



Children thrive when they have regular interactions with responsive, caring adults. Families experiencing significant stressors related to financial insecurity, housing instability, or the impact of systemic and interpersonal trauma can be overwhelmed with stress, interrupting those interactions. Families that are experiencing this overload of stress need support. Every day our staff members interact with children, families and young adults to support their basic needs, focus on their strengths and help them build resilience. During the past two years, our client families, our staff members and our communities have been tested by the challenges of the pandemic.

Together we have adjusted to a new way of working, being together and protecting one another, yet our core service remains the same:

Meaningfully engaging in a helping relationship that brings belief, hope and achievement of a better future.

In 2021, we touched the lives of 14,128 child, youth or family clients or participants. We did this across the state of Wisconsin from Rhinelander to Racine. A few highlights from our year include:

- Through targeted efforts to increase access to mental health services, we increased the total number of schools who we partner with in providing school-based mental health from 52 in 2020 to 67 in 2021.
- Since 2020, children and adolescents have experienced exposure to increasing amounts of community violence, which has heightened the demand for Project Ujima services. In 2021, nearly 500 families were referred to Project Ujima's comprehensive range of services to address the physical, mental, emotional and social impacts of violence.
- Our evidence-based Treatment Foster Care program grew, averaging an increase of 10 more youth in placement daily, giving a family setting to a youth whose special needs might cause them to be placed in congregate care.
- The Institute for Child and Family Well-Being, our partnership with the University of Wisconsin-Milwaukee, is entering the final year of the <u>Trauma and Recovery Project</u> grant. Over the first four full years of the project, they trained 169 Milwaukee and Racine-based clinicians in at least one of Parent-Child Interaction Therapy, Trauma-Focused Cognitive Behavioral Therapy or Child-Parent Psychotherapy.

In this annual report, you will learn more about each of our core program areas. Our work would not be possible without the trust of the communities and funders we serve, the support of our generous donors, and the strong commitment of our foster parents who open their homes, not only to the child or youth placed in their care, but also to that child or youth's family.

**David Whelan** 

Vice President, Child Well-Being **Bridget Clementi** 

Vice President, Community Health **Amy Herbst** 

Vice President, Mental and Behavioral Health

Army Herbsa-



# Children's Service Society of Wisconsin

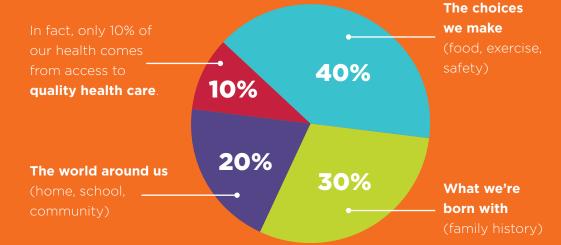
For more than 130 years, Children's Service Society of Wisconsin (CSSW) has changed the lives of children and families through effective, empowering programming that strives to build, sustain and enhance a nurturing environment for Wisconsin's children and youth. CSSW has evolved to become the largest not-for-profit, nonsectarian provider of community-based child and family services and child welfare services in the state. Our work is a key part of advancing Children's Wisconsin's vision for our state's children to be the healthiest in the nation.

CSSW's service providers positively impacted the lives of over 14,000 children and families in 2021 through our core service areas: community education and injury prevention, mental and behavioral health, family preservation and support, child welfare, and child advocacy and protection.

Our services, combined with the medical expertise of Children's Wisconsin, bring child health and welfare together to transform the health and well-being of children, families and communities — because kids deserve the best.

# Did you know?

Staying healthy is mostly about what happens outside the doctor's office.





# Statewide presence

### **Antigo**

N4013 US Hwy. 45 Antigo, WI 54409 (715) 627-1414

### **Baraboo**

626 14th St., Suite A Baraboo, WI 53913 (608) 356-3019

#### **Black River Falls**

W11109 Rogers Rd. Black River Falls, WI 54615 (715) 284-3001

### **Eau Claire**

2004 Highland Ave., Suite M Eau Claire, WI 54701 (715) 835-5915

#### **Elkhorn**

W4063 Hwy. NN Elkhorn, WI 53121 (262) 741-1440

#### Janesville

32 E. Racine St., Suite 190 Janesville, WI 53545 (608) 314-9006

# Kenosha

8207 22nd Ave., Suite 155 Kenosha, WI 53143 (262) 652-5522

6809 122nd Ave. Kenosha, WI 53142 (262) 653-2266

#### **Madison**

1716 Fordem Ave. Madison, WI 53704 (608) 221-3511

#### **Marshfield**

725 S. Central Ave. Marshfield, WI 54449 (715) 387-2729

#### Merrill

712 East 2nd St. Merrill, WI 54452 (715) 539-9228

### Milwaukee - 76th Street

Fair Park Business Center 620 S. 76th St., Suite 120 Milwaukee, WI 53214 (414) 453-1400

# Milwaukee Ascension Lutheran

1300 S. Layton Blvd., Room S-301 Milwaukee, WI 53215 (414) 294-3849

# Milwaukee - Sojourner Family Peace Center

619 West Walnut St. Milwaukee, WI 53212 (414) 277-8980

### **Milwaukee Visitation Center**

6737 W. Washington St., Suite 3115 Milwaukee, WI 53214 Reception A: (414) 337-4492 Reception B: (414) 337-4493

#### Neenah

325 N. Commercial St., Suite 400 Neenah, WI 54956 (920) 969-7955

#### **Racine**

8800 Washington Ave., Suite 400 Mount Pleasant, WI 53406 (262) 633-3591

#### Rhinelander

3716 Country Drive Rhinelander, WI 54501 (715) 361-6300

### **Stevens Point**

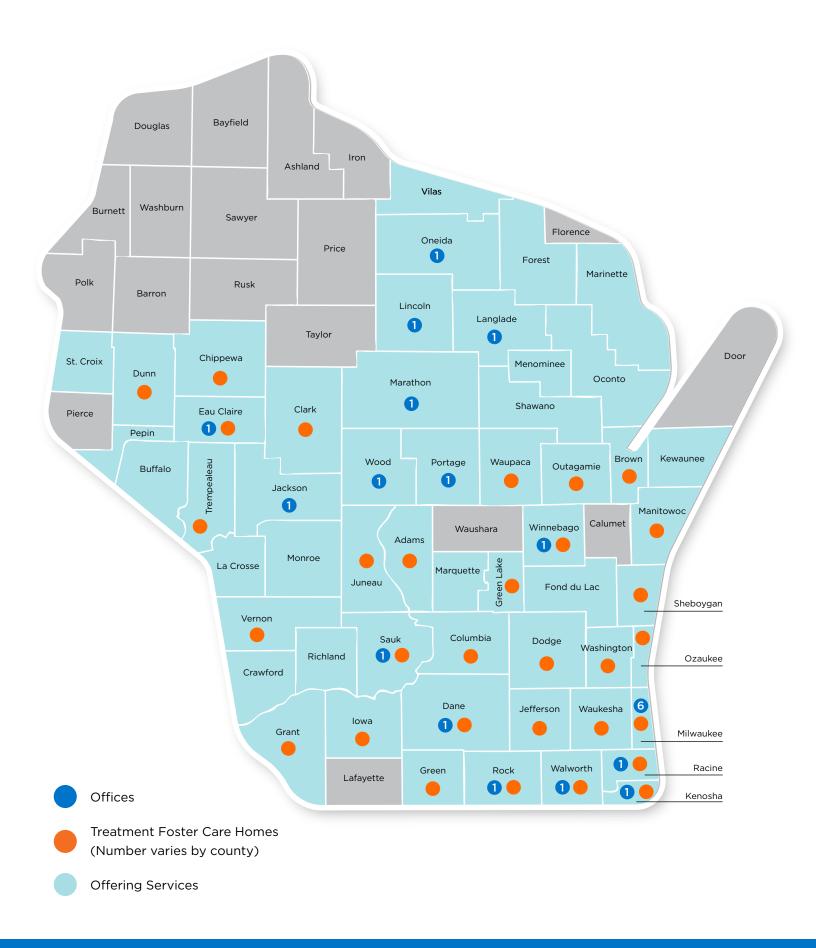
1466 Water St., Suite 2 Stevens Point, WI 54481 (715) 341-6672

#### Wausau

705 S. 24th Ave., Suite 400 Wausau, WI 54401 (715) 848-1457 Family Resource Center: (715) 845-6747

#### Wauwatosa

Woodlake III-Business & Tech. Ctr. 10200 W. Innovation Drive, Suite 350 Wauwatosa, WI 53226 (414) 337-1298





# Your support makes a difference

We're determined to make Wisconsin's children the healthiest in the nation, but we cannot do it alone. While we receive funding from government contracts, United Way and client fees, we could not continue providing many services without the generous support of individual, corporate and foundation donations. Critical services, such as mental and behavioral health care and Child Advocacy Centers, are only partially funded by sustainable revenue streams and depend on financial support from other sources. Your support helps us improve the health of our most at-risk children and families across the state.



# 2021 Financial results (pre-audit)

# **Operating revenue**

Service fees	\$4,568,143
United Way	\$1,533,186
Fundraising	\$2,479,257
Purchase of service	\$35,001,918
Other	\$69,613

Total operating revenue **\$43,652,117** 

# **Operating expenses**

Net nonoperating gain (loss) \$(5,082)			
Income (loss) from operations \$(8,871,942)			
	Total operating expenses <b>\$52,524,059</b>		
Other	\$1,637,475		
Institute for Child and Family Well-Being	\$408,237		
Child Advocacy and Protection	\$2,362,260		
Child Welfare	\$28,866,339		
Family Preservation and Support	\$7,973,380		
Mental and Behavioral Health	\$9,876,265		
Community Education and Injury Preven	tion \$1,400,103		

Excess (deficit) of revenue over expenses **\$(8,877,024)** 

# By the numbers

Community Education and Injury Pro	evention		
Project Ujima	_ 1,457	1,516	Families and
Volunteer Respite	59	1,510	kids served
Mental and Behavioral Health			
Includes individual counseling, psychological testing,		5,019	Families and
group counseling and school-based mental health		0,017	kids served
Family Preservation and Support			
Home Visiting and Healthy Start (early childhood services)	1,257		
Family Support, SEFEL, Early Childhood Connector Zone,			
Education and Employment Specialist programs,		2 001	Families and
and Youth Innovations	302	3,081	kids served
Family Resource Centers			
(including group-based programming and Triple P)	_ 1,522		
Child Marks			
Child Welfare			
Ongoing services	_ 1,282		7(0)
In-Home services	120		
Project Home	86	2 002	Families and
Respite	990	3,293	kids served
Public adoption	346		
Treatment and regular foster care	225		
Supervised visitation and visitation centers	244		
Child Advocacy and Protection		1 210	Families and

Children's Wisconsin also provides mental and behavioral health and child advocacy and protection services that are not reflected above.

Includes services provided at Child Advocacy Centers



# Community Education and Injury Prevention

Factors outside the doctor's office impact a child's health — from home, school and neighborhood environments to choices about food, exercise and safety. That's why Children's Wisconsin embraces opportunities to reach and support families outside of medical settings. Community Health and Education programs and services strive to improve the health of children, families and communities.

**Volunteer Respite** provides a much-needed break for families caring for medically fragile children. These caregivers are under tremendous daily stress as they juggle complex medical interventions and advocate for their child with other demands of life. Through regularly scheduled events that include a full day of fun activities for children with special needs, the Volunteer Respite program gives parents or caregivers an opportunity to recharge and refresh, ultimately strengthening the entire family.

**Project Ujima** aims to stop the cycle of community violence by supporting youth and families on their journey of healing and recovery. When patients are admitted to Children's Wisconsin Emergency Department and Trauma Center for an injury due to violence, program staff members are swiftly engaged to support the youth and their families through this traumatic experience. This voluntary, family-centered program offers a wide variety of services and resources, including crisis intervention and case management, mentoring, and mental health and medical services over approximately 18 months. This transformative program has been shown to increase participants' resilience and reduce their risk of reengaging in violence.

Prevent Child Abuse Wisconsin (PCAW)'s mission is to build community resources, provide training and public awareness, and advocate to strengthen child abuse prevention efforts. As a result of the ongoing pandemic, the 2021 Together for Children conference was switched to a virtual format. Over 4 days, 487 individuals participated in the virtual conference. This format featured three keynote sessions and 22 breakouts sessions on topics including: Let's Talk about Race and Corporal Punishment, Navigating the Overwhelmed, Child Maltreatment Prevention Efforts, Implicit Bias, Keeping Families Together and Promoting Mental Wellness in Communities of Color. PCAW continues to provide materials for parents to connect with their children, including Warm Fuzzy & Kids Coupon Books, Family Fun Calendars, Bookmarks and Words Every Child Needs to Hear. The month of April is designated as Child Abuse and Neglect Prevention Month. In partnership with the Department of Children & Families (DCF) and the Child Abuse and Neglect Prevention Board (CANPB), PCAW produces a Child Abuse & Neglect Prevention Month Toolkit to help individuals, organizations and communities promote healthy families and positive child development. Throughout the year, our team also trained professionals in the administration of the Ages and Stages Questionnaire for early childhood development and social-emotional development with families.

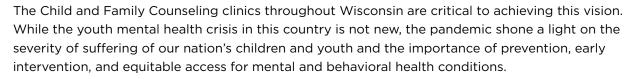
Awareness to Action (A2A) trains youth-serving organizations to develop policies and procedures to prevent child sexual abuse. In 2021, staff members trained over 150 employees from organizations throughout Wisconsin to enhance their organization's ability to protect children participating in their programming. A2A also coordinates Stewards of Children™, a child sexual abuse prevention curriculum that teaches adults how to prevent and respond to child sexual abuse. In 2021, over 200 adults attended this training.

# Counseling – Mental and Behavioral Health

Our vision is that every child and teenager in Wisconsin will receive the right support for their developmental, mental and behavioral health at the right time in order to grow up healthy and thriving.

Achieving this vision depends on investment in four areas of strategic intent:

- 1. Early detection and prevention
- 2. Stigma reduction
- 3. Increased and equitable access
- 4. Research and education



In 2021, the Mental and Behavioral Health team completed 22,000 telehealth visits with kids across the state. As in-person visits gradually resumed last year, telehealth still accounted for a significant number of the mental and behavioral health appointments. Additionally, we began placing child and family therapists in **Children's Primary Care clinics** in southeast Wisconsin to serve more kids in care closer to home locations and remove barriers to accessing mental health care.

The **Therapist Fellowship Program** trains the next generation of pediatric therapists by hiring trainees (fellows) and providing them the experience and training needed to earn their license, ideally within two years. Since the Therapist Fellowship Program launched in July 2019, six of the fellows have completed the program and have moved into full-time positions across the state. An additional 21 fellows are in the program and will be entering the workforce in the upcoming two years. As of 2021, the fellowship has served over 1,000 families in more than 14,000 sessions.

The **Early Childhood Mental Health Program** promotes social and emotional well-being and healthy development in children under 6 years old by providing culturally responsive care that focuses on nurturing caregiver relationships. In 2021, this team grew by 11 early childhood mental health therapists in six of our outpatient clinics across the state. This team provided over 5,500 visits to young children and their caregivers across Wisconsin in 2021. Additionally, seven therapists received intensive training in early childhood and family mental health to continue building expertise in providing the best and most current evidence-based interventions with young children and their caregivers.

Our **School-Based Mental Health Program** partnered with over 65 schools across Wisconsin in 2021, providing individual, group and family therapy to students as well as education and consultation to teachers, staff and caregivers. For the 2020/2021 school year, the school-based mental health team provided 7,000 therapy sessions, 1,036 parent consultations and 969 teacher consultations. The majority of school staff surveyed agreed that having school-based mental health services has helped them be more aware of the impact of trauma on their students, and teachers reported that students who received mental health services through the Children's Wisconsin program showed improvement on a standardized mental health outcome measure.



# Family Preservation and Support

information and resources to callers over the phone.

Our statewide family preservation and support programs promote safe and stable families in a variety of ways. Our **Home Visiting** programs work individually with pregnant and parenting women and families by providing information, resources, support and education. We follow evidence-based models such as Healthy Families America, Parents as Teachers and Nurturing Parent.

Partnering with the Black Child Development Institute of Milwaukee, we established a Community Action Network that includes Health Start grant partners, community stakeholders and Healthy Start program participants working to create community-level change on health disparities for African Americans in Milwaukee County. **Healthy Start** is a federal grant-funded program aimed at eliminating health inequities for African American women and children with the goals of reducing infant mortality, increasing access to early prenatal care and removing barriers to health care access. The program uses maternal health navigators to support Milwaukee County families by promoting and enhancing physical and behavioral health, helping address basic needs and providing community resources for concerns like family violence.

Our **Family Resource Centers** provide parents and caregivers with empowering information and support programs — all free of charge to families — to promote the healthy growth and development of children and strengthen family relationships. All Family Resource Centers facilitate parent education classes that follow evidence-based models such as ACT Raising Safe Kids, Triple P or Nurturing Parent. Our Play and Learn classes follow the Wisconsin Model Early Learning Standards. Most centers also offer parenting phone support, delivering tailored and confidential parenting

Maya is a 19-year-old mother to her 1½-year-old girl, Kenzie (names changed for privacy). Maya enrolled in Healthy Families Milwaukee

County during her pregnancy and has been an active participant ever since. Maya grew up in multiple group homes and has opened up about her traumatic childhood experiences, some of which Maya has only recently learned about. Maya's home visitor helps Maya reflect on her childhood and how these experiences shape her parenting.

For a period of time, Maya's home visitor was unable to engage Maya in regular visits. Her home visitor continued to reach out to Maya and provide support by bringing needed items to Maya's residence and connecting over video. Maya then reengaged in visits but was struggling silently. Maya eventually opened up to her home visitor that she was involved in a physically abusive relationship. Maya expressed fear for her own and her daughter's safety and filed a restraining order. Maya's home visitor safety-planned with Maya and affirmed her parenting behaviors. With incredible strength, Maya continues to navigate unwanted communication, threats, court dates, feelings of guilt and trauma from the abuse she experienced. Maya's home visitor supported Maya as she dealt with relationship concerns and had to make difficult decisions about the father of her child. Maya's home

visitor referred Maya to Sojourner Family Peace Center and, with support from the Healthy Start Program, she was connected. Maya and Kenzie moved into the shelter and Maya engaged in all of the support that was offered. Maya becomes emotional while describing the pain she has experienced. Maya previously questioned if she made the right decision, but now states that she does not deserve this treatment and that this wasn't her fault.

After a couple of months, Maya was thrilled to move out on her own! Unfortunately, Maya had to leave most of her belongings at her first apartment. This worker assisted Maya in getting needed household and safety items using her flex funds and the Robyn's Nest. Maya also connected with St. Vincent de Paul for assistance with furniture.



Maya knew that she wanted to support her family through employment but was uneasy with the idea of sending Kenzie to daycare someday. Due to physical and sexual abuse experienced during her childhood, Maya feels extra protective over Kenzie and struggles with her ability to trust people. Maya made it a goal of hers to enroll Kenzie in daycare and over the course of a year, Maya's home visitor helped Maya to reflect on caregivers who were not protective of her during her own childhood, and how this leads to apprehension while she parents. This worker assisted Maya in recognizing her protective capacities and Maya now feels confident that she is making decisions to protect Kenzie.

Maya turned her focus to finding employment and her home visitor assisted Maya in locating opportunities. Maya faced barriers to achieving her

employment goal, including lack of transportation, finances and hesitations about leaving Kenzie. Maya was successful in finding a job and in May 2021, Maya updated that Kenzie is enrolled in daycare! Her home visitor celebrated Maya's accomplishment and talked with Maya about her progress toward achieving this goal. Maya likes the daycare staff and stated that Kenzie has a great time playing with the other children. Kenzie is still enrolled at this daycare and Maya stated that she feels at peace.

Maya sometimes becomes emotional when sharing how difficult it is to parent Kenzie and navigate life without the support of family. Her home visitor assists Maya in recognizing her successes and envisioning what she would like her life with Kenzie to look like. Maya has recently attended a Mom's Group session and her home visitor continues to consider ways to help Maya build her positive support system. Maya has struggled with her mental health throughout her life and is open to sharing her experiences with her home visitor. Maya makes an effort to utilize her coping strategies, including art and journaling, and her home visitor engages Maya in positive psychology activities. Maya smokes tobacco products as a coping mechanism but shared that she would like to quit for her own and her daughter's safety. Her home visitor referred Maya to First Breath and Maya has engaged in this program.

It is a joy to watch Maya parent Kenzie. Maya's home visitor accentuates Maya's ability to empathize with Kenzie and remain curious about what her daughter is thinking. Maya takes breaks when needed and regulates her own emotions while responding to Kenzie. Maya shared that she used to not like to talk about her past, but now uses it as motivation for her future. While enrolled in this program, Maya has also graduated from high school and earned her driver's license. Maya is motivated and considers Kenzie's happiness and well-being with every move she makes. Maya shared that she always feels better when Kenzie talks and laughs and stated, "I enjoy everything about her."

# Child Welfare

Children's is committed to ensuring that every child has a safe and stable home. To advance that goal, we provide an array of child welfare services in Milwaukee County under a state contract administered by the Division of Milwaukee Child Protective Services. Our primary charge is to ensure child safety, permanency and well-being. Our child welfare services are guided by our family-centered practice: Our priority is to keep families intact and maintain family connections.

Our **In-Home Services** (IHS) program partners with families to ensure child safety in the home while simultaneously providing services to enhance parents' protective capacities. Families in our **Ongoing Services** (OGS) program are served under the jurisdiction of the Milwaukee County Children's Court, with the goal of reunifying families as quickly and safely as possible. When children need to be placed in out-of-home care, we prioritize placement with biological family members; however, when that is unable to occur, our foster care licensing and placement program matches children to caregivers equipped to meet their needs. Our **Family Support** program works closely with our IHS and OGS programs to support in-home safety plans and timely reunification of parents and children when separated. Our trauma-informed, evidence-based services focus on safety measures, parenting education, mentoring and strengthening family interactions.

Our statewide **Treatment Foster Care** program (TFC) is designed to address the comprehensive well-being needs of children. Offered throughout Wisconsin's 72 counties, our TFC program is a community-based, child-centered, family-focused approach that provides out-of-home care placement and services for those children and youth who have significant special needs that require specialized treatment services beyond the scope of basic foster care.

The TFC program is a certified provider of the evidence-based TFC model Together Facing the Challenge. This model, researched during a multiyear study conducted through Duke University, found that the three factors largely responsible for helping children in treatment foster care succeed are:

- Supportive and involved relationships between TFC social workers and treatment foster parents
- Effective use of trauma-informed behavior management strategies by treatment foster parents
- Supportive and involved relationships between treatment foster parents and the youth in their care

Through a seven-session curriculum and home-based 1:1 coaching exercises and tools, this model supports relationship development and teaches effective trauma-informed behavior management strategies to bring practical solutions to everyday problems. To evaluate model effectiveness, the TFC Program implemented the use of the Child-Parent Relationship Scale in 2019. The Child-Parent Relationship Scale is a self-report instrument completed by foster mothers and fathers that assesses parents' perceptions of their relationships with their foster child.

Through our contract with the Wisconsin Department of Children and Families, Children's offers **public adoption** programming to 18 Wisconsin counties. The primary goal of our adoption program is to provide all foster children who are in need of a permanent home with an adoptive family that will offer them:

- The rights and protections that are derived from a legal parent-child relationship
- The opportunity to experience the emotional security, growth and development resulting from sound family relationships
- The social status and identity derived from being part of a family entity
- The protection, nurturing and care necessary for physical growth, development and well-being

# Child Advocacy and Protection Program

The **Child Advocacy and Protection Services** (CAPS) program at Children's Wisconsin is a national leader in child abuse pediatrics and child advocacy. Our CAPS program is the nation's largest hospital-based network of Child Advocacy Centers (CAC). All seven centers are accredited by the National Children's Alliance. The program also includes 3 medical satellite offices and a hospital-based advocacy team.

Our CAPS program is a team of medical professionals, forensics interviewers, advocate case managers, therapists and our support staff members, who work together to ensure that the evaluation of an abuse allegation minimizes the re-traumatization of a child. We collaborate closely with law enforcement and Child Protective Services to ensure, as often as possible, that a child only has to be seen and tell their story once. Our work helps to start the healing process for children and their caregivers.



A CAC's mission is to promote and foster safety, healing and justice for children and families. Without effective therapeutic intervention, many children who have experienced trauma may suffer ongoing or long-term adverse social, emotional, developmental and health outcomes.

In 2021, the CAPS program partnered with Children's Mental and Behavioral Health team to begin exploring ways to integrate therapists at each Child Advocacy Center. Our goal was to provide crisis intervention, mental and behavioral health screenings, and supportive services for child victims of abuse while they were still at the CAC. Through this collaborative effort, a plan was developed to hire at least one behavioral health consultant (BHC) to support each CAC. The BHC will, for example, conduct screening and assessments, provide short-term interventions for children and families, provide consultative support to the CAC team and multidisciplinary partners, and arrange for therapy services or urgent or emergency care, as indicated.



# Minimizing trauma

The Child Advocacy and Protection Services (CAPS) program uses a victim-centered, strength-based approach to prevent re-traumatizing children and caregivers. Evidence-based treatments and other practices with strong empirical support help reduce the impact of trauma and the risk of future abuse and other negative consequences. Our therapists provide early intervention services and coordinate with our advocate case managers to make referrals for other needed services.

A young child seen at the Kenosha Child Advocacy Center for a medical evaluation and forensic interview received a referral for counseling services with our therapist. The young child had a lot of loss and transitions over the last year. After the CAC visit, he had become selectively mute; he talked at home with his family, but not outside of the home. Our therapist worked with him for a few months and taught him how to collage. In her words: "I showed him how he could rip up pictures in magazines and use the color to make a whole new picture. I think he finds the tearing apart and putting back together cathartic. He comes to our sessions each week with a new piece. The pictures often are a transition from dark to light colors. This is the first piece he let me keep. Since he doesn't communicate with me verbally, his artwork has become a way we can connect each week. He looked so proud when he saw me hang it up in my office."

These steps of healing are possible through attention to the immediate and long-term needs of every child who comes to the CAC.





# Institute for Child and Family Well-Being

# 2021 Annual Report

The mission of the **Institute for Child and Family Well-Being** is to improve the lives of children and families coping with an overload of stress by implementing effective programs, conducting cutting-edge research, engaging communities and promoting systems change. The Institute for Child and Family Well-Being is a unique community-university partnership between Children's Wisconsin and the Helen Bader School of Social Welfare at the University of Wisconsin-Milwaukee.

2021 presented meaningful opportunities and shifts in our national conversation regarding racial equity, income inequality, and child and family well-being. In response, we developed a new strategic direction that would align our energy, knowledge and resources with emerging evidence and community needs. After extensive research and team, affiliate and community engagement and feedback, we determined that our greatest potential for impact centered on strengthening families and communities to ultimately reduce family separations for reasons of neglect.



# 2021 Spotlight:

# Strong Families, Thriving Children, Connected Communities initiative

Neglect is cited as the primary or contributing reason for 68% of family separations into foster care in Wisconsin. Neglect represents a constellation of issues, the root causes of which are often concurrent challenges ranging from parent trauma history, substance use disorders and untreated mental health to systemic challenges such as substandard housing, underemployment or unemployment, or a lack of community resources. Family separations for reasons of neglect are also disproportionately impacting children of color, as they make up about 31% of Wisconsin's overall child population, but

56% of the foster care population.

The goal of the **Strong Families, Thriving Children, Connected Communities**(SFTCCC) initiative is to reduce the number of family separations for reasons of neglect by building a community focused on collaboratively pursuing policies and practices that support overloaded families and address systemic failings.

SFTCCC is a developmental strategy, guided by our core principles, that allows for tactics to be developed and adapted over time, based on lessons learned, stakeholder feedback and emergent opportunities. This approach can result in multiple concurrent activities across the three core phases of Building a Shared Understanding, Implementing a Critical Path Strategy, and Advancing Innovation, Systems, and Policy Solutions. SFTCCC will move forward by bringing together professionals from across sectors, community stakeholder researchers and people with lived experience to provide scaffolding for change.

SFTCCC is uniquely positioned to engage communities from across the state in this effort, as Children's Wisconsin has a statewide presence and network that provides a wide range of services. Those existing relationships in diverse communities provide an opportunity to develop a shared understanding of neglect that acknowledges conditions specific to a community, while also drawing out themes that can bring stakeholders from around the state together to share innovations and best practices, as well as advocate for policy change focused on family preservation.

# **PLAN**

Build shared understanding.

Build consensus around shared language for the root causes that impact families, systems and the decisions that may lead to family separation.

# Objectives:

- Create new connections and develop deeper relationships with academic, communitybased and lived experience partners across systems by elevating insights and promising approaches to addressing neglect.
- Identify and develop critical pathways that lead to the reduction of family separation for reasons of neglect.

### ACT

Implement critical path strategy.

Build trust and alignment among people with lived experience and professional partners to create equity, address systemic racism and identify solutions.

#### Objectives

- Identify and engage systems actors to develop Critical Path teams around a common agenda.
- Elevate and utilize the voices of people with lived experience in learning and solution development.

# **EVALUATE**

Advance innovation, system and policy solutions.

RESEARCH & EVALUATION

Provide the scaffolding for social innovation and apply the best available evidence from research and practice to prevent family separation for reasons of neglect.

#### Objectives

- Elevate and utilize the voices of people with lived experience in program design and implementation.
- Address overloaded families' unmet needs within each Critical Pathway by improving economic and social supports through the design and implementation of evidencebased and -informed models.



### **SFTCCC in Action**

Mobility Mentoring® is a science-based approach to support family-led goal attainment with a primary goal of economic mobility out of poverty developed by EMPath. Mobility financial independence through the Bridge to Self-Sufficiency. In partnership through the Children's Home Society of America/EMPath learning cohort, Children's Wisconsin is integrating the Mobility Mentoring® program into existing Home Visiting, Employment and Education Services, and Family Support.

#### Other notable ICFW efforts in 2021 included:

- Led a Translational Design Workshop with Children's Wisconsin champions representing all Child Well-Being programs to design program- and department-wide policy and practice recommendations that center family voice in program design, implementation and improvement processes.
- Conducted final adaptation and testing of Parenting with P.R.I.D.E., our 8-week virtual therapy group for parents/caregivers and a child in their care, so that it could be implemented more widely within our Children's Wisconsin Child and Family Counseling programs.
- We entered our final year of the Trauma and Recovery Project and have exceeded our five-year goals of training clinicians in trauma-informed, evidence-based interventions. Over the first four full years of the project, we trained 169 Milwaukee and Racine-based clinicians in at least one of Parent-Child Interaction Therapy, Trauma-Focused Cognitive Behavioral Therapy, or Child-Parent Psychotherapy. Through that training and ongoing consultation, Children's Center of Excellence has provided those therapies to over 100 children and families, while also screening over 1,800 kids for trauma in year 4 of the grant.

If you'd like to get involved with SFTCCC, sign up here.

Sincerely,



Gabriel McGaughey, MSSW Co-director gmcgaughey@childrenswi.org



Josh Mersky, PhD Co-director mersky@uwm.edu



# Children's Wisconsin Board of Directors

**Patrick Hammes, Board Chair** 

Hammes Partners

**Mark Witt, Board President** 

Godfrey & Kahn SC

**Todd Adams** 

Zurn Corp.

**Tom Arenberg** 

Accenture LLP

**Linda Benfield** 

Foley & Lardner LLP

**Ken Bockhorst** 

Badger Meter, Inc.

**Tina Chang** 

SysLogic, Inc.

**Matt D'Attilio** 

Pegasus Partners, Ltd.

**Todd Endres** 

Charter Manufacturing

**Nancy Flores** 

McKesson Corp.

**Michelle Gass** 

Kohl's, Inc.

Joe Gehrke

Kesslers Diamonds Center, Inc.

**Tim Gerend** 

Northwestern Mutual

**Kelly Grebe** 

Community Leader

**Eve Hall** 

Milwaukee Urban League

Jason Jarzembowski, MD

Children's Specialty Group

**Christopher Kaltenbach** 

Lesaffre Corp.

Joseph Kerschner, MD

Medical College of Wisconsin

Paul Knoebel

Knoebel & Associates, Inc.

**Michael Lovell** 

Marquette University

**Dave Margolis, MD** 

Children's Wisconsin

Tim Martin, MD

Children's Wisconsin

Ben Melson, MD

**Anderson Cancer Center** 

Keith Oldham, MD

Children's Wisconsin

Jim Popp

Johnson Financial Group

**Thomas Precia** 

HUB International Ltd.

**Jaime Purko** 

SKYGEN USA

John Raymond, Sr., MD

Medical College of Wisconsin

**John Reichert** 

Reinhart Boerner Van Deuren SC

**Rolando Rodriguez** 

Marcus Theatres

**Peggy Troy** 

Children's Wisconsin

**Dave Werner** 

First Midwest Bank

**Phoebe Williams** 

Marquette University Law School

# Children's Service Society of Wisconsin Board of Directors

# **Peggy Troy, Board Chair**

President and CEO Children's Wisconsin

### **Bob Duncan, Board President**

Executive Vice President Children's Wisconsin

## **Marc Cadieux, Board Treasurer**

Chief Financial Officer Children's Wisconsin

# **Michelle Mettner, Board Secretary**

Chief Government and Legal Officer Children's Wisconsin

# Chief Administrative Personnel

### **Bob Duncan**

**Executive Vice President** 

### Smriti Khare, MD

Chief Mental and Behavioral Health Officer

### **Bridget Clementi**

Vice President, Community Health

# **Amy Herbst**

Vice President, Mental and Behavioral Health

### **David Whelan**

Vice President, Child Well-Being

### **Bob Rohloff, MD**

Medical Director, Health Management and Community Services



Children's Wisconsin PO Box 1997 Milwaukee, WI 53201-1997

childrenswi.org