

2008/2009 CHILDREN'S BUREAU ANNUAL REPORT



CHILDREN'S BUREAU is committed...

To improving the quality of life for children and their families through innovative programs that focus on child welfare and rights. Children's Bureau helps families give children love, roots, and ultimately wings.

CHILDREN'S
BUREAU

Message From the Chairman of the Board and President/CEO

The national accrediting body, Council on Accreditation for Children and Families (COA), has established a set of standards that are grounded in the “belief that individuals who receive services are the direct beneficiaries when organizations invest in strong management practice, and can validate the impact of their services on those served.” Children’s Bureau also strongly upholds this belief and, in 2008-2009, Children’s Bureau’s Board of Directors and Staff put a lot of effort into strengthening the Agency’s capacity to deliver quality services to children and families in the Greater New Orleans’ area. This focused effort resulted in Children’s Bureau being better able to meet the challenges and uncertainties brought on by the economic recession.

Children’s Bureau’s first major task this year was to hold itself up against COA’s set of standards as the Agency underwent COA’s intensive reaccreditation process, its eighth since COA began accrediting agencies in 1977. It is our pleasure to report that Children’s Bureau received one of the highest ratings it has ever received from COA, and received the following praise:

“Outpatient mental health services are the core and heart of this organization. The assessment and service planning is excellent.”


“Training and supervision are the agency’s biggest strengths. The quality of training and clinical supervision is commendable and it is clearly reflected in the retention and overall satisfaction of its personnel.”

“The organization has a committed and mission driven workforce.”

“Children’s Bureau’s Board is strong and well organized with a good understanding of its responsibilities.”

Children’s Bureau’s Board of Directors and Staff also embarked on an intensive, year-long strategic planning process with the end result being the development of clear short and long-term corporate goals, a must in any tumultuous economy. Jane Arsenault of FIO Partners, Inc., facilitated this process which consisted of examining the Agency and its programs in the context of local, state and national trends; development and revision of vision, mission and values statements; staff and board surveys; an assessment of the agency’s management systems; and assessment and restructuring of the agency’s program portfolio. This process proved to be an effective tool for educating and inspiring both new and long-term Board Members around Children’s Bureau and its incredible work in this community, as well as a way of enhancing the cohesiveness of both the Board and the Staff. The most important element to come out of this process is a shared vision between Children’s Bureau Staff and Board of Directors on the direction of the Agency in the upcoming years.

In the midst of COA reaccreditation and strategic planning, Children’s Bureau also validated the impact of its services by combining direct practice and research, which is not an easy task. With support from the Institute of Mental Hygiene, Fahs-Beck Fund for Research, the University of South Florida, and the leadership of Dr. Alison Salloum, the Project LAST Grief and Trauma Intervention (GTI) underwent a



rigorous evaluation. Preliminary analyses suggest that GTI had a positive impact on children's mental health (i.e. post-traumatic stress, depression, global distress and traumatic grief), and these improvements were maintained three months after the intervention. Once a 12 month post-intervention assessment is conducted in December 2009, the results of this study will be submitted for publication. In addition, Dr. Salloum and Children's Bureau will apply to the Substance Abuse and Mental Health Services Administration (SAMHSA) to have the GTI model included on its registry of evidence based practice.

We are particularly encouraged that we are able to validate our work and demonstrate positive outcomes for children and families. This is especially important in light of research showing that, four years post-Katrina, there still exists both high rates in the number of children experiencing emotional and behavioral difficulties and in the number of children who are receiving a diagnosis of depression, anxiety, or behavior disorder (Overstreet and Birch, 2008). Unfortunately, while the need for children's mental health services remains high, the number of mental health resources in this community is decreasing as a result of state budget cuts and the poor economy. School districts have drastically cut their school social work programs and community agencies are cutting programs.

Beyond delivering effective services, Children's Bureau continues to partner and collaborate with other organizations in the community in order to leverage resources and dollars to ensure that children and families have access to the resources and supports they need. Children's Bureau partnered with eight schools this year, with all of the area school systems being represented. Other partnerships/ collaborative efforts include New Orleans Kids Partnership (NOKP), School Health Connections, Tulane Medical School's Department of Psychiatry/Neurology, Early Childhood Supports and Services (ECSS), and The Children's Advocacy Center.

Of course, Children's Bureau would not have been able to provide services and achieve all of these accomplishments without the support of our funding organizations which include United Way, Metropolitan Human Services District, Greater New Orleans Foundation, Institute of Mental Hygiene, LA Office of Public Health (Maternal and Child Health), Tulane Department of Psychiatry/Neurology, Louisiana Commission on Law Enforcement, Fore!Kids Foundation and the Bush Clinton Katrina Fund, Jefferson Parish Department of Juvenile Services, The Dr. Phil Foundation, the Reily Foundation, and the Helis Foundation.

Most importantly, we want to thank Children's Bureau Staff and Board Members for all of their hard work, incredible insight, and personal dedication as they embraced the mission of this agency. Meeting the needs of the children of our community will require our full commitment as we confront the challenges ahead.

Paul Schott
Chairman of the Board

Paulette Carter, MPH, LCSW
President/CEO



The Children's Bureau

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Deborah A. Villio
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Mary Love

Gina Orihuela

Jessica Messia de Prado

Cathy Pavone

Leah Ann Plaisance

Vicky Rankin

Amber Rosean

Anthony Shacar

Carlolice Shepherd

Gladys Small

Katrina Vanek

Mullady Voelker

Mia White

Carrie Wilson

INTERNS

Lavinzale Batiste

Kim Black

Brooke Wilson

Elizabeth Nelson

Treasurer's Report

2009 Condensed Financial Information

SUPPORT AND REVENUE

United Way Allocations and Designations	\$	544,240
Government Grants		912,928
Foundations		156,276
Program Services Fees		10,280
Fundraising		60,602
Contributions		37,399
Net Investment Revenue		(7,481)
Other		<u>13,289</u>
Total Revenue	\$	<u>1,727,533</u>

EXPENSES

Counseling	\$	507,276
Custody Evaluations		31,987
Family Preservation		155,613
Project LAST		840,503
Fundraising & Resource Development		90,413
Management & General		<u>184,471</u>

Total Expenses **\$** **1,810,263**

Decrease in Net Assets **\$** **(82,730)**

ASSETS

Cash and Investments	\$	365,426
Accounts and Contributions Receivable		497,950
Other Assets		<u>55,804</u>

TOTAL ASSETS **\$** **919,180**

TOTAL LIABILITIES **\$** **47,601**

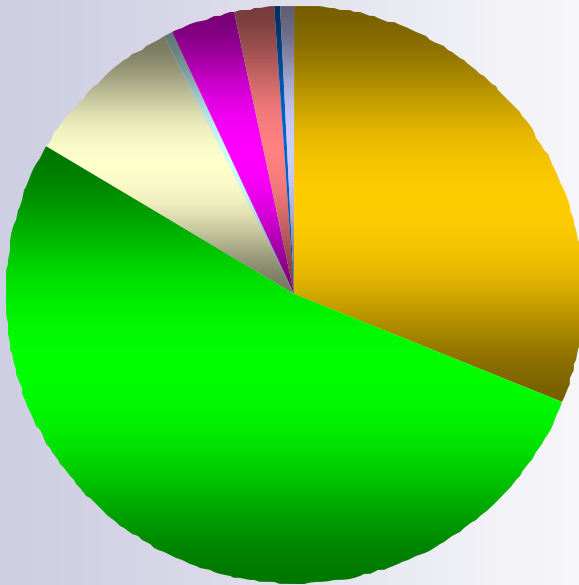
NET ASSETS **\$** **871,579**

Note: The above amounts were compiled from audited financial statements.

UNITED WAY ALLOCATIONS

	<u>Total Revenue</u>	<u>United Way Allocations</u>	<u>Allocation Percentage</u>
2000	1,087,969	365,788	33.62%
2001	1,225,683	355,413	29.00%
2002	1,336,460	362,669	27.14%
2003	1,486,175	353,073	23.76%
2004	1,413,533	318,110	22.50%
2005	1,201,497	328,528	27.34%
2006	878,120	200,000	22.78%
2007	1,289,510	350,000	27.14%
2008	1,805,333	424,998	23.54%
2009	1,727,533	544,240	31.50%

Children's Bureau of New Orleans
Support and Revenue
Year End June 30, 2009



■ United Way Allocations and Designations

■ Government Grants

■ Foundations

■ Program Services Fees

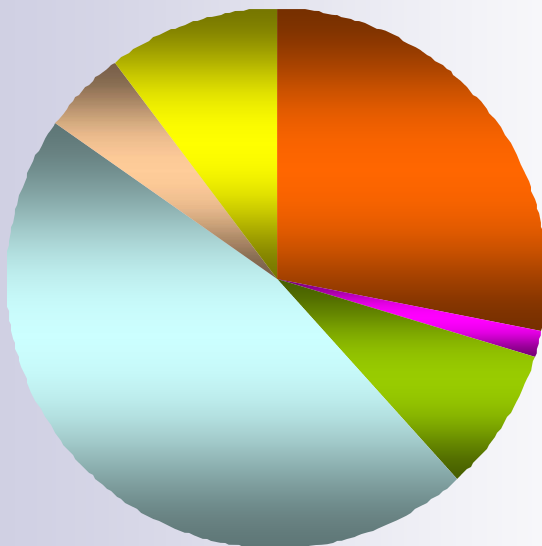
■ Fundraising

■ Contributions

■ Net Investment Revenue

■ Other

Children's Bureau of New Orleans
Expenses
Year End June 30, 2009



■ Counseling

■ Custody Evaluations

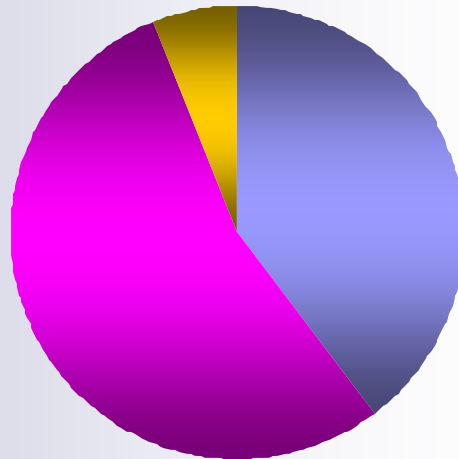
■ Family Preservation

■ Project LAST

■ Fundraising and Resource
Development

■ Management & General

Children's Bureau of New Orleans
Assets as of June 30, 2009



■ Cash and Investments

■ Accounts Receivable

■ Other Assets

Support and Revenues

United Way Allocations and Designations	544,240.00	32%
Government Grants	912,928.00	53%
Foundations	156,276.00	9%
Program Services Fees	10,280.00	1%
Fundraising	60,602.00	4%
Contributions	37,399.00	2%
Net Investment Revenue	(7,481.00)	0%
Other	13,289.00	1%
	<u>1,727,533.00</u>	

Expenses

Counseling	507,276.00	28%
Custody Evaluations	31,987.00	2%
Family Preservation	155,613.00	9%
Project LAST	840,503.00	46%
Fundraising and Resource Development	90,413.00	5%
Management & General	184,471.00	10%
	<u>1,810,263.00</u>	

Assets

Cash and Investments	365,426.00	40%
Accounts Receivable	497,950.00	54%
Other Assets	55,804.00	6%
	<u>919,180.00</u>	



CLINICAL SERVICES

Ada Burson, LCSW, BACS
Clinical Director

Fiscal year 2008-2009 was a full and challenging year as the Agency prepared for our first reaccreditation review since 2005, and responded to the increasing demand for clinical mental health services to this area's children. Our President/CEO, the Director of Special Projects, the Clinical Director, and the Administrative/Marketing Coordinator spearheaded the Agency's response to the Council on Accreditation of Services to Children and Families (COA), which involves a detailed review and analysis of all Agency administrative operations and our service delivery practices. "All are measured against national standards of best practice. These standards emphasize services that are accessible, appropriate, culturally responsive, evidence based, and outcomes oriented. They confirm that the services are provided by a skilled and supported workforce and that all individuals are treated with dignity and respect." Children's Bureau happily can report that COA has reaccredited this Agency through 2013, recognizing this Agency's achievement for again maintaining the highest performance standards in service delivery.

This achievement and recognition would not be possible without the dedication and commitment of the entire Children's Bureau staff and Board of Directors. In 2008-2009 our professional Social Work staff provided 22,330 clinical hours of services to children and families in Orleans, Jefferson, St. Bernard, Plaquemines, and St. Tammany Parishes. Services were delivered in the children's homes, schools, community centers, and the Children's Bureau office, as we continued to reach out to families in need of quality children's mental health services.

Close collaboration with other social service organizations and public school systems has been essential as the need for children's mental health services exceeds available community resources. Our LAST and Counseling programs continue to address the serious problems impacting our children; including trauma, grief and loss, physical and sexual abuse, domestic violence, parent-child relational issues, school behavior problems, and the overall effects of community violence.

The Children's Bureau clinical staff continue to demonstrate their dedication and professional skill, as the Agency seeks to fulfill its mission and commitment to improve the quality of life for children and their families.



PROJECT LAST (Loss and Survival Team)

Anita Francois, LCSW
Director of Project LAST

Project LAST (Loss and Survival Team) is a specialized, community-based (i.e. in the home, at school) grief and trauma counseling program which provides services to children and families in the New Orleans community. Project LAST was initially created in 1990 to respond to the needs of children and families who had been impacted by community violence, including those who had lost a loved one due to homicide or who had been a witness and/or victim of community violence. This innovative program has expanded to include providing therapeutic services to children experiencing grief and trauma due to various types of traumatic events, such as the death of a loved one due to any cause, the effects of natural disasters, and child sexual and physical abuse.

In 1997, Project LAST developed a school-based, group therapy model in an effort to reach more children who had been impacted by violence. Project LAST has always placed great emphasis on evaluating the effectiveness of its interventions. A pilot study of the group interventions conducted between 1997 and 2001 determined that child participants showed a significant decrease in traumatic stress from the beginning of the intervention to the end of the intervention. Information taken from the pilot study led to the development of a revised Project LAST Elementary Age Grief and Trauma Intervention (GTI). This revised intervention was evaluated in Spring 2006 with New Orleans public school children in the 2nd through 6th grades who were experiencing grief and trauma due to Hurricane Katrina and/or having someone close die. This evaluation showed that child participants not only showed a significant reduction in traumatic stress but also in depressive symptoms and with a larger effect than in the pilot study.

In the fall of 2008, thanks to the support of the Institute of Mental Hygiene, Fahs-Beck Fund for Research and Experimentation and the University of South Florida, our Grief and Trauma Intervention (GTI) for children underwent a rigorous evaluation led by Dr. Alison Salloum who worked with Children's Bureau for eleven (11) years and continues to provide consultation. Seventy-two (72) New Orleans public school children participated in the study with half receiving the GTI with a narrative component and the other half receiving GTI without the narrative component. Preliminary analyses suggest that both types of GTI were effective – whether GTI focused on children telling their stories and learning coping skills, or whether the focus was on grief and trauma coping skills. Findings also suggest that children's mental health improved (i.e. posttraumatic stress, depression, global distress, and traumatic grief). In fact, these improvements were maintained three months after the intervention, and children's levels of perceived social support also increased after participating in the intervention. We will conduct another assessment in December, 2009 to determine whether these gains are sustained one year post intervention. In light of the multiple traumatic events that many children in the study experienced and continue to be exposed to, these results are quite promising.

By integrating research and practice, we continue to build GTI as an evidence-based practice and further advance the agency's contributions to the field of grief and trauma work with children.



MENTAL HEALTH CONSULTATION TO CHILD CARE CENTERS

Sharon Gancarz-Davies, LCSW

The Child Care Consultant program is an exciting initiative which expanded the agency's capacity to serve the needs of young children. Partnered with Tulane University School of Medicine, Children's Bureau Mental Health Consultants provide mental health consultation to child care centers as part of an initiative to increase the quality of child care centers in Louisiana. Through interactions with child care providers and families, the mental health consultant will strengthen relationships between young children and their caregivers resulting in improved emotional, social, and academic development.

Mental Health Consultation To Support Child Care Centers and Enhance Quality Care

What is mental health consultation to a child care center?

Mental health consultation to child care programs is an innovative approach to supporting the healthy development of young children and is an essential quality support component for child care centers working to maximize the quality of their services. The consultation is designed to be a resource for child care centers to support teachers in developing and sustaining classroom environments that promote optimal social emotional development. Furthermore, child care centers that have incorporated mental health consultants into their programs have found a decrease in staff turnover rates, a decrease in reports of staff stress and feelings of burnout, and an increase in job satisfaction.

Why is having a Mental Health Consultant important?

A Mental Health Consultant is critical because preschool children who develop appropriate social and emotional skills are more likely to be prepared for elementary school and to succeed throughout the school years. Having a mental health consultant allows for the early identification of problem behaviors and gives the child care professionals the ability to address children's challenging behavior before serious problems occur.

What will the Mental Health Consultant actually do?

The duties of the Mental Health Consultant are tailored to meet the needs of the child care center staff, including assisting caregivers in promoting healthy development, helping centers establish linkages with other agencies as well as referral sources for children with special needs, and providing proactive coaching on techniques designed to prevent the development of problematic behavior. It should be noted that the Mental Health Consultant will not provide direct clinical service to individual children.

Will the Mental Health Consultant provide any training to the child care staff?

An important component of mental health consultation involves education and training of child care professionals in the knowledge and application of developmentally appropriate practices in classroom settings. The Mental Health Consultant can provide continuing education training to center staff and directors to meet state licensing requirements and are available to conduct seminars for parents who may be interested in enhancing their parenting knowledge and skills.

Is the mental health consultation program for all children, or just those children with difficult behavior?

Mental health consultation is designed to assist all children, not only the children who are exhibiting behavior problems, with the overall goal of achieving healthy behavioral, social, and emotional development. Children's relationships with their child care providers play an important role in developing a positive sense of self. The increased overall quality of care that can be supported through a mental health consultation program is an optimal tool for enhancing the child care environment and overall child development.

Portions of the above text was excerpted from the website: www.qrslouisiana.org. More information on the Quality Start program and mental health consultation are available at: www.qrslouisiana.org



CUSTODY EVALUATIONS

Gina Orihuela, LCSW, BACS
Director of Special Projects/Custody Evaluations

The role of a social worker in custody and visitation evaluations is that of a mental health professional in using his/her expertise in working with children who assists the parties, their children, and the Court. The primary purpose of the custody and visitation evaluation is to determine what is in the best interests of the child. Trained evaluators utilize a family systems approach including an assessment of social and community supports available to the family or guardians to determine the best interests of the child in custody evaluations.

Comprehensive child custody evaluations generally require an evaluation of all parents/guardians and children, as well as observations of interactions between them. These observations focus on the parent/child relationship and reflect whether a secure, healthy attachment exists between child and parent. The scope of the assessment includes a series of individual interviews with both parents/guardians, an individual interview or interviews with the child or children and a family interview with the child or children and parents/guardians present. The social worker also uses multiple methods of data gathering, including but not limited to, clinical interviews, observation, social histories and/or psychosocial assessment tools, and facts and opinions from at least two collateral contacts. The social worker also reviews relevant reports, for example, from schools, health care providers, child care providers, the Court, and other agencies and institutions.

Once all of the interviews are complete and the necessary data is collected, the social worker completes a written report and makes custody and visitation recommendations in accordance with the Guidelines for Child Custody Evaluations issued by the Louisiana State Board of Social Work Examiners. Social workers are required to provide written reports to the parties and to the Court, and if necessary, to testify under oath as to the factual issues or their expert opinions.

Parents are referred to Children's Bureau's custody evaluation program through the Court, which assigns responsibility for evaluation service fees. In the last year, agency evaluators have completed a total of 5 custody evaluations in Orleans and Jefferson Parishes. Children's Bureau is committed to continuing to provide quality child custody evaluations for children and families.



FAMILY PRESERVATION

Gasper J. Bongiovani, LCSW
Program Supervisor

Children's Bureau completed its fourteenth year of providing children and families with intensive Family Preservation Service (FPS) through the Metropolitan Human Services District in Fiscal Year 2008/2009. FPS offers therapeutic home-based services to families residing within Orleans, St. Bernard, and Plaquemines Parishes. FPS provided services to 53 families in the past fiscal year.

The Family Preservation Service is a specialized youth mental health program that consists of intensive therapy with children and families, within the mental health system, who have been referred for home-based services during a time of crisis. These intensive services through Family Preservation Services are provided for 7 to 12 weeks with 2 to 3 visits per week with the families in their homes, as well as individual sessions with the children at school as needed. The program's primary objective is to prevent psychiatric hospitalization or any other out of home placement of youths 5 to 17 years of age. Children's Bureau's Family Preservation Services is an evidence-based program which utilizes the Homebuilders Model, one of the most recognized and documented intensive family preservation programs in the nation. Treatment modalities utilized during the course of the intervention include cognitive behavioral therapy, motivational interviewing, parent education, skill building, play therapy, narrative and talk therapy, and additional treatment modalities as needed. Behavior changes and problem resolution are assessed by various outcome measurement tools. After services are completed, the FPS therapists continue to monitor the success of the families through 3 month, 6 month, and 12 month follow-up contacts. The Family Preservation Program continues to demonstrate the effectiveness of this intervention in helping children remain safely in the family setting. The excellent results as documented, represent the successful collaboration of the MHSD clinic staff, Children's Bureau clinicians, and the hard work of the children and families served by this program.



A Special Thank You to a Few of our Favorite Friends...

1st Lake Properties/Favrot and Shane
Adams & Reese L.L.P
Allfax Specialties
Allstate Giving Campaign
Jane Arsenault and FIO Partners, Inc.
Audubon Nature Institute
Romona Augillard
Astor Crowne Plaza
Atelier Aucoin Salon
Nina Kelly Avant
Ligia Ayala
Baker, Donelson, Bearman, Caldwell & Berkowitz
Baptist Community Ministries
Bayona
Mark Beebe
Begue's Restaurant
Belladonna Day Spa
Rita Benson
Theodore Berggren
John Besh
Sylvia Beyer
Helen Blanke
Kevin Blasini
Blue Cross and Blue Shield of Louisiana
Board of Directors of the Children's Bureau
Borders - St. Charles Avenue
Julie Breaux
Vanessa Brockhaus
Hattie Broussard
Thomas Brown
Sharol Burks
Staff of the Children's Bureau
Caffe! Caffe!
Capital One Bank
Mark Cave
Susan Chambers
Roy Cheatwood
Committee to Elect John F. Young
Michael Corley
Pete Dahlstrom
June Berry Darensburg
Ruth Day
Dr. Robert DeBellevue
Nikita DeLaney
Lauren Delery
Alan Donnes
DocuMart
Randy and Roslyn Eckstein

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Enterprise Leasing Co. of New Orleans
Ernst Cafe
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Eustis Insurance
Floor de Lis
Gladys Florencio
Carol Fontenot
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Angus Fountain
Maria Fraisse
David Francis
Diane Franz
Freeport-McMoRan Copper and Gold
Walterine French
Friends Coastal Restaurant
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Mariloy Galle
Kirk Gasperecz
Gauthier Family Foundation
Greater New Orleans Foundation
GW Fins
Dorothy Hayes
Deborah Hojem
Helis Foundation
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Barbara Hollifield
Hotel Monteleone
House on Bayou Road Inn
Rita Huntsinger
H20 Salon and Spa
Imagination Movers
IBEW Local 130
Institute of Mental Hygiene
IP Casino, Resort and Spa
Chrissie James
Jefferson Parish MIS
Kevin Katner
Patricia Labruyere
Elton LaGasse
Ronald Land
Armando Leyva
Clayton Francis Lipscomb
Pamela Lobrono
Loews New Orleans Hotel
Arlene Logrande
Tim Lott



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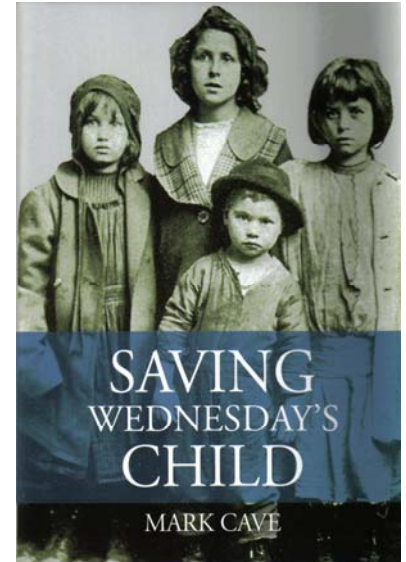
Louisiana Commission on Law Enforcement-
Jefferson
Louisiana Commission on Law Enforcement-
Orleans
Louisiana Office of Mental Health
Louisiana State Bar Association
David Lowery
Luzianne Coffee & Tea
Patricia Lyons
Charlene Mackey
Michelle Malone
Lloyd Marmillion
Katherine Martensen
Dr. Vicky Martin
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Million Dollar Round Table
Richard Mouton
Muriel's Jackson Square
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Sprinkler Fitters Local 669
Phil Spruell
S.T.A.T. Anesthesia, Inc.
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Debbie Villio
Wal-Mart Foundation
Walt Disney World Company
Sharon Wegner
Arnold Welcher
Dana Williamson
West Bank Social and Walking Club
Harriet Campbell Young
Hazel Zanca

“Saving Wednesday’s Child”

By Mark Cave

Children’s Bureau of New Orleans is proud to announce the publication of “Saving Wednesday’s Child”, a history of Children’s Bureau written by Mark Cave of the Historic New Orleans Collection. The book highlights Children’s Bureau’s historic work with children and families through innovative programs serving the children of the Greater New Orleans area. The Foreword is written by Nina Kelly Avant, former President/CEO of Children’s Bureau, with promotional statements made by Senator Mary L. Landrieu, the Honorable Paulette R. Irons, and Grammy Award winner Allen Toussaint.



“Saving Wednesday’s Child”:

“In February 1892, Alfred Clay mobilized an army of progressive-minded citizens of New Orleans to wage “war against all the enemies of little children.” Patterned after child-advocacy movements in England and the northeastern United States the group incorporated as The Louisiana Society for the Prevention of Cruelty to Children (LSPCC), saved thousands of children from poverty, abuse, and delinquency. The work took the organization’s staff into dismal shanties, overcrowded tenements, exploitive oyster canneries and cotton mills, and sad drug cribs of Storyville. Among the LSPCC’s many success stories was Louis Armstrong, who thrived at the waif’s home the society operated. Today the organization remains committed to children and operates under the name of Children’s Bureau of New Orleans.”

Mark Cave is Curator of Manuscripts/Oral Historian at the Historic New Orleans Collection. He is currently chairman of the Oral History Section of The Society of American Archivists and is the former chair of the Acquisitions and Appraisal Section. He has published numerous articles related to the history and culture of New Orleans.

The Board of Directors and Staff of Children's Bureau wish to thank all who have assisted us in our efforts to provide quality services to children and families in our community.

Much has been accomplished, yet there is so much more to be done. Please help us continue this work by showing your ongoing support and making a donation to Children's Bureau today.

400 Lafayette Street, Suite 140
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504.525.7525 (Fax)
www.childrens-bureau.com

