



Commission on **Improving** the **Status** of **Children** in **Indiana**

Annual Report 2018-2019





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Photos in this report were contributed by Katie Dawson, Indiana Department of Child Services; Garin Grist, Indiana Department of Education; Josh Hicks, Indiana Supreme Court; Alan Inkenbrandt, Family and Social Services Administration; Patrick McCauley, Indiana Supreme Court; Kristen Williams, Attorney General's Office.



Commission on Improving the Status of Children in Indiana

July 2019

Dear fellow Hoosier,

Over the past year, the Children's Commission has made significant strides toward greater health, well-being, and educational success for Indiana's children. I am pleased to share our efforts.

The Commission has developed and promoted more effective, efficient, and available services and resources for the most vulnerable youth and families. Task Forces have created subcommittees to dive into strategic objectives, break them down into concrete tasks, and deliver practical and data-informed policy and practice recommendations. And the Commission is poised to update its three-year strategic plan in the coming months, allowing it to begin 2020 with a refreshed set of objectives.

To be sure, Indiana is a great place to grow up for many kids—but not yet for all. The Commission examined data on some of Indiana's most intractable challenges for children, youth, and families, which revealed disparities in outcomes by race, ethnicity, geography, gender, and sexual orientation. The Commission responded by creating the Equity, Inclusion, and Cultural Competence Committee. As the Committee's work unfolds, the Commission will challenge itself to look at Indiana's disparate child outcomes and seek solutions that are tailored to each community of Hoosier children and families.

The Commission also worked with partners to host a number of unique educational opportunities this past year. The Commission provided a platform to distribute child well-being data to lawmakers, train juvenile justice professionals on trauma, and present research on effective child-welfare responses for families struggling with addiction, to name a few examples. As the state's primary coordinating body for child and family policy, the Commission is honored to disseminate data, research, and evidence-based practices to those who can implement real solutions for Hoosier kids.

Partnership and collaboration for the sake of the children is what the Commission is all about. Here's to a successful year behind us and the new challenges and triumphs that lie ahead.



For the Children,

Julie L. Whitman, MSW Executive Director

STATE FISCAL YEAR: JULY 1, 2018 TO JUNE 30, 2019

Commission Actions

Met during the fiscal year:

- Full Commission in August, October, December, February, and May
- Executive Committee in July, August, September, October, November, December, January, April, and May

Heard Presentations on:

- > Child wellbeing disparities
- > Family recovery courts
- > Equity, inclusion, and cultural competence
- Community feedback on the Commission's strategic plan
- Project ECHO remote training and consultation model
- > Data sharing related to the opioid crisis
- Statewide children's mental and emotional wellness plan
- The Division of Mental Health and Addiction's new Neurodiagnostic Institute
- > Indiana 211
- > Child in need of services (CHINS) data
- > Educational outcomes of homeless youth
- > Educational outcomes of foster youth
- Educational transitions for youth in the juvenile justice system
- History of race and ethnicity in the youth justice system

Approved:

- Recommendation to extend services for older foster youth to age 23
- Recommendation that each school district employ a designated professional to oversee children's mental health services and socialemotional learning (SEL)
- Guidance for school districts on competencies, job responsibilities, and funding sources for a district-level mental health/SEL coordinator
- Creation of an Equity, Inclusion, and Cultural Competence Committee
- > Development of a statewide framework for the prevention of child maltreatment

Endorsed:

- School district participation in the Youth Risk Behavior Survey, including a letter to school principals to encourage participation
- Creation of a statewide office for juvenile public defense
- Pilot project to provide specially trained public defenders and system navigators to families in CHINS cases

Tracked and Reported on 420 bills

 filed in the Indiana General Assembly, which became 86 child-related laws passed in 2019



Submitted:

- Report to the Legislative Council on child victims of sex trafficking
- Report to the Interim Committee on Courts and the Judiciary on the Indiana Department of Child Services (DCS) attorney staffing model

Hosted events with partners:

- "Hoosier Children Caught in the Opioid Crisis: Programs, Policy, Progress" with Purdue University
- "State of the Child" release of the 2019 Indiana KIDS COUNT Data Book with Indiana Youth Institute (IYI)
- Screening of "Foster" and panel discussion with DCS and the Indiana Association of Resources and Child Advocacy (IARCA)
- "History of Race and Ethnicity in the Youth Justice System" with the Indiana Supreme Court
- Statewide series of screenings of "Resilience" and panel discussions on adverse childhood experiences with education partners

Top to bottom. Senator Erin Houchin takes part in a Commission discussion; Representative David Frizzell bids the Commission farewell upon his retirement from the General Assembly; John Hammond IV considers a speaker's presentation; Chief Justice Loretta Rush opens the State of the Child event at the Statehouse; Dr. Kristina Box discusses efforts being made by the Indiana State Department of Health.

MEMBERS

Statewide Commission



Christine Blessinger

Executive Director, Division of Youth Services, Indiana Department of Correction



Justin Forkner

Chief Administrative Officer, Indiana Supreme Court



Kristina Box, M.D. Indiana State Health

Commissioner



Representative David Frizzell

State Representative, District 93

Member, Executive Committee



Senator Jean D. Breaux State Senator, District 34



John R. Hammond, IV

Deputy Chief of Staff, Office of the Governor

2018 Commission Chair Member, Executive Committee



Bernice Corley Executive Director, Indiana Public Defender Council



Curtis T. Hill, Jr. Indiana Attorney General



Jason Dudich

Director, State Budget Agency



Senator Erin Houchin

State Senator, District 47

2017 Commission Chair Member, Executive Committee



Susan Lightfoot

Chief Probation Officer, Henry County Probation Department



Honorable Loretta Rush

Chief Justice of Indiana

2019 Commission Chair Member, Executive Committee



Jennifer McCormick, Ph.D.

Indiana Superintendent of Public Instruction



Terry Stigdon Director, Department of Child Services

Member, Executive Committee



Kevin Moore

Director, Division of Mental Health and Addiction, Family and Social Services Administration



Representative Vanessa Summers

State Representative, District 99



David Powell

Executive Director, Indiana Prosecuting Attorneys Council



Jennifer Walthall, M.D.

Secretary, Family and Social Services Administration

MEMBERS

Task Forces & Committees

Child Safety & Services Task Force

Sarah Sailors, Chair Indiana Department of Child Services

Zachary W. Adams, Ph.D., HSSP IU School of Medicine Department of Psychiatry

Ben Brown FSSA/Office of Medicaid Policy & Planning

Chris Daley Indiana Association of Resources and Child Advocacy

Mark Fairchild Covering Kids & Families of Indiana

Rachel Fisher Lutherwood

Maureen Greer Indiana Perinatal Quality Improvement Collaborative

Matt Hagenbush Indiana Office of Court Services

Jason Murrey FSSA/Division of Mental Health and Addiction

Shirley Payne Indiana State Department of Health

Sandy Runkle Prevent Child Abuse Indiana

Deanna L. Szyndrowski SCAN, Inc.

Juvenile Justice and Cross-System Youth Task Force

Hon. Charles Pratt, Co-Chair Allen Superior Court

Don Travis, Co-Chair Deputy Director Department of Child Services

Jeffrey Bercovitz Indiana Office of Court Services

Sirrilla Blackmon FSSA/Division of Mental Health and Addiction

Christine Blessinger Indiana Department of Correction, Division of Youth Services

Coleen Connor Tippecanoe County CASA

Cathy Danyluk Indiana Department of Education

Elizabeth Crist Darby Indiana Criminal Justice Institute

Ann Davis Indiana Association of Resources and Child Advocacy

Hon. Kimberly Dowling Delaware Circuit Court

Kory George Wayne County Probation

James (Mike) Goodwin Sullivan County Department of Child Services

JauNae M. Hanger Children's Policy and Law Initiative of Indiana

Daniel C. Schroeder, Esq. Marion County Public Defender Agency, Juvenile Division

Nancy Wever Indiana Office of Court Services

Mental Health & Substance Abuse Task Force

Leslie Hulvershorn, MD, Co-Chair FSSA/Division of Mental Health and Addiction

Sirrilla Blackmon, LCSW, LCAC, Co-Chair FSSA/Division of Mental Health and Addiction

Matthew Aalsma, PhD, HSPP Indiana University School of Medicine

Cathy J. Boggs Community Health Network

Carrie Cadwell Four-County Counseling Center

Chris Daley Indiana Association of Resources and Child Advocacy

Susan Elsworth Indiana NOFAS (National Organization on Fetal Alcohol Syndrome)

Therese Harper, PhD FSSA/Division of Mental Health and Addiction

Kristina Johnson The Lutheran Foundation

Marc D. Kniola Indiana Department of Correction, Division of Youth Services

Cody Mullen, PhD Indiana Rural Health Association

David Reed Indiana Department of Child Services

Gabriela Marie Rodriguez, PhD, HSPP Indiana University School of Medicine Carol Satre Indiana University School of Social Work

Gilbert Smith Indiana Department of Child Services

Jennifer Tackitt-Dorfmeyer, LCSW, CYC-P Choices Coordinated Care Solutions

Jennifer Vohs, PhD, HSPP Indiana University School of Medicine

Nancy Wever Indiana Juvenile Detention Alternatives Initiative

Jeff Wittman Indiana Department of Education

Educational Outcomes Task Force

Christy Berger, Co-Chair Indiana Department of Education

Melaina Gant, Co-Chair Indiana Department of Child Services

Melissa Ambre Indiana Department of Education

Mary Beth Buzzard Indiana Department of Correction, Division of Youth Services

William Colteryahn Family and Social Services Administration

Bethany Ecklor FSSA/Division of Mental Health and Addiction

Rebekah Gorrell Mental Health America of Indiana

Derek Grubbs Indiana Department of Correction, Division of Youth Services

JauNae Hanger Children's Policy and Law Initiative of Indiana

Jill Johnson Marion County Public Defender Agency Susan Lightfoot Henry County Probation

Kristen Martin Marion County Prosecutor's Office

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Terri Miller, PhD Hamilton Boone Madison Special Services

Brianna Morse Indiana Department of Workforce Development

Theresa Ochoa, PhD Indiana University

Anita Silverman, EdD Transitions Academy

Alison Slatter Indiana Association of Home Educators

Gilbert Smith Indiana Department of Child Services

Sabrena Suggs Independent Mental Health Educator

Child Services Oversight Committee

Representative Wendy Mc-Namara, Chair District 76

Jolene Bracale Department of Education

Leslie Dunn Indiana Office of Court Services

Hon. Dana Kenworthy Grant Superior Court

Michael Moore Indiana Public Defender Council

Sean McCrindle Bashor Children's Home

Senator Mark Messmer District 48

Senator Frank Mrvan District 1

Jim Oliver Indiana Prosecuting Attorneys Council

Representative Melanie Wright District 35

Data-Sharing and Mapping Committee

Tamara Weaver, Co-Chair Office of the Attorney General

Tyler Brown, Co-Chair Management Performance Hub

Christine Reynolds Indiana Criminal Justice Institute

Sirrilla Blackmon FSSA/Division of Mental Health and Addiction

Michael Commons Indiana Office of Court Services

Charlie Geier Indiana Youth Institute

Josie Fasoldt Management Performance Hub

Nikki Ford Indiana Department of Child Services

Jeff Milkey Indiana Department of Education

Josh Ross Department of Correction

Lisa Thompson Office of Judicial Administration, Court Technology

Communications Committee

Kathryn Dolan, Chair Indiana Supreme Court

Courtney Arango Office of the Governor

Dave Bursten Indiana State Police

Mark Carnell Indiana Public Defender Council

Jim Gavin Indiana Family and Social Services Administration

William McCleery Office of the Indiana Attorney General

Gabrielle McLemore Indiana Senate Democrats

Erin Murphy Indiana Department of Child Services Jennifer O'Malley Indiana State Department of Health

Zach Osowski Indiana Prosecuting Attorneys Council

Holly Stachler Indiana Department of Education

Will Wingfield Indiana Criminal Justice Institute

Equity, Inclusion and Cultural Competence Committee

Brenda Graves-Croom, Co-Chair FSSA/Division of Mental Health and Addiction

Jane Seigel, Co-Chair Indiana Office of Court Services

Kenneth Allen Indiana Youth Services Association

Rhonda Bayless Center of Wellness for Urban Women

Yalonda Brown Indiana Youth Institute

Kristan Sievers-Coffer Indiana Department of Education

Valerie Davidson Meridian Diversity Consulting

Jill English Child Advocates

Elonda Ervin Indiana State University

Carol Franklin Phoenix Family and Community Services

Stephen Gill United Way of LaPorte County

Timike Jones Indiana Coalition Against Domestic Violence

Esther Lewis

Whitney McKim Ireland Home Based Services Chris Paulsen Indiana Youth Group

Shirley Payne Indiana State Department of Health

Lun Pieper Indiana Office of Court Services

Adam Pitt Indiana Department of Education

Josh Riddick Central Indiana Community Foundation

Calvin Roberson Indiana Minority Health Coalition

Mark Russell Indianapolis Urban League

Dolly Serrant Indiana Commission on Hispanic/Latino Affairs

Dennine Smith Indiana State Department of Health

Jessica Strong Hamilton Center

Tashi Teuchsler Indiana Office of Court Services

Latrece Thompson Indiana Department of Child Services

MeLissa Williams Indiana Native American Indian Affairs Commission



INFORMATION SHARING GUIDE

This mobile app summarizes how specific types of information about children and families can be shared between professionals, which parties can share this information, and who can receive the information.

WHAT PEOPLE SAY...

"It is helpful to have information that is both readily available and easy to understand."

> – Amy Tempel Dubois County

"[The app] eliminates the concern for sharing of confidential information with our community stakeholders. It is very easy to use and navigate."

> – Jessica Richardson Spencer County



Clockwise from top left: Bernice Corley asks a question at a Commission meeting; Chief Justice Rush opens a screening of the film "Foster"; Dr. Jennifer Walthall takes notes; Charlie Geier of Indiana Youth Institute presents data on disparities in child well-being.





STRATEGIC PRIORITY

Child Safety & Services

GOAL

Support the well-being of Hoosier children by promoting a continuum of prevention and protection services for vulnerable youth and families.

OBJECTIVES

- **1.1** Support efforts to prevent child abuse and neglect
- **1.2** Support efforts to ensure the safety of children in state care
- **1.3** Promote programs and services that support older youth with successful transition to independence
- **1.5** Study and evaluate barriers to receipt of Medicaid for prevention, early intervention, and treatment
- **1.6** Promote an improved understanding of the impact of trauma on children and youth and the efficacy of trauma-informed practice
- **1.7** Coordinate and communicate child safety efforts with Indiana Perinatal Quality Improvement Collaborative (IPQIC)
- **1.8** Coordinate with the Indiana State Suicide Prevention Advisory Council

Data

Nationally, one in five youth who age out of the foster care system becomes homeless, and just half are employed at the age of 24.¹

Why it matters

Once the State takes responsibility for a child, that child should be better off for the contact. It is incumbent on state systems that serve children to do all they can to prevent children from needing government intervention in the first place, to ensure their safety while they are in state care, and to prepare them to live healthy adult lives, including caring for their own children in the future.

Progress

Over the past year, the Task Force has:

- submitted a report on existing prevention services throughout the state
- > proposed ways to increase awareness of available prevention services
- studied ways to increase Indiana's rate of developmental screening in young children
- worked with the Division of Mental Health and Addiction (DMHA) to develop content related to trauma-informed care for a state website

¹ Jim Casey Youth Opportunities Initiative. (2013). Toolkit for Jim Casey Youth Opportunities Initiative Sites, p. 4. Retrieved from http://www.aecf.org/m/resourcedoc/aecf-JimCaseyInitiativeToolkit.pdf, archived at https://perma.cc/5GSH-Z2HV

Highlights

In August 2018, the Commission heard a presentation on the benefits of independent living services and other supports for older foster youth. A former foster youth, who is currently in college, described youths' needs for adult support and guidance and presented data on the extent to which general population youth in their early twenties rely on their parents for different types of support. As a result of the presentation, the Commission voted to endorse the extension of supportive services to older foster youth through the age of 23. Following the Commission's action, and in keeping with a similar recommendation made by the Child Welfare Policy and Practice Group, DCS extended eligibility for the John H. Chafee Foster Care Independence Program to age 23, and the Indiana General Assembly extended the age of eligibility for the Collaborative Care program to 21.



Joshua Christian, foster youth advocate, and Brent Kent of Fostering Success, present to the Commission on the importance of support for older foster youth.

1 in 5 youth who age out of the foster care system becomes homeless

The Child Trauma and Resilience Subcommittee received information about a train-the-trainer opportunity through Northwestern University to deliver a research-based curriculum on trauma to professionals in the juvenile justice system. The Subcommittee drafted a list of potential trainers and supervisors from the various components of Indiana's juvenile justice system and worked with Northwestern to host the first Midwest regional training event in Indianapolis, which was followed by two additional workshops in other states and a series of calls among those being trained. Indiana now has a cadre of ten trainers qualified to educate juvenile justice stakeholders on the impact of trauma on the children in the system and ways to make systems more responsive to that trauma.

The Child Abuse Prevention Subcommittee recommended that the Commission develop a statewide framework on the prevention of child maltreatment. Indiana has many disparate abuse prevention efforts, but no centralized coordination of those efforts, nor a single leading agency. The Commission agreed that the work of prevention needs to include many state agencies, local service providers, partners, and families, and that these efforts should be locally informed and coordinated at the state level. At its May 2019 meeting, the Commission adopted the recommendation to create a statewide framework for the prevention of child maltreatment; DCS offered to fund the work. This project will take place over the next one to two years.

STRATEGIC PRIORITY

Juvenile Justice & Cross-System Youth

GOAL

Promote interagency communication and collaboration to improve prevention and outcomes, and to address the unique and complex needs of juvenile justice and/or cross-system involved youth.

OBJECTIVES

- **2.1** Advocate for increased availability of and access to emergency shelter care and alternative therapeutic placements
- **2.2** Support the enhancement of services across the spectrum (in-home and residential)
- **2.3** Support efforts to decrease youth violence, including assessing the root causes of youth involved in violent crimes and/or crime involving weapons
- 2.4 Study and make recommendations on services to address the complex needs of runaway children and missing children
- 2.5 Study and evaluate whether "status offenders" should be removed from Delinquency code and moved to CHINS code in collaboration with Child Safety & Services Task Force
- **2.6** Support funding for innovative youth programming through expansion and increased funding of the Justice Reinvestment Advisory Council
- 2.7 Support the ongoing efforts of the Commercially Sexually Exploited Children (CSEC) workgroup in addressing the identification of exploited juveniles and the coordination of services related to juvenile victims of human trafficking

Data

In 2018, there were 11,936 juvenile delinquency cases and 3,638 status offense cases filed in Indiana.²

Why it matters

While juvenile case filings have been steadily declining for years, youth of color are still disproportionately represented within the justice system. Community-based solutions have been shown to have better results than secure confinement for most youth, and Indiana needs to continue developing such evidence-based solutions for all children.

Progress

Over the past year, the Task Force has:

- studied the definition of "youth violence," including data indicators and risk and protective factors for committing violent acts
- set up a subcommittee to study the need and availability for emergency shelter care facilities and assessment centers
- studied available data on child trafficking cases known to DCS and the courts' responses

2 Indiana Supreme Court (2019). Indiana Trial Court Statistics by County, retrieved from https://public.courts.in.gov/ICOR/. Archived at https://perma.cc/9BDT-2TNZ



Senator Breaux seeks clarification from a presenter while Christine Blessinger looks on.

11,936 juvenile delinquency cases filed in Indiana in 2018

Highlights

The Commercially Sexually Exploited Children Subcommittee undertook a study, requested in HEA 1270-2018, of "what specific authority a law enforcement officer has in order to take custody of or detain a child in certain situations where the officer believes a child may be a victim of human trafficking and who is potentially a child in need of services." The Subcommittee collaborated with local, state, and federal law enforcement, state agencies, and service providers to research and respond to the question. The Subcommittee's report and recommendations were unanimously adopted by both the Task Force and the Children's Commission and were provided to the General Assembly according to statute. The report can be found on the Children's Commission website.

The process of studying law enforcement's response to young victims of human trafficking led to the recommendation of additional study topics, including interstate recovery of youth victims, the need for and capacity to provide shelter care regionally throughout the state, and the appropriateness and necessity of requiring that children admit or deny having been trafficked during the initial hearing in a CHINS proceeding. Additionally, in HEA 1075-2019 the Children's Commission was asked to study the possibility of DCS hiring a child trafficking coordinator, including the responsibilities of such a position and its relationship to other state and local partners working on issues of child trafficking. The Subcommittee and the Task Force are currently studying these questions.

STRATEGIC PRIORITY

Mental Health & Substance Abuse

GOAL

Support creative and effective methods of improving assessment, access to treatment, and wrap-around resources for vulnerable youth and households in need of mental health and substance abuse services.

OBJECTIVES

- **3.1** Explore policy change to promote integration of behavioral health and primary care for children
- **3.2** Identify and promote evidence-based and other effective supports and services that reduce youth mental health issues and substance abuse
- **3.3** Support effective alternative locations, modalities and treatments for substance abuse and mental health services
- **3.4** Support efforts to increase the number of mental health and substance abuse providers; improve service coordination to simplify delivery of services for children and their families
- **3.5** Support development of models to identify youth at-risk for substance abuse and mental health issues
- **3.6** Engage with Governor's Commission to Combat Drug Abuse to address issues of children's use of prescription drugs and children being raised by parents suffering from addiction
- **3.7** Support efforts to ensure access to care/treatment for youth and parents with substance abuse issues, including inpatient, outpatient, and rural coverage as well as services for youth after release from JJ/DYS

Data

In 2017, parent drug and/or alcohol abuse was a factor in 63.8% of cases where children were removed from their homes, up from 50.9% in $2013.^3$

Why it matters

When parents struggle with substance use and mental health disorders, children are at risk of both imminent harm and long-term problems with their own health. Indiana continues to struggle with access, availability, and quality of mental health and substance abuse services to children and families.

Progress

Over the past year, the Task Force has:

- studied ways to expand the workforce of qualified mental health and substance abuse treatment providers
- studied models for integrating behavioral health and primary care for children, including barriers to broader implementation
- > examined models for mobile crisis response
- worked to identify ways to expand the use of evidence-based practices in Indiana

3 Indiana Youth Institute (2019). 2019 Indiana KIDS COUNT Data Book: A Profile of Hoosier Youth, p. 18. Retrieved from https://s3.amazonaws.com/iyi-website/data-book/2019+Data+book+/2019_IYI_Databook_022619.pdf. Archived at https://perma.cc/TK9P-VYYM

Highlights

In August 2018, the Children's Commission heard a presentation from the Indiana Office of Court Services (IOCS) and DCS on family recovery courts. These are innovative problem-solving courts that target cases of abuse or neglect wherein the parent or primary caregiver suffers from a substance use disorder. These courts use a team-oriented approach led by a judge to provide the parent or caregiver treatment, using incentives to increase desirable behavior and graduated sanctions to hold parents/caregivers accountable. The goals are safer environments for children, family reunification, and decreased out-of-home placement time for children in the child welfare system. Thanks to collaboration among the Indiana Supreme Court, DCS, and the Governor's Office, Indiana expanded from seven certified family recovery courts at the beginning of Fiscal Year 2019 to eleven by the end of the fiscal year, with eight more in the planning stages and four in pre-planning.

In December 2018, the Commission heard a presentation on the Indiana Commission to Combat Drug Abuse's Drug Data Working Group. The purpose of this presentation was two-fold: to educate state leaders on the work being done across agencies to



Top: Sirrilla Blackmon of DMHA describes child mental health efforts while Julie Whitman listens. **Bottom:** Jennifer Tackitt-Dorfmeyer, David Reed, and Dr. Leslie Hulvershorn present to the Commission on mobile response for youth mental health crises.

Almost 64% of cases where children are removed from their homes involve drugs and/or alcohol

combat the opioid crisis—which has a large impact on children through their parents—and to illustrate the possibilities for data-driven problem solving when agencies collaborate to share data through the Management Performance Hub (MPH). The Children's Commission continues to work with MPH to lead its Data Sharing and Mapping Committee and provide data to answer questions about child wellbeing across state systems. For children whose own mental health condition presents a need for intensive services, the Division of Mental Health and Addiction (DMHA) recently opened the Neurodiagnostic Institute (NDI) on the campus of Community Hospital East. The Children's Commission heard a presentation on the NDI at its February 2019 meeting. All members of the Commission were educated on the state's capacity to serve children with mental health conditions and circumstances requiring short- to medium-term hospitalization, including children with autism.

STRATEGIC PRIORITY Educational Outcomes

GOAL

Promote interagency collaboration to better connect vulnerable youth with appropriate education and career pathways that lead to successful completion of high school or equivalency, post-secondary education, job certification, and sustainable employment.

OBJECTIVES

- 4.1 Explore models to develop an "educational passport" to provide a comprehensive understanding of the educational history of vulnerable children and youth when they move from place to place and school to school
- 4.2 Advocate for additional and improved services integrated in schools to address mental health and wellness
- 4.3 Recommend methods to incentivize schools to help vulnerable youth complete high school
- **4.4** Recommend strategies for promoting a positive learning climate for all students to address disproportionality in school discipline practices and to stop the tide of bullying
- **4.5** Support efforts to develop alternative educational options and resources for youth not able to survive/thrive in a traditional school setting
- **4.6** Study and report on the graduation rate of vulnerable youth
- 4.7 Study and report where youth coming out of the juvenile justice system and/or cross-system youth are being educated

Data

Indiana employs one licensed school counselor for every 559 students.⁴ The American School Counselor Association recommends a ratio of one counselor for every 250 students.

Why it matters

Children bring their whole selves to school, and many carry the weight of poverty, trauma, and other issues that interfere with their learning. Schools need resources-including personnel, training, programs and policies-that can help maximize their ability to hold students to high academic expectations while supporting their social and emotional needs.

Progress

Over the past year, the Task Force has:

- > completed a study of youth educational transitions in and out of juvenile justice settings and proposed best practices for transition planning and information-sharing models to study further
- > received and presented data to the Commission on the educational outcomes of foster youth and homeless youth
- > worked with IDOE on a report of positive discipline practices schools can use to promote an effective learning climate and reduce the use of exclusionary discipline

4 Indiana Youth Institute (2019). 2019 Indiana KIDS COUNT Data Book: A Profile of Hoosier Youth, p. 76. Retrieved from https://s3.amazonaws.com/iyi-website/data-book/2019+Data+book+/2019_IYI_Databook_022619.pdf. Archived at https://perma.cc/TK9P-VYYM



Tami Silverman of the Indiana Youth Institute presents the 2019 Indiana KIDS Count Data Book.

1 to 559

Twice as many students per counselor as recommended by experts

Highlights

The Mental Health Services in Schools Subcommittee concluded its study of data indicating children's needs for social-emotional support and mental health services in school, effective models for delivering services in schools, and the infrastructure and training needed to implement such models. In August 2018, the Commission heard a presentation on these topics and approved the recommendation that each school district in Indiana should designate personnel to facilitate and oversee the integration of Social Emotional Learning (SEL) and mental health in schools. Following up on this recommendation, the Task Force went back to work and created a guidance document for school districts, which the Commission approved at its December 2018 meeting. The document detailed suggested areas of oversight, qualifications, experience and education for the designated district personnel in charge of SEL and mental health. The document also provided suggested avenues for funding the position that might be available to school districts, including federal, state, and private funds.

COMMITTEES

Child Services Oversight

CHARGE

- Review bi-annual data reports from DCS
- Review annual reports from the DCS ombudsman
- > Make recommendations to the Commission

Highlights

The Interim Committee on Courts and the Judiciary tasked the Child Services Oversight Committee with analyzing the change from contracting with outside attorneys to hiring in-house attorneys to serve as DCS legal counsel. Informed by a survey of judicial officers, defense attorneys, and Court Appointed Special Advocates, the Child Services Oversight Committee submitted its report on this topic to the Legislative Council in January 2019. The report can be found on the Children's Commission website.

The Committee met on May 29, 2019 and received a progress report from DCS on the implementation of the recommendations of the Child Welfare Policy and Practice Group's evaluation of the agency released in June 2018 as well as a snapshot of CHINS cases initiated, pending, and completed over the past 5 years.

Communications

CHARGE

- Develop processes for improved information sharing among Commission members and between Commission members and their agencies
- Promote the work of the Commission through the media and other outlets
- Identify ways for the Commission to access reports of other organizations doing work in similar areas
- Respond to assignments from the Executive Committee and/or Task Forces
- Work with Commission staff to develop and disseminate the annual report

Highlights

The Committee continued its mission of promoting the work of the Commission. By meeting in person six times—in addition to the Commission meetings—members were able to discuss and cross promote child-centered issues such as the 211 free ride program, the opening of FSSA's NeuroDiagnostic Institute, IYI's State of the Child, and the importance of trauma training.

The in.gov/children website was updated, the Committee helped the Executive Director maintain a media list, encouraged the Director's outreach to press, took photographs at every Commission meeting, and provided guidance on the promotion of the CDC's Youth Risk Behavior Survey (which was directed to 48 Indiana schools).

Equity, Inclusion & Cultural Competence

CHARGE

Ensure cultural competence, equity, and inclusion are demonstrated in the work of the Commission and its Task Forces and Committees by:

- > Agreeing upon definitions of terms
- Researching existing frameworks and tools for integrating an equity and cultural competence lens into public policy work
- Proposing a framework and tools for the Commission and its Task Forces and Committees to use to ensure an equity and cultural competence lens is applied to each objective and all recommendations

Highlights

This Committee was formed in early 2019, after presentations to the Commission on disparities in child wellbeing across Indiana and the meaning and importance of the concepts of equity, inclusion, and cultural competence when working with youth and families. The Committee held its first meeting in February 2019 and has continued to meet monthly since that time.

The Committee is working toward developing a set of agreed-upon terms and definitions; a catalog of curricula, trainings, and trainers on topics including and related to equity, inclusion, and cultural competence; and a framework and tools for the Commission to use to ensure that the Commission's work has maximum benefit for each Indiana child and all groups of children.

Data Sharing & Mapping

CHARGE

- Review the Commission strategic plan and work with task forces to provide data sharing & mapping services needed to implement the objectives of the strategic plan
- Respond to assignments from the Executive Committee and/or Task Forces

Highlights

The Indiana Information Sharing Guide—a legal white paper and mobile app for child-serving professionals seeking legal guidance on appropriate record sharing—has reached more than 3,500 users who initiated more than 60,000 interactions.

The Committee worked with FSSA's Office of Medicaid Policy & Planning and the Commission to identify data-sharing use cases that could help advance the Commission's strategic priorities. These use cases were presented to Commission members and prioritized. The Data Sharing and Mapping Committee explored which datasets could be leveraged to answer these use cases.



Commission meetings are open to the public and attract attendance from youth advocates, state employees, and members of the media.

Looking Ahead...

Building on the incredible work of more than 170 volunteers and guided by its strategic plan, the Commission intends to keep pushing forward to make a positive impact on Indiana's most vulnerable children, youth, and families. Over the coming year, the Commission expects to tackle the following issues, among others:

- > Updating its strategic plan to reflect feedback from the community, Commission members, and volunteers
- > Developing a statewide framework for the prevention of child maltreatment and a toolkit to support local community prevention efforts
- Studying the need for and capacity to provide emergency shelter care for child victims of trafficking and others
- > Identifying barriers and solutions to challenges in the provision of mental health and substance use disorder services for children and families
- > Increasing the school engagement of vulnerable youth

A proverb states, "If you want to go fast, go alone. If you want to go far, go with others." The Children's Commission intends to go as far as our vision and efforts will carry us while including all those with a vested interest in improving the status of our Hoosier children. Come along for the journey!



Commission on Improving the Status of Children in Indiana

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