# 2019 Annual Report

Serving the community through times of change



















### Message from the 2020 Board of Directors Chairperson and the Executive Director

Dear Friends,

At Family CT our identity and point of pride has always been providing services to families in their own homes. This suddenly changed last March, when concerns about the transmission of COVID-19 led us to move to a remote and virtual service delivery model. The impact of the pandemic, coupled with a long-deferred racial reckoning, led to many questions for us about how to support our clients and staff through this difficult time.

We quickly mobilized to maintain contact with our client families, get them food and diapers and link them to other community resources. We utilized telehealth platforms to maintain virtual connections with families at a time when connection seemed elusive but vital. We asked ourselves tough questions about racial equity, conducted a climate survey and drafted a Racial Justice and Equity Statement (See https://www.familyct.org). This was just the beginning of a process that has led us to reflect on, reaffirm and strengthen our organization's values, see where we need to do better, and learn more about each other in the process.

Finally, we wondered how, as a home visiting agency, we could turn a challenge into an opportunity and reinvent ourselves to meet the needs of children and families. We realized that when we are not limited by location or transportation, we actually have the potential to reach more families virtually and extend our reach.

Through it all, we reminded ourselves of our mantra: We may not be the biggest or highest profile organization in the region, but we will go above and beyond to meet the needs of our clients.

We are proud of our staff, who are motivated, dedicated, honest and open. We respect and admire our clients, who amidst hardship and trauma still want the best for their children. Whether we are in our own homes or the office, we still want to work to meet the needs of the communities we serve. Thank you to everyone who continues to make Family CT a piece of your heart.



Cheryl Burack, M.S. Executive Director



Anita Visentin-Perito Attorney at Law Board Chairperson

# In their own words: How children and families are managing during a pandemic

Staying at home has been a big change for me and my brother. My mom is still working during the day. When she is at work, I stay home with my brother and take care of him. At first, I really liked not having to go to school but now I miss all my friends a lot. In the beginning of the quarantine the teachers gave me and my brother homework packets to do. My mom was trying to help us as much as possible but sometimes it was hard for all of us, and the language barrier for my mom made it more difficult. As time passed, we were able to work from computers and the teachers helped us. Some things that I do to pass time is take walks with my brother and my dad, braid my hair, and talk to my friends.

# **V**, Age 12

Having the children home has changed the way we do things; I must still go to work knowing that I have to have extra safety precautions for my children. My children could no longer go with their babysitter and I had to provide extra meals for them during the day since they were not going to school. I had attended a food pantry before COVID-19 and they were thankfully still able to deliver items to my house. When I am called into work my daughter is the one that takes the food up to our apartment. I am able to go to their school and pick up school lunches and snacks for them to have during the day. The income I have is for fruits, vegetables, and meat to go along with the nonperishable items. Many items given were things we hadn't ate before, mac and cheese were one of them, we ended up loving it. Food banks are hard for me to get to because by the time I end work they are closed or will be closed by the time I get there.

# L, A Mom



Not going to school has been a complete change for me and my family. I don't feel as overwhelmed with managing school, homework and work life. Since I've been home, I have been working a lot more to help take care of my little brother. I usually work from early morning to late at night. My mom is still working two different jobs, when we aren't home my brother is with a babysitter who helps him with his schoolwork. The money me and my mom bring helps cover the house costs but also the food. When I am not at work I stay home and watch my brother while my mom is at work. We get extra food from family members and sometimes we exchange or share food with our neighbor that lives downstairs. Things I do when I feel overwhelmed is listen to music and play sports.

### **H**, Age 16

I always thought it would be great to work from home. Well, you know what they say, "be careful what you wish for!". The lack of structure, spotty home internet access and lack of social connection with my colleagues was really hard in the beginning. I also found it difficult to connect with newer clients that I hadn't met yet. I really missed our home visits. I took for granted how much it helps with building a relationship...It has also been very difficult to see my clients who were already struggling lose work and have to figure out where to get food, how to work and balance work and home schooling children. The services that our agency provides are needed now more than ever! It only took 5 months but I believe I have finally adapted to the new normal. Having the support of my colleagues and the agency has been a huge blessing!

# T, A Care Coordinator



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# What's New at Family CT

We proudly announced CT's first ®Family Check-Up/ Everyday Parenting Program, a collaboration between Family CT, The Children's Community Programs of CT and the New Haven Health Department A family story: Marnie is a 22 year old single mother of one. Her son, Danny is four and started preschool last year. Danny is bright, active and social. He has a speech delay and is being monitored for autism spectrum disorder.

Marnie and Danny have recently moved into their own apartment with the help of area supportive housing programs for homeless women with children. When she entered Family Check Up Marnie was just beginning her housing program and addressing the requirements for her rent subsidy. She was taking placement tests for entrance into a GED program, beginning sessions with a clinical therapist and looking for job openings online.

At our initial intake session, Marnie was warm and inviting but very quiet. She struggled to come up with strengths to describe herself and her family and to expand beyond one-word answers. Each week she willingly met and was great about communicating to either confirm our visits or reach out to reschedule if needed. We quickly acknowledged her organization and scheduling skills.

Marnie recognized a lot of strength in herself and her son through the Family Check Up process and identified her goals going forward. When we began the Everyday Parenting sessions she was eager to learn. One problem area was with Danny climbing on the kitchen counters and getting near the stove. Marnie knew she was not consistent with rules or consequences and was ready to try a new approach. With each step: making effective, positive requests — monitoring her child's cooperation — rewarding positive behavior, and more, Marnie engaged in the process. She began not only to listen but to ask questions and bring up barriers she could foresee. She posted our literature and behavior charts and made notes throughout the week. When we met again she had feedback and insight about moving forward. She was very happy with the change in her child's behavior and their positive interaction. In fact, she once noted, "Being a mother is the best... it's fascinating."

Marnie had a part time job and had begun a GED program when COVID-19 broke out and stores and schools closed. Her focus then became supporting her son's education at home in partnership with his preschool teacher. Marnie consistently used the resources provided by the school and kept up communication with her son's teacher. Everyday Parenting curriculum helped her provide structure and consistency as life completely changed. Parenting now included keeping her son busy and stimulated 24/7 in isolation. Collaboration between this parent, Family Check Up and the teacher enhanced strategies of positive behavior support.

During the last six months Marnie has taught her son, addressed mental health issues through therapy, secured Social Security income for her son and utilized the Family Check Up program to help with parenting issues. During a recent session she was telling me about a conversation she had with her son around elaborate pretend play. We reflected back to our early meetings when her child had little expressive language and their communication was mostly nonverbal. Marnie was very happy to recognize the growth and progress in her family and expressed joy in her role as a parent.

As a new school year starts under the weight of the pandemic Marnie is focused on making sure her son is learning and progressing while schooling from home. She feels that the support of Family Check Up is key to staying on track and appreciates the positive recognition she receives for her parenting efforts.

### New Tools to Build Resiliency in Kinship Caregivers and their Families

Kinship Caregivers are learning new skills and building family resiliency through ARC Grow, taught by clinicians in the Caregiver Support Team. ARC – Attachment, Regulation and Competency – is for families impacted by chronic adversity or stress. Our Caregiver Support Team, in collaboration with Bridges Healthcare, works with kinship, foster and pre-adoptive families to prevent the disruption of placements and increase stability and permanency for children. The intervention includes psychoeducation, parenting education and skill practice, information about child development and the impact of trauma, and guidance about how to understand a child's behavior. The goal is to help caregivers help children connect and relate to others, increase awareness of emotions and cope with overwhelming feelings, and develop a sense of mastery and the ability to effectively solve problems. A grandmother caring for her grandchildren says that ARC Grow has helped her to look at things "from a different perspective", reinforcing the importance of the caregiver as essential to the child's successful outcomes.

### **Expanding Services of Child and Youth Victims**

According to the National Survey of Children's Exposure to Violence, almost 58% of children age 17 and under have been exposed to violence, including intimate partner violence, physical assault, and sexual victimization. In an effort to increase safety and coping skills, The Neighborhood Victim Advocacy program has expanded its services for children, youth and their parents. Individual parenting education, skill building and resource development help parents understand the impact of victimization on children, how to assist their children in regulating their emotional distress and how to increase safety in the home. Children and youth are also directly engaged in safety planning in the home, school and community settings including outreach to principals, teachers and social workers. Child-friendly activities and resources are offered that best meet the needs of each individual based on developmental ability and age. Our Saturday morning Children's Empowerment Group has always offered group support to child

victims ages 6-11. Now, the evidence-based Safe Dates offers education and support to teens, helping them to identify the difference between a caring and supportive dating relationship and a manipulative, controlling and abusive one. It explores personal boundaries, creating safety, gender roles, suicide, grief and loss, self-care, self-advocacy and how to help a friend. Child and Youth Advocate Alivia Roseboro says that "One of our goals is to teach the youth how to reach out for help and connect to services when they are no longer working with an Advocate."



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Most services are free, bilingual (English/Spanish) and home-based.

Family Centered Services of CT 235 Nicoll St., New Haven For more information, call: 203-624-2600

#### **Neighborhood Victim Advocacy**

Safety planning, psychoeducation, court accompaniment and assistance with the criminal justice process for child and adult victims of domestic violence, sexual assault, child abuse, elder abuse and hate crimes. A Saturday morning Children's Empowerment Group is held for children who have witnessed domestic violence or experienced abuse.

# Intimate Partner Violence Family Assessment Intervention Response

Restoring, repairing and healing family relationships after domestic violence through safety planning, dyadic therapy, parenting education, and Fathers for Change program.

### South Central Medical Home Initiative for Children and Youth with Special Health Care Needs

Care coordination to link children and youth with special health care needs and their families to services and resources to achieve good health.

### **Teen Outreach Program**

School-based services for teens ages 12-17 to increase school success and protect youth from risk factors that contribute to teen pregnancy and school failure.

\*The program is offered during the school year and is limited to students in participating schools.

#### **Child Passenger Safety Program**

Mobile fitting station ensures each child is safe in the car. A Certified Passenger Safety Technician provides in-home education on correct installation and how to secure their child. Many families are provided with a new car seat. \*Referrals for current Family CT clients

### Parenting Support and Parental Rights Initiative

Therapeutic services to parents with psychiatric disabilities, providing education about parental rights and responsibilities, mental illness, and symptom management, development of temporary guardianship plans as needed, and work to strengthen and preserve families. Services ensure that children are best cared for and mothers and fathers are capable of healthy parenting and are knowledgeable about their child's needs.

### Family Check-Up

A brief, strengths-based intervention for families with children ages 2-6. The intervention has two phases: 1) an initial assessment and feedback; 2) parent management training, which focuses on positive behavior support, healthy limit setting, and relationship building. The intervention model is home-based and tailored to address the specific needs of each child and family.

Family Check-Up is a federally registered trademark owned by the University of Oregon

# PROGRAMS OFFERED BY



# **Family Centered Services**



# Multisystemic Therapy - Building Stronger Families

Intensive treatment for families experiencing parental substance use in addition to child abuse or neglect. Through a strength-based approach and collaborative problem-solving, MST uses evidence-based treatments to address substance use, trauma, family relations, and behavior modification. Case management provided to help families meet basic needs and improve utilization of community resources. \*DCF referrals only

### **Parenting Support Services**

Strengthens families through home-based parenting skills instruction and simple and practical strategies to help parents confidently manage their children's behavior, prevent problems developing and build strong, healthy relationships.

### **Caregiver Support Team**

In-home clinical interventions to kinship, foster and pre-adoptive families to prevent the disruption of placements and recognize the effects of trauma, grief and loss on children and families. \*DCF referrals only

### **New Haven Family Partnership**

In collaboration with New Reach, provides assessment, case management, supportive housing, and counseling to families that are currently at risk of becoming homeless and who are coping with HIV/AIDS, mental illness, substance abuse or other challenges.

#### **Family-Based Recovery**

Strength based in-home services for families with children ages birth to three, who are affected by substance use.
Services include substance use treatment, case management, and parent-child psychotherapy. \*DCF referrals only

UPDATED: 8/12/2019

# 2019-2020 Financial Supporters

We are grateful for the generosity of individuals, businesses, organizations, community groups, foundations and funders. If anyone has inadvertently been left off this list, please accept our apology and let us know.

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# **Our Outcomes**

The Family Check-Up Collaborative conducted 986 home visits in its first year

253 children were screened for special health care needs

89% of fathers enrolled in Fathers for Change completed the program

92% of Mothers completing intimate partner violence services said their children felt safer

100% of parents enrolled in Family Check-Up reported that the program increased their use of positive parenting practices

100% of children saw a physician in the last year

100% of youth enrolled in Multisystemic Therapy-Building Stronger Families (MST-BSF) were still living with their parent or caregiver at discharge, were in school or employment, and had no new arrests since beginning treatment

90% of MST-BSF parents reduced substance use

100% of Family-Based Recovery families were satisfied with services

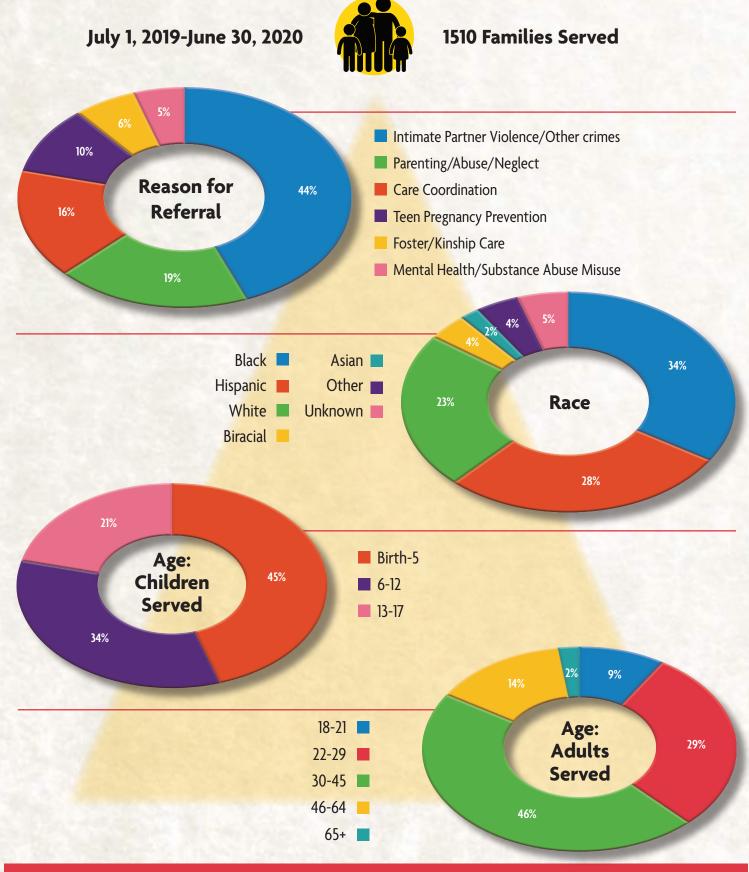
100% of parents who completed Family-Based Recovery improved infant-parent interactions and showed a decrease in parenting stress; 67% showed a decrease in depression scores

100% of teens enrolled in the Teen Outreach Program did not experience pregnancy or early parenting

99% adult crime victims surveyed report having a better understanding of community resources and how to access them

100% of parents completing Parenting Support Services reported improvement in their disciplinary style

# Who We Serve



# FYE 6.30.2020 Income & Expense for annual report (unaudited)

Income	
Department of Children and Families	2,632,577
Department of Public Health	275,367
Department of Mental Health/Addiction Services	73,809
Department of Social Services	234,000
Office of Victims Services	476,350
Office of Early Childhood	844,380
Subcontracted with New Reach	80,851
Foundations	24,000
Unrestricted/Restricted donations	25,896
Fund Raising & Special Events	27,619
	4,694,849
Expenses	
Salaries	2,612,570
Fringe Benefits	527,559
Program supplies, travel, trainings, IT & Network	401,588
Subcontractors	906,843
Facility Costs	144,611
Administrative Expenses	100,279
Fund Raising & Special Event Expenses	1,399
TOTAL	4,694,849

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### **Our Mission**

Family Centered Services works with families to ensure they are safe and nurturing places where children can succeed.



### Our Vision

We envision a world of healthy families, where children grow up to be confident and caring adults and contributing members of their community



### **Our Values**

We believe all children have the right to live in a safe, nurturing environment, free from violence, abuse, and neglect.

# **Dedicated Staff**

### **Administrative Staff**

Keisha Barnes, Administrative Assistant Cheryl Burack, M.S., Executive Director Jacquelyn Farrell, LCSW, Assistant Director Kara Rotheram, BS, Finance Director

# **Caregiver Support Team**

Sarah Sedlak, LCSW, Program Director Sammeisha Caporale, M.Ed Sophie Caldwell LMSW Sandy Gonzalez, LMSW Lindsay Molina, LMSW Laura Rainey, M.Ed

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# **Family Check-Up**

Jessica Palmer, LMFT, Program Manager Abigail Berkson, LCSW, Clinical Supervisor Noreen McElroy, BA Ingrid Taveras, AS

# Intimate Partner Violence – Family Assessment Intervention Response

Johanna Piper, LCSW, Program Director Jodi Baloga, LMSW Bryanna Cotto, BA Ashley Hernandez, MS Amarillis Lopez, LPCA Alyssa Palmer, LMSW Kara Anglin, LMSW

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# Multisystemic Therapy – Building Stronger Families

Alix Pierce, LPC, Program Director Rolanda Chandler, LPC Trudy Granston, BA Jamie Sabatino, LMFT-A Samantha Soufrine, M.S., NCC

# **Neighborhood Victim Advocacy**

Gisela Taveras, BSW, Program Director Yoselin Coyotl, BS Geanella Lara, BS Melissa Masayda, M.S. Alivia Roseboro, M.S.

# **New Haven Family Partnership**

Crystal Ayala, M.S.

# Parenting Support and Parental Rights Initiative

Talyah Uslianer, LMSW

# **Parenting Support Services**

Irene Clementino, M.A., Program Director Brittney Bauer, BA Sarah Tracey, BA Tyisha Perry, BA

# **South Central Medical Home Initiative**

Tracy Lynch, MSN, RN Marenid Carattini, BS Rachael Stamat, LPN (Middlesex Health)

# **Teen Outreach Program**

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