

National Child Traumatic Stress Network Sites in Illinois – FFY 2012

Organization & Project Description	Staff/Partners
<p>Chaddock (Year 3)</p> <p>The Chaddock Trauma Initiative of West Central Illinois (CTIWCI) will provide trauma-informed services to under-served children and adolescents who live in the rural community of Quincy, Illinois, and the surrounding tri-state area (Illinois, Iowa, Missouri). Over the course of four years, the project will serve more than 1,780 clients, ages 0-19, and their families who have experienced trauma. The project’s training component will serve approximately 1,500 adults each year.</p> <p>During the course of the project, the goals are to provide evidence-based practices including Child-P Psychotherapy, Trauma Focused Cognitive Behavioral Therapy, Cognitive Behavioral Intervention for Trauma in Schools, and Structured Psychotherapy for Adolescents Responding to Chronic Stress; to train parents and child-serving professionals to implement specialized trauma services; and to further develop best practice models of trauma-related services through collaboration and coordination with local, state, and national organizations.</p>	<p>Project Director: Angel Knoverek, MS, LCPC</p> <p>Associate Project Director: Thomas Donovan, MA, LCPC</p> <p>Project & Data Coordinator: Kelly Green, B.A.</p> <p>Local Evaluation Team at Northwestern University Evaluation Director: Cassandra Kisiel, Ph.D. Evaluation Project Manager: Tracy Fehrenbach, Ph.D.</p>
<p>Children’s Research Triangle</p> <p>Children’s Research Triangle’s (CRT) Trauma Treatment Program (TTP) is an assessment-driven, trauma informed intervention program based in Chicago and Belleville, Illinois. Recently funded as a Community Treatment and Service Center for the National Child Traumatic Stress Network, the TTP will increase trauma-informed therapeutic services available to children and adolescents ages 2 to 18 by providing and evaluating evidenced-based interventions, and educating professionals, caretakers, and other community members about the impact of trauma on youth. The TTP is an expansion of the existing program at CRT, thereby increasing the number of children served in the community. The TTP follows the Trauma Assessment Pathway Model, which forms the basis of the screening, assessment, and interventions utilized in the program. As part of the TTP, all children and adolescents referred to CRT for services undergo an initial screening for trauma exposure. Children identified as having a history of trauma are referred for an assessment designed to obtain more information about the child’s trauma history, behavioral presentation, and trauma-related symptomatology. The results from the assessment drive the individual intervention plan, which can include case management, legal advocacy, referral to outside agencies, or participation in trauma- informed evidenced-based practices.</p>	<p>Project Director, Linda Schwartz, PhD</p> <p>Project Coordinator, Amy Groessl, LCSW</p> <p>Project Evaluator, Anne Wells, PhD</p> <p>Training Coordinator, Christine Schmidt, PsyD</p> <p>For referrals contact: Chicago: Amy Groessl (312)-423-5670 180 N Michigan Ave, Ste. 700, Chicago, IL 60601 www.childstudy.org</p> <p>Belleville: Charles J. Franke, LCSW, (618) 397-0900 ext 3655 12 North 64th Street, Belleville, IL 62223</p>

<p>Heartland Alliance</p> <p>Community-Based Refugee Trauma Treatment will serve traumatized refugee children who are struggling in an overtaxed urban school system unable to meet their needs for orientation, integration, and support. Research has shown that refugee children exhibit symptoms of post-traumatic stress disorder at rates as high as 75 percent, compared to less than 4 percent of children in the general population. More than half of the refugee children Heartland Health Outreach’s International FACES sees are diagnosed with anxiety disorders, including PTSD: besides anxiety, they suffer from persistent fears of death, violent memories and nightmares, insomnia, depression, behavior disorders, developmental delays, and poor performance in school. These symptoms often emerge once the family is resettled and begins to establish a routine, at the same time that they are learning a new language, negotiating a new school, forging new social and family roles, and adjusting to the unfamiliar norms and values of a new country.</p> <p>International FACES will expand its culturally and linguistically appropriate, trauma-informed service model (an NCTSN promising practice) to include adaptation and application of the Cognitive Behavioral Intervention for Trauma in Schools (CBITS). IFACES will provide in-school CBITS programming to help refugee students and their families manage the symptoms of trauma, develop their capacity to self-soothe, and improve social and school functioning. The project will serve 200 children throughout the three-year span of the project, with 160 receiving CBITS. Current tides of refugees indicate that most will come from African countries, from the Middle East, and from Asia. Community-Based RTT services will be delivered in four public schools located in multicultural neighborhoods on the north side of Chicago, in participants’ homes, and on-site at International FACES. CBITS will enrich and expand IFACES’ current trauma-informed services to refugee children and their families.</p>	<p>Project director: Karen Batia, Ph.D., Heartland Health Outreach kbatia@heartlandalliance.org</p> <p>Project evaluator: Dina Birman, Ph.D., University of Illinois at Chicago</p> <p>Clinical manager: Thad Rydberg, MAAT, LCPC, Manager, Heartland Health Outreach, International FACES</p> <p>Contact: Norrine McCarten nmccarten@heartlandalliance.org</p>
<p>Northwestern University Medical School</p> <p>A University-based “Category II” Center/Treatment Services and Adaptation Center of NCTSN it is working on the development and dissemination of assessment approaches, and application of intervention approaches for various providers and service sectors. The project is focused on the use of the Child Adolescent Needs and Strengths (CANS) in public sector settings with an emphasis on Youth with Complex Trauma. It is also focused on the use of the CANS in relation to Adaptation/Application of Evidence-Based Practices for Child Trauma.</p>	<p>Co-Directors: Cassandra Kisiel, Ph.D c-kisiel@northwestern.edu Gene Griffin, Ph.D e-griffin@northwestern.edu</p>
<p>Urban Youth Trauma Center @ UIC (Category II)</p>	<p>Co-Directors: Liza Suárez, PhD lsuarez@psych.uic.edu Jaleel Abdul-Adil, PhD jabdul@psych.uic.edu</p>

<p>The Urban Youth Trauma Center at the Institute for Juvenile Research is a newly funded Treatment and Service Adaptation Center for the National Child Traumatic Stress Network aiming to raise awareness about the needs of youth and families exposed to community violence and increase access to trauma informed services in urban communities. UYTC plans to disseminate treatment programs specifically developed to meet the needs of urban youth and families impacted by community violence exhibiting traumatic stress, who may also be engaging in risky behaviors, including conduct problems and substance abuse. Additionally, the Center will provide leadership through NCTSN collaborations to develop and disseminate resources for consumers, service providers, and policy makers targeting urban community violence and associated problems. Finally, UYTC will partner with numerous community representatives in the Chicago area to share information and resources to improve the local community’s ability to organize and mobilize responses to community violence, as they impact youth and their families.</p>	<p>For referrals contact: uytc@psych.uic.edu 312/335-4436</p>
<p>La Rabida Children’s Hospital</p> <p>Continued funding will enable the CCTC to maintain, expand, and increase the efficacy of trauma-related services currently available to the children of Chicago’s South Side and South Suburbs. The goals of the CCTC include: 1) Provide direct trauma-focused services to 450 children each year. 2) Adapt, implement, and evaluate trauma-informed practices for urban African American children. 3) Increase capacity to provide Child-Parent Psychotherapy. 4) Increase consumer involvement at the CCTC, state, and national levels. 5) Expand the CCTC Survivor Wall Project so that others may employ it as a therapeutic intervention or public awareness tool. 6) Develop capacity for dissemination of complex trauma interventions. 7) Develop screening procedures to identify pediatric inpatients most likely to benefit from trauma-focused intervention. 8) Provide training and consultation and work with the Illinois Childhood Trauma Coalition to build trauma-informed service systems across the state. 9) Collaborate with the NCTSN in order to ensure that our programs are consistent with best practices, and that the populations served by the CCTC are adequately represented in the data collected by the NCTSN. 10) Continue to provide leadership within the NCTSN to promote consumer involvement throughout the Network, further the development of trauma training curricula, enhance cultural competence, and work toward inclusion of a child complex trauma diagnosis in the DSM-V.</p>	<p>Project Director: Brad Stolbach bstolbach@larabida.org Assistant Director: Renee Dominguez rdominguez@larabida.org Program Evaluation & Consumer Initiative Coordinator: Vikki Rompala vrompala@larabida.org Intake Coordinator: Rica Wheelis rwheelis@larabida.org</p> <p>Coordinators of Consultation & Technical Assistance: Carole Graybill cgraybill@larabida.org Nicole Tefera ntefera@larabida.org</p> <p>All can be reached at 773/374-3748</p>
<p>Youth Network Council</p>	<p>Project Director: Michelle Arnold marnold@youthnetworkcouncil.org</p>

Many young people are living with trauma due to mental health issues and experience with violence in the Illinois communities. In response to this growing problem, Youth Network Council (YNC), and its partner the Illinois Childhood Trauma Coalition (ICTC) has recently established the Trauma Informed Youth Services Initiative. By partnering with 6 community-based youth-servicing agencies, YNC will be serving youth ages 10-17 who are considered at-risk due to crisis situations in the family, contact with the juvenile justice system, and homelessness. To do this, YNC will provide training in Structured Psychotherapy for Adolescents Responding to Chronic Stress (SPARCS) to these agencies located in rural, suburban, and urban areas of Illinois. In addition to incorporating SPARCS, YNC and ICTC are developing and assisting in implementing an organizational trauma-focused self-assessment, provide training to line and clinical staff about childhood trauma, and provide consultation and technical assistance to youth services providers. Northwestern University's Mental Health Services and Policy Program will be responsible for designing, overseeing, and managing the outcome and process evaluation, analyzing data on a monthly basis, generating reports and providing feedback to YNC to inform its work as a Network Center. Through this initiative, YNC hopes that the trauma-focused and trauma-informed practices and policies implemented in the community-based youth-servicing agencies will produce real and lasting change in the lives of Illinois youth who are suffering from trauma.

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