was established in 1985 to examine the historical disparity between the health status of whites as compared with Blacks and other minorities. In Fiscal Year 1993, \$15.48 million was appropriated for the Office of Minority Health.

i. Minority Male Demonstration Grant Program. The Minority Male Demonstration Grant Program was developed by the HHS Minority Male Initiative Task Force to encourage and support community-based responses to the health and social problems facing minority males. The program funds public and private nonprofits, and Indian Tribes and Tribal organizations, for outreach and intervention activities that address such issues as: alcohol, tobacco and other drug dependency, homicide, suicide and unintentional injuries, HIV infection and sexually transmitted diseases, unemployment, delinquency, homelessness, teenage pregnancy and fatherhood. Funds may be used for community coalition development grants, community coalition intervention demonstration projects, and conference grants that support health and human services needs, provide employment and drug prevention education, and bring together service providers and others to address the health and social needs of minority males. Many programs funded under this initiative target adolescent minority males.

In Fiscal Year 1991, the program awarded grants totaling approximately \$3 million. In October 1992, 37 grants totaling \$2 million were awarded to initiate or expand community support projects for minority males bringing the Fiscal Year 1992 spending total on the Minority Male Initiative to \$5 million, and the cumulative total since the program's inception in March 1990 to \$10.7 million.

c. Office on Women's Health

The Office on Women's Health (OWH) was established in 1991 to advise the Assistant Secretary for Health on scientific, medical, legal, ethical, and policy issues relating to women's health. In fulfilling its mission, OWH stimulates and coordinates women's health initiatives across PHS. OWH was involved in the development of the PHS Action Plan for Women's Health and is responsible for monitoring its implementation. OWH's primary interest is to improve the health and well-being of the nation's women, and particularly adolescent and young women.

d. Office of Population Affairs

The proportion of sexually active adolescent girls (aged 15-19 years) increased from 29 percent in 1970, to 53 percent in 1988.⁵

i. Adolescent Family Life. The Adolescent Family Life (AFL) program, created in 1981 under Title XX of the Public Health Service Act, funds demonstration and

research projects that address the problems of teenage sexual behavior and pregnancy. AFL supports 2 types of demonstration projects: 1) projects which provide "care" services; and 2) projects that provides "prevention" services. In addition, AFL has funded the development and/or testing of 35 prevention curricula for use as part of comprehensive health education programs.

The Office of Population Affairs (OPA) estimates that each year, approximately 15,000 pregnant and parenting adolescents and their families are served by AFL funded care programs, and prevention projects reach approximately 50,000 pregnant and nonpregnant teens and their families. AFL's approach emphasizes the importance of family involvement in the delivery of services, adolescent sexual abstinence, adoption as an alternative to early parenting, and comprehensive health, education and social services. Each project has an internal evaluation component designed to assess its service delivery model. OPA currently is funding 37 projects, including 21 care projects and 16 prevention projects. In Fiscal Year 1993 funding for AFL totaled approximately \$7.6 million.

AFL project evaluation results have revealed information about the factors that lead to postponed sexual activity. For example, teen attitudes and values about sexuality, teen skills in dealing with social pressures, and teen beliefs in future opportunities in education, jobs, and careers, are all directly linked to intentional and actual sexual behavior. In addition, evaluations have shown that teen-parent communications about sexuality, sexual values, and plans for the future, are linked to lower rates of teen risk-taking behavior.

AFL funded research projects focus on the causes and consequences of teen sexual activity, contraception, pregnancy and childbearing, and on the effectiveness of demonstrations designed to alleviate their effects. Research is funded on adolescent premarital sexual behavior, adolescent pregnancy and parenting, adolescent pregnancy services and adoption. In 1991, the Office of Population Affairs put together a compendium of research project summaries that include findings from ten adolescent sexual behavior research projects, four adolescent pregnancy and parenting studies, three studies on adolescent pregnancy services, and three on adoption. Since Fiscal Year 1982, AFL has awarded 65 research projects totaling more than \$15 million.

ii. National Family Planning Program. Created in 1970 under Title X of the Public Health Service Act, the National Family Planning Program provides categorical project grants for comprehensive family planning services. Projects funded under the program must offer a broad range of "acceptable and effective" family planning methods and services; to the extent possible encourage family participation; and offer services to individuals without regard to their economic status. The program supports about 85 grantees, serving an estimated 4 million individuals. OPA estimates that over 85 percent of Title X clients are women from low-income families and approximately one third are adolescents. The program's Fiscal Year 1993 budget totaled approximately \$173 million.

iii. Data Archive on Adolescent Pregnancy and Pregnancy Prevention. The Office of Population Affairs sponsors the Data Archive on Adolescent Pregnancy and Pregnancy Prevention. Operated by the Sociometrics Corporation in California, the archive provides data on adolescent pregnancy, pregnancy prevention and family planning.

e. President's Council on Physical Fitness and Sports

Only 36% of America's school children in grades 1-12 are enrolled in daily physical education.⁶

Established in 1955, the President's Council on Physical Fitness and Sports (PCPFS) is involved in a variety of activities that promote physical fitness for all age groups, with a special emphasis on encouraging students in grades K-12 to participate in daily physical fitness activities. To reach more youth, the PCPFS promotes family-oriented fitness activities in addition to school-based activities. By working with community organizations, citizen groups, private corporations, professional athletes and others, the PCPFS sponsors fitness events across the country, supports data collection on the fitness status of youth, produces publications and public service announcements targeted to youth, supports coalitions of youth-serving organizations, and coordinates a variety of incentive programs.

2. Indian Health Service

Youth 10-19 years of age represent 23% of the Indian population, as compared to 17% of all races in the U.S.

In the 15-24 year old age group, the American Indian/Alaska Native death rate is 1.7 times that of all races.

The Indian Health Service (IHS) supports a comprehensive health service delivery system for eligible American Indians and Alaska Natives, with emphasis on tribal involvement in developing and managing programs that meet community needs. Providing health services in 33 States, IHS operates 45 hospitals, 65 health centers, 4 school health centers, 52 health stations, and 300 smaller outpatient facilities. IHS services include emergency and primary medical care, dental care, social services, mental health services, nutrition and health education, substance abuse prevention and treatment, outreach services, and environmental health and engineering services. In addition, IHS offers technical assistance to federally recognized tribes and tribal organizations, and training opportunities for health care providers. IHS also monitors data on American Indian and Alaska Native youth aged 15-24 years old, including data on mortality rates, leading causes of death, pregnancy, and other health problems.

While IHS programs are designed to meet the health needs of all age groups, the median age of the American Indian and Alaska Native population is 22.6 years of age, and an estimated 32 percent of the population served by IHS programs is under the age of 15.

a. Health Promotion Activities

Each year, IHS provides approximately \$1 million in grants to fund 14 community based tribal adolescent health promotion/disease prevention programs. Most IHS areas also have developed a variety of additional adolescent health programs. IHS also participates in school health education and curriculum development, environmental health promotion and injury prevention activities.

b. Regional Treatment Centers

The Indian Alcohol and Substance Abuse Prevention and Treatment Act of 1986 authorized IHS to develop one youth regional treatment center within each IHS area to provide treatment to youth for alcoholism and other substance abuse problems. Centers offer predominantly high-ended, longer-term residential care for adolescents with alcohol and substance abuse problems. Activities combine traditional counseling with support groups, recreational and/or therapeutic activities, and cultural and family support. Funding in Fiscal Year 1992 totaled \$12 million.

c. Health Care Improvement Grants

The Indian Health Care Improvement Act Amendments of 1990 establish new programs and requirements relating to reducing alcohol-related illness and death among American Indians, and reducing smoking and tobacco-use particularly among Indian youths. The Act authorizes mental health prevention and treatment services, health care services for urban Indians, child abuse prevention and treatment grants, and the establishment of a residential youth treatment center in Fairbanks, Alaska. Funding is not yet available for these programs and IHS is in the process of working with the Bureau of Indian Affairs to coordinate implementation of the Act.

d. Adolescent Health Centers

Authorized by the Indian Self-Determination Act, IHS provides demonstration grants for the establishment of Adolescent Health Centers for American Indians and Alaskan Natives. The Centers provide outreach programs, prevention education, and counseling to adolescents on a range of health issues including sexually transmitted diseases, suicide, violence, tobacco, alcohol and other drug abuse, pregnancy, and mental health. In addition, the Centers make sure that the adolescents have access to appropriate health care. Programs that target out-of-school youth, demonstrate coordination with other agencies, and involve parents and the community are given funding priority. The demonstrations are designed to help identify the most effective and efficient means of providing health services to those adolescents aged 12-19.

Federally recognized Indian tribes or tribal organizations are eligible to apply for these grants. Approximately \$800,000 was available in Fiscal Year 1991. In its third year of funding, the program supports 14 centers.

e. HIV Prevention

In 1987, IHS launched an HIV prevention initiative to combat the risk of an HIV epidemic among American Indian and Alaska Native communities. Prevention plans were developed for all 12 IHS areas with funding assistance from the Centers for Disease Control (CDC). In addition, IHS expanded HIV training for health care providers and educators, and started local health facilities and community-based AIDS education and intervention programs, including seminars to prepare joint IHS/Bureau of Indian Affairs teams to teach AIDS prevention to an estimated 40,000 school children.

f. Maternal and Child Health

Responding to high teenage pregnancy rates, IHS provides maternal and child health services, with an emphasis on early and adequate prenatal care for all pregnant women and continued post-partum care and well-child care. IHS also offers comprehensive family planning and health education activities to help young American Indian and Alaska Natives develop good parenting skills. Many of IHS activities in this area are provided in collaboration with HHS Maternal and Child Health programs.

g. Nutrition Education

Since adolescents are among those at greatest nutritional risk, IHS incorporates nutrition education into every available health, social and educational service and food assistance program. IHS also conducts research and coordinates with other social, education and other food-assistance programs to ensure that nutritional services are consistent with the cultural needs of American Indians and Alaska Native communities.

3. Food and Drug Administration

The Food and Drug Administration is responsible for monitoring and regulating the manufacture, import, transport, storage, and sale of \$570 billion worth of food, drug, cosmetic and medical products each year and is the oldest federal consumer protection agency. The agency enforces the federal Food, Drug and Cosmetic Act and several related public health laws by investigating and inspecting facilities and products, conducting scientific research on domestic and imported products, assessing risks and enforcing standards in production and labeling, and educating the public about health problems.

The agency does not have a youth specific focus, but most Centers within FDA are involved with consumer education activities that may include outreach and public information campaigns targeting youth. For example, the Center for Devices and Radiological Health, produces posters and learning materials on tanning beds and toxic shock syndrome for teachers to display and use. In addition, the FDA Communications Staff has published Teen Scene, a series of articles on teen health issues reprinted from *FDA Consumer*, the official magazine of the FDA. The articles focus on issues such as steroids and sports, eating disorders, toxic shock syndrome, acne, over-the-counter medication, nutrition, and damage caused by exposure to high decibel levels. FDA offers the series free through health and physical education teachers at public schools across the country. Over 1600 schools have placed orders for the series.

4. Health Resources and Services Administration

Overview

The Health Resources and Services Administration (HRSA) is responsible for issues relating to the access, quality and cost of the nation's health care resources and services. HRSA provides support to States, local governments and communities for delivery of primary health care services, particularly to the disadvantaged and underserved, and for the development of qualified health professionals and facilities. HRSA has four major operating components: the Bureau of Primary Health Care, the Bureau of Health Professions, the Bureau of Health Resources Development, and the Maternal and Child Health Bureau.

HRSA FY 93 Budget (in millions)	
Bureau of Primary Health Care	\$837
Bureau of Health Professions	257
Maternal and Child Health Bureau	749
Bureau of Health Resources Development	8
AIDS Program (all Bureaus)	385
Other	<u>326</u>
Total	\$2,562

a. Maternal and Child Health Bureau

Overview

The Maternal and Child Health Bureau (MCHB) supports national maternal and child health activities through the Maternal and Child Health Services Block Grant, with 85 percent of the appropriation allocated to State health agencies and 15 percent set aside for MCHB to award on a competitive basis to special projects of regional and national significance (SPRANS). MCHB's primary focus is assisting States promote greater access to and efficacy in health care at the local level through service integration and coalition building. MCHB also has lead responsibility in promoting maternal and infant priorities set by the National Healthy People 2000 Objectives.

i. Maternal, Infant, Child and Adolescent Health

The Division of Maternal, Infant, Child and Adolescent Health administers programs and promotes coordination of activities under Titles V and XIX of the Social Security Act. Addressing the health needs of adolescents and minority populations is a major focus of the Division.

Maternal and Child Health Services Block Grant. Title V of the Social Security Act has authorized federal maternal and child health activities since 1935. In 1985, legislation consolidated seven categorical programs into the Maternal and Child Health Services Block Grant, giving States increased flexibility in determining how to use the federal funds. Title V was most recently amended in 1989 by the Omnibus Budget Reconciliation Act, P.L. 101-239. Eighty-five percent of the block grant is allocated to State health agencies to assist them in promoting, improving and delivering maternal and child health care and services for children with special needs. The remaining fifteen percent is set aside for the Maternal and Child Health Bureau to award on a competitive basis for special projects of regional and national significance (SPRANS). In Fiscal Year 1993 \$665 million was appropriated for the Maternal and Child Health Services Block Grant.

Community Integrated Service Systems. When the appropriation for the Maternal and Child Health Services Block Grant exceeds \$600 million, 12.75 percent of the amount in excess of \$600 million is set aside for Community Integrated Service Systems (CISS). CISS funds support projects in home visitation, participation of obstetricians and pediatricians in the Block Grant and Medicaid, Maternal and Child Health Centers for pregnant women and infants, maternal and child health services for rural populations, and outpatient and community-based services for children with special health care needs.

SPRANS. Through SPRANS and Maternal and Child Health Improvement Projects (MCHIP), which address annually-determined program priorities, MCHB supports demonstration, research and training projects that address the health needs of

adolescents. MCHB currently supports 500 active projects in all areas of maternal and child health, over 70 of which target youth.

SPRANS Demonstration Projects. MCHB funds demonstration projects that address issues such as adolescent nutrition, comprehensive and community-based services, improving school outcomes adolescents with special health care needs, pediatric AIDS, national program development issues, linking schools and communities to improve adolescent health outcomes, integrated approaches to high risk youth, adolescent pregnancy and parenting, violence and unintentional injury prevention, and youth in transition. Following are examples of SPRANS projects that focus on youth:

- The Project for Attention-Related Disorders (PARD) will address the lack of accessible diagnostic and therapeutic services for low-income families with children with attention deficit/hyperactivity disorder. The program is designed to improve the physical and mental health, as well as the educational outcomes of children with attention deficit disorders by increasing the accessibility, efficacy and integration of diagnosis and treatment services.
- Healthy Tomorrows for New Haven aims to strengthen the availability and efficacy of health care services for adolescents and younger children in the most disadvantaged areas of New Haven by developing models of accessible, comprehensive care founded on partnerships between school health and primary health care providers.
- Family-Focused Strategy for Reducing Premature and Unprotected Sexual Activity Among Minority Youth in School-Based Clinics will use a comprehensive school-based health care system to reduce the occurrence of premature and unprotected sexual intercourse among adolescents in Dallas, Texas.
- Options for Pre-Teens is a primary prevention program for at-risk fifth, sixth, and seventh grade boys and girls designed to provide them with the motivation and skills to abstain from early sexual activity, avoid other risky behaviors, and be successful in school.
- The Community Mobilization for Pregnant Runaway and Homeless Adolescents project proposes to mobilize communities to address the health needs of the special population of runaway and homeless youth, many of whom engage in sex for survival and become pregnant through prostitution.
- The Family Growth Center Pilot Project will test a model program that is designed to promote the health and development of at-risk young parents and their children using an integrated primary prevention approach that includes increasing social support for young parents,

enhancing parenting skills, improving the health status of both parents and children, improving the educational status of families, and enhancing community growth.

SPRANS Research. SPRANS research contributes to the knowledge base in adolescent health. Currently active research projects include: a study on the relationship between marital conflict and the development of risk behaviors among adolescents, specifically unprotected sexual behavior and substance abuse; a longitudinal study to predict adolescent pregnancy and childbirth; a study to test the hypothesis that behaviors that contribute to expression of essential hypertension can be reduced in a high-risk, urban minority adolescent population; and a study of behavior problems in school-age children of teenage mothers.

Following are examples of recently completed research projects: a study on the health and nutrition of U.S. Hispanic children; an analysis of the impact of puberty on risk-taking behavior in adolescents; a study to examine the effects of an experimental program for children and adolescents with phenylketonuria (PKU); an outcome evaluation of a pediatric health care model designed to reach low-income, high risk children; and a survey of individuals aged 18-24 who have received services under the Children with Special Health Care Needs Program.

Adolescent Health Resource Centers. The Division supports a number of Adolescent Health Resource Centers, including:

- The Colorado Department of Health offers consultation and technical assistance through Resources for Enhancing Adolescent Community Health (REACH) to State in enhancing community-based efforts to improve adolescent health.
- The University of Cincinnati's Adolescent Health Training Program has developed the Center for Continuing Education in Adolescent Health to provide adolescent health training opportunities to local health care providers.
- The University of Minnesota's Adolescent Health Training Program offers technical assistance to States conducting adolescent health needs assessments, particularly those that are using school-based surveys to determine levels of health risk behavior.
- The National Center for Youth with Disabilities also located at the University of Minnesota provides consultation and technical assistance on the health and sociodevelopmental needs of this special population.
- The Child and Adolescent Health Policy Center at Johns Hopkins University School of Hygiene and Public Health focuses on developing indicators of child and adolescent health status, analyzing factors that

influence the organization and financing of primary care, and identifying mechanisms to improve services provided under Title V.

Related SPRANS Activities.

- MCHB supports the National Clearinghouse on Maternal and Child Health and the Center for Information on Maternal and Child Health to disseminate information regarding MCHB activities as well as information on issues relating to maternal and child health. Currently in the planning stages is a special clearinghouse focused entirely on adolescent health issues.
- Training projects focus on providing comprehensive adolescent health training to a broad range of health care professionals and students. Currently, MCHB supports 7 interdisciplinary training programs for individuals with leadership potential in adolescent health issues.
- To complement initiatives to improve health care for youth, the Division regularly sponsors conferences for State and local leaders interested in adolescent health issues. In 1990 the State Adolescent Health Coordinators conference focused on "Promoting the Health of Adolescents" with special emphasis on coalition building and health objectives for adolescent health issues, including violence and homelessness. In 1991, MCHB convened three regional workshops on the health care needs of incarcerated youth. Publications on the proceedings from conference are available through the National Center for Education in Maternal and Child Health.
- MCHB also supports data collection and dissemination activities. A 1991 SPRANS grant to the University of California, San Francisco, produced a compilation of data on the health status of adolescents. *The Health of America's Youth* reviews data on the sociodemographic patterns of adolescents, risk behaviors, and the discharge diagnoses from hospitals.

ii. Injury Prevention and Emergency Medical Services for Children

Injuries are the leading cause of death for children, claiming 44% of all deaths among children 1-4 years of age, 51 percent of deaths of children 5-9 years of age, and 58 percent of deaths among children 10-14 years of age.

More than one third of all injury-related deaths result from intentional injuries; of these, two out of five are homicides.

While the Injury Prevention and Emergency Medical Services for Children programs are separate, there is considerable overlap in their mission and activities.

Emergency Medical Services for Children. The mission of the Emergency Medical Services for Children (EMSC) program is to reduce the toll of pediatric emergencies on children aged 0-18 and families by improving training and health systems to ensure that children's special needs are met. To meet these goals, EMSC funds hospital programs that provide on-site assessment and treatment of children's emergency conditions and rapid transfer to appropriate medical facilities. In addition, MCHB provides technical assistance and organizes conferences for a variety of national organizations involved in child and adolescent health.

Injury Prevention Program. The Injury Prevention Program (IPP) is designed to reduce the number and severity of intentional and unintentional injuries among children aged 0-21 and their families by building the science and practice of injury prevention and integrating it throughout the health system. Since injury disproportionately strikes youth and because it is a major cause of disability and death for children and adolescents, MCHB initiated a programmatic effort to prevent injury to children and adolescents through SPRANS. The program funds 1) demonstrations; 2) research grants; and 3) cooperative agreements, ranging in scope from the prevention of traumatic brain injury to violence prevention. Adolescent violence prevention has been a primary focus of the program in recent years.

1) **Injury Prevention Demonstrations.** MCHB is currently funding seven injury prevention demonstration grants. Four focus specifically on reducing the incidence of violence among youth. The other three projects include: a project to reduce childhood traumatic brain injury due to motor vehicle and bicycle crashes among children up to 14 years of age; a project aimed at reducing the morbidity and mortality due to selected childhood injuries in four counties in Maryland; and a project to create a community-wide service system to meet the needs of families with children 12 years of age and younger at risk of child abuse and neglect. The following projects focus on youth violence:

- The PACT Violence Prevention Project, a collaborative effort among the Contra Costa County Health Services Department Prevention Program, west Contra Costa County organizations and leaders, and the California Department of Health Services, will focus on reducing the incidence of assault/homicide and dating violence/acquaintance rape among adolescents in the high-risk region of west Contra Costa County
- The Massachusetts Adolescent Violence Prevention Project aims to strengthen the capacity of communities to prevent adolescent violence by providing staff, technical assistance, and training.
- The Positive Emotional Capacity Enhancement Training Project in Columbus, Ohio, will coordinate a culturally specific violence

prevention program designed to reduce the actual and potential levels of injury or early mortality for black adolescents at risk for becoming victims or perpetrators of violence.

- Safe at Home is a project in Pennsylvania that will address the health status of black male children and youth by increasing the community's awareness of the serious, long-term effects of violence on black male youth. Project activities will include parent education, family support, and education in conflict resolution and alternatives to violence for children ages 3-12.

- 2) **Injury Prevention Research.** MCHB currently is funding four research grants on injury prevention, including a prediction study on spouse abuse and pregnancy outcomes, a study on the behavioral and familial predictors of injuries in children, a study on recovery from traumatic brain injury in children, and a study on drowning prevention for children under 4 years of age. Fiscal Year 1993 is the third and final year of funding for all four of these projects. In addition, the Institute of Medicine is completing a study on the status of emergency medical services for children. The report is expected to be completed in the spring of 1993 and will include a discussion of the problems in service systems and recommendations for improvement. MCHB also is co-funding with the Bureau of Health Resources Development, a 5-year project that will evaluate the immediate and postintervention effects of a violence prevention intervention among seventh grade students at a junior high school in inner-city Washington, D.C.
- 3) **Injury Prevention Cooperative Agreements.** In 1990 the Children's Safety Network (CSN) was established as a collaborative venture between the National Center for Education in Maternal and Child Health and the Child Health and Education Development Center. CSN offers technical assistance to States on injury control, program development and evaluation, and maintains resources for developing and distributing publications, organizing conferences, and conducting training. In Fiscal Year 1992, MCHB established cooperative agreements to fund an expansion of CSN to six targeted issue sites. The expansion includes an agreement with the Education Development Center to create an Adolescent Violence Prevention Resource Center to provide information, resources, materials and technical assistance for developing new programs and enhancing existing efforts on adolescent violence prevention.

iii. Children with Special Needs

The Division of Services for Children with Special Needs develops, implements, coordinates, monitors and evaluates national programs relating to the promotion of the health status of children with special health needs. Title V of the Social Security Act, as amended, requires States to use at least 30 percent of their Maternal and Child

Health Block Grant funds for family-centered, community-based, culturally competent, coordinated care for children with special health care needs and their families. In addition, MCHB administers a number of discretionary grants which support those at risk for or suffering from genetic disease and hemophilia, HIV infection, disabling conditions and chronic illnesses. Improvement projects for children with special needs are designed to enhance collaborative partnerships between health and education service providers. In Fiscal Year 1991, MCHB funded 62 projects for children with special needs at a total of \$12.1 million.

Hemophilia and Pediatric AIDS. MCHB's Hemophilia and Pediatric AIDS program is concerned with the development of comprehensive care systems for children with hemophilia and pediatric HIV infection. Grants are used to demonstrate effective ways to prevent and reduce the spread of infection, and to develop community-based, family-centered, coordinated services. Priority issues include the linkage of HIV and substance abuse services, financing pediatric HIV services, the impact of HIV on uninfected siblings, and HIV legal/ethical concerns.

The program started in Fiscal Year 1988 with \$4.7 million awarded to 13 grantees. In Fiscal Year 1991, funding for the program increased to \$19.5 million, enabling MCHB to fund 27 Pediatric Demonstration programs and 2 consortia to provide a range of medical and social services to HIV affected families whose ethnic composition is approximately 85 percent minority. MCHB estimates that the Pediatric AIDS programs served nearly 6,000 HIV infected children and adolescents in Fiscal Year 1990-91 as well as almost 5,500 women who are at risk for acquiring and/or transmitting the disease. Recently completed or ongoing Pediatric AIDS Demonstrations that focus on adolescents include:

- Project AHEAD (Alliance for the Health of Adolescents) will develop community-based, family-centered, coordinated prevention and treatment services for high-risk and HIV infected youth who are homeless, runaway, or involved in the juvenile justice system
- Resources for Adolescents (RAP) is designed to develop and test a system of comprehensive HIV/AIDS prevention and treatment services for adolescents
- The Youth and AIDS Prevention Program will develop an outreach/counseling model to prevent the transmission of HIV to and from male youth engaging in homosexual encounters and coordinate referral services for youth with special AIDS-related needs
- The Model Comprehensive Health Care Program for Adolescents, operating in the Bronx in New York, will establish a model comprehensive health care program for adolescents aged 13-21 who are at-risk for or infected with HIV.

- In 1991, MCHB provided funding to the National Hemophilia Foundation to review local HIV prevention and support programs for adolescents with hemophilia. In February 1992, the Foundation published the *Survey Report of Hemophilia and HIV Programs for Adolescents*, which summarizes the results of their survey and reviews a number of model programs for adolescents with hemophilia.
- MCHB has developed a School Program Presentation Guide, designed to help hemophilia treatment center nurses teach school personnel about hemophilia and HIV infection.
- MCHB supports the National Pediatric HIV Resource Center located at The New Jersey Medical School of the University of Medicine and Dentistry of New Jersey, established to strengthen professional capability to provide family-centered pediatric AIDS services.
- MCHB is funding a study to discuss the legal and ethical issues related to delivery of HIV/AIDS service to adolescents.

Genetic Disorders. MCHB supports services that provide education and counseling to children, parents, educators and providers about genetic disorders, increase the awareness of the medical, psychological, and social complications of these disorders, and assist those affected in adjusting to their conditions. In addition to funding education, training, and counseling activities, MCHB has been supporting projects that offer testing and followup services, and expand regional and national networks. Total funding for the Genetic Services Branch in Fiscal Year 1992 was approximately \$7.6 million.

b. Bureau of Primary Health Care

The Bureau of Primary Health Care (BPHC) is responsible for making sure that health care services are provided to medically underserved populations and to persons with special health care needs. Support for primary health care is provided primarily through Community and Migrant Health Centers (many of which run school-based programs), Services for Special Populations, Services for Residents of Public Housing (Fiscal Year 1992 - \$6 million), and the National Health Service Corps. These programs serve approximately 6 million medically underserved persons, including youth, who would otherwise lack access to care. BHCDA also supports demonstration programs for integrating drug abuse treatment and HIV early intervention services with primary care.

i. Community and Migrant Health Centers. The Division of Community and Migrant Health administers approximately 540 Community and Migrant Health Center (C/MHCs) grants for disadvantaged people through 1,400 sites which delivered primary care services to 1,888,036 youth between the ages of 1 and 17 in 1992. Primary care access and the health promotion needs of youth are most directly

addressed through the 254 C/MHCs which manage school-based or school-linked health programs. C/MHCs provide the infrastructure and can serve as the base for the development of new and innovative community-based youth service programs.

ii. Health Care for the Homeless Program. The Division of Programs for Special Populations administers health care programs for the homeless, as authorized by the Stewart B. McKinney Homeless Assistance Act. The Health Care for the Homeless Program provides primary care services, alcohol and substance abuse services, and mental health services to homeless people. Approximately 400,000 homeless persons currently receive services funded through this program. Under a contract from BPHC, John Snow, Inc., of Boston, Massachusetts, provides resources to assist Health Care for the Homeless grantees in providing health care services.

iii. Primary Health Service for Homeless and At-Risk Children. In Fiscal Year 1992, \$56 million was appropriated for the Health Care for the Homeless program, an increase of \$5 million from the previous year. The additional funding was used to initiate a new effort to provide outreach and primary health service for homeless children. The Primary Health Service for Homeless and At-Risk Children program awards demonstration grants to public and nonprofit health care facilities and organizations to support programs in the delivery of outreach, health services and referrals to homeless children and children who are at risk of homelessness. Services will address the inherent risks of homelessness to children, including malnutrition, learning and developmental failure, mental and physical injury and exposure to substance abuse. In Fiscal Year 1992, this program funded 10 outreach and primary care service programs for homeless and at-risk children, serving an estimated 30,000. Fiscal Year 1993 funding for the Health Care for the Homeless program was \$58 million.

iv. Primary Care School Health Program. Increasing access to primary health care services for the underserved has always been a major focus of the BPHC. Since the mid-1970's, the Primary Care School Health Program has enabled many Community and Migrant Health Centers to reach out to underserved children in the schools they attend. In Fiscal Year 1993, the number of center providing primary care services to children (including health education and health promotion) either through school-linked or school-based programs, has risen to over 200 centers nationwide.

In order to help demonstrate the value of school-based clinics, the Bureau has recently conducted a "best practices" case study of six school-based programs operated by Community and Migrant health Centers. The study includes urban and rural sites, and demonstrates the effectiveness of school-based health service delivery. In addition, under Fiscal Year 1993 cooperative agreements with BPHC, the States of California and West Virginia are currently developing comprehensive statewide school health plans. Both plans, expected to be completed late in 1993, will include provisions for some school-based services and will examine financing options.

c. Bureau of Health Resources Development

The Bureau of Health Resources Development (BHRD) is responsible for ensuring that adolescents with HIV receive adequate and appropriate services under the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act. BHRD funds projects that assess the health needs of adolescent populations, provide services for adolescents, and evaluate innovative service delivery models.

i. Comprehensive AIDS Resources Emergency Assistance. The Division of HIV Services is responsible for administering Titles I and II of the Ryan White Care Act of 1990. The CARE Act provides emergency assistance to localities that are disproportionately affected by the epidemic as well as financial assistance to States and other public or private nonprofit entities for the delivery of essential services to individuals and families with HIV.

- Title I authorizes grants for outpatient and ambulatory health and support services to eligible metropolitan areas (EMAs) with a cumulative total of more than 2,000 cases of AIDS or a per capita incidence of 0.0025. Fifty percent of the funds available are awarded according to a formula based on the number of AIDS cases in the EMA. The remaining funds are awarded competitively to the EMAs that demonstrate the greatest need. In Fiscal Year 1993, \$182.3 million was awarded under Title I. Services to young people are included in all programs supported under Title I.
- Title II authorizes formula grants to States and territories for four purposes: 1) to establish and operate HIV consortia within areas most affected by HIV disease; 2) to provide home and community-based care services for individuals with HIV; 3) to provide assistance to assure the continuity of health insurance coverage for individuals with HIV; and 4) to provide individuals with HIV with treatments that have been determined to prolong life or prevent serious deterioration of health. Fifteen percent of funds provided under Title II must be used by States to provide health and support services to infants, women, children, and families affected by HIV. In Fiscal Year 1993, \$102.4 million was awarded under Title II.
- Special Projects of National Significance support projects to improve health and support service delivery for people with HIV infection. Funding for the program is derived through a set-aside of not more than ten percent of Title II funds. In Fiscal Year 1993, BHRD is accepting grant applications only for adolescent service projects. Each project may focus on one of four areas: 1) early intervention services; 2) formation of peer support programs; 3) integration of primary care, mental health, and substance abuse treatment services; and 4) services to severely ill or terminally ill youth.

d. Bureau of Health Professions

The Bureau of Health Professions (BHP) administers education and training programs to promote the development of and increase the number of health care providers in the United States. Many Division sponsored activities are intended to enhance the education and motivation of health care providers who treat youth with a variety of health care problems. This is accomplished by ensuring that adolescent health is integrated into the curricular components and training experiences of a number of the Bureau's health profession education programs. In addition, some Bureau programs, such as the Nurse Practitioner and Nurse-Midwife training programs, support specific programs targeting health issues affecting adolescents, including the projects of teen pregnancy and high-risk behaviors which may lead to HIV infection.

i. Health Careers Opportunity Program (HCOP). HCOP, authorized under Title VII of the Public Health Service Act, as amended, is designed to increase the number of individuals from disadvantaged backgrounds in the health and allied professions. The Preliminary Education Model, designed to improve a student's likelihood of successfully completing the academic requirements needed to enter and graduate from a health professions school, is targeted specifically at young people interested in pursuing a health related career. Since it was originally implemented in 1972, over \$314 million has been invested in over 700 HCOP programs assisting over 8,500 students per year in structured programs .

5. The Substance Abuse and Mental Health Services Administration

Overview

The Substance Abuse and Mental Health Services Administration (SAMHSA) created in October 1992 by the Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA) Reorganization Act of 1992 (P.L. 102-321). The agency has primary responsibility for prevention and treatment services of addictive and mental disorders. The Reorganization transferred ADAMHA's three research institutes to the National Institutes of Health, and incorporated all prevention and treatment services program operations into three "Centers" — the Center for Substance Abuse Prevention, the Center for Substance Abuse Treatment, and the Center for Mental Health Services.

SAMHSA's mission is threefold: 1) to reduce the incidence and prevalence of mental disorders and substance abuse and improve treatment outcomes for persons suffering from addictive and mental health problems; 2) to provide national leadership to ensure the best use of science-based knowledge to prevent and treat mental and addictive disorders; 3) to improve access and reduce barriers to high quality, effective programs.

SAMHSA assists States and local organizations expand access to, increase the capacity of and enhance the quality of prevention and treatment programs; develop community-wide approaches to mental and addictive disorders; and evaluate and disseminate information on successful programs. SAMHSA directs attention to populations with special needs, especially, women, children, and persons with or at risk for HIV disease, and strives to improve linkages among a variety of health care professionals and programs.

a. Center for Substance Abuse Prevention

Overview

The Center for Substance Abuse Prevention (CSAP), formerly the Office for Substance Abuse Prevention (OSAP), promotes innovative and effective strategies and programs aimed at reducing and eliminating alcohol, tobacco, and other drug problems in society. CSAP supports the continued development of comprehensive community, State, and national prevention systems, with special attention given to populations, including youth, at-risk of developing alcohol and other drug abuse problems. Since OSAP was established in 1986, funding for substance abuse prevention activities has increased from \$52.5 million in 1987 to \$244.2 million in 1993.⁷ CSAP efforts to prevent youth alcohol, tobacco, and other drug abuse include service demonstrations, technical assistance, knowledge exchange promotion, and scientific analysis and evaluation.

i. Demonstrations for High Risk Populations

 **High-Risk Youth.** Authorized by the Anti-Drug Abuse Act of 1986 (P.L. 99-570), the High Risk Youth Demonstration Grant program funds projects that develop innovative prevention, intervention, and treatment programs for youth "at risk" of using alcohol, tobacco, or illicit drugs. Factors considered to place a youth "at-risk" include growing up in neighborhoods of concentrated poverty where crime, gang participation, dropout and school failure rates are high; growing up in a distressed or disrupted family; growing up with an alcoholic or drug-addicted parent; or growing up abused or neglected. The program supports innovative community-based prevention programs that target youth, their families, and their communities and that assess the effectiveness and replicability of prevention strategies for high-risk youth. Grants may target a particular group or subpopulation. For instance, a series of 16 projects were funded in the late 80's to examine promising prevention models for working with at risk American Indians and Alaska Natives.

In 1987, the first year of funding for the High Risk Youth program, nearly \$24 million was awarded for 130 3-year demonstrations. In Fiscal Year 1993, \$50.4 million was appropriated for High Risk Youth continuation grants only.

All demonstration grants have a mandatory evaluation component and CSAP periodically disseminates evaluation results. In 1992, CSAP published a monograph entitled *Working With Youth in High-Risk Environments: Experiences in Prevention*, that provides information learned from the first projects funded under The High-Risk Youth program. Another report, *Signs of Effectiveness*, identifies risk factors and presents examples and findings from prevention strategies used to respond to those factors. The National Center for American Indian and Alaska Native Mental Health Research at the University of Colorado Health Services Center published a report analyzing the 16 demonstration projects for American Indian and Alaska Native youth, including results from telephone interviews and site visits, and recommendations regarding prevention programs for these two populations.

Pregnant and Postpartum Women. The Pregnant and Postpartum Women and Their Infants Demonstration Grants support community-based programs that provide a coordinated service delivery approach and offer educational activities to increase awareness of the risks of substance use during pregnancy. The program, focusing on primary prevention and early intervention, targets all women of child-bearing age, with particular emphasis given to programs that serve low-income substance abusing women. This program is being phased out, and CSAP will fund through their full, approved grant funding period only those projects that were initiated before the end of Fiscal Year 1992. The ADAMHA Reorganization Act requires funding for future programs for both residential and outpatient substance abuse treatment services for pregnant and postpartum women to be administered by the Center for Substance Abuse Treatment. In Fiscal Year 1989, the first year of funding, \$4.2 million was available for 20 demonstration grants. In Fiscal Year 1993, \$47.6 million was available for continuation grants.

Community Partnership Demonstration Grant Program. This program, authorized by the Anti-Drug Abuse Act of 1988, supports public/private partnerships in communities to develop comprehensive, community-wide programs for substance abuse prevention. Started in Fiscal Year 1990 with \$41.3 million, five-year grants are awarded to communities to establish coalitions of organizations representing parents, schools, business and industry, and professional organizations for the planning and implementation of long-term comprehensive prevention programs. A comprehensive evaluation of this program began late in 1990 and will provide data and cross-site comparisons to identify successful strategies. The amount available for this program in Fiscal Year 1993 totaled \$95 million.

Community Youth Activity Demonstration Grants. The Anti-Drug Abuse Act of 1988 authorized this three-year demonstration grant program to assist States in developing innovative alcohol and substance abuse prevention services for youth not in school, at-risk of dropping out, or involved with gangs. The program encouraged States to establish community partnerships for the purpose of carrying out prevention activities and consisted of three components: 1) Projects of National Significance made up 5 percent of appropriations; 2) block grants to States made up 25 percent of appropriations; and, 3) competitive grants to States made up the remaining

70 percent. In Fiscal Year 1990, 31 three-year competitive grants to States were awarded, totaling approximately \$14 million. In Fiscal Year 1992, the program's final year of funding, approximately \$7 million in State grants was awarded.

Programs of National Significance. Programs of National Significance are three-year contracts awarded to national organizations that have outstanding community-based alcohol and other drug prevention programs. A number of grantees offer a wide range of youth services and activities aimed at expanding opportunities for disadvantaged youth. Contracts have been awarded to groups including the American Medical Student Association Foundation, the National Coalition of Hispanic Health and Human Services Organizations, the National Asian Pacific American Families Against Abuse, and the National Youth Sports Coaches Association. Appropriations for the program in Fiscal Year 1993 totaled \$518,000.

ii. Technical Assistance

National Prevention Training System. The National Prevention Training System focuses on training persons who have access to populations at special risk of alcohol and other drug abuse, including youth. The program consists of the following four components: 1) training, curriculum development, and technical assistance for efforts to put knowledge and skills to work in local prevention activities; 2) specialized training for community partnership grantees and other community coalitions; 3) clinical prevention training on alcohol and other drug abuse problems for health professionals; 4) National Volunteer Training Center for Substance Abuse to promote effective training of volunteers to ensure their long-term commitment to volunteer prevention activities. Total appropriations for Fiscal Year 1993 were \$14.5 million.

iii. Communications

CSAP supports a wide array of informational and educational initiatives designed to enhance prevention programs, and disseminate data about alcohol and other drug problems and approaches to their solutions. Activities include public education and outreach campaigns targeting special populations and/or special problems, cooperative agreements, and support of States and local communities in the development of their own communications activities.

- CSAP funds the National Clearinghouse on Drug Abuse Information (NCADI) to make a variety of targeted materials available to adolescents and people working with adolescents. This year, the Clearinghouse is offering newly developed resources for communicating and working with early adolescents (10 - 15 years) and African American youth.
- The Learning Community, established in 1987, encourages collaboration and communication among organizations which focus on prevention services for high risk youth by facilitating the development

of networks and interest groups, disseminating information, and sponsoring an annual conference.

- CSAP funds three resource centers: The National Resource Center for Prevention of Perinatal Abuse of Alcohol and Other Drugs, the National Volunteer Training Center for Substance Abuse Prevention, and the National Prevention Evaluation Resource Center. (*See Appendix for more information.*)
- The Impaired Driving and Teen Drinking Prevention Initiative was designed to accomplish the goals established by the 1988 Surgeon General's Workshop on Drunk Driving. CSAP is involved in a variety of activities including coordinating federal working groups, providing technical assistance, developing outreach campaigns, analyzing the alcohol beverage industry's marketing and advertising influence on youth, disseminating data and research findings, and developing publications, programs and conferences.
- The Urban Youth Campaign is an education initiative to prevent alcohol and other drug use among African-American youth. The campaign empowers African-American communities to continue to fight drug use and violent crime, creates bonds with young African-Americans, families, churches, schools, law enforcement, business, and the media; challenges the myths about African American youth and their experiences with alcohol and other drugs; and celebrates the resilience and pride of young African Americans.
- Through its Prevention Monograph series, CSAP disseminates information on research, program evaluations, conferences and technology from the prevention and intervention field. Many of the series publications focus on youth and related substance abuse issues. For instance, Monograph -8, entitled *Preventing Adolescent Drug Use: From Theory to Practice*, presents several lessons about adolescents, their families, the transitions that influence their development and behavior, and the many factors that place them at risk of alcohol and drug abuse. The book also contains practical information about methods of identifying, reaching, retaining, and serving youngsters and their families.

iv. Scientific Analysis and Evaluation

CSAP is involved in a number of activities designed to monitor, assess and report on prevention efforts, including: 1) designing a system for describing prevention programs; 2) analyzing and assessing evaluation materials; and, 3) developing the software and collecting the materials for a database of prevention programs and a database of evaluation findings.

National Evaluation Project. The Anti-Drug Abuse Act of 1988 requires CSAP to conduct a "structured evaluation" of drug abuse prevention efforts and to report the findings from this evaluation to Congress. CSAP will carry out this legislative mandate in three phases: 1) in 1992 CSAP issued the first Report to Congress presenting a review of prevention initiatives and a synthesis of existing evaluation findings from federal and non-federally funded programs from across the United States; 2) development of the National Evaluation Project, a systematic structured evaluation, is currently underway; 3) CSAP will carry out the National Evaluation Project and prepare the two remaining reports to Congress. In addition, the legislation also requires CSAP to establish and maintain a national database of information on programs for the prevention of substance abuse.

b. Center for Substance Abuse Treatment

Overview

The Center for Substance Abuse Treatment (CSAT), formerly ADAMHA's Office of Treatment Improvement, has been given a congressional mandate to expand the availability and enhance the efficacy of treatment and recovery services for alcohol and drug abusers, particularly for populations that are especially vulnerable to addictive disorders and in areas where the demand for services far outpaces the existing capacity. CSAT is especially interested in supporting programs that improve the coordination among treatment providers, recovery programs, primary health care entities, mental health care providers, human services agencies, housing authorities, educational and vocational services, the criminal justice system, and other related services. CSAT's activities are focused in the following five areas: treatment resource expansion programs; programs for women, infants, and children; innovative treatment programs; HIV/AIDS programs; and, research and evaluation programs.

CSAT's Adolescent Initiative. CSAT supports an adolescent initiative that focuses CSAT resources and provides inter-agency leadership in pursuing treatment solutions for adolescent substance abuse problems. The initiative started after the 1989 National Conference on the Treatment of Adolescents with Alcohol, Drug Abuse, and Mental Health Problems focused attention on the special treatment needs of adolescents. As part of the adolescent initiative, CSAT has produced publications focusing on different aspects of adolescent substance abuse treatment. The most recent is entitled *Empowering Families, Helping Adolescents: Family Centered Treatment of Adolescents with Alcohol, Drug Abuse and Mental Health Problems*. CSAT is currently preparing four additional publications, including one on adolescent substance abuse and AIDS.

Linkage of Community-Based Health Care Services. CSAT and the Bureau of Primary Health Care (BPHC) are co-sponsoring a new demonstration program designed to build linkages among community-based providers of primary health care, alcohol, substance abuse, HIV/AIDS, and mental health treatment services to deliver integrated services to more effectively address the health care needs of critical

populations. Section 510 (b) (1) of the Public Health Service Act defines critical populations as "adolescents, female addicts and their children, racial and ethnic minorities, or individuals in rural areas." This program follows a 1989 National Institute on Drug Abuse (NIDA) and BPHC linkage initiative that funded 21 project for three years through Fiscal Year 1991. Fifteen of the 21 projects were extended through Fiscal Year 1992. While the NIDA/BPHC initiative established the viability of a linkage strategy, it did not explore options designed to address the range of unique local circumstances inherent in many communities. This new initiative aims to fund demonstrations that focus on linking services according to community needs for a number of target populations, including alcohol and other drug using adolescents. CSAT estimates that approximately \$7.8 million will be available to support 20-30 3-year demonstrations.

i. Treatment Resource Expansion Programs

Substance Abuse Block Grant. The ADAMHA Reorganization Act split the Alcohol, Drug Abuse, and Mental Health Services (ADMS) Block Grant into two separate block grants, one for substance abuse services and the other for mental health services. Substance abuse block grants are awarded to States to support alcohol and drug abuse prevention, treatment and rehabilitative services. The Act also authorizes SAMHSA to use 3 percent of the substance abuse block grant funds in Fiscal Year 1993 and 5 percent in following years, for technical assistance, data collection, program evaluation, and to develop the national prevention data base. Fiscal Year 1993 appropriations totaled \$1.13 billion.

Treatment Capacity Expansion. This program awards grants to States for the creation of new addiction treatment facilities in areas where there is a documented gap between the need for substance abuse treatment and the availability of existing treatment services. Priority is given to programs providing residential treatment services to pregnant women, and preference goes to States that provide a non-federal match greater than that required by law. In Fiscal Year 1993, \$15.3 million was allocated from drug forfeiture funds.

ii. Programs for Women, Infants and Children

Residential Treatment Program for Pregnant and Postpartum Women. This program funds projects that offer comprehensive substance abuse treatment in residential settings for pregnant and postpartum women and their children, including housing that permits children to live with their mothers. Projects funded by this program foster service integration through community linkages to provide primary health care, prenatal and postnatal health care, pediatric care, and education and counseling related to AIDS, sexually transmitted diseases, domestic violence, sexual abuse, and legal and employment issues. Substance abusing adolescent females are considered a target populations under this program: In Fiscal Year 1993, CSAT will

fund approximately 23 grants with approximately \$22.9 million, a substantial portion of which was made available by a one-time set-aside from the Substance Abuse Block Grant.

Residential Treatment Program for Women and Children. This demonstration program supports comprehensive treatment in residential settings for alcohol and other drug dependent women and their children. Priority is given to projects that target certain sub-populations, including: racial and ethnic minority women; adolescent females; residents of public housing and homeless women, women in rural areas, and women with infectious diseases. In Fiscal Year 1993, approximately \$24 million will be available to fund approximately 31 grants.

iii. Innovative Treatment Programs

Critical Populations. The Model Comprehensive Drug Abuse Treatment Program for Critical Populations is intended to enhance drug abuse treatment programs which serve specific population groups facing critical health and socio-economic difficulties as a result of their substance abuse. Authorized by Section 510 of the Public Health Service Act, specified population sub-groups include adolescents (aged 10 to 21), substance abusing women (over 12 years old) and their children, racial and ethnic minorities, residents of public housing, and the homeless. Programs that target adolescents who are chronic truants or who have dropped out of school, those who are at risk for teenage pregnancy, or who are at high risk for the consequences of sustained substance abuse, are given particular priority, as are those programs that demonstrate coordination of services. In Fiscal Year 1993 programs that target rural and migrant populations also will be given funding priority. In addition, as part of the adolescent initiative, CSAT is planning on directing a portion of Critical Populations' Fiscal Year 1993 funding to programs targeting adolescents.

Through the Critical Populations program, a total of \$18 million in Fiscal Years 90 and 91 was awarded to fund 57 project focusing solely on adolescents. Out of the 57 projects dealing with adolescents, 29 projects, totaling \$11 million, focused on adolescents involved, or at risk of being involved, with the juvenile justice system. The 29 projects received an additional \$6.7 million in continuation funds in Fiscal Year 1992. No new programs were funded in Fiscal Year 1992. In Fiscal Year 1993, approximately \$42.2 million will be available for 78 grants.

Target Cities. The Target Cities Systems Improvement program provides funding to major cities to develop substance abuse treatment systems that include a full range of substance abuse treatment and related health and human services. The goals of the program are to ensure that patients receive more timely and effective treatment and to mainstream substance abuse treatment into primary health care systems. Establishment of centralized intake, clinical assessment and referral systems are mandatory components of the program. CSAT encourages projects to address the particular needs of exceptionally vulnerable populations, including adolescents (especially those at risk of involvement with child welfare), minorities, pregnant

women, female addicts and their children, and residents of public housing projects. CSAT estimates that approximately \$32.9 million will be available to support 8 grants in Fiscal Year 1993.

Model Comprehensive Substance Abuse Treatment Programs for Non-Incarcerated Criminal and Juvenile Justice Populations. This program assists States and communities in establishing and enhancing projects to provide treatment for non-incarcerated substance abusing individuals in the criminal justice system. The primary purpose of the program is to improve treatment outcomes for offender populations and reduce the frequency with which they engage in criminal behavior as a result of their addictions. Priority is given to those programs which offer a continuum of services, reach juvenile and female offenders, and offer outreach and treatment as an alternative to incarceration. CSAT is expecting to support 14-20 new awards with approximately \$7.6 million in Fiscal Year 1993. In Fiscal Year 1993, approximately \$33 million was appropriated for both model programs.

Model Comprehensive Substance Abuse Treatment Programs for Correctional Populations. This program is intended to expand the availability of treatment and rehabilitative services for incarcerated individuals with serious alcohol and drug abuse problems. This program serves adults (both men and women) incarcerated in State or regional correctional facilities, and incarcerated adolescents aged 10-22 with serious substance abuse problems. In Fiscal Year 1992 approximately 40 percent of CSAT's non-incarcerated and incarcerated criminal justice program money went to criminal justice programs for youth. Approximately \$12.5 million will be available to fund 17-25 projects in Fiscal Year 1993. About 50 percent of these funds will be allocated for projects that serve adults in State correctional facilities.

Treatment Campuses. Through this program, CSAT establishes cooperative agreements with States to set up treatment "campuses" where substance abusers can access a variety of health and social services within one facility. The program has three major goals: 1) to expand residential treatment; 2) to provide a setting for research in residential treatment; and 3) to determine whether this general approach to treatment expansion is more rapid or more cost effective than the use of discretionary or block grant funds. In Fiscal Year 1993 \$18.4 million was appropriated to support the continuation of the two existing campuses located in Houston, Texas, and Secaucus, New Jersey.

iv. HIV/AIDS Programs

Community Based Outreach and Intervention Demonstration. The HIV/AIDS and Related Diseases among Substance Abusers — Community Based Outreach and Intervention Demonstration Program funds projects that seek out injecting drug users and their sexual partners to encourage them to obtain treatment for drug dependency and obtain medical diagnosis service for HIV/AIDS, sexually transmitted diseases (STD) and tuberculosis. Funded projects also provide these individuals with information, skills and other means to avoid the behaviors that put them at risk of

acquiring the diseases. Many funded projects identify adolescents as a subpopulation for targeting purposes. In Fiscal Year 1993, \$10.5 million was appropriated for this program.

v. CSAT Evaluation

CSAT currently is funding two major evaluations that focus on youth.

- The Evaluation of the Job Corps Drug Treatment Enrichment demonstration program is a four-year project to evaluate the efficacy and costs versus benefits of introducing drug treatment services in the Job Corps, where approximately 30 percent of students currently test positive at intake for some form of illicit drug use. The focus of the study will be on disadvantaged youth, aged 16 to 24, who have no serious medical or behavioral problems and who are motivated to succeed in the Job Corps program. Results are expected in 1994.
- The National Treatment Improvement Evaluation Study (NTIES) is an outcome and process evaluation of six demonstration programs funded by CSAT. The study examines outcomes from both patients and programs, and explores questions such as the relative effective and cost-effectiveness of CSAT funds used to enhance standard alcohol and other drug abuse treatment modalities. The instrument will be tested in the field beginning late 1993 through early 1994.

c. Center for Mental Health Services

Recent studies suggest that between 17 and 22 percent (or 11 to 14 million children) in the suffer from some type of diagnosable mental disorder. Even the most conservative estimate is that 12 percent of the 63 million young people in this country under the age of 18 suffer from clinical maladjustment.⁸

Less than one out of five youth afflicted by a mental disorder currently receives appropriate treatment.⁹

Overview

The Center for Mental Health Services (CMHS) is charged with ensuring that scientific and practice-based knowledge is applied in the prevention and treatment of mental disorders; improving access to and promoting effective services for people with, or at risk for mental health disorders; and promoting rehabilitation of people with mental disorders. The ADAMHA Reorganization Act mandated a strong federal role in the development of policy and delivery of mental health services, and significantly increases the attention and resources devoted to the mental health service needs of children and adults. CMHS activities focus on the special needs of children and adolescents, adults, and homeless individuals.

**Center for Mental Health Services
Fiscal Year 1993 Appropriation
(in millions)**

Mental Health Block Grant	\$278
Children's Mental Health	17
Clinical training and AIDS training	6
Community Support for Adults	12
Services for the Homeless	51
Protection and advocacy	<u>21</u>
Total	\$385

Community Mental Health Services Block Grant. The ADAMHA Reorganization split the Alcohol, Drug Abuse and Mental Health Services (ADMS) Block Grant into two separate block grants: one for substance abuse services, administered by CSAT; and one for mental health services, administered by CMHS. The block grant program requires comprehensive State mental health planning programs to be submitted each year along with an implementation report for the previous year's activities. States that fail to implement their plan are subject to a penalty against their block grant award. States have planning councils designed to create strong networks of families, providers, and consumers to direct federal resources to local needs. In Fiscal Year 1993 \$277.9 million was made available for block grants.

i. Children/Adolescents with Severe Emotional and Mental Disorders

Child and Adolescent Service System Program (CASSP). This program seeks to demonstrate improved State and local systems of care for children and adolescents with or at risk for developing severe mental, behavioral, or emotional disorders and their families. The primary goals of CASSP are to: 1) improve access to and the availability of a continuum of care for children and adolescents with serious emotional disturbances; 2) develop a leadership capacity and increase priority in resource allocation for child and adolescent mental health services; 3) to improve coordination and collaboration among the child-serving agencies including mental health, education, child welfare, health, substance abuse and juvenile justice agencies; 4) to increase family participation in all aspects of the planning and delivery of services; 5) to ensure that all systems are able to respond competently to cultural and ethnic differences; and 6) to evaluate the progress of States and communities in improving systems of care. CASSP also supports demonstrations to evaluate the effectiveness of innovative models of organizing, delivering and financing mental health services for children. In Fiscal Year 1993, \$12.2 million was available for CASSP.

- The Technical Assistance Center, located within the Center for Child Health and Mental Health Policy at Georgetown University in Washington, D.C., assists States and communities in their efforts to improve service systems. The Center conducts studies, develops informational materials, holds conferences and training institutes, and provides consultation on systems change and all aspects of service development for children and families. The Center's special areas of emphasis include the development of systems of care for children and their families, community-based service approaches, cultural competence, service for special populations of high risk youth, and strategies for financing services.
- Following up on the CASSP emphasis on involving the family in all aspects of service delivery and assessment, CMHS provides funds to organizations for the development of statewide networks of family organizations. Currently, 15 such networks are underway through CMHS contracts with the State affiliates of national organizations dealing with issues relating to mental health. This year, CMHS hopes to award up to 25 grants with \$500,000 from the CASSP budget.
- CASSP and the Department of Education's National Institute on Disability and Rehabilitative Research have co-founded two research and training centers to study ways to improve services for children and adolescents with emotional problems and their families: The Research and Training Center for Children's Mental Health, located at the Florida Mental Health Institute of the University of South Florida in Tampa; and, the Research and Training Center on Family Support and Children's Mental Health, located at the Regional Research Institute of Portland State University in Oregon.

Comprehensive Community Services Program for Children with Serious Emotional Disturbances. This program, authorized by the ADAMHA Reorganization in 1992, provides funds to States and local jurisdictions for the development of community care services for children and adolescents up to age 22 with severe emotional, behavioral, or mental disorders. It ensures that services are provided through effective collaboration among child-serving systems; that each child or adolescent served receives an individualized service plan; that each plan designates a case manager to work with the child and family; and that funding is provided to meet the mental health needs of the youngsters. A key component of the program is the emphasis on family participation in the development and implementation of each child's individual plan for services. There is an increasing matching requirement for funds received under this program and grantees must provide an impact evaluation. The legislation authorized \$100 million for the program. The Fiscal Year 1993 appropriation was \$4.9 million.

Children/Adolescents Research and Evaluation. CMHS' Child and Adolescent Studies Section works independently and in collaboration with other child-serving systems, federal agencies and the private sector to ensure that mental health services for children and adolescents are based on empirical data and research. In 1993, the Center intends to sponsor two major evaluations studies: one on local level CASSP grants that started in 1992; and, one on new services made available through the Comprehensive Community Services Program for Children with Serious Emotional Disturbances program.

Child and Adolescent Research Demonstration Program. The Child and Adolescent Research Demonstration Program, building on the CASSP philosophy, supports research on the efficacy of innovative approaches to organizing, delivering, and financing systems of care for children and adolescents with serious emotional disturbances and their families. The program also funds intervention services. To date, twelve 3-year grants have been awarded and in Fiscal Year 1992 approximately \$3.5 million was allocated to this program from the CASSP budget. Examples of studies funded under this program include: assessing the financial, social, and emotional impact of particular approaches to community-based systems of care for children and families; the relative efficacy of innovative service approaches; the effectiveness of alternative models of particular approaches to community-based systems of care.

ii. Training Programs

Mental Health Clinic Training. This training program awards grants to educate individuals for careers in public mental health services, generate human resource development programs in States mental health systems, increase the participation of underrepresented racial/ethnic minority and disadvantaged students in mental health professions, and train personnel to deliver services to specifically designated underserved areas and priority populations. The Fiscal Year 1993 appropriation was \$3 million.

AIDS Training Program. This program supports grants and contracts for the education of mental health care providers to address the neuropsychiatric and the psychosocial aspects of HIV spectrum infection. Trainees include the traditional mental health care provider groups, psychiatrists, psychiatric nurses, psychiatric social workers, psychologists, marriage and family counselors, as well as medical students, primary care residents, and nontraditional mental health care provider groups, such as clergy, police, and alternative health care site providers. In Fiscal Year 1993, \$3 million was appropriated for this program.

6. Agency for Health Care Policy and Research

The Agency for Health Care Policy and Research (AHCPR) was established to enhance the quality, appropriateness, and effectiveness of health care services and access to health care services. AHCPR supports a broad range of policy relevant

scientific and survey research to promote improvements in the organization, financing, and delivery of health care services. In Fiscal Year 1993, AHCPR's funding totaled \$128 million. AHCPR is currently funding several projects which have a youth focus.

a. Patient Outcomes Research Teams

Patient Outcomes Research Teams (PORTs) identify and analyze the outcomes and costs of alternative interventions for a given clinical condition, to determine the most effective and cost effective means to prevent, diagnose, treat or manage it. Each PORT represents a large-scale, multifaceted, multisite, 5-year research program. One of AHCPR's 14 PORTs, "An Evaluation of Practices Intended to Prevent Low Birthweight and Its Sequel in Minority and High Risk Women," has a significant youth component. It recently completed a study of health behavior and outcomes in sequential pregnancies that should be considered in teenage pregnancy intervention programs. PORTs receive \$1 million each year for five years.

b. MEDTEP Research Centers on Minority Populations

In 1993, AHCPR began supporting MEDTEP (Medical Effectiveness) Research Centers on Minority Populations. These 11 centers are designed to increase the capacity of patient outcomes research among minority health care providers and health services researchers through active participation in the research center activities. One Center (funded at \$678,000 in Fiscal Year 1993 and \$750,000 in Fiscal Year 1994) is targeting all its research efforts on African American youth. Three other centers plan to conduct targeted studies of minority youth conditions such as teen pregnancy, violence, and AIDS.

c. Extramural Research Grants

AHCPR has a broad portfolio of extramural research grants related to health care costs, quality, access and medical effectiveness. A number of projects focus on youth. For example, "Infant Deaths to Teen Mothers: San Antonio 1935 to 1985" will determine whether the association between infant mortality and young maternal age among Mexican-American teenage mothers reflects biological immaturity, or whether it is more a function of the adverse socioeconomic conditions that are counterpart to very early childbearing. Other current projects focusing on youth include: Development of an Adolescent Health Status Measure; Pharmaceutical Care and Pediatric Asthma Outcomes; Improving Children's Health Outcomes: Negotiated Care; and Regional Variation in Pediatric Hospitalization.

7. Centers for Disease Control

Overview

The Centers for Disease Control and Prevention (CDC) promotes health and quality of life by preventing and controlling disease, injury and disability. As the nation's prevention agency, CDC accomplishes its mission by working with partners throughout the nation and the world to:

- monitor health
- detect and investigate health problems
- conduct research to enhance prevention
- implement prevention methods
- promote healthy behaviors, and
- foster safe and healthful environments

Many of CDC's activities address the health needs of youth, and one of CDC's divisions focuses entirely on programs to reduce health risks to children and adolescents through comprehensive school health programs. Many of the nation's health problems are caused by behaviors established during youth, including drug and alcohol use, tobacco use, unhealthy eating habits, inadequate physical activity, behaviors that lead to violence (including suicide) and unintentional injuries, and sexual behaviors that can lead to HIV infection, other sexually transmitted diseases, and unintended pregnancy. In a 1989 report to Congress, the Office of Technology Assessment reported that of the centers responding to their questionnaire, approximately \$61 million in Fiscal Year 1989 was targeted specifically for adolescents, representing about 6 percent of CDC's overall budget.¹⁰ In Fiscal Year 1993, approximately \$1.6 billion was appropriated for CDC.

i. National AIDS Information and Education Program. The National AIDS Information and Education Program (NAIEP), initiated in 1987, is responsible for informing the American public about AIDS and HIV infection. NAIEP assists youth serving agencies and schools educate youth about, and prevent the spread of AIDS. As a result of the initiative, "Guidelines for Effective School Health Education to Prevent the Spread of AIDS" were developed in collaboration with national, State and local organizations. To meet its goals, NAIEP awards contracts to integrate AIDS-related information into school health curricula; funds the development of AIDS education materials for school-aged children in areas with a high incidence of AIDS; supports demonstration/training centers for educators; and provides technical assistance for the development of survey instruments for assessing adolescents knowledge, attitudes and behavior related to AIDS. NAIEP also funds the National AIDS Clearinghouse and sponsors the National AIDS Hotline.

AIDS School Health Education Subfile. In 1987, the National Center for Chronic Disease Prevention and Health Promotion developed the AIDS School Health Education Subfile, a computerized database designed to organize and make available resources related to educating children and youth about AIDS. The database contains information on AIDS, teaching materials, curricular resources for educators and bibliographic descriptions of teaching guides and curricula, brochures and pamphlets, reports, books, journal articles, federal, State and local policies and guidelines, and audiovisuals materials. It is made available to the public through the National AIDS Clearinghouse.

a. National Center for Prevention Services

An estimated 34,000 teens are already infected with HIV and the number of adolescent AIDS cases in this country doubles every 14 months.¹¹

i. Division of STD/HIV Prevention

The Division of STD/HIV Prevention, in cooperation with other divisions of CDC, administers programs aimed at preventing and controlling sexually transmitted diseases (STD), including Human Immunodeficiency Virus (HIV). Division activities include: maintaining a national framework for effective surveillance of STD; supporting prevention research to develop effective intervention approaches; providing financial, human, and other resources to assist State and local prevention programs; and collaborating with a variety of community-based organizations and professionals. The division supports HIV prevention activities aimed at identifying and altering the behavior of persons at high risk of acquiring or transmitting HIV. Working toward the Healthy People 2000 Objectives, the division is particularly interested in addressing the special needs of High-Risk/High Impact Populations, including women and children, adolescents, and minority populations.

The Division's grant and cooperative agreement operations totaled over \$264 million in Fiscal Year 1992, with about 71 percent of this amount allocated for HIV activities. These operations supported 65 HIV and 65 STD prevention programs through State and local health departments, and about 100 cooperative agreements to community-based or national organizations.

Prevention/Intervention Programs

Hemophilia Behavioral Intervention Evaluation Projects. Behavioral Intervention Evaluation Projects in Hemophilia and HIV are multi-center research projects designed to implement and evaluate behavioral interventions for the prevention of sexual and perinatal transmission of HIV in persons with hemophilia. This program addresses Healthy People 2000 Objectives aimed at reducing the proportion of adolescents who have engaged in sexual intercourse and increasing the proportion of sexually active, unmarried people with hemophilia who use condoms. Eighteen 5-year cooperative agreements were established in 1990, eleven of which target

adolescent males between the ages of 12 and 19, their sexual partners and their parents. The preliminary findings suggest that younger adolescents with hemophilia are more likely to reflect their parents attitudes with respect to condom use, while older adolescents tend to share the attitudes of younger adults.

AIDS Community Demonstration Projects. AIDS Community Demonstration Projects support the design, development and evaluation of community level interventions that target high-risk, hard-to-reach groups. The second five year funding period of these projects began in 1990. Continuation funding, totaling \$4.4 million in Fiscal Year 1992, was awarded to five ongoing projects. The five hard-to-reach risk groups include female sex partners of injecting drug users, and high risk adolescents who are runaway or throwaway (out of the home setting).

Counseling, Testing Referral, and Partner Notification. The Counseling, Testing Referral, and Partner Notification (CTRPN) program is designed to maximize the proportion of persons at-risk for HIV infection who are offered and accept testing, participate in partner notification services, and receive referral for further medical and prevention services. In Fiscal Year 1992, CDC awarded approximately \$103 million in cooperative agreements to fund 65 HIV prevention programs through State and local health departments to provide individuals with information concerning their HIV status, refer infected persons to medical and psychological services, educate infected persons about behaviors that transmit infection, and educate high risk populations.

About \$21 million of this was allocated for programs providing counseling, testing, referral and partner notification services to injecting drug users. Special efforts are directed toward certain populations subgroups such as adolescents and youth who may be starting to use drugs, and female users of childbearing age. In Fiscal Year 1991, approximately \$20 million of CTRPN funds supported activities such as group counseling for HIV-positive individuals, and street outreach programs for injecting drug users, prostitutes, and homeless or runaway youth.

Minority and Other Community-Based HIV Prevention Projects. These projects are a key component of HIV prevention efforts and target a broad range of groups including African American and Hispanic populations, Native Americans, youth, drug users, female partners of persons at-risk, prostitutes and the homeless. Mandated by Congress to compliment efforts by State and local health agencies to reach populations at increased risk for HIV, CDC initiated the program in 1984 with a cooperative agreement with the U.S. Conference of Mayors (USCM). Since 1985, USMC has awarded nearly \$5 million in prevention grants to community-based organizations, over \$1 million of which has been awarded to 26 organizations in 22 cities to support programs targeting adolescents and young adults. An estimated 50,000 youth had been reached through various USCM-funded intervention as of December 1991.¹² The program has expanded over the years, and in addition to USCM, CDC now awards funds directly to National Minority Organizations, and community-based organizations (minority and other).

Research

The Division supports a number of research projects that focus on adolescents and ways to prevent and treat HIV/STD, including the following:

- A study is being conducted in Fulton County, Georgia, to identify the prevalence, incidence, and behavioral correlates of bacterial and viral STD in adolescent females ages 14-19 attending teen health clinics. Information learned from this study will be used to plan and implement interventions appropriate for this population.
- Analysis of a survey conducted in Pennsylvania on the relationship between early intercourse, risky sexual behavior and STD in women recently was published.¹³ The results suggest that age of first intercourse is a useful marker for risky sexual behavior and history of STD.
- An evaluation of HIV prevention street outreach programs for injecting drug users at high risk currently is underway at eight project sites in six cities including three projects serving adolescents. The project's aim is to improve community outreach efforts by evaluating the coverage, cost and impact of currently operating street/community outreach interventions. Started in September of 1990, the project is expected to take 5 years. In its second year, funds for all eight project sites totaled \$3.4 million.
- A study will evaluate the availability and perceived availability of social services for young women involved in prostitution. This pilot study will provide empirical data to develop more appropriate interventions for young women at risk for HIV through risky sexual behavior and drug using activities associated with prostitution.
- A study will analyze data from the 1991 Sex and Drug Use Survey of Young Adults in Los Angeles, California, to determine the prevalence of sexual risk behaviors and condom use among street youth aged 13-23.
- An assessment is being conducted on the patterns of use, rates of acceptance and use-effectiveness of condoms in preventing HIV and STD among black and Hispanic youth. The project is expected to improve intervention programs targeting this population.
- The Seattle AIDS Community Demonstration Project is testing community-level approaches to determine whether certain interventions can change the risk behaviors of men who have sex with men but identify as non-gay, prostitutes, and youth in high risk situations.

Surveillance

Sexually Transmitted Disease Surveillance Report. The Surveillance division is responsible for conducting national surveillance of STD and obtaining relevant data on AIDS incidence and HIV seroprevalence to guide program decisions. Every year, the Sexually Transmitted Disease Surveillance report is published, presenting current statistics and trends of sexually transmitted diseases in the U.S. Intended as reference document, the publication is based on information provided by STD surveillance systems operated by State and local STD control programs and provides data on reported STD cases and rates by age, State, region, ethnic groups

b. National Center for Chronic Disease Prevention and Health Promotion

The National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP) supports nationwide efforts to prevent chronic diseases — such as cardiovascular disease and cancer — which account for about 75 percent of all U.S. deaths and greatly diminish the quality of life for millions of Americans. The Center also supports programs that promote good nutrition, tobacco-free lifestyles, physical activity, reproductive health, early disease detection, and other effective interventions. NCCDPHP has the dual mission of advocating healthier lifestyles and translating research findings into effective community programs. The Center works with education agencies, State and local health agencies, academic institutions, and professional, voluntary, and community organizations to implement school and community-based programs to prevent damaging behavioral problems.

i. Division of Adolescent and School Health

Nationwide, HIV education is required by 78% of school districts for students in grades 6-8 and 47% of school districts for students in grades 9-12.¹⁴

In 1991, 54% of high school students reported having had sexual intercourse, 69% reported being currently sexually active, 19% reported having had more than 4 sexual partners in their lifetime, and 46% of currently sexually active students reported they or their partner had used a condom at last sexual intercourse.¹⁵

The Division of Adolescent and School Health is responsible for monitoring the health status of children and youth, identifying major health problems for children and youth, and developing effective interventions. DASH administers programs primarily for adolescents in elementary and secondary school, but also supports programs targeting college students. DASH promotes comprehensive school health programs to reduce health risks for youth and supports a number of surveillance and evaluation research activities, education and demonstration projects, and cooperative agreements that focus on HIV infection and other serious health problems.

Monitoring the Health Status of Children and Youth

Youth Risk Behavior Surveillance System (YRBSS). The Youth Risk Behavior Survey is a biennial school-based system of surveys designed to monitor priority health-risk behaviors that contribute to the leading causes of mortality, morbidity, and social problems among youth in the United States. The survey focuses on six categories of behaviors: intentional and unintentional injuries, tobacco, alcohol and other drug use, sexual behaviors that contribute to unintended pregnancy and STD infection, dietary behavior, and physical activity.

The survey was developed and used for the first time by 40 State and local education agencies in 1990...That same year, CDC implemented a national YRBSS to provide national data against which State and local surveys can be compared. The survey consists of representative samples of students in grades 9-12, and in 1992, a national household-based survey of 12 through 21 year olds. Results help DASH monitor how priority health-risk behaviors fluctuate; evaluate the impact of broad national and local efforts to prevent high-risk behaviors; and monitor the progress toward relevant national Health Objectives. DASH also supports training in surveillance research designed to assist State and local education agencies to conduct the YRBSS.

DASH is planning to publish a series of nine articles as a supplement to the American Journal of Public Health to describe the rationale, development, and uses of YRBSS, and in 1992, published a four part series in the *Morbidity Mortality Weekly Report* featuring data from the 1991 YRBS. Topics covered were: Physical Education and Dietary Behaviors; Tobacco, Alcohol, and Other Drug Use; Unintentional and Intentional Injuries; Risk Behaviors for Unintended Pregnancy and HIV infection.

For more information on YRBSS, please see section entitled "National Center for Health Statistics."

National School Health Survey. A national survey of school (public and private) policies and programs that support HIV education in grades K-12 will be conducted in 1994 and will provide information about school policies and programs related to the leading causes of morbidity, mortality, and social problems among youth.

National District Survey. A national survey of public school districts was conducted in 1990 to determine the extent to which HIV and health education are required by school districts across the United States. Results indicated that HIV education was required by 66.9 percent of districts and that they increased by grade level from 29.7 percent in kindergarten to 82.3 percent in grade 7 and then declined to 37.3 percent in grade 12. These findings were published in the November 1992 issue of *The Journal of School Health*.

State and Local HIV Education Survey. DASH provided technical assistance to States and local jurisdictions to conduct surveys in the spring of 1992 to determine the provision of HIV education within States and cities. The surveys collected data on

the number and percentage of schools providing HIV education, and the number and percentage of students in grades 7-12 receiving HIV education. This survey will be conducted biennially in even-numbered years, and an expanded questionnaire is being developed for 1994. A pilot of the expanded survey, conducted in six States during the spring of 1992, is targeted to school principals and health education teachers working in grades 7-12 to measure HIV education and school health education, and to examine methodological issues related to school-level data collection.

Adolescent Health: State of the Nation. This monographs series provides information on health outcomes for youth aged 10-24 and is scheduled for publication in 1993. The first monograph focuses on mortality and the leading causes of death involved in physical fights, and carried weapons such as handguns and knives.

Prevention and Interventions

Prevention Centers. DASH is working with the Prevention Center at the University of North Carolina on a project entitled "Effective Health Services for Adolescents at Risk." The project is designed to establish a national census of existing comprehensive health service programs for adolescents, assess the effectiveness of varying factors in the organization of integrated services for adolescents, and disseminate findings and policy options for services for adolescents. DASH also supports two other Prevention Centers, one at the University of Texas, Houston, and one at the University of Illinois, in their work on school health education diffusion and methodological issues in school-based research.

Meta-Analysis and Research Center for Adolescent HIV/STD and Pregnancy Intervention Effectiveness. In collaboration with the NCCDPHP Technical Information Services Branch, DASH is establishing a database and conducting meta-analyses on the effectiveness of interventions designed to reduce risks associated with HIV, other STDs, and unintended pregnancy. This project is designed to provide comprehensive, scientific meta-analytical data on the effectiveness of these programs for adolescents. DASH also intends to develop a research registry of ongoing studies and facilitate networking among scientists in this area. In an extension of this project, DASH will create a repository of evaluation resources, (i.e., instruments, documents, data, codebooks, etc.). The project will initially focus on HIV, STDs, and pregnancy, but other primary adolescent health concerns (i.e., smoking, alcohol and drug use, and nutrition) will be included over time.

DASH Evaluations

The Evaluation Section evaluates the effectiveness of HIV education programs and helps States and local education agencies evaluate the effectiveness of their own programs. Following are examples of major ongoing evaluation activities:

- An evaluation study in Houston and San Jose will assess the effectiveness of multi-component school-based interventions aimed at reducing behaviors that result in HIV/STD infection. These interventions include classroom curriculum, school-based activities, peer-led activities, parental involvement and school-community linkages. Ten intervention schools and ten comparison schools in three school districts have been selected for the study. Intervention activities for the three year assessment will begin September 1993. A similar evaluation also will be conducted to assess school-based health education and prevention curricula for grades 7-8, and grades 9-10. School-based activities, peer-led activities, parental involvement and a school-community link components will be included. The study will focus on New York City and surrounding areas of New York and New Jersey. Intervention activities are expected to begin in September 1993.
- Through a cooperative agreement with the District of Columbia's Commission on Public Health, DASH supports an evaluation aimed at improving the quality of HIV prevention for youth in high risk situations. Special emphasis will be placed on incarcerated and adjudicated youth.
- DASH has developed the Handbook for Evaluating HIV Education, a practical manual for conducting evaluation research. The Handbook is currently available from the DASH Information Office. In 1993, DASH conducted three-day training sessions based on the content to State and local education agency staff across the United States in 1993.
- DASH is working on a special evaluation project, funded through CDC's Office of HIV/AIDS Assistant Director for Minority Health, to evaluate and improve the quality and effectiveness of Washington DC public school's HIV prevention programs in grades 7-10 and develop a model evaluation strategy that could be adopted by other CDC-funded schools for future evaluations. DASH is preparing a research synthesis paper on the effectiveness of a variety of adolescent sex education programs. This study will draw conclusions about the effectiveness of existing research in terms of behaviors for unintended pregnancy, and HIV and other STD infection. In addition, the paper will identify

specific components that influence those behaviors (i.e., appropriate age of intervention) and identify the critical research questions for future endeavors.

Technical Assistance

DASH provides technical assistance to State and local departments of education, and to selected school districts, to conduct evaluation studies aimed at improving the effectiveness of HIV education programs. Selected school districts are using the funding to examine the effectiveness of innovative approaches to HIV prevention education and to assess the impact of school-based prevention programs on students' knowledge, attitudes, skills and behavior. Targeted populations are students in grades 9-12.

Special Projects

DASH established the Special Projects Branch in 1992 to manage newly funded projects designed to enhance the capacity of States to implement comprehensive school health programs and interventions directed at reducing tobacco use, sedentary lifestyle, and dietary patterns that lead to disease.

Guidelines. DASH is developing a series of guidelines for school health programs designed to prevent health problems and improve educational outcomes. During Fiscal Year 1993, guidelines will be developed in the following areas: Nutrition Education, Tobacco Use Prevention, Physical Activity, and Comprehensive School Health Education. In Fiscal Year 1990, DASH provided funding to the American Medical Association to develop a set of recommendations for primary care providers in an effort to establish a framework for providing clinical services to adolescents beyond routine health care. In addition to traditional medical conditions, the "Guidelines for Adolescent Preventive Services" emphasize health education and prevention of behavioral and emotional disorders in youth aged 11-21.

School Health Policy Project. Through a grant from a Prevention Center, DASH is funding the School Health Policy Project to identify major policy issues in restructuring school health programs and services. The project will include a discussion paper, a conference and a final report on policy issues, financial initiatives, recommendations, and future directions for restructuring school health programs. The project is expected to take one year and results should be ready by the end 1993.

State Demonstration Projects. Through competitive cooperative agreements, 5 State education agencies were awarded funding to strengthen their capacity, and that of their State department of health, to plan, implement, and evaluate school health programs designed to prevent health-risk behaviors among youth. Program activities focus on coordinating State education and health agency programs, policies, and personnel related to school health, and emphasize strengthening comprehensive school

health education in the areas of: nutrition, tobacco, physical activity, HIV and STD. An additional State received funding to establish a training and demonstration center for comprehensive school health programs.

Program Development

DASH supports a number of cooperative agreements with local health departments, State and local education agencies, and national organizations aimed at improving efforts to prevent HIV infection and other relevant health problems in youth.

Local Health Departments. Through the AIDS program offices in local health departments in New York City, Chicago, Washington, D.C., and Los Angeles, DASH supports prevention programs for youth in high-risk situations, including runaways, homeless youth, juvenile offenders, and migrant youth. A plan to establish an adolescent health unit to implement program activities and strengthen community-based coalitions of youth serving organizations is being developed.

National Organizations. DASH provides financial and technical assistance to 23 national organizations to help them help schools implement effective HIV education within school health education curriculum. In Fiscal Year 1994, the second 5-year project period will begin with funds awarded on a competitive basis.

State and Local Education Agencies. DASH provides support and technical assistance to every State education agency and 18 local education agencies that serve cities with highest number of reported AIDS cases. Funding can be used for activities that prevent HIV infection, develop education policies, train teachers, develop materials, and monitor student risk behaviors. The first 5-year project period for this program began in 1987 and ended in 1993. A new 5-year project period began in April 1993.

Information Development and Dissemination. In 1987 CDC began this program to support the development and dissemination of State-of-the-art information to increase the effectiveness of HIV prevention education for youth. As a part of this initiative, the "Guidelines for Effective School Health Education to Prevent the Spread of AIDS" were developed to assist schools plan HIV education programs, prepare education personnel, assure teacher qualifications, determine the content for specific grade levels (7-12), and assess prevention education programs. In addition, HIV prevention education materials were developed for integration into the two school health education curricula most widely used in the United States. The AIDS school health education subfile, created by CDC to help in these efforts, currently contains more than 1,450 HIV education materials.

Training and Demonstration Centers. By 1993, DASH had established three national training and demonstration centers to help teams from State and local education agencies implement HIV prevention education for youth. In addition, DASH funds 2 university training and demonstration centers to help institutions of

higher education provide effective HIV education to college-aged youth. DASH, in collaboration with the Education Development Center, also supports training centers in every funded State and territorial education agency to provide health education training for teachers.

College and University System. The Division of Adolescent and School Health also supports programs geared toward college students. Developed from the YRBS, a pilot college survey was conducted by three DASH-funded universities. Based on these results, statewide surveys will be conducted in the spring or fall of 1994 and DASH has plans to conduct a national survey in 1995.

Consortium of Colleges. DASH has awarded cooperative agreements to universities in five States with among the highest cumulative incidence of AIDS. Each university will set up a consortium of colleges, universities, trade schools and other agencies to develop education programs to prevent the spread of HIV infection and other important health problems among college students, and to provide training for teachers and administrators on implementing health education programs.

ii. Division of Reproductive Health

The Division of Reproductive Health (DRH) conducts and supports research, surveillance, and demonstration programs to prevent morbidity and mortality associated with women's health, pregnancy, and family planning-related occurrences, practices, and choices. Division programs focus on topics such as family planning, HIV prevention activities, state maternal and child health epidemiology assistance, maternal mortality and morbidity, preterm delivery, pregnancy risk assessment monitoring, infant mortality, women's health, prenatal smoking cessation, and clinic management. The Division's programs generally target women aged 15 through 44.

The following DRH projects target or have significant components that focus on young women.

Teen and Young Adult Pregnancy Projects. Recognizing that adolescent pregnancy is a public health concern, DRH is conducting surveillance to characterize the unintended teen pregnancy problem in the United States, using behavioral and epidemiological methods to develop and test ways to prevent unintended pregnancies, and providing consultation to States to provide State-specific estimates of unintended pregnancy.

HIV Prevention Activities. In 1991, RDH funded Project CARES (Comprehensive AIDS and Reproductive Health Education Study), a multi-site, 5-year project to design, implement, and evaluate behavioral interventions to prevent the spread of HIV infection in women and infants, specifically through increasing condom use and other contraceptive use among women at high risk of HIV infection and unintended pregnancy. The project emphasizes a delivery of services in non-traditional settings, such as drug treatment centers and homeless shelters.

iii. Office of Smoking and Health

Almost 3,000 teenagers start smoking every day.¹⁶

The Office of Smoking and Health coordinates activities related to HHS' mandated responsibility to collect, analyze, and disseminate information, studies, and other data on the effect of cigarette smoking on human health. The office offers a variety of publications and other materials relating to smoking and health topics including tobacco industry advertising, environmental tobacco smoke, tobacco use during pregnancy, smokeless tobacco, women and youth. A key component of these efforts is directed to developing anti-smoking campaigns targeting adolescents. In addition, the office develops materials geared specifically for early adolescents (ages 10-12), as studies show that members of this age group are most vulnerable to peer pressure and most likely to experiment with cigarettes.

- The "Don't Be A Butthead" campaign features a multi-media attack on adolescent tobacco use through bookcovers, posters, stickers, TV and magazine advertisements, radio spots, and materials designed for high school newspapers.
- The Performance Edge is a complete educational program that emphasizes the negative effects of alcohol and tobacco use on athletic performance. A package including a video, a curriculum guide and a magazine, is available free of charge to teachers and coaches.

c. National Center for Injury Prevention and Control

Injury is the leading cause of premature death in the United States.¹⁷

The National Center for Injury Prevention and Control (NCIPC) coordinates a national program to maintain and improve the health of Americans by preventing premature death and disability and reducing human suffering and medical costs caused by nonoccupational injury.

NCIPC is responsible for administering programs and coordinating federal efforts aimed at preventing and controlling intentional and unintentional injuries. Topics include fall and motor vehicle-related injuries, homicide, suicide, poisonings, drownings, and injuries from fires and burns. NCIPC supports activities in the following areas: surveillance; research and evaluation; and State and local intervention efforts. In addition, the Center is designated as the lead agency for the 22 Healthy People 2000 objectives relating to the Unintentional Injury and Violent and Abusive Behavior. NCIPC recently published *The Prevention of Youth Violence: A Framework for Community Action* and *Youth Suicide Prevention Programs: A Resource Guide*. According to an OTA report on adolescent health, funding for this

division has gone down compared to resources allocated to HIV activities, even though unintentional injury and violence is the leading cause of death among adolescents.

i. Surveillance

Over the past several years, NCIPC has been working to enhance national and State surveillance capacities to improve the quality and availability of data relating to injuries. Accomplishments in this area include the publication of standardized case definitions and procedures for collecting and analyzing trauma care data, the wide distribution of PC-based trauma registry software and documentation, the development of the first comprehensive summary of the geographic distribution of injury mortality in the U.S., the promotion of the use of E-codes (records of the external cause of injury) necessary to identify and evaluate research and intervention efforts.

ii. Research and Demonstrations

Promoting research is a key component of CDC's injury control program. NCIPC conducts intramural research, supports extramural research, and funds eight research centers for injury control at universities across the country, one of which has a focus on injury control issues relating to children, youth and young adults. In addition, grants to States help communities develop health-department-based injury control intervention programs, which address issues ranging from pedestrian safety to gang violence prevention.

Currently funded research and demonstration grants include the following youth-oriented projects: 3 community-based youth violence prevention projects, a study to compare the incidence and causes of severe injury between Hispanic and non-Hispanic children under 15; a project to improve the process of identifying and treating adolescents at risk for suicide; a project to develop, implement and evaluate a program to reduce violence among inner-city, high-risk early adolescents through a middle-school violence prevention curriculum; a study to evaluate the level of effort necessary to increase the use of bicycle helmets among elementary school children; a project designed to develop, implement and evaluate a hazard reduction program for family daycare homes; and, a four-year follow-up study of children aged 6-15 who have sustained a closed head injury (this longitudinal study involves the development of a database for recommendations for rehabilitative management of head injured children.)

iii. Research Findings

Results from CDC-supported research and evaluations often are used by State and local governments in developing regulations and policies aimed at reducing incidence of injury. The following are results from recently completed CDC injury research:

- Recently completed research on the increases in homicide rates among young black males (ages 15 to 24) indicated a disproportionate role of firearms in minority youth mortality. Ninety-six percent of the increases in homicides of young African American males between 1984 and 1988 were attributable to firearms. NCIPC is currently charged with coordinating the development of a framework for community-based efforts to prevent youth violence.
- Research documenting the dangers of all-terrain vehicles (ATV), particularly to children under 16, resulted in the voluntary removal from inventory of three-wheeled ATVs and the provision of training to new purchasers and their families. ATV manufacturers also agreed to discontinue marketing adult-sized vehicles to children under 16, to notify past purchasers of potential hazards, to affix safety labels and warning to the vehicles, and to post warning notices in dealerships.
- Childhood pedestrian injuries result from different causes depending on the age group of the child. For example, driveway injuries were common for very young children; 5-9 year olds were more likely to be injured from midblock dart-outs; and more 10-14 year olds were injured at intersections.
- An evaluation of CDC-funded project of a local bicycle helmet law in Howard County, Maryland, showed that legislation markedly increased helmet use by children (4 percent to 47 percent). CDC estimates universal use of bicycle helmets could annually prevent 500 deaths, over 10,000 hospitalizations, and more than 150,000 visits to the emergency room, and could save an estimated \$213 million annually.

d. National Center for Health Statistics

The National Center for Health Statistics (NCHS), authorized under section 306 of the Public Health Service Act, is the primary federal agency responsible for vital and health statistics. NCHS' data systems cover a full spectrum of concerns in the health field from birth to death, including overall health status, lifestyle and exposure to unhealthy influences, the onset and diagnosis of illness and disability, and the use of health care. NCHS is involved in a number of functions including data collection and analysis, data dissemination, research in statistical and survey methodology, and technical assistance in cooperative programs with State, national and international

organizations. NCHS also sponsors conferences and offers technical assistance to interested parties in the areas of health statistics development, and access or use of existing health-related data.

The Center has two major types of data systems: 1) systems based on populations, containing data collected through personal interviews or examinations; and 2) systems based on records, containing data collected from vital and medical records.

While the Center is primarily concerned with collecting data on the general population, several of the Center's main activities provide information on targeted population subgroups such as children, youth and families.

i. National Health Interview Survey. The National Health Interview Survey (NHIS) is a principal source of information on the health, illness and disability status of the general population. Each year, the survey consists of a basic set of questions on health, socio-economic, and demographic topics, as well as one or more special questionnaires on more detailed and issue-specific information. Recent questionnaires have focused on the following issues: health insurance; vitamin and /or mineral use; dental care; child adoption; child health; diabetes; illicit drug use and digestive disorders.

In 1992, NCHS conducted the NHIS/Youth Risk Behavior Supplemental (YRBS) as a follow-up to the 1992 NHIS. Youth aged 12-20, up to two per household, were randomly selected to participate in the survey, which included a comparison of out-of-school and in-school youth. The fieldwork for the YRBS was completed by the Census Bureau in early 1993. Data are expected to be available by mid-1994.

ii. Targeted Population Studies. Targeted Population Studies (TPS) were developed in 1984 to allow NCHS to obtain more health related information on targeted population groups within a longitudinal framework. Persons or families who participate in the National Health Interview Study are recontacted for TPS. The studies are conducted in collaboration with organizations outside of NCHS and are designed to meet current needs for national health data. During the 1989-90 school year, NCHS conducted the Teenage Attitudes and Practices Study, a national survey on adolescent tobacco use.

iii. National Health and Nutrition Examination Survey III. The National Health and Nutrition Examination Survey III assesses the health and nutritional status of the general population by collecting data through direct physical examinations, clinical and laboratory testing, and related procedures. Between 1988 and 1994, approximately 40,000 people representative of the U.S. population will be selected to participate in the study which will provide reliable estimates on a number of population subgroups, including minorities, the elderly and school-aged children.

iv. National Survey of Family Growth. The National Survey of Family Growth collected data on family planning practices and attitudes, factors influencing trends and differences in fertility, sexual activity and related aspects of maternal and child health. The study was conducted in cycles through household interviews with women of childbearing age. Cycles I and II, conducted in 1973 and 1976, were based on interviews with about 10,000 women, aged 15-44, who were or had been married; Cycles III and IV, conducted in 1982-83 and 1988 respectively, were representative of all women aged 15-44 regardless of marital status. The results have been published and are available from the Center.

v. National Maternal and Infant Health Survey. The National Maternal and Infant Health Survey (NMIHS) collects data needed to study factors related to poor pregnancy outcomes, including low birth weight, stillbirth, infant illness, and infant death. The study is based on questionnaires administered to a nationally representative sample of mothers with live births, stillbirths, and infant deaths, and to physicians, hospitals and other medical care providers associated with those outcomes.

In 1991, NCHS will conduct the NMIHS Longitudinal Follow-up to obtain additional information about respondents from the 1988 survey. The group of 8,000 women participants provided information on the sample child, including health; development; behavior; medical care; health insurance coverage; child care arrangements; maternal participation in WIC, and other maternal and household characteristics.

8. National Institutes of Health

Overview

Title IV of the Public Health Service Act authorizes a broad range of biomedical research activities that focus on the causes, prevention, diagnosis, treatment and rehabilitation of human diseases and disabilities. To carry out this research, the National Institutes of Health (NIH) is organized into Institutes, Centers, and Divisions. Currently sixteen institutes make up the National Institutes of Health (NIH), including the three research institutes that were transferred to NIH with the reorganization of ADAMHA in 1992. This report focuses predominantly on the three former ADAMHA institutes because their research concentrates on issues most likely to affect adolescents.

Institutes support extramural research through a number of funding mechanisms, including research grants, cooperative agreements and contracts. In addition, NIH operates intramural laboratories and clinical research facilities, and is involved with training and dissemination activities. NIH funds nearly 40 percent of all biomedical and behavioral research and development in the United States.

NIH's Division of Research Grants is the central receipt point for all assistance (grants and cooperative agreements) applications to NIH. The Division assigns each application to an initial review group for scientific merit review, and then on to an

Institute or Center for a second review and for possible funding. NIH grants are awarded through a variety of funding mechanisms.

i. Research. Most Institutes conduct research on the prevention, diagnosis, and treatment of diseases and conditions that affect all age groups, including adolescents. General research does not necessarily involve age-targeting, however in some cases, research focuses on the unique situations and conditions of certain age groups, like adolescents. Information on NIH's adolescent-targeted research was collected for the PHS Steering Committee on Adolescent Health and revealed a substantial body of research focusing on youth.

**NIH Appropriations by Institute
Fiscal Year 1992
(Dollars in Thousands)**

National Institute on Aging	383,611
National Institute of Allergy and Infectious Diseases	960,914
National Institute of Arthritis and Musculoskeletal and Skin Diseases	203,913
National Cancer Institute	1,951,541
National Institute of Child Health and Human Development	519,724
National Institute on Deafness and Other Communication Disorders	149,102
National Institute of Dental Research	159,240
National Institute of Diabetes and Digestive and Kidney Diseases	662,678
National Institute of Environmental Health Sciences	252,031
National Eye Institute	270,300
National Institute of General Medical Sciences	815,134
National Heart, Lung, and Blood Institute	1,191,500
National Institute of Neurological Disorders and Stroke	581,847
National Institute on Alcoholism and Alcohol Abuse	172,050
National Institute on Drug Abuse	399,736
National Institute of Mental Health	561,255

Out of a total Fiscal Year 1992 budget of \$8.9 billion, NIH spent approximately \$113 million on 487 extramural research projects that addressed issues relating to adolescence. An estimated twenty-five percent of those projects dealt with prevention research, while the remaining seventy-five percent were in the basic science arena. The basic science grants can be broken down further: 10 percent were studies of pubertal development; 10 percent dealt with other developmental issues; 20 percent

focused on cognitive development and mental problems; and about 20 percent addressed problem behaviors (i.e., smoking, drinking, sex, drug use). The remaining 40 percent covered a wide range of topics including asthma, dental problems, obesity and diabetes, cancer, hearing, hypertension, sickle cell disease and head injury. A large concentration of projects focused on HIV prevention—39 prevention projects focusing on AIDS, 39 dealing with drug use prevention, and 4 dealing with pregnancy prevention.

ii. Science Education. Promoting the study and understanding of the life sciences is a key component of NIH's mission. In the past, NIH has focused its education and training resources on graduate and post doctoral students. In response to the recent decline in the number of high school and college students concentrating on life sciences, however, NIH is increasingly targeting precollege youth for training and education activities. Science education and training activities are designed to interest youth, particularly minority or disadvantaged youth, in the life sciences, and encourage them to pursue careers in science fields. NIH offers a number fellowships, internships and employment opportunities, develops curricula and other classroom resources, provides lecturers and science mentors, supports research clinics for students and teachers, operates a speakers bureau and coordinates a network to connect scientists with students, teachers, and other members of the education community. In Fiscal Year 1993, NIH will spend more than \$40 million on science education and research training programs for minority high school and undergraduate students.

a. National Institute on Alcohol Abuse and Alcoholism

The National Institute on Alcohol Abuse and Alcoholism (NIAAA) was established in 1970 as the lead federal agency for research on the causes, consequences, treatment and prevention of alcohol-related problems. Approximately \$11 million out of NIAAA's overall Fiscal Year 1993 budget of \$177 million supports research that addresses the prevention of alcohol-related problems among youth. These studies include research on school-based interventions, prevention of drunk driving, the effects of alcohol policies on adolescents, relationships between alcohol and high risk sexual behaviors, the effects of advertising and media on youth attitudes and behaviors, treatment of adolescent alcohol abusers, and issues related to alcohol use by minority youth. In addition, NIAAA supports studies on the incidence, prevalence, occurrence, etiology, and consequences of alcohol use, abuse and dependence, encouraging research in special populations such as women, youth, the disabled, racial and ethnic subgroups, and children of alcoholics.

NIAAA is planning to publish a number of monographs on initiatives relating to youth. Papers from a conference held in 1991 on the development of alcohol problems in high risk youth are scheduled to be published in 1993. In addition, a 1992 working group on advertising and the mass media focused on many issues

related to alcohol use among youth, and intends to publish materials in an upcoming NIAAA monograph. NIAAA is also preparing materials on the prevention of alcohol related problems among adolescents for publication in a special issue of the *Journal of Research on Adolescence*.

i. Research on the Prevention of Alcohol Abuse Among Youth. In 1992, NIAAA reissued this program announcement to encourage investigator-initiated research on prevention and intervention strategies that target adolescent alcohol abuse. Priorities identified for research include: studies on the development of youth attitudes and behaviors toward alcohol; studies on the drinking behavior of subgroups and various indicators of risk; studies that examine the link between social settings and the influence of peers, families, educational institutions, and community organizations; research that tests innovative prevention strategies; and studies to improve existing approaches.

ii. Children of Alcoholics. The Treatment Research Branch supports studies that investigate the risk factors for alcoholism and other problems in children of alcoholics.

b. National Institute on Drug Abuse

The National Institute on Drug Abuse (NIDA) is responsible for coordinating federal research activities in drug abuse, dependency and addiction research. To fulfill its role, NIDA conducts intramural research and supports extramural research through grants, contracts and cooperative agreements. Much of NIDA's focus is on the prevalence, incidence, causes, effects, prevention, and treatment of teenage drug abuse and many recent NIDA initiatives address the link between adolescent drug abuse and AIDS. NIDA also is involved in science education activities designed to educate the population, especially young people, about the dangers of drug use. The Fiscal Year 1992 budget included \$405 million for NIDA.

i. Prevention Research. The Prevention Research Branch promotes scientific study of individual and multiple component substance abuse prevention strategies focused on schools, families, peer/friendships networks, the workplace, and communities, to determine their efficacy in preventing drug use and abuse. The Branch currently funds research studies under three research program announcements.

School-Based Prevention Intervention Research. NIDA offers grants for studying school-based drug abuse prevention strategies. Grants are awarded for innovative research that develops school-based programs, and evaluation projects that test existing programs. In Fiscal Year 1990, approximately \$1.5 million, made available from general drug abuse research funds, supported five grants.

Comprehensive Prevention Research in Drug Abuse. This program offers funding assistance for research on multiple component prevention intervention programs, with special attention given to those studies that target high risk populations. While no specific age group is targeted for this research program, NIDA encourages grant applicants to focus initially on pre-adolescents through early adulthood. In Fiscal Year 1990, approximately \$1.5 million was available from general drug abuse prevention funds to support 3 research grants.

Drug Abuse Prevention Research Centers. In Fiscal Year 1991, NIDA announced the availability of funds to support multidisciplinary drug abuse research centers to test a variety of drug abuse prevention strategies. One main priority for the centers is the development of methods to identify children and adolescents at high risk for drug abuse, and to design preventive interventions for them. Another priority is to establish Minority Drug Abuse Prevention Centers to address a variety of issues relating to specific cultural and ethnic factors. In Fiscal Year 1992, three grants were awarded. Initial Center awards are limited to \$600,000 for the first year, and up to \$750,000 for each subsequent year for up to five years.

Etiological Research. Etiological research seeks to identify those biological, genetic, psychosocial, and environmental factors, or causes, that place individuals, families, or communities at risk for drug abuse and dependency. Previous studies on the causes of drug abuse have focused, in large part, on drug use among white, middle-class youth. In 1991, NIDA encouraged grant applicants to focus on sub-populations, including members of ethnic minority groups, dropouts, and institutionalized youth. Funds for this program are made available from general funds appropriated for drug abuse research. In Fiscal Year 1992, approximately \$2.0 million was available to support 8 grants.

ii. Incidence and Prevalence

High School Senior Drug Abuse Survey. NIDA's High School Senior Drug Abuse Survey (Monitoring the Future), first conducted in 1975, is an annual survey on drug use and related attitudes of American high school seniors. The surveys are conducted through an ongoing national research and reporting program entitled "Monitoring the Future: A Continuing Study of the Lifestyles and Values of Youth." The survey excludes dropouts or absentees on the day of the survey, so estimates of drug abuse in the senior class group may be conservative. However, the stability of the survey provides excellent data for monitoring changes in attitudes about drugs.

Each year, former survey participants, one to ten years after high school, are surveyed by mail. In 1991, for the first time, a representative sample of eighth and tenth grade students in public and private schools also were surveyed. Funded by NIDA, the research is conducted by the University of Michigan's Institute for Social Research. NIDA's annual support of the Monitoring the Future program is approximately \$3 million.

National Household Survey on Drug Abuse. The National Household Survey on Drug Abuse, conducted in 1991, is the eleventh study in a series of national surveys to measure the prevalence of drug use among the American household population aged 12 and over. The last nine household surveys have been sponsored by NIDA, with additional support in 1985 and 1988 from the National Institute on Alcohol Abuse and Alcoholism, and support in 1988 from the Department of Education. For the 1991 survey, adequate sample sizes ensured data for four age groups (12-17, 18-25, 26-34, and 35+) and three race/ethnicity groups.

iii. Assessment and Treatment

Adolescent Assessment/Referral System. The Adolescent Assessment and Referral System (AARS) was designed to address the difficulties encountered in obtaining the most beneficial help for youth with drug problems. AARS provides an effective method for gathering information and planning therapeutic and/or rehabilitative activities for adolescents ages 12 through 19. AARS incorporates the three basic steps in the assessment-referral process: 1) the problem screening instrument for teenagers (POSIT); 2) the comprehensive assessment battery (CAB); and, 3) the directory of adolescent services. AARS recognizes that there are many high risk problems related to drug abuse. Accordingly, the POSIT screens for the following ten problem areas: substance abuse; physical health; mental health; family relations; peer relations; educational status; vocational status; social skills; leisure and recreation; aggressive behavior and delinquency.

Drug Abuse Treatment Outcome Study for Adolescents. The Drug Abuse Treatment Outcome Study for Adolescents seeks to determine the efficacy of treatment strategies on youth, as well as the role of families, peers, and the educational system in that treatment.

National Drug and Alcoholism Treatment Unit Survey. A collaborative effort of NIDA and the National Institute on Alcohol Abuse and Alcoholism, the National Drug and Alcoholism Treatment Unit Survey provides information on the location and scope of drug abuse and alcoholism treatment and prevention facilities throughout the United States. Results are used to help States identify unmet needs in programs for specific populations such as youth. The survey, which includes both public and private programs, describes type and scope of services, sources of funding, and information on staffing. Findings are published annually.

iv. NIDA's Science Education

NIDA's Science Education program provides educators with tools they can use to interest students in science, using information about drug use as the subject matter. The program has supported several projects to improve science literacy and increase awareness about the dangers of drug use. In 1992, an eighth grade class from Silver Spring, Maryland, produced a video, "If You Change Your Mind," for NIDA. Geared toward other middle school students, the video teaches students how drugs

change the way the brain functions. In addition, NIDA recently completed the development of curriculum materials, consisting of a teacher's guide and student magazine, to accompany the video. NIDA also has been involved in producing a Children's Television Workshop on the impact of drugs on the brain.

Science Education Partnership Award. NIDA offers grants to encourage scientists to work with educators and community organizations to improve public understanding of science and to interest young people in careers in science. Current grants focus on improving adult science literacy through linkages between scientists and communities. In Fiscal Year 1991, the program's first year, \$2 million was allocated for science education activities. No new funding was available in Fiscal Year 1992.

National Media Campaign. In July 1990, NIDA, working with the Media-Advertising Partnership for a Drug Free America, launched a mass media campaign aimed at preventing drug abuse and AIDS among teenagers. The campaign consists of television, radio, and print public service announcements, and a 60-second spot intended for use in movie houses, that focus on convincing 12- 16-year olds that drug abuse can lead to AIDS. The ads' message suggests that using drugs will impair judgment and lead to behavior that places individuals at risk of AIDS. In developing the campaign, NIDA used research findings that show that many teens who use drugs are also sexually active, and that minority populations are disproportionately represented in the number of reported AIDS cases. In Fiscal Year 1990, \$1 million was allocated for the media campaign, 95 percent of which focused on youth.

c. National Institute of Mental Health

Over 7.5 million young Americans, representing more than 12 percent of children and adolescents in this country, suffer from mental disorders.¹⁸

The National Institute of Mental Health (NIMH) supports and conducts research to improve mental illness diagnosis, treatment, and prevention. NIMH studies focus on the causes, occurrence, and treatment of distinct mental disorders, as well as the provision of mental health services, mental illness and the homeless, and the mental health aspects of AIDS. There are three research divisions within NIMH — the Division of Basic Brain and Behavioral Sciences, the Division of Clinical Research, and the Division of Applied and Services Research. Each houses several research branches that focus on specific areas of mental health research.

A significant portion of NIMH research focuses on children and adolescents. In Fiscal Year 1990, \$92.3 million out of NIMH's overall budget of approximately \$520 million supported research and capacity-building activities related to child and adolescent mental disorders. In Fiscal Year 1991, NIMH adapted the National Plan for Research on Children and Adolescent Mental Health Disorders, making child and adolescent mental health an Institute-wide priority. In Fiscal Year 1993, appropriations for NIMH totaled approximately \$585 million.

i. Clinical Research

The Division of Clinical Research supports research on distinct mental disorders. Support is provided in eight branches—the Mental Disorders of the Aging Research Branch, the Mood, Anxiety and Personality Disorders Research Branch, the Child and Adolescent Disorders Research Branch, the Epidemiology and Psychopathology Research Branch, the Prevention Research Branch, the Schizophrenia Research Branch, the Education and Training Branch, and the Treatment Branch.

Child and Adolescent Disorders Research Branch

The Child and Adolescent Research Branch (CARB) supports research in the phenomenology, etiology, genetics, diagnosis, classification, longitudinal course, outcome, treatment, and rehabilitation of mental disorders and clinical problems, including suicide, of children and adolescents through 18 years of age. CARB also serves as the focal point for child and adolescent mental health research in NIMH.

National Plan for Research on Children and Adolescent Mental Health Disorders. In 1988, the Institute of Medicine (IOM) of the National Academy of Sciences, at the request of NIMH, conducted a thorough review of the child and adolescent mental health research field. In 1989, Congress requested that NIMH develop a national plan to implement the recommendations set out in IOM's report, *Research on Children and Adolescents with Mental, Behavioral, and Developmental Disorders*.

The *National Plan for Research on Children and Adolescent Mental Disorders*, prepared by the National Advisory Mental Health Council with support from NIMH, proposed a five-year strategy to accelerate progress in understanding child and adolescent mental disorders. The plan emphasized a two-pronged approach to address critical research needs, and build the nation's research capacity by increasing the supply of well-trained researchers. To meet these goals, the plan recommended increasing the total level of NIMH support for research related to child and adolescent mental health from \$92.3 million in Fiscal Year 1990, to \$283 million in Fiscal Year 95.

Child and Adolescent Mental Health Research Consortium. To coordinate child and adolescent research across the Institute, and to monitor NIMH progress in meeting the Plan's objectives, NIMH established the Child and Adolescent Mental Health Research Consortium, lead by the Child and Adolescent Research Branch. The Consortium currently focuses on the following areas: ethical issues in research; development of new investigators; forming interdisciplinary links; developing a consortia of journal editors to promote publication of research; and developing new program announcements.

The Consortium has helped NIHM create the following programs to address the goals established in the National Plan:

Implementation of the National Plan for Research on Child and Adolescent Mental Disorders. In April 1991, NIMH solicited grant proposals under the Implementation of the National Plan for Research on Child and Adolescent Mental Disorders. The announcement was intended to increase field-initiated research on issues relating to child and adolescent mental disorders. NIMH particularly encouraged studies in developmental considerations, dimensions of disorders, causes and determinants, interventions, mental health services, and research on special populations, including minorities. NIMH supports the research grants through four types of extramural grant programs: regular research grants; small grants; program project grants; and FIRST awards.

In addition, NIMH offered capacity-building grant opportunities through the following six funding mechanisms: centers; institutional research training grants; individual fellowships; research career awards; academic awards; and training and career development grants for minority students and faculty.

Centers for Research on Mental Health Services for Children and Adolescents. NIMH provides funding for Research Centers on Mental Health Services for Children and Adolescents to develop multidisciplinary research that can help to improve the organization, financing, delivery, effectiveness, and outcomes of mental health services for children and adolescents. Centers must be planned and organized to address major gaps and needs in the field of child and adolescent mental health services research. In Fiscal Year 1992, approximately \$1 million was available to fund three centers.

Research Demonstration Projects. Since Fiscal Year 1991, NIMH has supported field-initiated research demonstration projects designed to improve the delivery of mental health services to children and adolescents with or at risk for serious emotional or mental disorders. Projects are intended to test particular approaches to providing, organizing, and/or funding services through experimental studies of service interventions. NIMH emphasizes the importance of developing systems that follow the CASSP (Child and Adolescent Service System Program) principles of multi-agency, community-based, child and family-centered care. NIMH also encourages research that examines the characteristics of, and methods of serving, youth at risk for severe emotional disturbance.

Epidemiology and Psychopathology Research. The Child and Youth Epidemiology Program of the Epidemiology and Psychopathology Research Branch supports research on the prevalence and incidence of children's mental health disorders, risk factors associated with psychiatric disorders in children, the longitudinal development and variability of symptoms in youth, and the development of assessment techniques and diagnostic instruments suitable for large-scale surveys of children's mental health.

Prevention Research. The prevention Research branch supports research on the prevention of mental disorders and behavioral dysfunctions, and on the promotion of mental health. In Fiscal Year 1992, the branch supported 70 grants focusing on the following priority areas: the prevention of socio-emotional problems among infants and young children at risk; the prevention of conduct and other behavioral disorder in school-age children, the prevention of anxiety and depressive disorders in children and adults; the prevention of suicide; the promotion of mental health through the enhancement of protective factors, including coping mechanisms; and the prevention of affective and anxiety disorders in HIV-infected individuals, people at high-risk for infection and their families.

Basic Brain and Behavioral Science

The Division of Basic Brain and Behavioral Sciences (DBBBS) supports behavioral, biomedical, and neuroscience research to expand fundamental knowledge that can ultimately advance the diagnosis, treatment, and prevention of mental illness. There are seven branches within DBBBS, including the following:

Basic Prevention and Behavioral Medicine Research. The Basic Prevention and Behavioral Medicine Research Branch supports research on the basic, behavioral, biological, genetic, and social factors and psychological processes that have an impact on physical health and the maintenance of emotional well-being. The Branch includes three program areas: Behavioral Medicine; Populations at Risk; and Prevention and Behavior Change. These programs encompass a wide range of health-related studies on the biological, psychological and psychosocial aspects of stress, immunology, sleep, nutrition, sexual behavior, medical illness, exercise, and health-related attitudes and practices in children and adolescents.

Personality and Social Processes Research. The Personality and Social Processes Research Branch supports basic research on personality, emotional, and social processes that account for normal behavioral functioning and adaptation. This includes significant research on adolescents — the developmental changes and continuities from infancy through adulthood, their interpersonal and family relationships, the characteristics and skills related to their emotional and behavioral development, and the environmental and genetic factors that influence their personality and behavior. The Branch currently is funding over 130 research grants.

Basic Behavioral and Cognitive Sciences Research. The Basic Behavioral and Cognitive Sciences Research Branch provides support for research on child and adolescent cognitive processes using human, animal, and computational models, and on fundamental individual and social behaviors that relate to survival and adaptation of the organism and species.

Applied and Services Research

The Division of Applied and Services Research supports research and research training on the delivery of mental health services, and on mental health issues related to victims of traumatic stress, (including family violence and sexual assault), and on mental health services for minority populations. The Division consists of the Services Research Branch, the Violence and Traumatic Stress Research Branch, the Child and Family Support Branch, and the System Development and Community Support Branch.

Services Research. The Services Research Branch is NIMH's focal point for support of investigator-initiated research on mental health services and mental health service systems for children and youth. The Branch funds research on services provided in a variety of settings, including clinical, institutional, and specialty mental health facilities. During Fiscal Year 1990, the Services Research Branch funded approximately \$5 million in child and adolescent research. The Branch currently is funding about 25 projects, several of which look at service coordination, the effectiveness of different service systems, and services for special populations, including rural youth, adopted youth, minority youth, and Native American youth. In addition, the Branch developed a funding announcement for research on the effectiveness of hospitalization of adolescents for mental disorders in 1991 in response to the National Plan for Research on Child and Adolescent Mental Disorders.

Violence and Traumatic Stress Research. The Violence and Traumatic Stress Research Branch supports research on 1) the etiology, course, correlates, and mental health consequences of violent and antisocial behavior in children and adolescents, as well as preventive and therapeutic interventions for such behavior; 2) the mental health consequences of victimization of children and adolescent victims of violence, sexual assault and abuse, and natural and manmade disasters, as well as the prevention and treatment of such consequences; and 3) mental health issues relating to children and adolescents and the law, such as child witnesses in abuse proceedings, and mental health treatment of detained youth.

Child and Family Support. The Child and Family Support Branch supports investigator-initiated research demonstration programs of State and local-level service systems that test the effectiveness of innovative models for organizing, delivering and financing mental health service for children and adolescents with or at risk for serious mental and emotional disorders and their families. Prior to the transfer of NIMH to NIH, the branch was involved in developing the Child and Adolescent Services System Program, administered by SAMHSA's National Center for Mental Health Services.

iv. Intramural Research

NIMH's Child Psychiatry Branch conducts research on the biological aspects of child psychiatry. Research is organized into four broad areas: 1) brain imaging studies of developmental disabilities (i.e., dyslexia, autism); 2) studies of obsessive compulsive disorder and related disorders (i.e., hair pulling, stuttering); 3) studies on aggressive and hyperactive children; and 4) a new study of children age 8-16 years with schizophrenia.

d. The National Institute of Allergy and Infectious Disease

There are over ten million people with asthma in the United States, one third of whom are under the age of 18.

63 percent of all cases of Sexually Transmitted Diseases (STD) occur in persons under age 25.

The National Institute of Allergy and Infectious Disease (NIAID) conducts and supports research to further a better understanding of the causes of allergic, immunologic and infectious diseases, and to develop better methods of preventing, diagnosing and treating these illnesses. The NIAID's scientific programs are organized into three major divisions: allergy, immunology, and transplantation; microbiology and infectious diseases; and the Acquired Immunodeficiency Syndrome (AIDS). The Fiscal Year 1993 budget included \$983 million for NIAID.

Due to the significant proportions of youth afflicted with allergic, immunologic and infectious diseases, NIAID research agenda necessarily includes studies targeting adolescent populations. For example, NIAID recently initiated research on the immune system designed to reduce the severity and/or incidence of asthma in urban minority children and adolescents. In addition, NIAID's research on Sexually Transmitted Diseases (STD) includes studies that examine the behavioral and biological factors that put adolescents at high risk for STDs.

e. National Institute of Arthritis and Musculoskeletal and Skin Diseases

The National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS) has primary responsibility at NIH for a wide range of fundamental and clinical research on the normal structure and functions of bones, muscles and skin, as well as the diseases involving those tissues. NIAMS supports research on those diseases that afflict youth, including juvenile arthritis and a variety of common skin disorders. In Fiscal Year 1993, total funding for NIAMS was approximately \$212 million.

f. The National Cancer Institute

The National Cancer Institute (NCI) is the federal government's principal agency for cancer research and control. NCI coordinates cancer research programs, including NCI programs, and related federal and non-federal programs. Over 75 percent of NCI's budget supports extramural research projects in numerous research fields. The remaining funds support intramural research, collaborative initiatives, and cancer control projects. NCI's Smoking, Tobacco, and Cancer Program (STCP) supports prevention and control initiatives to reduce the number of deaths caused by smoking through four components: 1) basic research; 2) intervention research; 3) research applications and information dissemination; and 4) surveillance. Many STCP's initiatives target specific populations including adolescents and minorities. NCI also supports the Cancer Information Service, a clearinghouse for publications and materials. NCI's total appropriation for Fiscal Year 1993 was approximately \$2 billion.

g. National Institute of Child Health and Human Development

The National Institute of Child Health and Human Development (NICHD) conducts and supports research and research training on biological and behavioral human development from conception to maturity. The Institute recognizes three primary goals:

- assuring the birth of healthy babies through research on nutrition, normal and abnormal fetal development, and problems in pregnancy;
- assuring the birth of wanted babies through studies on human fertility and infertility, contraceptive development and safety, and the reduction of unintended and unwanted pregnancies for women of all ages, particularly among adolescents; and
- providing the opportunity for productive and healthy adulthood through research to prevent problems in childhood and adolescence, including smoking, obesity, biological and environmentally-induced mental retardation, and learning disorders that contribute to adult disease and disability, as well as rehabilitation for children and adults with disability due to birth defect, disease or injury.

Since adolescence is a time of great physical change, NICHD studies linkages between the biological and behavioral aspects of adolescence. The Institute supports at least thirty research projects that deal with aspects of adolescent development and behavior.

i. Center for Population Research. A substantial proportion of the research funded in this Center focuses on the determinants and consequences of adolescent fertility. The interaction of physiological, psychological, familial, and societal influences on young people's sexual and reproductive health, and the impact of parental communication on adolescent sexual behavior currently are being studied. A series of cooperative agreements, managed by NICHD but funded through the Office of Research on Minority Health, is developing, implementing, and evaluating interventions designed to lower the high rates of morbidity and mortality related to violence, STDs, and unintended pregnancy. Another small project is examining the impact of previously funded research on adolescent behavior by looking at birth rates in schools with and without programs.

ii. Center for Research for Mothers and Children. Research is funded on the special treatment needs of HIV-infected adolescents. At least nine projects are funded to study aspects of the cognitive and intellectual development of young people. In addition, the Center funds work on the identification of factors influencing development throughout life, and contributes to the prevention and treatment of mental retardation, developmental disabilities, and adolescent problems.

Total funding for NICHD in Fiscal Year 1993 was approximately \$530 million.

h. National Institute on Deafness and Other Communication Disorders

The National Institute on Deafness and Other Communication Disorders (NIDCD) was established in 1988 to conduct and support research and research training on normal mechanisms and disorders of hearing, balance, smell, taste, voice, speech and language. The Institute currently is funding a number of studies that focus on adolescents. For example, a recently issued program announcement is designed to encourage research on tools and procedures for assessing language impairment in minority youth. NIDCD also will conduct a public awareness initiative to educate the public on noise-induced hearing loss in youth. \$155 million was appropriated for NIDCD in Fiscal Year 1993.

i. National Institute of Dental Research

The National Institute of Dental Research (NIDR) was established in 1984 to conduct and foster research on the causes, diagnoses, and treatment of dental and oral diseases and conditions. NIDR funds a number of research projects that focus on adolescent behaviors that affect oral health, like diet and nutrition, tobacco (especially smokeless

tobacco) and alcohol use. The Institute also supports research on the oral health of school children, and on ways to promote periodontal health through oral hygiene. In Fiscal Year 1993, \$161 million was appropriated for NIDR.

j. National Institute of Diabetes and Digestive and Kidney Disease

The median age of people with cystic fibrosis is 12.6, the median survival time of cystic fibrosis patients is 28 years.

The National Institute of Diabetes and Digestive and Kidney Disease (NIDDK) supports research focused on a number of diseases characterized by chronicity and long-term disabling effects. The Institute supports research on the causes and treatment of sickle cell disease, cystic fibrosis, and certain types of diabetes which may disproportionately affect young people. NIDDK also is funding research on aspects of adolescent obesity, which can contribute to several chronic diseases and disorders, including diabetes and cardiovascular disease. \$683 million was appropriated for NIDDK in Fiscal Year 1993.

k. National Eye Institute

The National Eye Institute (NEI) is responsible for conducting and supporting basic and applied research and related activities concerned with blinding eye diseases, visual disorders, mechanisms of visual function, preservation of sight, and special health problems and requirements of the blind. The Fiscal Year 1993 appropriations for NEI was \$276 million.

l. National Heart, Lung, and Blood Institute

The National Heart, Lung, and Blood Institute (NHLBI) conducts and supports research relating to the causes, prevention, diagnosis, and treatment of heart, blood vessel, lung, and blood diseases. Several NHLBI-supported studies focus on children and youth. Research currently underway include: a study to assess the efficacy and safety of a low fat/low cholesterol diet on children and youth with cholesterol problems; a longitudinal study of the development of obesity and its relation to other coronary heart disease risk factors; a study to determine the optimal therapy for children with asthma; and, a research project to develop interventions for control of asthma among minority children. The Fiscal Year 1993 appropriations for NHLBI was \$1.2 billion.

m. National Institute of Neurological Disorders and Stroke

The National Institute of Neurological Disorders and Stroke (NINDS) supports research on almost 700 neurological disorders, many of which are associated with adolescence. Adolescents ages 15 through 19 are at high risk for head and spinal cord injuries resulting from automobile accidents, violence, and athletic accidents. NINDS supports research to reduce the mortality and morbidity associated with both

head and spinal cord injuries. Other NINDS research focuses many neurological disorders, including epilepsy, cerebral palsy, and learning disabilities, which occur primarily in youth. The Fiscal Year 1993 appropriations for NINDS was \$600 million.

n. National Institute of Nursing Research

Through the health promotion/disease prevention extramural program, the National Institute of Nursing Research (NINR) supports health promotion research focused on nursing approaches to improve general health and health care, including ways to promote wellness and to decrease the vulnerability of individuals and families to illness and disability. Health promotion for older children and adolescents (age 8-18) was identified as a research priority in the National Nursing Research Agenda. A Priority Expert Panel was convened to address the state of the science in health promotion of older children and adolescents and the needs, opportunities, and recommendations for research in this area over the next 5 years.

Research is currently supported on topics including the following areas related to health promotion for older children and adolescents: health behaviors and outcomes during pregnancy, health-compromising behaviors among young adolescents, nursing concerns regarding characteristics of successful dieters, factors influencing health-promoting behaviors, smoking and health behavior, and factors affecting bereavement and the care of older persons. NINR research support for disease prevention addresses particular diseases or disabilities such as hypertension and cardiovascular disease.

Minority health and rural health are two specific areas that NINR is highlighting. By reaching out to minority and rural youth populations who may be particularly vulnerable to disease and disability because of specific health needs or lack of access to care, the NINR aims to affect positively the health of a broader segment of the American population. In community-based projects addressing the needs of African Americans and Hispanic Americans, NINR is developing a better understanding of the cultural concepts surrounding "health" which will enable health care workers to provide more effective services.

In Fiscal Year 1992, NINR announced its participation in an NIH-wide initiative focusing on the development and evaluation of interventions in minority youth health behavior. Research supported under this initiative will examine the social, economic, and behavioral contexts of the health behavior exhibited by minority youth. The topics studied through cooperative, community-based programs include strategies for decreasing violence-related injuries and deaths, sexually transmitted diseases, unintended pregnancies, inadequate nutrition, substance abuse, and communication disorders. In collaboration with other PHS components, NINR researchers are also

developing and testing community-based models to increase access to health care in rural areas. These studies include approaches to reduce risks for cardiovascular disease in rural school children.

F. Health Care Financing Administration

The Health Care Financing Administration (HCFA) administers the Medicaid and Medicare programs.

1. Medicaid

Authorized under Title XIX of the Social Security Act, Medicaid is a federal-State matching program that provides medical assistance to eligible low-income individuals who are aged, blind, disabled, or members of families with dependent children. States must also cover low-income pregnant women and children up to the age of 19 years. HCFA administers the program at the federal level, but each State designs and administers its own program within broad federal guidelines. As a result, services provided and persons covered often vary substantially from State to State.

Eligibility. Traditionally, eligibility for Medicaid has depended on eligibility for or receipt of Aid to Families with Dependent Children (AFDC), and Supplemental Security Income (SSI). Since 1988, however, States have had the option of extending medicaid benefits to other low-income groups.

- **Categorically Needy.** States are required by law to cover the "categorically needy," those persons receiving AFDC, and in most States, SSI. In addition, federal laws require States to cover a number of other groups as categorically needy, including: persons whose income and resources are below AFDC standards but who fail to qualify for AFDC for other reasons, including family structure; families who lose AFDC as a result of increased income from employment or increased child support or spousal support payments; pregnant women and children up to age 6 with incomes below 133 percent of the federal poverty level; and all children born after September 30, 1983 who are in low-income families. Coverage for these children will be phased in so that all poor children under age 19 will be covered by the year 2002. States also have the option to treat a variety of groups as categorically needy for medicaid purposes. These groups include children in families with incomes below AFDC standards who are under the maximum age set by the State, but whom the State is not otherwise obligated to cover; and disabled children who are not in institutions but who would be eligible if they were in institutions.

- **Medically Needy.** Many States provide Medicaid to persons considered "medically needy." These are persons whose income or resources disqualify them for welfare, but who meet a separate medically needy financial standard set by the State and also meet a non-financial standard (i.e., age or disability) for medicaid eligibility.
- **Target Populations.** The Omnibus Budget Reconciliation Act of 1986 permitted States to extend medicaid coverage to certain "target populations," using eligibility standards that are not directly linked to AFDC and SSI benefits. Legislation in 1987 and 1988 expanded certain State options and converted others to mandates.

Coverage. Generally, persons defined as categorically needy are eligible for a broader range of services than persons defined as medically needy. Medicaid assistance for the categorically needy covers the costs of necessary medical, rehabilitation, and other medical services including: inpatient and outpatient hospital services; prenatal care; laboratory and X-ray services; nursing facility and home health services; family planning services and supplies. For eligible recipients under age 21 years, States are also required to provide early and periodic screening, diagnosis, and treatment (EPSDT) services. States are required to cover the costs of all medically necessary health care treatment for conditions identified through EPSDT, even if the State would not otherwise pay for the service.

Recipients. According to federal estimates, 24.2 million people received medicaid benefits in 1990, representing 10 percent of the total US population and 18 percent of all children under the age of nineteen. Sixty-eight percent of medicaid recipients in 1990 were AFDC children and their families, while 29 percent were aged, blind or disabled. Federal figures also indicate that 27 percent of medicaid expenditures in 1990 were for AFDC children and adults, while 71 percent were for the aged, blind, and disabled.

Funding. In Fiscal Year 1993, approximately \$80 billion in federal funds and an additional \$60 billion in State funds will support Medicaid programs across the country. The federal share for medicaid depends on States' per capita incomes. In 1992, the federal government paid 80 percent of medicaid costs in the poorest State and 50 percent in the wealthiest State.

G. Social Security Administration

The Social Security Administration administers a number of cash benefit assistance programs, authorized under the Social Security Act, for workers and their dependents. In many cases, children and youth are eligible for the assistance.

1. Supplemental Security Income

Supplemental Security Income (SSI), authorized under Title XVI of the Social Security Act, was created to assure a minimum cash income to all aged blind, or disabled persons with few liquid assets. A child under age 18 who has an impairment of comparable severity to that of a qualifying adult is also considered for benefits. The federal government pays for a basic amount (floor) and States have the option of supplementing that basic guarantee.

Under Title XVI of the Social Security Act, persons 1) who are aged 65 or over, blind, or disabled; 2) whose counted income and resources (or, for the children whose family's income and resources) fall within limits set by federal law and regulations, and 3) who live in one of the 50 States, the District of Columbia, or the Northern Mariana Islands, are entitled to federal SSI benefits.

The income of the parents of a blind or disabled child under age 18 is considered in determining the eligibility and payment for the child. In addition, federal regulations include a portion of the value of a parent's resources in calculating the eligibility and payment for the child. The average monthly SSI benefit of a blind or disabled child in 1987 was \$327. The federal government increases benefits annually in January to reflect price inflation. In Fiscal Year 1988, 4.5 million people received SSI benefits, nearly 7 percent of whom were blind or disabled children. In Fiscal Year 1993, approximately \$20 billion is available to finance the federal share of SSI benefits.

2. Old Age and Survivors Insurance Program

The Old Age and Survivors Insurance Program (OASI) provides monthly cash benefits to retired or disabled workers and their dependents and survivors. Eligible dependents must be 1) under 18 years of age; 2) a full-time elementary or secondary student under age 19 years; or 3) a dependent disabled person over age 18 whose disability began before age 22. Children are paid directly or through a representative payee, such as a surviving parent, other relative, or guardian. The amount of the benefit is a percentage of the worker's basic benefit: 50 percent for the child of a retired or disabled worker; and 75 percent for the child of a deceased worker. Both are subject to family maximums. The average benefit per child in 1988 was an estimated \$272 per month. Benefits are increased in accordance with increases in the Consumer Price Index.

¹Children's Defense Fund, "The State of America's Children 1992."

²Ibid.

³Compendium of Federally Funded Programs Serving Minority Males, Submitted to the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services, by Macro International, Inc., June 1991.

⁴Compendium of Federally Funded Programs Serving Minority Males, Submitted to the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services, by Macro International, Inc., June 1991.

⁵Trends in Adolescent Pregnancy, Abortion, and Childbearing, Office of the Assistant Secretary for Health, Public Health Service, December 1990.

⁶Youth Fitness Fact Sheet, President's Council on Physical Fitness, December 1991.

⁷Report to Congress on Alcohol and Drug Abuse Prevention, Volume II, U.S. Department of Health and Human Services, 1991, page 8.

⁸National Plan for Research on Child and Adolescent Mental Disorders, A Report Requested by the United States Congress, Submitted by the National Advisory Mental Health Council, U.S. Department of Health and Human Services, 1990.

⁹National Plan for Research on Child and Adolescent Mental Disorders, A Report Requested by the United States Congress, Submitted by the National Advisory Mental Health Council, U.S. Department of Health and Human Services, 1990.

¹⁰Adolescent Health, Volume III: Crosscutting Issues in the Delivery of Health and Related Services, Office of Technology Assessment, U.S. Government Printing Office, June 1991, page 233.

¹¹Reaching Youth in High-Risk Situations: Three Approaches, HIV Education Case Studies, Number 5, The United States Conference of Mayors, September 1992, page 1.

¹²Reaching Youth in High-Risk Situations: Three Approaches, HIV Education Case Studies, Number 5, The United States Conference of Mayors, September 1992, page 6.

¹³"Age at first coitus: A marker for risky sexual behavior in women," J. Greenberg, SO Aral, L. Magder, Sexually Transmitted Diseases (accepted in final edit, in press), presented at a poster session at the Society for Behavioral Medicine Annual Meeting, Washington, 1991.

¹⁴"Selected Behaviors That Increase Risk for HIV Infection, Other Sexually Transmitted Diseases, and Unintended Pregnancy Among High School Students - United States, 1991," MMWR, Vol. 41, No. 50, December 18, 1992, page 949.

¹⁵"Selected Behaviors That Increase Risk for HIV Infection, Other Sexually Transmitted Diseases, and Unintended Pregnancy Among High School Students - United States, 1991," MMWR, Vol. 41, No. 50, December 18, 1992, page 949.

¹⁶"Don't Be A Butthead" materials, Office of Smoking and Health, National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Health Promotion, September 1992.

¹⁷Injury Control Program Summary, National Center for Injury Prevention and Control, Centers for Disease Control and Prevention, 1991.

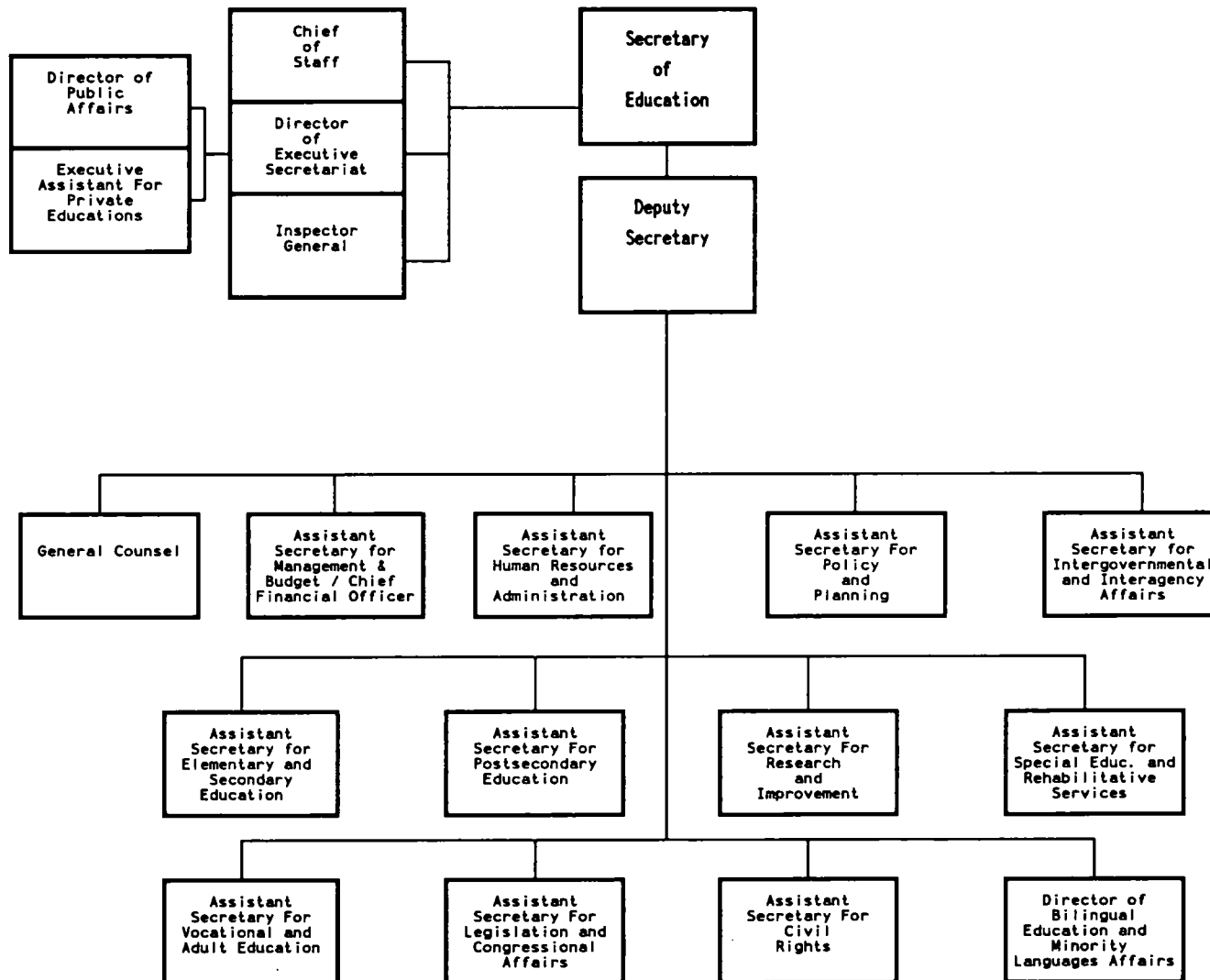
¹⁸National Plan for Research on Child and Adolescent Mental Disorders, A Report Requested by the United States Congress, Submitted by the National Advisory Mental Health Council, U.S. Department of Health and Human Services, 1990.

III. U.S. Department of Education

Overview

The U.S. Department of Education is responsible for administering federal funds for education programs; conducting research in education, enforcing federal anti-discrimination laws; and ensuring equal access to education for every individual. Created in 1867, it became a cabinet-level agency in 1980. The Department's budget in Fiscal Year 1993 was approximately \$30.4 billion.

A. Department of Education Organization Chart



B. Department of Education Program Overview

<u>Program</u>	<u>Services/Emphasis</u>	<u>FY 1993 Funding (in millions)</u>
Elementary and Secondary Education		
Chapter 1	Compensatory education for educationally disadvantaged children and youth.	\$6,700
Chapter 2	Improving quality of elementary and secondary education.	\$435.5
Homeless Children and Youth	Coordinating education services for homeless children and youth.	\$24.8
Eisenhower Math and Science Educ	Improving quality of instruction in math and science, especially for historically underrepresented groups.	\$246
Drug-Free Schools and Communities	Drug abuse education and prevention programs.	\$598
Dropout Prevention Demonstrations	Reducing number of children who dropout of school and encouraging to return-to-school.	\$37.5
Magnet School Assistance	Assisting magnet schools that are part of a desegregation plan.	\$108
Women's Educational Equity	Promoting educational equity for women and girls at all levels of education.	\$27
Christa McAuliffe Fellowship	Rewarding outstanding teachers.	\$28
General Assistance to the VI	Assisting elementary and secondary schools in the Virgin Islands.	\$4.5
Foreign Language Assistance	Chinese, Japanese, Korean, Arabic, Russian language instruction.	\$10.9
Education for Native Hawaiians	Educational needs of native Hawaiians.	\$6.4

<u>Program</u>	<u>Services/Emphasis</u>	<u>FY 1993 Funding (in millions)</u>
Indian Education Programs	Supplemental elementary and secondary school projects for Native Americans.	\$71.4
Migrant Education Programs	Children aged 3-21 of migratory agricultural workers or fishers.	\$303
Impact Aid Programs	Schools in areas where federal activity impacts on the availability of local financial resources.	\$750
Bilingual Education	Children with limited English proficiency.	\$225.7

Special Education and Rehabilitative Services

Special Education State Grants	Special education and related services for children 3-21 with disabilities.	\$2
Chapter 1	Handicapped ProgramSpecial education and early intervention services for children with disabilities.	\$126 ¹
Children with Deaf-Blindness	Special education & related services for children with deaf-blindness.	\$12.8
Children with Severe Disabilities	Special education & related services for children with severe disabilities.	\$9.3
Children with SED	Special ed. and related services for children w/ Serious Emotional Disturbance.	\$4.1
Secondary Education and Transitional Services for Youth with Disabilities	Transitional services for youth with disabilities.	\$21.9
Postsecondary Education Program	Postsecondary, vocational, and adult education for individuals w/disabilities.	\$8.8
Research in Education of Individuals with Disabilities	Research in education of individuals with disabilities.	\$21(FY92)

Program	Services/Emphasis	FY 1993 Funding (in millions)
Special Studies	Evaluating impact of IDEA on children and youth with disabilities.	
Captioned Films & Educational Media	Educational advancement of deaf, hard-of-hearing, visually impaired people.	\$17.8
Technology & Educational Media	Technology & educational media materials for children & youth w/disabilities.	\$10.8
Resource Centers	Technical assistance on special education services.	\$7.2
Training Personnel	Training special education personnel.	\$90
Parent Training	Training for parents of children and youth with disabilities.	\$12.4
Minority Outreach Centers	Increasing special ed capacity of institutions w/ 25% minority enrollment.	\$2.4
National Longitudinal Transition Study	Information on transition of youth with disabilities from secondary school to early adulthood.	\$6 ²
Vocational Rehab State Grants	Preparing individuals with disabilities for employment.	\$1,900
Supported Employment State Grants	Employment training, post-placement services for persons w/severe disabilities.	\$32.3
Client Assistance Program	Informing individuals with disabilities of benefits available under IDEA.	\$9.3
Special Demonstration Programs	Improving vocational and rehabilitation services for individuals w/disabilities.	\$20
Supported Employment Projects	Developing supportive employment services for individuals w/disabilities.	\$10.6
Special Recreation Programs	Recreational programs that facilitate employment, mobility, independence.	\$2.6

Program	Services/Emphasis	FY 1993 Funding (in millions)
Projects with Industry	Public/private partnerships to support employment for individuals w/disabilities.	\$21.6
Helen Keller National Center for Deaf-Blind Youth and Adults	Specialized rehabilitation services for deaf-blind individuals.	\$6.6
Independent Living	Independent living services for individuals with disabilities.	\$56.2
Migratory Workers	Vocational rehabilitation services for migratory workers with disabilities.	\$1.2
Training	Training for rehabilitation services personnel.	\$39.6
Nat'l Inst. Disability & Rehab Rsrch	Rehabilitation research.	\$67.2

Educational Research and Improvement

Fund for Improvement and Reform of Schools and Teaching	School-based reform and innovations in elementary and secondary education.	\$9.1
Secretary's Fund for Innovation in Educ.	Identifying innovative approaches in elementary and secondary education.	\$24(FY92)
Eisenhower National Program for Math and Science Education	Improving quality of instruction of math and science in elem/secondary schools.	\$15.9
Eisenhower Regional Consortium	Regional math and science educational consortiums.	\$13.6
Educational Research and Dev. Centers	Long-term research and development in areas of national concern.	—

Program	Services/Emphasis	FY 1993 Funding (in millions)
Field Initiated Studies	Research to advance educational theory and practice.	—
Fellows Program	Fellowships for individuals to conduct research in education.	—
Evaluation of Education Reform	Improving education by identifying replicable exemplary models.	—
Jacob K. Javits Gifted and Talented	Demonstrations to meet special education needs of gifted & talented students.	\$9.6
National Diffusion Network	Identifying and implementing exemplary programs and practices.	\$14.6
Blue Ribbon Schools	Recognizing outstanding elementary and secondary schools.	\$1
Star Schools Program	Improving instruction in math, science, foreign language, literacy, vocational ed.	\$22.7
Educational Partnerships Program	Partnerships of school districts, universities, museums, nonprofits, community organizations, parent groups, business and other.	\$4.1
Regional Educational Laboratories	Regional school improvement.	—
Education Statistics	Elementary, secondary, and postsecondary education statistics.	—
Educational Assessments	Assessment and analysis of national education outcomes.	—
National Longitudinal Studies	Survey data on the transition from high school to postsecondary ed/employment.	—
Library Program	Improving nation's libraries and library education.	\$147.7

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65.5
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Program	Services/Emphasis	FY 1993 Funding (in millions)
Vocational and Adult Education		
Basic Grants	Vocational education programs at secondary and postsecondary levels.	\$973
Community-based Organizations	Vocational education services for youth 16-21 not served by regular vocational education programs.	\$11.8
Consumer and Homemaking Education	Consumer education services that prepare youth and adults for homemaking.	\$34.7
Tech-Prep Education	Consortia of local education agencies and postsecondary education institutions that provide 4-year programs of starting in high school and continuing with two years of postsecondary study or apprenticeship.	\$104.1
Tribally-Controlled Postsecondary Vocational Institutions	Education and training for Native American students.	\$2.9
Research	Research on vocational education programs for special populations.	\$9.7
Bilingual Vocational Training	Voc education and training for individuals w/ limited English proficiency.	\$2.9
Adult Education Basic Grants	Educational opportunities for adults over 16 who are out of school.	\$255
Adult Education National Programs	Research and demonstrations to improve adult basic and secondary education.	\$9.6
Workplace Literacy Partnerships	Job-related literacy training.	\$18.9
State Literacy Resource Centers	Network of 43 centers to coordinate literacy services.	\$7.9
Literacy Programs for Prisoners	Literacy programs for incarcerated persons.	\$4.9

Program	Services/Emphasis	FY 1993 Funding (in millions)
Postsecondary Education		
Federal Trio Programs	Outreach and support services for students from disadvantaged backgrounds.	\$398.5
Student Support Services	Support services for disadvantaged college students.	\$132
Upward Bound	Support and motivational services for high school students.	\$157.3
 Talent Search	Counseling services for 12-27 year olds to complete high school and pursue postsecondary education; activities to encourage dropouts to return to school.	\$65.5
Educational Opportunity Centers	Financial and academic information about higher education opportunities.	\$20
McNair Postbaccalaureate Program	Support services for low-income, first-generation college students.	—
Aid for Institutional Development	Strengthening fiscal management and academic programs of financially needy institutions that serve disadvantaged students, including historically black colleges and universities.	\$209
Fund for the Improvement of Post- Secondary Education	Improving quality of higher education programs.	\$16
Minority Science Improvement	Improving science and engineering programs at postsecondary institutions with predominantly minority enrollment.	\$5.9
Innovative Projects for Comm. Service	Supporting innovative student volunteer projects.	\$2.9
Minority Teacher Recruitment	Encouraging minority students to enter teaching profession.	\$2.5
Cooperative Education Program	Programs that integrate academic study with employment.	\$13.7

Program Services/Emphasis

Postsecondary Education

 Student Literacy and Mentoring Corps	Promoting community literacy and mentoring programs.	\$5.3
International Education and Foreign Languages Studies	Strengthening foreign languages and international studies programs.	\$55.1
Law School Clinical Experience	Encourage law schools to establish clinical programs.	\$9.9
 Urban Community Service	Cooperative projects that address high priority needs of urban communities.	\$9.4
 Eisenhower Leadership Program	Development of student leadership skills.	\$3.5
Scholarships and Fellowships	Undergraduate and graduate fellowships to recognize student achievement and encourage further pursuit of studies.	\$3.5
Academic Facilities	Financial assistance for construction or renovation.	\$25.9
 School, College, University Partnership	Improving skills and preparing low-income high school students for continued education or employment through partnerships of schools and business.	\$3.9
Legal Training for the Disadvantaged	Pre-law school preparation for disadvantaged students.	\$3
Federal Pell Grants	Undergraduate student aid for low- and middle-income students.	\$6,400 ³
Campus-based Programs	Student aid administered by participating educational institutions, includes Federal Supplemental Educational Opportunity Grants, Federal Work-Study Program, and Federal Perkins Loans.	\$1,216.9

Postsecondary Education

		FY 1993 Funding (in millions)
Program	Services/Emphasis	
Federal Family Education Loans	Subsidized and guaranteed loans made by commercial lenders to post-secondary students and their families. Loans include Stafford Loans, Unsubsidized Stafford Loans, Supplemental Loans for Students, Parent Loans for Undergraduate Students, and Consolidation Loans.	⁴
State Student Incentive Grants	Incentives for State-level, need-based postsecondary student financial aid.	\$72

¹*Through the appropriations process, the Chapter 1 Handicapped Program is being merged with the Special Education State Grant Program authorized under the Individuals with Disabilities Education Act.*

²*The total cost of this study since 1984 has been approximately \$6 million.*

³*In Fiscal Year 1993, the budget authority for Pell Grants was \$6 billion. Additional funds were made available through a supplemental appropriation and transfers from the Department of Defense budget.*

⁴*Costs associated with these loans include: interest payments on Stafford Loans while students are in school; special allowances to lenders; liabilities for principal and interest reimbursements to guarantee agencies; and administrative allowances to guarantee agencies.*

C. National Education Goals and Standards

Since the President and the nation's 50 governors jointly established the National Education Goals in 1989, the Department of Education has played a leading role in helping the nation's schools work toward achieving the education goals set for the year 2000. A key component of those efforts involves the development of voluntary national standards for what students should learn, know, and be able to do. In 1991, Congress established the National Council on Education Standards and Testing, a bipartisan panel that recommended the creation of voluntary national standards and a voluntary national system of student assessment. The Department of Education supports a number of scholarly and professional organizations in the development of standards in a variety of academic subjects.

National Education Goals

Goal One. Readiness for School. By the year 2000, all children in America will start school ready to learn.

Goal Two. High School Completion. By the year 2000, the high school graduation rate will increase to at least 90 percent.

Goal Three. Student Achievement and Citizenship. By the year 2000, American students will leave grades four, eight, and twelve having demonstrated competency in challenging subject matter including English, mathematics, science, history, and geography; and every school in America will ensure that all students learn to use their minds well, so they may be prepared for responsible citizenship, further learning, and productive employment in our modern economy.

Goal Four. Science and Mathematics. By the year 2000, U.S. students will be first in the world in science and mathematics achievement.

Goal Five. Adult Literacy and Lifelong Learning. By the year 2000, every adult American will be literate and will possess the knowledge and skills necessary to compete in a global economy and exercise the right and responsibilities of citizenship.

Goal 6. Safe, Disciplined, and Drug-free Schools. By the year 2000, every school in America will be free of drugs and violence and will offer a disciplined environment conducive to learning.

D. The President's Education Reform Plan

The Administration's proposed Fiscal Year 1994 budget includes \$30.7 billion for the Department of Education. The plan cuts approximately \$711 million from the Department's Fiscal Year 1993 budget by streamlining, redirecting and eliminating certain programs. The budget provides \$24.5 billion for discretionary programs in Fiscal Year 1994, up from \$23.2 billion in Fiscal Year 1993, and includes a 25 percent increase in discretionary programs over a five year period — from \$23.2 billion in 1993 to \$29 billion in 1998. The following are key components to the President's plan.

Elementary and Secondary Education. The President's plan includes \$585 million for initiatives to stimulate systemic education reform.

- **Goals 2000: Educate America.** The 1994 budget provides \$420 million to support improvements in learning and teaching by providing a national framework for education reform and meeting the National Education Goals. The President's "Goals 2000: Educate America" Act would authorize funding for the National Education Goals Panel, the National Education Standards and Improvement Council, the National Skills Standards Board, and a new program of State grants to stimulate systemic education reform.
- **School-to-Work Transition.** The Administration is requesting a total of \$270 million — \$135 million for the Department of Education and \$135 million for the Department of Labor — to develop a nationwide system of school- and work-based learning to ease the transition of high school youth from school to work.
- **The Urban-Rural Initiative.** \$15 million would make up the Department of Education's contribution to a multi-agency Urban-Rural Initiative to help selected communities mount integrated economic and social service programs in support of the National Education Goals.
- **Teacher Professional Development.** The proposal includes \$15 million for Teacher Professional Development programs.
- **Safe Schools Act.** The budget includes \$75 million to support efforts by selected school districts to address serious crime, violence, and discipline problems. These initiatives will be authorized by the Safe Schools Act, which the Administration plans to introduce in Congress.

Research. The President's Fiscal Year 1994 budget includes an increase of \$63.9 million for research, statistics, and assessments. In the plan, research would be increased 23 percent to \$90.8 million to support research focused on the education of disadvantaged students and activities to assist in the implementation of systemic

reform and the achievement of high standards; funding for statistics would increase 24 percent to \$60 million to continue expansion of data collection activities; and assessment resources would be increased 122 percent to \$65 million for the National Assessment of Education Progress, including additional State-representative assessments.

Early Childhood Education. The 1994 budget provides for over \$130 million in new funding for major early childhood programs that target at-risk populations, including \$21 million for Even Start; \$43 million for Special Education Grants for Infants and Families; and \$18 million for Special Education Preschool Grants.

Student Aid. The 1994 budget proposes significant changes for federal student aid programs, including the phasing in of a direct loan program by the 1997-98 school year. Other components of the proposal include increasing flexibility in the campus-based student aid programs, increasing funding for Pell Grants, implementing the State Postsecondary Review Program, and doubling funding for the Byrd Honors Scholarship program.

Diversity in Higher Education. The Fiscal Year 1994 budget includes four new programs totaling \$25 million to enhance higher education opportunities for minorities. The Historically Black College and University (HCBU) Capital Financing program (which would require no federal budget authority) would insure capital financing bonds up to \$357 million for HCBU's; the Faculty Development Fellowship program would provide \$8.5 million in fellowships to graduates and faculty from underrepresented groups who want to pursue a doctoral degree or participate in a professional development program; \$4 million would support the new Institute for International Public Policy which will offer fellowships, internships, junior-year abroad experiences, and intensive language training for African Americans and other minorities; and \$12.5 million will support the construction, maintenance, and endowment of the Mary McLeod Bethune Memorial Fine Arts Center at Bethune-Cookman College.

Community Service. To complement the President's National Service Initiative, which will allow participants to pay for college and other postsecondary education by serving their country, the Department of Education's plans for 1994 include expanding opportunities for students to participate in community service through higher education and student aid programs.

E. Elementary and Secondary Education

There are approximately 87,000 elementary and secondary schools in the United States.

Overview

The Office of Elementary and Secondary Education provides federal assistance to State and local education agencies (SEA/LEA) to support elementary and secondary education. Most federal elementary and secondary education programs are authorized under the Elementary and Secondary Education Act (ESEA), originally enacted in 1965. ESEA was the first major federal legislation aimed at improving American elementary and secondary education. Title I of the Act authorizes Chapter 1, a multi-billion dollar program to assist States and local school districts in educating disadvantaged children from low-income families. Chapter 1 remains the main source of federal aid in elementary and secondary education today. ESEA is up for reauthorization in 1993.

Federal elementary and secondary education resources focus primarily on enhancing opportunities for disadvantaged children. In February 1993, the Office of Policy and Planning released *Reinventing Chapter 1: The Current Chapter 1 Program and New Directions*. This congressionally mandated report examines the impact of the Chapter 1 program at the State, district, school, and classroom levels and indicates strategic directions for the reauthorization of Chapter 1. It suggests that the program will need to be revamped to achieve the standards we have set for all children in both basic and advanced skills.

White House Commission on Presidential Scholars Program. The Commission on Presidential Scholars, made up of private citizens selected by the President, recognizes 141 Presidential Scholars annually on the basis of outstanding academic and/or artistic accomplishments, demonstrated leadership, and contribution to school and community. Funding for this program is made up of federal appropriations and private contributions. In Fiscal Year 1992, federal funding totaled \$305,000 with funds raised from the private sector for a total budget of approximately \$500,000.

1. Compensatory Education Programs

a. Chapter 1

Chapter 1, first authorized as Title I of the Elementary and Secondary Education Act in 1965, is the federal government's primary education program for disadvantaged children. Chapter 1 provides financial assistance to State and local education agencies for compensatory education programs for educationally deprived and disadvantaged children. Most Chapter 1 funds are allocated to LEAs based on a formula that

utilizes each State's per-pupil expenditures for education and its count of eligible children. In Fiscal Year 1993, \$6.7 billion was appropriated for the following Chapter 1 services:

- Grants to LEAs support supplementary compensatory educational services designed to meet the special educational needs of educationally disadvantaged children residing in school districts with concentrations of children from low-income families and to increase the educational achievement levels of these children.
- Capital Expenses provides funds to help LEAs pay for certain capital costs associated with providing equitable compensatory education services to eligible private school children.
- State Agency Programs provide funds for services to neglected and delinquent children who are under State care and children of migrant workers.
- State Administration provides formula funds to SEAs for the administrative costs associated with delivery of Chapter 1 services.
- State Program Improvement Grants provide formula funds to SEAs for direct educational services in schools implementing Chapter 1 improvement plans.
- Even Start provides formula funds to SEAs, which award grants to LEAs to support family-centered education programs that involve children ages birth-7, who reside in Chapter 1 attendance areas, and their parents.
- Evaluation and Technical Assistance funds provide technical assistance to local school districts and SEAs and support activities to evaluate Chapter 1 programs.
- Rural Technical Assistance Centers assist SEAs and LEAs to improve education services for disadvantaged students in rural and small schools.

2. School Improvement Programs

School improvement programs provide financial assistance to State and local education agencies, institutions of higher education, and other public and private nonprofit organizations for a wide variety of programs designed to improve elementary and secondary education throughout the country.

School Improvement Programs at a Glance
Budget Authority in Millions

<u>School Improvement Programs</u>	<u>FY 92</u>	<u>FY 93</u>	<u>Requested FY 94</u>
Chapter 2 State and local programs	\$450.0	\$435.5	\$415.5
Education of Homeless Children and Youth	25.0	24.8	25.5
Eisenhower Mathematics and Science Education State Grants	240.0	246.0	252.7
Drug Free Schools and Communities	624.0	598.2	598.2
Dropout Prevention Demonstrations	40.0	37.5	37.7
Magnet Schools Assistance	110.0	108.0	108.0
Women's Educational Equity	.5	2.0	2.0
Christa McAuliffe Fellowship	2.0	2.0	2.1
General Assistance to the Virgin Islands	4.5	2.5	1.2
Foreign Languages Assistance	10.0	10.9	0.0
Education for Native Hawaiians	6.4	6.4	0.0
Total	\$1,512.4	\$1,471.8	\$1,442.9

a. Chapter 2

Chapter 2 of Title I of the Elementary and Secondary Education Act authorizes a block grant program for States to improve the quality of elementary and secondary education for children in public and private schools. Funds may be used to purchase library and instructional materials; to meet the special education needs of at-risk high cost students; and, to initiate or expand effective school programs. SEAs administer Chapter 2 funds while LEAs design and implement the programs. By law, States may retain up to 20 percent of the block grant for State-level initiatives, and the remaining funds must be distributed to local school districts. The Fiscal Year 1993 funding for Chapter 2 State and local programs totaled approximately \$435.5 million.

In addition to the block grant program, Chapter 2 authorizes five discretionary programs. Three are administered through the Office of Elementary and Secondary Education, and two (the National Diffusion Network and the Blue Ribbon Schools program) are administered by the Office of Educational Research and Improvement.

- Through a contract with Reading is Fundamental, Inc., funds are provided for the distribution of books to children aged 3 through high school to provide motivation to learn to read and improve their reading ability. In Fiscal Year 1993, \$10 million was available for this program.

- The Arts in Education program provides funds to the National Committee on Arts for the Handicapped to support quality programs that integrate the arts into general education for disabled youth and adults. The program also provides funds to the John F. Kennedy Center to a variety of activities that focus on making the arts an integral part of basic education. The Fiscal Year 1993 appropriation was \$6.9 million.
- The Law-Related Education program provides funds to SEAs, LEAs, postsecondary schools, public or private agencies and institutions to develop and offer programs that encourage citizen education and participation in government. In Fiscal Year 1993, \$6 million was appropriated for this program.

b. Education of Homeless Children and Youth

This program provides formula grants to States to establish offices to develop plans and coordinate education services for homeless children and youth. In 1990, amendments to the Stewart B. McKinney Homeless Assistance Act authorized States to make sub-grants to LEAs for tutoring, remedial education, transportation, and other services designed to enable homeless children to attend and succeed in school. In Fiscal Year 93, \$24.8 million was appropriated for this program.

c. Eisenhower Mathematics and Science Education

Eisenhower Mathematics and Science Education formula grants provide financial assistance to States for improving the skills of teachers and the quality of instruction in math and science. There is special emphasis on improving instruction for historically underrepresented groups, such as females, minorities, individuals with disabilities, migrant children, and the economically disadvantaged. The program consists of two components. In Fiscal Year 1993, \$246 million was spent on math and science education grants.

- Elementary and Secondary Education grants provide financial assistance to SEAs and LEAs for the expansion and improvement of training of teachers and other appropriate school personnel in math and science. At least 5 percent of these funds must be used for demonstration and exemplary programs in math and science, and 90 percent is distributed by formula to local districts.
- Higher Education grants are awarded to State agencies for higher education, institutions of higher education, and other nonprofit educational institutions and organizations for training programs for new teachers, retraining for secondary teachers, and training for teachers and other school personnel in math and science.

d. Drug-Free School and Communities

The Drug-Free Schools and Communities program, established in 1986 by the Drug-Free Schools and Communities Act, consists of formula and discretionary grants for the establishment of drug abuse education and prevention programs that are coordinated with related community efforts and resources. The Fiscal Year 1993 budget for these activities was approximately \$598 million, down from \$624 million in Fiscal Year 1992.

- State Formula Grants are provided to Governors' offices and State and Local Educational Agencies to establish, operate and improve drug education and prevention activities including: drug abuse education, intervention, and prevention programs; training programs for teachers, parents, and law-enforcement officials; rehabilitation referral, technical assistance to local programs; coordination of community efforts; community-based programs for "high-risk" youth; and the replication of successful drug education programs.
- National Programs support a number of drug and alcohol abuse education and prevention activities through SEAs, LEAs, Institutes of Higher Education (IHE), and other nonprofit agencies, organizations, and institutions including: grants to institution of higher education to develop drug abuse education programs coordinated with local elementary and secondary schools; support of five regional centers to train school teams to assess and combat drug and alcohol abuse problems and assist in the development of drug education programs; funding for alcohol and drug education and prevention activities for Indian youth attending BIA schools; and grants for drug abuse education and prevention programs for Hawaiian natives.
- School Personnel Training Grants support programs and activities to educate teachers and other school personnel about drug abuse education and prevention. A portion of each year's awards must be made to train counselors, social workers, psychologists, or nurses who are providing drug abuse prevention, counseling or referral services in elementary and secondary schools. In Fiscal Year 1992, funding for training grants totaled \$23.9 million.
- Emergency Grants provide assistance to eligible LEAs that demonstrate significant need for additional assistance for the purpose of combating student drug and alcohol abuse problems. In Fiscal Year 1992, 83 emergency grant were awarded totaling \$30.3 million.

e. Dropout Prevention Demonstrations

Through grants to LEAs and community-based organizations and partnerships, dropout prevention demonstrations are designed to reduce the number of children who do not complete their elementary and secondary education. Funded projects focus on:

identifying potential dropouts; encouraging dropouts to return to school; developing early intervention programs for at-risk students; and developing systems to collect information on why children drop out of school. Approximately 80 percent of the funds are used to support projects under two priority areas: 1) schoolwide restructuring and reform, and 2) targeted programs for at-risk youth. In Fiscal Year 1988, grantees were awarded two-year grants to develop and demonstrate the effectiveness of previously funded successful programs. A supplemental appropriation was made in Fiscal Year 1990 to continue these awards for 86 projects for a third and final year; a new competition for four-year grants was held in Fiscal Year 1991. In Fiscal Year 1993, \$37.5 million supported continuation grants, and an additional \$2 million funded the second year of an extensive evaluation of dropout prevention projects.

f. Magnet Schools Assistance Program

The Magnet Schools Assistance Program provides grants to eligible LEAs to develop and operate magnet schools that are part of an approved desegregation plan. Magnet schools have a distinctive curriculum based on a special theme or method of instruction and must open access to school enrollment beyond a regular attendance zone. The Fiscal Year 1993 budget included \$108 million to support approximately 63 magnet schools under this program.

g. Women's Educational Equity

Created in 1974 as part of the Special Projects Act of the Education Amendments of 1974, Women's Educational Equity promotes educational equity for women and girls at all levels of education. The program provides financial assistance to educational institutions to help them meet the requirements of Title IX of the Education Amendments of 1972, which prohibits discrimination on the basis of gender in federally funded education programs. The program also awards general grants and challenge grants to public agencies, private nonprofit organizations and institutions for the development of educational materials and model programs that promote gender equity in education. In Fiscal Year 1993, \$500,000 was appropriated for this program, down from \$2 million in Fiscal Year 1992.

h. Christa McAuliffe Fellowship Program

This Fellowship program is designed to reward and encourage outstanding teachers to continue their education, to develop innovative programs, and to engage in other educational activities that will improve their knowledge and skills as well as the education of students. Authorized by the Higher Education Amendments of 1986, the Fiscal Year 1993 budget for this program was \$2 million.

i. General Assistance to the Virgin Islands

Part E of Title IV of the Elementary and Secondary Education Act authorizes the Department of Education to provide funds to the Virgin Islands to assist in the improvement of elementary and secondary public schools. Historically these funds have been used to expand and renovate school buildings. Total funding for this assistance in Fiscal Year 1993 was \$2.5 million, down from \$4.5 million in Fiscal Year 1992.

j. Foreign Languages Assistance Program

The Foreign Languages Assistance Program, funded for the first time in 1991, provides formula grants to States for foreign language instruction at both the elementary and secondary education levels in Chinese, Japanese, Korean, Arabic, and Russian. These languages have been identified as critical to the economic and security interests of the United States. Each SEA distributes the grant funds competitively to local education agencies to develop model programs and innovative approaches to teaching foreign language. The Fiscal Year 1992 appropriation for this program was \$10 million. In Fiscal Year 1993, \$10.9 million was appropriated.

k. Education for Native Hawaiians

The Department of Education funds five programs that focus on the educational needs of native Hawaiians. In Fiscal Year 1992, \$6.4 million was appropriated for all five programs. In Fiscal Year 1993, \$6.4 million was appropriated.

3. Indian Education Programs

Indian Education Programs, authorized by the Indian Education Act of 1988, provide assistance to LEAs, Indian Tribes, and Tribal organizations to meet the special educational and culturally related academic needs of Indian children and adults. Programs also are designed to promote the ability of Indian peoples to assume responsibility for the direction of their own educational programs. In addition to these programs, the Department of Education has several set-aside programs (authorized under different legislation) that are administered by the Bureau of Indian Affairs. In Fiscal Year 1993, approximately \$80 million was appropriated for Indian Education Programs.

a. Formula Grants

The formula grants program provides funding to LEAs, Tribal Schools and to schools operated by the Bureau of Indian Affairs to develop and carry out supplemental elementary and secondary school projects. In Fiscal Year 1993, \$59.3 million of the total Indian Education appropriation was allocated for formula grants.

b. Special Programs for Indian Children

The Department of Education supports a number of programs through discretionary grants to help improve educational opportunities for Indian children and youth. \$12.1 million was appropriated for these programs in Fiscal Year 1993. These programs include:

- Educational Services grants support exemplary and innovative projects for preschool, elementary and secondary school students that promote collaboration, encourage Indian students to pursue a higher education, and reduce the incidence of dropouts.
- Planning, Pilot and Demonstration Grants provide funding for pilot and demonstration projects designed to test and demonstrate the effectiveness of programs for improving the educational opportunities for Indian children.
- Educational Personnel Development Grants are made to institutions of higher education to prepare and train persons to serve Indian students as teachers, administrators, teacher aides, social workers, and other educational personnel.
- Indian Education Technical Assistance Center contracts operate regional technical assistance centers to disseminate information and conduct training workshops for persons involved in the education of Indian children.
- Indian Fellowships are awarded to American Indian students for graduate and undergraduate study in medicine, psychology, law, education, clinical psychology, business administration, engineering, natural resources, and related fields.

c. Special Programs for Indian Adults

The Department of Education administers a discretionary programs which helps Indian adults to acquire basic literacy, complete secondary school, and secure the education necessary to benefit from vocational training. In Fiscal Year 1993, \$4.6 million was appropriated for this program.

4. Migrant Education Programs

Migrant Education Program. The Migrant Education Program, established in 1966 as part of Title I of the Elementary and Secondary Education Act, provides federal assistance to SEAs to establish or improve programs designed to meet the special educational needs of children ages 3 through 21 of migratory agricultural workers or fishers. Funding for this program in Fiscal Year 1993 was approximately \$303 million. The program makes formula grants to States to provide funding for educational and support services to migrant children.

The program also supports inter- and intra-State coordination activities including:

- The Migrant Student Record Transfer System (MSRTS), a national computerized data storage and communications system developed by States and currently operated by the Arkansas Department of Education. MSRTS receives, stores, and transmits educational and health records on migratory children as submitted or requested by participating LEAs. In addition, MSRTS maintains and provides management information at all levels of program administration and operation.
- Grants and contracts to SEAs to carry out activities, in consultation with other States, that improve the interstate and intrastate coordination of services to migratory children and their families.

Two other programs, funded under the Higher Education Act, also serve migratory youth:

- The High School Equivalency Program provides financial assistance through discretionary grants to institutions of higher education to help eligible migrant and seasonal farmworkers obtain high school diplomas or equivalency certificates, and to provide assistance with subsequent placement in a college or university, a job training program, the military or full-time employment.
- The College Assistance Migrant Program provides financial assistance through discretionary grants to institutions of higher education to help migrant and seasonal farmworkers enroll in, and complete, the first year of college.

5. Impact Aid Programs

Impact Aid Program. Impact Aid program was created to compensate school districts for the cost of educating children when enrollment and availability of revenues for local sources have been adversely affected by federal activities. The programs were created in 1950 to respond to the impact of increased populations in centers of defense production and near military installations. Fiscal Year 1993 appropriations for Impact Aid Programs totaled approximately \$750 million.

- Payments are made to LEAs for maintenance and operations expenses on behalf of children who reside on federal property, and/or whose parents work on federal property or for property that has been acquired by the federal government.
- Construction awards are made to LEAs for the construction and repair of urgently needed school facilities.

F. Bilingual Education and Minority Language Affairs

Bilingual education programs help children with limited English proficiency learn English so that they can enter English speaking classrooms. A wide variety of programs are supported, some that make extensive use of students' native language for instruction, and some that focus on immersion in English. In Fiscal Year 1992, approximately \$225.4 million was appropriated for bilingual and immigrant education programs. The Fiscal Year 1993 funding level for these programs was \$225.7. The President's Fiscal Year 1994 budget request includes \$232.3 for these programs.

a. Bilingual Education Programs

Bilingual Education Programs award grants to develop and carry out bilingual education programs in elementary and secondary schools. Bilingual Education grants support approximately 1,000 local projects serving some 350,000 children. Grants may be used for the following activities: English language and native language instruction to help children achieve competence in English; programs for out-of-school youth; programs designed for gifted and talented children; and programs for parents. In Fiscal Year 1993, \$149.7 million was appropriated for grants to local education agencies and institutions of higher education. The President's Fiscal Year 1994 budget request includes \$153.7 million, an increase of \$4 million, to serve an additional 9,000 children.

b. Support Services

As part of the Bilingual Education Programs, the Department of Education makes awards to State Education Agencies, Institutions of Higher Education and nonprofit organizations to support evaluation assistance centers, studies, evaluations, and a clearinghouse on bilingual education. In Fiscal Year 1993, \$10.9 million was available for support services. The Fiscal Year 1994 request was \$12.4 million.

c. Training Grants

Bilingual Education Training Grants support programs designed to meet the needs for additional or better trained bilingual education personnel. Training is also provided for parents. Funded programs emphasize opportunities in career development and advancement. In Fiscal Year 1993, \$35.7 million was allocated for bilingual education training grants. The Fiscal Year 1994 request was \$36.7 million.

d. Immigrant Education

This program provides grants to school districts that have at least 500 immigrant students or in which immigrant students make up at least 3 percent of the enrollment. Grants are used for supplementary education services for immigrant children in

elementary and secondary schools. In Fiscal Year 1993, approximately \$29.5 million was appropriated for this program. The Fiscal Year 1994 request was \$29.5 million.

G. Special Education and Rehabilitative Services

In accordance with the Individuals with Disabilities Education Act and other federal laws, more than 4.5 million children with disabilities across the nation received special education and/or related services in the 1989-90 school year.¹

Overview

The Office of Special Education and Rehabilitative Services (OSERS) supports programs that assist in educating children with special needs, provides for the rehabilitation of youth and adults with disabilities, and supports research to improve the lives of individuals with disabilities. Programs administered by OSERS serve about 5 million children and youth, and approximately 930,000 adults with disabilities.

OSER's Office of Special Education Programs, the National Institute on Disability Research, and the Department of Health and Human Services are co-sponsoring an initiative aimed at coordinating available services and funding sources to improve access to needed education, health, and social services for children with disabilities. The Initiative on Coordinated Service Delivery for Infants, Toddlers, and Youth with Disabilities will provide technical assistance to State agencies and community programs responsible for services for children with disabilities. The initiative was started in 1991 as a three-year project.

1. Office of Special Education Programs

The Office of Special Education Programs (OSEP) is responsible for administering programs and monitoring state compliance with the Individuals with Disabilities Education Act (IDEA). IDEA's primary objective is to ensure that all children and youth with disabilities aged 3-21 years receive a free appropriate public education, and that all infants and toddlers with disabilities receive early intervention services. OSEP oversees programs to expand and improve special education, administers grants to state education agencies to help state and local school districts serve children and youth with special needs, monitors state programs to ensure that students with disabilities receive appropriate education, and conducts research to improve methods of special education. Every year, OSEP issues a report to Congress on the implementation of the IDEA and status of special education in the United States. In addition, OSEP supports three clearinghouses to disseminate information, coordinate outreach activities, and coordinate federal, State and local organizations. OSEP also supports the National Information Center for Children and Youth with Disabilities.

Out of a total appropriation of approximately \$2.85 billion in Fiscal Year 1992, about \$2.61 billion, or 92 percent, was awarded through formula grants to State education agencies under four programs. The remaining \$241 million was awarded to State and local education agencies, universities, and other organizations under 14 discretionary grants programs. In Fiscal Year 1993, \$2.97 billion was appropriated for these programs. The President's Fiscal Year 1994 budget plan includes \$3.1 billion for OSEP.

a. Formula Grants

In addition to the following two formula grant programs, in Fiscal Year 1992 OSEP spent approximately \$500 million on two formula programs for children 5 years of age and younger.

i. Grants to States. Grants to States provide funding to States to assist them in meeting the costs of providing special education and related services² to children with disabilities. Funds are distributed by formula to help States comply with Part B of the Individuals with Disabilities Education Act (IDEA) requirements that all children with disabilities aged 3 through 21 years be served (except in those States where services to 18-21 year olds is inconsistent with State law or practice or a court order). States must distribute at least 75 percent of the funds to local education agencies and intermediate educational units. Up to 20 percent of the remaining funds may be used by the State to provide support and direct services for children with disabilities. Many States have used funds to support integration of special and regular education services, and for school-to-work transition services for high school students. In Fiscal Year 1993, \$2 billion is appropriated for grants to States. During the 1992-93 school year, the average federal contribution per child served was approximately \$419.

ii. Chapter 1 Handicapped Program. Both IDEA State Grants and the Chapter 1 Handicapped program provide assistance for early intervention and special education services to children with disabling conditions. In 1992, Congress initiated the process of merging the Chapter 1 Handicapped Program with programs authorized under IDEA. The merger continues through the appropriations process. In Fiscal Year 1993, \$126 million was appropriated for this program. The President's Fiscal Year 1994 budget requests \$113.8 million for this program, a continued reduction in funding, offset by a \$12.6 million increase in the State Grants request.

b. Discretionary Programs

Following are descriptions of some of OSEP's 14 discretionary programs, authorized by Parts B through G of IDEA.

OSEP Discretionary Programs at a Glance
Budget Authority in Millions

Program	FY 92	FY 93	Request FY94
Services for Children Deaf-Blindness	\$13.0	\$12.8	\$12.8
Serious Emotional Disturbance	4.0	4.1	4.1
Severe Disabilities	8.0	9.3	9.3
Early Childhood Education	25.0	25.2	25.2
Secondary and Transitional Services	19.0	22.0	22.0
Postsecondary Education	9.0	8.8	8.8
Innovation and Development	21.0	20.6	20.6
Media and Captioning Services	17.0	17.9	17.9
Technology	10.0	10.9	10.9
Special Studies	4.0	3.9	3.9
Personnel Development	89.8	90.1	90.1
Parent Training	12.0	12.4	12.4
Clearinghouses	2.0	2.2	2.2
Regional Resource Centers	7.0	7.2	7.2
Total	\$240.8	\$247.4	\$247.4

i. Services for Children with Deaf-Blindness. This program assists States in assuring that infants, toddlers, children, and youth with deaf-blindness receive all appropriate early intervention, special education and related services. The Fiscal Year 1993 appropriation totaled \$12.8 million for demonstrations, research, training and technical assistance activities. The following are examples of projects funded through this program:

- State and Multi-State Services Projects and Optional Pilot Projects for Children with Deaf-Blindness funds projects that provide technical assistance for serving children with deaf-blindness. Special education and related services, as well as vocational and transitional services, may also be provided to deaf-blind children to whom the State is not obligated to make available a free appropriate public education under Part B of IDEA. In Fiscal Year 1992, approximately \$9 million was available for these projects, and an additional \$1 million was available for technical assistance to these projects.
- Technical Assistance for Transitional Services is operated by the Helen Keller National Center for Deaf-Blind Youth and Adults in Sands Point, New York, under a cooperative agreement. Technical assistance is provided to support State transition efforts, to assist parents and family members, and to help communities participate in transition planning.

- The Innovations for Educating Children with Deaf-Blindness in General Education Settings projects support the development of innovative approaches for improving the education of deaf-blind children in elementary, junior and high schools.
- A program of Research in Social Relationships for Children and Youth with Deaf-Blindness supports research to develop, test, and disseminate information on social support strategies to improve the social integration of children and youth with deaf-blindness in school, neighborhood, and community settings. Approximately \$1 million is currently supporting two cooperative agreements.

ii. Programs for Children with Severe Disabilities. The purpose of this program is to improve early intervention, special education and related services for children with severe disabilities, including deaf-blindness. Funding provides assistance for demonstration projects, research, training, and technical assistance. In Fiscal Year 1993, \$9.3 million will support a number of activities including the following.

- The Social Relationships Institute for Children and Youth with Severe Disabilities develops, tests, and disseminates information on social support strategies to increase the social integration of children and youth with severe disabilities in school, neighborhood, employment, and community settings. Six universities are conducting research that will investigate social relationships for this project. Fiscal Year 1992 funding for the consortium institute was approximately \$624,000.
- Developing Innovations for Educating Children with Severe Disabilities Full-time in General Education Classrooms is a 9-grant initiative that supports research designed to develop, evaluate and implement strategies for integrating special education into general education elementary classrooms. In Fiscal Year 1992, approximately \$1.2 million was allocated for this multi-component research project.
- Projects for State-Wide Systems Change supports a number of projects that enhance the capacity of States to serve students with severe disabilities. Projects focus on improving the quality of special education and related services for children birth through age 21, and to change the delivery of these services from a segregated to integrated environments. In Fiscal Year 1992, approximately \$3.5 million was allocated for these projects.
- Outreach: Serving Students with Severe Disabilities in Integrated Environments supports projects aimed at improving the quality of educational services for children and youth with severe disabilities in integrated settings. Priority is given to those projects that facilitate the adoption and implementation of validated educational models in new sites. In Fiscal Year

1992, approximately \$2 million was available to fund 14 projects that addressed such issues as employment and/or transition, communication, use of assistive technology, and outreach models.

iii. Program for Children and Youth with Serious Emotional Disturbance. This program provides assistance for projects designed to improve special education and related services for children and youth with serious emotional disturbance (SED). The program supports research, development and demonstration projects that can help improve the learning opportunities for youth with SED. In Fiscal Year 1993, \$4.1 million was appropriated for this program. Continuation support will include the following.

- **Facilitating Interagency and Private Sector Resource Efforts to Improve Services** supports demonstration projects that provide services for children and youth with SED. Projects must increase the availability and quality of community services for the youth and their families, target resources to school settings to reach students, and emphasize collaboration among school districts, communities, and States. Fiscal Year 1992 funding for this program totaled approximately \$1.7 million.
- **Reducing Out-of-Community Residential Programs by Improving Services to Children with SED and their Families** supports projects that improve special education and related services for children and youth with SED by promoting the use of school district-based programs, including day treatment programs, after-school programs, and summer programs. In Fiscal Year 1992, funding for this program was approximately \$1 million.

iv. Secondary Education and Transitional Services for Youth with Disabilities.

This program primarily supports activities to assist youth with disabilities in the transition from secondary school to postsecondary environments, especially employment. In Fiscal Year 1993, approximately \$21.9 million will be awarded to institutions of higher education, State and local education agencies, and other public and private nonprofit institutions and agencies for transitional services for disabled youth. Following are examples of funded activities.

- **The State Systems for Transition Services for Youth with Disabilities** program serves as a primary source of support and assistance to States implementing the transition services requirements of IDEA. The program funds one-time, 5-year cooperative agreements to the State education agency and State vocational rehabilitation agency for the development, implementation or improvement of transition services for youth with disabilities aged 14 through the age they exit school. In Fiscal Year 1992, approximately \$12 million provided assistance to 24 States.

- **Demonstration Projects to Identify and Teach Skills Necessary for Self-Determination** support model demonstration projects that help youth develop the ability to define and achieve their goals, as well as the in-school and out-of-school experiences that lead to the development of that ability. The projects represent a variety of approaches to teach self-determination and serve youth with a wide range of disabilities. In Fiscal Year 1992, approximately \$2.7 million supported 20 projects.
- **Training and Employment Projects** focus on preparing and placing youth with disabilities in competitive or supported work prior to their leaving school. The projects emphasize collaboration with employers and educators, and working with families to maximize independence. In Fiscal Year 1992, approximately \$1.1 million was available for 9 grants.
- **Research Projects on the Transition of Special Populations to Integrated Postsecondary Environments** focus on developing effective strategies to prepare youth with disabilities ages 16-21 to live and work in the community. Each project must target at least one of the following special populations: adjudicated youth; youth with severe emotional disturbance; or youth with severe physical disabilities. In Fiscal Year 1992, approximately \$1.2 million was available for 10 projects.
- **Model Demonstration Projects to Identify, Recruit, Train, and Place Youth with Disabilities Who Have Dropped Out of School** currently supports two model demonstrations focused on improving services for this population. Both projects will contribute to rural and urban transition services and impact on cultural diversity. In Fiscal Year 1992, approximately \$450,000 was available for the two projects.
- **Family Networking Projects** work with families of disabled youth to build on existing transition planning processes to assist the youth and their families in identifying, accessing and using networks to obtain needed support and services. In Fiscal Year 1992, approximately \$465,000 was available to support 4 grants.

v. Postsecondary Education Program. The Postsecondary Education Program provides assistance for the development, operation, and dissemination of specially designed model programs in postsecondary, vocational, technical, continuing, or adult education for individuals with disabilities. In accordance with legislative requirements, a portion of funds available under this program is set aside for four institutions serving students with deafness. In Fiscal Year 1993, \$8.8 million is available to support the following projects.

- **Regional Programs for Children and Youth with Deafness** provides approximately \$1 million to each of four regional centers to provide support services that enable deaf students to participate in regular postsecondary offerings alongside their disabled peers.
- **Career Placement Opportunities for Students with Disabilities in Postsecondary Programs** provides funding to projects that enhance the role and capacity of career placement offices to provide pre-employment and employment opportunities for students with disabilities in a variety of postsecondary settings. In Fiscal Year 1992, over \$4.3 million was available for this program.
- Under a contract with the Educational Testing Service in Princeton, NJ, the **Evaluation and Dissemination of Effective Practices** project supports the identification and evaluation of effective practices, exemplary products and positive findings in the area of postsecondary education and disability. In Fiscal Year 1992, funding for this contract was approximately \$400,000.

vi. Research in Education of Individuals with Disabilities. OSEP supports research in education of individuals with disabilities to advance and improve the knowledge base and ultimately, to improve educational services for children and youth with disabilities. A wide range of research is funded annually. In Fiscal Year 1992, \$21 million was appropriated for research and related activities. Following are examples of the 21 funded activities of Fiscal Year 1992 and their approximate funding levels.

- **Advancing and Improving the Research Knowledge Base** supports the innovation, development, exchange, and use of advancements in knowledge to improve the instruction and learning of children and youth with disabilities. \$1.6 million funded 21 new grants.
- **Field-Initiated Research** funds research activities that address issues identified by researchers in the field. \$8 million supported 16 new and 42 continuation grants.
- **Research on General Education Teacher Planning and Adaptation for Students with Disabilities** funds projects to improve teacher planning, adaptation of curricula and instruction for students with disabilities educated in general education classrooms. \$1.2 million funded 4 continuation cooperative agreements.
- **Research on the Delivery of Services to Students with Disabilities from Non-Standard English, Limited English Proficiency and/or Non-Dominant Cultural Groups** is designed to provide a research focus to issues relating to the effects

of language and cultural differences in the special education to children of language and/or cultural minorities. \$900,000 funded 3 cooperative agreements.

- **Research on Self-Determination in Individuals with Disabilities** supports projects that focus on developing, defining and assessing approaches that encourage self-determination in individuals with disabilities. \$1 million supported 5 new cooperative agreements.
- **Interventions to Support Junior High School-Aged Students with Disabilities Who Are At-Risk of Dropping Out of School** support the development and implementation of interventions for junior high school students who are classified as either seriously emotionally disturbed, or who are at-risk of not completing school for other reasons. \$620,000 supported 3 cooperative agreements.
- **Improving Learning Through Home/School Collaboration** supports studies that focus on home and school collaboration to children with disabilities socially and educationally. \$670,000 funded 3 cooperative agreements
- **Including Children with Disabilities as Part of Systemic Efforts to Restructure Schools** supports systemic changes at the school level that incorporate effective practices for children with disabilities into the broader school based plan. \$1.1 million funded 7 new cooperative agreements.

vii. Special Studies Program. The Special Studies Program funds studies to evaluate the impact of IDEA on children and youth with disabilities and improve service delivery. Grants, contracts and cooperative agreements are awarded to State and local education agencies, institutions of higher education, public agencies, and private organizations. Findings are compiled in an annual report to Congress. Funding in Fiscal Year 1992 totaled \$4 million and supported 9 projects, including the following.

- The State Agency/Federal Evaluation Studies Program awarded 5 cooperative agreements in Fiscal Year 1992 for evaluation studies to assess the impact and effectiveness of State and local efforts to provide a free appropriate public education to all children and youth with disabilities, and early intervention services to infants and toddlers with disabilities.
- The Center for Outcome Assessment for Children and Youth with Disabilities, operated by the University of Minnesota, is working on the design, development, implementation and use of a comprehensive system of national indicators to effectively assess outcomes for children with disabilities.

- The State/Federal Information Forum for Program Improvement will help OSEP coordinate the collection, analysis and synthesis of information from State and local educational agencies to improve programs for children and youth with disabilities.

viii. Captioned Films, Television, Descriptive Video & Educational Media for Individuals with Disabilities. The purpose of this program is to promote the general welfare of deaf, hard-of-hearing, and visually impaired individuals, and the educational advancement of individuals with disabilities. The program supports research on the use of educational media for individuals with disabilities, closed-captioned television programming for deaf and hard-of-hearing individuals, recordings for visually impaired persons, and other media related activities. In Fiscal Year 1993, \$17.8 million was appropriated for this program which supports a total of 15 separate grant opportunities.

ix. Technology, Educational Media, and Materials for Individuals with Disabilities. The purpose of this program is to support projects and centers for advancing the availability, quality, use, and effectiveness of technology and education media materials in the education of children and youth with disabilities. In Fiscal Year 1993, \$10.8 million is available to support 10 separate grant programs.

x. Resource Centers. The Regional Resource and Federal Centers (RRFC) program provides consultation and technical assistance, as requested, to State educational agencies, and through those agencies to local education agencies and other agencies involved in special education and early intervention services. In Fiscal Year 1993, \$7.2 million was appropriated to support six regional centers and one federal center.

xi. Training Personnel for the Education of Individuals with Disabilities. This program supports an array of training projects designed to increase the quantity and improve the quality of personnel available to serve infants, toddlers, children, and youth with disabilities. In Fiscal Year 1993, approximately \$90 million was available for 13 separate training programs.

xii. Parent Training. The purpose of the Parent Training program is to provide training and information to parents of children and youth with disabilities, and persons who work with those parents, to enable them to participate more effectively in meeting the educational needs of their children. In Fiscal Year 1993, funding for this program totaled approximately \$12.4 million for three separate grant programs.

xiii. Minority Outreach Centers. From funds appropriated for other programs, OSEP funds two technical assistance centers aimed at providing outreach services to institutions of higher education with at least a 25 percent minority enrollment. The Centers are located at Hampton University, Hampton, Virginia, and the University of New Mexico in Albuquerque. The overall objective is to increase the capacity of

these institutions to be competitive in developing proposals and obtaining funding for federally funded special education projects. In Fiscal Year 1992, OSEP funding for the two centers totaled approximately \$2.4 million.

c. Data Analysis System

The Data Analysis System allows OSEP to collect and synthesize State-reported data on the status of special education, special education expenditures, special education personnel, and children and youth with disabilities. In accordance with legislative requirements, data are collected on the number of children served under Part B of IDEA and Chapter 1 of the Elementary and Secondary Education Act, and their disabilities.

In addition, in 1984, OSEP began collecting data from States on the number of students age 14 and older exiting the education system. These data are reported by students' ages, disabilities, and basis of exit (this category includes graduating with a diploma, graduating with a certificate, dropped out, reached maximum age for which services are available, and status unknown). OSEP uses the data to analyze exiting patterns. Data for the 1989-90 school year indicate that approximately 57 percent of all exiting students with disabilities graduated with either a diploma or a certificate, and approximately 27 percent dropped out. In 1990, to improve exiting data collection, OSEP convened the Exiting Task Force to address issues of data quality and comparability and to make recommendations for improvement.

i. National Longitudinal Transition Study of Special Education. (Grantee: SRI International). In 1983, Congress mandated the National Longitudinal Transition Study (NLTS) of Special Education to provide information about the transition of youth with disabilities from secondary school to early adulthood. National household-reported data were collected in 1987 and again in 1990. The five-year study included a nationally representative sample of more than 8,000 young people aged 13-21. In addition to providing demographic data, the study revealed important information regarding the school completion status of students with disabilities, and the employment, postsecondary education, and residential arrangement status of youth with disabilities.

According to NLTS data, only about half of students with disabilities who leave secondary school do so by graduating, and almost a third are dropouts. In addition, data indicate that youth with disabilities, compared to the general population of youth are disproportionally male; more likely to live in single parent families and families of lower socioeconomic status, and are disproportionally African American.³ Further analysis of the data has revealed that youth with disabilities who have been out of school for three to five years have made significant progress. A report released in April 1993, *What Happens Next? Trends in Postschool Outcomes of Youth with Disabilities*, shows that youth with disabilities have made significant gains in employment, postsecondary education, and independent living. The overall employment rate of the youth increased 11 percent to 57 percent; one fourth of them

had enrolled in some form of postsecondary education; and the rate of living independently more than tripled, from 11 percent less than two years out of high school to 37 percent three years later. According to the study, graduation from high school is the most promising factor for advancement for youth with disabilities. The total cost of this project since 1984 has been approximately \$6 million.

2. Rehabilitation Services Administration

The Rehabilitation Services Administration (RSA) supports programs and activities to help individuals with physical or mental disabilities obtain employment through counseling, medical and psychological services, job training, and other specialized services. Program activities administered by RSA are authorized by the Rehabilitation Act of 1973, as amended. The Act authorizes over \$2 billion in federal formula grants and discretionary programs for the job training and placement of individuals with disabilities.

a. Formula Grant Programs

i. Vocational Rehabilitation State Grants. Vocational Rehabilitation State Grants provide funds to State vocational rehabilitation agencies to help persons with disabilities to prepare for and engage in gainful employment. Funds are distributed by a formula based on population and per capita income. In accordance with the Rehabilitation Act Amendments of 1992, at least .33 percent of the funds allocated for this program must be set aside for grants to Indian Tribes. This program enables States to provide a wide range of services, including vocational training, counseling, job placement, transportation, recreational services, interpreters and readers, and physical and mental restoration services. In Fiscal Year 1993, approximately \$1.9 billion was appropriated for this program. The President's Fiscal Year 1994 budget requests a 3.2 percent increase, or approximately \$60 million, in additional funding for this program.

ii. Supported Employment State Grants. This formula grant program assists States in developing collaborative programs with appropriate public and private nonprofit organizations to provide supported employment services for persons with severe disabilities. Supported employment services include training and post-placement activities. The Fiscal Year 1993 budget for this program was \$32.3 million. The President's Fiscal Year 1994 budget requests \$33.1 million for this program

iii. Client Assistance Program. This program makes sure that individuals with disabilities are informed of all available benefits under the Rehabilitation Act of 1973, as amended, and assists them in receiving services for which they are eligible. In Fiscal Year 1993 \$9.3 million was appropriated for client assistance grants to States.

b. Discretionary and Special Purpose Programs

RSA supports a number of discretionary or special purpose programs designed to enrich the lives of individuals with disabilities, increase their employment opportunities, and enable them to live more independently with their families or in their communities. In Fiscal Year 1993, approximately \$160 million funded a number of programs including the following.

- i. Special Demonstration Programs.** The purpose of this program is to provide financial assistance to States and other public and private agencies for expanding or otherwise improving vocational and other rehabilitation services for individuals with disabilities (especially those with the most severe disabilities), including individuals who are members of populations that are unserved or underserved, individuals who are blind, and individuals who are deaf. Support may be provided for special projects and demonstrations, including research and evaluations that provide youth with disabilities with job training and prepare them for entry into the labor force. Such projects must be designed to demonstrate cooperative efforts between local education agencies, business and industry, vocational rehabilitation programs, and labor organizations. In Fiscal Year 1993, \$10.5 million was appropriated for this programs.
- ii. Supported Employment Projects.** Supported Employment Projects are designed to stimulate the development of innovative supported employment services and provide technical assistance to existing programs, as well as to expand the availability of existing services on a Statewide basis. In Fiscal Year 1993, \$10.6 million was appropriated for this program.
- iii. Special Recreational Projects.** This program supports projects designed to provide individuals with disabilities with recreational activities and related experiences that can be expected to facilitate their employment, mobility, independence, socialization, independence, and community integration. Whenever possible and appropriate, these program and activities are provided in settings with peers who are not individuals with disabilities. In Fiscal Year 1993, \$2.6 million was appropriated for approximately 27 projects.
- iv. Projects with Industry.** The purpose of this program is to create a partnership between business, industry, labor and the rehabilitation community that ultimately leads to employment for individuals with disabilities. The program's primary goals are to create and expand job and career opportunities for individuals with disabilities in the competitive labor market; to create practical job and career readiness; and to provide job placements and career advancement. Training is provided for jobs in realistic work settings, generally within commercial or industrial establishments, and coupled with supportive services to enhance pre- and post-employment success. Grant support provides for the development and modification of jobs to accommodate the special needs of individuals with disabilities at the work site; the purchase and

distribution of special aids or equipment for use at the worksite; and the establishment of appropriate job-placement services. In Fiscal Year 1993, \$21.6 million was appropriated for this program.

v. Helen Keller National Center for Deaf-Blind Youth and Adults. The Helen Keller National Center for Deaf-Blind Youth and Adults was authorized under the Rehabilitation Act until 1984, when the Helen Keller National Center Act was passed as a free-standing statute. The Center is charged with developing methods of providing intensive, specialized rehabilitative services to deaf-blind individuals and training professionals to deliver such services; conducting research aimed at improving rehabilitative services for deaf-blind individuals; and, supporting activities to increase public awareness and understanding of deaf-blindness. In Fiscal Year 1993, the Center received \$6.6 million from the Department of Education.

vi. Independent Living. Several RSA programs are designed to maximize the leadership, empowerment, independence and productivity of individuals with severe disabilities and promote their integration and full inclusion into the mainstream of American society. In Fiscal Year 1993, \$56.2 million supported a number of such programs including:

- The Independent Living State Grant program provides formula grants to States for developing, expanding, and improving the provision of independent living services to individuals with severe disabilities. These services also provide support for Centers for Independent Living.
- The Centers for Independent Living program provides financial assistance to develop and support Statewide networks of Centers for Independent Living. A Center is a consumer-controlled, community-based, cross-disability, nonresidential private nonprofit agency that is designed and operated within a local community by individuals with disabilities. These Centers provide information and referral services, independent living skills training, peer counseling, individual and systems advocacy, and a variety of other services designed to improve the ability of individuals with disabilities to live independently. At least 50,000 individuals are served annually by approximately 200 Centers.

vii. Migratory Workers. This program provides grants to State vocational rehabilitation agencies or agencies working under agreement with State agencies, to cover up to 90 percent of the costs of vocational rehabilitation services for migratory agricultural workers or seasonal farmworkers. In Fiscal Year 1993, \$1.2 million was appropriated for this program.

viii. Training. This program provides funding to State and other public agencies or private organizations to support training projects designed to increase the number of qualified personnel available to provide rehabilitative services to individuals with

disabilities. RSA encourages grant recipients to include persons with disabilities as trainees in their programs. The Fiscal Year 1993 appropriations for this program totaled \$39.6 million.

3. National Institute on Disability and Rehabilitation Research

Title II of the Rehabilitation Act of 1973 established the National Institute on Disability and Rehabilitation Research (NIDRR), formerly the National Institute of Handicapped Research, to support a comprehensive and coordinated program of rehabilitation research. NIDRR funds research and training centers, engineering research centers, and research, and demonstration projects that address a variety of issues in rehabilitation, including the causes and consequences of disability and ways to improve the educational, employment, and independent living opportunities of all persons with disabilities.

NIDRR's Fiscal Year 1993 budget totaled approximately \$67.2 million. The President's Fiscal Year 1994 budget request includes \$67.2 million for NIDRR. This would provide \$57 million for continuations, including \$25 million for 42 research and training centers to be established in 1993, and about \$10 million for new awards.

a. Research and Training Centers

In 1992, NIDRR funded thirty-nine rehabilitation research and training centers (RTCs) that conduct research aimed at improving knowledge of rehabilitation methods and service delivery, and instituting teaching and training programs to ensure that research findings are incorporated into service delivery. Located primarily at universities across the country, center grants are typically awarded for 5-year periods. Centers focused on a number of topics, including the following:

- The Research and Training Center for Children's Mental Health, located at the University of South Florida, conducts research and provides technical assistance to improve the delivery of services to children and adolescents with severe emotional disabilities. The Center, which focuses on systems of coordinated, community-based care, is developing an empirically derived database that will include families and professionals from multiple service systems. In addition, the Center develops curricula and training materials, performs outcome studies, conducts needs assessments, develops model programs, and provides information and referrals. Since 1989, NIDRR has provided up to 50 percent of the Center's funding, with Fiscal Year 1992 NIDRR funding totaling approximately \$300,000.
- The Research and Training Center on the Social Psychological Development of Children and Youth with Disabilities collects and analyzes data, provides services, and conducts training seminars that focus on the psychosocial and developmental aspects of disability and chronic illness in children and youth. Located at the University of Minnesota, the Center is investigating alternatives

to long-term care, social development and resilience, developmental interventions, minority family concerns, and developing decision making skills in children and youth. Established in 1989, the Center receives approximately \$750,000 from NIDRR annually.

- The Research and Training Center to Improve Services for Families of Children and Youth with Serious Emotional Disorders, operated by Portland State University's Regional Research Institute, conducts research that has practical application in the development, evaluation, and improvement of services for families whose children have serious emotional disorders. The Center received \$300,000 annually from NIDRR in Fiscal Years 1989-91, and \$375,000 in Fiscal Year 1992.

b. Rehabilitation Engineering Centers

In Fiscal Year 1992, NIDRR funded 18 rehabilitation engineering centers (RECs) where professionals worked on designing and testing new engineering solutions to problems of disability, such as the production of wheelchairs and communications devices, and the improvement of transportation methods and worksite accommodations. One Center, located at Rancho Los Amigos Medical Center, is designing and evaluating state-of-the-art technology for the rehabilitation of children with orthopedic disabilities. The five-year project has received \$500,000 annually since it started in 1990.

c. Research

In addition to the RTCs and RECs, NIDRR supports a number of research programs including: spinal cord research, research and demonstration projects that address annual priorities identified by NIDRR; innovative research that tests new concepts and innovative ideas; and field-initiated research that encourages the development of valuable rehabilitation research initiated by researchers from across the country. The following are examples of current NIDRR-funded research projects that focus on youth.

- Environmental Events Among Children and Youth with Profound and Multiple Handicaps, completed in 1992, focused on identifying the times when students with profound and multiple disabilities were most alert, and then developing improved educational interventions and procedures to make learning possible.
- Assisting Families in Coping with Transition of Handicapped Youth to Adulthood, started in 1991, will develop a model for assisting families to cope with the transition from youth to adulthood.

d. Dissemination and Utilization Grants

These grants support activities to ensure that rehabilitation knowledge generated from projects and centers funded by NIDRR and other sources is used to improve the lives of individuals with disabilities. In Fiscal Year 1992, NIDRR funded 37 grants (8 new; 29 continuations) with approximately \$9.6 million.

e. Technology Assistance

This program provides discretionary grants to States to develop and implement statewide programs that facilitate the provision of assistive technology devices and services to persons of all ages with disabilities. The program also supports training, public awareness, and model projects relating to technology assistance. In Fiscal Year 1993, \$34.1 million was appropriated for this program.

4. Special Institutions for Persons with Disabilities

a. American Printing House for the Blind (APH)

The appropriation for the Printing House supports the distribution of educational materials adapted for legally blind students enrolled in formal educational programs below the college level. The appropriation also supports educational and technical research to develop and improve products and advisory services on the availability and use of materials produced by APH. In Fiscal Year 1993, \$6.3 million was appropriated for this program.

b. National Technical Institute for the Deaf (NTID)

NTID provides postsecondary educational programs at the certificate, diploma, and associate degree levels as well as advanced degrees through its host institution, the Rochester Institute of Technology, for individuals who are deaf. NTID also conducts research and provides training related to the occupational and employment-related aspects of deafness. In Fiscal Year 1993, \$40.4 million was appropriated for these programs.

c. Gallaudet University

Gallaudet provides postsecondary educational programs at the college preparatory and undergraduate levels for persons who are deaf, and graduate programs related to deafness for persons who are deaf and hearing. The University also operates the Kendall Demonstration Elementary School and the Model Secondary School for the Deaf which operate model programs, and develop and disseminate materials for use in the instruction of persons who are deaf or hard of hearing. In addition, Gallaudet conducts research and provides public service programs related to deafness. In Fiscal Year 1993, \$77.6 million was appropriated for these programs.

H. Educational Research and Improvement

The Office of Educational Research and Improvement (OERI) is responsible for most education-related research at the federal level. OERI supports research on every aspect of teaching and learning and sponsors programs to improve American education. In addition to supporting research, agency activities include collecting and analyzing data, assessing student achievement, linking research to effective practices, promoting the use of educational technology, advancing innovative school improvement projects, strengthening library services, and disseminating information. OERI's Fiscal Year 1993 budget totaled \$426 million, including \$74 million for research, \$48.6 million for statistics, and \$29.3 million for assessments.

1. Fund for the Improvement and Reform of Schools and Teaching Office

In Fiscal Year 1992, the Fund for the Improvement and Reform of Schools and Teaching Office funded 99 new projects and 114 continuation grants. The office administers the following discretionary grant programs: the Fund for the Improvement and Reform of Schools and Teaching (FIRST); the Secretary's Fund for Innovation in Education (FIE); the Dwight D. Eisenhower National Program for Mathematics and Science Education; and the Dwight D. Eisenhower Regional Consortium Program.

a. Fund for the Improvement and Reform of Schools and Teaching Program (FIRST)

FIRST was created by the Augustus F. Hawkins-Robert T. Stafford Elementary and Secondary Education Amendments in 1988 to support projects to benefit elementary and secondary school teachers and students, especially educationally disadvantaged or at-risk children. Projects are intended to complement federal efforts to spur school-based reforms and innovations in education. In Fiscal Year 1992, \$9.2 million was available for new and continuing FIRST projects. In Fiscal Year 1993, total funding was \$9.1 million, with a new grant competition only in the Family-School Partnerships area.

- The Schools and Teachers Program awards grants to LEAs to support the improvement of educational opportunities for school teachers and students. Among the activities specifically authorized are those that help educationally disadvantaged or at-risk children meet higher educational standards, provide incentives for improved school performance, provide opportunities for teacher enrichment, and improve the teacher certification process. Priority is given to projects that benefit schools with below-average academic performance, projects designed to increase access to high quality education, and projects that

focus on systems for providing incentives to schools, principals, teachers and students for improved performance. In Fiscal Year 1993, approximately \$5.4 million was available for 43 continuation grants, and one contract.

- The Family-School Partnership Program supports demonstrations by school districts to increase the involvement of families in the education of their children in preschool, elementary and secondary schools. Activities may include training programs for families and teachers, developing new school policies and practices, hiring and training of family activities coordinators, and developing or purchasing educational materials for parents to reinforce classroom instruction of their children. For the Fiscal Year 1993 new grant competition, priority will be given to projects that provide training for families on the family's educational responsibilities. In addition, the Department of Education encourages projects that serve at-risk youth and their families. Funding for 12 new and 8 continuation grants in Fiscal Year 1993 totaled approximately \$3.7 million.

b. Secretary's Fund for Innovation in Education (FIE)

FIE, authorized under the Elementary and Secondary Education Act, identifies, supports and disseminates information about projects which demonstrate proven innovative educational approaches to improve the education of children at the preschool, elementary, and secondary levels. FIE supports a variety of activities including assessments, experiments, demonstrations, and dissemination and replication of promising reform materials. In Fiscal Year 1992, FIE appropriation was \$24 million. Of this amount, about \$2 million was administered by the Office of Elementary and Secondary Education for an Alcohol Abuse Education Program for children in grades 5 through 8, and an additional \$6 million was set aside by Congress for a high-technology demonstration grant. FIE programs include:

- Innovation in Education Program awards grants for a wide range of innovative projects that promise to make a difference in preschool, elementary and secondary education. Priority in 1992 and 1993 was given to projects that address the National Education Goals, including development of curricular frameworks, and school restructuring activities.
- The Comprehensive School Health Education Program focuses on activities related to improving health education for elementary and secondary students, including demonstrations and instructional programs for teachers, administrators, parents and communities. In Fiscal Year 1992, \$2.5 million was used for new school health grants.
- Computer-Based Instruction Program funds projects that strengthen and expand computer-based education resources in public and private elementary and secondary schools.

- The Technology Education Program makes awards for the development of materials for educational television and radio programming, and for the use of telecommunications and video resources in elementary and secondary schools.

c. Dwight D. Eisenhower National Program for Mathematics and Science Education

This program supports projects designed to improve the quality of teaching and instruction in mathematics and science in elementary and secondary schools. Over the last several years, priority has been given to those projects that focus on systemic reform in math and science education by developing new curricular frameworks in K-12 math and science education. In Fiscal Year 1993, \$15.9 million was appropriated for this program, of which approximately \$3 million was used for development of curricular frameworks. The program also supports a National Clearinghouse at an annual cost of approximately \$3.5 million.

d. Dwight D. Eisenhower Regional Consortium Program

This program supports the establishment and operation of Regional math and science educational consortiums to disseminate exemplary math and science education instructional materials and to provide technical assistance for the implementation of teaching methods and assessment tools for use by elementary and secondary school students, teachers, and administrators. In Fiscal Year 1993, \$13.6 million was appropriated for this program.

2. Office of Research

The Office of Research is responsible for improving the understanding and knowledge of education practice and policy. Approximately 80 percent of the Office of Research budget supports 19 education research centers at universities around the country while the remainder funds field initiated research projects. The Office of Research also supports the Educational Resources Information Center (ERIC), a nationwide information network which provides access to education information from a wide variety of sources.

a. Educational Research and Development Centers

Educational Research and Development Centers conduct long-term research and development in areas of national concern and disseminate their findings and products nationally. Research centers currently are conducting research in a variety of subjects including assessment and testing, education in inner cities, cultural diversity, learning styles, teacher evaluation, school restructuring, policy research, math and science, postsecondary teaching and learning, educational leadership, and effective schooling for disadvantaged students.

b. Field Initiated Studies

The Field Initiated Studies (FIS) program awards grants to institutions of higher education, public and private organizations, and individuals for research on a broad range of education-related topics that will advance educational theory and practice. OERI runs the FIS program to meet the General Education Provisions Act requirement that no less than \$500,000 be spent in each fiscal year to support field-initiated research. Grants generally range from about \$50,000 to \$100,000 and are made on an annual cycle. The Office of Research estimates that about 5 percent of proposals received are funded. In Fiscal Year 1992, 12 research projects were funded, including the following:

- The Southeast Asian Education Research Project is exploring factors that contribute to the educational performance of Southeast Asian refugee students in order to develop early intervention techniques to decrease their high school dropout rate.
- A study on Assessing Mathematical Thinking in At-Risk Learners will develop a model for assessing the mathematical thinking of at-risk students by focusing on environments that involve hands-on work, meaningful applications, and cooperative group interaction.
- A project on Story Discussions that Promote Reflective Thinking will investigate how students can learn to reason independently and think critically as they take positions on significant issues in the texts they read. Implications of this instructional strategy for teachers and for at-risk students will be explored.
- A study on Understanding Racial Differences in College Retention: the Relative Importance of Racial Climate and Remediation seeks to determine why, among students entering college, African Americans complete bachelor's degrees at a lower rate than white students and how to close the gap in college completion rates.

c. Fellows Program

The OERI Fellows Program provides fellowships to individuals to engage in educational research projects. Researchers conduct their studies in residence at OERI over a period of 4 to 12 months. Projects are pursued in the areas such as teaching and learning, education statistics, library resources and services; and other areas.

d. Evaluation of Education Reform

The Evaluation of Education Reform program seeks to improve education by finding and studying effective replicable models and practices that can be used to reform American education at the preschool, elementary, and secondary levels. The project

was developed through a collaborative process between the Office of Research and the potential users of the results of this research to ensure that the work focuses on critical issues and is useful. Areas of inquiry for the twelve projects range from early childhood education to school-to-work transition.

3. Programs for the Improvement of Practice

Programs for the Improvement of Practice (PIP) assist teachers, schools and administrators translate sound research findings into effective practice. To fulfill this mission, PIP makes education data and information about exemplary practices easily accessible to those seeking to improve education.

a. Jacob K. Javits Gifted and Talented Students Program

This program funds demonstrations and training projects to identify and meet the special education needs of gifted and talented elementary and secondary students, particularly those who are economically disadvantaged, with limited English-speaking proficiency, and students with disabilities. State and local education agencies, institutions of higher learning and other public and private agencies and organizations are eligible for funding. In Fiscal Year 1993, \$9.6 million was appropriated for this program.

b. National Diffusion Network

The National Diffusion Network (NDN), authorized under Chapter 2 of Title 1 of the Elementary and Secondary Education Act, identifies proven-exemplary programs and practices, disseminates information about them, and assists schools and other education providers in implementing them. In Fiscal Year 1993, \$14.6 million supported NDN grants for the following three types of projects:

- Developer Demonstration Projects grants are awarded to those exemplary programs that have been approved by the U.S. Department of Education's Program Effectiveness Panel. The grants enable project developers to disseminate information about their programs, and provide training, materials, and technical assistance to those who wish to adopt them.
- State Facilitator Project grants help facilitators work with schools and institutions within their States define the problems, determine which NDN programs should be adopted, and assist with the adoption of all relevant programs.
- Dissemination Process Project grants are designed to help project developers disseminate information, instructional materials, and services on projects previously approved by PEP.

c. Blue Ribbon Schools

The Blue Ribbon Schools program recognizes, in alternate years, outstanding public and private elementary and secondary schools. Evaluations are based on school philosophy, goals, organization, leadership, curriculum, instruction, student achievement, community relations, and commitment to improvement. In Fiscal Year 1993, just under \$1 million was appropriated for this program.

d. Star Schools Program

The Star Schools Program seeks to improve instruction in mathematics, science, foreign languages, literacy, vocational education, and other subjects, through the use of telecommunications technologies. The Program supports partnerships organized on a statewide or multistate basis to develop and acquire telecommunications equipment, and design and deliver the instructional programming to schools. The Star Schools Fiscal Year 1993 funding level was approximately \$22.7 million.

e. The Educational Partnerships Program

The Educational Partnerships Program funds 4-year partnership projects that involve school districts, universities, museums, nonprofit organizations, community and social service agencies, business, and parents' organizations. The partnerships focus community resources on elementary and secondary education. Since its inception, the program has funded 25 partnerships in 16 states. The Fiscal Year 1993 budget for this program totaled approximately \$4.1 million. OERI funded 4 new projects in Fiscal Year 1993.

f. Regional Educational Laboratories

OERI supports ten regional educational laboratories that identify the needs for school improvement within their respective geographic regions and help meet those needs through applied research, development, dissemination, and technical assistance. Laboratory contracts require that 30 percent of all awards support activities for rural schools.

4. National Center for Education Statistics

The National Center for Education Statistics (NCES) collects, analyzes, and disseminates data on a wide range of issues relating to elementary and secondary, postsecondary, adult and vocational education, and assists states and local education agencies in improving their statistical systems. NCES data comes from a number of ongoing surveys and longitudinal studies. NCES' three major annual publications are: *The Condition of Education*, *Digest of Education Statistics*, and *Projection of Education Statistics*. In addition, NCES publishes numerous reports and publications relating to education data.

a. Elementary and Secondary Education Surveys

NCES activities at the elementary and secondary level focus on the condition of public and private schools, and include national, state, and local data collection systems. In addition to its data collection programs, NCES is responsible by law for preparing an annual report on dropout, retention, and graduation rates. Data for the report come from the Census Bureau's Current Population Survey.

i. Common Core of Data. The Common Core of Data (CCD), NCES' primary database on elementary and secondary education, collects information annually from State educational agencies, local educational agencies and all public schools. The database contains basic information on elementary and secondary education, including general descriptive information on schools and school districts, data on students and staff, and fiscal data.

ii. School and Staffing Survey. The Schools and Staffing Survey (SASS) collects data on characteristics of public and private school teachers and administrators and their work place conditions. SASS was conducted in 1987-88, then again in 1990-91, and will be conducted at 3 year intervals hereafter.

iii. SASS Teacher Followup Survey. Each year following SASS, a subsample of SASS teachers is surveyed for the SASS Teacher Followup Survey. This survey was designed to collect information on teacher attrition and retention in public and private schools, and to project teacher demand. NCES is planning to add a longitudinal component to the Followup starting with the 1993-94 Survey. Teachers selected for Followups will be contacted for additional information at 3 year intervals at least three times.

iv. Private School Survey. The Private School Survey, similar in design to the CCD, provides NCES and others with biennial data on private schools, teachers, and students.

v. National Household Education Survey. The first National Household Education Survey (NHES), conducted in Spring 1991, surveyed parents of children ages 3-8 to find out about children's educational activities and the role of the family in the children's learning. NCES is planning to conduct NHES to address issues including: school-aged children's participation in before- and after-school programs, access and plans to finance postsecondary education, adult and continuing education, family support for and parental involvement in education, school safety and discipline, citizenship, grade retention, extra-school learning, and home-based education. Beginning in the Spring of 1993, NHES will be conducted annually and will include an early childhood education component as well as a topical component. Topical components will be repeated every 3 years to monitor change over time. In Fiscal Year 1993, the survey will emphasize "school readiness."

vi. Fast Response Survey System. The Fast Response Survey System (FRSS) was designed to enable NCES to collect issue-oriented data quickly and with minimum response burden. Recently conducted FRSS surveys include: a series of three surveys in April 1991 on issues relating to safe, disciplined, and drug free schools, National Education Goal 6, and two feasibility studies to determine the availability and accessibility of data relating to school compliance with federal laws.

NCES also is involved in a number of additional activities including:

- NCES provides funding to the Bureau of Census for the collection of school enrollment data for 3-5 year olds and persons over 35, and addition topics such as private school tuition, adult education, and vocational education.
- NCES aggregates and totals demographic data from the Census Bureau's decennial census for SEAs and LEAs.
- Twice a year, NCES brings state and local data collectors to Washington as part of the Cooperative System Fellows Program to encourage increased cooperation among federal, state, and local data collectors and to improve the overall quality and timeliness of education statistics.
- NCES works with the National Forum on Educational Statistics, a group of representatives from federal and State government data collection agencies, on issues relating to elementary and secondary education statistics and data collection.
- NCES established the National Data Resource Center to provide special statistical tabulations and analyses to state educational personnel, education researchers and others.
- Through the National Cooperative Education Statistics System, NCES assists states in developing feasibility studies and plans for improving and automating data systems.

b. Postsecondary Education Surveys

NCES higher education data systems provide statistical information pertaining to issues such as access to postsecondary education, enrollment trends, the cost of postsecondary education, student financing of postsecondary education, education outcomes, the long range financial outlook for postsecondary institutions, the demand for and supply of qualified faculty and staff, and job opportunities for graduates. In addition to planning new studies, NCES is currently working on two plans to enhance data collection activities, one would monitor postsecondary student performance and the other would establish education price and cost indexes.

- i. Integrated Postsecondary Education Data System.** The Integrated Postsecondary Education Data System (IPEDS) is an annual survey of the Nation's 10,500 public and private postsecondary education, their students, faculty and staff. In 1986, IPEDS replaced the Higher Education General Information Survey as the Department of Education's core postsecondary education data collection program. IPEDS differs from the previous system in that it includes all types of postsecondary institutions.
- ii. National Household Education Survey — Adult Education Component.** The Adult Education Component of the NHES was implemented in the spring of 1991 to provide information on adult education participants and nonparticipants. NCES intends to conduct the adult education component once every three years after 1991.
- iii. Recent College Graduates Study.** The Recent College Graduates Study (RCG), designed to monitor the potential supply of new teachers, collects information on the immediate post-degree employment and education experiences of college graduates. RCG has been conducted periodically since 1976. In 1993, NCCES plans to replace RCG with a longitudinal study of graduating college seniors, Baccalaureate and Beyond.
- iv. National Postsecondary Student Aid Study.** The National Postsecondary Student Aid Study is a comprehensive nationwide study of how students and their families pay for postsecondary education. NPSAS includes representative samples of undergraduates, graduates, and first-year professional students; students attending all types of postsecondary institutions; and students receiving financial aid as well as those who do not. The first NPSAS was conducted in 1986-87 and provided information on the cost of education, the distribution of financial aid, and the characteristics of aid and nonaided students and their families.
- v. National Survey of Postsecondary Faculty.** The National Survey of Postsecondary Faculty (NSOPF), cosponsored by the National Endowment for the Humanities, provides reliable and current data on a variety of issues relating to postsecondary faculty and instructors, including their backgrounds, responsibilities, workloads, salaries, benefits, and attitudes.
- vi. Survey of Earned Doctorates Awarded in the United States.** The Survey of Earned Doctorates Awarded in the United States is an annual study of doctoral recipients conducted by NCES in conjunction with the National Science Foundation, the National Endowment for the Humanities, the Department of Agriculture, and the National Institutes of Health.
- vii. Postsecondary Education Quick Information System.** The Postsecondary Education Quick Information System (PEQIS) is designed to enable NCES to collect data quickly on focused issues with minimum burden on respondents. PEQIS was designed in 1991. Surveys under consideration are: efforts to improve undergraduate

education; efforts to increase minority student achievement; hiring practices regarding new full-time faculty; teacher education reform; computer assisted learning; and the adequacy of facilities.

viii. Postsecondary Education Coordination Network. The SHEEO/NCES Postsecondary Education Coordination Network provides coordination and communication between NCES and state postsecondary education agencies to improve data collection and dissemination activities.

c. Educational Assessment

One of NCES's major responsibilities is the assessment and analysis of national educational outcomes. In 1990, NCES expanded its assessment activities to include state-level data collection.

i. National Assessment of Educational Progress. The National Assessment of Educational Progress (NAEP) is mandated by Congress to provide data and report information on the knowledge and skills of children and youth on a variety of school subjects. Current legislation requires assessments in reading and mathematics at least every 2 years, in science and writing at least every 4 years, and in history and geography at least every 6 years. Often referred to as the "Nation's Report Card," NAEP data were first collected in 1969. The survey has three components: an assessment of students in grades 4, 8, and 12; a school characteristics and policy survey; and a teacher survey. In 1990, NCES published a report, *Accelerating Academic Achievement*, summarizing NAEP findings since its inception.

The most recent NAEP, conducted in 1992, assessed nationally representative samples of fourth, eighth, and 12th grade students in reading, mathematics, and writing achievement. It also assessed State-representative samples of students in reading in grade 4, and in mathematics in grades 4 and 8. Results of the mathematics assessment have been published; data from the national samples show overall gains in achievement at all three grade levels between 1990 and 1992. Results of the reading assessment are to be released early in the Fall of 1993; those of the writing assessment are to be released later in the Fall.

ii. International Education Statistics. International Education Statistics (IES) provide statistical data for comparisons of the United States with other countries on topics such as student achievement, school participation rates, curriculum and instruction, teacher characteristics, and student attitudes and activities. NCES has played a central role in coordinating efforts to conduct international studies on student achievement and related subjects. The Third International Mathematics and Science Study is being planned with two phases (the first in 1995-96 and the second later in the decade), and will involve 35 countries including the United States. The two-phase study will examine student achievement, and differences in curriculum and instruction.

iii. High School Transcript Studies. Transcript studies use transcripts collected from school records to provide data on the course-taking patterns of students. NCES has conducted three transcript studies since 1980. Analysis for the third, which uses 1990 NAEP 12th-grade students, is still underway.

- The 1980 High School and Beyond Followup (see National Longitudinal Studies) included a transcript study component.
- 1987 High School Transcript Study consisted of approximately 22,700 seniors who had participated (as 11th graders) in the 1986 NAEP.
- The 1990 NAEP High School Transcript Study will monitor changes in the curricular patterns of high school students.

d. National Longitudinal Studies

NCES' National Longitudinal Studies program was designed to provide ongoing, descriptive information on the success of young people in making the transition from high school or college to the work force. The first longitudinal study, the National Longitudinal Study of the High School Class of 1972 (NLS-72), was conducted in 1972 and involved a cohort of high school seniors. In 1980, NCES conducted High School and Beyond (HS&B), which included sophomore and senior cohorts.

i. High School and Beyond. High School and Beyond (HS&B) was developed to provide additional information on issues raised in NLS-72, including educational attainment, employment, family formation, personal values, and community activities. HS&B began in 1980 and included a sophomore cohort as well as a senior cohort. The sophomore cohort was added to enable NCES to look at the issue of high school dropouts, and to study changes and processes during high school. Followups were conducted in 1984, 1986, and 1992, and another is planned for 1994 when most of the cohort will be in the work force or participating in postsecondary education.

ii. National Educational Longitudinal Study. Conducted in 1988, the National Educational Longitudinal Study (NELS:88) is the third major NCES longitudinal study. NELS:88 was designed to expand on the knowledge base of the first two by following children starting at an earlier age (8th grade) and by updating information throughout the 90s. NELS:88 and its followup surveys will provide trend data about critical transitions experienced by young people as they develop, attend school, and embark on careers. Followups were conducted in 1990 and 1992. In addition, a new NELS is being planned to begin in 1996.

iii. Beginning Postsecondary Student Longitudinal Study. The Beginning Postsecondary Student Longitudinal Study (BPS) was developed to improve data on students at the postsecondary level. BPS will examine the persistence, progress, and attainment of traditional and non-traditional students from initial time of entry into

postsecondary education through leaving and entering the work force. BPS, started in 1990, will continue to follow students at 2-year intervals. The first BPS report is expected to be released in the Spring of 1993.

In addition to the three ongoing longitudinal studies, NCES is developing two additional longitudinal studies in response to national data needs.

- The Baccalaureate and Beyond study (B&B) will follow students about to complete a bachelor's degree for at least 12 years beginning in 1993. The study will ask about education and work experience, community and political activities, family formation and future plans and expectations. One of the main purposes of the B&B is to determine the frequency of problems associated with access to and entry into graduate levels of education and the work force. B&B, which will also contain a transcript study component, will replace the Recent College Graduate Study.
- The Early Childhood Longitudinal Study will collect information on the education experiences of young children, and will explore such issues relating to health, family and educational histories that affect the chances of succeeding in school. NCES has not yet selected the age/grade levels for beginning this study.

e. Vocational Education Statistics

The Data on Vocational Education (DOVE) system derives data on vocational education from existing NCES secondary and postsecondary surveys. NCES recently started to collect high school transcripts that indicate how much vocational education students take to improve data collection at the secondary school level. Data on vocational education also is included in the Schools and Staffing Survey; the Integrated Postsecondary Education Data System; the National Postsecondary Student Aid Study; National Longitudinal Survey of 1972; High School and Beyond; and the National Education Longitudinal Study of 1988.

5. Library Programs

OERI's Office of Library Programs contribute to the development and improvement of the nation's libraries and library education by administering 11 programs under the Library Services and Construction Act (LSCA) and the Higher Education Act, Title II (HEA II). These programs support a wide range of projects in all types of libraries.

a. Library Services and Construction Act

Library Programs administers 4 formula grant programs and 3 discretionary grant programs authorized by LSCA to develop and improve State and local public libraries, library networking, and libraries serving Indian Tribes and Hawaiian Natives. States apply to the Department for formula grant funds which they then

administer. Libraries and other eligible entities may apply directly to the Department for discretionary grant funds. In Fiscal Year 1993, approximately \$130 million was appropriated for LSCA programs.

b. Higher Education Act, Title II

Library Programs administers 4 discretionary grant programs authorized under Title II of the Higher Education Act. These programs are designed to develop and improve education for librarianship, research in library and information science, and research and academic libraries. Libraries and other eligible entities may apply directly to the Department for discretionary funds. In Fiscal Year 1993, approximately \$17.4 million was appropriated for these programs.

I. Vocational and Adult Education

The Office of Vocational and Adult Education administers programs to help youth and adults develop the academic and occupational skills needed to work in a technologically advanced workforce. In Fiscal Year 1993, approximately \$1.5 billion was appropriated for vocational and adult education programs.

1. Vocational Education

In 1990, amendments to the Carl D. Perkins Vocational Education Act reauthorized and redesigned the federal vocational education programs. The Act emphasizes the integration of academic and vocational education and focuses on disadvantaged students. The Act also eliminated set-asides for some target populations, such as youth with disabilities (the American Indian and Hawaiian Native set-aside still exists), to give schools greater flexibility in improving vocational programs, and created several new programs, including the Business-Labor Education Partnership for Training Program (unfunded), and Tech-Prep Education Programs.

In Fiscal Year 1993, approximately \$1.2 billion was appropriated for vocational education programs. In addition to established vocational education programs, the President's Fiscal Year 1994 budget proposal includes \$135 million in funding for the Department of Education's share of the new \$270 million school-to-work transition initiative, which would be jointly funded with the Department of Labor. This initiative is designed to address the needs of non-college bound youth and ensure that they leave school with the ability to find productive employment.

a. Basic Grants

Funds for Basic Grants to States are allocated to States based on a formula. The grants, authorized under Title II of the Carl D. Perkins Vocational Education Act, are used to support vocational education programs at the secondary and postsecondary

levels. States are required to distribute at least 75 percent of their grant to schools; 10.5 percent to programs for single parents, displaced homemakers, and single pregnant women and for activities to eliminate gender bias and stereotyping in vocational education programs; and 1 percent for programs for criminal offenders. The 1990 Amendments to the Perkins Vocational Education Act require that States use these grants in programs that "integrate academic and vocation education." In Fiscal Year 1993, approximately \$973 million was appropriated for this program.

b. Community-Based Organizations

This program provides funding to States to support community-based organizations that provide special vocational education services to disadvantaged youth ages 16-21 not being adequately served by regular vocational education programs. Funding can be used for a variety of activities, including outreach, career intern programs, pre-vocational education preparation, basic skills development, transitional services, model programs for school dropouts, and guidance and counseling. In Fiscal Year 1993, \$11.8 million was appropriated for this program.

c. Consumer and Homemaking Education

This program provides formula grants to States to offer consumer education programs, services, and activities that prepare youth and adults for the occupation and responsibilities of homemaking. States offer instructional programs that include such topics as food and nutrition, individual and family health, parent education, child development, and home management. Emphasis is placed on projects that serve residents of economically depressed areas and/or areas with high rates of unemployment. Projects are designed to assist consumers, and to improve home environments and the quality of family life. In Fiscal Year 1993, \$34.7 million was appropriated for this program. The President's Fiscal Year 1994 budget proposal requests that no further funding be appropriated for this program.

d. Tech-Prep Education

The Tech Prep Education program, created by the 1990 Amendments to the Carl D. Perkins Vocational Education Act, provides formula grants to States to support consortia of local education agencies and postsecondary education institutions. The Consortia use the funding to plan, develop and operate 4-year programs that begin in the last two years of high school and continue with two years of higher education or an apprenticeship program. Students are expected to develop a common core of proficiency in mathematics, science, communications and special technologies, and earn an associate degree or certificate. Consortia also work on developing tech-prep education curricula and training guides for teachers and counselors. In Fiscal Year 1993, \$104.1 million was appropriated for this new and innovative program.

e. Tribally Controlled Postsecondary Vocational Institutions

This program provides federal assistance for the education and training of Indian students. In Fiscal Year 1993, \$2.9 million was provided to Tribally controlled postsecondary vocational institutions to cover the costs of training, instruction, equipment, administration and maintenance.

f. Research

The Vocational Education Research Program supports projects that improve access to vocational education programs for special populations and conduct research and development activities. The research program funds the National Center for Research in Vocational Education; six Curriculum Coordination Centers; a National Assessment of Vocational Education; and a variety of special research projects. Recent research projects have focused on the coordination and integration of education, vocational, health and related services at the State level. In Fiscal Year 1993, funding for this program totaled \$9.7 million.

- The National Center for Research in Vocational Education (NCRVE) conducts research and evaluations, disseminates information and materials, and studies the extent of coordination between vocational education and the Department of Labor's Job Training program. A competition for this grant is held every five years. In Fiscal Year 1993, a \$30 million grant was awarded to the University of California at Berkeley to continue to operate the NCRVE for the next five years. The Center will operate as a consortia of institutions.
- The Department of Education currently is funding 6 Curriculum Coordination Centers. These Centers coordinate and disseminate information, and provide technical assistance to the States on vocational education issues.

g. Demonstrations

Vocational Education Demonstrations support a variety of projects related to the development of business and education standards, integration of vocational and academic learning, corrections education, and school-to-work transition. In Fiscal Year 1993, \$16.7 million supported a number of vocational education demonstrations, including the Cooperative Demonstration Program. This program provides assistance for model projects that provide improved access to quality vocational education programs. Awards are made to projects that involve the successful cooperation of private and public sectors in training activities. About half of these education projects focus on training students for high technology and non-traditional occupations. In Fiscal Year 1990, about ten grants were awarded to drop-out prevention projects for youth. In Fiscal Year 1992, \$2 million supported 11 awards to improve and expand vocational education programs in correctional facilities, including juvenile facilities.

h. Bilingual Vocational Training

The Bilingual Vocational Training program provides assistance for bilingual vocational education and training for individuals with limited English proficiency to prepare them for jobs in newly emerging occupations. In Fiscal Year 1993, a total of \$2.9 million was appropriated for these programs. The President's Fiscal Year 1994 budget proposal requests no further funding for this program.

2. Adult Education

Adult Education programs are intended to help adults improve their academic and occupational skills to enable them to function productively in society. For the purposes of most programs, adults are defined as individuals over the age of 16 who are out of school and who are beyond the age of compulsory school attendance under their State's law. Because of the apparent overlap with the population we consider "youth," these programs are included in this report. In Fiscal Year 1993, a total of \$304 million was appropriated for State programs, National programs, Literacy Training for the Homeless Adults, Workplace Literacy Partnerships, State Literacy Resource Centers, and Literacy Programs for Prisoners.

a. Basic State Grant

Authorized under Part B of the Adult Education Act, the Basic State Grants program provides formula grants to State educational agencies to improve educational opportunities for adults and to encourage the establishment of adult education programs. The programs' objectives are to help adults acquire the basic educational skills necessary to function in a literate society, to enable those who so desire to complete secondary school, and to provide adults with job training and retraining programs. In Fiscal Year 1993, approximately \$255 million was appropriated for this program, which serves over 3 million people annually.

b. Adult Education National Programs

This program supports research and demonstration projects, evaluations, the National Institute for Literacy, and dissemination and other activities that contribute to the improvement and expansion of adult basic and secondary education. Fiscal Year 1994 funds would support on-going research and evaluation activities, including: evaluation of programs for low-literate adult and ESL students; surveys of non-traditional adult education providers and instructional practices; continued support for the JOBS evaluation; and technical assistance for State accountability and assessment. Fiscal Year 1993 funding for this program totaled \$8.8 million.

c. Literacy Training for Homeless Adults

The Literacy Training for Homeless Adults program makes grants to States to develop and implement literacy training and basic skills instruction for homeless adults. Since this program was started in 1987, the Department estimates that 150,000 adults have received literacy training. In Fiscal Year 1993, \$9.6 million was appropriated for this program.

d. Workplace Literacy Partnerships

The Workplace Literacy Partnerships program supports projects that demonstrate methods of providing job-related literacy training that results in improved productivity, new and continued employment opportunities, and career advancement for workers. \$18.9 million was available for this program in Fiscal Year 1993.

e. State Literacy Resource Centers

A new program in Fiscal Year 1993, this program established and maintains a network of 43 centers to coordinate the delivery of literacy services and advise States and local service providers on strengthening their literacy programs. The Fiscal Year 1993 appropriation for this project was \$7.9 million.

f. Literacy Programs for Prisoners

This program, first started in 1992, makes grants to State and local correctional agencies to establish programs to help incarcerated persons achieve functional literacy and learn basic life skills. In Fiscal Year 1993, \$4.9 million was appropriated for this program.

J. Postsecondary Education

The Office of Postsecondary Education directs and coordinates activities that assist institutions of higher education and students pursuing a postsecondary education. In Fiscal Year 1992, the Department of Education spent \$12.1 billion on higher education and student aid programs. In Fiscal Year 1993, a total of \$13.9 billion was appropriated for the Department of Education's postsecondary education programs.

1. Higher Education Programs

Higher Education programs include a variety of institutional discretionary and other targeted programs that support services and opportunities for underserved populations in critical educational areas.

a. Federal TRIO Programs — Student Support and Outreach Services

These programs fund postsecondary education outreach and student support services designed to encourage individuals from disadvantaged backgrounds to enter and complete college. These student information and support programs complement the Department's financial aid programs by helping to ensure access to postsecondary education for disadvantaged students and by providing them with the support they need to complete their programs successfully. In addition to the following programs, the Department also offers grants to support training and evaluation programs. In Fiscal Year 1993, approximately \$388 million was appropriated for these programs, and the President's Fiscal Year 1994 budget proposal includes a request for \$398.5 million.

i. Student Support Services. Student Support Services grants provide federal financial assistance for projects designed to help disadvantaged college students successfully complete their postsecondary education program. At least two thirds of students served are physically handicapped or low-income individuals who are first-generation college students. Funds may be used to provide personal and academic counseling, career guidance, instruction and tutoring, supplemental cultural and academic programs, and services for students with limited proficiency in English. An estimated 170,000 students were served in the 1991-92 school year. In Fiscal Year 1993, \$132 million was appropriated for this program.

ii. Upward Bound. Upward Bound funds projects that provide support and motivational services to high school students to help them succeed in postsecondary education programs. Most grants are awarded to postsecondary institutions and nonprofit organizations; however, high schools may qualify for assistance if there are no other applicants capable of providing services in the proposed target areas. Approximately 46,000 students are served annually. The Fiscal Year 1993 appropriation for this program was \$157.3 million.

iii. Talent Search. Talent Search helps identify, encourage, and counsel eligible 12-27 year olds, usually high school students, to complete high school and pursue some form of postsecondary education. Projects may also provide tutorial services to encourage dropouts to reenter education programs. Talent Search currently supports an estimated 285,000 students. The Fiscal Year 1993 appropriation included \$65.5 million for this program.

iv. Educational Opportunity Centers. Educational Opportunity Centers provide financial and academic information about higher education opportunities, as well as assistance in applying for admission, to individuals 19 years old or over. Centers serve an estimated 147,000 disadvantaged adults annually. Most grants are awarded to nonprofit organizations and community agencies. In Fiscal Year 1993, approximately \$20 million supported Center grants.

v. McNair Postbaccalaureate Program. The McNair Postbaccalaureate Program identifies low-income, first-generation college students, and students from groups that are underrepresented in graduate education, who are enrolled in a degree program at an eligible postsecondary institution, and provides them with necessary support services to effectively prepare them for graduate programs. The program currently serves approximately 1,700 students.

b. Title III: Aid for Institutional Development

Authorized under Title III of the Higher Education Act of 1965, as amended, Aid for Institutional Development programs are designed to strengthen the fiscal management and academic programs of financially needy postsecondary institutions that serve disadvantaged students, including historically black colleges and universities. In Fiscal Year 1993, approximately \$203 million was appropriated for these programs. The Fiscal Year 1994 budget requests approximately \$209 million for these programs.

i. Strengthening Historically Black Colleges and Universities (Part B). This program provides formula grants to Historically Black Colleges and Universities (HBCU) to strengthen their fiscal management and academic programs. In Fiscal Year 1993, total funding for this program was \$109.7 million.

ii. Strengthening Institutions Program (Part A). The Strengthening Institutions Program provides funds to eligible postsecondary schools to help them improve their academic quality, institutional management, and fiscal stability and to increase institutional self-sufficiency. The Fiscal Year 1993 budget included \$86.3 million for this program.

iii. Endowment Challenge Grant Program (Part C). The Endowment Challenge Grant Program provides matching funds to eligible institutions to promote fund-raising activities and to establish or increase endowment funds. The program is intended to foster increased independence and self-sufficiency. Twenty-five percent of the funds appropriated for this program are set-aside for HBCUs. Fiscal Year 1993 funding for these grants totaled \$7.4 million.

c. Incentive Programs

The following incentive programs provide federal support for projects that enhance postsecondary education quality and cost-effectiveness.

Incentive Programs at a Glance
Budget Authority in Millions

Incentive Programs	FY 93	(Request) FY 94
Fund for the Improvement of Postsecondary Education ...	\$15.9	\$17.9
Minority Science Improvement	5.9	5.9
Innovative Projects for Community Service	1.4	2.9
Minority Teacher Recruitment	2.5	2.5
Cooperative Education Program	13.7	0.0
Student Literacy and Mentoring Corps	5.3	1.0
International Education and Foreign Language Studies ...	55.1	58.1
Law School Clinical Experience	9.9	9.9
Urban Community Service Program	9.4	9.4
Dwight D. Eisenhower Leadership Program	3.5	0.0

i. Fund for the Improvement of Postsecondary Education. The Fund for the Improvement of Postsecondary Education provides competitive grants to encourage institutions of higher education to identify and pursue improvements in education quality. The Fiscal Year 1993 appropriation included \$16 million for this program.

ii. Minority Science Improvement. The Minority Science Improvement program provides financial assistance to improve science and engineering programs at postsecondary institutions with predominantly minority enrollment. The program is designed to enhance the capacity of such institutions to develop and maintain quality science education programs as well as to help increase the representation of minorities in science and engineering careers. In Fiscal Year 1993, \$5.9 million was available for this program.

iii. Innovative Projects for Community Service. This program encourages student participation in community service projects, including literacy projects, by awarding grants and contracts to institutions of higher education and other public and private nonprofit agencies to support innovative student volunteer activities. Fiscal Year 1993 funding for this program totaled \$1.4 million. The President has requested \$2.9 million for this program in the Fiscal Year 1994 budget proposal.

iv. Minority Teacher Recruitment. The Minority Teacher Recruitment program makes grants to institutions to support programs that encourage minority students to enter the teaching profession. In Fiscal Year 1993, funding for this program totaled \$2.5 million.

v. Cooperative Education Program. The Cooperative Education Program awards grants to institutions of higher education to support programs that integrate academic study with employment. In Fiscal Year 1993, \$13.7 million was allocated for this discretionary program. The President's Fiscal Year 1994 budget proposal eliminates funding for this program.

vi. Student Literacy and Mentoring Corps. The Student Literacy and Mentoring Corps makes two-year grants available to institutions of higher education to promote and operate community literacy and mentoring programs. The Fiscal Year 1993 budget included \$5.3 million for this program. The President's Fiscal Year 1994 budget request proposes a significant reduction in funding for this program, pending completion of a comprehensive evaluation of the program's effectiveness. The Fiscal Year 1994 request for \$1 million for this program also reflects the low level of institutional demand for the program.

vii. International Education and Foreign Language Studies. The International Education and Foreign Language Studies programs are designed to strengthen the capability and performance of American education in foreign languages and in area and international studies. IEFLS programs support comprehensive language and area study centers in the United States, fund research and curriculum development, and provide opportunities for American scholars to study abroad. In Fiscal Year 1993, funding for these programs totaled \$55.1 million.

viii. Law School Clinical Experience. The Law School Clinical Experience program was created in 1978 to help law schools establish or expand programs that offer students clinical experience. In Fiscal Year 1993, \$9.9 million was allocated for this program.

ix. Urban Community Service. The Urban Community Service program provides funds to urban universities, or consortia of such institutions, to support cooperative projects involving applied research, planning services, specialized training, technical assistance, or other services that address the high priority needs of urban communities. In Fiscal Year 1992, \$8 million supported 17 grants. Funding for this program in Fiscal Year 1993 totaled \$9.4 million.

x. Dwight D. Eisenhower Leadership Program. The Dwight D. Eisenhower Leadership Program, first funded in Fiscal Year 1993, awards grants to institutions of higher education or nonprofit organizations to support the development of student leadership skills. The Fiscal Year 1993 appropriation included \$3.5 million for this program. The President's Fiscal Year 1994 budget requests no additional funding for this program.

d. Scholarships and Fellowships

The Department of Education offers a number of scholarships and fellowships for undergraduate and graduate students designed to recognize student achievement, encourage students to continue in education, help needy students with the costs of pursuing education, and attract underrepresented groups into certain fields. In Fiscal Year 1993, \$92.5 million supported eight scholarship and fellowship programs. The President's Fiscal Year 1994 budget proposal includes a request for \$121 million for these programs, including \$8.5 million for a new Faculty Development Fellowship program.

e. Other Programs

i. Academic Facilities. Academic Facilities programs were created to provide financial assistance to institutions of higher education for the construction or renovation of academic facilities and the acquisition and maintenance of special research and instructional equipment. In Fiscal Year 1993, \$25.9 million was appropriated for these programs.

ii. School, College and University Partnerships. This program provides competitive grants to encourage partnerships between institutions of higher education, secondary schools, businesses and organizations to improve the academic skills of low-income high school students and prepare them for continued education or employment after graduation from high school. The Fiscal Year 1993 appropriation included \$3.9 million for this program.

iii. Legal Training for the Disadvantaged Legal Training for the Disadvantaged supports pre-law school preparation and stipends to assist disadvantaged students who wish to enter the legal profession. In Fiscal Year 1993, funding for this program totaled \$3 million.

iv. Howard University. Located in Washington, D.C., Howard University enrolls over 12,000 students in 17 undergraduate, graduate and professional schools, and also operates a teaching hospital. Howard offers access to and opportunity in postsecondary education for African American and others from disadvantaged backgrounds. Federal appropriations pay for approximately 55 percent of Howard's educational and general expenses and account for 46 percent of the University's total budget. In Fiscal Year 1993, the appropriation included \$187.6 million to support Howard's academic, endowment, research, and hospital programs. An additional \$6.4 million was appropriated for construction at the university. The President's Fiscal Year 1994 budget proposal includes \$192.7 for Howard University.

2. Student Aid Programs

The Office of Postsecondary Education administers a number of student aid programs, authorized primarily under Title IV of the Higher Education Act. In Fiscal Year 1993, approximately \$12.7 billion was appropriated for federal student aid programs, and an estimated 7 million students will receive federal aid to pursue postsecondary studies.

Student Aid Programs at a Glance
Budget Authority in Millions

<u>Federal Student Aid</u>	<u>FY 92</u>	<u>FY 93</u>	<u>Request FY 94</u>
Pell Grants	\$5,503.0	\$6,251.0	\$6,304.0
Federal Family Education Loans	4,129.0	5,159.0	3,868.0
Federal Direct Loans	0.0	10.0	149.0
Work-Study	615.0	617.0	527.0
Supplemental Grants	577.0	583.4	500.0
Perkins Loans	156.0	181.0	159.0
State Student Incentive Grants	72.0	72.4	0.0
Total	\$11,052.0	\$12,873.8	\$11,507.0

The President's Fiscal Year 1994 budget proposal includes several provisions designed to reform federal student aid programs. The most significant component is a proposal for a federal Direct Loan system. The new program would be phased in gradually, and would replace the Federal Family Education Loans by Fiscal Year 1998. The Federal Direct Loan system, which would continue to provide the same loan programs as FFEL, is intended to increase student benefits, improve accountability, and lower costs.

a. Federal Pell Grants

The Pell grant program, the Department's most need-focused student aid program, helps low- and middle-income students meet the costs of an undergraduate education. Grant awards vary depending on the financial circumstances of the student and his or her family. In Fiscal Year 1993, the maximum Pell grant was \$2,300.

In Fiscal Year 1993, the budget authority for Pell Grants was \$6 billion. With additional funds made available through a supplemental appropriation and transfers from the Department of Defense budget as authorized by the Dire Emergency Supplemental Appropriations Act of 1991, a total of \$6.4 billion was actually available for grants.

b. Campus-Based Programs

The Federal Supplemental Educational Opportunity Grant, the Federal Work Study Program, and the Federal Perkins Loans program are "campus-based" in that they are administered primarily by the participating educational institutions using yearly allocations of federal funds and matching institutional funds. These programs represent less than 9 percent of total federal student aid. The President's Fiscal Year 1994 budget includes significant reforms for these programs designed to give schools more flexibility in program administration and to increase community service options for students. In addition, the budget would reduce spending on these programs by a total of \$200 million.

- Federal Supplemental Educational Opportunity Grants (SEOG) provide assistance of up to \$4,000 per academic year to undergraduate students with demonstrated need. Institutions are required to provide at least 25 percent of all grants. Unlike Pell grants, SEOG Grant amounts are determined at the discretion of the institutional financial aid administrators. Schools are required to give priority to students with "exceptional need" and to Pell Grant recipients. The Fiscal Year 1993 budget included \$585 million for SEOG.
- The Federal Work Study Program provides grants to participating institutions to pay up to 75 percent of the salaries of undergraduate or graduate students working part-time, typically in on-campus jobs. The remaining 25 percent is provided by the school or other employer. In Fiscal Year 1993, approximately \$617 million was appropriated for this program.
- Over 3,000 institutions offer Federal Perkins Loans revolving funds at a five percent interest rate. Total assets for the fund now exceed \$5 billion, representing over 30 years of federal capital contributions. Under current law, institutions provide one dollar for every three federal dollars. In Fiscal Year 1993, funding for Perkins loans was \$168.6 million. Cancellation of loan obligations is available for individuals who undertake certain public service employment, such as teaching in Head Start programs, full-time law enforcement, or nursing. In Fiscal Year 1993, the federal government made \$14.9 million in loan cancellations.

c. Federal Family Education Loans

Federal Family Education Loans (FFEL), formerly referred to as Guaranteed Student Loans, are the single largest source of federal student aid. FFEL programs subsidize and guarantee loans made by commercial lenders to postsecondary students and their families. The major federal costs associated with FFEL are:

- Stafford Loan interest payments to lenders while students are in school and during certain grace and deferment periods;

- Special allowances to lenders for all FFEL loans to cover the difference between the borrower's interest rate and the most recent quarterly 91-day Treasury bill rate average plus 3.1 percentage points;
- Liabilities for principal and interest reimbursement to guarantee agencies due to borrower default, death, disability, or bankruptcy; and,
- Administrative allowances to guarantee agencies, which serve as the program's primary loan insurers and default collectors.

The following five programs are part of FFEL:

- Stafford Loans are subsidized, low-interest loans. In addition, the federal government pays the interest on the loans while the student is in school and during certain grace and deferment periods.
- Unsubsidized Stafford Loans are low interest loans; but, unlike the Stafford Loans, the federal government does not pay interest while the student is in school.
- Supplemental Loans for Students are less subsidized than Stafford Loans and are available primarily to independent undergraduates and graduate students. Interest rates for the loans are variable.
- The Parent Loans for Undergraduate Students (PLUS) Program provides loans to parents of dependent students for the student's education expenses. These loans are also less subsidized than the Stafford Loans.
- Consolidation Loans allow eligible borrowers with multiple student loans to consolidate their obligations and extend their repayment schedules.

d. State Student Incentive Grants

This program was designed to provide incentives for State-level, need-based postsecondary student financial assistance. Federal funds are matched dollar-for-dollar. In Fiscal Year 1993, \$72 million was appropriated for this program. The President's Fiscal Year 1994 budget proposal eliminates funding for this program. The program is considered to have long accomplished its objective of stimulating States to establish need-based postsecondary student aid programs.

¹*NICHCY News Digest, Volume 1, Number 2, 1991, page 1.*

²*The IDEA defines "related services" as "transportation, and such developmental, corrective, and other supportive services (including speech pathology and audiology, psychological services, physical and occupational therapy, recreation, including therapeutic recreation and social work services, and medical and counseling services, including rehabilitation counseling, except that such medical services shall be for diagnostic and evaluation purposes only) as may be required to assist a child with a disability to benefit from special education. [20 U.S.C. Chapter 33, Section 1401 (17), 1991].*

³*Fourteenth Annual Report to Congress on the Implementation of the Individuals with Disabilities Education Act, Office of Special Education, U.S. Office of Special Education and Rehabilitative Services, U.S. Department of Education, 1992, pp. xviii and pp. 107.*

IV. U.S. Department of Labor

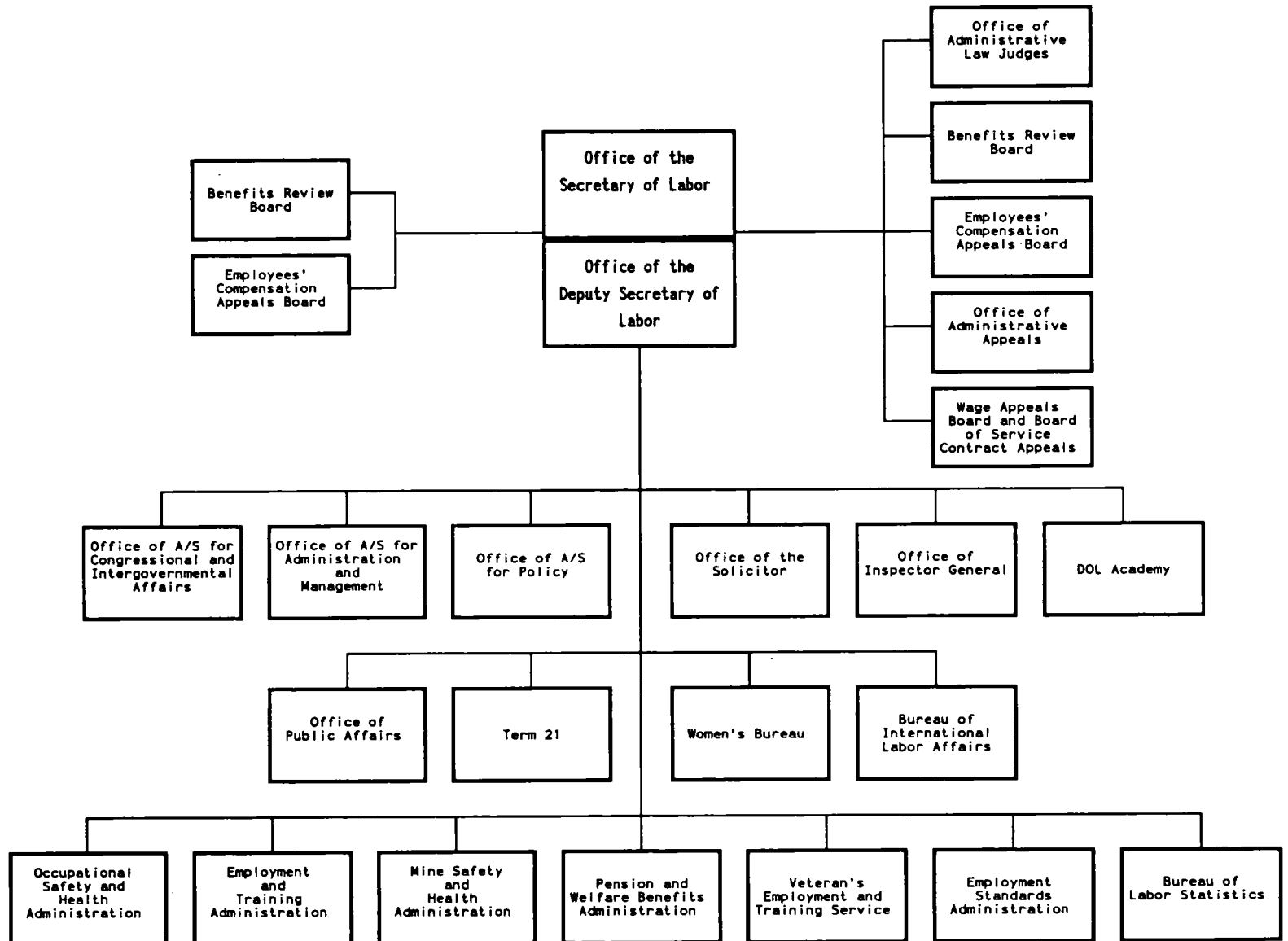
Overview

The United States Department of Labor (DOL) promotes and develops the education, training, working conditions, health and safety and living standards of our nation's workforce. The Department enforces laws that protect the job and pension rights and the safety and health of workers. It helps people find jobs. It sponsors training for those who need it. It guides the nation's unemployment insurance system. It keeps track of changes in employment and prices. It provides a variety of services and information to workers, employers, teachers, students, business people, government officials and others. The Labor Department was created by a 1913 act of Congress as a cabinet-level agency "to foster, promote and develop the welfare of the wage earners of the United States, to improve their working conditions, and to advance their opportunities for profitable employment."

The Department of Labor is committed not only to creating more jobs for all citizens, but to creating higher-wage jobs, and to supporting the business organizations which foster such jobs by continuously upgrading their workforces and providing safe and rewarding work for all their employees. Current DOL goals include: 1) providing a path to good first jobs for the 75 percent of our young people who do not complete four years of college; 2) helping workers who have permanently lost their jobs find new ones which pay at least as well; 3) supporting business organizations that create career ladders toward high-wage jobs even for workers without university degrees; and 4) fostering the creation of good jobs that pay well, provide a good work environment, and are family-friendly and responsive to the growing needs of single-parent and two-income families.

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A. Department of Labor Organization Chart



B. Department of Labor Employment and Training Administration Program Overview

Program	Services/Emphasis	FY 1993 Funding (in millions)
~~Summer Youth Employment and Training~~ STPA 113	Basic and remedial education, work experience, employment counseling, job training and related services to youth age 14-21.	\$1,000 ¹
~~Year-Round Youth Program~~ 11C	Education and training, tutoring, mentoring, transition and related services to economically disadvantaged youth 16-21. ²	\$702
Job Corps	Residential education and training program for severely disadvantaged youth aged 16-24.	\$133.2
Native American Programs	Job training, job referrals, counseling, and other employment-related services for Native American, Eskimo, Aleut, and Hawaiian populations.	\$62
Migrant/Seasonal Farmworker Programs	Training and employment-related services for migrant/seasonal farmworkers.	\$78
Employment Service	Job training, referrals, placement and related services for job seekers and employers; specialized assistance for youth 16-22.	\$811
Targeted Jobs Tax Credit	Federal income tax credits for employers who hire individuals from nine target groups, including economically disadvantaged youth.	\$15
National Occupational Information Coordinating Committee	Dissemination of occupation and career information for adults and youth.	\$5.4

¹ In the summer of 1992, program expenditures totaled \$1 billion, providing services to about 782,000 youth.

² A Service Delivery Area may serve 14 and 15 year olds if included in its job training plan.

C. Departmental Initiatives for Youth

a. School to Work Transition

The Department of Labor is collaborating with the Department of Education to help lay the foundation for a school-to-work transition system. Currently, the United States lacks a comprehensive system to help young Americans acquire the knowledge, skills, abilities, and information about the labor market necessary to make an effective transition from high school to career-oriented work or further education. To address this situation, the two Departments are developing a legislative proposal that establishes a national framework within which all States can create school-to-work systems that offer all young people access to an education and training program that will prepare them for a first full-time job in a high-skilled, high-wage career. For some time, the Departments have been exploring ways to strengthen the connection between school and work. In 1990, they jointly sponsored a national conference, "The Quality Connection: Linking Work and Education," which set forth basic principles of an effective school-to-work transition system.

b. Skill Standards and Certification

The Departments of Labor and Education are working to develop a national framework for a skill standards system, which, when connected to educational standards, will help create a seamless system of lifelong learning opportunities, with certifications of mastery and competency that are accepted and rewarded by employers. This would also be beneficial for incumbent workers who wish to enhance their job security or skill portability. These voluntary skills standards must be designed with private sector leadership, be free from gender, racial, or other bias, and apply from initial through master levels of competency. The Administration has proposed (in the Goals 2000: Educate America Act) the creation of a National Skill Standards Board to stimulate the development and guide the adoption of skill standards and certification.

c. The Secretary's Commission on Achieving Necessary Skills (SCANS)

This was established in 1990 for a two-year period. A 31 member commission comprised of representatives from education, business, labor and State government, SCANS released two reports which have policy significance for labor and education programs. The first report, "What Work Requires of Schools," described the skills needed by all workers to be successful and productive in a modern economy. It defined what employers want the students coming out of our schools to know. SCANS listed five basic competencies that comprise "workplace know-how," which are the ability to use resources, technology, information, systems, and to work with others. SCANS also emphasized that schools must play a role in helping young people develop the basic skills, thinking skills and personal qualities that make a worker dedicated, trustworthy and responsible. The final report, "Learning a Living:

A Blueprint for High Performance," called for the reinvention of American education, "a radically different organization of work and an emphasis on work-based learning," and the development of high national standards and an assessment system.

d. Youth Fair Chance Program

This new program, authorized by the Job Training Reform Amendments, is designed to ensure access to education and training assistance for youth residing in high poverty urban and rural areas; provide a comprehensive range of services to disadvantaged youth who are not currently served or are under-served by federal education and job training programs; enable communities with high concentrations of poverty to establish and meet goals for improving the opportunities available to youth within the community; and facilitate the coordination of comprehensive services to youth in such communities. The program is modeled after the pilot Youth Opportunities Unlimited program. The Secretary of Labor is to issue not more than 25 grants during the first year authorized. The Administration's budget request was \$25 million for Youth Fair Chance in Fiscal Year 1994 (July 1, 1994 through June 30, 1995).

D. Employment and Training Administration

In inner-city poverty areas, large proportions of minority youth – well over 50 percent – are high school dropouts, and the employment-population ratio for such youth ages 16 and 17 is a dismal 18 percent.¹

The Employment and Training Administration (ETA) is responsible for administering employment and training programs for the economically disadvantaged, unemployed and displaced workers; the Federal-State Employment Service System; and the Unemployment Insurance Service. The Job Training Partnership Act (JTPA), enacted in 1982, and amended in 1992 (Public Law 102-367, "Job Training Reform Amendments of 1992") establishes programs to prepare youth and unskilled adults for entry into the labor force and to afford job training to those economically disadvantaged individuals and others facing serious barriers to employment who are in special need of such training to obtain productive employment.

Job Training Partnership Act: An Overview

The Act has seven titles or major sections:

Title I	Sets forth general requirements for programs, as well as some requirements for State and local operation of programs.
Title II	Authorizes funding and provides requirements for State and local operation of adult and youth programs for the economically disadvantaged. Part A covers the adult training program; Part B covers the summer youth employment and training program; and Part C describes the year-round youth training program.
Title III	Provides for operation of State and sub-state programs of employment and training assistance for dislocated workers.
Title IV	Establishes requirements for federally administered programs and activities, including programs for Native Americans, migrant workers and veterans; Job Corps; research and evaluation programs; pilots and demonstrations; capacity building, information dissemination and replication; labor market information; Youth Fair Chance Program; Microenterprise grant program; and disaster relief employment program.
Title V	Establishes the Jobs for Employable Dependent Individuals Incentive Bonus program (JEDI).
Title VI	Miscellaneous provisions.
Title VII	Provides for the establishment of State human resource investment councils by States.

1. JTPA Youth Programs

a. Title II-B: Summer Youth Employment and Training Program

The Summer Youth Employment and Training Program (Title II-B) is designed to enhance the basic educational skills of youth; encourage school completion or enrollment in supplementary or alternative school programs; provide eligible youth with exposure to the world of work; and enhance the citizenship skills of youth.

The program serves individuals age 14 through 21 who are economically disadvantaged or eligible for free lunch under the National School Lunch Act. Funding provides support for the following: basic and remedial education; work experience programs; youth corps programs; employment counseling; occupational training; preparation for work; outreach and enrollment activities; employability assessment, including a review of basic skills, occupational skills, prior work experience, interests, aptitudes, and supportive service needs; job referral and placement; job search assistance and job club activities; linkages with appropriate educational agencies; and any other employment or job training activity designed to employ, prepare individuals for, or place individuals in employment. In the Summer of 1992, program expenditures totaled \$1 billion, and some 782,000 youth were served.

b. Title II-C: Year-Round Youth Program

The Year-Round Youth Program (Title II-C) is designed to: 1) improve the long-term employability of youth; 2) enhance the educational, occupational, and citizenship skills of youth; 3) encourage school completion or enrollment in alternative school programs; 4) increase the employment and earnings of youth; 5) reduce welfare dependency; and 6) assist youth in addressing problems that impair them from making successful transitions from school to work, to apprenticeships, the military, or postsecondary education and training. Title II-C was created by the 1992 Amendments to the JTPA. Prior to the 1992 legislation, youth training had been a part of the Title II-A adult training program.

The Year-Round Youth Program provides job training and educational services to economically disadvantaged youth ages 16 through 21. Youth who participate in a compensatory education program under Chapter 1 of the Elementary and Secondary Education Act, or who have been eligible for free meals under the National School Lunch Act during the most recent school year, are considered eligible for the program. A Service Delivery Area may serve 14- and 15-year-olds if included in its job training plan.

Not less than 50 percent of those served must be out-of-school individuals (different from those who have dropped out of school); and participants who are school dropouts under the age of 18 must attend a school, or program such as a high school equivalency program. In addition, to ensure targeting to hard-to-serve individuals, not less than 65 percent of youth served must have at least one of the following seven barriers: basic skills deficient; one or more grade levels behind (for in-school youth) or a school dropout (for out-of-school youth); pregnant or parenting; those with disabilities; homeless or runaway youth; and offenders.

In addition to the direct training services outlined in the Title II-A adult programs, the program authorizes the following services: tutoring and study skills training; eligible alternative high school services; instruction leading to high school completion or the equivalent; mentoring; limited internships in the private sector;

training or education that is combined with community and youth service opportunities; entry employment experience programs; school-to-work transition services; school-to-postsecondary education transition services; and preemployment and work maturity skills training. Total Fiscal Year 1993 appropriations for the year-round youth program were approximately \$702 million.

c. Job Corps

Job Corps is a national residential education and training program for severely disadvantaged youth 16 through 24 years of age. The program prepares youth for stable, productive employment and entrance into vocational/technical schools, junior colleges, military service, or other institutions for further education and training. Job Corps was originally established by the Economic Opportunity Act of 1964; current authorization for the program is Title IV-B of the Job Training Partnership Act.

Job Corps is highly targeted to the most severely disadvantaged youth between the ages of 16 and 24 facing multiple barriers to employment. The program provides a comprehensive mix of services which address these multiple barriers in an integrated and coordinated manner in one facility. Students spend about 50 percent of their time in basic education and 50 percent in vocational skills training.

Approximately one third of Job Corps students drop out within the first 90 days of enrollment. These are generally students who cannot adjust to the institutional setting or the disciplined environment, who become homesick or have personal or family problems. Of the two-thirds who remain, those who remain enrolled for longer periods of time are more likely to attain a high school equivalency diploma and complete skills training, and are more likely to be placed in employment at higher wages than are early dropouts. During Program Year 1991, 69 percent of all students were placed into jobs (54 percent) or enrolled in further education programs (15 percent). Some 43 percent of those eligible attain their GED, and 27 percent complete their vocational skills training.

Characteristics of Students Served in Job Corps in Program Year 1991

Average age at entry	18
Male	62.3%
Female	37.7%
Minority	68.0%
Entry reading level	7.0
High school dropout	80.6%
Never employed full time	73.4%
Families on public assistance	42.1%
New students served	62,205
Total participants	101,052
Average length of stay	7.6 months

Job Corps operates through a partnership of government, labor, and the private sector. The government provides the facilities and equipment for Job Corps centers and the funding for recruitment of enrollees, center operations, and placement of enrollees upon termination. Major corporations and nonprofit organizations manage and operate 78 Job Corps centers under contractual agreements with the Department of Labor. These contract center operators are selected through a competitive procurement process which takes into account technical expertise and proposed costs. In addition, the Departments of Agriculture and Interior operate 30 Job Corps centers – called Civilian Conservation Centers – on public lands throughout the country under interagency agreements with the Department of Labor.

In Program Years 1991 and 1992, Job Corps introduced an expanded comprehensive, competency-based pre-literacy to pre-college academic education program. The new program stresses problem solving and higher level thinking skills. Additions to the program include structured courses in writing and thinking skills, English as a Second Language (ESL), an expanded health education curriculum, cultural awareness and parenting. The program also includes precollege and advanced technical skills. In addition, an innovative Computer Managed Instruction system is being phased into all Job Corps center education programs over a two-year period. The system will guide, score and record student progress, and provide each student with immediate feedback on his or her learning status.

The President's Budget requested \$1.2 billion for this program in 1994, which includes \$133.2 million to begin an expansion of the program to increase the slot level to 67,500 and increase the number of centers from 112 to 162; and \$30 million to finance the backlog of repair and relocation needs.

d. Title II-A

Until the 1992 JTPA Amendments, Title II-A of JTPA, now the adult training program, covered both youth and adult job training programs. In 1991, 244,225 youth completed a Title II-A program, 36 percent of whom entered employment upon program completion. The following provides additional information on the characteristics of 1991 Title II-A youth participants.

**Characteristics of JTPA Title IIA Youth Participants
Program Year 1991**

<u>Characteristics</u>	<u>Youth</u>	<u>Percent</u>
Program Completers	244,225	100
Male	115,952	47
Female	128,277	53
Age 14-15	40,435	17
Age 16-17	78,331	32
Age 18-21	125,442	51
School Dropout	62,966	26
Student	120,681	49
High School Graduate or more	60,391	25
White	102,343	42
Black	86,323	35
Hispanic	46,978	19
Other	8,578	4
Single Head of Household	27,138	11
Limited English	11,856	5
Disabled	36,435	15
Offender	15,318	6
Reading Skills Below 7th Grade	79,168	32
Welfare Recipient	61,978	25
Long-term AFDC Recipient	27,081	11
Lacks Work History	114,002	47
Homeless	1,053	1
JOBS Program Participant	10,461	4
Entered Employment	88,619	36
Attained Employability Enhancement	91,426	37
Average Weeks Participated	27 weeks	
Average Hourly Wage at Placement	\$5.01	

2. Other National Programs

In addition to the programs that are targeted exclusively toward youth, several other ETA programs, particularly those designed to provide services to special target groups, include a sizable number of youth among their participants.

a. Native American Programs

To help eligible individuals prepare for and hold productive jobs, Native American programs offer job training, job referrals, counseling, and other employment-related services, such as child care, transportation, and training allowances. Those eligible for the program include Indians, Eskimos, Aleuts, Hawaiians, and other persons of Native American descent who are economically disadvantaged, unemployed, or underemployed. In Program Year 1991, 180 Native American grantees served approximately 27,000 Native American participants with expenditures of \$59 million. Approximately twenty-three percent of participants were 21 years old or younger. Program Year 1993 appropriations are approximately \$62 million.

b. Migrant and Seasonal Farmworker Programs

These programs help combat chronic unemployment, underemployment, and substandard living conditions among migrant and seasonal farmworkers and their families nationwide. They are designed to help farmworkers who seek alternative job opportunities secure stable employment at an income above the poverty level and to improve the living standard of those who remain in the agricultural labor force. Through grants to public and private nonprofit institutions, economically disadvantaged farmworker families are provided with training and other employment-related services, including classroom instruction, on-the-job training, work experience, and supportive services, which include day care, health care, legal aid, transportation assistance, and food and housing in emergency situations. Farmworker programs served some 56,500 persons in Program Year 1991, with expenditures of \$70.3 million. Nineteen percent of participants were 21 years old or younger. Program Year 1993 appropriations are approximately \$78 million.

c. Employment Service

The public employment service assists millions of job seekers and employers, and in some areas, provides job training and related services. In addition to job referral and placement, local employment service offices may offer job seekers and employers a wide range of services and assistance, including testing, counseling, workshops in job search techniques, instruction in resume writing, interviewing techniques, job fairs, labor market information, mass screening, job analysis for restructuring jobs, outplacement assistance, and specialized recruitment to meet affirmative action plans. In accordance with their needs, States may provide specialized assistance to such groups as youth ages 16 to 22,

women, older workers, persons with disabilities, rural residents and workers, and the economically disadvantaged. The Department funds a number of projects designed to share job vacancies in an automated nationwide job bank, multi-state job banks, and an automated labor exchange which enables self-searches by job seekers. The Department also funds an Employers National Job Service Committee, a volunteer organization of employers to inform other employers about the processes for hiring and training special groups of workers, including among them, at-risk youth. Total Fiscal Year 1993 appropriations for the Employment Service are approximately \$811 million.

d. Targeted Jobs Tax Credit

This program provides credits against federal income tax liability for employers who hire individuals from nine target groups. These groups include economically disadvantaged youth and welfare recipients who traditionally find it difficult to obtain and hold a job. The program is jointly administered by the Departments of Labor and Treasury. For most target groups, employers may claim a credit of 40 percent of the first \$6,000 of an employee's first year's wages, for a maximum of \$2,400. For economically disadvantaged summer youth employees, employers may claim a credit of 40 percent of wages, up to \$3,000, for a maximum credit of \$1,200. Fiscal Year 1993 appropriations total nearly \$15 million.

e. National Occupational Information Coordinating Committee

This Committee assists States to promote the development, improvement, dissemination and use of occupational and career information. This information supports employment, training, and vocational program planning at the State and local levels and career exploration by youth and adults. The national and State network conducts a variety of programs and activities to improve and make more accessible career planning information for both adults and youth. Fiscal Year 1993 appropriations for NOICC total \$5.4 million.

3. Pilots, Demonstrations, Research and Evaluations

a. Dilemmas in Youth Employment Programming: Findings from the Youth Research and Technical Assistance Project

In a two-volume research and evaluation report produced by Public/Private Ventures and Brandeis University, researchers conducted a broad review of what is known in the field of youth employment and training. Published in ten papers, the findings examine what programs and services best prepare youth for jobs and careers; the characteristics of effective service delivery; and the factors regarding youth, their environment, and the labor market, that must be addressed in providing these services. Eight of the ten papers report a scarcity of data and reliable research on which to base firm conclusions about the best directions for future policy and programming. Regarding program effectiveness, the researchers

point to the serious problems of the youth served in the programs, and conclude that the intersecting problems of poverty, inadequate housing, dysfunctional families and poor education have powerfully negative effects on youngsters drawn to employment training programs. Many authors argue that multi-component programs, programs that combine a range of strategies and services, represent the best hope for enhancing the effectiveness of program offerings for youth. To control costs, some argue for coordination of service agencies. One researcher notes the critical need for interagency coordination, and the historical difficulties government agencies have had in finding common ground on which to collaborate. The potential of performance incentives and lessons from other countries represent other directions worthy of pursuit.

b. Youth Opportunities Unlimited

The Youth Opportunities Unlimited (YOU) program was initiated in Program Year 1989 to provide comprehensive employment and training services to youth in high-poverty areas (30 percent or higher levels of poverty). YOU uses a multifaceted model neighborhood approach combining education, health, housing, child development, employment and training, sports and recreation and family support components. The Department of Labor, in conjunction with the Department of Health and Human Services, awarded \$19 million in three-year grants to six urban sites and one rural site. The demonstration is being evaluated over five years by the Academy for Educational Development. To date, positive initiatives have been started in all seven sites, but available resources are small compared to the complex social problems in those areas. It is apparent that it will take more time and resources to have significant community impacts on school dropout rates, school attendance, and teen pregnancy. In 1992, the demonstration was extended to four more urban sites, for three years, with funding planned at \$2 million per year, or \$6 million total.

c. High School Redirection

High School Redirection is a successful alternative high school in Brooklyn, New York that enrolls youth who have had chronic truancy or other problems in regular high schools. Among its core features is the STAR program, an intensive reading program in which students stay with the same teacher for five periods every day to concentrate on reading development. The Department of Labor awarded \$5.6 million in grants to seven cities to continue to replicate the model through local school systems and JTPA. These schools represent a bridge between the educational and job training systems, providing a common service deliverer to which both can refer youth in need of intensive remedial education in an alternative setting. Each demonstration site must have open admission, enrollment based on referral, not location, separate location from the regular high school, limited enrollment, location in a poor neighborhood, the STAR program

component, operation by the Board of Education with a degree of autonomy, on-site day care, and limited extracurricular activities. Sites will be evaluated during the third and fourth year of operation.

d. New Chance

This 16-site demonstration is aimed at increasing the long-term employability of young women who have been teenage mothers. The target population is mothers, 16-22 years old who gave birth at age 19 or younger, receive welfare, do not have a high school diploma or GED, and are not pregnant when they enter the program. The focus of New Chance is on the integration of services, which include: 1) educational development through instruction in basic academic skills and GED preparation; 2) employability development through enhancement of career exploration and preemployment skills, vocational skills training, work internships and summer work experience, and job placement assistance; 3) personal and social development; and 4) services to enhance the development of participants' children. New Chance, which began in Program Year 1988, includes a two- and four-year follow-up of participants. A final report on the program's impacts, benefits and costs is scheduled for late 1995. Funding is through a consortium of public and private sponsors, including the Department of Labor (Department of Labor funding totaled \$2.2 million).

e. The School-to-Work Connection

Since 1990, the Department has funded 22 school-to-work connection demonstration grants to test the effectiveness of various local site models (including youth apprenticeship) for assisting students to make the transition from school to work. The grants have been awarded primarily to aid in the development of school-to-work transition policy. The demonstrations feature the close involvement of various industries and firms in the educational process, the integration of academic, vocational, and work-related instruction, and the provision of training-related employment opportunities for participants. The target population is secondary school students, primarily those who do not plan to attend college.

f. Youth Apprenticeship

The Department has awarded grants to ten organizations across the country to support the development of a nationwide system of Youth Apprenticeship. This \$11.7 million program announced in November 1992 is expected to fundamentally change the way U.S. students learn basic workplace skills and prepare to enter the workforce. These grants are designed to explore ways of strengthening the transition of America's youth from school to work by redesigning school curricula so that students learn work-related subjects in a practical context and non-college

bound students are better prepared to enter the workforce. The Department's \$2.5 million in seed money is leveraged into an \$11.7 million program, with \$9.2 million being provided by other organizations.

g. Job Training for the Homeless Demonstration Program

The Stewart B. McKinney Homeless Assistance Act of 1987 authorizes a demonstration program through which the Department of Labor awards grants to public and private agencies to demonstrate innovative and replicable approaches to providing job training to the homeless population. The individual projects serve diverse subgroups within the homeless population including the chronically mentally ill, substance abusers, families with children, single men, single women, youth and Native Americans. Some findings from early experience show that: 1) project operators should carefully assess participants at the outset to determine who can benefit most from such services; 2) operators should consider using case management to arrange for needed services and keep clients on track; and 3) regardless of success in helping clients find and keep jobs, many need additional assistance if they are to find and afford permanent housing. In recent years, through a cooperative agreement between the Departments of Labor and Housing and Urban Development, the demonstration has placed greater emphasis on transitional housing during training, and permanent housing after placement. During the 12 months ending April 30, 1992, the program served 6,740 through 21 grantees in 12 States and the District of Columbia. The program was funded for a total of \$8.5 million for the period.

h. Criminally At-Risk Youth

This demonstration, jointly funded by the Departments of Labor and HHS, is designed to investigate the effectiveness of a coordinated service delivery approach for youth who have committed a crime, are involved in activities such as gangs, or are homeless. This demonstration seeks to assist participating youth prepare for self-sufficiency, with an emphasis on improving their employability and well-being; preventing their involvement in criminal or at-risk activities; and reducing their arrest or recidivism rates. The target population is youth aged 14 to 22 who have committed a crime or have been identified by law enforcement as engaging in at-risk activities or are homeless. Department of Labor funding for this demonstration is \$500,000.

i. Improving the Employability of Youth With Moderate and Severe Disabilities

This demonstration, jointly funded by the Departments of Labor and HHS, tests models of school-to-work transition strategies for youth, ages 13 to 24, with moderate and severe physical or mental disabilities. The project's primary objective is to enable youth to obtain competitive employment using natural supports and not external support systems. The program aims to help youth and

their families identify and use supports that originate in the home, workplace and community; and assist youth to acquire the competencies, skills, and experience necessary to make a transition to the workplace. The demonstration, begun in 1991, is scheduled to run for five years, with Department of Labor funding is planned at \$750,000 per year.

j. Young Unwed Fathers Project

This demonstration, now in the pilot phase, investigates various approaches to helping unwed fathers improve their earning capacity and develop responsible parenting behaviors. The program aims to improve the long-term employability, parenting capabilities and earnings of young fathers between the ages of 16 and 25, who are unemployed and eligible for JTPA services. The program offers employment and training, parenting/fatherhood curriculum, education services, counseling and support. Department of Labor funding is \$200,000, with most sites also using local JTPA funds.

k. Careers Match Program

This is a school-to-work transition program designed to enhance the work readiness skills of inner-city youth. The target population is students in the 9th to 12th grade who are economically disadvantaged, educationally disadvantaged, residents of inner city poverty areas, and have demonstrated some potential to benefit from the program. Beginning in the 9th grade and continuing through the 12th grade, participants are provided a balanced academic and life experience curriculum, counseling, work experience, job search and work behavior training, assessment and school-to-work transition assistance. The project aims to increase school completion rates from 50 percent to 90 percent or more; instill enrollees with acceptable work-readiness skills; prepare those seeking college admission with adequate academic skills; and provide a demonstration site for professional training for replication. An evaluation at the end of the fourth year will examine results in attendance, academic progress, retention and other in-school indicators. This is a 5 year demonstration which began in 1989, with Department of Labor funding of \$2 million.

E. Bureau of Labor Statistics

The Bureau of Labor Statistics collects and analyzes statistics on employment and earnings, unemployment, the labor market in general, and selected population segments, including youth. Through such publications as the "Handbook of Labor Statistics" and "Employment and Earnings," they report periodically on the employment situation nationally, and publish statistics by race, sex, age, and other characteristics. One age group regularly covered includes those 16 to 19 years of age. They prepare special reports on employment and unemployment among

youth, the proportion of high school graduates attending college, the projected size of the summer youth labor force, and other relevant statistics on which policy and program officials may base their planning. The Bureau also issues occasional reports on issues of current interest to policymakers and the general public.

a. Occupational Outlook Quarterly

This provides timely and helpful information about the job outlook in general and for specific groups such as college graduates or young workers. Recent issues have covered such topics as the 1990-2005 job outlook; more college graduates chasing fewer jobs; entry level jobs, defining them and counting them; profile of young workers, how workers get their training, characteristics of occupational entrants, and other such topics.

b. Occupational Outlook Handbook

Published biennially, this provides career guidance and essential information about prospective changes in the world of work and the qualifications that will be needed by tomorrow's workers. It describes about 250 occupations in detail, covering about 107 million jobs, or 87 percent of all jobs in the nation.

The handbook covers: 1) the nature of the work, what workers typically do on the job, what tools or equipment they use, how closely they are supervised, the end products of their efforts, how much variety there is in the daily routine, and how technological innovations are changing what workers do or how they do it; 2) working conditions, including work hours, the physical environment, workers susceptibility to injury and illness, and protective clothing and safety equipment that commonly are worn; 3) employment, including number of jobs in this occupation and in what industries they are found; 4) training, other qualifications and advancement; 5) job outlook, the factors that will affect employment in the occupation through the year 2005; 6) earnings, indicating how much workers in the occupation generally earn; 7) related occupations, those which involve similar aptitudes, interests, education and training. It also guides job seekers on where to find information about occupations, counseling, education and training, financial aid, and finding a job.

c. Career Guide to Industries

This presents information useful to individuals planning their careers or job seekers who wish to look at particular industries, such as health services, aerospace manufacturing, or the federal government. This Guide helps potential members of the workforce choose a career and search for a job, by providing information about industries and the job opportunities associated with each. The Guide addresses questions concerning job opportunities in over 40 diverse industries which, when combined, account for almost three-quarters of all wage

and salary jobs in 1990. For each industry, the Guide provides information on the nature of the industry, employment, working conditions, occupations in the industry, training and advancement, earnings and benefits, and outlook.

d. How Workers Get Their Training: A 1991 Update

Through a supplement to the Current Population Survey data were collected and analyzed on how workers develop the skills they need for their jobs. Results were published in this report, which provides information on the percent of workers who needed or had taken specific training, worker characteristics, sources of training, occupation and industry, and sponsors.

F. Occupational Safety and Health Administration

The Occupational Safety and Health Administration administers the Occupational Safety and Health Act of 1970, designed to assure so far as possible every working man and woman in the Nation safe and healthful working conditions and to preserve our human resources. In administering the Act, OSHA issues standards and rules for safe and healthful working conditions, tools, equipment, facilities, and processes. OSHA also conducts workplace inspections to assure the standards are followed. When OSHA compliance officers discover hazards in establishments during inspections, employers may be issued citations listing alleged violations, and penalties and abatement periods may be proposed. Of course, young workers are among all who benefit from OSHA's work. New standards are developed as they become necessary. Recent standards and issues being examined include motor vehicle safety, ergonomics, petrochemical safety, construction safety, hazard communication, bloodborne diseases (protecting workers against the hazards of AIDs and hepatitis B viruses), workplace smoking and indoor air quality. In addition to covering the safety and health of all workers, which includes youth, the agency also works to promote more young people and students working toward degrees and careers in occupational safety and health.

G. The Women's Bureau

The Women's Bureau works to improve the economic status of women by seeking equity in employment policies. The Bureau disseminates information about women and work to support development of programs that enhance women's job skills and employment potential. Over the years, the Bureau has conducted several demonstration projects which targeted specific groups, among them, teen mothers. For example, one demonstration explored alternative approaches for improving the employability of adolescent mothers; another project examined jobs

for the future, and provided information useful to young women in school and planning their careers, or recent high school graduates about to enter the job market for the first time. In another project, the Women's Bureau examined careers for women in the electronic media, in partnership with American Women in Radio and Television, Inc. The Bureau's Work and Family Clearinghouse includes information on women and minorities in the skilled trades, and offers a database of various workforce quality categories such as promotions, education and training.

H. Employment Standards Administration

The Employment Standards Administration administers the Fair Labor Standards Act of 1938, which protects young workers from employment that might interfere with their educational opportunities or be detrimental to their health or well-being. ESA publishes fact sheets on Federal Child Labor Laws in Farm Jobs, which provide information on the standards for child labor in agriculture, the minimum age standards for agricultural employment, and the hazardous farm occupations. ESA also publishes fact sheets on Federal Child Labor Laws in Nonfarm Jobs, documenting child labor standards for 16- and 17-year-olds, and 14- and 15-year-olds.

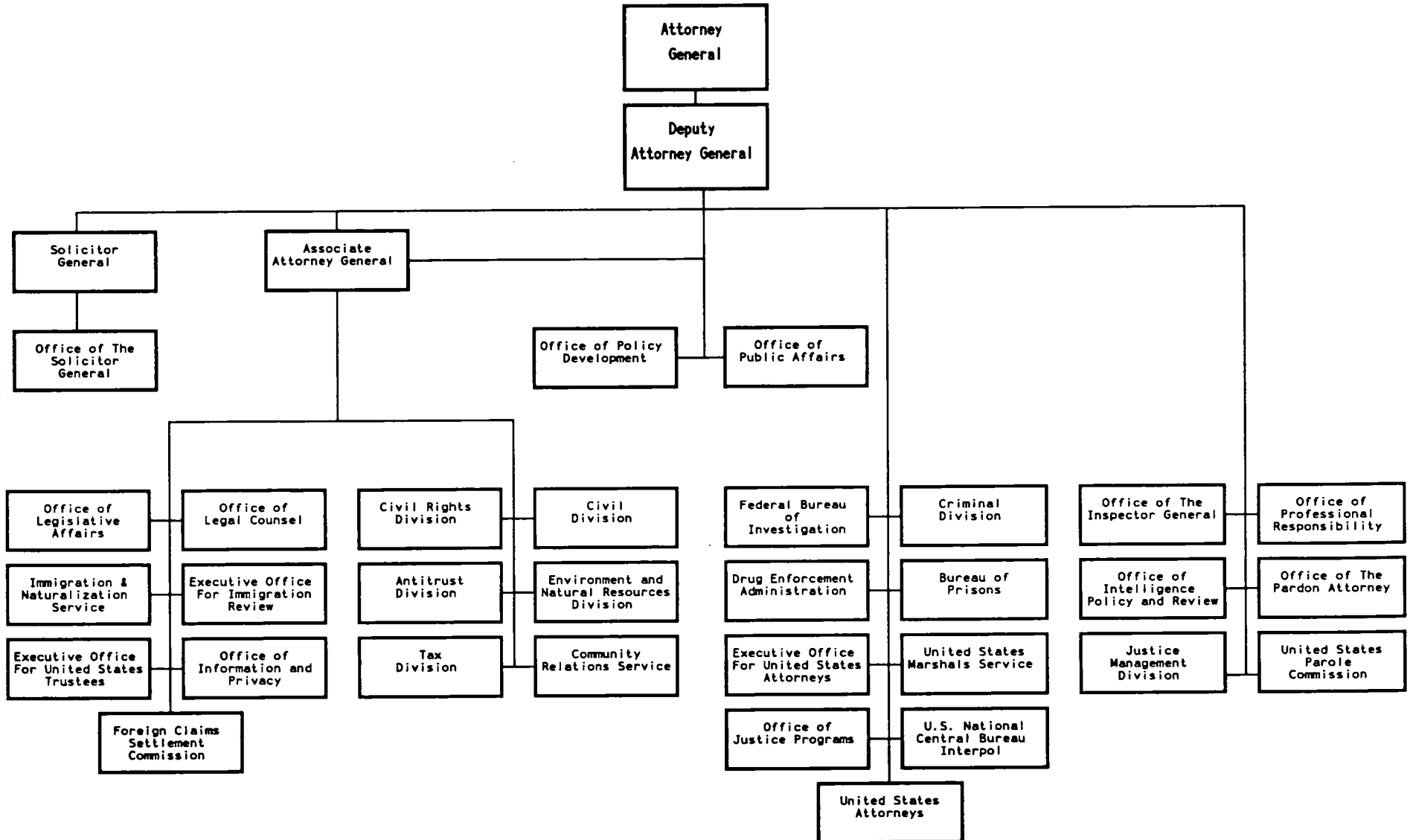
¹*From a study by Freeman and Holzer.*

V. U.S. Department of Justice

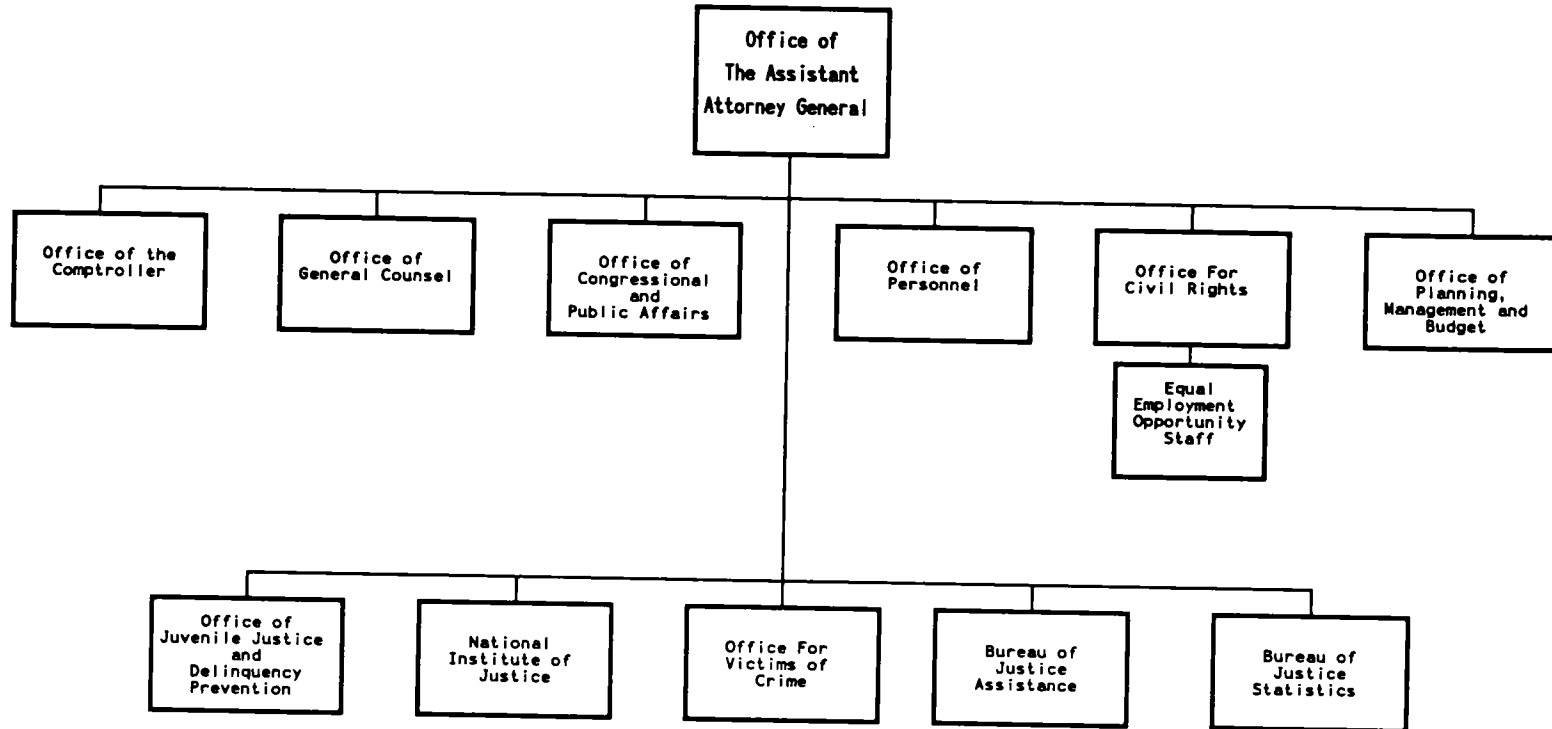
Overview

Established in 1870, the Department of Justice (DOJ) is the nation's largest law firm, representing the American people. DOJ is responsible for enforcing the law in the public interest, protecting citizens against crime and subversion, ensuring healthy competition of business, safeguarding the consumer, and representing the United States government before the Supreme Court. With Fiscal Year 1993 appropriations totaling approximately \$11 billion, DOJ administers a number of programs relating to law enforcement, crime prevention, crime detection, and the prosecution and rehabilitation of offenders. Many of these programs focus on the unique characteristics of young victims and juvenile offenders, with special emphasis on issues such as youth violence, drugs, and gangs.

A. Department of Justice Organization Chart



A. Department of Justice Organization Chart



B. Department of Justice Office of Juvenile Justice and Delinquency Prevention¹ Program Overview

<u>Program Area²</u>	<u>Emphasis</u>
Research and Program Development	RPD supports a broad research agenda aimed at improving the juvenile justice system and incorporating the latest research findings into program strategies. The division supports approximately 25 research and development projects annually.
Special Emphasis	The Special Emphasis Division awards discretionary grants to public and private agencies, organizations, and individuals to develop and test promising approaches to delinquency prevention, treatment, and control. The division is currently supporting over 50 projects.
State Relations and Assistance	The Division Administers a formula grant programs to assist states in their efforts to improve the juvenile justice system and comply with federal mandates.
Training and Technical Assistance	The Division provides training and technical assistance for personnel serving in the juvenile justice system. The division is currently supporting 26 ongoing projects.
Concentration of Federal Effort	Through the Concentration of Federal Efforts program, OJJDP assists agencies with responsibility for delinquency prevention and treatment programs and coordinates jointly funded programs for delinquency prevention and treatment.
OJJDP Missing and Exploited Children	The Missing and Exploited Children program funds a variety of activities that address problems relating to missing and exploited children. A major focus is on improving the response to and recovery of missing and exploited children.

Program Area**Emphasis**

Information Dissemination

The Information Dissemination Unit collects, prepares, publishes and disseminates data on juvenile delinquency and funds the OJJDP Clearinghouse.

¹*Department of Justice youth programs are concentrated in the Office of Juvenile Justice and Delinquency Prevention. Other offices and bureaus with the Department support services for youth as part of their overall mission, including the Bureau of Justice Assistance, the Bureau of Justice Statistics, the Office for Victims of Crime, the National Institute of Justice, the Federal Bureau of Prisons, and the Drug Enforcement Agency.*

²*For a compilation of information on currently funded OJJDP projects, refer to the OJJDP Source Book, Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice, February 1992.*

C. Office of Justice Programs

The Office of Justice Programs (OJP), headed by an assistant Attorney General who reports to the Attorney General, was authorized by the Justice Assistance Act of 1984 to coordinate and improve the nation's criminal justice systems, including the juvenile justice system. OJP consists of the Office of Juvenile Justice and Delinquency Prevention, the Bureau of Justice Assistance, the Bureau of Justice Statistics, the Office for Victims of Crime, the National Institute of Justice, and six program support offices.

1. Office of Juvenile Justice and Delinquency Prevention

Between 1989 and 1990, the number of youth arrested for murder and non-negligent manslaughter increased 26 percent, arrests for robbery increased 16 percent, arrests for aggravated assault increased 17 percent.

Teenagers are more likely than adults to be victims of crimes of violence. On average, from 1985 to 1988, every 1,000 teenagers experienced 67 violent crimes each year, compared to 26 violent crimes for every 1,000 adults age 20 years or older.

In 1989, 6,185 young people between the ages of 15 and 24 were homicide victims. They represent 16 times more casualties from violence here at home than there were total casualties from Desert Shield and Desert Storm in 1990 and 1991.¹

Overview

The Office of Juvenile Justice and Delinquency Prevention (OJJDP) was established by the Juvenile Justice and Delinquency Prevention Act of 1974 (P.L. 93-415) to provide a comprehensive, coordinated approach to preventing and controlling juvenile crime, and improving the juvenile justice system. OJJDP administers the State Formula Grants Program, funds over 100 projects through the Discretionary Grants Program, and coordinates all federal activities related to juvenile justice and delinquency. OJJDP consists of seven divisions: the Research and Program Development Division; the Training and Technical Assistance Division; the Special Emphasis Division; the State Relations and Assistance Division; the Concentration of Federal Efforts Program; the Missing Children's Program; and the Information Dissemination Unit. In addition, OJJDP serves as the lead agency for the Coordinating Council on Juvenile Justice and Delinquency Prevention.

OJJDP's efforts to improve the juvenile justice system have focused on three mandates: 1) the deinstitutionalization of status offenders; 2) the removal of children from jails; and 3) the separation of juveniles and incarcerated adults. In the 1992 Amendments to the JJDP Act, Congress added minority overrepresentation as the fourth mandated area.

In August 1992, OJJDP published *Federal Agency Juvenile Delinquency Development Statements*, a collection of information on federal initiatives related to juvenile justice and delinquency prevention. The report, which presents an overview of federal juvenile justice policy, reveals that more than 260 federal programs address the goals and mandates of the Juvenile Justice and Delinquency Prevention Act, representing approximately \$3 billion in federal outlay over a one-year span. In addition, the report states that eight federal agencies sponsor 89 research projects on juvenile delinquency, and 15 federal agencies fund approximately 75 programs related to drug abuse prevention and 24 programs targeting gang activity.

i. Coordinating Council on Juvenile Justice and Delinquency Prevention. The Coordinating Council on Juvenile Justice and Delinquency Prevention, established through section 206 of the JJDP ACT, is an independent organization that serves as a focal point for Federal activities relating to juvenile justice. Chaired by the Attorney General, Council members include the Secretaries of Labor, Education, HHS, and HUD, as well as the Administrator of OJJDP, the Director of the Office of National Drug Control Policy, the Director of ACTION, the Commissioner of Immigration and Naturalization, and nine public members who are practitioners in the field of juvenile justice. The Council meets at least four times a year and makes recommendations to the President and Congress regarding the coordination of policy and development of objectives and priorities for all Federal juvenile delinquency programs and activities.

ii. JJDP Act Amendments of 1992. In 1992, amendments to the JJDP Act expanded the role of OJJDP in coordinating federal efforts to prevent and control juvenile delinquency and improve the juvenile justice system. As noted above, reducing the disproportional representation of minority youth confined in secure facilities became a part of OJJDP's mandated mission. The Amendments also add the following three new priority areas: strengthening the families of delinquents; improving State and local administration of justice and services to juveniles; and assisting States and local communities prevent youth from entering the system. The Amendments also established new policy to encourage parental involvement in treatment and services for juveniles, coordinated services, and interagency cooperation. In addition, the Amendments mandate seven new studies to be conducted by the Comptroller General and OJJDP: juveniles waived, certified, or transferred to adult court; admissions of juveniles with behavior disorders to private psychiatric hospitals; gender bias within State juvenile justice systems; Native American pass-through under the Formula Grants Program; access to counsel in

juvenile court proceedings; the incidence, nature and causes of violence committed by or against juveniles in urban and rural areas; and the characteristics of juvenile hate crimes.

In addition to changes in current programs, the JJDP Act Amendments of 1992 authorize several new grant programs to be administered by OJJDP.

- **Mentoring.** This program authorizes three-year grants to local education agencies for mentoring programs designed to link at-risk youth with responsible adults to discourage youth involvement in criminal and violent activity.
- **Boot Camps.** This program authorizes grants to establish up to 10 military-style boot camps for delinquent juveniles.
- **Incentive Grants for Local Delinquency Prevention Program.** This program authorizes grants to local governments for a broad range of delinquency prevention activities targeting youth who have either had contact with, or are likely to have contact with, the juvenile justice system.

a. Research and Program Development

The Research and Program Development Division (RPDD) supports a broad research agenda aimed at improving the juvenile justice system and incorporating the latest research findings into program strategies. RPDD assesses special topics under consideration for new project initiatives and works with the Special Emphasis Division to develop effective, research-based program designs. RPDD-funded projects explore such areas as the causes of delinquency, how juveniles are confined in correctional institutions, how minorities are handled in the juvenile justice system, and treatment methods for missing children and their families.

The Division sponsors quantitative research, such as the biennial "Children in Custody" census, to assess the national needs of the system, in addition to a number of incidence studies, such as the National Incidence Studies: Missing, Abducted, Runaway, and Thrownaway Children in America (NISMART), to assess the national perspective on such problems.

The JJDP Act Amendments of 1992 authorized OJJDP to expand research activities in a variety of areas including: intervention and prevention research that help youth take responsibility for their behavior while recognizing factors which contribute to delinquency; research on juvenile involvement in hate crime; and national data collection.

RPDD supports approximately 25 research and development projects annually. Following are examples of recently completed or ongoing RPDD-funded projects:

- **American Indian and Alaskan Native Youth: Study of Juvenile Justice Systems:** This project was mandated by the JJDP Act Amendments of 1988 to improve programs for juvenile justice and delinquency prevention for American Indian and Alaskan Native youth. The American Indian Law Center received approximately \$1 million in Fiscal Year 1991 and Fiscal Year 1991 for this project.
- **Juvenile Justice Statistics and Systems Development Program:** The purpose of this project is to improve analysis of national, State, and local statistics in juvenile justice, and to assess decision making and management information systems. The five year project began late in Fiscal Year 1990
- **Program of Research on the Causes and Correlates of Juvenile Delinquency:** This is a three-site longitudinal study to determine the root causes and correlates of delinquency. The results are intended to help design more effective programs to counteract juvenile delinquency. Started in 1986, over \$7.5 million has been spent on collecting and analyzing data on 4,000 children and youth aged 7 to 15 years. Preliminary results have revealed that there is a direct relationship between oppositional and defiant behavior in the family and severity of delinquency, and that although single parenthood is related to boys' delinquency, about 50 percent of seriously delinquent boys come from two-parent families.
- **Evaluations of OJJDP Programs:** A project to evaluate and assess the efficiency, cost-effectiveness, and impact of OJJDP-implemented grants, contracts, and interagency initiatives started in 1991 and results are expected in 1994.

b. Special Emphasis

The Special Emphasis Division (SED) awards discretionary grants to public and private agencies, organizations, and individuals to develop and test promising approaches to delinquency prevention, treatment and control. Each year, SED selects target issues from a legislatively mandated list which includes dropout prevention, advancement of community-based sanctions, youth employment, law related education, and family strengthening programs. The JJDP Act Amendments of 1992 added several special funding areas including: improving due process and legal representation for juveniles in the juvenile justice system; including self-help programs for parents and recognizing the special needs of families with limited

English-speaking ability in family programs; establishing programs designed to prevent and reduce the incidence of hate crimes by juveniles; and developing programs to assist in identifying learning difficulties.

Currently SED is supporting over 50 initiatives to improve alternative education, curb illegal drug use, and strengthen families. Following are examples of funded projects:

- The Intermediate Sanctions (Boot Camp) Program was started in 1991 to set up and evaluate the effectiveness of boot camps as alternatives to correctional facilities. Three boot camps for adjudicated, nonviolent, juvenile offenders under the age of 18 years currently provide rehabilitation and character development within an ordered, highly regimented environment. The boot camps emphasize discipline, treatment, and work, while serving as a criminal sanction and assuring that adjudicated offenders are held accountable for their behavior. Fiscal Year 1991 funding for the three camps totaled approximately \$3 million.
- The Community Drug Abuse Prevention Technical Assistance Voucher Project, administered by the National Center for Neighborhood Enterprise, is designed to enhance partnerships between federal and local efforts to prevent drug abuse. The program makes up to 25 vouchers ranging from \$1,000 to \$10,000 available to community organizations for capacity-building expenses. Priority is given to those programs that have not previously received funding from OJJDP, are otherwise unable to secure needed technical assistance, serve high risk youth and juvenile offenders, and have operating budgets of less than \$150,000. In Fiscal Year 1991, funding for this project was approximately \$300,000.
- The Effective Parenting Strategies for Families of High-Risk Youth program is intended to reduce delinquency and drug abuse among youth by providing community agencies with information and skills to implement family-strengthening programs for high -risk children and youth. Funding for this project totaled approximately \$350,000.
- The National Juvenile Firesetter/Arson Control and Prevention Plan was designed to assess, develop, test, and disseminate information on promising approaches to the control and prevention of juvenile firesetting and arson. The initiative funded pilot arson control sites in a number of sites. OJJDP funding was almost \$600,000 over a five year period.

- The Proyecto Esperanza/Project Hope Family Strengthening Support Program assists local community-based social service and juvenile justice practitioners in providing a culturally sensitive family-strengthening model for working with Hispanic youth. Approximately \$2.2 million was spent on this project over a six year period.

c. State Relations and Assistance

The State Relations and Assistance Division (SRAD) administers a formula grant program to assist States in their efforts to improve the juvenile justice system and comply with JJDP Act mandates. SRAD must monitor each State's compliance with four distinct mandates of the JJDP Act: States must take steps to 1) deinstitutionalize status offenders and nonoffenders; 2) provide sight and sound separation of juveniles and adults in detention and correctional facilities; 3) remove juveniles from adult jails and lockups; and 4) reduce the disproportional confinement of minority youth in secure facilities. The JJDP Act Amendments of 1992 continue the requirement that States provide an analysis of juvenile crime problems, and now require specific analysis on gender specific services, services in rural areas, and mental health services. The formula grant program budget in Fiscal Year 1993 was \$50 million.

In addition to the formula grants, SRAD provides technical assistance and contracts to State and local governments and private agencies to help them provide services for families, educational programs for youth, reduce the disproportional confinement of minority youth, and to study and improve the juvenile justice systems administered by American Indian and Alaska Native tribes. SRAD is currently supporting five pilot sites (Arizona, North Carolina, Florida, Iowa, and Oregon) to assess the treatment of and develop mechanisms for reducing the disproportionate representation of incarcerated minority youth.

The JJDP Act Amendments of 1992 also authorize OJJDP to award State Challenge Activities grants to States participating in the Formula Grants Program. This new grants program would provide funding for specific "challenge activities" including: basic health, mental health and education services for youth in the juvenile justice system; policies to prohibit gender bias and provide female youth with a full range of system services; counseling for youth in the juvenile justice system; comprehensive aftercare service programs; and programs to increase community-based alternatives through objective detention and correction placement criteria. Grants may be made in amounts up to 10 percent of the State's formula grant allocation. Funding has not yet been appropriated for this program.

d. Training and Technical Assistance

The Training and Technical Assistance Division provides training and technical assistance to federal, State and local governments, private agencies, educators, community organizations, law enforcement officers and others who serve youth in the juvenile justice system. The Division's Fiscal Year 1991 budget was approximately

\$10 million. In addition to funding a variety of training programs and developing law-related education materials, the Division funds the National School Safety Center to serve as a resource center for programs and activities related to school security, legal issues, student discipline, drug abuse prevention, gangs and other violence.

Following are examples of the Division's 26 ongoing training and technical assistance projects:

- The Improving Literacy Skills of Institutionalized Juvenile Delinquents project offers inservice training and technical assistance to reading and English teachers who instruct juvenile offenders in correctional institutions in a variety of States. A variety of demonstrations in this area have been funded over the past several years with a total funding level of approximately \$500,000.
- The Juvenile Justice Prosecution Project is designed to educate district attorneys about their role in the juvenile justice system and to enable them to develop sound policies on the prosecution of juvenile cases. Approximately \$590,000 has been spent on this project since it was started in Fiscal Year 1985.
- Training in Cultural Differences for Law Enforcement/Juvenile Justice Officials is provided to improve the effectiveness of law enforcement and other juvenile justice agency staff in interacting with minority group suspects and offenders. This project was started in Fiscal Year 1991 with approximately \$125,000 in federal funds.

e. Concentration of Federal Efforts

Through the Concentration of Federal Efforts (CFE) program, OJJDP assists agencies with responsibility for juvenile delinquency prevention and treatment programs and coordinates jointly funded programs among and between departments and agencies. CFE has the overall responsibility for developing priorities and strategies for all federal juvenile delinquency program plans and promotes interagency cooperation and collaboration at the federal level to ensure the best possible use of federal funds. The Coordinating Council on Juvenile Justice and Delinquency Prevention plays a key role in this effort. The JJDP Amendments of 1992 expanded OJJDP's role in juvenile justice programs by requiring OJJDP to develop objectives, priorities, and a long-term plan to establish goals and criteria for research and other activities, and to issue model standards for providing health care to incarcerated youth.

f. Missing and Exploited Children

Every 26 seconds, an American child is reported abused or neglected (2.7 million a year).²

The Missing Children's Assistance Act of 1984, Title IV of the JJDP Act, designated OJJDP as the central coordinating agency in all matters pertaining to missing and exploited children, and authorized the Missing and Exploited Children Program to fund a variety of activities to address problems relating to missing and exploited children. The Program funds research, provides training and technical assistance, and operates a national resource center, a toll-free hotline and a clearinghouse to aid in the recovery of missing children nationwide.

Every year, OJJDP establishes priorities for funding research, demonstration projects and service programs that focus on data collection, improving the response to and recovery of missing children, the psychological impact of abductions on children and families, the reunification of missing children with their families, and behavioral analysis of child molesters and abductors. Through the Missing and Exploited Children Comprehensive Action Program (M/CAP), OJJDP also provides training and technical assistance to communities to develop a multi-disciplinary approach to handling child victim cases. In Fiscal Year 1993, OJJDP announced the funding of the following new programs:

- The Second National Incidence Studies of Missing, Abducted, Runaway and Thrownaway Children (NISMAART II) will produce reliable national statistics on missing and exploited youth, and will examine trends in the numbers of missing, abducted, runaway and thrownaway youth, the characteristics and risk factors associated with these problems, and other victimizations of children. NISMAART I was conducted in 1990 and addressed family abductions, non-family abductions, runaways, throwaways, and lost or otherwise missing children. NISMAART II also will look at the incidents of other types of victimization, including physical or sexual assault by non-family members. A planning grant was awarded to the Research Triangle Institute to identify the strengths and weaknesses of NISMAART I, to examine additional sources of data, and to test alternative methodologies and approaches to studying different populations. Fiscal Year 1993 funding for NISMAART II is \$1.5 million.
- The Investigative Case Management for Missing Children Homicides project is intended to improve investigative procedures in homicide cases of abducted or runaway children. Through the examination and analysis of previous cases, the project will develop a guide for law enforcement officers that will provide an experience-based process to direct investigations and identify priorities for solving cases. Fiscal Year 1993 funding for this project is \$150,000.
- The Effectiveness of Private Investigators in Locating and Recovering Parentally Abducted Children. project will identify the characteristics and procedures used by highly effective private investigators. This

study is a follow-up to a recent OJJDP-sponsored study in which one fourth of the searching parents employed private investigators. Fiscal Year 1993 funding for this project will total \$100,000.

- Issues in Resolving International Child Abduction Cases is a study that will examine the issues and processes, institutional and cultural, particular to international abduction cases. Funding in Fiscal Year 1993 is \$200,000.
- The Criminal Justice Response to Parental Abduction Cases study will examine the ways in which various criminal justice agencies and systems respond to parental abduction cases. Previous studies have revealed that although parental abduction is a felony in most States, the civil and criminal justice systems' enforcement and prosecution policies and practices vary widely from State to State. Fiscal Year 1993 funding for this project is \$450,000.

i. Field Initiated Programs. OJJDP also awards discretionary grants for innovative research projects through Field Initiated Programs. In Fiscal Year 1993, \$300,000 will be available for projects relating to the mission of the Missing and Exploited Children's Program and to specific priority areas relating to family abductions. These priority areas include: the impact of domestic violence on custody decisions and parental abductions; post-recovery detention of abducted children by social service agencies; allegations of child abuse in parental abduction cases; family members and friends who provide assistance to abductors; parents who abduct their children, hold them hostage or murder them; the development of public education campaigns on the psychological and legal consequences of parental abduction.

In addition, OJJDP will fund a number of continuation projects in Fiscal Year 1993 including: the National Center for Missing and Exploited Children (\$3.6 million); the Prevention of Parent or Family Abduction Through Early Identification of Risk Factors (\$300,000); Missing Children Program to Increase Understanding of Child Sexual Exploitation (\$400,000); Effective Screening of Child Care and Youth Service Workers (\$200,000); Training and Technical Assistance for Nonprofit Missing Children's Programs (\$250,000); Grants and Cooperative Agreements To Support Public or Private Nonprofit Missing Children's Agencies Service Activities; Expansion of Mediation Project: Child Find of America, Inc. (\$75,000); Missing and Exploited Children Prevention and Services, Addison County (up to \$75,000); Exploited Children's Help Organization (ECHO) Program (up to \$19,538); Project Nino Seguro, South Bay Community Services (up to \$45,258); Reunification Services Project: Find the Children (up to \$300,000); Prevention and Early Intervention and Mediation Project: Our Town Family Center (up to \$75,000); Community Action for Prevention of Missing and Exploited Children: Center for Child Protection and Family Support, Inc. (up to \$75,000); Prevention and Intervention Program: Paul & Lisa. Inc. (up to \$75,000); Vanished Children's Alliance (up to \$70,500).

g. Information Dissemination Unit

The Information Dissemination Unit collects, prepares, publishes and disseminates data on juvenile delinquency and funds the Juvenile Justice Clearinghouse as a resource center for information regarding juvenile delinquency prevention and treatment programs and other related data. In Fiscal Year 90, the Juvenile Justice Clearinghouse responded to nearly 5,000 information requests and disseminated more than 250,000 OJJDP publications. Fiscal Year 90 funding for the clearinghouse totaled almost \$3 million.

2. Bureau of Justice Assistance

Almost 1.9 million teenagers were the victims of violent crimes in 1990.³

The Bureau of Justice Assistance (BJA) provides federal assistance to State and local governments for programs that combat drugs and crime and improve the criminal justice system. In Fiscal Year 1992, BJA distributed \$473 million to State and local criminal justice systems through its Formula and Discretionary Grant programs.

Many BJA-funded programs relate to juvenile justice and delinquency prevention including: demand reduction education programs that involve law enforcement officers; community and neighborhood programs that assist citizens in preventing and controlling crime; programs to improve the effectiveness of law enforcement such as the school-yard violator, gang-related, and low-income housing drug control programs; programs to identify and meet the treatment needs of juvenile drug and alcohol-dependent offenders; and programs to improve the criminal and juvenile justice systems response to domestic and family violence. The Bureau also operates a BJA Clearinghouse through the National Criminal Justice Reference Service to coordinate the distribution of BJA publications. Following are examples of BJA programs that focus on youth:

- National Citizens' Crime Prevention Campaign, featuring McGruff, the Crime Dog, supports crime and drug prevention activities including public service announcements; kits, brochures, posters and other materials; and demonstration projects involving youth as key participants. Fiscal Year 90 funding for the program was \$2.7 million for the campaign, and \$1 million for Community Drug Abuse Prevention activities run by the National Crime Prevention Council.
- The Drug Abuse Resistance Education Training Program provides training to law enforcement officers who are assigned full-time to teach drug abuse resistance education in classrooms in grades K through 12. The curriculum emphasizes self-esteem, taking responsibility for one's behavior, and saying "no" to drug experimentation. DARE is

administered in all 50 States and the District of Columbia and an estimated 5 million students received DARE training during the 1991-92 school year.

- The Wings of Hope Anti-Drug Program is a grassroots coalition and partnership-building effort involving law enforcement agencies, public and private sector service providers, public housing organizations, churches, businesses, schools, residents, and youth. The goal of the multifaceted effort is to rebuild culturally diverse inner-city neighborhoods by providing education, treatment, and other services and resources to combat crime, violence, and illicit drug use. The program, administered by the Southern Christian Leadership Conference, emphasizes drug prevention awareness, the importance of family, and community well-being. The program also is designed to mobilize and better coordinate efforts among minority residents, churches, and businesses to enhance the safety of public housing projects and inner-city neighborhoods. The model is being demonstrated in five communities in the greater Atlanta, Georgia, area and is being expanding to other sites throughout the country.

3. Bureau of Justice Statistics

The Bureau of Justice Statistics (BJS) collects, analyzes and disseminates criminal justice data and related aspects of civil justice data on a wide range of topics including criminal victimization, privacy and security, capital punishment, probation and parole, juvenile corrections, school crime, and women in prison. The Bureau also provides financial and technical support to State statistical agencies and administers special programs to help State and local governments improve the criminal justice record system. Recent reports issued by BJS include: a survey of youths in custody, 1987; *School Crime: A National Crime Victimization Report*, 1991; and *Teenage Victims: A National Crime Survey Report*, 1991. The Bureau publishes about 50 bulletins, special reports, and technical reports annually. These publications are available through the BJS Clearinghouse.

4. Office for Victims of Crimes

The Office for Victims of Crimes (OVC) administers victim compensation and victim assistance programs designed to help crime victims stabilize their lives after the trauma of victimization. The Victims of Crime Act of 1984 requires that certain federal fines, penalties, and assessments be deposited into the Crime Victims Fund in the U.S. Treasury. In addition, OVC operates the National Victims Resource Center (NVRC), a component of the National Criminal Justice Reference Service, to provide victim-related information to practitioners, policy makers, researchers, and crime victims.

a. Crime Victim Assistance Program

Through the Crime Victim Assistance Program, OVC provides block grants to States for the provision of services for victims of sexual assault, child abuse, domestic violence, and other crimes. In Fiscal Year 90, States awarded nearly \$8 million to support child victim services.⁴

b. Crime Victim Compensation Grant Program

The Crime Victim Compensation Grant Program provides grants to States to compensate victims of violent crimes and their survivors, including child victims and their families. In Fiscal Year 1990, approximately \$25 million in compensation awards were made to child victims by State compensation programs.⁵

c. Children's Justice Act Discretionary Grant Program for Native Americans

The Children's Justice Act Discretionary Grant Program for Native Americans provides grants to Indian Tribes to assist them in developing, establishing, and operating programs designed to improve the handling of child abuse cases, particularly cases of sexual abuse, in a manner that limits trauma to the child and improves the investigation and prosecution of child abuse cases. To date, over twenty tribal program aimed at improving the investigation and prosecution of child sexual abuse cases have received funding through this program. Fiscal Year 1992 appropriations for this program totaled \$675,000.

OVC also sponsors national scope programs and training and technical assistance projects to improve and coordinate services to crime victims across the nation. These include support for Parents of Murdered Children (POMC), a national self-help organization for parents and their children who are survivors of the murder of a family member; Fernside, a victims assistance center for children who have experienced the violent death of a family member; and the development of a model protocol for dealing with child and adult victims of sexual assault. In addition, in coordination with BJA, OJJDP, and the Department of Health and Human Services' Administration for Children and Families, OVC fund Paul and Lisa, Inc., and organization that helps child victims of sexual exploitation.

5. National Institute of Justice

The National Institute of Justice (NIJ), created by the Omnibus Crime Control and Safe Street Act of 1968 (P.L. 90-351), is the Department of Justice's primary research and development arm. Its mission is to support programs to prevent and reduce crime and to improve the criminal justice system. NIJ-funded research and development activities examine causes and correlates of crime, including the relationship between employment status, school status and criminal activity; social and familial factors that lead youth toward or away from criminal behavior; and the relationship between early childhood behavior and later criminal behavior. Initiatives

also focus on developing new approaches to preventing and reducing crime, including studies on police handling and case processing procedures for juvenile cases; assisting school administrators manage and control crime in the schools; and identifying program components, techniques, and methods that reduce criminal behavior in youth.

NIJ produces a variety of materials related to criminal justice, many of which focus on youth related issues, and supports the National Criminal Justice Reference Service (NCJRS), which houses several Department of Justice Clearinghouses and provides computerized topical searches and topical bibliographies from the largest criminal justice database in the world. The database includes a number of subjects relating to juvenile justice.

Recently, NIJ and OJJDP co-sponsored a study of Firearms, Violence and American Youth that examined how and why youth acquire and use firearms. The research, conducted at Tulane University, included self-report surveys among two distinct samples: one thousand offenders incarcerated in juvenile institutions and one thousand high school students in cities located near the selected institutions. Respondents also were asked about their gang and drug involvement.

a. National Program on Human Development and Criminal Behavior

In Fiscal Year 1993, NIJ awarded \$2.9 million to the Harvard University School in Public School in additional support of the National Program on Human Development and Criminal Behavior, which NIJ is co-funding with the John D. and Catherine T. MacArthur Foundation. The two partners have jointly invested \$10 million over a 5-year period in the program's development and design phase, which will be completed in 1993, with implementation slated to begin late in the fiscal year.

Pilot Studies have included research on the level and impact of fathers' involvement with pre-school children; development and testing of psychological measures appropriate to the different age groups in the study (for example, measures of stress and family interaction, tests of reliability, and cultural appropriateness of measures); measurement of health-related influences on aggression; relationships between gender and crime; development of attitudes toward deviance between ages 11 and 18 years; and the use of social services among adolescents and their parents.

D. Federal Bureau of Prisons

The Federal Bureau of Prisons (BOP) is responsible for the custody of offenders convicted of violations of federal laws. In addition to operating 66 institutions for adults, BOP is responsible for juveniles — those who are under 18 and/or those under 21 convicted of violation of the federal Juvenile Delinquency Act. The juveniles are maintained in the custody of the BOP or the custody of the Attorney General in

contract facilities. These facilities are secure facilities, as well as community-based facilities, such as halfway houses. As required by the JJDP Act, these facilities ensure that the youth are not in regular contact with incarcerated adults. In addition, the BOP maintains an online real-time computer system, Sentry, that collects information and allows for the retrieval and reporting of statistics on the BOP juvenile population.

E. Drug Enforcement Administration

Every nine minutes, an American child is arrested for a drug offense.⁶

The Drug Enforcement Administration (DEA) is the lead federal agency responsible for enforcing laws relating to the drug trade. DEA registers and monitors the distribution of legal drugs designated under the Controlled Substance Act and is responsible for curtailing the manufacture, sale, and distribution of illegal drugs. Through the Demand Reduction Section, DEA Special Agents conduct drug prevention and education activities nationwide that target potential users as well as those who have influence over potential users. For example, DEA sponsors activities aimed at high school athletic coaches, school guidance counselors, law enforcement officers, elementary, junior, and senior high school students, and neighborhood drug prevention and education organizations.

- The Sports Drug Awareness Program brings DEA Coordinators into high schools to teach coaches ways to integrate anti-drug activities into the athletic programs. Funding for this program totaled \$170,000 in Fiscal Year 1991.
- Through the Cooperation with National Youth Sports Coaches Association program, DEA provides assistance to volunteers who coach recreational, church and other community league sports for millions of children throughout the year. In Fiscal Year 1991, \$10,000 was spent on training volunteers who coach an estimated 3 million young people aged 3-14.
- Drug Education Activities: Alternatives to Drug Abuse is a DEA program that teaches elementary and junior high school principals ways to organize clubs to give students fun and positive alternatives to drug use. The program started in Fiscal Year 89 with pilot projects in five U.S. cities, serving an estimated 2,500 inner-city youth between the ages of 8 and 15. Fiscal Year 1991 funding totaled \$20,000.

¹*Children's Defense Fund, "The State of America's Children 1992."*

²*Ibid.*

³*Ibid.*

⁴*A Guide to Funding Resources for Child Abuse and Neglect and Family Violence Programs, U.S. Department of Health and Human Services, National Center on Child Abuse and Neglect, June 1992, page 29.*

⁵*A Guide to Funding Resources for Child Abuse and Neglect and Family Violence Programs, U.S. Department of Health and Human Services, National Center on Child Abuse and Neglect, June 1992, page 29.*

⁶*Children's Defense Fund, "The State of America's Children 1992."*

VI. U.S. Department of Agriculture

Overview

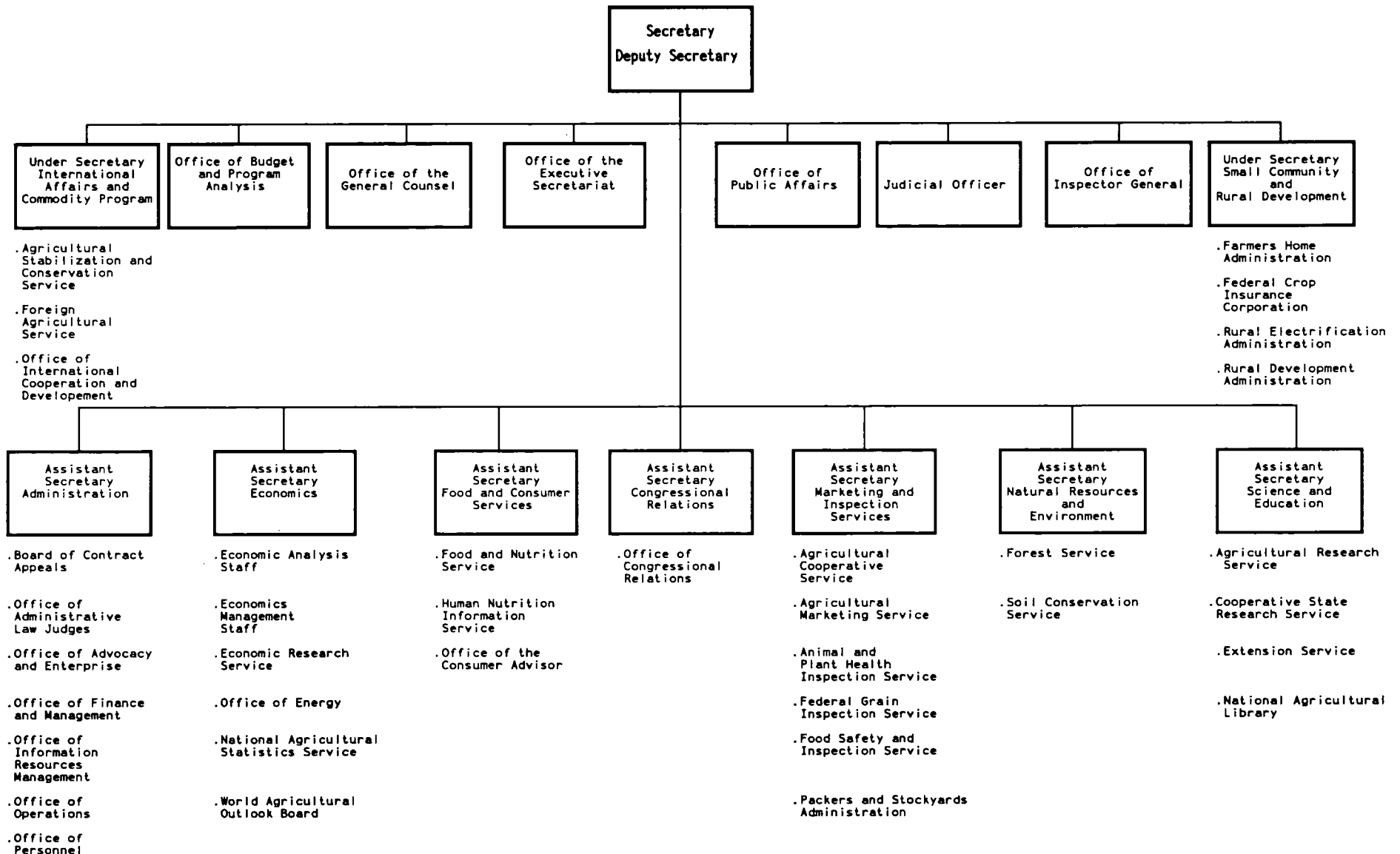
The United States Department of Agriculture (USDA) was created in 1862 and made the eighth executive department in 1889. Principal USDA responsibilities include: ensuring a safe and adequate food supply; developing and expanding markets abroad for U.S. agricultural products; helping to curb hunger and malnutrition; helping to protect American soil, waters, forests and other natural resources; and assisting the growth of the nation's farms through rural development, credit and conservation programs. One of USDA's major goals is to help individual consumers understand the relationship of food and its nutrients to the maintenance of health and the prevention of diet-related disorders during the different stages of life. USDA has an annual budget of approximately \$68 billion, 60% of which goes to food assistance programs. In addition, human nutrition research, information and education activities, including nutrition monitoring, totaled \$288.5 million in Fiscal Year 1992.

215.7

10.

225.7

A. Department of Agriculture Organization Chart



B. Department of Agriculture Program Overview

<u>Program</u>	<u>Services/Emphasis</u>	<u>FY 1993 Funding (in millions)</u>
Food Stamps	Nutrition and food assistance for low-income households.	\$2,700
Nutrition Assistance Program	Nutrition and food assistance for Puerto Rico and the Northern Marianas.	\$1,421
Food Dist on Indian Reservations	Nutrition and food assistance for Native American families.	\$81.6
National School Lunch	Lunches for low-income elementary and secondary school students.	\$4,100
School Breakfast Program	Breakfasts for low-income elementary and secondary school students.	\$902
Child and Adult Care Food Program	Food assistance for non-residential child and adult day care centers.	\$1,300
Summer Food Service Program	Meals and snacks for children under 18 in needy areas.	\$215.7
WIC	Nutrition and food assistance for low-income women and children.	\$2,900
WIC Farmers Market Nutrition Program	Special coupons for WIC participants to buy fresh produce.	\$3
Commodity Supplemental Food	Nutrition and food assistance for low-income women, children and elderly.	\$94.5
Special Milk Program	Reimbursements for milk for children in school, summer camps, institutions.	\$15
Nutrition Education and Training	Nutrition and education training for parents, children, educators, and others.	\$10
4-H Youth Development	Enrichment and instructional activities for youth.	—

Youth at Risk	Prevention and intervention activities for youth at risk.	\$10
Home Economics and Home Nutrition	Health and resource management education for families.	
Expanded Food and Nutrition Program	Training for people who teach nutrition education to low-income families.	\$60
Youth Development Information Center	Information center on youth development issues.	—
Youth Conservation Corps	Summer employment program for youth 15-18.	¹
Youth Project Loans	Loans for youth 10-20 in rural areas.	\$3.2

¹*Funding for Job Corps is provided through Department of Labor budget.*

C. Food and Nutrition Service

The Food and Nutrition Service (FNS) was established in August 1969 to administer USDA's domestic food assistance programs. The agency's goals are to provide needy people with access to a more nutritious diet, to improve the eating habits of the nation's children, and to stabilize farm prices through the distribution of surplus food. All FNS programs are run in cooperation with State governments, who determine most administrative details regarding distribution of food benefits and eligibility of participants.

1. Food Assistance Programs

FNS administers a total of 14 food assistance and nutrition education programs with a Fiscal Year 93 budget of approximately \$36 billion. Five of those programs make up FNS' Child Nutrition programs — the National School Lunch Program, the School Breakfast Program, the Summer Food Service Program, the Special Milk Program, and the Child and Adult Care Food Program. Other programs that target low-income populations and pregnant women also serve children.

In 1992 the agency published *Nutrition Guidance for Child Nutrition Programs*, to provide technical assistance to food service personnel and other persons responsible for feeding children. In addition to the following programs, FNS operates food assistance programs for the elderly, and distributes surplus commodities to needy households and charitable organizations that serve the needy.

a. The Food Stamp Program

The Food Stamp Program, USDA's main food assistance program, provides low-income households with coupons that are redeemable at retail food stores. Eligibility and allotments are based on household size, income, assets, housing costs, work requirements and other factors. In Fiscal Year 92, the Food Stamp Program served an average of over 25 million people per month. Based on a 1991 characteristics study, FNS estimates that over 50 percent of all food stamp recipients are children, with adolescents age 12-19 making up an estimated 14.5 percent of all recipients. The Fiscal Year 1993 appropriations for the program total \$27 billion.

b. Nutrition Assistance Program

The Nutrition Assistance Program replaced the Food Stamp Program in Puerto Rico and the Northern Marianas in 1982. The block grant program enables these entities to provide cash and coupons to participants rather than food stamps or food distribution. Congress authorized \$1.051 billion for Puerto Rico and \$3.7 million for the Northern Marianas in Fiscal Year 93.

c. Food Distribution Program on Indian Reservations

Food Distribution Program on Indian Reservations and the Trust Territories, also known as the Needy Family Program, provides commodity food to Native American families who live on or near Indian reservations, and to Pacific Islanders.

Participants chose from month to month whether they will participate in the Food Stamp Program or the food distribution program. Average monthly participation in Fiscal Year 92 was 117,000. The Fiscal Year 93 appropriation is \$81.6 million.

d. National School Lunch Program

The National School Lunch Program, created in 1946 by the National School Lunch Act, provides eligible low-income children with free or reduced-price lunches at elementary and secondary schools and in residential child care centers across the country. Lunch programs are administered primarily by State Educational Agencies through agreements with local school districts. Participating schools receive cash subsidies and donated commodities from FNS for every meal served. In addition, schools are eligible to receive "bonus" commodities that are available from surplus stocks purchased by USDA under its agricultural price support programs. The School Lunch Program, offered at over 92,000 schools and residential institutions across the United States, serves approximately 25 million young people aged 6-18 every day, with adolescents in grades 7-12 making up 43 percent of school lunch participants. Fiscal Year 93 appropriations were \$4.1 billion.

e. School Breakfast Program

The School Breakfast Program, similar to the School Lunch Program, offers eligible low-income children a free or reduced-price breakfast at school. In addition to regular reimbursement, additional funding is made available for "severe need" schools, where at least 40 percent of meals are served free or at a reduced price. The School Breakfast Program provides breakfast to over 5 million elementary, junior high, and high school students at 54,000 schools and institutions. Adolescents in grades 7-12 make up an estimated 24 percent of all school breakfast participants. In Fiscal Year 93, \$902 million was appropriated for this program.

Over the last 5 years, USDA has offered Start-Up Grants to encourage schools to participate in the School Breakfast Program. In Fiscal Year 1993, USDA made \$5 million available for competitive grants to schools to help pay the one-time start-up costs of the school breakfast program. USDA staff also have been actively promoting the program in speeches and communications with schools.

f. Special Milk Program

The Special Milk Program provides cash reimbursements for milk served to children in schools, summer camps, and child care institutions that do not participate in federally supported meal programs, or to pre-kindergarten or kindergarten children

who attend half-day sessions and have no access to school meal programs. The program has been reduced due to the expansion of the school lunch and breakfast programs which require milk to be served with meals. In Fiscal Year 1992, more than 10,000 schools and child care institutions, along with 2,000 summer camps, participated in the program. The Fiscal Year 1993 appropriation is \$15 million.

g. Summer Food Service Program

The Summer Food Service Program is designed to provide meals and snacks to children under 18 years of age in needy areas — where at least half of the children come from families with incomes below 185 percent of poverty — during school vacation periods. All meals are served free, but reimbursements are limited to lunch and either breakfast or a snack. In 1992, nearly 2 million children participated in the Summer Food Service Program. The Fiscal Year 93 appropriation for the program is \$215.7 million.

h. Child and Adult Care Food Program

The Child and Adult Care Food Program provides federal funds and donated foods to non-residential child and adult day care centers and, through sponsor organizations, to family and group day care homes for children. This is an entitlement program funded through general appropriations. Average daily participation at child care facilities in Fiscal Year 1992 was 1.8 million; participation at adult day care centers was approximately 31,500. Children served are generally under the age of 13 years. The Fiscal Year 93 appropriation was \$1.3 billion.

i. Special Supplemental Food Program for Women, Infants and Children (WIC)

WIC was designed to improve the health of pregnant, and postpartum women, and children up to 5 years of age by providing supplemental foods, nutrition education, and access to health services. Participants receive vouchers that can be redeemed at retail food stores for specified foods that research has shown are frequently lacking in the diet of low-income mothers and children. Eligibility depends on income and nutritional risk, with persons participating in AFDC, the Food Stamp Program, or Medicaid being automatically income eligible. WIC participants also receive nutrition and drug abuse education materials. In 1991, WIC reached about sixty percent of eligible children and women. The average monthly participation in Fiscal Year 1992 was 5.4 million. According to FNS estimates, about 10 percent of WIC participants are pregnant, breastfeeding, or postpartum adolescents. The Fiscal Year 1993 appropriation for WIC was \$2.9 billion.

j. WIC Farmers Market Nutrition Program (FMNP)

Created by Congress in 1992, FMNP provides WIC participants with special coupons good for the purchase of fresh produce at authorized farmers markets. FMNP was

operated as a demonstration project for two years, serving nearly 450,000 WIC participants. The program is funded through a legislatively mandated set-aside in the WIC program appropriation. States choosing to operate a FMNP are required to match federal funds by contributing at least thirty percent of the cost of the program. Three million was set-aside for this program in Fiscal Year 1993, and ten states are currently participating.

k. Commodity Supplemental Food Program

The Commodity Supplemental Food Program (CSFP) provides commodity foods to States to supplement the diets of low-income infants; children up to age 6; pregnant, postpartum and breastfeeding women; and persons 60 years of age and over. CSFP often operates in areas that do not have WIC, however, in areas where both WIC and CSFP operate, individuals may not participate in both programs simultaneously. In Fiscal Year 1993, \$94.5 million was appropriated for CSFP.

l. Nutrition Education and Training Program

The Nutrition Education and Training Program (NET), originally authorized by the Child Nutrition Act of 1977 and reauthorized for a five year period in 1989, provides grants to States (usually through the State Education Agency) to develop nutrition education and training programs for children, parents, educators and school food service personnel. The purpose of NET is to encourage good eating habits and teach children and parents the relationship between food and health. NET reaches children and youth by coordinating learning experiences in the classroom, the school cafeteria and the community, and by providing training to food service personnel. In Fiscal Year 91, more than 4 million children, 103,000 teachers and 87,000 food service personnel participated in NET activities.

In the first two years of funding, the annual appropriation level for NET was \$26.2 million, with a minimum State grant of \$75,000. Funding levels dropped significantly over several years, until in 1987 \$5 million was available for the program and minimum State grants were lowered to \$50,000. Legislation in 1990 authorized incremental annual increases in funding beginning in Fiscal Year 90 to a top level of \$25 million in Fiscal Year 93 and 94, with the minimum grant level rising accordingly to \$75,000 in any year when funding reached \$20 million. In Fiscal Year 93, \$10 million was appropriated for NET, with a minimum grant level of almost \$60,000.

2. Research and Evaluation

Each year, FNS supports a number of research and evaluation projects designed to improve the efficacy and capacity of USDA food assistance programs. Following are examples of such projects relating to Child Nutrition programs, Food Stamps, and WIC.

a. Child Nutrition Research and Evaluation

- The School Nutrition Dietary Assessment Study will examine the nutrient content of the school nutrition programs as offered, selected, and consumed by students. The final report is expected in 1993.
- A number of Menu Modification Demonstration Grants are being funded to plan and implement changes in elementary school meals to improve the nutrient content of meals served. The final report is expected in 1993.
- A School and Student Participation Trends Study will look at school and student participation trends in the National School Lunch Program and the School Breakfast Program.

b. Food Stamp Research and Evaluation

- The Evaluation of the Expanded Maryland Electronic Benefit Transfer (EBT) Project, started in 1991, will assess the statewide expansion of an EBT system piloted in Baltimore. Benefits are being delivered and redeemed through on-line transactions for households receiving Child Support, Food Stamps, AFDC, and/or General Assistance. The final report is expected in 1994.
- The San Diego Cash-Out Evaluation will compare the effects on household expenditures and food use of providing cash and coupon benefits to a controlled sample of households. The first part, now completed, randomly selected 20 percent of San Diego's food stamp caseload to receive cash benefits. The second part, started in September 1990, cashed out all food stamp recipients. The demonstration is expected to end in December 1993.
- A study on Children's Participation in FNS programs was started in September 1991 to assess the match between USDA programs and the needs of low-income children, exploring such issues as receipt of multiple benefits, targeting, and nonparticipation among eligible children. The final report is expected in 1993.
- The Young Absent Fathers Study is a three-year, six-site, community-based pilot project designed to learn how to reach young unwed fathers, and provide them with the means to support their children. The final report on this study is expected in 1993.

c. WIC Research and Evaluation

- The WIC Dietary Validation Study will help State and local agencies develop valid instruments for determining the nutritional status of women, infants, and children who seek to enroll in WIC. This project is expected to be completed by the Fall of 1994.
- The Nutrition Education Assessment will investigate the relationship between WIC nutrition education and participants' nutrition-related knowledge, attitudes, behavior and satisfaction with services. Data will be collected through focus groups, service inventories, and participant interviews in up to six sites. The final report is expected in the Spring of 1996.
- WIC Modeling and Analytic Projects (MAP) is designed to analyze existing data to address policy-relevant research questions using extent data on a variety of topics including: participant health characteristics; participation patterns and food consumption; comparative health status of participants and eligible nonparticipants; and the effect of WIC participation on dietary intake, birth outcomes, and the cost of medical care.

D. Human Nutrition Information Service

The Human Nutrition Information Service (HNIS) develops dietary guidelines and nutrition information materials for people age two and up, including nutrition and health curriculum materials for middle and high school students. HNIS recently completed a study to assess the nutrition education needs of pregnant teenagers. Based on needs assessment results, a prototype videotape dealing with healthful eating during the second trimester of pregnancy was developed and tested with pregnant teens for appeal, comprehension, and usefulness of information provided. Production of the final version of the video is currently underway. HNIS also released *Dietary Guidelines and Youth Health — Health Educator's Teaching Kit* in early 1993. The kit was developed in cooperation with the Association for the Advancement of Health Education to help teach Dietary Guidelines concepts to junior and senior high school students.

In addition, HNIS conducts and analyzes data from food consumption surveys that provide information on a variety of population subgroups, and maintains an active program in survey methods research. During Fiscal Year 1991, HNIS continued work on 2 nationwide food surveys: the Continuing Survey of Food Intakes by Individuals (CSFII) and the Diet and Health Knowledge Survey (DHKS). The next CSFII/DHKS is scheduled for 1994. HNIS is planning for the next Household Food Consumption Survey (formerly the Nationwide Food Consumption Survey) to be

conducted in 1996. An HNIS administrative report, *Perspectives on the Diets of American Women and Children: Factors Affecting Dietary Status as Measured in the Continuing Survey of Food Intakes by Individuals, 1985*, was published in Fiscal Year 1991.

a. Human Nutrition Research

The amount of human nutrition research supported by USDA totaled \$76.1 million in Fiscal Year 1992. USDA research activities focus on six areas: normal requirements for nutrients; role of nutrition in health promotion and prevention of diet-related disorders; food composition and nutrient bioavailability; food and nutrition monitoring research; food and nutrition information and education research; and research on government policies and socioeconomic factors. This last category provides for ongoing research and evaluation on USDA-funded programs, including the child nutrition programs. USDA contributes to the Human Nutrition Research Information Management System to keep track of ongoing USDA research.

E. Agricultural Research Service

The Agricultural Research Service (ARS), the principal intramural research agency of USDA, conducts most of its nutrition research at five research centers dedicated to this purpose, including one on children's nutrition, and at regional research centers.

a. Children's Nutrition Research Center

The Children's Nutrition Research Center (CNRC) is one of five USDA-sponsored human nutrition centers. CNRC is responsible for investigating the nutritional needs of children from infancy through adolescence, and pregnant and nursing women. Established in 1978 in response to a legislative mandate, the Center's studies provide research data and nutrition guidelines for children, pregnant and nursing women; evaluate nutritional standards; assess the relationship between nutrition and physical and mental development; and develop ways to improve the body's use of nutrients. The Center is currently conducting research on calcium levels and bone growth in girls aged 5-16; on the nutrient requirements of adolescent girls; and on the nutrient requirements of nursing teenagers. The CNRC's Fiscal Year 93 funding level is approximately \$10 million.

b. Family Economics Research Group

The Family Economics Research Group (FERG) analyzes the economic well-being of families — how they acquire, allocate and manage resources under varying economic and social conditions. FERG uses data from the Bureau of Labor statistic to analyze many aspects of family economics including the analysis of child cost estimates. In addition, FERG has initiated a study on the use of illicit drugs and alcohol in rural

areas, using data from National Institute on Drug Abuse household and senior high school surveys. The results will be used to enhance the drug prevention efforts of USDA's 4-H and other youth programs.

F. Cooperative State Research Service

The Cooperative State Research Service (CSRS) administers a formula grant program for States and coordinates the nutrition research activities of the network of State and territorial agricultural experiment stations located at land-grant universities, including the 1890 universities and Tuskegee University. The formula grants give states considerable flexibility in determining how to use the funds, but all projects are subject to USDA approval and States are required to submit annual progress reports. Matching funds, often in excess of the amount of federal funds, are provided by the State. CSRS formula grants are currently supporting regional research on the behavioral and health factors that influence the food consumption of young adults in eight states.

In addition, CSRS supports special and competitive research grants on human nutrient requirements and food safety issues. Many of the competitive grants awarded in recent years have funded research on maternal nutrition, including one on the factors that influence the nutrition and health of adolescents during and after pregnancy. The study revealed that the dietary quality of adolescents participating in this project improved during pregnancy and had decreased one year following pregnancy.

CSRS also administers a discretionary grants program that provides funding to universities to offer summer science and engineering programs to high school students. The program, started in 1980 as part of an Administration-wide initiative, is designed to get students interested in pursuing careers in agriculture-related sciences. Total funding for the program is \$500,000, with CSRS grant awards of \$2,500. Most universities also secure funds from other sources.

G. Extension Service

Some 5,657,657 youth, primarily 5-19 years of age, participated in 4-H in 1991.¹

The Cooperative Extension Service (CES), established by legislative mandate in 1914, is a national educational network designed to use scientific knowledge, research and education to help people improve their lives and make practical decisions on issues critical to the economic, social, and environmental progress of all Americans. Linking the education and research resources and activities of federal and State governments, local communities and land-grant universities, CES identifies and addresses national priorities. CES provides funding to States through a formula grant

program, and through land-grant institutions, for educational and technical assistance. Legislation provides a formula for distributing funds to States based on farm and rural population. Fiscal Year 1993 priorities for funding to land grant institutions include adolescent pregnancy, and nutrition and health. In Fiscal Year 1989, an estimated 25 percent of CES' total federal budget of \$361 million was dedicated to programs focusing on adolescents. In Fiscal Year 1992, approximately \$420 million in federal funds were appropriated for CES.

CES base programs involve the following activities: agricultural competitiveness and profitability; community resource and economic development; family development and resource management; 4-H and youth development; leadership and volunteer development; natural resources and environmental management; and nutrition, diet and health. In addition, CES has identified the following national initiatives priority areas: communities in economic transition; decisions in health; food safety and quality; plight of young children; sustainable agriculture; waste management; water quality; youth at risk. These priority areas serve to guide CES program development.

a. 4-H Youth Development

4-H programs engage youth, volunteers, state land-grant universities, state and local governments, and the USDA in assisting youth acquire knowledge, developing life skills, and forming attitudes that will enable them to become self-directing, productive, and contributing members of society. 4-H conducts enrichment and instructional activities in a number of interest areas including: animals and poultry; plant science and crops; mechanical science; natural resources; economic, jobs and careers; citizenship and community involvement; leisure and cultural education; energy; health and safety; individual and family resources; communications arts and science; and, food and nutrition. The National 4-H Council annually supports activities to encourage further collaboration and achievement, including international exchanges with 22 countries; recognition awards for over 100,000 young people; and, leadership training programs. About 5.7 million 5-19 year olds from over 3,000 counties participated in 4-H programs last year, along with about 650,000 teen and adult volunteers.

Youth Participants in 4-H

12%	lived on farms
37%	lived in towns under 10,000 and open country
19%	lived in towns and cities of 10,000-50,000
10%	lived in suburbs of cities of over 50,000
22%	lived in central cities of over 50,000
52%	girls
48%	boys
22%	ages 5-8
45%	pre-teens (9-11)
23%	early teens (12-14)
10%	middle and upper teens (15-19)
.05%	over age 19

b. Youth at Risk

The Youth at Risk initiative is a coordinated effort to provide more youth, particularly those most vulnerable due to poverty, lack of parental and community support, and negative peer pressure, with educational, community-based prevention and intervention activities. Local communities play a critical role in identifying the problems facing their young people, and in designing and implementing the programs to address those problems. In Fiscal Year 1991, \$7.5 million in federal funds allowed for the creation of 70 programs nationwide in three target areas: school-age child care and education; reading and science literacy; and coalitions for high risk youth. In Fiscal Year 92, an additional \$10 million helped sustain and strengthen existing programs as well creating 25 new programs. Another \$10 million was appropriated for Youth At Risk initiatives in Fiscal Year 93.

- School-age child care and education programs are designed to increase children's academic skills through informal learning activities that coordinate, but do not duplicate, in-school educational programs.
- Reading and science literacy programs are intended to increase young people's basic skills, knowledge, and processes in science, reading, and mathematics through enrichment, after-school programming, and intensive summer and day camp programs.
- Coalitions for high-risk youth coordinate youth-serving agencies, the corporate sector, and other agencies and community groups to form partnerships to help youth.

c. Home Economics and Home Nutrition

The goal of the Home Economics and Home Nutrition (HEHN) Program is to strengthen families through education. HEHN provides national leadership to family-focused education programs to help individuals and families develop the competencies to become healthy, productive, financially secure, and environmentally responsible members of the community. The program is offered to all people, but emphasis is placed on reaching families with limited resources. In addition to providing leadership to the following CES programs, HEHN also contributes to CES initiatives such as the Plight of Young Children, Food Safety and Quality, Youth At Risk, Water Quality and Waste Management:

- Family Development and Resource Management is an education program that focuses on the management of resources — including money, time, textiles and apparel, housing and energy; strengthening individual and family relationships; providing quality care for children; and maximizing the independence of the elderly.
- Nutrition, Diet and Health program focuses on helping people make informed choices about food safety, quality, and consumption to enhance health and nutrition habits, reduce the risk of chronic disease, give birth to healthy babies, and optimize long-term health for children.

d. Expanded Food and Nutrition Education Program

The Expanded Food and Nutrition Education Program provides training to paraprofessionals and volunteers who teach food and nutrition information and skills to low-income families and youth. The goal of the program is to assist low-income families in acquiring the knowledge, skills, attitudes, and behaviors necessary for maintaining healthy diets. EFNEP programs use a standardized curriculum for both adults and youth that includes information on choosing healthy foods, meal planning, food safety and storage. Youth programs offer additional topics such as fitness, avoiding substance abuse, and home safety. In Fiscal Year 1991, over 230,000 families and 480,000 youth participated in EFNEP programs, an increase of over 10% from the previous year. Many EFNEP programs target pregnant teens to reduce the risk of low birthweight due to inadequate nutrition.

e. Food Safety and Quality

Food Safety and Quality programs address consumer concerns over pesticide residues in food by improving public understanding and awareness about food safety and quality. In Fiscal Year 91, \$1.5 million in special congressional funds was allocated to the Extension Service to improve educational programs in the area of food safety and quality. 36 model programs were funded in six priority areas. These projects

are developing, implementing, and evaluating model food safety education programs for various types of youth and various other target audiences. Impact evaluations are expected to be completed in June 1992.

f. Youth Development Information Center

The Youth Development Information Center (YDIC) was created in 1988 by the Extension Service and the National Agricultural Library (NAL) to provide information services to youth development professionals who plan, develop, implement, and evaluate youth programs. The Center maintains a collection of books, journal articles, dissertations, reports, curricula, and other resources relevant to youth development. Center materials can be accessed through NAL's database, AGRICOLA, and consist of five categories: communication; educational design; youth development; youth program management; and volunteerism.

In collaboration with the Extension Service, YDIC is currently developing the Child, Youth, and Family Education and Research Network (CYFER-NET), an electronic communications network and information management system. CYFER-NET is being designed to provide direct access to proven and reliable programs as well as the information and resources to support them. The idea behind CYFER-NET is to use advanced communications technology and the collaborative efforts of a variety of organizations in identifying, reviewing, managing and distributing information. Development is expected to take three years.

YDIC, along with the National Society for Fundraising Executives, also is planning to develop a database on funding resources and tutorials for resource development for youth service organizations.

H. Forest Service

The Forest Service manages the 191 million acres of forest and range land that make up the National Forest System, and assists States and private forest owners in the protection, management, and use of almost 600 million acres of forest and associated watershed lands. The Forest Service also is involved with the Job Corps program operated under contract with the U.S. Department of Labor.

a. Youth Conservation Corps

Administered jointly by the National Park Service, the U.S. Fish and Wildlife Service, and the Forest Service, the Youth Conservation Corps (YCC) is a summer employment program for youths aged 15-18 representing all social, economic, ethnic, and racial classifications. YCC was established by a Memorandum of Understanding between the Department of the Interior and the Department of Agriculture, to carry out provisions of the Youth Conservation Corps Act, as amended. The goals of the program are to accomplish needed conservation work on public lands, to provide

employment for adolescents of all social, economic, ethnic and racial backgrounds, and to develop in participating youth an understanding and appreciation of the Nation's natural environment and heritage. The youths work on a variety of projects that further the development and conservation of America's natural resources, including building trails, clearing streams, planting trees, building campground facilities, and other conservation activities in the National Park system, the National Forest System, and public lands and water areas throughout the United States.

See also Department of Interior and Department of Labor.

I. Farmers Home Administration

The Farmers Home Administration (FMHA), within the Small Community and Rural Development, provides credit for those in rural America who are unable to get credit from other sources. FMHA administers a variety of loan programs including farm ownership loans; soil and water conservation loans; and rural housing loans.

a. Youth Project Loans

Youth Project Loans are made available on a first-come, first-served basis to individual rural youths between the ages of 10 and 20 to establish and operate income-producing projects in connection with their participation in 4-H Clubs, Future Farmers of America, and similar organizations. Each project must be part of an organized and supervised program of work, produce sufficient income to repay the loan, and provide the youth with practical business and educational experience. Loans can be used to operate projects such as a lawn and garden service, repair shops, livestock and crop production, a catering service, and roadside stands. Funding for this program is made available through the Farm Operating Loan program. In Fiscal Year 1993, over \$3.2 million will be available for youth project loans.

J. Marketing and Inspection Services

The Marketing and Inspection Services, USDA's regulatory public health group, is involved in food safety, nutrition, and nutrition labeling education. In recent years, the agency has actively pursued food handling education activities that focus on youth, including the production of a video called *Danger Zone* that targets junior high school students, and the publication of a children's page in the USDA consumer magazine. The agency is currently looking into new ways to increase links with the USDA child nutrition and youth programs.

¹*Cooperative Extension System, National 4-H Statistics, 1991.*