



Kids deserve the best.

Children's Service Society of Wisconsin

**ANNUAL REPORT 2023** 

## 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 the Children's Wisconsin vision for our state's children to be the healthiest in the nation.

CSSW's service providers positively impacted the lives of over 18,000 children and families in 2023 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.

### Dear friends and supporters,

As we reflect on 2023, I am filled with immense pride and gratitude for the remarkable accomplishments and unwavering dedication of the Children's Service Society of Wisconsin community. This year has been a testament to our collective resilience, innovation and steadfast commitment to the well-being of children and families across our state.

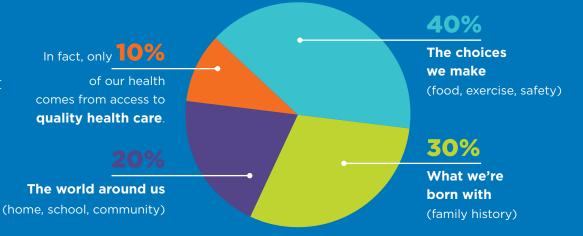
As a member of Children's Wisconsin, we care for every aspect of a child's health. This includes their physical, social and mental well-being. Our vision, that Wisconsin's kids will be the healthiest in the nation, is aspirational, and our mission to provide care, advocacy, research and education for and with client families has never been more critical. In the service of our bold vision and vital mission, our teams continued to adapt our programs and services to meet the evolving needs of those we serve. Their dedicated efforts throughout 2023 ensured that we were able to continue to provide essential support and resources, empowering families to build brighter futures.

### In 2023, our teams had many successes:

1. Expansion of mental health services Recognizing that the nation is experiencing a youth mental health crisis, we have expanded our services to reach more children and adolescents. Our initiatives included expanding mental health consultant services in community-based programming, integrating mental health services in our foster care work and expanding school-based mental health services. Making mental and behavioral health services available in places where children and youth are has allowed us to provide timely

### Did you know?

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



and accessible care, ensuring that mental health remains a priority in all aspects of our continuum of care.

### 2. Strengthening family support programs

This year, we have enhanced our family support programs by offering a wider range of resources, from parenting classes to economic support programming, including Mobility Mentoring, an evidence-informed model that supports moving a family from economic uncertainty to economic stability. These programs are designed to equip families with the tools they need to help their children thrive by increasing parenting knowledge of normal child development, supporting parents in developing the skills needed to parent successfully and sharing a vision of hope that supports a parent's motivation for their children to have a better life than they may have had. No different from any of us, our clients and program participants all want something better for their kids.

- **3. Community partnerships** Collaboration is at the heart of our work. We have deepened our partnerships with schools, health care providers and community organizations to create a more integrated support network for children and families. These partnerships have been instrumental in addressing the multifaceted needs of those we serve.
- **4. Advocacy and awareness** Our advocacy efforts have amplified the voices of children and families, influencing policies that prioritize their well-being. Through community outreach and

public education campaigns, along with dialogue with policymakers, we have raised awareness about critical issues, such as child abuse prevention, mental health and family stability.

**5. Volunteer and donor engagement** The generosity of our volunteers and donors has been nothing short of inspiring. Their contributions have enabled us to expand our reach and impact, providing vital resources and support to those in need. We are deeply grateful for their unwavering commitment to our mission and our work.

As we look ahead, we remain dedicated to innovating and evolving our services to meet the changing needs of our communities. We are committed to creating a future where every child and family has the opportunity to thrive, and where kids and families can find strength and resilience in the compassion and support of the people, organizations and communities around them.

Thank you for your continued trust and partnership. Your support is the cornerstone of our success. Together, we are making a profound difference in the lives of countless children and families across Wisconsin. I am honored to lead an organization with such a passionate and dedicated community.

With heartfelt gratitude,

### **Karen Timberlake**

President,

Children's Service Society of Wisconsin



### Statewide presence (as of Dec. 31, 2023)

### **Antigo**

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

### **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

503 S. Cherry Ave., Suite 4 Marshfield, WI 54449

### Central Avenue Clinic

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

### Merrill

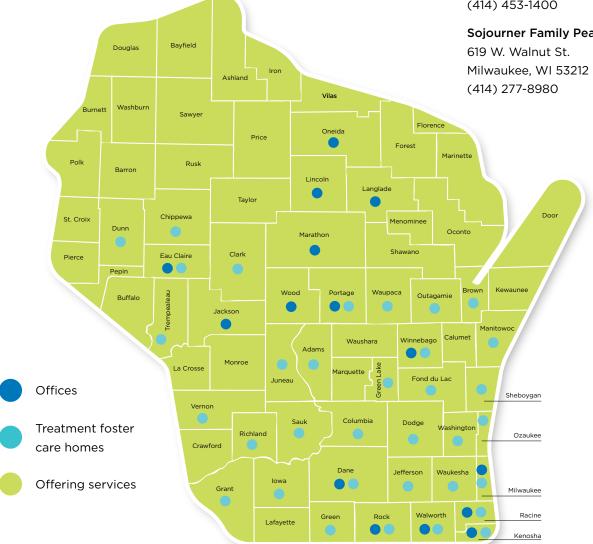
712 E. 2nd St. Merrill, WI 54452 (715) 539-9228

### Milwaukee

### 76th Street

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

### Sojourner Family Peace Center



### Neenah

333 N. Commercial St., Suite 400 Neenah, WI 54956 (920) 967-9127

### Racine

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

### Rhinelander

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

### **Stevens Point**

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

### **Taylor**

N7532 County Road P Taylor, WI 54659 (715) 670-1378

### Wausau

705 S. 24th Ave., Suite 400 Wausau, WI 54401 (715) 848-1457



For a current list of services provided at each location, please see **childrenswi.org/locations**.

## By the numbers

Community Education and Injury Prevention	<b>1,646</b> families and kids served
Project Ujima	
Mental and Behavioral Health	<b>7,168</b> families and kids served
Includes individual counseling, psychologroup counseling and school-based me	
Family Preservation	5,598
and Support	families and kids served
Home Visiting and Healthy Start (early childhood services)	982
Family Support, SEFEL, Early Childhoo Connector Zone, Education and Emplo Specialist programs, and Youth Innovat	yment
Family Resource Centers (including group-based programming and Triple P)	4,198
Child Welfare	2,585 families and kids served
Ongoing services	
In-home services	125
Project Home	82
Respite	319
Public adoption	421
Treatment and regular foster care	260
Supervised visitation and visitation cen	ters208

Includes services provided at Child Advocacy Centers

Child Advocacy and Protection



### 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.



## 2023 Financial results (pre-audit)

### **Operating revenue**

Service fees	\$8,338,207
United Way	\$1,795,665
Fundraising	\$4,668,186
Purchase of service	\$42,513,730
Other	\$82,221

Total operating revenue **\$57,398,009** 

### **Operating expenses**

Community Education and Injury Prevention	\$2,484,150
Mental and Behavioral Health	\$16,599,150
Family Preservation and Support	\$8,995,552
Child Welfare	\$35,072,542
Child Advocacy and Protection	\$1,935,997
Institute for Child and Family Well-Being	\$436,776
Other	\$1,001,483

Total operating expenses \$66,525,649

Income (loss) from operations \$(9,127,640)

Net nonoperating gain (loss) \$(122,548)

Excess (deficit) of revenue over expenses \$(9,250,188)

## 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

"I'm extremely grateful for Project Ujima, they are literally my angel here on Earth. They called at the exact time when I needed it and listened patiently to me for over an hour, with a compassionate heart. They will always hold a special place in my heart for that moment."

### - Project Ujima client

are admitted to Children's Wisconsin Emergency
Department 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 12-15 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 for programs that strengthen and support families to reduce child abuse and neglect. The 2023 Together for Children conference was held in person and live streamed for three days with 268 professionals attending in person and another 150 participants virtually. Seminars offered topics focused on children's mental health and working more effectively with diverse populations. Two keynote presentations focused on what professionals should know about sex offenders and how to broaden our perspective about community conditions that strengthen families. Twenty breakout sessions were offered on diverse topics, including Wisconsin drug trends, how to prevent burnout, youth justice and mindfulness, and the power of collaboration with lived experience.

PCAW continues to provide materials for parents to connect with their children. These can be accessed by families on <u>PCAW's website</u> or by professionals working with families, which includes Children's clinics, community Family Resource Centers and home visitation programs. Materials available include culturally diverse coloring sheets, Warm Fuzzies and Kid Coupons, and a Family Fun activity book.

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In 2023, PCAW continued to promote April as Family Strengthening Month. In partnership with the Department of Children and Families (DCF), the Child Abuse and Neglect Prevention Board (CANPB) and other state partners, PCAW produced a Family Strengthening Month Toolkit to help individuals, organizations and communities promote the importance of strengthening and supporting kids and families.

Awareness to Action (A2A) addresses the epidemic of child sexual abuse by changing the conditions in which children live, learn, play and grow. This primary prevention occurs through enhancing adults' understanding of risk for child sexual abuse and empowering them to take attainable actions toward prevention. A2A conducts workshops and provides technical assistance for youth-serving organizations to implement best-practice policies and procedures that address the risk of harm occurring in the organization. Changing the way that programs and organizations operate places child safety at the center of what they do.

In 2023, A2A trained 14 individuals representing eight organizations in their "Preventing Child Sexual Abuse in Organizations: Policy and Procedure Training." Five Child Advocacy Centers and three churches now have a plan to increase safety in their programs! A2A also provided ongoing technical assistance to 10 Family Resource Centers (FRCs), including a Children's Wisconsin FRC, implementing their child safety plans as part of the FRC accreditation process. Additionally, six virtual Community of Practice sessions were hosted by A2A, allowing over 80 participants to converse on primary prevention strategies across the six sessions. Striving to expand and strengthen statewide partnerships, A2A continued working with the Department of Corrections - Sex Offender Registry on a collective impact strategy to enhance the health, safety and well-being of Wisconsin children, families and communities. Other partners involved in the A2A program and steering committee include the Wisconsin Departments of Justice, Public Instruction, Children & Families, Health Services, the Supporting Families Together Association and Wisconsin Coalition Against Sexual Assault. Our funding partner is the Child Abuse and Neglect Prevention Board.



# Community Education and Injury Prevention: PROJECT UJIMA

Paula Roberts, Community Health Care Integration Director

Client entered the Project Ujima program in late March 2023 through a referral from the Milwaukee Homicide Review Commission (MHRC) due to the homicide of her son.

Upon completing her enrollment, client spoke a lot about her financial situation and about how she is homeless. Client and her spouse are staying in a studio apartment with her spouse's brother. She is not working because of many things, a few crime victim advocates (CVAs) can remember is chronic obstructive pulmonary disease (COPD), mental health and some physical disabilities. She spoke about how she has not been eating or sleeping since the incident, but before that she wasn't eating much because of lack of money. She also has many medications she is supposed to be taking but can't, due to her not eating. She says she has tried to get Supplemental Security Income (SSI) but keeps being denied. Her spouse is working but works through a temp agency, so hours are limited.

Client mentioned there is no other family support, but she does have a best friend of about 45+ years.

The CVA referred this client to mental and behavioral health for services. The mental and behavioral health team discussed and it was decided client was a good fit for services. Fast forward eight months and client has successfully completed many of her goals:

- Made an appointment for a new psychiatrist and continues to keep all appointments
- Referred client to Outreach Community Health Center for SSI/ Social Security Disability Insurance (SSDI) Outreach, Access, and Recovery (SOAR) program for a benefit specialist to assist her in applying for SSI/SSDI benefits
- Client self-advocated to call and request enrollment in Milwaukee County Comprehensive Community Services (CCS)
- Attends Grief Support Group meetings
- Attended the Memorial Brunch 2023

It is clear by all of her completed goals that the client was very motivated and determined in her journey of grief and healing. Without the support of Project Ujima and the mental behavioral health team, this client would not be where they are today.

To learn more about the work of Project Ujima or to volunteer with the organization, visit the Project Ujima page at **childrenswi.org** or call (414) 266-2557.



### Mental and Behavioral Health

The Children's Wisconsin mental and behavioral health (MBH) 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. We are focusing our work on four major strategies to advance this vision: early detection and prevention, reducing stigma, increasing and creating equitable access, and advancing research and education. The Children's Wisconsin 2027 strategy commits us to advancing every aspect of child and adolescent health, including mental health. Our investment in child and adolescent mental and behavioral health demonstrates our commitment to transform whole child and adolescent health by wrapping mental health resources around all of the work that we do across Children's Wisconsin. This allows us to identify and detect mental health concerns, regardless of where a child is treated and oftentimes sooner, providing families with appropriate intervention and treatment options.

In 2023, the Counseling team provided **91,500 visits**, both in person and via telehealth, to kids and families across the state!

Children's Wisconsin implemented an innovative approach to integrating mental and behavioral health (IMBH) within most settings where we provide care. Integrating MBH resources is a critical component to expanding access and reducing stigma. Our Child Advocacy Centers (CACs) cared for 6,253 kids in 2023. We have integrated MBH therapists in all of our CACs across the state as part of the multidisciplinary teams caring for kids who may have been abused. CACs help minimize trauma, break the cycle of abuse, and help kids and their families find a path to safety and healing.

The Early Childhood Mental Health (ECMH) program promotes social and emotional well-being and healthy development in children under 6 years old by providing culturally responsive care that emphasizes nurturing caregiver relationships. In addition to providing more than 9,500 early childhood mental health visits to more than 800 kids in 2023, ECMH has also grown the programming by securing a \$2.5 million SAMHSA grant and fee-for-service contracts with the Wisconsin Alliance for Infant Mental Health (WIAIMH). Through an American Rescue Plan Act (ARPA) grant, the Milwaukee Health Department, United Community Center, as well as some funding through our community services departments, we are able to develop best-practice standards and training materials. ECMH is also building the future infant and early childhood mental and behavioral health workforce by expanding our partnership with the University of Wisconsin-Madison. Since 2020, Children's has supported five therapists and/or consultants in completing the Infant, Early Childhood and Family Mental Health Capstone Program, and ten individuals in completing the Trauma Informed Child-Parent Psychotherapy (TI-CPP) training.

Our **School-Based Mental Health (SBMH)** program partnered with **65 schools** across Wisconsin in 2023, which is double the sites from 2019. SBMH provides individual, group and family therapy to students, as well as education and consultation to teachers, staff and caregivers. In 2023, SBMH provided more than 20,000 visits with kids. We are discovering that over time, schools with school-based mental health services experienced decreased disciplinary incidents and improved detection of more subtle problems in children, namely depression and anxiety.

The **Therapist Fellowship program** trains the next generation of pediatric psychotherapists by hiring and providing trainees (fellows) experience and onthe-job education needed to earn their license, ideally within two years. We began our program in 2019 with a goal of supporting at least 30 therapists by 2024, and our MBH program has trained 45 therapists to date, exceeding our goal by 50%! Most trainees

have been retained by Children's Wisconsin as fully licensed therapists.

**Research** is also an area where Children's is advancing mental and behavioral health. With our partners at the Medical College of Wisconsin, we are championing the transformational power of childhood research to help us reimagine mental and behavioral



healthcare for children. Dr. Michael S. Gaffrey, PhD, was hired in 2023 as the inaugural Director of Mental and Behavioral Health Research and the Craig Yabuki Chair for Mental and Behavioral Health Research at Children's Wisconsin. He is elevating mental and behavioral health research across the Children's health system — partnering with faculty and clinicians who are already engaged in this research - and helping evaluate our programs, including the Craig Yabuki Mental Health Walk-In Clinic and the integrated mental and behavioral health care, currently provided in our primary care offices, urgent care clinics and emergency department. He is also leading the recruitment of the Nicholas Endowed Chair in Suicide Prevention for Children's Wisconsin. Dr. Gaffrey's dedicated focus on research will serve to showcase our innovative approaches to mental and behavioral health and share our outcomes with other organizations nationally looking to reach and serve more kids.

# Mental and Behavioral Health: SCHOOL-BASED MENTAL HEALTH

Brooke Briscoe, Mental and Behavioral Health Clinic Manager, Madison Office

Over the last 12 years, Children's Wisconsin embarked on a mission to reduce barriers and increase access to care in school settings across Wisconsin. In 2012, school-based mental health (SBMH) programming began in Eau Claire, followed by Stevens Point in 2014 and Marshfield, Neillsville, Milwaukee Public Schools and Racine Unified in 2015. Many other districts, including the Madison Metropolitan School District and Middleton-Cross Plains School District joined the efforts in the following years. In total, Children's Wisconsin has a presence in over 60 schools across the state, providing group, family and individual therapy to children where they are most accessible.

SBMH is aligned with the Children's Wisconsin mental and behavioral health services priorities, including:

- Early detection and prevention: Providing care in kid spaces to provide early intervention
- **Stigma reduction:** Stigma is naturally and significantly reduced as kids and families see this as a normal part of their day and ask to see us.
- Increased and equitable access: Increased access to services in an environment that is comfortable and familiar to kids and families
- Research and education: Data collection on services and outcomes to drive programming and identify gaps in service

School-based services reduce many barriers, including transportation, caregivers missing work, missed academic time, the stigma of seeking mental health care, and eliminate the long waitlists often associated with outpatient mental health services. The overall goal of SBMH is to expand our range of services to include additional mental health navigators, consultants and evidence-based programming and modalities. Expansion into additional schools and districts will occur as it fits our mission and values.

Clinicians in school-based roles allow for an integrated approach within the schools. The clinicians provide group, family and individual therapy as needed, as well as consultations with parents and teachers. The clinicians are able to collaborate with school staff to foster a healthy environment for students by attending team meetings as well as providing professional development training.

A referral was made to a clinician by a school in central Wisconsin regarding a student who was physically aggressive, left the classroom often and was disruptive. School and home did not know what to do. Home was considering virtual schooling. During the intake, symptoms indicated anxiety and not behavior problems as previously thought. The client and clinician worked through anxiety, and he successfully ended the year with no disruptive behaviors and high academic functioning. Now he is almost ready to end therapy. He has a healthy self-view, manages his anxiety extremely well and has not had disruptive behaviors in months!

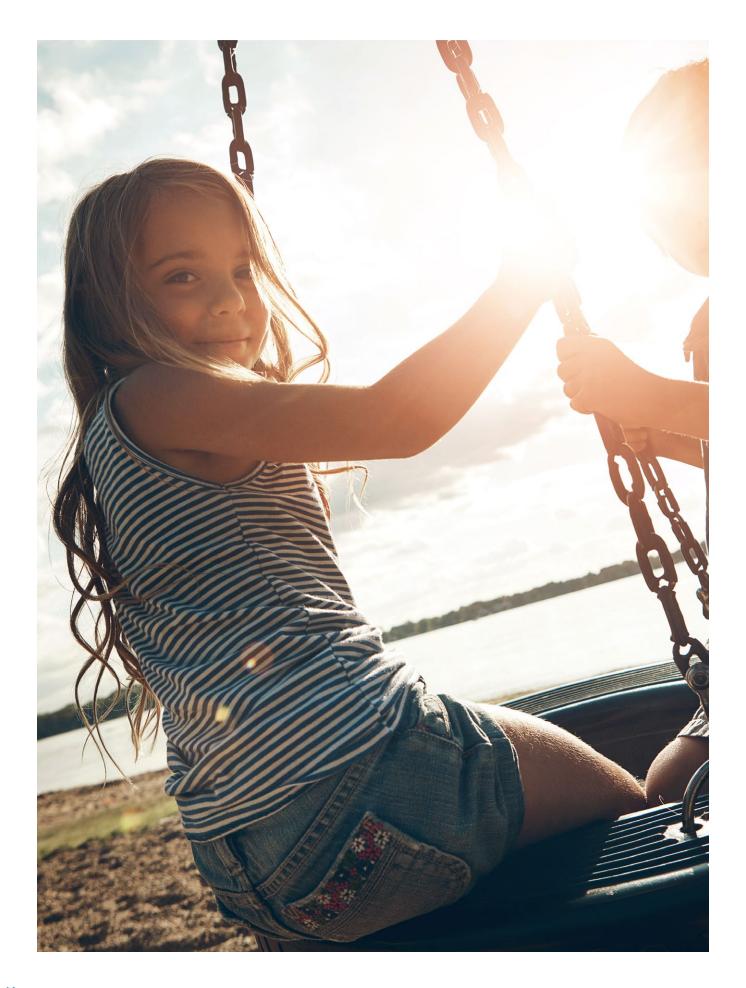
One of our school-based therapists in an urban school district began working with an 18-year-old student at the beginning of the school year. This youth was not a typical mental health referral we would receive in SBMH due to physical and cognitive challenges. The school's student services team had been working with the family for years, attempting to wrap mental health care around this youth, but encountered many social determinants of health barriers. The team reached out to our SBMH therapist to help.

This youth was experiencing psychosis symptoms but did not qualify for the level of care programming he needed without a diagnosis from a psychiatrist. Debilitating anxiety symptoms and fear had become significant barriers to trusting people outside of the school building, so an outpatient appointment was not a realistic option. Our SBMH therapist was able to partner with a telehealth psychiatrist and arrange a telehealth evaluation, which occurred in the SBMH therapist's office at school with the support of the school nurse. This evaluation helped this youth receive the diagnosis he needed to qualify and access county services.

This story is an important example of our values of Collaboration, Purpose and Integrity. This youth at times was walking the streets of the city in an effort to cope with his mental health symptoms. He had a history of being picked up by the police and brought to our own emergency room at Children's as an effort to treat his mental health. While we cannot predict the future for this youth, we can know that our team efforts to coordinate care have helped. There were many times in this journey that we could have given up or found a way that he didn't fit into our existing models and programming. But we didn't, and perhaps along the way, we also saved a life.

In addition to traditional outpatient services, our school therapists collaborate with school personnel to increase school climate and family well-being. As reported by one of our school therapists in regards to her participation in an Social Emotional Learning (SEL) night at school: I collaborated with the school and Community Learning Center (CLC) (Boys and Girls Club) for a family SEL night and it turned out so great! We had over 100 people attend. We kept it simple overall. There were a couple of baskets we raffled off (the families entered by turning their completed "passports" in) in order to improve attendance. One of the baskets was a mindfulness basket, the other was a family fun theme. We had one classroom set up with some calming music and mindfulness activities – coloring, feather breathing activity and fidgets.

cubes and the materials to make a family chat book to take home. In the gym, we had some movement activities and the CLC had some math movement things going on. In each of the rooms, we had psychoeducation materials fitting the theme. Our parent coordinator got some healthy snacks donated from some local grocery stores. We had great feedback from families and I was able to make some connections with new families.





# Family Preservation and Support

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 families by providing information, resources, support and education. We follow evidence-based models such as Healthy Families America, Parents as Teachers and Nurturing Parent.

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. Partnering with the Black Child Development Institute of Milwaukee, we established a Community Action Network that includes Healthy Start grant partners, community stakeholders and Healthy Start program participants working to create community-level change on health disparities for African Americans. The program uses maternal health navigators to support 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 to 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 information and resources to callers over the phone.

In 2023, our Milwaukee Healthy Start program served 480 women, infants and fathers/male partners with our comprehensive maternal health navigation services. Our outcomes proved to be so successful that when we reapplied for federal funding at the end of 2023, we learned that our program could expand into neighboring Racine County. We will continue that expansion work throughout 2024.

### Family Preservation and Support: HEALTHY START

Kristin Kopcha, Family Preservation Support Director

I am glad to have the opportunity to share this perspective from one of our Healthy Start clients.

"Today, I am writing to tell my story. I am writing to let others know that it is never too late to ask for support. I found myself pregnant with my fourth child, limited informal supports in place, the inability to work, along with significant prenatal concerns. This is what led me to Milwaukee Healthy Start, a program within Children's Wisconsin. I learned about Milwaukee Healthy Start through my Children's Wisconsin insurance carrier, CHORUS Community Health Plans. From that initial connection, I was introduced to the program supervisor, Hannah Kirk, and the navigator I would work alongside, Mackenzie.

October 13, 2023, is when I met with and began a partnership with Mackenzie, my maternal child health navigator (MCHN). Though I consider Mackenzie a friend, our bond is more rooted in a shared commitment to the health and well-being of myself and my daughter. What I was experiencing when I first met Mackenzie was not something I'd want others to go through. I felt alone and that, although I had the ability to advocate for myself, I wanted others to do so as well. As for my informal supports, both of my parents have passed away and I do not have a large family support system here in Milwaukee. My sister resides in Georgia, and our relationship is typical of siblings - with its share of ups and downs. I learned quickly that Mackenzie was not going to let me down, and in fact, she was persistent in making sure that I was taken care of while carrying my daughter in utero as long as I could.

Over the last six months, a lot has transpired. I learned from my obstetrician that this pregnancy was considered high risk and that I developed placenta previa, requiring close monitoring. The care I was receiving from my initial obstetrician was not ideal, and so I was in the market for a new doctor, pretty far into my pregnancy. I found my current OB-GYN at Froedtert that I stuck with after my initial appointment. I appreciated the honesty and transparency he shared with me, despite the persistent anxiousness I felt for months. After finding

a new medical home, Mackenzie wanted to connect me with more resources to help support me through my emotions, and for someone to be with me at the birth. This is when Mackenzie and I spoke about doula support and what this would look like. I learned that doulas are non-medical individuals that act as a companion throughout your pregnancy and childbirth experience. Sharing that I did not have informal supports in place, Mackenzie took it upon herself to make sure somebody was going to be there for and with me, and that I was not alone. Since I was farther along in my pregnancy than others when they begin working with their doula, locating one to work with at my stage proved to be difficult. Remember when I said that Mackenzie was persistent? Well, I was ultimately connected to WeRise Doulas and began working with Whitney. Whitney and Mackenzie are my dream team - they wanted the best outcome for me and to ensure that I had a healthy birth outcome. However, my anxiety continued to rise as my due date approached. I knew I had to have a C-section, and it was discussed that I should expect to also have a full hysterectomy. While I now had a good support team in place, I still found myself doubting whether or not I was going to be okay and if I truly was going to have a healthy birth outcome. On December 14, Mackenzie reached out to me and asked if it would be okay for her supervisor to join our scheduled meeting on this day. Sure, I was okay with her supervisor joining the meeting, but I was still unaware of why. Once Hannah joined the meeting, she shared with me her experience having multiple C-sections herself. Hannah didn't have to share with me the intimate details of her experiences, but she did, and that let me know that she too cared about my well-being. Hearing from another person who successfully went through multiple C-sections, who was still here to share her story, and who had healthy birth outcomes was reassuring to say the least. I felt a little bit better at this time but was still anxious about my upcoming doctor's visit.

On December 26, I mentally prepared myself to walk into my doctor's office and find out what my birth plan would look like. Mackenzie was by my side the whole time, and when she could have been with her family the day after Christmas, she was sitting here, at the doctor's office, with me. We went through the normal checks, complete with both an ultrasound and transvaginal ultrasound. I learned that my amniotic fluid level in my uterus had improved, and this time, the doctor was able to gain a clear view of my baby girl. I thought things were going well, until my cervix was checked and due to its position, one of my baby's blood vessels was hugging up right next to it. My doctor shared with me that if the blood vessel was damaged, my baby girl could have significant bleeding. For this reason, the doctor and medical team suggested that I be moved to inpatient care immediately, until my scheduled due date of January 2. The doctor explained that this was a precaution, in the event that I began to bleed out. After the doctor left the room, Mackenzie and I debriefed the information and formulated a game plan. My other children had not been prepared for my absence quite this early, nor did I have arrangements for them in place while I was at the hospital. Mackenzie helped me stay present and think through all possible options, while placing my health as the priority. It was decided that once I got home, I would pack my hospital bag using a list provided to me by Mackenzie (to make sure I did not forget anything for myself or my baby). I would also set the car seat for my baby by my front door so that it was not forgotten to bring with me back to the hospital. My three oldest children would be picked up and staying with their father while I was in the hospital, so their belongings needed to be accounted for as well. Mackenzie and I gave one another a big hug, and agreed on checking in with one another later that night. I don't know what I would have done, had Mackenzie not been there for me to keep me grounded, focused and present. The next day came just as quick as I'd imagined, and I was off to the hospital to prepare for my baby's arrival.

While I waited for my baby's arrival, Whitney, my doula, stayed by my side. She provided me with aromatherapy, minimized overhead lights in my

hospital room, turned on LED candles for me and played light music. This created a comforting environment, which relaxed me and silenced some of the anxiety I was dealing with. Mackenzie kept in touch and continued to check on me during my stay, all the way up until I delivered my baby girl on January 2. While I had a C-section,



hysterectomy and needed a blood transfusion, my baby was here and she was healthy.

Baby girl was born with horseshoe kidney condition that the Children's nephrologist is monitoring closely. The Children's nephrologist has provided me with the answers I needed for my daughter and to ease my worries for her. The kidney care she continues to receive is amazing to say the least. At three weeks old, my baby had an ultrasound done on both of her kidneys to ensure proper functionality, and things were looking good.

My birth story was just that - MY birth story. I was encouraged by my supports to do what I felt was the best and safest thing for my baby and me. I have continued support now that I am postpartum, my doula and I continue to meet, and I've even been working with a mental health consultant. Today, I continue to work with Milwaukee Healthy Start and am so grateful that I showed my vulnerability to allow others in. I needed the support, then and now. My story won't end here, and I know things will only get better as time goes on for my children and me. If any message is taken away from me today, I'd like it to be that if you need support, it's never too late to ask for it. There are resources available, and people like Mackenzie, who care. When you're going through big life moments and feel alone, remember you can always reach out for help and make connections."



### 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 (TFC)** program is designed to address the comprehensive wellbeing 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.

New in 2023, the TFC program adopted the evidence-informed Attachment, Regulation and Competency (ARC) framework as its program model. The ARC model is a framework for working with youth and foster parents/caregivers of youth who have been affected by trauma. The model focuses on:

- Building healthy attachments between youth and caregivers
- Supporting youth in their ability to identify, understand, tolerate and shift emotional and physiological responses and experiences
- Supporting normative developmental competencies that may have been derailed by trauma exposure
- Integrating trauma experiences

Through a 9-session curriculum called ARC Reflections, developed in partnership with the Annie E. Casey Foundation, this model supports caregivers in learning about and using parenting skills that enhance the well-being, stability and permanency of the youth in their care.

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 three medical satellite offices and a hospital-based advocacy team.

Our CAPS program is a team of medical professionals, forensic 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 2023, we added a Child Life Specialist team at the CAC at the new Appleton Clinic. When children have been abused or neglected, it can be difficult for them and their caregivers to understand medical information. Child life specialists have expertise in using developmentally-appropriate and non-threatening language, combined with age-appropriate teaching tools, to help children understand their bodies, diagnoses and parts of treatment. When children and teens understand what is happening to their bodies or why certain medications are needed, they are often more willing to participate and be more compliant with treatment or cares. In partnership, the CAC and Child Life Specialist teams begin to address a child's entire well-being, including their mental, physical and emotional needs, so they may begin a journey of healing.

# Child Advocacy and Protection Program: CHILD ADVOCACY CENTER

Connie Klick, Child Advocate Protective Services Director

Six-year-old Jimmy and his mom arrived at the CAC for a medical evaluation. After the check-in process, Sydney, a child life specialist, met with them. Part of her job is to ensure each child who comes to the CAC knows why they are there, who they will meet, what will happen during their appointment and what a procedure might feel like. To do this, a trusting relationship is built. This is accomplished by getting to know Jimmy, and normalizing the visit and appointment process—all of this is often accomplished through play!

While building rapport, Sydney learned that Jimmy was very nervous about his appointment. His mom also let Sydney know that Jimmy does not like meeting new people.

Once rapport was established, Sydney escorted Jimmy to his medical evaluation. She used medical play to teach Jimmy what will happen during the appointment and to familiarize him with the medical equipment. Medical play uses both real and toy medical tools to show how a procedure might happen; this preparation is often less scary or intimidating to kids, due to using toys and stuffed animals. Jimmy brought his favorite stuffed dinosaur with him, who became the patient. Sydney was able to demonstrate the same process the medical provider will use throughout his appointment.

When the medical provider entered the room Jimmy remained at ease due to the trust established with Sydney. She knew that he liked dinosaurs, so she was able to use dinosaur stickers to distract Jimmy while the medical provider completed the medical evaluation. While Sydney continued to engage Jimmy with distraction, she let him know the next steps in the evaluation process to ensure he knew what to expect.

When Sydney assessed an increase in Jimmy's anxiety, she encouraged him to use deep breathing and provided additional education to address any misconceptions and to ease any additional fears he had. With this extra support and use of play as distraction, Jimmy was comfortable with the staff members in the room and completed the medical evaluation with ease. By the end, Jimmy easily engaged with everyone in the room and voiced being proud of himself for working through his fears about the appointment and meeting new people. Sydney made sure to praise his specific positive participation in ways he understands, such as, "You should be so proud of how still you kept your arm when the arm hug (blood pressure) happened!"







### Institute for Child and Family Well-Being

# Strong Families, Thriving Children, Connected Communities

In 2023, the Strong Families, Thriving Children, Connected Communities (SFTCCC) initiative focused on driving systemic change by elevating critical local issues, connecting aligned stakeholders and promoting evidence-informed solutions. In 2023, we announced SFTCCC's four Critical Pathways: Economic Stability, Social Connectedness, Community Collaboration, and Workforce Inclusion and Innovation. These pathways are focal points for actionable system-level solutions. Through community roundtables, data walks and

communities of practice, SFTCCC has developed an emergent network of changemakers around Wisconsin in the child welfare and maltreatment prevention space.

# The Overloaded: Understanding Neglect podcast

In Season 2 of "Overloaded: Understanding Neglect," the podcast explores strategies to address poverty-induced stress, enhance social connectedness, foster community collaboration and promote workforce inclusion in the child welfare system. Host Luke Waldo discusses these critical pathways with experts like Julie Ahnen, Clare Anderson, Mark Cabaj and others, aiming to reduce family separations due to neglect. The season emphasizes the importance of aligning expert insights with evidence-based practices to advance equity and justice for all families.



Overloaded: Understanding Neglect has over 4,000 individual episodes to date, and can be found on Apple Podcasts, Amazon Music, Google Podcasts and Spotify.

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## The ICFW informs a national dialogue

In September 2023, ICFW's Season 1 podcast "Overloaded: Understanding Neglect" served as the narrative foundation for the 11th Annual Wicked Problems Institute, held in collaboration with the Children's Home Society of America (CHSA). The event focused on "Prevention in Action: Building Equitable Pathways for Child and Family Well-Being," addressing systemic issues like financial insecurity, trauma and systemic oppression. Participants co-designed a Learning & Action Community for ongoing advocacy, research and innovation to advance equitable solutions for family well-being.







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### **New initiatives and projects**

In 2023, UWM's ICFW team introduced new projects like "Hope and Healing for Children Who Experience Family Violence," "Addressing Unresolved Trauma: JobsWork MKE" and the "Milwaukee Equity Action Plan." These initiatives aim to strengthen families and the systems supporting them.

### **Dissemination and publications**

The ICFW published nine new journal articles on various topics, including trauma-responsive vocational rehabilitation services and intergenerational transmission of child protective services involvement. New webinars and workshops, such as "Uniting Housing and Child Welfare: Pathways to Progress" and "Translational Design: An Introduction," were also launched.

### **Future directions**

Looking ahead, ICFW remains committed to expanding innovative approaches to child and family well-being, building on the successes of 2023 to support families, enhance traumaresponsive services, and foster resilient communities through collaborative initiatives and evidence-based practices.

To learn more, contact:



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