40 Years of Changing Lives Improving Futures CHILD

BUILDING HEALTHY MINDS AND FAMILIES

VILY

ER

2015 / 2016 Annual Report We help our clients to work through their problems in order to live happier, healthier, more productive lives. Wonderful things happen when someone cares.

> My therapist has been the most helpful aspect of my recovery.

My son feels very comfortable with his therapist, and he's made a lot of progress.

My son's therapist is compassionate, kind and sensitive to his issue. She has opened doors for us to get the support and resources we didn't have.

I LOVED working with you!

I love my child's therapist. She is thoughtful and insightful... not pushy with her opinion.

My therapist is awesome!

He listens and I can tell he

truly cares.

My daughter loves coming to talk to her therapist.

My child looks forward to coming and meeting with his therapist every week.

Changing Lives Improving Futures



Joan Aschoff, PsyD CEO Child & Family Center



William Cooper, Chair Child & Family Center Board

Dear Friends and Supporters,

This past year was significant for Child & Family Center as we celebrated 40 years of providing mental health care services to those most in need in the Santa Clarita Valley. Although we have had several sites over the years, our "home" has remained the Santa Clarita Valley and its surrounding communities.

People are often amazed at the scope of the services we offer, and further surprised by the number of children and families we serve. This past year, Child & Family Center provided life changing services to 1460 individuals by giving them the tools to live healthier, happier, more productive lives. Sadly, the reality is that the need for mental health services in our community increases every year.

We are so thankful for the four decades of support we have received from our community and government partners, patrons, donors and friends which has made it possible for us to deliver on our mission of changing lives. We are so grateful for your generous gifts of time, expertise and resources. Special thanks to our caring and professional staff as we remain dedicated to make a difference every single day in people's lives at a time that they are most vulnerable and in need.

We are excited about what the next 40 years will hold for Child & Family Center as we continue our mission of helping children and families find brighter futures. When people care, wonderful things happen. Thank you for caring.

Joan





Parent Child Interaction Therapy

Strengthening the bond between parent and child

Enhancing Relationships



Improving Child Behavior



Empowering Parents

Parent Child Interaction Therapy

Early childhood mental health therapists at the Center continue their training on Parent Child Interaction Therapy by PCIT specialists at UC Davis, a leader in disseminating PCIT to community mental health agencies in California and throughout the world.

PCIT is a proven parent-child treatment program for parents who have children with behavioral problems (e.g., aggression, non-compliance, defiance, and temper tantrums). The unique treatment program focuses on promoting positive parent-child relationships and interactions, and teaching parents effective child management skills.

The PCIT program has two program components: In the Relationship Enhancement component, parents are taught and coached how to decrease negative aspects of the relationship with their child and to develop consistently positive and supportive communication.

In the Strategies for Compliance component, parents are taught and coached the elements of effective discipline and child management skills. Parents learn and acquire specific skills, practice these skills until mastery is achieved and the child's behavior has improved.

The most appropriate referrals are children between the ages of 2-7 years who are exhibiting challenging, disruptive behaviors. PCIT is most effective when the difficulty of managing the children's behaviors has caused the warmth and affection in the parent-child relationship to decay.

Women Helping Youth provided funding for the PCIT program. Their gift of \$12,019 was used to purchase microphones, cameras, audio visual/recording equipment, state of the art multi-channel equipment with tele-capabilities for interactive communication, along with furnishings to equip two-way observation rooms for the program.





Lisa & Jordan

Lisa came to Child and Family Center in August of 2015 looking for help for her aggressive and non-compliant 2-year-old son Jordan. She was tired, frustrated, and complaining that she didn't know how to control her son's behaviors. At that time, the Center's Early Childhood Mental Health Department was starting to train in Parent Child Interaction Therapy, or PCIT. Jordan's symptoms and behaviors fit perfectly with the model, and we started them in PCIT right away.

The beauty of PCIT is that not only do you do work on the client, but you also work on the parent, and directly teach them skills that they use on a daily basis with their children, which helps the parents have a guided template as to how to help their children deal with, and in turn decrease negative behaviors.

Right away, Lisa began to notice how her actions contributed to Jordan's behaviors. For example, Lisa realized that she constantly needed to be in control and have everything, including her child, act and be a certain way. She realized that by not allowing room for her to ignore Jordan's negative behaviors instead of constantly addressing them and using words like no, don't, and stop, that she would be able to shape and change his negative behaviors. Lisa began using her learned skills right away, began to praise her son, reflect his words and behaviors back to him, and she learned to redirect him when he began to exhibit aggressive behaviors instead of yelling at him and talking down to him. She learned how to tell him what TO do instead of what NOT to do through giving him simpler and more specific commands, as well as how to implement a proper time-out for non-compliance.

Slowly, as Lisa's behaviors began to change, so did Jordan's. Jordan has now learned that as soon as Lisa begins to count to five, his compliance is necessary or he will have to sit in a time-out. Lisa has learned to acknowledge Jordan's positive behaviors instead of focusing on the negative. Both have also grown closer in their relationship as well, as PCIT strengthens the foundation of the dyad in the beginning of therapy, in order to allow for ease in difficult change in the later parts of therapy. They both struggled through the change, but with love and support from our whole team, they were both able to accomplish the changes they were looking for.

Jordan and Lisa are now on their way to graduating from PCIT! Lisa has gained skills that she can use for years to come and has grown in confidence as a parent, and Jordan has learned to reduce his aggressive and non-compliant behaviors through PCIT's skills of consistency, predictability, and follow through.

Evidence Based Practices

Research informed treatment

Evidence based programs are increasingly being used to support the mental health and well-being of children, youth and families involved receiving mental health treatment.



The most compelling reason for

implementing evidence-based programs (EBPs) in children's mental health is that they have the greatest likelihood of producing positive effects and more quickly than "usual care" mental health interventions. They also decrease the likelihood of long-term mental health problems.

Therapists at Child & Family Center received education and training in several Evidenced Based Practices including:

Seeking Safety (ages 13-60)

Focuses on Trauma Reduces: PTSD symptoms Substance Abuse Symptoms of Depression Symptoms of Anxiety

Increases: Family & Social Functioning Coping Skills Communication & Problem Solving Skills Ability to make better life choices

Managing Adapting Practice (MAP)

Focuses on Anxiety, Depression, Disruptive Behaviors and Trauma Reduces: Traumatic Stress Self-reported fear & anxiety Symptoms of depression Negative & disruptive behavior in children & adolescents

Improves: General functioning Positive Parenting

Trauma Focused Cognitive Behavioral Therapy (TF-CPT)

For ages 3-18 and their caregivers Focuses on emotional or behavioral problems resulting from exposure to trauma Reduces: PTSD symptoms Self-reported fear & anxiety Symptoms of depression

Improves: General functioning Parenting skills Parent and child coping skills

Triple P Positive Parenting

Ages 0-16 and their caregivers Focuses on Parenting & Family Difficulties

Reduces negative and disruptive child behaviors Improves positive parenting practices

Psychological Testing



Psychologists administer tests and assessments for a wide variety of reasons. Children who are experiencing difficulty in school, for example, may undergo aptitude testing or tests for learning disabilities. Tests for skills such as dexterity, reaction time and memory can help a neuropsychologist diagnose conditions such as brain injuries or dementia.

If a person is having problems at work or school, or in personal relationships, tests can help a psychologist understand whether he or she might have issues with anger management or interpersonal skills, or certain personality traits that contribute to the problem. Other tests evaluate whether clients are experiencing emotional disorders such as anxiety or depression.

The underlying cause of a person's problems isn't always clear. For example, if a child is having trouble in school, does he or she have a reading problem such as dyslexia? An attention problem such as attentiondeficit hyperactivity disorder (ADHD)? Difficulty with impulse control? Psychological tests and assessments allow a psychologist to understand the nature of the problem, and to figure out the best way to go about addressing it.



The office of Supervisor Michael D. Antonovich provided funding in the amount of \$100,000 for development of a comprehensive Psychological Testing Program. Funds were used for purchasing of testing batteries, hiring a program developer, building the program and marketing the service.

Alternatives

Certified Alcohol Drug Counselors Facilitate Healing for Substance Abusers

Alternatives offers free groups to the community such as the Empowered Parent Class (focusing on ages 12 - 17) and FACTS (prevention education group for teens 14 – 17 who may be experimenting with substances, have a family member or friend who is using substances.



Hilary Matthews CADC II, MFTI

A CADC (Certified Alcohol Drug Counselor) is able to provide prevention and treatment services to adolescents ages (12-26) which include understanding of addiction; stages of change, how to move through the stages, coping skills and identification of unhelpful thoughts and feelings, and relapse prevention.

Addiction is a very real problem and teenagers often need extra support to manage peer pressure and develop a healthy sense of self. Parents need the help to identify addictive behaviors so they may help their children with experimentation, understanding dangers of substances, and how to engage their children in safe and healthy activities.

My hopes in the future would be to run a teen process/education group and family groups for families touched by addiction. Charles Yeh LCSW / CADC-II



The Center's

Alternatives Program provides substance abuse counseling in collaboration with mental health therapy. I feel whole-hearted about integrating mental health and substance use services because I believe it will enrich clinical care and open new doors for innovative treatments.

I love working with persons recovering from substance abuse and dependency; it is close to home for me. I believe that my individual experiences within the recovery community helps to provide added insight into not only the suffering involved, but the principles of various recovery models and the cultures within various recovery groups.

I worked six years in the Psychiatric Emergency Room and Psychiatric Unit of Olive View Hospital, administering the Addiction Severity Index to help engage the patients, motivating referred patients towards commitment to recovery and treatment, recommending appropriate treatment levels for continued care, and placing patients into treatment programs.

Leslie

Leslie was depressed and hated life. She had low self esteem and didn't fit in with the popular kids at school. They made fun of her for being over weight. She lived with her mother and grandmother and had no contact with her father. The only time she felt "loved" was when she was drunk and had sex with various boys.

She was drinking tequila daily, to the point that she suffered blackouts. She would frequently sneak out of her house to attend parties where all the teens were using drugs and alcohol. She was suspended from school multiple



times for fighting. Her behavior made life for her family unbearable. Her mother brought her to Child & Family Center for help.

She began attending the Alternatives Alcohol & Drug program, where she learned why she was using alcohol to self-medicate. Her therapist helped her to identify and use better coping skills. She developed some friendships with the other gained support through new healthy friendships and began to participate in positive activities such as soccer, art classes and playing the guitar.

Two years later, Jennifer is finishing her junior year in high school this June. She continues to see her therapist for help with mental health issues, and she has been clean and sober for eight months.



Helping Victims of Domestic Violence

Isabella

Isabella was angry. In her 17 years, she had witnessed domestic violence in her home many times. She was the victim of frequent abuse from her own father throughout her



childhood. She would throw items at walls or people, flip tables, scream and yell at others and threaten to hurt herself or others. It was the only way she knew how to cope.

She often had suicidal thoughts and had attempted suicide multiple times. She felt hopeless and had crying episodes. She had intense feelings of guilt and shame regarding her relationship with her father, who was in prison.

During their therapy sessions, Isabella and her therapist Theresa were able to discuss her experiences. Together they made a "coping skills toolbox" giving her alternate ways to express her feelings. They role-played using an empty chair so she could process her feelings toward her father. During family sessions, Monica and Isabella's mother practiced communication skills by expressing praise.

After several months of therapy, Isabella is now able to self-regulate her emotions, has built a solid support system and is able to use healthy coping skills when feeling angry and upset. She is finally able to move forward with recovery from memories of abuse.

Children who grow up with violence in the home face many lifelong challenges; including difficulties in school, becoming a victim of abuse or assault, and harm to their physical, emotional, and social development. In addition, the single best predictor of a child growing up to become an abuser or victim is having grown up in a home with domestic violence.

The Center partners with Domestic Violence Center of Santa Clarita, which provides services for the adult victims while Center therapists focus on helping the children.

My Family Safety education skills groups are offered for children ages 6-11 who have been exposed to family arguments, fights, violence and breakups. Children learn to put words to feelings, how to express their feelings, how to develop a safety plan and ways to cope.

Break the Cycle is an education group for teens which empowers them to end domestic violence. Teens meet with others who have experienced family violence and learn how it affects relationships with family, power and control in relationships, better ways to cope and how to stay safe at home, school and online.

Child & Family Center is one of many agencies in Santa Clarita who are part of DIVERT (Domestic Intervention Violence Education Resource Team) which provides education and outreach about the many services offered in the Santa Clarita Valley. Financial Overview Child & Family Center & Foundation July 1, 2015 - June 30, 2016

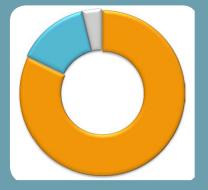
REVENUE & SUPPORT



86.9%
12.01%
0.92%
0.18%

Program Contracts Fundraising Other Client Fees

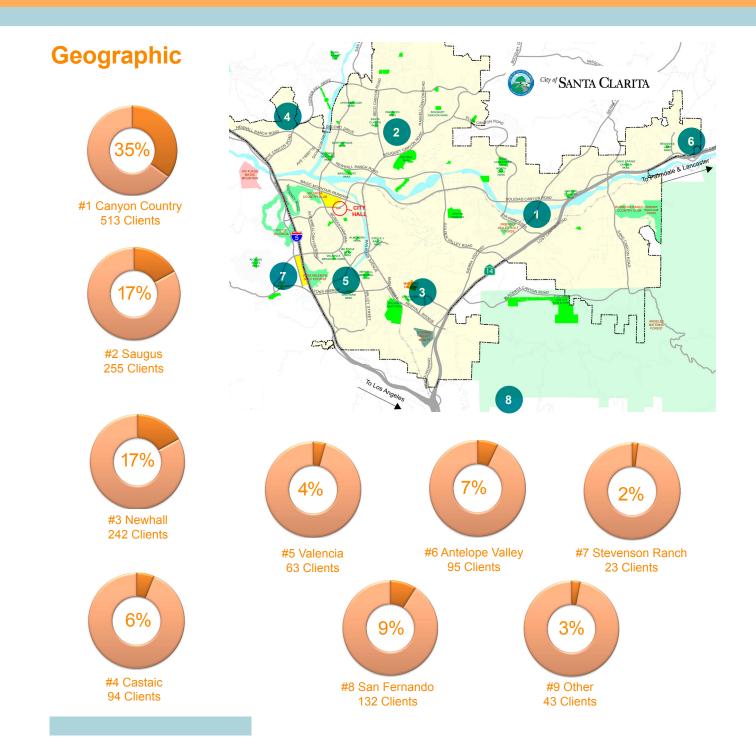
OPERATING EXPENSES



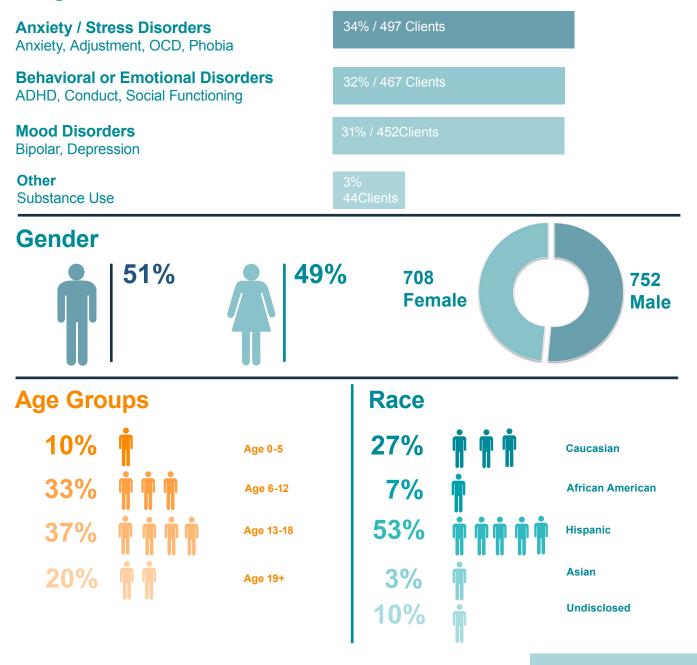
82.11% 14.09% 3.8%

Program Contract Expenses Administration Fundraising

Distribution of Clients 1460 individuals received services



Diagnoses



Child & Family Center Foundation Fundraising Activities



Friends and staff celebrated the Center's 40th Anniversary in June. Supervisor Mike Antonovich was recognized for his three decades of support.



Thousands of children and families attended Kid Expo, sponsored by Providence Holy Cross Medical Center.



Pinot's Palette Art Tasting was a new event in August.



The Center's signature event, Taste of the Town, raised \$186,000 and was voted Best Charity Event in Santa Clarita for the fifth year in a row!



Wolf Creek Brewery hosted Community Pints to benefit the Center in June, raising \$1185.



Guardians of Hope is a distinguished group of individuals, businesses, and civic leaders who have made an annual contribution of \$1,000 or more.

Our clients and their therapists have been immensely grateful to the Guardians of Hope, which allows critically needed services to continue, enabling many local youth and adults reach their full potential for becoming responsible members of the community.

GOLDEN GUARDIANS

Gifts between \$24,999 to \$50,000

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Donor Honor Roll

We are deeply grateful for the support of all of our donors. The donor list below reflects cash gifts received between July 1, 2015 - June 30, 2016. If we have inadvertently omitted your name, please accept our apologies and contact the Center.

\$375,000

The G.A. Foster Legacy Foundation

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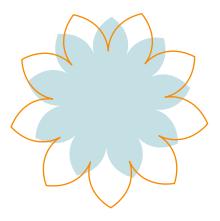
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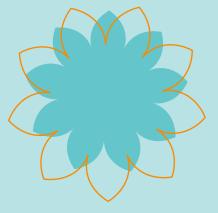
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