

Withdrawal/Redaction Sheet

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
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001. draft	Draft speech re: American Psychological Association [partial] (1 page)	08/03/2000	b(6)
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COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Ann O'Leary
OA/Box Number: 19575

FOLDER TITLE:

APA [American Psychological Association] Speech [2]

2013-0436-S

rc1228

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
- P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
- P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
- P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

- b(1) National security classified information [(b)(1) of the FOIA]
- b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
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- b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
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**SPEECH TO THE AMERICAN PSYCHOLOGICAL ASSOCIATION
PRACTICE DIRECTORATE GROUP
AUGUST 3, 2000**

INTRO

- Thank you. – Must be committed if you are in DC in August.
- Here to give you the “inside the beltway” view, but sometimes my friends worry that I am too much of an inside the beltway person. Last fall, I was travelling with a friend on a road trip to NYC and as I began driving, I had to admit to him that I did not know how to get to the beltway. He was worried that I didn’t get out of Washington enough.
- The topic of my talk today is supporting parents, communities in schools in raising healthy children – an overview of the Clinton-Gore Administration Accomplishments. Before I begin talking about the role of the Clinton Administration in this area, I want to recognize the important role that psychologists play in helping to raise healthy children.
- Support of parents, schools, and communities is something that school psychologists and family psychologists do every day. It is our job at the Federal policy level to examine ways we can support work that helps you do your job most effectively – a job that is critical to the healthy development of children.
- Often, policy makers in Washington are criticized for not knowing what is going on in the rest of America and not recognizing the important contributions of individuals in local communities who are working with children and families every day – teachers, social workers, physicians, psychologists, community organizers, etc. Politicians and policy makers rely on research, on focus groups, and on organizations like this one to provide us with information from the frontlines on what needs to be changed and suggestions for possible solutions.
- But, we also often rely on friends and family for the information – proving that the personal is political and often times the most powerful! The issues that affect the personal lives of politicians often are the issues in which they feel most passionate and most ready to breakdown political barriers to get work done – and, often, it makes for strange bedfellows. In fact, as many of you know, improving health care for the mentally ill has brought together Senator Wellstone, probably the most liberal Democrat in the Senate with Senator Domenici, a solid conservative Republican – both of whom have been touched by mental illness in their families. Personal relationships have also meant that Gene Sperling, the President’s Economic Advisor, worries about how to improve literacy among young children in our country – who could avoid such worries with a mother who is a third-grade reading teacher.
- And, in fact, I often receive phone calls from Mrs. Clinton during her travels about people that she has met on the road. She’ll call because she has met someone who is having difficulty getting the education and training they need to move successfully from welfare to work, or someone who is confused by a public housing rule that does not allow them to rent the

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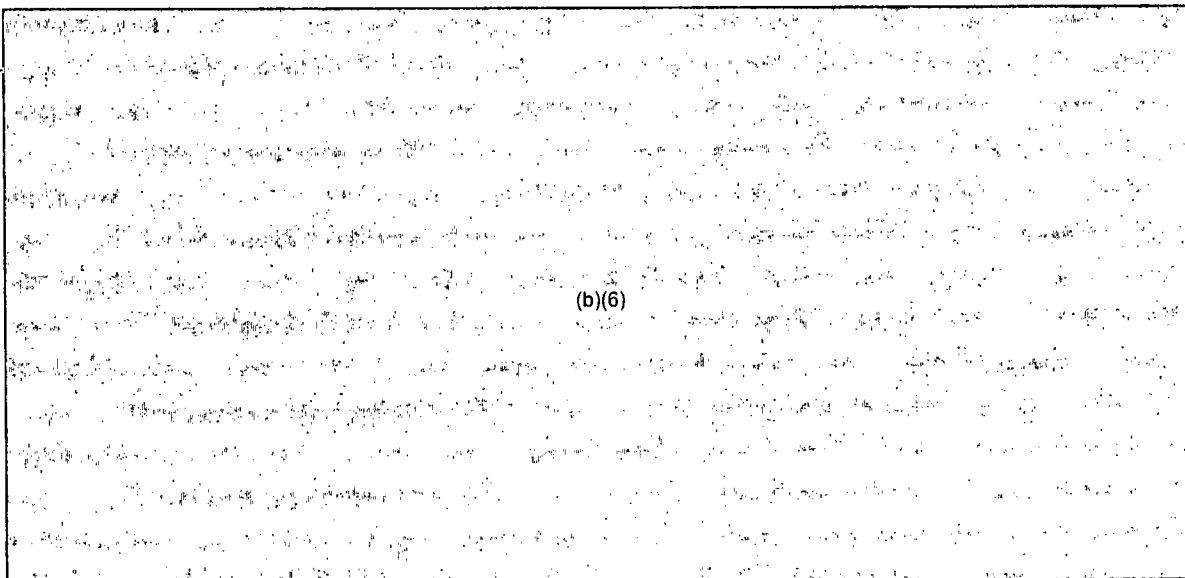
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apartment they need for their family, or another family that has been on a waiting list to receive child care subsidies for too long. In every instance, she will want to understand the policy that is a roadblock to every day problems for children and families and whether we can do anything to change it or make it easier. It is the stories and situations that we hear, see, and experience in our daily lives that are often become the most critical policy concerns.



- I want to talk more about how this Administration is supporting collaborative work around the healthy development of children, but before I do I think it would be helpful to look at a snapshot of America's children.

Are America's Children growing up healthy? What do they need?

The good news is that America's Children are doing much better than they were when President Clinton and Vice President Gore took office.

- ✓ The economy is booming and, as a result, far fewer children are living in poverty – the number of poor children in America has declined by 3.6 million children since 1993. In fact, under President Clinton and Vice President Gore, child poverty has declined from 22 percent in 1993 to 18 percent in 1998 -- the biggest five-year drop in nearly 30 years.
- ✓ In July, the U.S. government released our annual report on the status of America's children, *America's Children: Key National Indicators of Well-Being*. This report showed that, in the words of Duane Alexander the Director of the National Institute of Child Health and Human development, "from toddlers through teens, there is good news." There has been a dramatic decrease in childhood deaths, the birth rate for teenagers is at a record low, more children ~~and are~~ enrolled in early childhood programs, and violence by and among adolescents has decreased.
- ✓ The Clinton-Gore Administration has dramatically increased opportunities and support for our most disadvantaged families by nearly doubling funds for Head Start, by ensuring that all

of our children are taught to challenging academic standards, by enacting the single largest investment in children's health since 1965, by expanding the Earned Income Tax Credit and creating a Child and Dependent Care Tax credit just to name a few.

But, there is still much to be done....

[It is important that we recognize this great progress, but also use this information as indicator of how much more we need to do. Just a few examples –

- We know that while this Administration has invested more in child care than ever before, we are only serving 10 percent of eligible children. Need to pass real child care budget.
- This past spring, the Journal of the American Medical Association published studies showing that the number of preschoolers on anti-depressants had increased by over 200 percent in the past five years. Furthermore, it found that many children are being inappropriately diagnosed and treated. Need much more information to ensure that our children receive the diagnosis, treatment, and management they need.

In this final year of the Clinton Administration, the President and First Lady have not stopped working on these critical issues. The First Lady has fought tirelessly to increase the child care budget to reach 150,000 more children this year and she held a nationally televised press-conference where she launched an effort to improve our understanding of diagnosing and treating children with emotional and behavioral problems. Due to this effort, the American Academy of Pediatrics has issued guidelines on the diagnosis of ADHD, the National Institute for Mental Health has invested \$5 million to study the use of Ritalin in preschoolers, and the Food and Drug Administration is exploring how they may be able to provide more appropriate recommended dosages for children.

- We also know that while overall violence in schools is declining, ~~that~~ there has been a recent increase in multiple homicides in schools over the past three years and that children find that bullying and harassing seem to be increasing in schools. And, parents are worrying – feeling less secure about safety of children.

The President has invested much effort in working to reduce youth violence by launching a National Campaign Against Youth Violence and developing a coordinated strategy at the Federal level to prevent youth violence. The Administration recently announced ~~that~~ \$45 million in federal support to help schools in over 100 school districts in 35 states to recruit, hire, and train middle school drug prevention and school safety coordinators. And, next week the Administration will release \$20 million in awards to support the start or expansion of elementary school counseling programs.

What do we need to do a better job doing?

It is critical that policies supporting the healthy development of children are not piece meal approaches to “problems” faced by children, but instead are comprehensive prevention and development programs.

(1) Changing public policy

We can no longer work alone – “It Takes A Village” is not just a title of a book or a mantra for Mrs. Clinton, it is something that this Administration has worked hard to support

- This Administration has worked on many collaborative programs, policies, and grants – but there is one that deserves special attention. It is the ***Safe Schools/Healthy Students Initiative***. This initiative is a collaboration between the U.S. Departments of Education, Justice, and Health and Human services that helps communities design and put into place comprehensive educational, mental health, social service, law enforcement and juvenile justice services for youth. This initiative is supporting 77 projects in communities around the country.

I like to point out this initiative because it is one that involves collaboration and coordination at all levels – at the federal level, the community level, and even the neighborhood level. And, it is an initiative that works on prevention by building on children’s strengths and promoting healthy development rather than focusing on one problem area.

- Just as it is critical to collaborate among programs from various sectors, it is also important to recognize that collaboration needs to occur within each area as well – schools, for example. Recently, the news has focused on education reform and in the context of the talk of education reform, kids sometimes get lost. The talk is often about standards and accountability. It is important to recognize that this Administration has worked on moving forward with standards and accountability to improve academic outcomes, but has also recognized that you cannot do that without critical support of the overall development of children – from providing more school counselors, to more enriching afterschool programs, to better trained teachers in classrooms with fewer students.

(2) In addition to changing public policies, we need to change public attitudes

- The Administration has worked in partnership with the APA to launch the Anti-Stigma Campaign with Mrs. Gore to fight the stigma of mental health problems among young people.
- I want to tell you about another public awareness campaign the Administration is launching, “Being There for Teens” Campaign. In May, the President and First Lady held a White House Conference on Raising Responsible and Resourceful Teenagers and we found that teenagers most want an adult, and especially a parent, to be there for them when they need it. (tell Chelsea “sightings” story)
- Peter Dinklage’s Don’t Laugh At Me Campaign

Better information:

Federal Programs for Children & Families: A Tool for Connecting Programs
to People -- www.policyexchange.iel.org/pubs/Federal_Programs_for_Children.html



AMERICAN
PSYCHOLOGICAL
ASSOCIATION

Practice Directorate

June 20, 2000

Ms. Ann O'Leary
Special Assistant to the President
Senior Policy Advisor to the First Lady
The White House
2nd Floor, West Wing
Washington, DC 20502

Dear Ms. O'Leary:

This letter is to confirm your participation in the American Psychological Association (APA) Practice Directorate's 7th Annual Institute for Psychology in Schools. All of us involved in planning this year's Institute are delighted that you will be presenting.

We anticipate that 150-200 people will attend the Institute and your opening session. Enclosed is other important information for you regarding your participation, with a few **to-do's** for you noted in bold. Contact information for the other speakers and Institute staff also is included.

On behalf of the APA Practice Directorate and the Institute planning group, thank you for agreeing to present at this year's Institute. We look forward to hearing about the Clinton-Gore administration's accomplishments and initiatives that support children and youth. We anticipate attendees will be very supportive and interested, and we look forward to an enriching and enjoyable learning experience for all who participate in this conference.

Please do not hesitate to contact me (512-331-0029), or our Institute Coordinator, Denise Bradley (512-990-9566), at any time if you have any questions or concerns.

Sincerely,

A handwritten signature in black ink, appearing to read "Tom Kubiszyn".

Tom Kubiszyn, PhD
Institute Director and APA Practice Directorate Consultant
Past Assistant Executive Director, Policy and Advocacy in the Schools

Enclosures: Important Information Summary for You as Presenter
7th Annual Institute Speakers and Staff List
Institute brochure and sample registration form



AMERICAN
PSYCHOLOGICAL
ASSOCIATION

999 9th St NW
Practice Directorate

July 22, 2000

Ann O'Leary
Special Assistant to the President
Senior Policy Advisor to the First Lady
The White House
2nd Floor, West Wing
Washington, DC 20502

898-9000

Dear Ms. O'Leary:

Thank you for agreeing to present the Keynote Address at the 2000 Institute for Psychology in Schools – *Increased Federal Support for Children and Youth: New Funding Opportunities for Practice and Research*, Thursday, August 3, 2000, at the Grand Ballroom-North in the Renaissance Washington Hotel in Washington, D.C.

The registration desk and continental breakfast will be set-up by 7:30 a.m., with registration officially to open at 8:00 a.m., outside the Grand Ballroom-North on the ballroom level of the hotel. There, you can pick up your name badge and other conference materials, including a copy of the conference notebook.

The Institute begins at 8:30 a.m. with the opening plenary session, which will be in the Grand Ballroom-North on the ballroom level. Your address is scheduled from 8:45 – 9:30 a.m. You will be introduced by Dr. Ronda Talley. The Institute ends at 1:15 p.m. with the conclusion of the closing town hall session. We understand that you have many responsibilities but welcome you to attend the entire Institute, or as much of it as you may be able. Here is important information regarding your keynote presentation:

Session Title: *Supporting Parents, Communities and Schools in Raising Healthy Children: An Overview of the Clinton-Gore Administration's Accomplishments and Initiatives*
Time: 8:45 a.m. – 9:30 a.m.
Place: Grand Ballroom-North (Ballroom Level)
A/V Ordered: Transparency projector, slide projector

If you have any questions, please feel free to call me at (512) 331-0029. I will be leaving for Washington, D.C. on Wednesday, August 2 and will be staying at the Renaissance Washington Hotel, (202) 898-9000.

Thank you for participating in this year's Institute. I look forward to seeing you soon.

Sincerely,

Tom Kubiszyn, Ph.D.
APA Practice Directorate Consultant
Past Assistant Executive Director for Practice
Policy and Advocacy in the Schools Program

**Important Information for You
as a Presenter at the 2000 Institute for Psychology in Schools**

Presenter: Ann O'Leary, The White House

Title of your session: Supporting Parents, Communities and Schools in Raising Healthy Children: An Overview of the Clinton-Gore Administration's Accomplishments and Initiatives

When/Where: Thursday, August 3, 2000, 8:30am - 9:30am (opening plenary session timeslot). Renaissance Washington Hotel, Grand Ballroom – Washington, DC. After Dr. Tom Kubiszyn, Institute Director, completes brief opening remarks he will introduce Institute planning group member Dr. Ronda Talley. Dr. Talley will introduce you at 8:45am.

Institute registration: Enclosed, FYI, is a brochure and sample registration form. As a presenter, you do not need to register. We gladly welcome you to attend the full program (8:30am - 1:15pm).

Handouts (including references/bibliography): We will provide each attendee with a spiral-bound book of conference materials. Therefore, we strongly encourage you to provide us with camera-ready copies of your handouts and a list of references/bibliography for your presentation [deadline: July 7]. The advantage that you will enjoy in doing this is convenience and cost savings since we will handle all of the duplicating, shipping and distribution for you. Please send your camera-ready copies to our Institute Coordinator, Denise Bradley. Her mailing address is:

Denise Bradley
17847 Loch Linnhe Loop
Pflugerville, Texas 78660

If there are additional materials that you'd prefer to distribute onsite, please feel free to bring them with you, keeping in mind that you will likely need 200 copies.

Room setup: A podium and head table will be located for you at the front of the room. Audience seating will be in rounds.

Audio-visual equipment: Standard audiovisual equipment (i.e., overhead projector, 35mm slide projector, podium microphone, lavalier [clip-on] microphone) will be made available for you. If you have not already done so, please let Denise Bradley know your a/v equipment needs as soon as possible.

7th Annual Institute Speakers and Staff List

Keynote Speaker

Ann O'Leary
Special Assistant to the President
Senior Policy Advisor to the First Lady
The White House
2nd Floor, West Wing
Washington, DC 20502
Email: Ann_O'Leary@opd.eop.gov

Break-Out Session Speakers

Larry Sullivan, PhD
Safe Schools/Healthy Students Action Center
National Mental Health Association
1021 Prince Street
Alexandria, VA 22314
Phone: (703) 837-3370
Fax: (703) 549-4265
Email: lsullivan@nmha.org

Kimberly Hoagwood, PhD
Associate Director of Child and Adolescent Research
National Institute of Mental Health
6001 Executive Blvd.
Bethesda, MD 20892
Phone: (301) 443-3364
Fax: (301) 443-4045
Email: khoagwoo@mail.nih.gov

Susan Frost
Senior Advisor to Secretary of Education Richard Riley
U.S. Department of Education
400 Maryland Avenue, SW
Washington, DC 20202
Phone: (202) 401-8450
Fax: (202) 401-0596
Email: Susan_Frost@ed.gov

Jennifer Osorio
Acting Associate Director for Planning, Evaluation, and Legislation
Division of Adolescent and School Health
Centers for Disease Control and Prevention
4770 Buford Highway, NE
Mail Stop K-29
Atlanta, GA 30341-3724
Phone: (770) 488-3165
Fax: (770) 488-3110
Email: jao4@cdc.gov

Closing, Town Hall Panelists

Russell Skiba, PhD
Director
Institute for Child Study
Indiana University
ED 0026
Wright Education Building
Bloomington, IN 47405
Email: skiba@indiana.edu

C. Brent Myers, EdD
Project ACHIEVE
46 West Green St.
Westminster, MD 21157
Email: edpsyc99@aol.com

Elaine Clark, PhD
Professor
University of Utah
1705 E. Campus Center Drive, Room 327
Salt Lake City UT 84112-9255
Email: clark@gsc.utah.edu

(4th panelist yet to be confirmed)

Institute Staff

Tom Kubiszyn, PhD
Institute Director and APA Practice Directorate Consultant
11003 Chateau Hill
Austin, TX 78750
Phone: 512-331-0029
Fax: 512-331-0029
Email: tom.kubiszyn@mail.utexas.edu

Denise Bradley
Institute Coordinator
17847 Loch Linnhe Loop
Pflugerville, TX 78660
Phone: 512-990-9566
Email: denise.bradley@mail.utexas.edu

Must - find ADHD
research paper

Ann-

I've tried to provide a bit of a backdrop for you.... I hope this is somewhat helpful....

Supporting Parents, Communities, and Schools in Raising Healthy Children: An Overview of the Clinton-Gore Administration's Accomplishments and Initiatives

Audience:

Practitioners, administrators and university trainers who are interested in schooling and children's issues seeking to learn about programs to improve mental health services for youth in schools and communities and how to apply for federal funds for practice and research

Event Context and Sponsoring Organization Background:

---Institute is a precursor to the American Psychological Association's 108th Annual Convention being held August 4-8

---Main themes of the convention are:

Psychology's role in the changing healthcare, in improving workplace environments and in examining the psychological implications of the human genome project....

---One of the Convention's Public Interest Programming Committee's is the Committee on

→ Children, Youth and Families, Friday August 4, 11:00 – 11:50 am

---The APA Practice Directorate is involved in a board range of activities that support psychology practitioners and health care consumers. The current agenda is organized into a series of four interrelated initiatives – legislative advocacy, legal and regulatory strategies, marketplace activities and public education.

---The APA has different Divisions including 2 focusing on education and children – the

* || Division of School Psychology is composed of scientific-practitioner psychologists whose major professional interests lie with children, families and the schooling process.

Issues / Ideas:

---psychology as an integral aspect of health care, particularly for children.... (and educating the public about the contributions psychologists make to health care)

---the role psychology can play in the schooling process....

---the role of psychologists' knowledge bases in the areas of adolescent development, vocational development, learning and understanding

---comprehensively defining education to include aspects of sound mental health development, healthy learning processes, parental and community support networks, etc.

Important parts of Clinton-Gore legacy and aspects to consider for highlighting:

--Initiatives for Children / Schools / Education – as outlined in the accomplishments document

---School-to-Work Initiative – see APA publications

[---Mental Health Work – White House Conference last year and subsequent initiatives
(the APA has recently emphasized cooperation on this issue – see article)

---Adolescent development work – this has also become a recent policy issue for the APA

---State Children's Health Insurance Program

***emphasizing the network created by the Clinton-Gore administration through initiatives for children, parents, and schools as weaving a 'web' of support for psychologists and others interested in children's development and education is key.... Cooperation and making the most of the opportunities the Administration has put forward would be a nice angle....

***maybe using an overarching conceit about cooperation (eg: the APA / white house cooperation on mental health, tying into children's mental health and mental health work in schools, beyond to broader accomplishments of the administration)... since that's about removing stigma / refocusing conceptions, can be linked to doing the same for federal support for children and youth..... ☺

Side
Story
really
studies

It
may
change

more mental health problems

1. General
2. Psychological
3. Social

useful + needed - a few more

- true, important to know

- kids can't show / learn properly

- teachers don't have time to address that kids

have for parents - most popular - go to

teachers, parents, + kids

- have to deal w/ different kinds of behavior, but not everyone doing

Mrs. Anton Zitalini's event -

being discussed - psychology not given value - kids no

value still

complex situation

trying to do - kids have educational plan that is going to

work

need to get support to make progress - teachers difficult children
+ teachers' characteristics

input to kids having educational needs met

school provides a call - evaluation & try to fix

same way

Alicia - Was to observe her, talk to family, pupil - enthusiastic notes,
work / learn an educational plan

main - most

teachers, other kids, + parents

very active

every second child has a social psychologist to support
- counselor - middle school - social service

high ignored
stuff you
definitely to
want to talk
about —

THE CLINTON-GORE ADMINISTRATION: MEETING THE NEEDS OF AMERICA'S CHILDREN AND FAMILIES

The Clinton-Gore Administration has developed and implemented new policies, and expanded on existing policies that have helped parents balance their responsibilities at home and at work, helped move millions of Americans out of poverty, and helped build strong families and safe communities.

I. Helping Parents Balance Their Responsibilities At Home And At Work

Providing Quality Care for America's Children

➤ **Expanding Head Start.** Head Start is a national program which provides comprehensive developmental services for America's low-income, pre-school children ages three to five and social services for their families. This year, President Clinton is proposing to boost Head Start and Early Head Start funding by \$1 billion -- the largest funding increase the program has ever experienced -- to provide Head Start and Early Head Start slots to approximately 950,000 children, nearing the President's goal of serving one million children in 2002. Since 1993, the Clinton-Gore Administration has increased funding for the Head Start program by 90 percent, and in FY 2000, the program will serve approximately 880,000 children -- over 160,000 more children than in 1993.

➤ **Created Early Head Start.** Created by the Clinton-Gore Administration in 1994, the Early Head Start program brings Head Start's successful comprehensive services to families with children ages zero to three and to pregnant women. The purpose of this program is to enhance children's physical, social, emotional and cognitive development; enable parents to be better caregivers of and teachers to their children; and help parents meet their own goals, including that of economic independence. In FY 2000, the program will reach nearly 45,000 children. The President's new FY 2001 funding request would serve approximately an additional 10,000 children.

Improved Access to Affordable and Quality Child Care. Under the Clinton-Gore Administration, federal funding for child care has more than doubled, helping parents pay for the care of about 1.5 million children in 1998. The 1996 welfare reform law increased child care funding by \$4 billion over six years to provide child care assistance to families moving from welfare to work. For FY 2000, the President succeeded in securing \$453 million in funds for after-school care -- more than double the 1999 funding level -- \$173 million for child care quality activities, and \$10 million for child care research.

Promoting Affordable, Reliable, Quality Child Care. Building on existing programs that work and creating new policies to better meet the needs of working families the Clinton-Gore Administration developed a comprehensive child care proposal for FY 2001. This proposal includes an additional \$817 million for child care subsidies for low-income working families which -- combined with child care funds provided in welfare reform -- will enable the program to serve over 2.2 million children in 2001; broadening tax relief to help over 8 million families pay their child care expenses by 1) making the Child and Dependent Care Tax Credit refundable for

the first time; 2) increasing the level of the credit; and 3) extending the credit to parents who stay at home with their children. Despite the Republican Majority's refusal to support these vital investments over the last two years, the President remains committed to address this critical need for America's working families.

Ensuring Job Protection for Parents

Signed Family and Medical Leave Act. In 1993, President Clinton signed the Family and Medical Leave Act (FMLA) – the first bill he signed into law – mandating that public and private employers with at least 50 workers provide their employees with 12 hours of unpaid leave without risking their jobs. This law enables parents to participate in school activities, such as parent-teacher conferences, or care for a sick child or elderly relative. In 1997, the Clinton Administration expanded the law to cover 24 hours of unpaid leave for federal workers. The FMLA currently provides protected leave to 90.7 million American workers, about 71 percent of the American workforce, and millions of American workers have taken advantage of it. The Administration's current proposal would expand FMLA to cover workers in businesses with 25 or more workers – reaching an additional 12 million American workers.

Making Parental Leave More Affordable. A 1996 study by the Commission on Family and Medical Leave found that the most significant reason why parents did not choose to take some leave during the important days after the birth or adoption of a child was because of the expected loss of income. To help address this problem, President Clinton issued an Executive Memorandum directing the Secretary of Labor to offer states the option to amend their unemployment compensation laws to provide paid leave for new parents. The President continues to urge states to take advantage of the Department of Labor's final regulation to provide new parents with greater access to parental leave to care for a new born or newly adopted child. In addition, the President has announced that his FY 2001 budget includes \$20 million in grants for states or regions to make parental and family leave more available and affordable for those who need it. Under the President's proposal, states will be able to: 1) identify workers who face the greatest financial barriers to taking family leave, and 2) use Unemployment Insurance, Temporary Disability Insurance, or other mechanisms to offer these workers paid leave.

Expanding Paid Leave for Federal Workers. In an effort to set an example for all employers, President Clinton developed a proposal that would enable Federal workers to use up to 12 weeks of accrued paid sick leave each year to care for sick family members. Currently, the amount of sick leave that can be used to care for a family member who is ill is limited to 13 days each year for most federal employees. By enabling federal workers to use more of the sick leave they have earned, according to conditions established by the FMLA, this measure will remove a significant barrier to caring for an ill family member. The President previously has taken other actions to ensure that federal government is a model employer, including: allowing federal employees to donate annual leave to other employees; expanding flexible family-friendly work arrangements, such as job sharing, career part-time employment, alternative work schedules, telecommuting, and satellite work locations; and directing improvements in the quality of federally sponsored child care.

Prohibiting Discrimination Against Parents. The President proposed new federal legislation to protect parents from discrimination in the workplace. Building on laws in Alaska, Michigan, New Jersey and other states, this legislation would protect workers from unfair assumptions about their commitment to their job that can affect hiring, advancement, and other employment decisions. This law would not prohibit employers from making hiring and promotion decisions on the basis of job performance, but would ensure that workers are not unfairly discriminated against simply because they are parents. In addition, the President signed an Executive Order prohibiting discrimination against parents in the Federal workplace.

II. Meeting the Health Care and Nutrition Needs of America's Families

- ✓ • **Enacted Single Largest Investment in Children's Health Care Since 1965.** The 1997 Balanced Budget included \$24 billion for the Children's Health Insurance Program -- the single largest investment in health care for children since the passage of Medicaid in 1965. This new program will provide meaningful health care coverage for up to five million currently uninsured children -- including prescription drugs, vision, hearing, and mental health services. The Administration is engaging in a significant public outreach campaign to reach out to children who are eligible for health coverage under CHIP. Approximately 2 million children have already been enrolled in CHIP, and all 50 states and territories have plans approved that will extend health insurance to an additional 2.5 million children with family incomes that are too high for Medicaid but too low to afford to purchase private insurance.

Supporting Families with Long Term Care Needs. Over five million Americans have significant limitations due to illness or disability and thus require long-term care, and as the number of elderly Americans grows, more people will need long-term care options. To meet the growing needs of the elderly or disabled and their families, the President's FY 2001 budget includes a \$3,000 tax credit for people with long-term care needs or their caregivers -- tripling the credit over last year's proposal and increasing the total investment in long-term care to \$28 billion over 10 years. In addition to the (1) tax credit, the initiative will (2) provide funding for services which support family caregivers of older persons; (3) improve equity in Medicaid eligibility for people in home- and community-based settings; (4) encourage partnerships between low-income housing for the elderly and Medicaid; and (5) encourage the purchase of quality private long-term care insurance by Federal employees.

- ✓ • **Providing Health Care to Low-Income Working Families.** The President has insisted on maintaining the Medicaid guarantee and has successfully fought to increase low-income families' access to health care. Under the Clinton-Gore Administration, states have expanded Medicaid coverage to working families who cannot afford health insurance, allowing Medicaid to be a freestanding health insurance program for low-income families. With bipartisan support from the Congress, the President created the Children's Health Insurance Program (CHIP) in 1997, allocating \$24 billion dollars over the next five years to extend health care coverage to uninsured children through state-designed programs. In August 1998, the President eliminated a vestige of the old welfare system by allowing all states to provide Medicaid coverage to more than 130,000 working, two-parent families who meet state income eligibility requirements, eliminating disincentives to marriage and work. And, in March 1999, the Administration released guidance encouraging states to reach out to children and families who leave welfare but

are still eligible for Medicaid or CHIP. The guidance also clarifies state responsibilities to provide Medicaid applications upon request, process them without delay, and maintain Medicaid eligibility for families leaving welfare.

The President and Vice President strongly believe we should continue to expand access to affordable health care. The budget proposes a 10-year, \$110 billion initiative that would expand coverage to at least 5 million uninsured Americans and expand access to millions more. It addresses the nation's coverage challenges by building on and complementing current private and public programs. Specifically, the initiative: (1) provides a new, affordable health insurance option for families called "FamilyCare," which builds on the State Children's Health Insurance Program to provide higher Federal matching payments to parents of children eligible for or enrolled in Medicaid or S-CHIP; (2) extends transitional Medicaid for up to a year for those losing it due to increased earnings; (3) accelerates enrollment of uninsured children eligible for Medicaid and S-CHIP; (4) expands state options for people ages 19 and 20 and legal immigrants; (5) helps small businesses afford insurance; and, (6) strengthens programs that provide health care directly to the uninsured. If enacted, this would be the largest investment in coverage since Medicare was created in 1965.

Protecting Patients Through a Strong, Enforceable Patients Bill of Rights. The President once again is calling on Congress to pass a strong federally enforceable patients' bill of rights containing a range of protections, including guaranteed access to needed specialists, access to emergency room services when and where the need arises, access to a meaningful independent and external appeals process for consumers to resolve differences with their health plans, and the right to be compensated when a health plan's decision causes a patient to be harmed or die. The President has already extended these protections to the 85 million Americans covered by Federal health plans.

Passed Meaningful Health Insurance Reform. In 1996, the President signed the Kassebaum-Kennedy Health Insurance Portability and Accountability Act which limits exclusions for pre-existing conditions, makes coverage portable and helps individuals who lose jobs maintain coverage. As many as 25 million people will benefit from this law.

mental health
Raised Immunization Rates to All Time High. Since 1993, funding for the child immunization program has doubled and child immunization rates have reached an all time high with 90 percent, or more, of toddlers receiving the most critical doses of each of the routinely recommended vaccines. In order to eliminate racial vaccination rate gaps by 2010, the Clinton Administration announced the Racial and Ethnic Health Disparities Initiative.

Supporting the Nutritional Needs of Women Infants and Children. The FY 2001 budget proposal provides over \$4.1 billion for nutrition assistance through the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) program, an increase of \$114 million over FY 2000. The additional funds will provide a monthly package of nourishing supplemental foods, nutrition education, and health care referrals to 7.5 million low-income pregnant, postpartum and breastfeeding women, infants, and children who are at nutritional risk, achieving the Administration's goal and a 39 percent increase in participation since FY 1992.

Supporting the Nutritional Needs of Working Families. The Clinton-Gore Administration is committed to ensuring that working families who are eligible for Food Stamps have access to them. In 1999, the President launched a nationwide public education campaign, took steps to make it easier for families receiving TANF to own a car and receive food stamps, and simplified food stamp reporting rules to reduce bureaucracy and encourage work. The FY 2001 budget builds upon these efforts by providing funds to improve outreach and nutrition education to individuals who are eligible for food stamps. The budget also proposes to make it easier for 245,000 individuals in working families to own vehicles and receive food stamps by allowing States to conform their food stamps vehicle policy with a more generous TANF policy.

Ensuring Safe Food for America's Families. The Clinton-Gore Administration has issued new standards to reduce and prevent contamination of meat, poultry, and seafood; signed the Food Quality Protection Act with special safeguards for kids; issued new regulations that improve the safety of fruit and vegetable juices; and created a President's Council on Food Safety to develop a comprehensive food safety strategic plan for federal agencies.

III. Lifting American Families Out of Poverty and Making Work Pay

Expanding the Earned Income Tax Credit. Expansions in the EITC included in the President's 1993 Economic Plan are making work pay for 15 million working families, including former welfare recipients. A study conducted by the Council of Economic Advisers reported that in 1998, the EITC lifted 4.3 million American out of poverty -- more than double the number in 1993. The findings also suggest that the increase in labor force participation among single mothers who received welfare is strongly linked to the EITC expansion. The FY 2001 budget proposes a \$21 billion plan to expand the Earned Income Tax Credit (EITC), providing as much as \$1,200 in additional tax relief to an estimated 6.8 million hard-pressed working families.

Household Income Up 3.5 Percent -- Tied For the Largest Gain Since 1978. Income for the median household rose \$1,304, from \$37,581 in 1997 to \$38,885 in 1998, adjusted for inflation. Real median household income is now at the highest level ever recorded.

Typical Family Income Up Over \$5,000 Since 1993. Another measure of income -- family income, which excludes single individuals and counts only related members in any household -- shows a similar trend. In 1998, the median family's income, adjusted for inflation, increased 3.3 percent (or \$1,475) -- the fifth consecutive annual rise. Median family income is also at an all-time high. Since President Clinton's Economic Plan passed in 1993, median family income has increased from \$41,691 in 1993 to \$46,737 in 1998 -- that's a \$5,046 increase in income, adjusted for inflation. From 1988 to 1992, median family income *fell* \$1,864, adjusted for inflation.

Poverty Rate Fell To 12.7 Percent in 1998 -- Its Lowest Level Since 1979. In 1998, the poverty rate dropped to 12.7 percent from 13.3 percent the year before -- that's the lowest poverty rate in two decades. Since President Clinton signed his Economic Plan into law, the poverty rate has declined from 15.1 percent in 1993 to 12.7 percent last year -- that's the largest five-year drop in poverty in nearly 30 years (1965-1970). There are now 4.8 million fewer

people in poverty than in 1993. (In 1998, the poverty threshold was \$16,660 for a family of four.)

In 1998, The Largest One-Year Drop in Child Poverty in More than Two Decades. While the child poverty rate remains too high, in 1998, it declined from 19.9 percent to 18.9 percent -- that's the lowest child poverty rate since 1980 and the largest one-year drop in child poverty since 1976. Under President Clinton, the child poverty rate has declined from 22.7 percent to 18.9 percent -- that's the biggest five-year drop in nearly 30 years (1965-1970).

4.3 Million People Lifted Out of Poverty By EITC -- Double The Number in 1993. In 1993, President Clinton expanded the Earned Income Tax Credit, providing a tax cut for 15 million low-income working families. In 1998, the EITC lifted 4.3 million people, including 2.2 million children, out of poverty -- that's double the number of people lifted out of poverty by the EITC in 1993.

Helping to Invest for the Future. In 1992, the President proposed to establish Individual Development Accounts (IDAs) to empower low-income families to save for a first home, post-secondary education, or to start a new business. The 1996 welfare reform law authorized the use of welfare block grants to create IDAs. And in 1998, the President signed legislation authorizing a five-year \$125 million demonstration program. In FY 1999, the Department of Health and Human Services awarded nearly \$10 million to 40 grantees that will establish over 10,000 savings accounts for low-income workers. The FY 2001 budget provides \$25 million for IDAs in FY 2001 -- two and half times the FY 2000 enacted of \$10 million -- to create over 20,000 new accounts. The Administration will also propose to allow low-income working families to use IDAs to save for a car that will allow them to get or keep a job.

Retirement Savings Accounts (RSAs) To Help Families Save and Invest And Expand Pension Coverage for Small Businesses. The President's Retirement Savings Accounts (RSAs) proposal in the FY 2001 budget will give 76 million Americans the opportunity to build wealth and save for their retirement through a progressive tax cut. This proposal builds on the successful model of Individual Development Accounts (IDAs), extending generous matches to all low- and moderate-income families to encourage them to develop savings and assets. A person who participated for 40 years in this savings program could accumulate over \$266,000 -- enough to produce \$24,000 a year of income in retirement. This proposal would cost \$54 billion over 10 years.

Millions Move from Welfare to Work. In 1992, President Clinton promised to end welfare as we know it, and now more than three years after the enactment of the welfare reform law, we've seen revolutionary changes to promote work and responsibility: the number of Americans on welfare is at its lowest level since 1969 -- 30 years ago -- as millions of people move from welfare to work. Since January 1993, the welfare rolls have fallen by more than half, from 14.1 million to 6.9 million. More than 1.3 million welfare recipients went to work in 1998 alone. The percentage of adults still on welfare who are working reached 27 percent in 1998, a nearly fourfold increase since 1992. The 12,000 businesses participating in the Welfare to Work Partnership launched by the President in 1997 have hired nearly 650,000 former welfare recipients.

New Fathers Work/Families Win Grants. The Administration's budget contains \$255 million in new competitive grants in FY 2001 to promote responsible fatherhood and support working families, critical next steps in reforming welfare and reducing child poverty. The proposals include grants that will help approximately 40,000 non-custodial parents (mainly fathers) who owe child support work and reconnect with their children and new grants to help about 40,000 hard-pressed working families get the supports and skills they need to succeed on the job and avoid welfare. An important part of these grants will be to improve families' access to food stamps, health care, child care, and other critical support for working families.

New Initiatives to Collect More Child Support. Since the President took office, child support collections have doubled from \$8 billion in 1992 to nearly \$16 billion in 1999. Today, parents who owe child support have their wages garnished, their bank accounts seized, their federal loans denied and their tax refunds withheld. To build on this success, the FY 2001 budget contains several new measures to get parents to pay the child support they owe and to ensure more child support goes directly to families. Increased enforcement measures include ensuring that parents who owe child support will have their vehicles booted, they will have a harder time obtaining or renewing a passport, and they will be prohibited from enrolling as a Medicare provider. The Administration is also proposing initiatives to ensure that families can rely on child support as a stable source of income, and create a clearer connection between what a father pays and what his family gets, giving parents more reason to cooperate with the child support system. The proposals will enable states to simplify distribution rules and provide incentives to states that pass through more child support payments directly to families, so that families leaving welfare can keep all the payments, and families still working their way off welfare can keep up to \$100 a month. In total, these initiatives will bring in nearly \$2 billion more for families.

Moving Families From Welfare-to-Work. Since enactment of the 1996 welfare reform law, millions of families have moved from welfare to work. To help more long-term welfare recipients and low-income fathers go to work and support their families, the Administration's budget will give state, local, tribal, and community- and faith-based grantees an additional two years to spend Welfare-to-Work funds, ensuring that existing resources continues to help those most in need. This will give grantees an opportunity to fully implement the \$3 billion Welfare-to-Work initiative the Administration fought to include in the 1997 Balanced Budget Act, as well as the program eligibility improvements enacted last year with the Administration's support.

New Housing Vouchers for Hard-Pressed Working Families. The Clinton-Gore budget includes \$690 million for 120,000 new housing vouchers to help America's hard-pressed working families. These housing vouchers subsidize the rents of low-income Americans, enabling them to move closer to job opportunities – many of which are being created far from where these families live. Of the 120,000 new housing vouchers, 32,000 will be targeted to families moving from welfare to work, 18,000 to homeless individuals and families, and 10,000 to low-income families moving to new housing constructed through the Low Income Housing Tax Credit, with the remaining 60,000 vouchers allocated to local areas to help address the large unmet need for affordable housing. These new vouchers build on the 110,000 new housing vouchers secured through the President's leadership in the past two years.

Transportation: Helping Low-Income Working Families Get to Work. Transportation to work is a barrier for many low-income families. Existing public transit often doesn't link to suburban job opportunities, cover evening and weekend hours, or serve many rural communities. The Administration proposes a package of initiatives to help low-income families get to work by making it easier for working families to own vehicles and receive food stamps, allowing working families to use Individual Development Accounts to save for a car that will allow them to get or keep a job, and doubling Access to Jobs transportation funding to \$150 million to expand grants to communities to develop innovative public transportation solutions that help more low-income workers and welfare recipients get to work.

Child Tax Credit for 26 Million Families. The Balanced Budget Act of 1997 included a \$500 Per-Child Tax Credit which in 2001 will help 26 million families with 44 million children under 17. Additionally, the President fought for and won a proposal allowing 13 million children from families with incomes below \$30,000 – including young teachers, police officers, farmers, and nurses who work hard and play by the rules – to be eligible for the child tax credit.

Increasing the Minimum Wage. In 1996, the Clinton-Gore Administration fought for and won a minimum wage increase of \$.90 over two years, raising it to \$5.15 per hour in September 1997. An estimated 10 million Americans received an increase in wages thanks to the President's leadership. The Clinton-Gore Administration's current minimum wage proposal, which was rejected last year by Congressional Republicans, would increase the minimum wage from \$5.15 to \$6.15 over two years helping to restore the real value of the minimum wage to what it was in 1982. This increase will help ensure that -- as costs continue to increase -- parents who work hard and play by the rules can bring up their children out of poverty. This minimum wage increase will mean an additional \$2,000 per year for over 11 million full-time minimum wage earners.

IV. Building Strong Families and Safe Communities

Reaching Out to Children in Need

Reforming and Improving Foster Care and Adoption. Since taking office, the Clinton-Gore Administration has championed efforts to make foster care work better, to find and assist adoptive families, and to break down barriers to adoption. From 1996 to 1998, the number of adoptions nationwide rose 29 percent - from 28,000 to 36,000 - and is on track to meeting the President's goal of 56,000 adoptions in 2002. In 1997, the President signed the Adoption and Safe Families Act, which expedited permanent placement decisions for children, ensured health insurance coverage for all special-needs children in subsidized adoptions, and created an incentive program for states to increase adoptions. The Small Business Job Protection Act of 1996, signed by the President in 1996, provides a \$5,000 tax credit to families adopting children and a \$6,000 tax credit for families adopting children with special needs. In 1998, the President directed HHS to develop Internet tools to link children in foster care more quickly to possible adoptive families. This Administration has also fought hard to remove racial and ethnic barriers to adoption by helping ensure that the adoption process is free of delays and discriminatory practices driven by race, culture and ethnicity with the Small Business Job Protection Act of 1996 and the Multi-Ethnic Placement Act of 1994.

Encouraging Youth Service. The President's FY 2001 budget includes over \$850 million to support community service and to empower more Americans to renew our civic life. This increase of nearly \$120 million for the Corporation for National Service keeps AmeriCorps on track for the President's goal of 100,000 members each year by the year 2004. The budget also includes a new "AmeriCorps Reserves" program, modeled after the military reserves, and designed to engage former Corps members in times of need. Finally, this year's budget proposes \$15.5 million in new initiatives that reward innovations in youth service, as well as additional resources to encourage service by senior citizens, and to engage students in learning through community service.

Responding to the Early Warning Signs of Troubled Youth. President Clinton directed the Secretary of Education and the Attorney General to develop a guide to help teachers and principals identify and respond to the early warning signs of troubled youth that can lead to school violence. In August 1998, the Departments of Justice and Education released *Early Warning, Timely Response: A Guide to Safe Schools*. This guide provides schools and communities with information on how to identify the early warning signs and take action steps to prevent and respond to school violence. More than 200,000 copies of the guide have been distributed, and additional copies may be obtained through the websites of the Departments of Education and Justice.

Working to Prevent Teen Pregnancy. The FY 2001 budget proposes \$25 million to support adult-supervised and supportive living arrangements, often called second chance homes, for unmarried teen parents and their children who cannot live at home or with other relatives. This new initiative will be latest of the Administration's efforts to break the cycle of dependency and reduce teen pregnancy, which have resulted in the lowest teen pregnancy rates on record and an 18 percent decline in teen birth rates from 1991 to 1998. States will be able to use these funds to support services provided by faith- and community-based organizations.

Keeping Children Safe at School and At Home

Protecting Our Children From Tobacco. Every day, 3000 children become regular smokers and 1000 have their lives shortened because of it. Almost 90 percent of all adult smokers began smoking by age 18 and today 4 million children – 37 percent of all high school students – smoke cigarettes. To end this public health crisis, the President believes that there must be a focused effort to reduce youth smoking and hold the tobacco industry accountable by: 1) raising the price of cigarettes, so fewer young people start to smoke, through a combination of excise tax increases on tobacco products and youth smoking assessments if youth smoking is not reduced by a half; 2) reaffirming the Food and Drug Administration's full authority to keep cigarettes out of the hands of children; 3) funding critical public health efforts to prevent youth smoking; and 4) protecting farmers and farming communities. The President also believes that states should be investing adequate resources from their tobacco settlement funds into efforts to prevent youth smoking. To help people quit smoking, the budget requires all states to cover smoking cessation programs under Medicaid.

Helping to Make All Schools Safe, Disciplined and Drug-Free. In 1994, President Clinton expanded the Drug-Free Schools Act into the Safe and Drug-Free Schools Act, making violence prevention a key part of this program. At the White House Conference on School Safety,

President Clinton announced his plan for a significant overhaul of this nearly \$600 million Safe and Drug-Free Schools and Communities Program. Under the President's proposal, schools will be required to adopt rigorous, comprehensive school safety plans that include: tough, but fair, discipline policies; safe passage to and from schools; effective drug and violence policies and programs; annual school safety and drug use report cards; links to after school programs; efforts to involve parents; and crisis management plans.

y **Hiring School Resource Officers, Targeting Assistance to Schools with Serious Crime Problems.** The Clinton-Gore administration has worked to successfully implement the COPS in Schools initiative which helps give schools with crime problems the tools they need to put the security of our children first. The COPS in Schools initiative hires and trains school resource officers using the community policing strategies that have made neighborhoods safer all over America. Under the COPS in Schools initiative, the Clinton-Gore Administration has provided \$252 million for 1,060 communities to hire 2,250 police officers to work in schools, engaging students in problem solving and mediation, collaborating in safe school planning efforts, coaching sports and acting as mentors for kids.

→ include psychologists?

y **Forging School-Based Partnerships Between Schools and Law Enforcement.** Under the School-Based Partnerships grant program, the Clinton Administration has provided \$30 million to 275 policing agencies to work with schools and community-based organizations to address crime at and around schools. The grants help forge or strengthen partnerships between local law enforcement and schools to focus on school crime, drug use and discipline problems.

Launching a Community-Wide Response to School Safety and Youth Violence. To help communities throughout the country promote a coordinated, comprehensive response to school safety, the President launched the Safe Schools/Healthy Students Initiative in 1999. The SS/HS Initiative is an unprecedented effort to provide students, schools and communities the benefit of enhanced comprehensive educational, mental health, social service, and law enforcement services. It is based on evidence that a comprehensive, integrated community-wide approach is an effective way to promote healthy childhood and youth development and address the problems of school violence and alcohol and other drug abuse. The Initiative has provided \$146 million to 77 local education authorities who have established formal partnerships with local mental health and law enforcement agencies. The grants support coordinated and comprehensive school safety plans that include anti-truancy initiatives, mentoring, mental health services, conflict resolution programs, school resource officers, and more – helping to promote healthy development and to prevent youth violence before it occurs.

Providing Safe After-School Opportunities for More than a Million Children a Year. Last year (FY98), the 21st Century Community Learning Centers program was expanded to \$200 million. This funding is already supporting hundreds of school-based after-school programs in rural and urban schools in 44 states and the District of Columbia, including weekend and summer programs. This year, the President proposed to triple this initiative -- to \$600 million -- to provide safe and educational after-school opportunities for up to 1.1 million school-age children in communities across the country. In addition, the Education Department released a report in June 1998, titled *Safe and Smart: Making the After-School Hours Work for Kid*. This report shows that after-school programs can lower juvenile crime and improve academic performance. *Safe and Smart* was sent to every school district in the country.

Targeting Young People with a National Youth Anti-Drug Media Campaign. In July 1998, President Clinton launched the national expansion of the Anti-Drug Media Campaign first proposed in the 1997 national drug control strategy. The 5-year, \$2 billion campaign (which includes private sector matching contributions) is designed to let teens know -- when they turn on the television, listen to the radio, or surf the 'Net -- that drugs are dangerous, wrong and can kill you.

Requiring Child Safety Locks for Handguns. Child safety locks and other safety devices can reduce the unauthorized use of handguns, by a child at play or a teen looking to commit a crime. Many youth have to look no further than their own home to get their hands on a gun: an estimated one-third of all privately-owned handguns are left both loaded and unlocked. In March 1997, the President signed a directive to every Federal agency, requiring child safety locking devices with all handguns issued to Federal law enforcement officers. And, in an historic agreement, eight major gun manufacturers followed the President's lead and have voluntarily agreed to provide child safety locking devices with all their handguns.

Signed into Law the Youth Handgun Safety Act. In 1994, President Clinton signed into law the Youth Handgun Safety Act, which generally banned the possession of handguns or handgun ammunition by juveniles under the age of 18, and made it a Federal offense for adults to transfer handguns to juveniles, with limited exceptions. In 1997, the President directed the Treasury Department to require that signs be posted on the premises of Federal firearms licensees and that written notification be issued with each handgun sold to non-licensees to help ensure compliance with the Youth Handgun Safety Act.

Enforcing Zero Tolerance for Guns and Other Weapons in Schools. In October 1994, President Clinton signed into law the Gun-Free Schools Act, requiring school districts to expel students who bring guns to school. The President issued a Presidential Directive later that month to enforce the "zero tolerance" policy for guns in schools, consistent with the Gun-Free Schools Act. In school year 1996-97, the U.S. Department of Education estimates that, under zero tolerance policies, 6,093 students were expelled from public schools for bringing a firearm to school.

Introduced the Youth Gun Crime Enforcement Act. The President recently announced new legislation to strengthen the Brady Law and the assault weapons ban, restrict access to guns by our youth and crack down on illegal gun traffickers. The President's proposed bill will: (1) raise the age of the youth handgun ban from 18 to 21 years of age; (2) ban youth possession of semi-automatic assault rifles; (3) prohibit violent juveniles from ever owning guns; (4) require child safety locking devices for guns; (5) reduce illegal gun running by limiting the purchase of handguns to no more than one per month; (6) halt the importation of large capacity ammunition magazines; (7) require Brady background checks for the purchase of explosives and at gun shows; and (8) help law enforcement trace more crime guns to their source.

Giving Parents the Tools They Need To Protect Their Children

Helping Parents Control What Comes Into Their Living Room with the V-Chip. Four years ago, President Clinton and Vice President Gore used the Family Policy Conference in Nashville to call for V-chip legislation -- to give parents new tools to help them screen out television programs that are not fit for their kids. Under strong leadership from the White House, the following year Congress enacted the Telecommunications Act of 1996 which included V-chip legislation. Now all

new televisions are scheduled to include this screening technology. With leadership from the First Lady, the President is calling on leaders in the industry to come together and adopt a voluntary uniform ratings system that will give parents more information about what media enters their homes.

Encouraging More Educational Television. At the President's urging, the Federal Communications Commission (FCC) adopted clear and concrete rules to encourage the development and promotion of TV programming that would be both welcomed by parents and watched by children. The rules require three hours of regularly scheduled, half-hour weekly educational and instructional programming as a requirement for license renewal.

Promoting a "Family Friendly" Internet. The President and Vice President have worked to make cyberspace a safe place for children. The Administration has enlisted the assistance of numerous stakeholders, including industry leaders, teachers, parents, Internet users and librarians to work towards the creation of a "family friendly" Internet. The Administration's three part strategy includes: (1) industry commitments to provide blocking, filtering and labeling technology for use by parents and teachers using the 'Net; 2) effective enforcement of existing laws; and 3) increased parental awareness and involvement. This strategy is designed to give parents and teachers the tools they need to prevent children from getting access to inappropriate material on the Internet, and to guide them towards high-quality educational resources.



Department of Health & Human
Services

Department of Education

Department of Justice

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News Media Contact:
Melinda Malico, ED, (202) 401-1008
USDOJ Public Affairs, (202) 514-2008
HHS/SAMHSA Public Affairs, (301) 443-9848 Grants Office: (202) 260-3954

PRESIDENT CLINTON ANNOUNCES MORE THAN \$41 MILLION IN COMMUNITY GRANTS TO PREVENT VIOLENCE AMONG YOUTH

In his weekly radio address, President Clinton today announced more than \$41 million in grants to 23 communities to make schools safer, to foster children's healthy development and to prevent aggressive and violent behavior and drug and alcohol use among the nation's youth.

The *Safe Schools/Healthy Students Initiative* (SSHS) supports urban, rural, suburban and tribal school district efforts to link prevention activities and community-based services and to provide communitywide approaches to violence prevention and healthy child development.

This collaboration among the U.S. Departments of Education (ED), Justice (DOJ) and Health and Human Services (HHS) will help communities design and put into place comprehensive educational, mental health, social service, law enforcement and juvenile justice services for youth. The grants announced today fund 23 new three-year projects, adding to 54 Safe Schools/Healthy Students projects funded last year.

"We know from research that a comprehensive communitywide and schoolwide approach works best to promote healthy child development and reduce school violence and drug use," said U.S. Secretary of Education Richard W. Riley. "The safety and well-being of our children can be enhanced through the work of partnerships that bring together schools, families and community organizations and offer a broad-based preventive approach to violence and drug use."

"Keeping children safe must be a communitywide effort," said Attorney General Janet Reno. "These new grants will help communities that have made a commitment not only to prevent violence, but also to provide services that will build on young people's strengths to help them lead productive lives."

"Children need to feel safe—so they can learn and thrive," said HHS Secretary Donna E. Shalala. "The Safe Schools/Healthy Students Initiative uses our best tools and knowledge to help keep children safe and healthy in their schools and in their neighborhoods."

The school-based community partnerships include rural projects such as one funded in Tyrone, Penn.; urban projects in San Antonio, Little Rock and other cities; and suburban projects such as one in Brevard County, Fla. School districts submitted comprehensive plans created in partnership with law enforcement officials, local mental health authorities, juvenile justice officials and community-based organizations. Plans were required to address six elements:

- a safe school environment;
- violence, alcohol and drug abuse prevention and early intervention programs;

- school and community mental health preventive and treatment intervention services;
- early childhood psychosocial and emotional development services;
- educational reform; and,
- safe school policies.

Research shows that preventing violence by building on children's strengths and promoting healthy development produces more positive results and is more cost-effective than the use of strictly punitive measures. Grantees are urged to intervene with children early and to use programs that have been proven effective—such as life skills development, mentoring, conflict resolution, support for families, professional development for staff, truancy prevention, after-school activities, teen courts and alternative education.

Continuation grants for the initial 54 three-year projects funded in fiscal year 1999 will be awarded this summer with nearly \$100 million from the three federal agencies. Projects must demonstrate substantial progress to receive continued funding.

Urban school districts were eligible for up to \$3 million, suburban districts were eligible for up to \$2 million and rural and tribal districts were eligible for up to \$1 million. Applications—judged for their strength, comprehensiveness, viability and potential for success—were reviewed by an interdepartmental team that made recommendations to the cabinet departments.

In addition, President Clinton announced an upcoming U.S. Department of Education grant competition under the Elementary School Counseling Demonstration Program. The new program is designed to support school-efforts to start or expand elementary school counseling programs. Applications for the funds will be available through the Federal Register and the Safe and Drug-Free Schools web site (www.ed.gov/offices/OESE/SDFS) within the next week.

Descriptions of the funded projects follow.

NOTE TO EDITORS: A list of grantees, contacts and grant amounts follows.

ALASKA

Palmer	<u>Matanuski-Susitna Borough School District</u> Contact: Mark Vingoe (907) 746-9221	\$923,177
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ARKANSAS

Little Rock	<u>Little Rock School District</u> Contact: Linda Young (501) 324-2112	2,225,315
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CALIFORNIA

San Jose	<u>East Side Union High School District</u> Contact: Ramon Martinez (408) 347-5172	2,640,395
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Salinas	<u>Salinas Union High School District</u> Contact: Dr. Fernando Elizondo (831) 753-4109	2,683,262
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Carmichael	<u>San Juan Unified School District</u> Contact: Jane Brant (916) 971-7221	1,523,071
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COLORADO

Fort Collins	<u>Poudre School District</u> Contact: Stacey Abate (970) 491-3173	1,858,471
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FLORIDA

Melbourne	<u>School Board of Brevard County</u> Contact: Jack Sidoran (407) 631-1911 ext. 233	1,108,891
Tallahassee	<u>Leon County School Board</u> Contact: Patricia Davis (850) 487-7160	1,859,994

MARYLAND

Easton	<u>Talbot County Public Schools</u> Contact: Beth Nobbs (410) 822-0330	943,624
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MICHIGAN

Kentwood	<u>Kentwood Public Schools</u> Contact: Dr. Mary Leiker (616) 455-4400	1,577,798
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MINNESOTA

St. Paul	<u>St. Paul Public Schools</u> Contact: Patrick Fitzgerald (651) 603-4945	1,654,433
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NEW YORK

Ozone Park	<u>Community School District #27</u> Contact: Phyllis Greenberg (718) 642-5848	2,789,552
Dobbs Ferry	<u>Dobbs Ferry Union Free School District</u> Contact: Dr. Sidney Freund (914) 693-1500	267,806

NORTH CAROLINA

Durham	<u>Durham Public Schools</u> Contact: Donna Smith (919) 560-2449	2,637,370
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OHIO

Toledo	<u>Toledo Public Schools</u> Contact: Ken Newbury (419) 385-2115	2,789,314
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OKLAHOMA

Tahlequah	<u>Tahlequah Public Schools</u> Contact: Billie Jordan (918) 458-4100	912,862
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OREGON

Gresham	<u>Gresham-Barlow School District</u> Contact: James Buck (503) 618-2447	1,070,017
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PENNSYLVANIA

Tyrone	<u>Tyrone Area School District</u> Contact: Janet Welsh (814) 231-8761	611,099
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SOUTH CAROLINA

Columbia	<u>Richland County School District One</u> Contact: Ellen Cooper (803) 733-6100	2,726,351
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TEXAS

San Antonio	<u>Northside Independent School District</u> Contact: Ed Rawlinson (210) 706-8770	1,782,702
Victoria	<u>Victoria Independent School District</u> Contact: John Haines (361) 788-9250	2,787,883

WASHINGTON

Spokane	<u>Educational Service District 101</u> Contact: Denise Robertson (509) 458-3625	930,000
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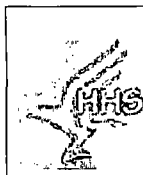
WISCONSIN

Green Bay	<u>Green Bay Area Public School District</u> Contact: Sue Todey (920) 448-2184	2,785,350
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TOTAL		\$41,088,737
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Safe Schools/Healthy Students Initiative

In the wake of tragic multiple shootings at a number of schools, last fall President Clinton convened the first-ever White House Conference on School Safety to exchange knowledge and ideas on how to make our students, schools, and communities safer. During the Conference, the President issued a call to action, resulting in two grant programs—the Safe Schools/Healthy Students Initiative and the School Action Grant Program—to address many of the problems highlighted at the meeting.

April 1, 1999, the U.S. Departments of Education, Health and Human Services, and Justice formally announced an unprecedented collaborative effort, the Safe Schools/Healthy Students Initiative. Through this Initiative, grants totaling more than \$180 million per year will be awarded to approximately 50 local educational authorities and their mental health and law enforcement partners to promote healthy childhood development and prevent violent behaviors.

Enhanced Services and Community Collaboration

Enhanced and fully linked educational, mental health, law enforcement, juvenile justice, and social services will be provided. The Initiative may fund, but is not limited to, school-based mental health preventive and treatment services, violence prevention and intervention programs, early psychosocial and emotional development practices, anti-drug curricula, educational reform, safe school measures and policies, home visitation by nurses, after school activities, efforts to reduce truancy, and initiatives to strengthen families.

These services and activities will help young people to develop the social skills and emotional resilience needed to avoid violent behavior, and will help schools to create a safe, disciplined, and drug-free learning environment. The Initiative is based on evidence that a comprehensive, integrated community-wide approach is an effective way to promote safe schools and foster the development of healthy students.

Streamlined Application Process

Thanks to a streamlined application process, school districts and their community partners may apply to a single Federal source, the Office of Juvenile Justice and Delinquency Prevention, for the support of a wide variety of developmental, educational, and school and community safety services.

Grants of \$1 million to \$3 million

Grant awards will be up to \$3 million per year for urban school districts, up to \$2 million per year for suburban school districts, and up to \$1 million per year for rural school districts and tribal schools designated as local educational authorities. The Initiative will be funded out of FY-1999 appropriations: \$60 million from the Safe and Drug Free Schools Program of the Department of Education, \$25 million from the Center for Mental Health Services, Substance Abuse and Mental Health Services Administration of the Department of Health and Human Services, and \$15 million from the Office of Juvenile Justice and Delinquency Prevention in the Department of Justice. In addition, the Department of Justice Office of Community Oriented Policing will provide up to \$80 million to hire school resource officers to work in collaboration with schools and community-based organizations.

For applications

The application for the Safe Schools/Healthy Students Initiative grant program is a 112-page booklet from OJJDP, Department of Justice.

- For a downloadable Adobe Acrobat copy of the Safe Schools/Healthy Students Initiative application, [click here](#).
- An Adobe Acrobat [Reader](#) is available from the Adobe website for viewing and printing this document.
- For helpful guidelines on handling this large document, please view the "Instructions For Viewing Adobe Acrobat Files" on the [OJJDP](#) host site.

<i>School Action Grant Program</i>	Another school violence prevention effort launched by the Center for Mental Health Services in collaboration with the Center for Substance Abuse Treatment, is designed to complement the Safe Schools/Healthy Students Initiative. This School Action Grant Program will award a total of \$5.7 million a year to encourage communities to expand upon school-based programs. It will provide grantees with funds to promote healthy childhood development and prevent youth violence and substance abuse through the use of programs and practices proven to be effective. Any organization willing to build consensus on the most promising strategies for a particular community, may apply for a grant of up to \$150,000, to employ these exemplary strategies to prevent youth violence, promote healthy child development, and foster resilience. For example, grants may be awarded to develop and carry out carefully designed programs to prevent suicide, stop aggressive and violent behavior, and promote resilience. For a brief description of this grant and Guidance for Applicants, please click
<i>More information</i>	For information on SAMHSA's School Violence Prevention Program, administered by our Center for Mental Health Services, visit SAMHSA's National Mental Health <u>Knowledge Exchange Network (KEN)</u> website. For information from SAMHSA's Federal partners in the Safe Schools/Healthy Students program, visit these websites: • The U.S. Department of Justice <u>Office of Juvenile Justice and Delinquency Prevention</u> • The U.S. Department of Education <u>Early Warning, Timely Response: A Guide to Safe Schools</u>

Go to ***SAMHSA*** Grants



Early Warning, Timely Response

A Guide to Safe Schools

The full text of this public domain publication is available at the Department's home page at <http://www.ed.gov/offices/OSERS/OSEP/earlywrn.html>.

Although most schools are safe, the violence that occurs in our neighborhoods and communities has found its way inside the schoolhouse door. However, if we understand what leads to violence and the types of support that research has shown are effective in preventing violence, we can make our schools safer.

Research-based practices can help school communities—administrators, teachers, families, students, support staff, and community members—recognize the warning signs early, so children can get the help they need before it is too late. This guide presents a brief summary of the research on violence prevention and intervention and crisis response in schools. It tells school communities:

- **What to look for**—the early warning signs that relate to violence and other troubling behaviors.
- **What to do**—the action steps that school communities can take to prevent violence and other troubling behaviors, to intervene and get help for troubled children, and to respond to school violence when it occurs.

Sections in this guide include:

- **Section 1: Introduction.** All staff, students, parents, and members of the community must be part of creating a safe school environment. Schools must have in place approaches for addressing the needs of all children who have troubling behaviors. This section describes the rationale for the guide and suggests how it can be used by school communities to develop a plan of action.
- **Section 2: Characteristics of a School That Is Safe and Responsive to All Children.** Well functioning schools foster learning, safety, and socially appropriate behaviors. They have a strong academic focus and support students in achieving high standards, foster positive relationships between school staff and students, and promote meaningful parental and community involvement. This section describes characteristics of schools that support prevention, appropriate intervention, and effective crisis response.
- **Section 3: Early Warning Signs.** There are early warning

signs that, when viewed in context, can signal a troubled child. Educators and parents—and in some cases, students—can use several significant principles to ensure that the early warning signs are not misinterpreted. This section presents early warning signs, imminent warning signs, and the principles that ensure these signs will not be misinterpreted. It concludes with a brief description of using the early warning signs to shape intervention practices.

- **Section 4: Getting Help for Troubled Children.** Effective interventions for improving the behavior of troubled children are well documented in the research literature. This section presents research- and expert-based principles that should provide the foundation for all intervention development. It describes what to do when intervening early with students who are at risk for behavioral problems, when responding with intensive interventions for individual children, and when providing a foundation to prevent and reduce violent behavior.
- **Section 5: Developing a Prevention and Response Plan.** Effective schools create a violence prevention and response plan and form a team that can ensure it is implemented. They use approaches and strategies based on research about what

works. This section offers suggestions for developing such plans.

- **Section 6: Responding to Crisis.** Effective and safe schools are well prepared for any potential crisis or violent act. This section describes what to do when intervening during a crisis to ensure safety and when responding in the aftermath of crisis. The principles that underlie effective crisis response are included.
- **Section 7: Conclusion.** This section summarizes the guide.
- **Section 8: Methodology, Contributors, and Research Support.** This guide synthesizes an extensive knowledge base on violence and violence prevention. This section describes the rigorous development and review process that was used. It also provides information about the project's Web site.

A final section lists resources that can be contacted for more information.

The information in this guide is not intended as a comprehensive prevention, intervention, and response plan—school communities could do *everything* recommended and still experience violence. Rather, the intent is to provide school communities with reliable and practical information about what they can do to be prepared and to reduce the likelihood of violence.



For Release:
August 1, 2000

News Media Contact:
Melinda Kitchell Malico
(202) 401-1008

Program Office Contact:
Deirdra Hilliard
(202) 260-2643

RILEY ANNOUNCES \$45.3 MILLION IN GRANTS TO TRAIN DRUG AND SAFETY COORDINATORS IN MIDDLE SCHOOLS

The U.S. Department of Education today announced \$45 million in federal support to help schools nationwide fight drugs and make learning environments safer. The 113 school districts in 35 states receiving the grants will be able to recruit, hire and train middle school drug prevention and school safety coordinators.

"This \$45 million will significantly help with intervention efforts that can make a real difference in creating safer schools and reducing drug use by young people," U.S. Secretary of Education Richard W. Riley said. "Together with comprehensive strategies to prevent school violence and drug use -- including smaller classes, after-school programs and focusing youth toward higher education and the future -- school-based coordinators can help schools create safe and orderly environments for learning."

Middle schools and students will benefit by using coordinators to:

- Identify and assist schools in adopting successful, research-based drug and violence prevention programs and strategies;
- Develop, conduct and analyze assessments of school drug and crime problems;
- Work with community organizations, parents and students to ensure collaboration;
- Identify additional funding sources for drug prevention and school safety program initiatives; and,
- Provide feedback to state educational agencies on successful programs and activities.

Research indicates that well-trained, full-time school safety and drug prevention coordinators can help reduce drug use, discipline problems and violent incidents. A 1997 U.S. Department of Education study found that coordinators are especially effective when they devote a significant amount of time to prevention programs; therefore, the program requires that coordinators work full-time on these programs.

Eligible schools are those in which at least one student was, within the previous year, suspended, expelled or transferred to an alternative school for possession, distribution or use of alcohol, tobacco or drugs, or for the possession or use of a weapon. Also eligible are schools that referred at least five students for substance abuse treatment or suspended, expelled or transferred to alternative schools at least five students for physical attacks or fights.

Coordinators serve up to seven schools; work solely on coordination of drug prevention or school safety programs; and must have a degree from an accredited four-year institution of higher education and an academic background or equivalent work experience in a field related to youth development.

The grants announced today include funding for the first two years of a three-year grant period.

NOTE TO EDITORS: A list of the 113 project descriptions will be available at

www.ed.gov/offices/OESE/SDFS. A list of grantees and contacts follows.

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**MIDDLE SCHOOLS COORDINATORS GRANTS
FISCAL YEAR 2000**

ALASKA

Anchorage	Anchorage School District Contact: Michael Kerosky (907) 742-4161	\$335,140
Soldotna	Kenai Peninsula Borough School District Contact: Gary Whitely (907) 262-9805	\$291,428

ALABAMA

Anniston	Calhoun County Bd of Education Contact: Marita Fike (256) 236-7641	\$346,981
Florence	Lauderdale County Bd of Education Contact: Alice Yeager (256) 760-1300	\$148,895
Fort Payne	Dekalb County Bd of Education Contact: Donna Taheri (256) 638-8880	\$443,176

ARIZONA

Tucson	Amphitheater Unified School District Contact: Phil Woodall (520) 696-6230	\$133,030
Tucson	Sunnyside Unified School District #12 Contact: Kirk Perrini (520) 545-2321	\$331,037
Phoenix	Osborn School District #8 Contact: Eduarda Amondragon-Rosh (602) 707-2033	\$125,345
Sacaton	Sacaton School District Contact: Dr. Leon Ben (520) 562-3339	\$140,990
Teec Nos Pos	Red Mesa Unified School District #27 Contact: Karen Leshner (520) 656-4127	\$134,114
Gilbert	Gilbert Unified School District #41 Contact: Sherryl Henning (480) 497-3344	\$527,377

CALIFORNIA

Yuba City	Yuba City Unified School District	\$498,206
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	Contact: Bob Kruse (530) 822-7640	
Arroyo Grande	Lucia Mar Unified School District Contact: Barbara LoCoco (805) 473-4191	\$224,883
Elk Grove	Elk Grove Unified School District Contact: Tom Martens (916) 686-7780	\$220,000
San Jose	Alum Rock Union Ele SD Contact: Barbara Wise (408) 928-6950	\$548,020
Redding	Redding School District Contact: Kathy Kuhn (530) 225-0011	\$536,549
Los Angeles	Los Angeles Unified School District Contact: Francine Eisenrod (213) 625-6411	\$1,291,046
Hawthorne	Hawthorne School District Contact: Peggy Doherty (310) 676-2276	\$595,890
Bakersfield	Greenfield Union School District Contact: CynDee Zandes (661) 837-6000	\$462,402
Carmichael	San Juan Unified School District Contact: Mike Koerner (916) 971-7022	\$461,822
San Francisco	San Francisco Unified School District Contact: Trish Bascom (415) 242-2615	\$1,460,288
San Diego	San Diego County Office of Education Contact: Sharon Snyder (619) 718-6665	\$2,733,696
San Dimas	Bonita Unified School District Contact: Joe Gillentine (909) 599-6787	\$300,088
San Bernardino	San Bernardino City Unified School District Contact: Karen Wilson (909) 880-6706	\$386,328
San Diego	San Diego Unified School District Contact: Jack Campana (858) 627-7598	\$1,002,052
Riverside	Jurupa Unified School District Contact: Paul Jensen (909) 222-7739	\$436,790
Riverside	Alvord Unified School District	\$547,898

Contact: Ronald G. Bennett
(909) 509-5000

COLORADO

Loveland	Thompson R2J School District Contact: Howard Wenger (970) 613-5302	\$472,106
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CONNECTICUT

Hartford	Hartford Public Schools Contact: Leah Fichtner (860) 297-8460	\$542,518
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Danbury	Danbury Board of Education Contact: Patricia Doyle (203) 797-4709	\$383,068
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FLORIDA

Palatka	Putnam County School Board Contact: Peggy D. Kelly (904) 329-3800	\$672,005
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West Palm Beach	SD of Palm Beach County Contact: Dr. Alison Adler (561) 357-0352	\$550,000
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Ft. Lauderdale	Broward County School Board Contact: Bruce Wagar (954) 765-7077	\$714,534
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GEORGIA

Decatur	DeKalb County School System Contact: Diane Jackson-Chapman (770) 939-4062	\$540,000
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IOWA

Bettendorf	Mississippi Band Area Education Agency Contact: Jan Yoder (319) 344-6315	\$394,163
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Runnells	Southeast Polk Community SD Jr. High Contact: Jeff Burchfield (515) 967-5509	\$144,174
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Sioux Rapids	Sioux Central Community Schl. District Contact: Dr. Bonnie M. Meier (712) 283-2571	\$180,936
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Humboldt	Humboldt Community School District Contact: Michael (Rex) Heard (515) 332-1331	\$526,682
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Johnston	Johnston Community School District Contact: Gary Busby (515) 278-0476	\$164,691
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Des Moines	Des Moines Independent Community School District Contact: Dr. Ron Sallade (515) 242-7890	\$550,000
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ILLINOIS

Murphysboro	Murphysboro CUSD #186 Contact: Michael Sullivan (618) 684-3041	\$104,343
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INDIANA

Carmel	Carmel Clay School Corporation Contact: Kevin S. Rowe (317) 844-9961	\$192,639
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Indianapolis	Indianapolis Public Schools Contact: James S. Arvin (317) 226-4546	\$643,305
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KANSAS

Wichita	Wichita Public Schools Contact: Debbie McKenna (316) 973-2260	\$384,999
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KENTUCKY

Albany	Clinton County Board of Education Contact: Paula Little (606) 387-9772	\$138,776
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LOUISIANA

Lafayette	Lafayette Parish School Board Contact: Maxine J. Hamilton (337) 236-6875	\$278,779
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Marrero	Jefferson Parish Public School System Contact: Freddie G. Landry (504) 349-8523	\$456,934
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Chalmette	St. Bernard Parish School Board Contact: Doris Voitier (504) 301-2000	\$293,275
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MASSACHUSETTS

Revere	City of Revere-Revere Public Schools Contact: Dr. Ruth Davis (781) 286-8266	\$121,451
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Amherst	Amherst Regional Middle School Contact: Sharon Howard (413) 549-9841	\$108,533
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Malden	Malden Public Schools Contact: George Holland (781) 397-7204	\$530,255
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MAINE

Kingfield	Maine School Administrative District #58 Contact: Sandra Schniepp (207) 265-5511	\$53,475
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MICHIGAN

Battle Creek	Battle Creek Public Schools Contact: Gerry Mann (616) 965-9479	\$219,510
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Royal Oak	School District of the City of Royal Oak Contact: Diane Alvin (248) 435-8400	\$414,086
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North Branch	North Branch Area Schools Contact: Tom English (810) 688-4431	\$249,600
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Lake Orion	Lake Orion Community Schools Contact: David Beiter (248) 693-5400	\$137,425
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Alma	Alma Public Schools Contact: Louis S. Schafer (517) 463-3111	\$174,631
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Menominee	Menominee County Intermediate SD Contact: Wendy Woodworth (906) 863-5665	\$257,210
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MINNESOTA

Red Lake	Red Lake Independent School District #38 Contact: Michelle Lyons (218) 679-3899	\$235,576
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St Paul	Saint Paul Public Schools/ISD #625 Contact: Patrick Fitzgerald (651) 603-4945	\$311,156
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Maple Grove	Osseo Area Schools, ISD 279 Contact: Lorry Day (763) 391-7128	\$486,835
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Elk River	Elk River School District Contact: Gretchen Grewe (763) 241-3403	\$449,446
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MISSOURI

Florissant	Ferguson Florissant School District Contact: Jeff Spiegel (314) 506-9000	\$480,155
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Kansas City	Hickman Mills C-1 School District Contact: Suzanne M. Siler (816) 361-7137	\$290,619
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MISSISSIPPI

Starkville	Starkville School District Contact: Dr. Joan Butler (662) 324-4063	\$381,937
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Prentiss	Jefferson Davis County School District Contact: Oneida Sibley (601) 792-2702	\$242,746
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MONTANA

Harlem	School District No. 12 Contact: Don Bidwell (406) 353-2289	\$159,260
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NORTH CAROLINA

Charlotte	Charlotte-Mecklenburg Schools Contact: Dr. Ralph Taylor (704) 343-3768	\$530,000
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NEW JERSEY

Piscataway	Piscataway Township Board of Education Contact: Dorothy Aquila (732) 752-4457	\$132,220
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NEW MEXICO

Farmington	Farmington Muncipal School District Contact: Rebecca Jasper (505) 324-0352	\$82,864
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NEW YORK

Rochester	Rochester City School District Contact: Marjorie Lefler (716) 262-8238	\$790,307
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Patchogue	Eastern Suffolk Board of Cooperative Educational Services Contact: Barry Rosen (631) 289-0078	\$551,145
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Lyons	Lyons Central School Contact: David S. Alena (315) 946-2200	\$408,218
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Niagara Falls	Niagara Falls City School District Contact: Cynthia Bianco (716) 286-4253	\$449,532
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Bronx	Community School District 10 Contact: Joannette Walker (718) 329-8080	\$520,901
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Bronx	Community School District 11 Zahidali Rohoman (718) 519-2611	\$566,154
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New York	Community School District Six Contact: Maria Flores	\$257,900
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(212) 795-4111
New York Community School District 20 \$513,478
Contact: Christina Tettonis
(718) 692-5216

North Greece Greece Central School District \$533,053
Contact: Donald O. Nadolinski
(716) 621-1000

OHIO

Youngstown Youngstown City School District \$112,336
Contact: Wendy E. Webb
(330) 744-6920

OKLAHOMA

Oklahoma City Oklahoma City Public Schools \$500,490
Contact: Dr. F. LeRoy Walser

Tahlequah Tahlequah Public Schools \$306,561
Contact: Billie Jordan
(918) 458-4100

OREGON

Eugene Eugene School District 4J \$528,100
Contact: Nancy Johnson
(541) 687-3354

Eugene Lane Education Service District \$506,684
Contact: Kathy White
(541) 461-8267

Newport Lincoln County School District \$406,415
Contact: Ellen Anderson
(541) 563-3081

PENNSYLVANIA

Pottstown Pottstown School District \$113,443
Contact: Jeffrey Sparagana
(610) 970-6667

Waynesburg West Greene School District \$149,123
Contact: Charles P. Rembold
(724) 499-5183

SOUTH CAROLINA

Charleston Charleston County School District \$356,832
Contact: Mary Jo McInerny
(843) 937-6427

TENNESSEE

Springfield Robertson County Board of Education \$210,584
Contact: Clayton Sykes
(615) 384-5588

Chattanooga	Hamilton County Board of Education Contact: Judy Wilson (423) 825-7207	\$347,366
Nashville	Metropolitan Nashville Public Schools Contact: Aldorothy Wright (615) 259-8761	\$535,189
Centerville	Hickman County Board of Education Contact: Wallace Smith (931) 729-4433	\$174,488

TEXAS

Falfurrias	Brooks County Independent School District Contact: Nabor Cortez (361) 325-1712	\$203,600
Hitchcock	Hitchcock Independent School District Contact: Jane Ankney (409) 986-6536	\$95,444
Castroville	Medina Valley Independent School District Contact: Annette Gonzales (830) 931-2243	\$113,188
Bedford	H-E-B Independent School District Contact: Mary McCabe (817) 283-4461	\$241,092
League City	Clear Creek Independent School District Contact: Don Shigekawa (281) 338-5827	\$261,858
Marble Falls	Marble Falls Independent School District Contact: Andrew Shell (830) 693-4357	\$120,362
Bryan	Bryan Independent School District Contact: Suzanne Phelps (979) 361-5224	\$367,675
San Antonio	San Antonio Independent School District Contact: Roger Rodriguez (210) 299-5500	\$498,460
Deer Park	Deer Park Independent School District Contact: Martha Mosshart (281) 930-4815	\$395,805
Richardson	Richardson Independent School District Contact: Jill Darling (972) 238-6573	\$400,000

UTAH

Farmington	Davis School District Contact: Peggy Hill (801) 444-5132	\$541,680
Salt Lake City	Granite School District	\$842,099

Contact: Sue McGhie Troft
(801) 268-8560

Vernal	Uintah School District Contact: William Murphy (435) 781-3100	\$140,990
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WASHINGTON

Mount Vernon	Northwest Educational Service District 189 Contact: Lori Stolee (360) 424-9573	\$532,605
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Burien	Puget Sound Educational Service District Kimberly Noel (206) 439-6921	\$518,667
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Wenatchee	North Central Educational Service District Contact: Shawn Regan (509) 665-2631	\$397,695
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WISCONSIN

Milwaukee	Milwaukee Public Schools Contact: Peter Pochowski (414) 345-6628	\$502,598
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Madison	Madison Metropolitan School District Contact: Joan Lerman (608) 266-6235	\$546,600
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Superior	School District of Superior Contact: Maureen Johnson (715) 394-8704	\$264,728
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Ladysmith	Ladysmith-Hawkins School District Contact: Roy Jonjak (715) 532-5277	\$306,471
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Wautoma	Wautoma Area School District Contact: Paul Kreutzer (920) 787-4577	\$154,405
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SEC. 10102. ELEMENTARY SCHOOL COUNSELING DEMONSTRATION.

(a) Counseling Demonstration.--

(1) In General.--The Secretary may award grants under this section to establish or expand elementary school counseling programs.

(2) Priority.--In awarding grants under this section, the Secretary shall give special consideration to applications describing programs that--

(A) demonstrate the greatest need for new or additional counseling services among the children in the elementary schools served by the applicant;

(B) propose the most promising and innovative approaches for initiating or expanding elementary school counseling; and

(C) show the greatest potential for replication and dissemination.

(3) Equitable distribution.--In awarding grants under this section, the Secretary shall ensure an equitable geographic distribution among the regions of the United States and among urban, suburban, and rural areas.

(4) Duration.--A grant under this section shall be awarded for a period not to exceed three years.

(5) Maximum grant.--A grant under this section shall not exceed \$400,000 for any fiscal year.

(b) Applications.--

(1) In general.--Each local educational agency desiring a grant under this section shall submit an application to the Secretary at such time, in such manner, and accompanied by such information as the Secretary may reasonably require.

(2) Contents.--Each application for a grant under this section shall--

(A) describe the elementary school population to be targeted by the program, the particular personal, social, emotional, educational, and career development needs of such population, and the current school counseling resources available for meeting such needs;

(B) describe the activities, services, and training to be provided by the program and the specific approaches to be used to meet the needs described in subparagraph (A);

(C) describe the methods to be used to evaluate the outcomes and effectiveness of the program;

(D) describe the collaborative efforts to be undertaken with institutions of higher education, businesses, labor organizations, community groups, social service agencies, and other public or private entities to enhance the program and promote school-linked services integration;

(E) describe collaborative efforts with institutions of higher education which specifically seek to enhance or improve graduate programs specializing in the preparation of elementary school counselors, school psychologists, and school social workers;

(F) document that the applicant has the personnel qualified to develop, implement, and administer the program;

(G) describe how any diverse cultural populations, if applicable, would be served through the program;

(H) assure that the funds made available under this part for any fiscal year will be used to supplement and, to the extent practicable, increase the level of funds that would otherwise be available from non-Federal sources for the program described in the application, and in no case supplant such funds from non-Federal sources; and

(I) assure that the applicant will appoint an advisory board composed of parents, school counselors, school psychologists, school social workers, other pupil services personnel, teachers, school administrators, and community leaders to advise the local educational agency on the design and implementation of the program.

(c) Use of Funds.--

(1) In general.--Grant funds under this section shall be used to initiate or expand elementary school counseling programs that comply with the requirements in paragraph (2).

(2) Program requirements.--Each program assisted under this section shall--

(A) be comprehensive in addressing the personal, social, emotional, and educational needs of all students;

(B) use a developmental, preventive approach to counseling;

“(C) increase the range, availability, quantity, and quality of counseling services in the elementary schools of the local educational agency;

“(D) expand counseling services only through qualified school counselors, school psychologists, and school social workers;

“(E) use innovative approaches to increase children's understanding of peer and family relationships, work and self, decisionmaking, academic and career planning, or to improve social functioning;

“(F) provide counseling services that are well-balanced among classroom group and small group counseling, individual counseling, and consultation with parents, teachers, administrators, and other pupil services personnel;

“(G) include inservice training for school counselors, school social workers, school psychologists, other pupil services personnel, teachers, and instructional staff;

“(H) involve parents of participating students in the design, implementation, and evaluation of a counseling program;

“(I) involve collaborative efforts with institutions of higher education, businesses, labor organizations, community groups, social service agencies, or other public or private entities to enhance the program and promote school-linked services integration; and

“(J) evaluate annually the effectiveness and outcomes of the counseling services and activities assisted under this section.

“(3) Report.--The Secretary shall issue a report evaluating the programs assisted pursuant to each grant under this subsection at the end of each grant period in accordance with section 14701, but in no case later than January 30, 1998.

“(4) Dissemination.--The Secretary shall make the programs assisted under this section available for dissemination, either through the National Diffusion Network or other appropriate means.

“(5) Limit on administration.--Not more than five percent of the amounts made available under this section in any fiscal year shall be used for administrative costs to carry out this section.

“(d) Definitions.--For purposes of this section--

“(1) the term ‘school counselor’ means an individual who has documented competence in counseling children and adolescents in a school setting and who--

“(A) possesses State licensure or certification granted by an independent professional regulatory authority;

“(B) in the absence of such State licensure or certification, possesses national certification in school counseling or a specialty of counseling granted by an independent professional organization; or

“(C) holds a minimum of a master's degree in school counseling from a program accredited by the Council for Accreditation of Counseling and Related Educational Programs or the equivalent;

“(2) the term ‘school psychologist’ means an individual who--

“(A) possesses a minimum of 60 graduate semester hours in school psychology from an institution of higher education and has completed 1,200 clock hours in a supervised school psychology internship, of which 600 hours shall be in the school setting;

“(B) possesses State licensure or certification in the State in which the individual works; or

“(C) in the absence of such State licensure or certification, possesses national certification by the National School Psychology Certification Board;

“(3) the term ‘school social worker’ means an individual who holds a master's degree in social work and is licensed or certified by the State in which services are provided or holds a school social work specialist credential; and

“(4) the term ‘supervisor’ means an individual who has the equivalent number of years of professional experience in such individual's respective discipline as is required of teaching experience for the supervisor or administrative credential in the State of such individual.

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PARTNERSHIPS IN CHARACTER EDUCATION PILOT PROJECT.

[Federal Register: July 13, 2000 (Volume 65, Number 135)]
[Notices]
[Page 43309]
From the Federal Register Online via GPO Access [wais.access.gpo.gov]
[DOCID:fr13jy00-54]

[[Page 43309]]

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DEPARTMENT OF EDUCATION

[CFDA No.: 84.215E]

Elementary School Counseling Demonstration Program

AGENCY: Department of Education.

ACTION: Notice reopening the application deadline date for the
Elementary School Counseling Demonstration Program.

SUMMARY: On April 18, 2000, the Department published a notice inviting applications for new awards for the Elementary and Secondary Education Act, Title X--Programs of National Significance, Part A-Fund for the Improvement of Education--Section 10102, Elementary Counseling Demonstration Program. The Secretary reopens the deadline date for the submission of applications for this competition from June 9, 2000 for applicants that can show a shipping label, invoice, or receipt for overnight delivery contracted to arrive by June 9, 2000. This action is taken due to unexpected or unavoidable delays in receipt of applications sent via certain overnight delivery services.

DATES: The applicant deadline date is reopened to July 13, 2000 for applicants able to show a shipping label, invoice, or receipt for overnight delivery contracted to arrive by June 9, 2000.

FOR FURTHER INFORMATION CONTACT: Loretta Riggins, Safe and Drug-Free Schools Program, U.S. Department of Education, 400 Maryland Avenue, SW., Washington, DC 20202-6123. Telephone: (202) 260-3954.

Individuals who use a telecommunication device for the deaf (TDD) may call the Federal Information Relay Service (FIRS) at (800) 877-8339.

Electronic Access to This Document: You may view this document, as well as all other Department of Education documents published in the Federal Register, in text or Adobe Portable Document Format (PDF) on the Internet at either of the following sites:

<http://ocfo.ed.gov/fedreg.htm>

<http://www.ed.gov/news.html>

To use the PDF you must have the Adobe Acrobat Reader Program with Search, which is available free at either of the previous sites. If you have questions about using the PDF, call the U.S. Government Printing Office (GPO), toll free, at 1-888-293-6498; or in the Washington, DC area at (202) 512-1530.

Note: The official version of this document is the document published in the Federal Register. Free Internet access to the official edition of the Federal Register and the Code of Federal Regulations is available on GPO Access at:

<http://www.access.gpo.gov/nara/index.html>

Program Authority: 20 U.S.C. 8002.

Dated: July 7, 2000.

Michael Cohen,
Assistant Secretary for Elementary and Secondary Education.
[FR Doc. 00-17687 Filed 7-12-00; 8:45 am]
BILLING CODE 4000-01-M

**FIRST LADY HILLARY RODHAM CLINTON LAUNCHES NEW PUBLIC-PRIVATE
EFFORT TO IMPROVE THE DIAGNOSIS AND TREATMENT OF CHILDREN WITH
EMOTIONAL AND BEHAVIORAL CONDITIONS**

March 20, 2000

Today, First Lady Hillary Rodham Clinton, together with Secretary Shalala and representatives of parents and a broad range of health professionals, launched an unprecedented public-private effort to ensure that children with emotional and behavioral conditions are appropriately diagnosed, treated, monitored, and managed by qualified health care professionals, parents, and educators. Federal actions she will outline include: (1) the release of a new, easy to understand fact sheet about treatment of children with emotional and behavioral conditions for parents; (2) a new \$5 million funding commitment by the National Institute of Mental Health (NIMH) to conduct additional research on the impact of psychotropic medication on children under the age of seven; (3) the initiation of a process at the Food and Drug Administration (FDA) to improve pediatric labeling information for young children; and (4) a national conference on Treatment of Children with Behavioral and Mental Disorders to take place this fall. The First Lady will also highlight actions taken by the private sector to ensure appropriate diagnosis and effective treatment of these children. All of these actions build on the landmark work resulting from the first ever White House Conference on Mental Health and the release of the unprecedented Surgeon General's Report on Mental Health last year, both of which were spearheaded by Tipper Gore, the President's Mental Health Advisor.

INAPPROPRIATE DIAGNOSIS AND TREATMENT OF BEHAVIORAL AND EMOTIONAL CONDITIONS HAVE ADVERSE CONSEQUENCES. While progress has been made in diagnosing and treating these conditions, justifiable concerns have been raised about the inappropriate (both over and under) utilization of medications such as Ritalin, clonidine, and Prozac in very young children. Just as important, there is a lack of understanding amongst parents, teachers, and health professionals about the best diagnostic, pharmacological, and behavioral interventions now available. Recent studies published in the *Journal of the American Medical Association* reviewing selected provider data over a five year period found that:

- **Failure to treat emotional and behavioral disorders can have severe life-long consequences.** Studies suggest that many children with untreated emotional and behavioral conditions fail to reach their full potential. Untreated mental illness has a negative impact on the developing brain, causing lifelong emotional and social damage. Children with these types of problems are at significantly higher risk for anti-social activities later on than those without behavioral problems. It is evident that an accurate early diagnosis, education, support, and medication, if necessary, can overcome many early problems and help prevent long-term negative behavior.
- **The number of preschoolers on anti-depressants increased by over 200 percent.** The number of children on tri-cyclic anti-depressants, often used to control bedwetting, increased 220 percent over five years. Given the difficulty of diagnosing depression in children this young and the relative normalcy of bedwetting in children this young, the increase in the use of this drug in preschoolers is troubling.

- **The number of children under the age of five on clonidine increased exponentially.** The 28-fold increase in children using clonidine, used in children with attention deficit disorders or children exhibiting disruptive behaviors, is notable, as the increase in its use occurred without research ensuring that it is safe and effective. Adverse effects, including rapid or irregular heartbeat and fainting, have been reported in children using the drug with other medications for attention-deficit disorder.
- **The number of children aged two through four taking stimulants such as Ritalin more than doubled.** The vast majority of preschoolers taking stimulants were on Ritalin to treat attention deficit disorders – as many as ninety percent in one study – and the number of these children increased by 150 percent over a five year period. Although there are a disproportionate number of boys taking medication for attention deficit disorders as opposed to girls (a ratio of 4:1), the number of girls being diagnosed and treated with attention deficit disorders increased over this time period; in one study, the proportion of girls taking stimulants increased by 60 percent.
- **Many children are inappropriately diagnosed and treated.** Studies indicate wide geographic and ethnic variation in the numbers of children receiving psychotropic drugs such as Ritalin. In one study, the percentage of children receiving Ritalin was as high as 10 percent – 2 to 3 times as high as the expected rate of attention deficit disorder. The percentage of boys receiving medication for attention deficit disorder in the fifth grade was as high as 20 percent. Other research indicates racial variations as well; a study of one Maryland HMO indicated that African-Americans children were 2.5 times less likely to receive Ritalin as white children. This wide variation in treatment patterns supports the need for more research to determine appropriate treatment protocols for children with emotional and behavioral disorders. Although little is known about the effects of over medication on children, unnecessary use of these medications can have adverse effects on the developing brain and the emotional and social development of young children.
- **More research is necessary to ensure informed treatment decisions.** Many of the drugs being prescribed for very young children have not been tested in children under the age of 16; few have been tested for children under the age of six. More research is necessary to ensure that providers and parents have necessary information, especially about the impact of medication on brain development, to make appropriate treatment decisions.

NEW ACTION TO ENSURE BETTER DIAGNOSIS, TREATMENT, AND MANAGEMENT OF CHILDREN WITH EMOTIONAL AND BEHAVIORAL CONDITIONS. At today's meeting, the First Lady will announce a series of public and private actions designed to address the challenges posed by children with emotional and behavioral conditions. Federal actions she will outline include:

- **Initiation of a process for the development of pediatric labeling information for psychotropic drugs used in young children.** Today, FDA will announce that it will work with its Pediatric Advisory Committee to design research protocols that will be used to develop new pediatric dosage information to be included on the labels of drugs such as methylphenidate, clonidine, and other drugs increasingly used in young children. These studies, which will begin after national research goals have been identified, will be designed to address ethical and scientific issues associated with the studies on this population.

- **Announcement that NIMH will dedicate more than \$5 million to research on attention deficit disorder and Ritalin use in preschoolers.** Today, the National Institute of Mental Health announced that it plans to invest more than \$5 million in research on the use of medication to treat attention deficit disorder in preschool children. This research will assemble the latest information on the use of these drugs and identify discrepancies between clinical practice and current scientific evidence.
- **New efforts to provide parents with up-to-date information on the appropriate diagnosis and treatment of children with emotional and behavioral conditions.** This week, NIMH will release a new fact sheet to help parents of children with behavioral and emotional conditions understand the treatment options available and guide them in their decision-making process. This fact sheet includes easy to understand information on when to include medication in an overall treatment plan; how to help determine if a child's problems are serious; and when and how to get help. The Department of Education will also release an information kit on ways for teachers and parents of children with attention deficit disorders.
- **A national Conference on the Diagnosis and Treatment of Children with Behavioral and Mental Disorders.** This fall, the Office of the Surgeon General, together with NIMH and FDA, will coordinate a Conference on Treatment of Children with Behavioral and Mental Conditions. This national conference, which will build on the success of the recent White House Conference on Mental Health chaired by Tipper Gore, and the Surgeon General's Report on Mental Health, will include representatives of provider, consumer advocacy, and education communities. Topics of discussion include: developing research on treatments and services that can be used by providers nationwide; how best to determine the efficacy and safety of medications in young children; and ways to address the difficulty of accurate diagnosis in preschoolers. The Surgeon General will also release a report on children's mental health by the end of the year.

NEW PRIVATE SECTOR COMMITMENT TO ENSURING APPROPRIATE DIAGNOSIS OF EMOTIONAL AND BEHAVIORAL CONDITIONS IN YOUNG CHILDREN. Today, the First Lady will praise and highlight the new efforts of the American Academy of Pediatrics (AAP) and the American Academy of Family Physicians (AAFP) to ensure appropriate diagnosis and effective treatment of children with emotional and behavioral conditions. This spring and fall, the AAP will distribute new clinical practice guidelines on the diagnosis and evaluation of children with attention deficit disorders to every one of their 55,000 members. In addition, as part of their focus on mental health in the year 2000, the AAFP will sponsor education courses nationwide for their over 89,000 members on how to address the problems of young children with emotional and behavioral conditions.

HILLARY ROHDAM CLINTON'S LONGSTANDING COMMITMENT TO CHILDREN.

For over 25 years, Hillary Clinton has fought to raise awareness and support policies that protect children. She was a strong advocate for: the passage of the Children's Health Insurance Program, the Family and Medical Leave Act; new regulatory and statutory authority for pediatric labeling; administration efforts to improve child care. The new pediatric labeling regulations and the FDA Modernization Act enacted by the Clinton Administration have improved the information available to both parents and physicians about the appropriate use of medications for children. In the 18 months since these initiatives have been implemented, research has been completed on 19 drugs, resulting in new safety information being added to six drugs with changes expected for the other 13. Studies of an additional 125 drugs are already underway.

THE WHITE HOUSE
WASHINGTON

June 27, 2000

MEMORANDUM FOR HILLARY RODHAM CLINTON

FROM: HEATHER HOWARD ^{HH}

CC: MELANNE VERVEER
LISSA MUSCATINE
ANN O'LEARY

SUBJECT: UPDATE ON EFFORTS TO IMPROVE THE TREATMENT OF
CHILDREN WITH EMOTIONAL AND BEHAVIORAL
CONDITIONS

Before your interview with the Medical Editor of CBS, I wanted to briefly update you on what has happened since your event in March announcing new Federal efforts to improve the diagnosis and treatment of children with emotional and behavioral conditions.

- **New guidelines for the diagnosis of Attention Deficit Hyperactivity Disorder (ADHD) from the American Academy of Pediatrics.** At your Roosevelt Room event, you announced that the Academy was developing new guidelines for the diagnosis and treatment of ADHD. In May, the Academy released the new treatment guidelines to their 55,000 members. The new guidelines require that ADHD symptoms be present in two or more of a child's settings, and that the symptoms adversely affect the child's academic or social functioning for at least six months. The new guidelines recommend that the assessment of ADHD include information obtained directly from parents or caregivers, as well as a classroom teacher or other school professional, regarding the core symptoms of ADHD in various settings. They also recommend that evaluation include assessment for co-existing conditions, such as learning and language problems, aggression, disruptive behavior, depression or anxiety. The Academy is currently developing the new ADHD treatment guidelines, which are expected to be released this fall.
- **NIMH research.** NIMH is in the process of funding a \$5 million multi-site trial on the use of Ritalin to treat ADHD in preschoolers.
- **FDA efforts.** Due in large part to the attention you have focused on this issue, the FDA is now working to develop the science base necessary to create protocols for developing new labeling information for pediatric dosages. In September, the FDA's Pediatric Advisory Subcommittee will be meeting to discuss the ethical issues surrounding studying children, and in October, the FDA and NIMH are holding a joint meeting entitled "Psychopharmacology for Young Children: Clinical Needs and Research Opportunities."

- **Planning for the Fall Surgeon General's Conference on the Treatment of Children with Behavioral and Mental Disorders.** Planning for the conference, scheduled for September 17th and 18th, 2000, is ongoing. On Monday, June 26, 2000, the Surgeon General held a "listening session," to which he invited 50 groups representing healthcare providers, educators, parents, and consumers. Representatives from NIMH, the FDA, SAMSA, and the Center for Mental Health Services also participated. The meeting, which I attended, solicited input on four key questions:
 - What are the key barriers to identifying, recognizing or referring children with mental health needs (e.g., definitional, systems, training, assessment issues, costs, etc.)?
 - What are the major challenges to using evidence-based strategies to identify and treat children with mental health problems?
 - What are the major service obstacles to delivering mental health care to children and families?
 - What are the key research and service priorities in children's mental health?

The overarching themes in the comments were:

- The importance of coordination between the different providers in children's lives, including those in the health care, education, and child care systems.
- The need for better training for health providers and educators, to help them assess children's behavioral and mental problems.
- The critical importance of proper assessment, which everyone agreed cannot happen during a ten-minute doctor's visit.
- The importance of involving families in all aspects of treatment, including diagnoses, service design and delivery.
- The need for research on the zero to five population.
- The difficulties in translating research into practice.

As you mentioned in your speech at the March event, pharmaceutical companies and health insurers need to be included in this discussion. The Surgeon General's office has assured me that they will be included in the fall conference.

APA is key to anti-stigma campaign

A White House initiative aimed at teens seeks to prevent discrimination against people with mental illnesses.

BY KATHRYN FOXHALL
Monitor staff

Last summer's White House Conference on Mental Health issued a challenge: The nation must find ways to reduce the stigma of mental illness. This year, APA and MTV are answering that challenge by providing expertise for a public awareness campaign supported by Tipper Gore to fight the stigma of mental health problems among young people.

The five-year program--launched at a June 7 press conference--seeks to change Americans' fundamental perceptions and attitudes about mental illness.

"We cannot discriminate just because the illness happens to emanate from the brain, which is part of the human body, a part of the human condition," said Tipper Gore, announcing the campaign at the press conference. "But apparently we have to educate people about that."

Gore sought to work with APA on the campaign in light of the success the association has had with the "Warning Signs" campaign against youth violence, a joint project APA carried out with MTV.

APA was responsible for developing the content for the campaign brochure, available in both print and web versions. The brochure discusses mental health problems experienced by teens and young adults and offers advice on getting help. A series of brief stories illustrate how young people with problems such as panic and eating disorders, as well as severe depression, can improve and recover by getting professional treatment.

"With APA as acknowledged experts in the field, we were confident the materials would be appropriate and clinically correct," says Al Guida, executive director of the National Mental Health Awareness Campaign (NMHAC), the organization created by the White House to carry out the effort.



APA Executive Director for Practice Russ Newman and Tipper Gore announced the anti-stigma campaign at a White House press conference.

APA / White House cooperation

"Also, APA is unusual among the discipline-type organizations in the field in the amount of staff and resources it devotes to public awareness of mental health issues."

The campaign's specific goals include increasing access to health care for people with mental disorders and decreasing discrimination against them in jobs and housing.

The partners in the effort include the U.S. Department of Health and Human Services offices of the U.S. Surgeon General's Office, the National Institute of Mental Health, the Office of the Assistant Secretary for Planning and Evaluation and the Substance Abuse and Mental Health Services Administration. Private partners include the Ad Council, MTV, several corporations and some private individuals.

"Never before has an anti-stigma public service initiative used modern mass communication techniques over a sustained period of time," says Guida.

He has high hopes for the campaign, noting that over the last few decades public education has minimized the fearsome stigma once associated with cancer--this campaign, he says, aims to do the same for mental disorders.

Helping teens get help

The campaign's outreach to a young adult audience has already begun: 60-second announcements, developed by MTV, on television stations MTV, MTV2, VH1 and Nickelodeon feature brief portraits of young people in the midst of mental health problems, who urge the audience to "Change your mind about mental health."

The combined viewing audience of the four television networks is reported at 75 million people--60 percent of them under age 20. All four networks have pledged to run at least three spots--developed with the help of ethnically diverse focus groups--repeatedly over upcoming months.

The spots direct viewers to an 800 number, and callers receive a brochure developed by APA reflecting focus groups with young people and the expertise of several APA members who collaborated on content development. That pamphlet--Change Your Mind About Mental Health: A Get-Help Guide for Teens And Young Adults--underscores that it is "not uncommon for

teen-agers to develop problems with their mental health" and notes that one in five teens has some type of mental health problem in any given year.

The brochure also discusses mental health problems common in young people, including depression, panic disorders and eating disorders, and offers advice on ways to get help.

"First step: Reach out to people you trust," recommends the brochure. "Think of all the people you can turn to for support--people who are concerned about you and can help comfort you, who will listen to you and encourage you, and who can help arrange for treatment."

APA members may call APA's public education campaign toll-free number, (800) 964-2000, to receive free copies of the Change Your Mind About Mental Health brochure. The general public may receive free copies of the brochure by calling (877) 495-0009 or may view or download the brochure by logging on to helping.apa.org or www.NoStigma.org.

Future outreach

The campaign is also seeking to obtain air time for public service announcements on broadcast television, radio and billboards. In future years, the campaign plans to move into other forms of public education, such as:

- The news and entertainment media: "In most cases," says Guida, "mental illness is only covered in the news in the context of extremely violent acts by mentally ill people. And these media images reinforce the stigma." To counter that one-sided coverage, the partnership seeks to educate editors and reporters on mental illness and work toward anti-stigma messages in entertainment programming.
- Community efforts: To fortify the anti-stigma message, the partnership may sponsor forums and other community-based efforts to discuss the ramifications of stigma and possible solutions.
- Research: The partnership may sponsor research on stigma to counter prejudicial attitudes--among politicians, insurance companies, housing authorities, employers and others.

Building on APA's model

The anti-stigma campaign flows from APA's team effort with MTV on the "Warning Signs" campaign

against youth violence. That continuing effort includes an MTV documentary co-produced with APA entitled "Warning Signs," a "Warning Signs" guide, and an 800 number and Web site address (helping.apa.org) for requesting free copies of the guide about preventing youth violence.

Due to the overwhelming success of the "Warning Signs" campaign--there have been more than one-half million hits to the online version of the guide and nearly 500,000 copies of the guide distributed--a similar model has been employed for the anti-stigma campaign.

APA's prior work with MTV has given the association valuable experience in communicating with teens--experience that has proved essential to developing the anti-stigma campaign for young adults.

"Through the 'Warning Signs' campaign, we were able to successfully communicate difficult, complicated messages about the warning signs of violence and causes of violent behavior in a way that teens can understand and use," says Russ Newman, PhD, JD, executive director for practice. "With the anti-stigma campaign and MTV's help, we are able to use that experience to create messages that are appropriate and helpful for teens."

APA believes that this campaign fulfills an important need among adolescents. "As our research has shown, most people don't know when to seek help from a psychologist or licensed mental health professional, even in cases of very obvious problems," says Newman. "Adolescents are no different in that regard. In fact, they may be even more vulnerable because they are notoriously independent and the prospect of having to ask for help can be even more daunting for them."

APA's Practice Directorate gratefully acknowledges the following members who contributed to the Change Your Mind About Mental Health brochure: Barry S. Anton, PhD, University of Puget Sound; Lanny Berman, PhD, American Association of Suicidology; Molly Brunk, PhD, Virginia Commonwealth University; Jessica Henderson Daniel, PhD, Judge Baker Children's Center, Boston; Michele Harway, PhD, Phillips Graduate Institute, Encino, Calif.; Diane T. Marsh, PhD, University of Pittsburgh at Greensburg; Melba J.T. Vasquez, PhD, Independent Practice, Austin, Texas; Karen Zager, PhD, Independent Practice, New York.

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Highlights

- Senior White House Policy Advisor Ann O'Leary will provide an overview of recent Clinton-Gore initiatives that have led to increases in funding for youth-related practice and research, and the federal agencies and programs that provide funding for schools and communities.
- Senior staff from key federal agencies will describe in detail their programs and funding, and provide specific resources and guidance to facilitate the grant application process.
- A panel of psychologists who have obtained federal funds will discuss their own funding experiences. Attendees will have an opportunity to ask the panelists questions about the funding process and their experiences.
- Mid-morning and noon snacks and refreshments.
- Print and electronic resources from senior agency staff and APA.
- 4 hours of CE credit (applied for)

To register...

Use the enclosed registration form.

Early registration for the Institute ends July 14, 2000

For hotel accommodations...

If you are registered to attend the 2000 APA Convention following this Institute, please use the 2000 APA Convention Housing Reservation Form found in the APA Monitor and American Psychologist. Hotel arrangements also may be made on the Internet (<http://www.apa.org/convention/>)

Please note June 26, 2000 is the deadline for hotel reservations through APA

If you need hotel accommodations but do not plan to register for the APA convention, you must make your own hotel arrangements.

Questions? Contact

Policy and Advocacy in the Schools
Practice Directorate
American Psychological Association
750 First Street, NE #4 Floor
Washington, DC 20002-4242
Phone: (202) 336-5878
Fax: (202) 336-5797
Email: achuukwu@apa.org



AMERICAN
PSYCHOLOGICAL
ASSOCIATION

Increased Federal Support for Children and Youth: New Funding Opportunities for Practice and Research

7th Annual Institute for Psychology in Schools

Thursday - August 3, 2000
8:30 am - 1:15 pm
Renaissance Washington Hotel
Washington, D.C.

Featuring
The White House
Ann O'Leary
Special Assistant to
The President, Senior
Policy Advisor to
The First Lady

and



Senior Staff Representatives from The
Department of Education, Department of
Health and Human Services,
Department of Justice, National Institute
of Mental Health, and Centers for
Disease Control and Prevention

This program has been submitted for review
to provide 4 CE credits for psychologists

Sponsored by the APA Practice
Directorate

Increased Federal Support for Children and Youth: New Funding Opportunities for Practice and Research

7th Annual Institute for Psychology in Schools

Substantial recent increases in federal funds for practice and research have potential to improve mental health services for youth in schools and communities in today's tight budget climate. Psychologists often have the skills to effectively utilize these funds, but may lack the "nuts and bolts" details necessary to find and secure these funds. This year's Institute is designed to provide specific "how to" information to help practitioners, administrators and university trainers who are interested in schooling and children's issues apply for federal funds. Attend the Institute to learn about these programs and how to apply for federal funds for practice and research.

Keynote address by –

Ann O'Leary, Special Assistant to The President, Senior Policy Advisor to The First Lady, The White House

"Supporting Parents, Communities, and Schools in Raising Healthy Children: An Overview of the Clinton-Gore Administration's Accomplishments and Initiatives"

- At this meeting, participants will receive
- ✓ 4 hours CE credit (for psychologists)
 - ✓ morning and midday refreshments
 - ✓ a resource book of materials provided by Institute faculty and APA
 - ✓ print and electronic resources to facilitate application for funds from various federal agencies

Who should attend?

Psychologists and other health and mental health professionals who serve children and adolescents in schools and community settings

Principals, school administrators, special education and regular education teachers, special education directors, Safe and Drug-Free Schools coordinators

Institute Schedule

8:00- 8:30 am Registration/Coffee

8:30- 9:30 am Opening Plenary

Tom Kubiszyn, PhD, APA Practice Directorate – Introductory remarks

Ann O'Leary, The White House – Keynote address

"Supporting Parents, Communities, and Schools in Raising Healthy Children: An Overview of the Clinton-Gore Administration's Accomplishments and Initiatives"

9:30- 9:45 am Break

9:45- Noon Concurrent Sessions

- ☐ Interagency collaboration: Department of Education, Department of Health and Human Services, and Department of Justice

Larry Sullivan, PhD,
National Mental Health Association
Director of Safe Schools/Healthy
Students Action Center

- ☐ National Institute of Mental Health (NIMH)

Kimberly Hoagwood, PhD,
Associate Director of Child and
Adolescent Research

- ☐ Centers for Disease Control and Prevention (CDC)

Diane D. Allensworth, PhD,
Chief, Division of Adolescent and
School Health, National Center for
Chronic Disease Prevention and
Health Promotion

- ☐ Department of Education – Confirmed Senior staff to be announced

Noon- 12:30 pm Break with light snack

12:30-1:15 pm Closing Town Hall Session

A panel of psychologists who have successfully obtained federal funding will describe the process and their experiences with it. A question and answer session will enable attendees to address specific questions to the panel.

**7TH ANNUAL APA PRECONVENTION
INSTITUTE FOR PSYCHOLOGY IN SCHOOLS**

**Thursday, August 3, 2000
(8:30AM – 1:15 PM)
Renaissance Hotel Washington Hotel
Washington, D.C.**

***THEME: Increased Federal Support for Children and Youth: New Funding for
Children and Youth: New Funding Opportunities for Practice and Research***

Institute Registration Form
(Please complete one registration form per person)

Name:

First name

last name

Degree

Role(s) (circle those that apply to you):

- practitioner -administrator -trainer -other(describe)

School/Organization Affiliation:

Your Street Address:

City/State Zip:

Phone:

Fax:

E-mail:

NOTE: This registration should not be combined with APA Convention Registration and/or Housing fees.

Institute Registration. Late summer (i.e., after July 7) and onsite conference registration is offered on a space-available basis.

Hotel Reservations. To obtain APA Convention hotel rates you must also register for the APA Convention. To register for the Convention and request hotel accommodations, please use the American Psychological Association Convention Registration Form and Housing Registration Form (available from the American Psychologist or the APA Monitor). You also can register for the Convention and reserve a room via Internet at <http://www.apa.org/convention/>. The deadline for Convention registration and housing through APA is June 26, 2000. If you are not registering for the APA Convention you will need to make your own hotel reservations.

Institute Registration fee: \$55 – before July 7, \$65 – on or after July 7.

Form of Payment: Check (Make payable to APA Psychology in Schools. Note on memo: "Preconvention Institute") or Credit Card (Complete Section Below)

I authorize APA Psychology in Schools to charge my registration fee to my credit card as listed below (**APA Accounting: Credit to 4200-25773**):

Cardholder Name: Amount to be Charged \$.....

Credit Card Billing Address:
(Provide only if different from above address)

() Master Card () Visa () American Express

Account # Expiration Date:

Daytime Phone () Signature (required):

Send completed Institute registration form and check or completed credit card Section to:

Attn: ACCOUNTING DEPARTMENT
Policy and Advocacy in the Schools
Practice Directorate
American Psychological Association
750 First Street, NE - 4th Floor
Washington, DC 20002-4242

PHONE: (202) 336-5878 - FAX: (202) 336-5797 - E-MAIL: achuukwu@apa.org

The APA Practice Directorate sponsors the Institute for Psychology in Schools.
Four hours of Continuing Education credit for psychologists have been applied
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This form may be photocopied.

Requests for registration fee refund due to cancellation must be received no later
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