

Damage Done:

The Impact of the Illinois Budget Stalemate on Women and Children



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for women

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Damage Done - Executive Summary

The State of Illinois finally ended more than two years without a complete state budget on July 6, 2017, when the Illinois House of Representatives voted to override vetoes by the Governor. Elected officials should be commended for acting. However, lasting damage to the social service infrastructure will make serving people, especially women and children, much harder in the years to come.

Even with the passage of a budget, Illinois accumulated a backlog of bills totaling \$14.7 billion with expected late payment interest costs of approximately \$800 million. It will take years to work through the backlog of bills. For services funded, providers had to wait, on average, eight months for payment of services as the state ended Fiscal Year 2017.¹

This report summarizes the background of the budget stalemate and its effect on women and children to show the importance of consistent funding for the state safety net. The report demonstrates that women's issues include not only access to reproductive health, but also access to affordable child care, housing availability, parent engagement, affordable healthcare, and higher education. These issues impact two generations (women and their children) and affect the lives of all Illinoisans.

Low-income women and their families are among the hardest hit by the reduction in social services caused by the Illinois budget crisis. Women and families headed by single mothers are more likely to live in poverty. Women of color and their families are especially at risk because Black and Hispanic populations in Illinois live in poverty at greater rates than their White counterparts.² The Illinois budget impasse created lasting damage to the delivery of necessary services to low-income women and their families in the key areas listed below.

1. Home visiting services provide young mothers with support through regular visits with a trained professional. **The State did not appropriate funding for home visiting services for FY16 until the last day of the fiscal year, and service providers did not receive payment until much later.** Now, nearly 60 percent of more than 40 home visiting programs surveyed by the Ounce of Prevention indicated staff layoffs, salary cuts, and reductions in the number of families served.
2. Child care assistance programs provide subsidies for quality, affordable child care for low-income families. **Because of changes in eligibility for child care assistance in effect during the budget impasse, 30,000 fewer children were receiving child care than in June 2015.**³
3. More than 75,000 Illinois women between the ages of 40 and 64 are eligible for preventative screenings under the Illinois Breast and Cervical Cancer Program funded through the Illinois Department of Public Health.⁴ Due to the state budget impasse, local agencies providing these

¹ Illinois Comptroller's Office, interview by author, written notes, Chicago, IL, June 12, 2017.

² J. Tucker & C. Lowell, "National Snapshot: Poverty Among Women and Families 2105," National Women's Law Center, September 14, 2016, <https://nwlc.org/resources/national-snapshot-poverty-among-women-families-2015/>.

³ "Policy Brief: Loss of Child Care Due to 2015 Cuts Limits Parents Pursuit of Education and Training," Illinois Action for Children, February, 2017. http://www.actforchildren.org/wp-content/uploads/2017/02/Policy_Brief_Feb_2017_Restore-Child-Care.pdf.

⁴ "2017 IBCCP Fact Sheet," Illinois Public Health Association, 2017, <https://ipha.com/content/uploads/2017%20IBCCP%20fact%20sheet%20w%20logos.pub.pdf>.

services reduced hours and services and/or took on long waitlists. **Per the Department of Public Health, 34 percent fewer women were served by local IBCCP agencies in FY16 compared to FY15.**⁵

4. College access in Illinois is supported by the Monetary Award Program (MAP), which provides grants to low-income students. **At the outset of FY17, there was no appropriation for MAP grants.** Prior to FY17, there was a 10 percent reduction in MAP expenditures from FY15 to FY16. Nationally, women are the disproportionate bearers of student debt (two-thirds of the student debt).⁶
5. **The last stopgap funding bill contained no FY17 general revenue funds for domestic violence shelters and prevention services. In 2016, more than 3,600 adults and 4,200 children seeking shelter because of domestic violence were turned away.** The recently approved budget includes funding for FY17 as well as FY18. It will take time to restore those services cut during the impasse. Meanwhile, there will be women and children still in need of these emergency services.
6. Despite the incorporation of funding for Home Delivered Meals for seniors into an existing court order (after a delay in funding due to the budget impasse), Home Delivered Meals programs reported reductions in the number of meals provided and hot meals delivered. **One agency that previously served 650 meals a day to 22 townships now serves only 400 to 450 meals a day.**⁷
7. Illinois programs providing homeless prevention services, shelter-finding support, and wrap-around services had to lay off staff and increase caseloads for case managers. **A survey by the Chicago Coalition for the Homeless showed that 90 percent of homeless service providers were forced to limit intake of new clients, reduce, or eliminate services for current clients, lay off staff, implement furlough days or reduced work hours for staff, eliminate programs, and/or close sites.**

Lurking in the background of the state's budget crisis are **federal threats to state Medicaid funding that could cost Illinois \$40 billion over ten years**⁸. Medicaid currently covers 17 percent of Illinois women,⁹ a large percentage of whom are women of color (On Medicaid, 28 percent are Black and 26 percent are Hispanic¹⁰). The program provides services that include preventative screenings, maternal health and long-term care affecting senior women including nursing home care.

A state budget reflects Illinois' priorities. When human service providers lose access to much needed funding, women and their children lose opportunities to live financially stable, healthy and independent lives. Illinois' policymakers must ensure funding is available for the social safety net and vigorously defend Illinois women and children from federal threats to Medicaid. In doing so, they will ensure that women and children have the same opportunity as everyone else to access healthy, successful, and independent lives for themselves and their children.

⁵ Expenses for breast & cervical cancer screenings, minority outreach, other related activities now funded at 5,589,100 for FY17 and 13,512,400 for FY18.

⁶ "Women's Student Debt Crisis in the United States," American Association of University Women, 2017, <http://www.aauw.org/research/deeper-in-debt/>.

⁷ Senior Services Plus, interview by author, written notes, Chicago, IL, June, 2017.

⁸ Kiannah Sepeda-Miller, "Illinois Could Lose \$40 Billion in Federal Medicaid Support," *U.S. News & World Report*, March 16, 2017, <https://www.usnews.com/news/best-states/illinois/articles/2017-03-16/illinois-lawmakers-plan-hearing-to-evaluate-medicaid-changes>.

⁹ "Facts About Domestic Violence," Illinois Department of Public Health, last accessed July 17, 2017, <http://www.idph.state.il.us/about/womenshealth/factsheets/dv.htm>.

¹⁰ "February 2017: Medicaid & CHIP December 2016 Application, Eligibility, And Enrollment Data," February 2017, <https://www.medicaid.gov/medicaid/program-information/downloads/updated-december-2016-enrollment-data.pdf>.

Introduction

On July 6th, with action by the Illinois House to override a set of vetoes by the Governor, the state of Illinois adopted a complete state budget - something it did not have for more than two years. During this time, the state limped along with a combination of partial appropriation measures, continuing appropriations mandated by statutes, and court orders. In many cases, human service providers and others who signed contracts with the state at the beginning of a fiscal year (whether Fiscal Year 2016 or Fiscal Year 2017) continued to provide services even though there were no appropriations authority for them. The net effect was that the state spent billions of dollars more than it took in and the number of outstanding bills mounted. At the beginning of this month, the state had a bill backlog of more than \$14.7 billion with expected late payment interest costs totaling \$800 million.

Without a budget plan in place, credit rating agencies lowered the state's bond rating to one step above junk status. The Higher Learning Commission threatened to remove the accreditation of state universities without a budget plan in place. The Illinois Comptroller indicated she might not have enough funds on hand in August of this year to pay for essential state operations.

When the budget impasse began in 2015, the state already had a bill backlog of approximately \$4.5 billion. With each passing month that the stalemate lasted and the bills mounted, providers had to wait longer for payment, assuming there was appropriations authority for payment. Some survived by raising private funds or using other non-state funds. Others took out loans or secured a line of credit. Such measures only added to operational costs because of the accompanying interest. Many providers chose to lay-off staff or close their doors altogether. Those actions translated to fewer services for some of the state's residents most in need of them.

While the freefall may have stopped, the damage has been done. In most cases, the budget situation hit the poor the hardest. Nationally, all women are more likely than White, non-Hispanic men to live in poverty, and, older women are more likely to be poor than older men.¹¹ Illinois census statistics show the state's Black and Hispanic populations in poverty at greater rates than the state's White population. In addition, the poverty rate for Illinois children in single female-headed households is 48 percent — as compared to 26 percent for those in single male-headed households.¹²

To examine the impact of the budget stalemate on women (particularly women in vulnerable and marginalized communities) in the state of Illinois, the Chicago Foundation for Women, the Center for Urban Research and Learning at Loyola University Chicago (CURL) and Voices for Illinois Children focused on the areas of: home-visiting, child care, women's health (with a focus on breast and cervical health), college access, domestic violence, senior women (with a focus on home-delivered meals), and housing.

While some of these areas lacked funds during the budget impasse and now have an appropriation, it will still take time to get through the bill backlog. In addition, some providers may choose not to restore services. Yet, the need for those services will not be any less. Other threats loom on the horizon with potential federal budget cuts and changes to Medicaid. Illinois policymakers will need to continue to look at how to consistently fund human services to meet the service needs, rebuild the state's human services network, and meet the financial challenges that still exist to delivering those services.

¹¹ Jasmine Tucker & Caitlin Lowell, "National Snapshot: Poverty Among Women & Families, 2015," September 14, 2016, <https://nwlc.org/resources/national-snapshot-poverty-among-women-families-2015/>.

¹² Maureen Foertsch McKinney, "Illinois Issues: Why Are Women Poor?," *NPR Illinois*, July 16, 2015, <http://nprillinois.org/post/illinois-issues-why-are-women-poor>.

The 'state' of Illinois: Financial Condition

After more than two years, Illinois finally has a complete state budget after action in the Illinois House on July 6th completed a set of veto overrides.

While the adoption of a budget provides the funding and blueprint for FY18, left behind is a mountain of bills topping \$14.7 billion as of this writing. In addition, the state will pay approximately \$800 million or more in interest on those bills that occurs under state statute for late payment.



Chicago Tribune

Even with a state budget that includes provisions to borrow funds to pay a portion of the outstanding bills, Illinois Comptroller Susanna Mendoza stated after adoption of the budget that it will still take years to fully pay off the bill backlog.¹³

The Impasse

The state entered FY15 with a bill backlog of approximately \$4.6 billion. However, the state's temporary income tax increase expired in the middle of that fiscal year with the individual rate reduced from 5 percent to 3.75 percent and the corporate income tax rate reduced from 7 percent to 5.25 percent.¹⁴

While the legislature and governor's office agreed on a way to finish FY15 with fund transfers and budget cuts, they failed to agree on a full budget for FY16. Consequently:

- State employees ordered to work sought a court state order requiring the State Comptroller to pay them in the absence of a budget.
- Other parties went to federal court to seek the enforcement of consent decrees or to secure new court orders requiring the payment of Medicaid and other human services. In fact, with all of the provisions described, the Illinois Department of Human Services made more than \$3.4 billion dollars in expenditures in FY17 absent enacted appropriations.¹⁵
- Statutes requiring automatic transfers in the absence of a budget kicked in covering items such as debt service, pension payments, and transfer of funds to local governments.

The legislature did approve a budget for elementary and secondary education as well as legislation allowing the flow of federal funds and non-general revenue funds in FY 16. However, many non-mandated human services remained unfunded until the end of the fiscal year when the legislature approved a "stop-gap" measure that backfilled some of the appropriations for FY 16. This measure also contained education funding (PreK-12) for FY 17 and some FY 17 funding for human services and higher education (but only up to December 31, 2016). It did not contain any money for the college grant program (Monetary Award Program) that provides college assistance to low and moderate-income students.

¹³ Susana A. Mendoza, "Comptroller Mendoza Thanks Legislators for their Bipartisan Vote to pass a Budget," press release from the Office of the Comptroller, July 6, 2017, <https://illinoiscomptroller.gov/news-portal/comptroller-mendoza-thanks-legislators-for-their-bipartisan-vote-to-pass-a-budget/#.WXIYnITytpg>.

¹⁴ The recently approved budget increases the individual income tax rate to 4.95 percent and the corporate income tax rate to 7 percent.

¹⁵ Illinois Department of Human Services.

More spending than revenue

With these measures taken together (court orders, automatic transfers, and approved appropriations), the state spent billions more in fiscal years 2016 and 2017 than it took in. In FY17 alone, Illinois spent approximately \$6.2 billion more than it received in revenue. The result is a large backlog of bills.

Mounting bill backlog and waits

Human service providers and other vendors delivering goods and services to the state have waited months to get paid. As the stack of bills grew during the last two years, the wait became longer. During the impasse when there weren't appropriations for certain services, various providers who had signed contracts with the state continued to deliver on their contracts.

Some providers were able to continue operations by utilizing federal funds, non-general state funds, or private donations to continue operating. Others secured loans or lines of credit and, in doing so, incurring interest costs. However, the longer the budget stalemate continued the more difficult it became for many providers to get an extended line of credit or new loan. Given the level of the bill backlog, this circumstance could continue even with a budget in place.

Other providers found the only answer to deal with payment delays or funding cuts was to reduce staffing levels or discontinue providing the programs. Per the Illinois Association of Behavioral Health, the budget crisis resulted in layoffs of more than 1,000 people at various agencies delivering mental health and drug abuse treatment services.¹⁶

Reimbursement Rates

The budget situation was compounded by the fact that during the two-year impasse while the provision of Medicaid services occurred under a court order, *Memisovski v. Maram*. That court order also set reimbursement at 2015 rates.¹⁷ As of this writing, Medicaid reimbursement rates under the new budget remain at 2015 levels.

In a 2016 report on Illinois human services reimbursement rates, Illinois Partners for Human Service found that since the year 2000 reimbursement rates for services covering substance abuse treatment, comprehensive care coordination for older adults, early intervention and developmental disabilities residential support (among other services) did not keep pace with the rate of inflation.¹⁸ As a result of the stagnant rates:

- Service providers had trouble recruiting and retaining staff due to low wages and rising costs of healthcare benefits.
- Managers at service provider organizations needed to spend additional time and resources training new staff.
- Workers tasked with carrying large caseloads led to burnout and staff turnover.

¹⁶ Dean Olsen, "Illinois hospitals, human-service providers relieved after budget approved", *Peoria Journal Star*, July 6, 2017, <http://www.pjstar.com/news/20170706/illinois-hospitals-human-service-providers-relieved-after-budget-approved>.

¹⁷ Emergency Motion to enforce *Memisovski v. Maram* and *Beeks v. Bradley*, July 24, 2015, <http://www.ihatoday.org/uploadDocs/1/beeksmemisovski9-3-15order.pdf>.

¹⁸ Annie McGowan, "Failing to Keep Pace: An Analysis of the Declining Value of Illinois Human Services Reimbursement Rates", Illinois Partners for Human Services, February 2016, http://www.everthriveil.org/sites/default/files/docs/pr/ILPHS_Report.pdf.

- Staff vacancies limited the number of people receiving services, contributed to long waiting lists for service, and limited choices of individuals seeking services.



The recently approved budget did include rate increases for personal assistants and individual maintenance home health workers, those working with individuals with developmental disabilities, and community-based addiction treatment services. Cuts made to the Department of Human Services' budget were largely made to agency operational lines. Yet even with a budget, continued payment delays may delay the rehiring of staff or the hiring of new staff with the accompanying training.

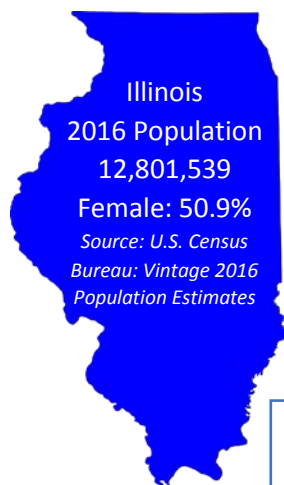
The budget numbers

For each section of this paper, Voices has provided the historical budget information. Readers will note categories in a given year for an appropriation and actual expenditure. Where actual expenditures exceed appropriations, they are in part accounted for by court orders. Court orders served as the appropriation authority for the service and therefore are not reflected in any appropriation measure approved by the General Assembly.

The recently adopted state budget includes line items for the remainder of FY17 as well as FY18. In some cases, even with a new appropriation for FY17, the total appropriations for FY17 (prior and the recently adopted budget) may still appear less than estimated expenditures due to court orders. In some cases, the appropriated funds for FY17 may fall below the cost for services for providers.

Low-Income Women and their Families

The state's most vulnerable communities, which include low-income women of color, their children and their families, are bearing the burden of the recently ended state budget impasse.



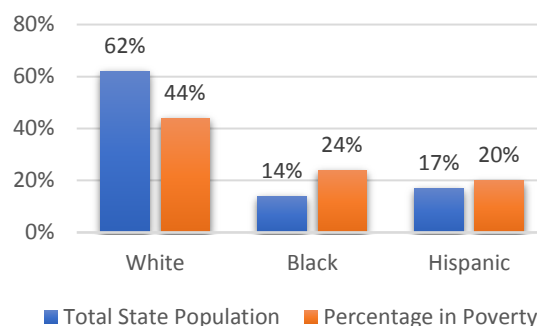
Persons in poverty (2015) - Illinois:
13.6 %

The U.S. Census Bureau's poverty threshold for a family with two adults and one child was \$19,078 in 2015.

Table 2: Children Living in Poverty in Illinois by Race and Ethnicity

Source: KIDS COUNT Data

Table 1: Percentage in Illinois' Population versus Percentage in Poverty



Source: U.S. Census Bureau

Illinois		Percentage by Category						
	Year	IL Average	African American	Native American	Asian	Latino	White	Two or More
Children in Poverty	2015	19%	39%	NA	11%	27%	10%	20%

Although women represent half of the workforce, they are disproportionately represented in low-wage jobs, with 33.6 percent of Black women and 44.3 percent of Hispanic women earning below \$12 an hour.²⁰

A rapidly growing demographic is the state's 60+ group which, by 2030, is projected to comprise 24 percent of Illinois' population.²¹ Women make up more than half of this population and as the population grows older, women represent a larger percentage of the age group.²²

In delving deeper into the impact of a prolonged budget impasse on women, the authors of this paper highlighted the heightened burden on these already marginalized and at-risk communities.

¹⁹ United States Census Bureau, QuickFacts, Illinois, July 1, 2016,

<https://www.census.gov/quickfacts/fact/table/IL,chicagocityillinois/PST045215#viewtop>.

²⁰ "Few Rewards," Oxfam America, <https://policy-practice.oxfamamerica.org/work/poverty-in-the-us/low-wage-map/scprecard/?state=IL>.

²¹ Ibid.

²² "State Plan on Aging for FY2017-FY2019," Illinois Department on Aging,

<https://www.illinois.gov/aging/Documents/FY17%20FY19%20State%20Plan%20PID%20Final.pdf>.

Home Visiting

Home visiting provides family support and coaching through planned, regular visits with a trained professional based on a family's needs and schedules.

Home visitors work with parents on practical parenting skills as well as family bonding before birth and as children grow up.

Home visiting programs funded through the Healthy Families Illinois (HFI) and Parents Too Soon (PTS) budget lines in the Department of Human Services provide services to more than 5,000 Illinois children annually.

The benefits of home visiting to children, families and the state of Illinois include:

- Higher rates of breastfeeding initiation
- Reduced incidences of child abuse and neglect
- Increased rates of immunizations and completion of well-child visits
- Delayed subsequent pregnancies for teen mothers
- Higher rates of high school completion for teen mothers

Twenty-two percent of newly enrolled households in 2016 included pregnant teens.²³ In Illinois, among Black mothers, 40 out of every 1,000 births was a result of a teen pregnancy; among Hispanic mothers, the rate was 30 out of every 1,000 births; and, among White mothers, the rate was 13 out of every 1,000 births.

Because the state did not approve FY16 state funding until the end of the fiscal year, many providers of home visiting services did not receive payment for FY16 services until FY17.

Nearly 60 percent of more than 40 home visiting programs surveyed by the Ounce of Prevention indicated staff layoffs, salary cuts, and reductions in the number of families served.

The impact of the budget impasse and subsequent uncertainty of funding for HFI and PTS programs created a significant disruption in services:

- One downstate program suspended its home visiting services and another has reduced its staff to only one person.²⁴

Rita is a teen mother living in a small town in central Illinois. The home visiting program helped her in “figuring out how to raise a baby” while, as she put it “being a new mom is hard and being a young mom is harder.” The program has been a lifeline for her and her young son, Noah.

Growing up, Rita was disciplined with corporal punishment that bordered on physical abuse. The home visiting program could help her learn and use healthier methods of disciplining and setting boundaries for Noah. Limited by a lack of a car while living in a rural area, the ability of her home visitor to come to her home is especially crucial.

Because of the home visiting program, Rita has hope that Noah can “have a better life” than she had growing up. Because the program is so central to her life, she worries a lot about losing her home visitor because of budget cuts.

“I was terrified I’d be really alone”, she said.

Source: 2016, Stranded by the State

Courtesy of In These Times and Kartemquin Films

²³ “Maternal, Infant, and Early Childhood Home Visiting Program,” The Maternal, Infant, and Early Childhood Home Visiting Program Brief, 2016, <https://mchb.hrsa.gov/sites/default/files/mchb/MaternalChildHealthInitiatives/HomeVisiting/fy2016homevisitinginfographic.pdf>.

²⁴ “Ounce of Prevention State Policy Update: August 2016,” The Ounce of Prevention, August 2016, <https://www.theounce.org/wp-content/uploads/2017/03/Ounce-NPT-State-Policy-Mini-Update-August-2016.pdf>.

- Several programs did not fill empty positions and instituted travel restrictions²⁵ (which would limit access to families residing in neighborhoods without easy access to public transportation).
- In another program, supervisors took a 20 percent pay reduction.²⁶
- Other programs laid off staff and slowed their intake of clients.²⁷

Because Illinois received more than \$40 million in federal Maternal Infant Early Childhood Home Visiting (MIECHV) funds, it is required to maintain its effort on funding for home visitation services in the Healthy Families and Parents Too Soon budget lines.

Illinois' MIECHV grant is also the foundation for the state's eligibility for other important federal grants, such as the Race to the Top-Early Learning Challenge and Preschool Expansion grants.

The newly approved state budget will mitigate the threat of a loss of MIECHV funds; however, it could still be months until the state makes payments for state-funded FY17 services. If home visiting service providers are unable to rehire staff and/or re-establish services, at-risk expecting and new families could face obstacles in achieving healthy and successful futures.

Please refer to Charts 1 and 2 in the Appendix beginning on page 25 for a deeper dive into the funding trends.

²⁵ Ibid.

²⁶ "Ounce of Prevention State Policy Update: August 2016," The Ounce of Prevention, August 2016, <https://www.theounce.org/wp-content/uploads/2017/03/Ounce-NPT-State-Policy-Mini-Update-August-2016.pdf>.

²⁷ Ibid.

Child Care

Child care assistance programs provide subsidies for quality, affordable child care for low-income families.²⁸ In 2015, 102,337 Illinois children received child care assistance.²⁹ Child Care programs in

Jennifer is a mother with a young child living in East St. Louis who makes \$10 an hour working up to 50 hours a week – an income which is still insufficient to pay for all-day daycare for her son. She uses the Child Care Program subsidy in order to afford regular daycare for her child while she is working. The possible reduction in that subsidy due to the budget crisis jeopardizes Jennifer’s and her child’s well-being.

Without the program, “daycare is so expensive” even if she were to work two jobs, she wouldn’t be able to afford daycare on her own.

“If there wasn’t [the] Child Care [program], honestly, I don’t know [what I would do],” Jennifer says.

She worries about the quality of care her son will receive from an uncertified babysitter if she loses her subsidy. In day care, she said, “he learns” and “they’re educating him.”

*Source: 2016, Stranded by the State
Courtesy of In These Times and Kartemquin Films*

Illinois include the Child Care Assistance Program (CCAP); Migrant Head Start and the Head Start State Collaboration (Head Start).³⁰

In Illinois, 34 percent of children live in single-parent homes, with the majority of those single-parent homes headed by a woman.³¹ In addition, two-thirds of the state’s low-wage workforces are women.³² In single-parent homes nationally, the employment rate is 65 percent for single mothers and 83 percent for single fathers.³³ While the cost of child care has risen, incomes have not followed suit.

In Cook County, the average cost of full day child care for a child aged 3 to 4 years old exceeds 10 percent of the average families’ income.³⁴ There are 880,000 children age 13 and under living in Cook County, with 25 percent of children living in poverty.³⁵ Forty-six

percent of children in Cook County live in families earning less than 185 percent of the poverty level.³⁶

²⁸ “The Illinois/New York Child Care Research Partnership Study,” The University of Chicago School of Social Service Administration, July 2017, <https://ssascholars.uchicago.edu/ccrp>.

²⁹ “Children under age 5 receiving child care assistance by county,” Kids Count Data Center, 2017, <http://datacenter.kidscount.org/data/tables/8592-children-under-age-5-receiving-child-care-assistance-by-county?loc=15&loc=2#detailed/2/any/false/1447,1248,1090,1001,943/any/17317>.

³⁰ “Child Care,” Illinois Department of Human Services, <http://www.dhs.state.il.us/page.aspx?item=29720>.

³¹ “Children in single-parent families,” Kids Count Data Center, 2017, <http://datacenter.kidscount.org/data/tables/106-children-in-single-parent-families?loc=15&loc=2#detailed/2/15/false/573,869,36,868,867/any/429,430>.

³² “Underpaid and Overloaded: Women in Low-Wage Jobs,” The National Women’s Law Center, 2014, https://www.nwlc.org/sites/default/files/pdfs/final_nwlc_lowwagereport2014.pdf.

³³ Grover J. (Russ) Whitehurst, “Why the Federal Government should subsidize Childcare and How to Pay for It,” Economic Studies at Brookings, March 9, 2017, https://www.brookings.edu/wp-content/uploads/2017/03/es_20170309_whitehurst_evidence_speaks3.pdf.

³⁴ “2015 Report on Child Care in Cook County,” Illinois Action for Children, 2015, http://www.actforchildren.org/wp-content/uploads/2016/02/2015_Report_Child_Care_Cook_County.pdf.

³⁵ Ibid.

³⁶ “Policy Brief: Loss of Child Care Due to 2015 Cuts Limits Parents Pursuit of Education and Training,” Illinois Action for Children, February 2017, http://www.actforchildren.org/wp-content/uploads/2017/02/Policy_Brief_Feb_2017_Restore-Child-Care.pdf.

CCAP

In July of 2015, the Governor made changes to CCAP income eligibility, limiting income eligibility from 185 percent of the federal poverty level (FPL) - \$34,000 for a family of three - to 50 percent of the FPL - \$10,000 for a family of three.³⁷ While some eligibility was restored (to 162 percent of FPL), two populations remained ineligible:

- Families earning between 162-185 percent of FPL
- Parents enrolled full-time in non-TANF (Temporary Assistance for Needy Families) education or training program

Illinois Action for Children reported that because of the changes to CCAP more than 30,000 fewer children are receiving child care today than in June 2015.

The recently approved budget includes funding for these two populations. In addition, the legislature approved HB 3213 which would permit the provision of child care services for families that are non-TANF recipients and need child care assistance to participate in education and training activities. As of this writing, the bill is before the Governor for his consideration.

In Illinois, court orders and consent decrees cover funding for early intervention services for children (up to age 3) with developmental disabilities. Payments to child care providers who serve families receiving child care assistance are also covered. However, court orders and consent decrees have not insulated these programs from the harms of an extended budget impasse. While providing services, state funded Migrant Day Care services and Head Start programs waited to be paid.

- CCAP was established by the Child Care Development Block Grant (CCDBG) at the federal level to assist low income families in accessing affordable, high quality child care.
- The Migrant Head Start program provides child care and other related health and social services to preschool-age children of low-income migrant and seasonal farm workers.
- The Head Start program is a federal-state partnership that provides comprehensive early childhood education, health, nutrition and parent engagement services to low-income families with young children.

Source: Illinois Department of Human Services

“Increasing government austerity for [...] daycare services for low-income families had begun to affect their ability to provide services even before the crisis. For example, the paperwork requirements that low-income cash-pay parents had to fulfill every three months in order to recertify their eligibility for the program forced some parents out of the preschool programming and into informal, uncertified family child care solutions instead.”

Dina Evans, Senior Director of Children & Youth Programs, Albany Park Community Center

Although the newly approved budget funds services for the two populations (families earning between 162-185 percent of FPL and parents enrolled in non-TANF training programs), service providers are grappling with how to reach those populations to encourage individuals to re-enroll. A lack of consistency makes it difficult for families to rely on the funding and could lead more families to rely on less optimal child care solutions.

Please refer to Charts 3 and 4 in the Appendix beginning on page 27 for a deeper dive into the funding trends.

³⁷ Leila Pree, “The Nip and Tuck of the Illinois Budget: Cuts to Children and Families,” Chicago Policy Review, October 13, 2015, <http://chicagopolicyreview.org/2015/10/13/the-nip-and-tuck-of-the-illinois-budget-cuts-to-children-and-families/>.

Women's Health - Breast and Cervical Cancer Screening

The Metropolitan Chicago Breast Cancer Task Force, which connects women to health care providers, says it is owed more than \$164,000 for data it collects on behalf of the state tracking the quality and effectiveness of mammograms. The program is aimed at ensuring testing and diagnosis is accurate, and without the funds, executive director Anne Marie Murphy said her group may not have the legal authority to collect the data at all.

"Women's lives are being sacrificed to the budget," said Murphy, whose agency specializes in finding women the care they need, including working with hospitals and doctors who volunteer their services to make up for the lack of funding.

"Right now, services are choppy. Depending on when and who you call, you might get in, but a lot of the time women are told they have to wait," Murphy said.

*Chicago Tribune, June 17, 2016
By Monique Garcia and Kim Geiger*

More than 75,000 Illinois women between the ages of 40 and 64 remain uninsured and eligible for preventative screenings under the Illinois Breast and Cervical Cancer Program funded through the Illinois Department of Public Health.³⁸ Although the Affordable Care Act has provided greater access to preventative care, particularly for low income women of color, gaps remain for women who are uninsured or underinsured.³⁹

A disproportionate number of low-income women of color remain uninsured. Reports show that five Black women die per day from breast cancer.⁴⁰ According to the Metropolitan Chicago Breast Cancer Task Force, in Chicago, a Black woman has a 62 percent greater chance of dying from breast cancer compared to a White woman and breast cancer is the most common cancer in women.

Due to the state budget impasse, local agencies providing these services to uninsured women reduced hours and services, and/or have long waitlists. Per the Department, 13,455 women were served by local IBCCP agencies in FY16, which is a 34 percent decrease from FY15. An IBCCP agency in Lake County has had a wait list since 2013. The wait list currently stands at 340 women (but in 2013 the number was as high as 3,000). According to the American Cancer Society, approximately 10,210 women in Illinois will be diagnosed with breast cancer and 520 women will be diagnosed with cervical cancer in 2017.⁴¹ From 2010-2015, the IBCCP detected 563 breast cancers and 1,109 cervical cancers and pre-cancerous lesions.⁴²

The approved state budget provides additional funds for FY17 and, in FY18, returns General Funds expenditures for breast and cervical cancer screenings to FY15 levels. However, similar to child care service providers, IBCCP agencies will need to conduct outreach to women on the long waiting lists so that they are made aware that services can now be restored in FY18. This is particularly important considering potential changes at the federal level in Medicaid funding, which could threaten coverage for women covered under the Medicaid Expansion, making the availability of these screenings vital for women's health. Please refer to Charts 5 and 6 in the Appendix beginning on page 29 for a deeper dive into funding trends.

³⁸ 2017 IBCCP Fact Sheet, <https://ipha.com/content/uploads/2017%20IBCCP%20fact%20sheet%20w%20logos.pub.pdf>.

³⁹ Marlese Durr, Ph. D and Barbara Fowler, Ph.D., RN, PHCNS, BC, "Women of Color and the Affordable Care Act," Wright State University Department of Sociology and Anthropology & The College of Nursing and Health, https://www.socwomen.org/wp-content/uploads/Fact-Sheet_Women-of-Color-and-ACA.pdf.

⁴⁰ Ibid.

⁴¹ 2017 IBCCP Fact Sheet, <https://ipha.com/content/uploads/2017%20IBCCP%20fact%20sheet%20w%20logos.pub.pdf>.

⁴² Ibid.

College Access

The Monetary Award Program (MAP) provides grant assistance for college to eligible students demonstrating financial need. These grants apply to tuition and mandatory fees for undergraduate students for approved Illinois public and private two- and four-year colleges, universities, and hospital schools.

Valeria is a 24-year-old Latina woman living in Evanston, IL with her husband who typically works 16 or 17 hours a day and two young children, including one with a disability. They are low-income family who often struggle to pay their bills. In what she considers one of her greatest accomplishments, Valeria graduated from Loyola University Chicago with her Bachelor's Degree in Political Science in May 2017 as a first-generation college student. But in addition to the struggles any low-income student with dependents faces in completing their degree, her progress and her family's stability were threatened by payment delays and eventually a full-defunding of her MAP grant funding.

The stress of the uncertainty had negative effects for Valeria and her family. She says, "it was that kind of just uncertainty I could say, of whether or not I'm going to owe that money and how that would affect my family." Her doctor even suggested that she take a semester off while she was at Loyola because of the emotional stress the financial uncertainty created for her.

The delay in MAP grant funds needed to support her tuition and fees couldn't have come at a worse time for Valeria. She was just one semester away from graduating when the funding for the MAP grant was defunded. The instability the defunding of the MAP grants caused for her family was acute. She admits that she "would've probably been evicted from my house if" Loyola had not granted her a last-minute scholarship to cover the MAP grant shortfall in her tuition.

Source: In-person interview, the Center for Urban Research and Learning at Loyola University Chicago (CURL).

At the outset of FY17 there was no appropriation for MAP grants. Prior to FY17, there was a 10 percent reduction in overall MAP expenditures from FY15 to FY16. (There were 21,342 fewer recipients of MAP grants from FY15 to FY16.) In addition, general fund appropriations for the state's universities expired at the end of 2016.

In FY15 (the last fiscal year with a budget), 38 percent of MAP Grant recipients were dependent females and 24 percent were independent females, making the overall total of MAP grant recipients who were female 62 percent. In FY16, it was 40 percent dependent females and 22 percent independent females.

Per an Illinois Student Assistance Commission (ISAC) survey, students attending schools that opted not to cover MAP grants reported that they had to weigh the option of paying rent or paying their tuition.⁴³ Some students reported that they were forced to drop out of school due to the uncertainty.⁴⁴

⁴³ David Blanchette, "Local Colleges in a Bind again over unfunded MAP Grants," *SJR – The State Journal-Register*, March 4, 2017, <http://www.sj-r.com/news/20170304/local-colleges-in-bind-again-over-unfunded-map-grants>.

⁴⁴ Ibid.

In 2016, 56 percent of enrolled students in American colleges and universities were women. Women, nationally, are the bearers of more than \$800 billion in student loans (two-thirds of the student debt).⁴⁵ Thus, lack of access to a college education for Illinois women could disproportionately impact them and their future earnings.

From an October 2016 ISAC survey of 132 schools (responses from 96):

One-third of institutions that responded to this question (26 of 88 schools) indicated they do not plan to credit (or list as pending) student accounts for the full MAP grant award for second term, and 17 percent of respondents indicated they are undecided regarding whether they will credit the full MAP grant award for second term.

From one respondent:

“Some of the poorest students in the Illinois college system attend [our institution]. They rely on federal and state grants for not only tuition, but also books and supplies, bus passes, child care, and food. At this time, we continue to front the MAP Grant because it is essential to our students’ success. From a fiscal standpoint, we cannot continue to front these funds. When that determination is made, more students will need to pursue student loans, if not already taking out loans, or discontinue their education.”

The recently approved state budget appropriated money for FY17 grants and increased them for FY18. Per the Illinois Student Assistance Commission, it is working as quickly as possible to process the grants for the 2016-2017 academic year. However, the effects will linger for those who altered their academic plans due to the uncertainty. Please refer to Charts 7 and 8 in the Appendix beginning on page 31 for a deeper dive into the funding trends.

⁴⁵ “Deeper in Debt: Women and Student Loans,” *AAUW National*, May 2017, <http://www.aauw.org/research/deeper-in-debt/>.

Domestic Violence

Domestic violence includes acts of physical and psychological harm that occur within the context of a family or intimate relationship.⁴⁶ In the United States, a woman is beaten every 15 seconds.⁴⁷ One out of every four women will be physically or sexually assaulted by an intimate partner during their lifetime.⁴⁸ The harmful effects of domestic violence can impact all family members, particularly children.⁴⁹

Survivors of abuse seek help from domestic violence agencies during times of immediate need.⁵⁰ During this time of need, women need emergency shelter and other emergency safety needs, as well as counseling and economic assistance.

In Illinois, domestic violence programs provide safety assistance to survivors of domestic violence. Those services can include: crisis hotlines; counseling; safety planning; legal advocacy; children's services; temporary food and housing; education, awareness building, and outreach; emergency medical care, transportation; employment assistance; educational assistance and child care.

Illinois officials waited more than five months to alert dozens of domestic violence programs that their funding had been eliminated, an omission that has forced layoffs and other cuts at some facilities, per interviews and documents reviewed by The Associated Press.

No one knows — or is saying — why approximately \$9 million in state funding for 62 programs that provide shelter, counseling and advocacy for victims of domestic abuse was left out of a six-month budget that took effect July 1.

Michelle Meyer, executive director of Kane County-based Mutual Ground, a 24-hour shelter and counseling center, laid off four people in November after months of not receiving checks — or answers — from the state. They include a case manager and a sexual assault counselor. That's not counting the six who have left in the last year Mutual Ground can't afford to replace.

"We have no more case managers, who help clients get benefits, housing, child care, accompany them to court," Meyer said. "There's nobody to pick up that work. Everybody that we can't help is put on a waiting list."

At the Center for Domestic Peace in Chicago, which provides counseling to offenders, program manager Mike Feinerman said the agency's highest-paid employees agreed to take a 5 to 10 percent cut in salary after receiving the DHS news.

*John O'Connor, The Associated Press
February 14, 2017*

⁴⁶ "Facts About Domestic Violence," Illinois Department of Public Health: Women's Health, <http://www.idph.state.il.us/about/womenshealth/factsheets/dv.htm>.

⁴⁷ Ibid.

⁴⁸ "Facts About Domestic Violence," Illinois Department of Public Health: Women's Health, <http://www.idph.state.il.us/about/womenshealth/factsheets/dv.htm>.

⁴⁹ Ibid.

⁵⁰ Stephanie Riger, Ph.D., Christine C. George, Ph.D., Bill Byrnes, MA, Leah Durst-Lee, BA and Rannveig Sigurvinsdottir, Ph.D., "Domestic Violence Outcome Measures Project," September 2016.

The Women's Center in Carbondale has had a tough couple of years. Because of the Illinois budget impasse, it had to make desperate cuts that threatened to close it.

"If we don't have a shelter, people are at risk, and that could harm our community," said Women's Center Volunteer Director Jasmin Creek.

Creek knows firsthand how important women's centers are. When she was younger, she and her family stayed in a domestic violence shelter. She benefited from some of the same programs the Women's Center almost lost.

"We could of very well not be alive if that service had not been available to us," said Creek.

Women's Center Executive Director Cathy McClanahan said the center is excited the impasse is over, but it is still in a crisis.

"How long are we going to be able to survive? Because we don't know when the money is going to start coming," said McClanahan

The Women's Center took out a \$250,000 loan because of the budget stalemate.

"That's money we are going to have to pay back with interest," said McClanahan

Although the Women's Center is facing another challenge, Creek said the future is bright.

"We are in a better place, and I think things are going to turn around," said Creek.

McClanahan said Illinois Comptroller Susana Mendoza said the Women's Center would be at the top of the list to receive funding.

*WPSD-TV
July 10, 2017*

Sexual Violence Intervention supports community-based services with the goal of reducing incidences of domestic and sexual violence and ensuring that survivors have access to safety, medical care, crisis support, legal advocacy and counseling services for themselves and their significant others.

The last stopgap funding bill contained no FY17 general revenue funds for domestic violence shelters and prevention services. The state had already entered into full annual contracts with domestic violence agencies to provide a full year of services even though there was no funding appropriated for FY17.

In 2016, more than 3,600 adults and 4,200 children seeking emergency shelter were turned away. Only about 44 percent of child witnesses served last year received residential services.

Of the 41,916 adult survivors of domestic violence and 8,124 served last year, 47 percent were between the ages of 30 to 49; 61 percent were White and 26 percent were Black.

While the recently approved budget includes funding for FY17 as well as FY18, funding for FY17 was below the \$18.6 million funding appropriated in FY15 and restored in FY18. In addition, some providers may have to wait until later in the year for payment for services rendered in FY17. Providers will continue to do what

they can to continue to provide these vital services for women. Some face the possibility that with the \$15 million appropriated for FY17, they may not be fully compensated for services rendered during the fiscal year.

Centers struggled during FY17 to provide services and keep their doors open. Kathleen A. Doherty, the Executive Director of the Chicago Metropolitan Battered Women's Network stated that without funding, 50 percent of domestic violence agencies would have closed their doors by the end of the summer. Please refer to Charts 9 and 10 in the Appendix beginning on page 33 for a deeper dive into funding trends.

Senior Women – Home Delivered Meals

The Illinois Department on Aging (DOA) provides support to the aging, elderly and seniors across the state of Illinois. Federal funding provides a significant source of revenue for service delivery of social and nutrition services.⁵¹ The home-delivered meals is a significant part of these services.

Roughly 25 million Americans aged 60 or older are economically insecure—living at or below 250 percent of the Federal Poverty Level.⁵² Approximately 60 percent of older women are unable to cover their basic, daily expenses. Among older women of color, 60 percent of Hispanic women and 65 percent of African American women are aging into economic insecurity. Economic insecurity also rises with age as work becomes difficult or impossible, health care costs increase, and spouses pass away.⁵³

Based on the 2010-2014 American Community Survey, approximately 8 percent of older adults in Illinois live in poverty.⁵⁴ Poor older adults have limited opportunities to escape poverty. Without Social Security, an additional 36 percent of older Illinoisans would fall into poverty (AARP Public Policy Institute, 2012).⁵⁵

The Illinois Budget Crisis forced Senior Services to reduce their Meals on Wheels visits to low-income seniors from five days a week to one day a week. Sixty-five percent of the seniors they serve are women. These seniors have no alternative way to pay for their meals, which means that some of them are likely going hungry at least part of the time. Meals on Wheels reductions have also greatly reduced their social contact as 60% of the seniors they serve don't have family in the area.

Even with an approved budget, Executive Director Jonathan Becker says the needy seniors that require Meals on Wheels for their daily nutritional needs would vastly outnumber the number of meals they could serve. Reductions in other social services for seniors like transportation service and adult day care has meant that their low-income senior clients are now facing the loss of other basic needs in addition to nutrition.

Source: Conversation with Senior Services Executive Director Jonathan Becker

The Home Delivered Meals program is about more than just food. A University of Illinois review in 2013 of studies on home-delivery programs for seniors found that not only did the programs "significantly improve" the nutritional quality of diets, as well as increased chances for socialization and an overall "higher quality of life."⁵⁶

While initially a victim of the budget stalemate at the outset of FY16 (that led to some providers reducing staff), the state was able to incorporate by the end of calendar year 2015 state funding for Home Delivered Meals under the existing court order mandating the state appropriate Medicaid funds.⁵⁷ Even with the funding, some service providers did not rehire staff let go during the budget impasse.

However, entities still reported a drop both

⁵¹ "Chapter 4: Title III and Title VII of the Older Americans Act (OAA)," Department of Elder Programs and Services Handbook, July 2009, <http://elderaffairs.state.fl.us/doea/notices/Nov09/Chapter%204-OAA.7-09.final.pdf>.

⁵² Economic Security, Grantmakers in Aging, <http://www.giaging.org/issues/economic-security/>.

⁵³ Ibid.

⁵⁴ "State Plan on Aging for FY2017-FY2019," Illinois Department on Aging, <https://www.illinois.gov/aging/Documents/FY17%20FY19%20State%20Plan%20PID%20Final.pdf>.

⁵⁵ Ibid.

⁵⁶ Shannon Ho, "Seniors, Communities Worry About Federal Budget Cuts to Meals on Wheels Programs," *NBCDFW.com*, March 18, 2017, <http://www.nbcdfw.com/news/health/Federal-Budget-Cuts-to-Meals-on-Wheels-416674363.html>.

⁵⁷ "Aging Network Sustainability Survey," AgeSmart Community Resources.

in the number of meals provided and the kinds of meals delivered. One agency that previously served 650 meals a day to 22 townships, now serves closer to between 400 to 450 meals a day.⁵⁸ In addition, at the outset of the budget crisis, some agencies were forced to lower the number of hot meals provided, opting instead to deliver frozen meals due to costs.⁵⁹ Even entities providing Medicaid services still experienced payment delays from the state. With funding restored, providers will still have to go through the process of rehiring staff and rebuilding infrastructure.

The Budget Impasse had far-reaching consequences in services provided to senior women. The temporary lack of funding for Home Delivered Meals, and the lack of appropriations' authority for funding in other areas due to the impasse negatively impacted other much needed services for senior women:

Hillary is a developmentally disabled older adult living in Belleville, IL. Before the state budget crisis hit, she had been a long-time participant in an adult day care program that she used a transportation service to get to. The budget crisis led to the closure of both the transportation provider and her adult daycare. She was then moved to another adult day care program, where she was then required to be driven by a family member every day. Then that program was closed too due to the budget impasse. She is now in a third adult day care program located outside of the county in which she lives. The transportation service has never been reopened, which means that her family member has to drive her long distances every day.

Like other aging people with developmental disabilities, this tremendous upheaval caused great amounts of stress, medical issues, and financial difficulties for Hillary and her family. The organization coordinating Hillary's care has had to bring in counselors to talk to clients and their families about managing stress, and they report seeing higher medication use along with stress-induced conditions such as hypertension and high blood pressure.

Joy Paeth, Chief Executive Officer Age Smart Community Resources, Belleville

Please refer to Charts 11 and 12 in the Appendix beginning on page 35 for a deeper dive into the funding trends.

⁵⁸ Jonathan Becker, Senior Services Plus, interview by author, written notes, Chicago IL, June 2017.

⁵⁹ Ibid.

Housing

There are a variety of reasons why an Illinois' family might face homelessness. It might be due to the lack of affordable housing, lack of adequate income at a low paying job or unemployment, medical conditions, or a family emergency.⁶⁰

What this [the budget impasse] meant for women and girls in Illinois was that, even if they were fortunate enough to have affordable housing, the supportive services that are so crucial for housing stability faced staffing cuts in many, many instances. Numerous case managers lost their jobs, and the case managers that remained had very high caseloads.

Case managers have been heroic—some handling 25 or even 40 families (which means 120 people)—but these staggering numbers suggest the critical needs of supportive housing residents could not all be met. This translates into less assistance linking to disability benefits and employment, less help working with a school to ensure a child stayed in school or got the special services they needed, less help linking families with primary care physicians rather than using the ER, more instability for the families which means more mental health crises, even possibly more DCFS involvement.

Nancy Radner

Primo Center for Women and Children

Whatever the reason, the state of Illinois runs a set of programs designed to prevent homelessness or assist those residents formerly homeless to find shelter and secure additional support services.

Illinois' Homeless Prevention Program is funded through the Department of Human Services and it provides rental assistance, utility assistance and supportive services directly related to the prevention of homelessness to eligible individuals and families.

The Supportive Housing Program provides the necessary supportive services coupled with housing to enable formerly homeless individuals and families, or those in danger of becoming homeless, to obtain or maintain community-based housing.

The Homeless Youth program is a program that aims to promote the safety of Illinois' youth by ensuring that their basic survival needs are met while also providing safe and stable housing; education and employment services, and the life skills necessary to become self-sufficient.

Per the Department, while Homeless Youth providers were able to provide some service to 6,756 youth and their children in 2015, 59 percent of Homeless Youth providers (17 of 29) reported 2,530 homeless youth were turned away or put on a waiting list during the year. Sixty-five percent of those youth were seeking Transitional Living services.⁶¹

⁶⁰ "Programs/Campaigns," Chicago Coalition for the Homeless, <http://www.chicagohomeless.org/programs-campaigns/>.

⁶¹ "Homeless Youth Services," Illinois Department of Human Services, <http://www.dhs.state.il.us/page.aspx?item=30369>.

Youth Helped by Illinois Homeless Youth Services in FY2015

The data below was provided for **2,798** program youth when available:

- **71%** of homeless youth served were female.
- **65%** of homeless youth served were 18-20 years old.
- **9%** of homeless youth served were pregnant.
- **22%** of homeless youth served were parenting.
- **10%** of homeless youth served indicated they were victims of abuse.

Length of Homelessness:

- **50%** of homeless youth served were homeless less than one month (32% less than one week).
- **35%** of homeless youth served were homeless 1 to 6 months (11% 1 to 2 months.)
- **15 %** of homeless youth served were homeless more than 6 months. (9% were homeless more than 1 year.)

Source: Illinois Department of Human Services

During the state budget impasse, entities providing homeless prevention services resorted to staff layoffs and increased caseloads for case managers. A survey from the Chicago Coalition for the Homeless showed that 90 percent of homeless service providers report being forced to take one of the following actions: limiting intake of new clients, reducing or

eliminating services for current clients, staff layoffs, implementing furlough days or reduced work hours for staff, eliminating programs, and/or closing sites.

With funding restored, providers will have to rebuild the infrastructure needed to continue providing these critical services to youth. Please refer to Charts 13 and 14 in the Appendix beginning on page 37 for a deeper dive into funding trends.

Conclusion

In conclusion, home-visiting, child care, women's health care (specifically breast and cervical cancer screening), college access, domestic violence, assistance for senior women and housing assistance, are all examples of programs that allow women to lead independent lives. These programs are particularly vital for low-income women, which given the demographics in the state, tend to be women of color.

John Kelker, president of the Springfield-based United Way of Central Illinois, said the budget crisis caused many local human-service providers locally to lose highly trained professionals through layoff or people choosing to leave the field. "It's going to take some time to put human services back together," he said, though he was glad to see Thursday's action at the Capitol.

Peoria Journal Star
July 6, 2017

Delayed payments due to the prolonged budget battle challenged the ability of service providers to continue to serve women, particularly, the most vulnerable in our communities – low income women and their families. While a budget is now in place for FY18, the damage has already been done to the infrastructure of those providing these vital services.

Federal Threats

While the state has taken steps in recent years to move some of the costs of state programs from general funds to federal funds, federal threats to Medicaid could exacerbate the damage caused by the state's fiscal woes. Funded via a court order, Illinois' Medicaid program provided assistance to many low-income women and their families during the extended budget

battle.

There are 1,679,700 women and girls enrolled under the state's Medicaid program.⁶² Seventeen percent of Illinois women are covered by Medicaid.⁶³ In addition, there are 649,000 Illinoisans are enrolled under the Affordable Care Act (ACA) – 288,464 of them are women.⁶⁴ Most women covered by the state's Medicaid program are low-income women of color – 28 percent are Black and 26 percent are Hispanic.⁶⁵ The program provides services that include: preventative screenings, maternal health and long-term care affecting senior women.

Changes to the ACA approved in the U.S. House would place an undue burden on women, particularly low-income women of color in the state of Illinois. The proposed changes make deep cuts to the Medicaid program that could cost Illinois \$40 billion over ten years⁶⁶ – applying even more financial pressure the state.

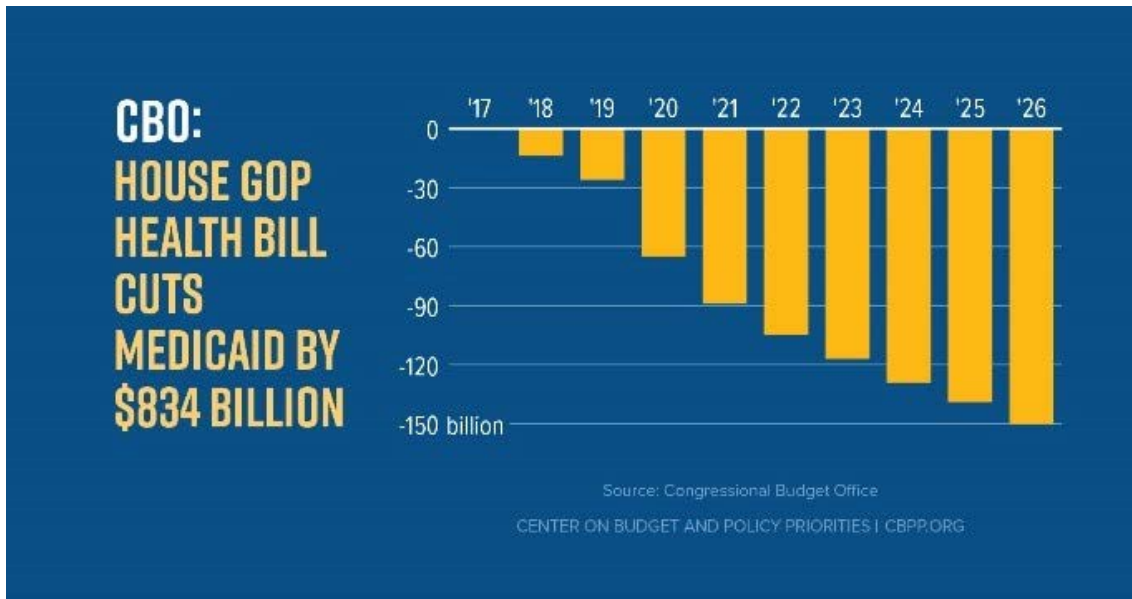
⁶² "February 2017: Medicaid & CHIP December 2016 Application, Eligibility, And Enrollment Data," February 2017, <https://www.medicaid.gov/medicaid/program-information/downloads/updated-december-2016-enrollment-data.pdf>.

⁶³ "Women's Health Insurance Coverage," October 21, 2016, <http://www.kff.org/womens-health-policy/fact-sheet/womens-health-insurance-coverage-fact-sheet/>.

⁶⁴ Illinois Department of Healthcare and Family Services, <https://www.illinois.gov/hfs/SiteCollectionDocuments/20170502ACARaceAgeGender.pdf>.

⁶⁵ "February 2017: Medicaid & CHIP December 2016 Application, Eligibility, And Enrollment Data," February 2017, <https://www.medicaid.gov/medicaid/program-information/downloads/updated-december-2016-enrollment-data.pdf>.

⁶⁶ Kiannah Sepeda-Miller, "Illinois Could Lose \$40 Billion in Federal Medicaid Support", Associated Press, March 16, 2017, <https://www.usnews.com/news/best-states/illinois/articles/2017-03-16/illinois-lawmakers-plan-hearing-to-evaluate-medicaid-changes>.



Medicaid also provides coverage for maternal depression, particularly for low-income women and women of color. Finally, Medicaid subsidizes 1.4 million people living in nursing homes, including 40 percent of poor elderly adults.⁶⁷

The changes proposed at the federal level could lead to a curtailment of coverage and/or loss of health care coverage for sixty-one percent of Medicaid enrollees in Illinois, who are people of color.⁶⁸ The legislation would also allow states to waive provisions that could translate to people with pre-existing conditions facing large health care premium surcharges

In addition to the House and Senate bills designed to repeal the ACA, the president's budget also proposes cuts to programs that serve women. The president's budget calls for additional and deeper cuts to Medicaid, on top of the cuts proposed by the House and Senate, when women receive 69 percent of total spending on that program. In addition, the president's budget calls for cuts to the Supplemental Nutrition Assistance Program (SNAP) program, where women receive 60 percent of funds.

The threat to federal funding further exacerbates women's opportunities to live financially stable, healthy and independent lives. The state has a budget in place now but the challenges remain.

The state budget reflects Illinois' priorities. When human service providers lose access to much needed funding, women and their children lose opportunities to live financially stable, healthy and independent lives. Our policymakers need to make the long-term commitment to financially supporting women and children to ensure that they have the same opportunity as everyone else to access healthy, successful, and independent lives for themselves and their children.

⁶⁷ Jordan Rau, "Medicaid Cuts May Force Retirees Out of Nursing Homes, New York Times, June 24, 2017, <https://www.nytimes.com/2017/06/24/science/medicaid-cutbacks-elderly-nursing-homes.html>.

⁶⁸ "Protect Health Care for Illinois Children by Rejecting the American Health Care Act," Voices for Illinois Children, June 19, 2017, <http://www.voices4kids.org/protect-health-care-for-illinois-children-by-rejecting-the-american-health-care-act/>.

Appendix

The charts below show funding trends prior to the recently adopted state budget. Actual expenditures reflect spending for a fiscal year, including, legislative appropriation, court orders, and continuing appropriations. FY17 estimated expenditures reflect anticipated expenditures made prior to the adoption of the recently adopted budget. While the recently approved budget appropriated FY17 funds, providers were still waiting for payment during the fiscal year.

Chart 1: The chart below reflects funding trends in Home Visiting programs from FY15 to FY17 (before new state budget). Prior to July 6, 2017, FY15 was the last year with a complete state budget. The items noted with an asterisk in the “FY16 Actual Expenditure” column were paid for with FY17 funds.

Appropriation Name	Fund Name	Fund Category Name	FY15 Enacted Appropriation	FY15 Actual Expenditure	FY16 Enacted Appropriation	FY16 Actual Expenditure	FY17 Enacted Appropriation	FY17 Est. Maintenance	FY17 Estimated Expenditure
Healthy Families	General Revenue Fund	General Funds				294,746		10,040,000	8,384,061
Healthy Families	Commitment to Human Services Fund	General Funds			-	7,806,561*	9,462,500**		1,655,939
Healthy Families - Grants	General Revenue Fund	General Funds	9,814,100	9,509,574					
Parents Too Soon	DHS Special Purposes Trust Fund	Federal Trust Funds	2,505,000	2,149,833	2,505,000	2,127,374	2,505,000	2,505,000	2,505,000
Parents Too Soon	Commitment to Human Services Fund	General Funds			-	4,567,061*	6,698,500		2,122,439
Parents Too Soon	General Revenue Fund	General Funds	6,715,700	6,715,700	-	-	-	6,870,300	4,747,861
MIEC Home Visiting Program	DHS Special Purposes Trust Fund	Federal Trust Funds	14,006,800	9,088,148	14,006,800	8,756,816	14,006,800**	14,006,800	14,006,800
Total			33,041,600	27,463,255	16,511,800	23,552,558	32,672,800	33,422,100	33,422,100

Source: Illinois Office of Management and Budget, Illinois Department of Human Services

*FY16 services paid from FY17 Stop Gap Appropriations

**includes amounts used to pay FY16 expenditures

Chart 2: The chart below reflects a preliminary review of SB 6 (the newly approved state budget). Here, FY 18 funding for Home Visiting programs matches or exceeds FY15 funding.

Appropriation Name	Fund Name	Fund Category Name	SB 6- FY17	SB 6- FY18
Healthy Families	General Revenue Fund	General Funds	8,038,800	
Healthy Families	Commitment to Human Services Fund	General Funds		
Healthy Families - Grants	General Revenue Fund	General Funds		10,040,000
Parents Too Soon	General Revenue Fund	General Funds	5,690,700	6,870,300
Parents Too Soon	DHS Special Purposes Trust Fund	Federal Trust Funds		2,505,000
Parents Too Soon	Commitment to Human Services Fund	General Funds		
MIEC Home Visiting Program	DHS Special Purposes Trust Fund	Federal Trust Funds		14,006,800
Total			13,729,500	33,422,100

Source: SB 6

Chart 3: The chart below reflects funding trends in Child Care from FY15 to FY17, prior to the recently adopted state budget. While the state appropriated funds for Migrant Day Care Services, providers experienced delays in receiving payments.

Appropriation Name	Fund Name	Fund Category Name	FY15 Enacted Appropriation	FY15 Actual Expenditure	FY16 Enacted Appropriation	FY16 Actual Expenditure	FY17 Enacted Appropriation	FY17 Est. Maintenance	FY17 Estimated Expenditure
Child Care Service Great Start	DHS Special Purposes Trust Fund	Federal Trust Funds	5,200,000	5,200,000	5,200,000	5,200,000	5,200,000	5,200,000	5,200,000
Child Care Services	DHS Special Purposes Trust Fund	Federal Trust Funds	197,535,400	195,327,640	197,535,400	192,681,716	197,535,400	197,535,400	197,535,400
Child Care Services	General Revenue Fund	General Funds	494,758,000	492,245,987	0	328,139,503	0	400,000,000	400,000,000
Migrant Day Care Services	DHS Special Purposes Trust Fund	Federal Trust Funds	3,422,400	2,923,283	3,422,400	3,303,533	3,422,400	3,422,400	3,422,400
Employment and Training Program*	Employment and Training Fund	Federal Trust Funds		463,481,846		405,458,531			341,944,726
Total			700,915,800	1,159,178,756	206,157,800	934,783,283	206,157,800	606,157,800	948,102,526

*Other programs are paid from this appropriation.

Source: Illinois Office of Management and Budget, Illinois Department of Human Services

Chart 4: The chart below reflects a preliminary review of SB 6 (the newly approved state budget). Funding in FY18 builds in restoration for eligibility for CCAP. In addition, \$100 million was added from the Commitment to Human Services Fund for Child Care Services.

Appropriation Name	Fund Name	Fund Category Name	SB 6 FY18
Child Care Service Great Start	DHS Special Purposes Trust Fund	Federal Trust Funds	5,200,000
Child Care Services	DHS Special Purposes Trust Fund	Federal Trust Funds	215,800,000
Child Care Services	General Revenue Fund	General Funds	376,790,900
Child Care Services	Commitment to Human Services Fund	General Funds	100,000,000
Migrant Day Care Services	DHS Special Purposes Trust Fund	Federal Trust Funds	3,422,400
Employment Training Program*	Employment Training Fund	Federal Trust Funds	485,000,000
Total			1,186,213,300

*Other programs are paid from this appropriation.

Source: SB 6

Chart 5: The chart below reflects funding trends in Breast and Cervical Cancer Screening Programs from FY15 to FY17, prior to the recently adopted budget. In addition to the chart numbers below, the sum of \$130,000 was appropriated from the Mammogram Fund to the Office of the Secretary of State for grants to the Susan G. Komen Foundation for breast cancer research, education, screening, and treatment.

Appropriation Name	Fund Name	Fund Category Name	FY15 Enacted Appropriation	FY15 Actual Expenditure	FY16 Enacted Appropriation	FY16 Actual Expenditure	FY17 Enacted Appropriation	FY17 Est. Maintenance	FY17 Estimated Expenditure
Expenses Associated with Breast and Cervical Cancer Screenings and Other Related Activities	General Revenue Fund	General Funds	13,512,400	10,113,720		357,496		4,000,000	1,945,100
Expenses Associated with Breast and Cervical Cancer Screenings and Other Related Activities	Commitment to Human Services Fund	General Funds					4,993,500	4,993,500	4,549,500
Grants for Breast and Cervical Cancer Screening	Public Health Services Fund	Federal Trust Funds	6,000,000	4,919,555	6,000,000	5,867,958	6,000,000	6,000,000	4,300,100
Grants to Public or Private Entities in Illinois for the Purpose of Funding Research Concerning Breast Cancer and for Funding Services for Breast Cancer Victims	Carolyn Adams Ticket for The Cure Grant Fund	Special State Funds	3,000,000	1,429,083	2,500,000	391,273	2,500,000	2,500,000	729,492
Grants for Breast and Cervical Cancer Research	Penny Severns Breast, Cervical, and Ovarian Cancer Research Fund	Special State Funds	600,000	436,722	600,000		600,000	600,000	600,000
Total			23,112,400	16,899,080	9,100,000	6,616,727	14,093,500	18,093,500	12,124,192

Source: Illinois Office of Management and Budget, Illinois Department of Public Health

Chart 6: The chart below reflects a preliminary review of SB 6, the newly adopted state budget. In SB 6, funding for FY18, out of General Revenue Funds, returned to FY15 levels. Funding was also appropriated for services rendered in FY17.

Appropriation Name	Fund Name	Fund Category Name	SB 6- FY17	SB 7 -FY18				
Grants for Breast and Cervical Cancer Research	Penny Severns Breast, Cervical, and Ovarian Cancer Research Fund	Special State Funds		600,000				
Grants to Public or Private Entities in Illinois for the Purpose of Funding Research Concerning Breast Cancer and for Funding Services for Breast Cancer Victims	Carolyn Adams Ticket for The Cure Grant Fund	Special State Funds		2,000,000				
Grants for Breast and Cervical Cancer Screening	Public Health Services Fund	Federal Trust Funds		7,000,000	*for expenses in FY18 and all prior years			
Expenses Associated with Breast and Cervical Cancer Screenings and Other Related Activities	General Revenue Fund	General Funds	5,589,100	13,512,400				
Expenses Associated with Breast and Cervical Cancer Screenings and Other Related Activities	Commitment to Human Services Fund	General Funds						
Total			5,589,100	23,112,400				

Source: SB 6

Chart 7: The chart below reflects funding trends in the Monetary Assistance Program from FY15 to FY17, prior to the recently adopted state budget. While there appears to be a significant drop from FY15 to FY16 in actual expenditures, FY17 appropriated funds were permitted to be used for FY16 expenses. SB 6, reflected in the chart below, appropriated funds for FY17 and FY18.

Agency Name	Appropriation Name	Fund Name	Fund Category Name	FY15 Enacted Appropriation	FY15 Actual Expenditure	FY16 Enacted Appropriation	FY16 Actual Expenditure	FY17 Enacted Appropriation*	FY17 Est. Maintenance
Illinois Student Assistance Commission	Monetary Award Program (MAP)	General Revenue Fund	General Funds	364,856,300	364,049,979	0	6,022,894	0	213,856,300
Illinois Student Assistance Commission	Monetary Award Program (MAP)	Fund for the Advancement of Education	General Funds			0	0	151,000,000	151,000,000
Illinois Student Assistance Commission	Monetary Award Program (MAP)	Education Assistance Fund	General Funds			169,798,700	169,792,588	0	0
Total				364,856,300	364,049,979	169,798,700	175,815,482	151,000,000	364,856,300

*allowed for FY16 expenditures

Source: Illinois Office of Management and Budget

Chart 8: The chart below reflects a preliminary review of SB 6 and indicates that funding was restored to FY15 levels in FY17 and that MAP grant funding is increased in FY18 by \$36,485,600.

Agency Name	Appropriation Name	Fund Name	Fund Category Name	SB 6-FY 17	SB 7 -FY18
Illinois Student Assistance Commission	Monetary Award Program (MAP)	General Revenue Fund	General Funds	77,856,300	401,341,900
Illinois Student Assistance Commission	Monetary Award Program (MAP)	General Revenue Fund	General Funds		
Illinois Student Assistance Commission	Monetary Award Program (MAP)	Education Assistance Fund	General Funds	287,000,000	
Illinois Student Assistance Commission	Monetary Award Program (MAP)	Fund for the Advancement of Education	General Funds		
Total				364,856,300	401,341,900

Source: SB 6

Chart 9: The chart below reflects funding trends in Domestic Violence Programs from FY15 to FY17, prior to the recently adopted budget. The chart shows that Domestic Violence Service Providers did not receive any General Revenue Funds for FY17 in the stop gap budget. However, Chart 10 shows the recently approved budget included FY17 funds.

Appropriation Name	Fund Name	Fund Category Name	FY15 Enacted Appropriation	FY15 Actual Expenditure	FY16 Enacted Appropriation	FY16 Actual Expenditure	FY17 Enacted Appropriation	FY17 Estimated Maintenance	FY17 Estimated Expenditure
Domestic Violence Programs	Domestic Violence Abuser Services Fund	Special State Funds	100,000	100,000	100,000	0	100,000	100,000	100,000
Domestic Violence Shelters	Domestic Violence Shelter and Service Fund	Special State Funds	952,200	728,065	952,200	543,376	952,200	952,200	952,200
Domestic Violence Shelters	General Revenue Fund	General Funds	18,215,700	17,815,486	18,215,700	17,842,178	0	18,635,000	18,635,000
Donated Funds Initiative Program (also funds other state programs)	Local Initiative Fund	Federal Trust Funds		1,687,047		1,704,865			1,688,345
Rape Victims Prevention Act	General Revenue Fund	General Funds	6,021,100	6,021,100	0	0	0	6,159,700	4,157,380
Rape Victims Prevention Act	Commitment to Human Services Fund	General Funds			0	4,003,380*	6,005,700**		2,002,320
Sexual Assault Services	Sexual Assault Services Fund	Special State Funds	-	-	100,000	100,000	100,000	100,000	100,000
Sexual Assault Services	Sexual Assault Services and Prevention Fund	Special State Funds	100,000	100,000					
Sexual Assault Services and Prevention	Sexual Assault Services and Prevention Fund	Special State Funds	600,000	400,000	600,000	600,000	600,000	600,000	600,000
Sexual Assault Victims and Sexual Assault Prevention Activities	General Revenue Fund	General Funds							
Family Violence Programs	DHS Special Purposes Trust Fund	Federal Trust Funds	5,018,200	2,960,620	5,018,200	3,039,741	5,018,200	5,018,200	5,018,200
Total			31,007,200	29,812,318	24,986,100	27,833,540	12,776,100	31,565,100	33,253,445

Source: Illinois Office of Management and Budget, Illinois Department of Human Services, *FY16 services paid from FY17 Stop Gap Appropriations,

**includes amounts used to pay FY16 expenditures

Chart 10: The chart below reflects a preliminary review of SB 6. While the budget includes FY17 General Revenue Funds, it is below FY17 estimated expenditures. The budget increases General Revenue Funds appropriation in FY 18 to slightly above FY15.

Appropriation Name	Fund Name	Fund Category Name	SB6 -FY17	SB6 -FY18
Domestic Violence Programs	Domestic Violence Abuser Services Fund	Special State Funds		100,000
Domestic Violence Shelters	Domestic Violence Shelter and Service Fund	Special State Funds		952,200
Domestic Violence Shelters and Services	General Revenue Fund	General Funds	15,059,000	18,635,000
Donated Funds Initiative Program (also funds other state programs)	Local Initiative Fund	Federal Trust Funds		**
Rape Victims Prevention Act	General Revenue Fund	General Funds		
Rape Victims Prevention Act	Commitment to Human Services Fund	General Funds		
Rape Victims Prevention Act	General Revenue Fund	General Funds		
Sexual Assault Services	Sexual Assault Services Fund	Special State Funds		600,000
Sexual Assault Services	Sexual Assault Services and Prevention Fund	Special State Funds		100,000
Sexual Assault Services and Prevention	Sexual Assault Services and Prevention Fund	Special State Funds		
Sexual Assault Victims and Sexual Assault Prevention Activities	General Revenue Fund	General Funds	5,102,100	6,159,700
Family Violence Programs	DHS Special Purposes Trust Fund	Federal Trust Funds		5,018,200
**Amount for category of services unknown at this time				
Total			20,161,100	31,565,100

Source: SB 6

Chart 11: The chart below reflects funding trends in Nutrition Assistance Programs from FY15 to FY17, prior to the recently adopted budget. A court authorized the FY16 “Actual Expenditure” of General Revenue Funds.

Agency Name	Division Name	Appropriation Name	Fund Name	Fund Category Name	FY15 Enacted Appropriation	FY15 Actual Expenditure	FY16 Enacted Appropriation	FY16 Actual Expenditure	FY17 Enacted Appropriation	FY17 Estimated Maintenance	FY17 Estimated Expenditure	FY18 Governor's Proposed
Department on Aging	Direct Senior Services	Title III C-2 Home Delivered Meals Program	Services for Older Americans Fund	Federal Trust Funds	16,000,000	10,060,784	17,500,000	9,678,046	14,000,000	14,000,000	9,700,000	14,000,000
Department on Aging	Direct Senior Services	Home Delivered Meals (Non-Formula and Formula)	General Revenue Fund	General Funds	11,623,200	11,623,200	-	11,623,200	-	17,650,000	17,650,000	-
Department on Aging	Direct Senior Services	Home Delivered Meals (Non-Formula and Formula)	Commitment to Human Services Fund	General Funds	-	-	-	-	-	-	-	21,800,000
Department on Aging	Direct Senior Services	Nutrition Services Incentive Program*	Federal Funds	Federal Funds	8,500,000	6,504,700	8,000,000	6,944,000	7,000,000	7,000,000	6,945,000	7,000,000
Total					36,123,200	28,188,684	25,500,000	28,245,246	21,000,000	38,650,000	34,295,000	42,800,000

*Nutrition Services Incentive Program

Approximately 1/2 supports the HDM Program and 1/2 supports the Congregate Meal Program

Source: Illinois Office of Management and Budget, Illinois Department on Aging

Chart 12: The chart below reflects a preliminary review of SB 6. The chart demonstrates that funding was restored in FY18 and has been increased from FY15 levels.

Agency Name	Division Name	Appropriation Name	Fund Name	Fund Category Name	SB6-FY18
Department on Aging	Direct Senior Services	Nutrition Services Incentive Program	Services for Older Americans Fund	Federal Trust Funds	7,000,000
Department on Aging	Direct Senior Services	Title III C-2 Home Delivered Meals Program	Services for Older Americans Fund	Federal Trust Funds	14,000,000
Department on Aging	Direct Senior Services	Home Delivered Meals (Non- Formula and Formula)	General Revenue Fund	General Funds	21,800,000
Department on Aging	Direct Senior Services	Home Delivered Meals (Non- Formula and Formula)	Commitment to Human Services Fund	General Funds	
Total					42,800,000

Source: SB 6

Chart 13: The chart below reflects funding trends in Housing Assistance Programs from FY15 to FY17. It shows a reduction in “Actual Expenditures” general funds for Supportive Housing Services from FY15- FY16.

Appropriation Name	Fund Name	Fund Category Name	FY15 Enacted Appropriation	FY15 Actual Expenditure	FY16 Enacted Appropriation	FY16 Actual Expenditure	FY17 Enacted Appropriation	FY17 Est. Maintenance
Assistance for Homeless	Assistance to the Homeless Fund	Special State Funds	300,000	-	300,000	0	300,000	300,000
Emergency and Transitional Housing	Illinois Affordable Housing Trust Fund	Special State Funds	9,383,700	8,888,382	9,383,700	8,597,508	9,383,700	9,383,700
Homeless Youth Services	Illinois Affordable Housing Trust Fund	Special State Funds	1,000,000	981,840	1,000,000	865,230	1,000,000	1,000,000
Homeless Youth Services	General Revenue Fund	General Funds	4,494,600	4,315,147	0	0	0	4,550,000
Homeless Youth Services	Commitment to Human Services Fund	General Funds			0	3,685,216*	4,436,300**	
Homeless Prevention	General Revenue Fund	General Funds	1,000,000	1,000,000				
Homelessness Prevention	Illinois Affordable Housing Trust Fund	Special State Funds	3,000,000	2,993,759	3,000,000	2,435,429	4,000,000	4,000,000
Homelessness Prevention	Commitment to Human Services Fund	General Funds			0	0	975,000	
Housing for Families	Housing for Families Fund	Special State Funds	100,000		100,000	0	100,000	100,000
Supportive Housing Services	General Revenue Fund	General Funds	13,429,400	12,786,501	0	0	0	6,464,800
Supportive Housing Services	Commitment to Human Services Fund	General Funds			0	3,317,880*	6,964,600**	
Supportive Housing Services	General Revenue Fund	General Funds						
Grants for Supportive Housing	Health and Human Services Medicaid Trust Fund	Special State Funds	3,382,500	3,320,756	3,382,500	3,248,392	3,382,500	3,382,500
Total			36,090,200	34,286,385	17,166,200	22,149,655	30,542,100	29,181,000

Source: Illinois Office of Management and Budget, Illinois Department of Human Services; *FY16 services paid from FY17 Stop Gap Appropriations; **includes amounts used to pay FY16 expenditures

Chart 14: The chart below reflects a preliminary review of SB 6. While the Governor’s proposed FY18 budget proposed several cuts to programs, including cuts to the Homeless Prevention program, the newly adopted budget continues to fund the program. Funding in FY18 has increased by \$1,032,900.

Appropriation Name	Fund Name	SB-6 -FY17	SB-6 -FY18
Assistance for Homeless	Assistance to the Homeless Fund		300,000
Emergency and Transitional Housing	Illinois Affordable Housing Trust Fund		9,383,700
Homeless Prevention	General Revenue Fund	780,000	977,500
Homeless Youth Services	General Revenue Fund	3,768,800	4,550,000
Homeless Youth Services	Illinois Affordable Housing Trust Fund		1,000,000
Homeless Youth Services	Commitment to Human Services Fund		
Homelessness Prevention	Illinois Affordable Housing Trust Fund		4,000,000
Homelessness Prevention	Commitment to Human Services Fund		
Housing for Families	Housing for Families Fund		100,000
Supportive Housing Services	General Revenue Fund	8,456,600	13,429,400
Supportive Housing Services	Commitment to Human Services Fund		
Grants for Supportive Housing Services	Health and Human Services Medicaid Trust Fund		3,382,500
Total		13,005,400	37,123,100

Source: SB 6