

Winnebago County Community Mental Health Board Impact Report



Issue 1
Program Year 2022



WCCMHB

Winnebago County
Community Mental
Health Board

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Program Year 2022

This impact report was produced thanks to the writing, photography, and design contributions of the following:

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In this Impact Report, you'll get to read the stories from the providers and clients of the Winnebago County Community Mental Health Board (WCCMHB) funded programs, see charts and graphs detailing the programmatic accomplishments, and get an overall summary of the program's accomplishments for their first year.

In its first grant cycle, Program Year 2021-2022 (PY22), WCCMHB funded fifteen mental health programs that serve the residents of Winnebago County. Each program began with a set of goals to guide their work, resulting in 96 completed, 50 in progress, and only five not yet started. These programs and their intended outcomes were chosen to help build a cohesive and coordinated system of care for Winnebago County.

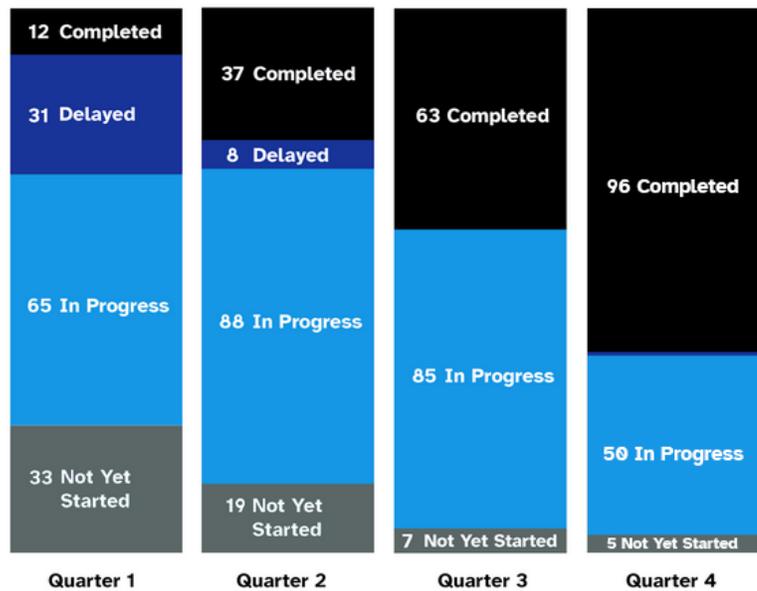
The bottom right corner chart shows the total number of Winnebago County residents served by our programs in the first year. The numbers are also broken down by target populations: people experiencing functional impairments due to mental illness or substance abuse.

The numbers served for each quarter indicate unique individuals only within that quarter. If someone was served in quarter 1 and quarter 2 they are counted in both quarters separately. Individuals may have fallen into numerous categories and thus the sum of each target population will be more than the total unduplicated served.

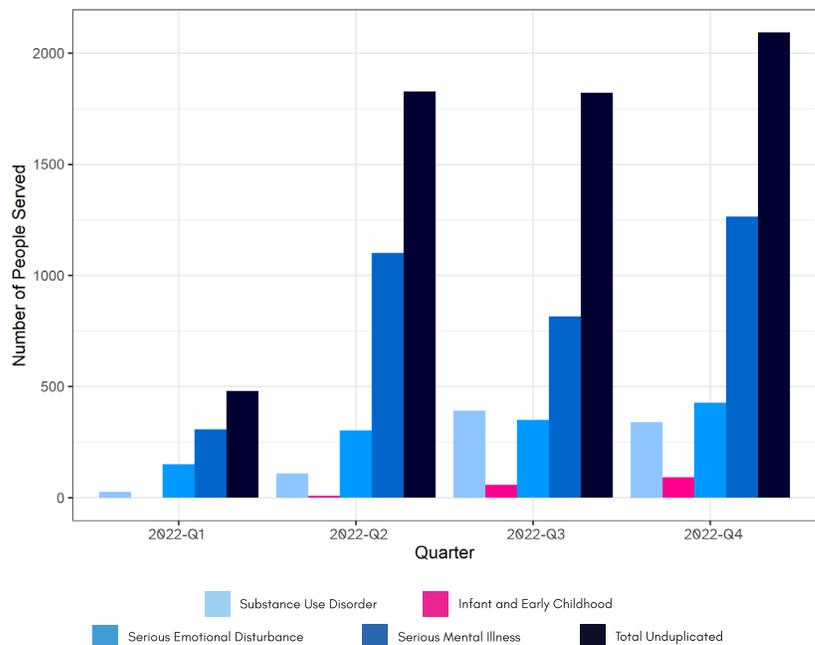
The following are the total number of clients served by the WCCMHB programs by target population:

- Infant and Early Childhood: 198 clients
- Serious Emotional Disturbance: 1,331 clients
- Serious Mental Illness: 3,385 clients
- Substance Use Disorder: 866 clients
- Total: 6,196 clients

Outcomes Progress Program Year 2022



Number of People Served by Quarter - PY22



WCCMHB Program Year 2022 Data

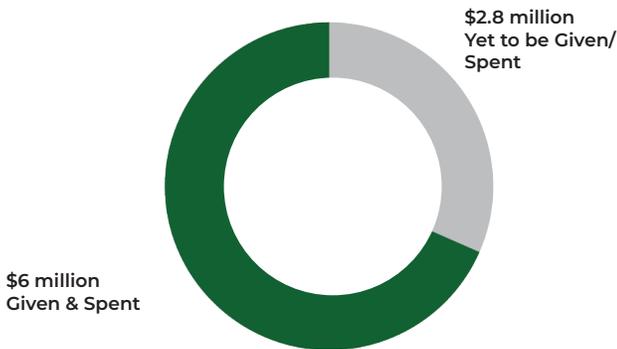
Money Awarded & Spent - PY 2022

The green segment of this donut chart represents \$6 million of funding that has been given and spent, while the gray segment represents \$2.8 of funding that has yet to be given and spent, which will be reallocated in a future award year.

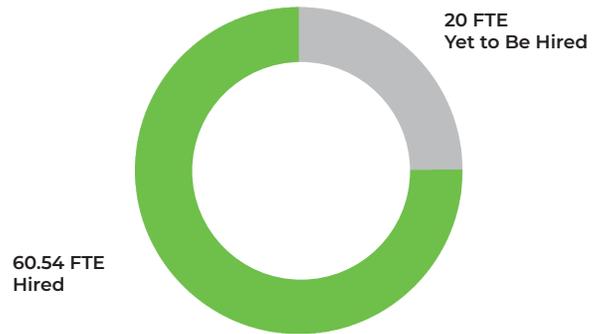
New Positions Created & Filled - PY 2022

The green segment of this donut chart represents 60.54 full-time equivalent (FTEs) that have been created and filled, while the gray segment represents 20 FTEs that have been created but are not currently filled. The entire donut chart represents the 80 jobs that have been created.

Money Awarded & Money Spent



New Position Created & Number Filled



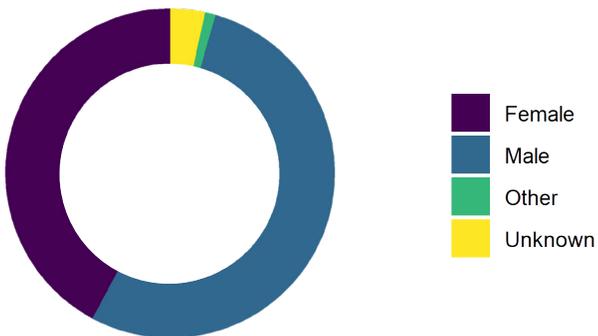
Numbers Served by Gender - PY 2022

Of the individuals served by the WCCMHB programs, 53% were male, 42% were female, and 4% were other/unknown.

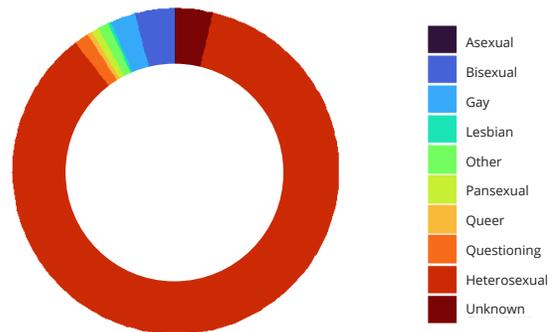
Sexual Orientation - PY 2022

Of the individuals served by the WCCMHB programs, the largest four categories were straight (87%), bisexual (4%), sexual orientation unknown (3%), and gay (3%).

Numbers Served by Gender - PY 2022



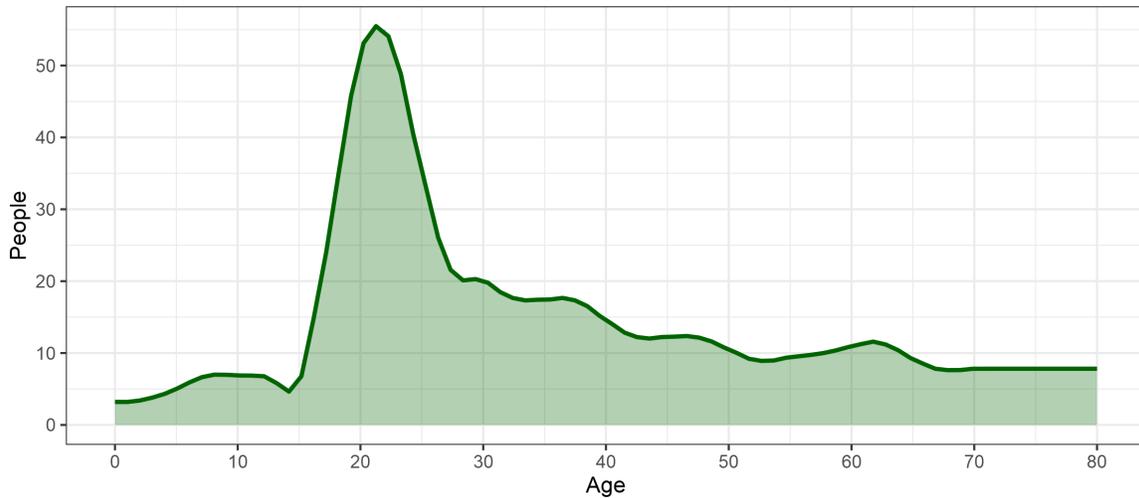
Numbers Served by Sexual Orientation - PY 2022



Numbers Served by Age - PY 2022

When it comes to age, the largest peak in this chart is around the early twenties. This peak starts in the middle of the teenage years, peaks in the early twenties, and then begins to taper off around the late twenties. There are two small peaks in the thirties, and one in the early sixties, but ultimately, the highest proportion of individuals served by the WCCMHB programs were in their twenties.

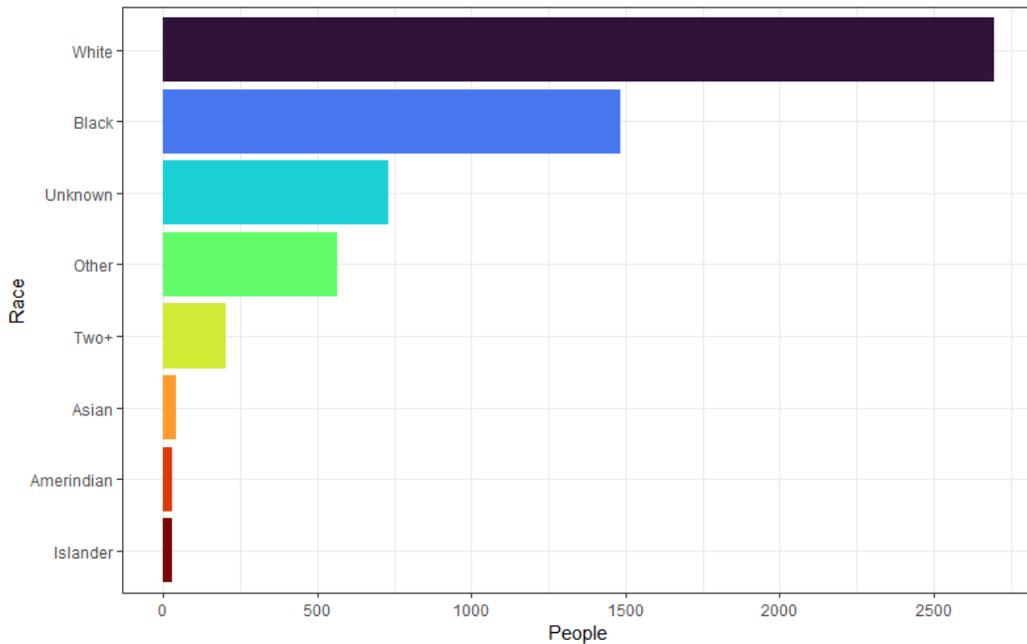
Number Served by Age - PY 2022



Numbers Served by Race - PY 2022

Of the individuals served by the WCCMHB programs, the largest four racial categories were white (2,698 individuals at 52%), black (1,481 individuals at 28%), race unknown (735 individuals at 12.5%), and two or more races (212 individuals at 4%).

Number Served by Race - PY 2022



Numbers served data shows that WCCMHB funded programs reach all populations within Winnebago County, with special emphasis on late adolescent and early adulthood, a critical time period for identifying the early signs of serious mental illness and substance use disorders. Also tracked, but not shown, is zip code data which will be used in future program years to direct outreach efforts to underserved neighborhoods. In addition to numbers served, each program tracks outcomes specific to their program. The remaining sections of this report highlights program specific outcomes along with stories of impact for clients and providers. Pseudonyms have been used for all client names in the stories to maintain confidentiality.

Funding resurrects Children's Home & Aid EPIC Program

A few years ago, a stark lack of funding forced Children's Home & Aid to lay off all the staff involved with the Early Prevention in the Community (EPIC) program, which since 1985 had provided mental health services for children 5 to 12.



Lori Poppen,
Northern Region
Clinical Director

"It was exceptionally hard," said Northern Region Clinical Director Lori Poppen, who's been with Children's Home & Aid since 1990. "Those were very difficult conversations with the families we served."

Thanks in part to funding from the Winnebago County Community Mental Health Board, the program now boasts a supervisor, an intake coordinator, two full-time therapists, and a family advocate and case manager.

"This type of funding gives us so much more stability, and we're able to continue on with services without that hanging over us all the time," Poppen said. "That financial stability makes a world of difference."

In its self-evaluation, the program reported it went from no community partnerships last year to six. After hosting no educational events in 2021, the program completed five events this year.



Renee Johnson,
Therapist

Therapist Renee Johnson, who has worked with the program since March 2019, has 15 clients, but two of the children with whom she works, ages 9 and 12, showcase the ripple effect beyond those children.

Today, both children gush about their new friend groups and all the things they do together.

"That's super-awesome as a social worker, we know we're having a macro effect," Johnson said.

Johnson began working with the 9-year-old in March 2022 and diagnosed him with PTSD, ADHD, and adjustment disorder stemming from trauma suffered at the hands of a stranger from his past.

Johnson helped him name his symptoms. She worked with him to create a fake family so he could verbalize his trauma, so they could identify intrusive thoughts and replace them with soothing thoughts.

"When we started, he couldn't even identify how he was feeling," she said.

The boy, feeling unsafe at school, struggled to sit still. So Johnson worked with school staff to institute a token system rewarding him when he used good coping skills - a tool the boy no longer needs.

"Now he's getting better grades, and he was excited to go back to school this year," Johnson said.

The 12-year-old, with whom Johnson worked over the summertime, was struggling mightily with depression and anxiety because of a complex home life. His father is in prison, his de facto single mother overwhelmed, and his brother an antagonist, all while the boy was transitioning to middle school.

"We worked on self-confidence and self-worth, and processing the disappointments in his life," Johnson said. "I ask him what he's good at, and what are his strengths. A year ago, he could only name two things."

Even his sense of humor was used to deflect. Now it's a bona fide strength, and tapping into his creativity, the boy has found his place in multiple friend groups.

"Previously, he wouldn't have had the self-esteem to talk to a stranger, let alone make new friends," Johnson said. "That's been a huge accomplishment for him, and it's made for a much better relationship with his mom. I can recognize that he is a great friend, and that's very rewarding."

"THIS TYPE OF FUNDING GIVES US SO MUCH MORE STABILITY, AND WE'RE ABLE TO CONTINUE ON WITH SERVICES WITHOUT THAT HANGING OVER US ALL THE TIME."

Expanded doula program heads off mental health, substance abuse issues for moms



Guided by her doula, Brittney Semple, in September 2022, Shameka experienced her dream childbirth, a night-and-day contrast to when she had her first child 11 years ago.

Since spring of 2019, Semple has been with Children's Home & Aid's Rockford Doula Program. Funding from the Winnebago County Community Mental Health Board allowed the program to expand from a single full-time doula to three. Grants also allowed Semple to become a case manager and shift into the doula 2 role, in which she can address more severe mental health and substance abuse conditions.

"We renewed our blueprint for impact," said Stephanie

Caltagerone, Family Support Services supervisor. "We focus less on after effects, but our goal is to get farther upstream, so we're doing the work on the front end. We're going from helping families survive to helping them thrive. We know it's not going to happen overnight."

"Surviving and thriving is defined differently by every family," said Jeannie Higdon, who oversees the doula program. "The agency continues to grow and respond to the times."

Back in 2011, Shameka's husband Deshontae - then her boyfriend - was pressured out of the picture by family. Shameka suffered massive postpartum depression.

"Postpartum depression isn't fun," she said. "You just had a baby, and I don't think people take it seriously and how being a woman is an important job. We have to have our stuff together, and we can't let our child see us struggling."



“WE’RE GOING FROM HELPING FAMILIES SURVIVE TO HELPING THEM THRIVE.”

This go-round, Semple was there to help Shameka envision her ideal childbirth, and to provide mental health counseling throughout the pregnancy.

“I’m reluctant to want to speak to people about what I’m going through emotionally,” Shameka said. “But there’s this thing about Britt, that I knew right away I could confide in her and trust her. Some might think they’re crazy about how they’re feeling emotionally, but she made me feel better, that I’m not wrong or wrong for feeling the way I feel, or crazy for feeling the way I feel.”

Semple’s first line of questioning is how the first birth went, and what her client would like to happen differently this time.

“I take notes, and then I do everything in my power to make things different,” she said.

Semple encouraged Shameka to breastfeed, which deepened her relationship with her second-born. They’re in the process of writing Shameka’s birth story, which will be printed and laminated. Semple has asked Deshontae whether he’d like to write his birth story, as well.

“In the past, we didn’t take into account that the father would want to share his perspective,” Semple said. “It’s important that partners know I’m not there to replace them. I’m there to support them, too.”

“He’s been able to bond with our child on a different level this time,” Shameka said. “I don’t feel like he’s left out this time, and that’s very important to me.”

From July 1, 2021, to June 30, 2022, the doula program served 27 mothers - 14 of them Black. It also completed 15 educational events.

“We need to capture families of different backgrounds and make sure people are served effectively. This role is the prevention work, and it’s difficult work, 24/7,” Caltagerone said, adding that in a single August weekend, doulas assisted in five births. Families belong together. You can’t get more proactive than with women who are pregnant.”



Brittney Semple
Doula



Stephanie Caltagerone
Family Support Services



Azhalaun Haley
Doula



Three new staff boost warm handoffs at Crusader Community Health

With the addition of three sets of compassionate hands funded by the Winnebago County Community Mental Health Board, Crusader Community Health (CCH) has vastly increased warm handoffs crucial to getting mental health services to those in need quickly and without putting unnecessary burden on the client.



Will Holm,
Chairman of the
Department of
Behavioral Health

“That’s been the foundation of our behavioral health services: We want to make help available in the moment,” Will Holm, chairman of the Department of Behavioral Health at CCH. “Patients recognize they’re not doing well. We need to engage the patient at that moment, when they’re at the highest level of motivation. The longer appointments are out, the greater the chances we’ll never see them again.”

Over the past two years, Crusader has used funds from the mental health board to hire a full-time licensed behavioral health provider to provide increased mental health services for children, adolescents, adults, and families, as well as two case managers who support and provide case management for medication-assisted treatment services and coordinate support for families with complex needs.

As a result, same-day or next-day treatment went up 63 percent.

“It’s one-stop shopping, and it’s rethinking how we provide mental healthcare,” said Holm, who has worked in community mental health nearly 20 years. “It makes you wonder why we haven’t been doing this all along. For how long can we do the same thing and expect different outcomes.”

Adrienne Kelenc was already with Crusader Community Health for 9 years as a medical case manager when she transitioned into the newly created case manager and Medication-Assisted Treatment (MAT) Service coordinator role. To her, a warm, compassionate greeting is as crucial as a warm handoff.

“We see clients coming in at some of their hardest times,” she said. “Oftentimes they’re actively using or going through withdrawals. I start out by telling them I’m so happy they’re here. Meeting someone where they’re at is really important.”

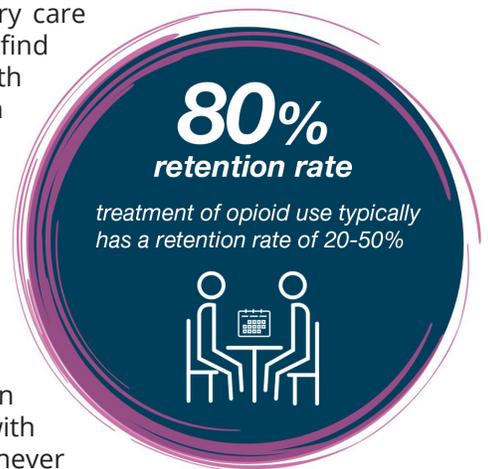
The case managers are crucial in making sure all socio-economic barriers are identified and addressed.

“For individuals with mental illness and substance use issues, it is so much more complicated than just taking medicine, getting into therapy, and everything is going to be fine,” Holm said. “The whole model of community support and being able to access and navigate the resources there, that can be a process. Clients often need assistance from professionals who know those systems, have the contacts and work within those nuances.”

The fact that Crusader Community Health offers services from primary healthcare to dental can help assuage potential clients’ concerns around stigma.

“They’re not going to a treatment program or a place that has, for better or for worse, stigma,” Kelenc said. “It’s the same setting where a patient is coming in for bronchitis. We see mental illness, substance abuse and co-occurring disorders as a chronic disease that needs to be treated in a similar kind of way.”

It’s easy for primary care physicians to find behavioral health staff onsite when a need for MAT is identified. Kelenc recalls a recent situation in which she was able to get a patient in for a suboxone treatment within a week. She was then able to check in with the patient whenever she had follow-ups with her Primary care provider (PCP).



“Historically, those referrals out to a behavior health specialist have taken time. Too much time,” Holm said.

Recovery is rarely straightforward. Kelenc had a client who vanished on her for a couple of months, but who then called Kelenc’s cellphone “out of the blue,” she said.

“I thanked her for calling me,” she said. “She’d been struggling with housing and was in and out of homelessness. Her life just kind of got in the way. So being encouraging with our clients and giving them credit for re-engaging is so important.”

Jubilee Center provides more than housing. It gives hope

Charles let the cleanser set in and break up the stain on the floor at his Shelter Care apartment. Then he started scrubbing. Cleanliness is important to him, and Charles scrubbed so hard that the force snapped his mop in half.

Kathleen Combs, who on Sept. 27 celebrated her 1-year anniversary as the Jubilee Center Outreach Advocate that was created and is funded by a Winnebago County Community Mental Health Board grant, sprang into action.

"She bought me a new mop," Charles said, his eyes wet with tears of appreciation. "It might seem like small things to most people, but to me it was a big lift. It gives me peace of mind."

"The things that help our members thrive isn't the stereotypical stuff people think of," Combs said. "It's not a house, necessarily. Getting a house doesn't change your lifestyle, and sometimes it's the little things that help the most. It's having the right artwork or the things you want to think of, that make you happy."

Charles moved into his apartment in July 2021 and recently signed another 1-year lease. That fall, he began using services at Jubilee Center, a day program for adults with chronic mental illness, many of whom are unhoused or at risk of being unhoused. It provides advocacy, case management and intervention, all in a nurturing environment where clients feel seen and welcomed.

Jubilee staff set a goal this past grant cycle of helping 25 to 50 members remain stably housed and went far above and beyond by helping 71 find housing. It aimed to help 90 percent of clients retain housing, and each and every member has done so.

What drives Combs

Combs says middle-aged men face a stark lack of services when compared to women. Stories like Charles' resonate deeply with her, as her father was "left with nothing" after he and her mother got divorced in 2011, when she was 18 years old.

"That's where my heart is, is the middle-aged generation," Combs said, before speculating on why more resources are made available to women. "They usually have kids with them, and obviously no one's not going to help the kids. For the men, they're not old enough to get Social Security, or disabled enough to get on Social Security."

She said if her father's siblings didn't step up and pay for his mortgage, her father, too sick to be able to work, would have lost his home.

"Without his family, he would have had nothing, until his Social Security kicked in," Combs said.

She sees her father in her clients. But she also takes a hard line and reserves her energy for clients who are willing to do the work.

"I will give everybody chances until they prove they're not changing," Combs said. "Once you prove you aren't willing to

change, I can help you, but you're not getting everything of me that someone else needs and wants. If you're not going to do it, somebody else will."

She's also very deliberate about not only setting boundaries, but also making them clear to her co-workers, in order to maintain work-life balance and prioritizing her three children, ages 3, 4, and 7.

"When I leave work, my phone gets shut off," she said. "My family comes first. My kids come first."

'It's a family atmosphere'

Thanks to Combs and the team at Jubilee Center, Charles not only got back on his medications. He's stayed on them.

"It was a hard thing for me to do, to get back on my meds," he said. "I know I need medication, but I always use an excuse to not take it."

He never misses a therapy appointment, and he's working hard to navigate his agoraphobia.

"He's the person I brag about all the time," Combs said. "I wish everyone could all thrive like Charles. He deserves all the credit. He's put in all the work. If he has a therapy appointment, he'll be here early. He's always the first to ask if anyone needs anything, and the first to volunteer to help."

Charles is quick to deflect credit.

"I could go on and on with the ways they've helped me," he said of Jubilee Center, rattling off a list of items he's been provided with, from a heater and an air conditioner to basic toiletries and clothing. "The biggest thing, though, was helping me with stress of daily life. To change my situation, I have to change the way I think, and the way I process information."

Staff also helped him apply for food stamps, and they did so with compassion and respect.

"It's a family atmosphere here," Charles said. "I can tell them anything."

His found family at Jubilee sang Happy Birthday to him on May 3. And Combs personally drives him to Schaumburg once a month to see his children.

It isn't just the clients who benefit from Jubilee's services. Combs said the fulfillment she takes from working with people like Charles enriches her life outside work.

"I say all the time that I didn't love my job so much, my clients and everything about it, there's no way I could work," she said. "There isn't a single day I wake up and I'm not excited to get to work. Obviously, I'm a case worker, but I feel like Jubilee as a whole is very relationship-built."



Kathleen Combs
Outreach Advocate

CCRT pairs mental health professionals with police officers

Calling the police for help with a mental health crisis represents something of a paradigm shift. Marie never would have predicted she'd be calling Loves Park police officer Chad Palmer when she's experiencing suicidal ideations or thinking about cutting herself to cope with her PTSD.

"Chad is the kind of person who keeps me accountable," Marie said. "He's super-kind, but he'll also be upfront and ask whether I'm thinking about cutting myself."

Palmer is one of four officers and deputies who are paired up with Rosecrance-provided mental health professionals on the county's Mental Health Co-Responder Program, also referred to as Crisis Co-Response Team (CCRT), that is funded by the Winnebago County Community Mental Health Board. The officer-clinician tandems respond to about 30 referrals per week, and last quarter they assisted nearly 450 unduplicated people.

Before becoming the team lead in July, Clinician Chris Nichols responded to calls for several months, so he's seen firsthand the effect of a clinician being present when an officer responds to a dangerous situation involving a mental health crisis.

"I think it takes a lot of the burden off the patrol officers," he said. "Mental health is not something you learn overnight or through the police academy. You have to be able to think on your feet. It's a great feeling, to meet somebody who might be absolutely dead serious about not getting treatment. I can go in and say, 'I'm not a cop. This is what we're seeing, let me help you.' When they see we have nothing on our vest but CCRT clinician, it puts them more at ease."

CCRT leadership set out to achieve three goals using the mental health board's funding: for services to be 100 percent available via telephone; to increase hours of service; and to measure the response time between a 911 call and meeting with a client. So far, so great. Currently, all calls are fielded from 6 a.m. to 11 p.m. Monday through Friday, and more than 80 percent of calls are responded to within 48 hours.

City of Rockford Detective Nate Kohanyi has spent 16-plus years with the

department, and has been a member of the CCRT since August 2021.

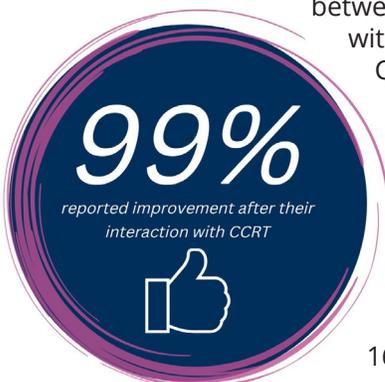
"We consistently have instances where people just don't want to talk to the police in that moment," Kohanyi said, adding that he's responded to "hundreds" of calls and that officers have been receptive and appreciative for the assistance of mental health professionals. "I think they see that extra level of expertise that can be brought to call."

CCRT launched as a pilot in December 2020, and in November of that year, Rosecrance partnered with the National Alliance on Mental Illness to provide training sessions for officers, during which a panel of members of the community shared their bad experiences with law enforcement during mental health crises.

"That was a pivotal opportunity for growth," said Joan Lodge, Rosecrance's grant management administrator and community liaison. "We're mental health professionals, and we understand mental health, but with CCRT, we're going in as a tandem. We're a team."

The CCRT tandems are vigilant in their follow-ups after initial calls, as Marie will tell you. She's grateful that when Palmer visits, he's joined by a clinician.

"That's super-cool," she said. "Chad understands what it's like to keep people safe during a crisis, but when you bring in a mental health professional, they have resources, coping skills and strategies that will help keep you out of the hospital. I didn't know there were so many other options out there, other than being admitted to the ER."



Nate Kohanyi,
City of
Rockford
Detective



Joan Lodge,
Grant
Management
Administrator
and Community
Liaison



Chris Nichols,
Clinician

RAMP advocates are allies for parents of struggling students

Tom is a fierce advocate for his son, Nik, a sixth-grader who is on the high-functioning end of the Autism spectrum. But no matter how persistently he made the case for Nik to have better support to deal with consistent bullying that was leading him to retaliate, Tom was getting nowhere.

Upon returning to in-person learning, Nik for the first time had to navigate the hallways, filled with barbs on provocations from his classmates, between classes.

"That was completely new for him, and I suggested providing a chaperone to get him from class to class, but the school district didn't seem to take that seriously," Tom said. "I was trying to get pieces in place, but it seemed like the school district was dragging their feet."

As Nik began retaliating, suspensions started stacking up, and Tom felt more and more desperate.

"As a parent, I don't have a lot of time to go into the ins and outs of what services are available to me through the state and the school district," he said. "I didn't know what avenues and approaches I had to help Nik be successful. I don't know the rules of engagement with the school district. I needed a voice to back me up."

He found one in Grace Gerrard, one of two client advocates hired by Regional Access and Mobilization Project (RAMP) for its Independent Living Services and Training program, made possible by funding from the Winnebago County Community Mental Health Board.

"A lot of times, parents feel overwhelmed and unheard," Gerrard said. "Tom is a great dad and a strong advocate himself. He was just looking for a little bit of backup.



From left to right: **Jana Mueller** (Lead Fast Track Specialist), **Alice Nichols** (Curriculum & Training Manager), **Eric Brown** (Systems Advocacy Coordinator), **Deanna Robbins** (Winnebago County Manager), **Grace Gerrard** (Youth Education Advocate), and **Daisy Carrillo** (Mental Health Advocate). Between Grace & Daisy is **Louie** (Emotional Support Dog)

When you bring an advocate in, the school is going to know that you know what you're talking about."

Tom contacted RAMP in March and was quickly matched with Gerrard. Her mere presence at meetings between Tom and school administrators made a world of difference.

"Nine times out of 10, just having an advocate in the room will shift the direction of the meeting," she said.

Voila: Nik was provided more support, including a chaperone to join him in the halls.

"He seemed to be more focused in his studies because of less bullying that was occurring," Tom said. "They seemed to start offering the services Grace had asked for."

In surveying its clients, RAMP learned that since expanding its services with grants from the Mental Health Board each of the past 2 years, 75 percent of its clients have reported they have a better understanding of the special education process, the law and their rights. For instance, there are state laws limiting the number of times a district may suspend a student before it must take action.

"That won't happen unless someone knows they're supposed to be doing that," said Katie Lee, RAMP's executive director. "That's where advocates and education are so crucial."

It wasn't easy for Tom to swallow his pride and ask for help.

"That's very hard for me," he said. "It was nice that I didn't feel like I was being judged as somebody who would typically ask for help. They were very understanding of my situation."

He was grateful that Gerrard shared that she, too, had a 504 Plan while she was struggling with chronic illness and extreme anxiety in middle school.

"As a working professional, I didn't expect her to share her own stories," Tom said. "She put me at ease."

"Oftentimes a lot of people assume someone in a role like this means you don't know what it's like to be on the other side," Gerrard said. "I've been in your shoes, I've walked in your path. And now I'm here to walk it with you."

No waiting list: CARES program addresses patient backlog

Remedies Renewing Lives' Community Action Resources Enhanced Services (CARES) program is something of an outlier in the mental healthcare landscape. While most behavioral health counseling agencies are struggling to recruit talent to address lengthy waiting lists, the two counselors brought on by Remedies since August are pounding the pavement to identify, help, and retain new clients.

"Getting people help quickly is extremely important," said Kathy Branning, who spent 5 years as Remedies' VP of fund development and marketing before accepting the role of VP of behavioral health in early November. "The key is engagement. It's not just that they get the courage to call you, but that you engage them immediately. If you put them on a waiting list and lose them, they might never call anyone again. We're all about not letting people fall through the cracks."



From top left in a clockwise manner: **Sophia M.** (Behavioral Health Clinician), **Laurie G.** (Vice President of Clinical Services), **Tracey B.** (Community Behavioral Health Clinician/ Substance Abuse Lead), **Kathy B.** (Vice President of Behavioral Health Services)

Both of the counseling positions are funded by grants through the Winnebago County Community Mental Health Board. The program's lead clinician, Tracey Bennett, took the helm in August, and shortly thereafter, Sophia Maserelli joined the team. They've been at Rock Valley College and recently presented to Collins Aerospace.

"Tracey is just knocking it out of the park doing outreach," said Laurie Graciana, VP of clinical services.

She'd worked with Bennett previously and recruited her because of her passion for creating and fostering relationships with community partners, from judges and probation officer to groups working to address the human trafficking crisis. "She has hit the ground running."

As a result of the dogged outreach, CARES has doubled its client referrals since August, with 50-plus clients being referred by more than 15 agencies.

Some of the most moving cases, however, are referrals.

A woman recently showed up at the agency "in dire need," as Bennett described it, and she was able to get her scheduled for an assessment the following morning.

"She just lit up," Bennett said. "It also brought her a lot of ease. She felt really grateful that she could come tomorrow and sit in for an assessment."

Maserelli recently assisted a potential client battling debilitating agoraphobia who wanted to get an assessment. Clients must fill out initial paperwork in person, but the woman didn't feel able to leave her home, let alone step into an office. Maserelli assured her over the phone that only a few people work in the office, and that it is a safe space.

"I just said, 'I hear you. I understand you,' and that helped ease some of her anxiety," Maserelli said. "I was able to negotiate with her to come in for the max of 30 or 45 minutes."

"She's got a very therapeutic affect about her that the clients seem to be drawn to," Branning said, "and she knows how to think outside the box with complex clients. She was so soothing and patient with her over the phone."

Two days after that phone call, the patient filled out her paperwork in person and has done virtual appointments ever since.

"Just judging how she sounded on the phone, I wasn't sure how it would go, but it was great to see her in person and see her demeanor," Maserelli said. "It was a very rewarding case."

This is what I want to do, so being able to know I was able to do that for someone was reassurance of my capabilities."

Beyond individual counseling, Bennett and Maserelli also run a variety of group meetings throughout the week, and they're looking to add more.

Bennett calls herself a "client-centered" counselor. So to read clients' gratitude in surveys is immensely rewarding.

"What sticks with me the most about the survey is when I read that staff provided them with empathy and dignity and care for their situation," she said. "I want people to be treated fairly and with respect. I've always said if I can help someone, I would want them to be treated as if they're my own, the way I would want to be treated."

Funds create game-changing therapy, advocate for DV program

A testament to the non-linear nature of healing, opposing words appear in a visual a domestic abuse survivor created with help from the therapist at Remedies Renewing Lives, a position funded by the Winnebago County Community Mental Health Board.

Atop the hand-drawn visual is the title "Who Am I". In one corner, shy and outspoken are tethered together. While the word fragile appears in small, lowercase script on the right side, at the center of the image are the biggest words:

A Strong Woman.

Before she began working with the therapist, Tonya, the client was unable to leave her house. She had no job, court appearances awaited, and she was battling to get her children back.

Fittingly, given that "recovering addict" appears in the visual, Tonya took a one-day-at-a-time approach with the client, adding words to the visual each time they met.

She identified her triggers and body symptoms when afflicted with anxiety. She developed coping skills and practiced self-care.

Now she has a full-time job, has established good coping skills and nurtured a strong support system. Again, fittingly, "nurture" appears in that visual, as well.

"One thing with this particular client was that she would tell me that she sees the light at the end of the tunnel, step by step," Tonya said. "We worked on challenging any negative thoughts that she experienced during the process and worked on focusing on the positive."



Becky Winstead
Vice-president of
Domestic Violence
Services

"Our clients face a variety of barriers and challenges in understanding the dynamics of being controlled by another person," said Becky Winstead, Remedies Renewing Lives' vice president of Domestic Violence Services. "They are so much stronger than they recognize. They've been surviving day in and day out."

Remedies also used funds from the mental health board to hire an advocate, Patience, as part of the launch of the Therapy

and Advocacy Project. Previously, the program had two advocates embedded in the Domestic Violence (DV) shelter and three in a nonresidential setting.

"We are so grateful to the mental health board for its help," Winstead said.

The results from the expansion of services have been flooring. Leadership set a goal of serving 100 adult survivors and 10 child survivors between June 2021 and May 2022. Thanks to the collaboration between Tonya and Patience, the project served 214 adults and 14 children.



In a self-survey, nearly every client indicated they were more knowledgeable about community resources, were more hopeful for the future, felt safer from abuse, learned more about safety planning, and when applicable, had a better understanding of the effects of abuse on their children's lives.

Many clients completely transform their lives. In some cases, simply breaking through and getting them into a shelter is a massive achievement.

"Personally, I see the success in their tiny victories every day," Tonya said. "Some of these women have never had a job, and they don't even have a resume or a driver's license."

Patience is seeing progress on a societal level, and she anticipates that it will continue with collaborations such as the one between the agency and the mental health board.

"The culture is drastically changing. I can't imagine the Netflix series 'Maid' coming out 15 years ago," she said. "Things are about to change in a huge and widespread way. It's amazing to be part of that movement."

Art, play therapy open doors for healing at Family Counseling Services

Thanks to funding from the Winnebago County Community Mental Health Board, Family Counseling Services of Northern Illinois more than doubled its counseling offices, from six to 13.

But numbers can't express the impact of two new rooms dedicated to art and play therapy.

"Art therapy works really well with kids because they don't really fully understand their emotions, so for them to just sit and talk about it doesn't work best," said Ashley Trospen, who joined Family Counseling Services in May 2021. "When they come into this space, there really aren't any rules. The only rule is that you need to be respectful, and respectful of yourself."

The play therapy room, originally envisioned as a conference room or group therapy space, sprawls with play mats, dollhouses, and shelves and shelves full of toys - including hundreds of miniatures children use to play out scenarios they can't put into words.

"The play therapy room is like gold in therapy to me," said Kelly Finch, who boasts 25 years of experience with play therapy and joined Family Counseling Services as its clinical director in July 2022. "Children need the space to be themselves. When they're hurt or wounded, and you provide that space for them, they immediately feel important, that you have a room that is just for them. Children will naturally heal when they're in an environment where they feel nurtured and safe. That's the beautiful thing about children."

In one case, a very young child who'd been sexually abused opened up through play therapy, making it possible for authorities to get further involved.

"Through therapy, patience and therapy little by little, what transpired actually came out," said Lynn Momberger, executive director of Family Counseling Services. "Those are just the first steps toward her healing, and without play therapy, I don't think that would have happened."





One of the most powerful therapies Finch uses takes place in a sand tray, where children play out scenes using miniatures. The miniatures seek out treasures that represent their true self. Finch said that when children are traumatized, it stunts their creativity.



“And when you experience something traumatic, your true self goes into hiding, and your false self emerges. That’s the self that can go to school and act like nothing is wrong.”

In many cases, the scenes depict traumatizing events that, once played out, can be left in the tray.

“When they leave it there, they don’t have to take it back into their world,” Finch said.

Buoyed by Mental Health Board funds, Family Counseling Services boasts 17 therapist, compared to seven when Momberger joined the agency. As a result, all but one of the 140 clients surveyed in January 2022 reported improvements, stabilization, or maintenance.



Trosper was overjoyed to find an opportunity to do art therapy locally after needing to drive to Aurora for her internship.

“My goal was always to bring art therapy to Rockford,” she said.

One of her clients, a 9-year-old girl, had lost her mother unexpectedly and was going to therapy with her father and brother.

“I just really felt she needed her own space,” said Trosper, who took her on as a client.

It was first in mid-summer of 2022 that she began to talk verbally about her mother. The breakthrough in her grieving process was a mask project, in which the client paints the outside the way the world sees them. Inside the child’s mask was a palette of blues.

With Trosper’s assistance, the girl entered some of her work into the Rockford Area Arts Council’s ArtScene in mid-October. Several of her pieces sold, one of them going less than half an hour into the show.

“She was so excited and was just over the moon,” Trosper said. “She’s healing now.”



Rosecrance's Access to Care program fast-tracks psych appointments

Quickly getting a client in to see a psychiatrist after an initial assessment is crucial. Just ask Leah. She's a Recovery Support Specialist at Rosecrance's Living Room, a safe, quiet space for people in emotional distress. But first, Leah was a client desperate for a diagnosis and treatment as she battled Bipolar II Disorder.

"I was 110 percent in. I couldn't take life the way it was anymore," Leah said. "I was going whole hog for it, no matter what. I was a total mess, so Rosecrance staff got together with the person doing the schedule and got me in to see a psychiatrist 3 days later."

Using funds over the past two grant cycles from the Winnebago County Community Mental Health Board, Rosecrance formed a plan to significantly reduce the wait between an initial assessment and an appointment with a psychiatrist. Its baseline was 97 days, the goal was to reduce that wait by 40 percent, and currently, when the need and desire for services are indicated at the initial appointment, the average wait time is 15 days.



"Leah is just one of thousands of people we have helped, and I get emotional just hearing her story," said Heather Borgardt, nurse manager at Rosecrance Ware Center.

Grant funds were used to create her position, and to fully staff the medical suite. Borgardt has been with Rosecrance for nearly 5 years, and before being promoted, she was the only nurse in the suite.

"I cannot speak loudly enough about how important that is to supporting our clients when they come in the door," Borgardt continued. "It's such an honor to help people through this journey. To see them blossom and shine and improve their quality of life, it's an incredible honor."

"Our careers have given us great purpose," added Joan Lodge, Rosecrance's grant management administrator and community liaison.

Borgardt said the influx of funds has allowed Rosecrance to retain talented psychiatrists with diverse skill sets to meet the needs of clients from all walks of life and socioeconomic statuses.

"It is paramount to have psychiatrists who understand this population and have the desire to work with them," she said. "It's one thing to have all these things written down on paper you'd like to do, but the grant funding being there to fund a robust and talented staff is so important. We've been able to grow in leaps and bounds, both with the care we're providing to our clients, but also with growth looking at the funding and how best to use it."

Rosecrance has also placed an emphasis on housing stability for its clients. When surveyed, 80 percent of those clients reported an overall improvement in housing stability.

"The first year was growth, and how we're leveling up, is what I like to call it," Lodge said.

Leah enjoys paying forward the blessing of recovery as a peer-to-peer counselor in the Living Room.

"When I first came to the Living Room, the big thing was that it was quiet," she said. "It was a safe place where I didn't have to think about anything - the judgment from my kids. The comfort of being here and doing things in here made it easier on me."

She takes immense pride in connecting personally with a client, seeing them relate to her, and then putting to use the same tools that have helped her thrive in life.

"It's big, especially when you can tell someone is going to be better from the conversation we have," she said. "It's incredibly rewarding seeing people walk in here with frustration and tears, and leave with a smile knowing they've found someone they can talk to without worries. It's not like it's a job."



Joan Lodge,
Grant Management
Administrator and
Community Liaison



Heather Borgardt,
Nurse
Manager

RSAC's Outreach Therapist meets children where they are: in school

A high school senior victimized by sexual assault had given up hope when she began working last winter with Jackie Zakarija, adolescent outreach therapist with Rockford Sexual Assault Counseling (RSAC). She was barely verbal and wouldn't make eye contact.

"We really, really built that relationship and established that our time together, and what we talked about was confidential," said Zakarija, who was hired using funds from the Winnebago County Community Mental Health Board. "That confidentiality piece, and that trust, it's everything. You just have to be genuine. You have to validate. And you have to be patient."

Zakarija heard from the teen over the summer. Once skeptical she'd make it to her 18th birthday, the client had left home for college.

"That's something she didn't think she'd do," Zakarija said.

RSAC's added outreach therapist works with children K-12 at all Winnebago County public schools, during the school day, and at no cost.

"Someone who is a victim of a crime should not have to pay to heal from that crime," said Erica Engler, RSAC's executive director, who added that holding therapy appointments right at the schools has resulted in fewer appointment cancellations. "Whether it's a single-partner household or two parents, they may not have the opportunity to come to the office, between sports, extracurriculars and any other dynamics within the family."

Zakarija said you have to be willing to play the long game.

"You might see a child several times, but they're not ready," she said. "Four years later, they might be ready then. That's what makes the relationships we build early on so important. You just keep holding that space and giving them hope. They have to choose."

Therapist Sam Thomas, who began with RSAC as a volunteer 6 years ago, said education is paramount for elementary school children. Therapists teach them how to set healthy boundaries, discuss what healthy relationships look like, and help them develop coping skills.

Thomas embraces the challenge of breaking through

generational trauma, as well as the stigma surrounding sexual assault cases.

"Sexual violence, and all violence in general, feeds on silence," she said. "Perpetrators want their victims to keep quiet about it, so they can keep doing it."

She added that children are referred because of their symptoms, rather than trauma that still needs to be identified, let alone addressed.

"It would be so hard to sit through math class when your perpetrator is sitting right next to you," Thomas said.

Zakarija also began with RSAC as a volunteer, and had offers to work with private practices. But only the adolescent outreach therapist role provided her what she wanted: an opportunity to work exclusively with children.

"I get to give back, and it's a population that's underserved, so these services are much-needed," she said. "They're welcoming us into their world."

"That's an honor and a privilege," Thomas added. "You go into this hopeful you can change the world, one person at a time. But really it's those moments when you realize that I'm the person being changed. I'll never be the same. I got to walk them through that darkest moment and see them on the other side."

"I GET TO GIVE BACK, AND IT'S A POPULATION THAT'S UNDERSERVED, SO THESE SERVICES ARE MUCH-NEEDED."

Stepping Stones expands with outpatient, children's services

It's an exciting time chock full of optimism for Stepping Stones Counseling Center, as the 53-year-old agency uses funds from the Winnebago County Community Mental Health Board to open more group homes.

The wellspring of optimism began in earnest 2 years ago, when the first of two grants allowed Stepping Stones to buy and renovate a building for its first outpatient counseling center, which also accommodated an expansion of services from 18 and older all the way down to 6 years of age.



Sue Schroeder,
CEO of
Stepping
Stones

"It's a completely new road for us, but we were hearing from the community and through (the National Alliance on Mental Illness) that the wait lists for services were so long," said Susan Schroeder, CEO of Stepping Stones. "Especially since COVID, we've seen the need for mental health treatment and counseling for children and adults alike."

The counseling center, at 437 Maray Drive, is strategically located a block from the bus stop.

"People need to be able to get to treatment," Schroeder said. "Cabs and Uber are expensive. It's all about access. What can people get to?"

The second of the two Mental Health Board grants is funding Stepping Stones' purchase and renovation of a sixth group home, which will help address a waiting list for residential treatment that was 56 men and 28 women long in the early fall of 2022.

The biggest hurdle Stepping Stones faces - an all-too-common struggle - is a workforce shortage.

"When you can flip burgers for the same pay we're able to pay our counselors, that's a huge problem," said Schroeder, who works with a statewide lobbying group that's trying to address the issue through legislation. "It's not just the pay, either. There's a lot of paperwork. It's a paperwork monster."



One counselor Stepping Stones added has been vital to the winding recovery path of a client who has endured severe trauma throughout the course of her life.

Sam Gaffey joined the team in June, and in July she took over working with Meredith, who'd begun working with a Stepping Stones counselor in early spring.

Meredith was molested as a child and physically abused by her husband in her 20s. She buried all her pain deep inside.

"I kept pushing it down because I had my kids," she said. "I had no time to set aside for anything. They had to have my full attention to make sure they grew up OK."

Meredith called Stepping Stones in April. As is the case for most, her recovery hasn't been linear.

"But she has made a lot of progress since we began working together," Gaffey said.

Over the years, she bounced around between agencies that put her on monthslong wait lists for a psychiatrist and required her to do group counseling, a nonstarter because of her severe paranoia.

"There's no way I'm going to do group," Meredith said, adding that she could barely stand being in her apartment with her daughter and son-in-law. "The paranoia at that time was horrible. Even to this point today, I have difficulties. I still get paranoid sometimes."

"We all do," Gaffey told Meredith, comfortingly.

That sort of comfort is chipping away at Meredith's tall, imposing walls.

"I am still ashamed of being molested," she said. "I keep trying to tell myself that it wasn't my fault. I was not to blame. I didn't ask for any of that. Sometimes it's hard, and for me to be able to talk with Sam and feel I'm not going to be judged makes it easier for me to talk about it, to find the help. I've been blessed to be able to open up and trust her."

"That means a lot to me," Gaffey said. "It's really good to hear. You don't always get the feedback."

Youth Service Network opens clinic, gives parents a lifeline

A single mother of four, Olivia was drowning in the tears of her children until her family got help from The Youth Service Network's Youth Trauma Clinic.

The family moved from Florida to Rockford in 2019, and being forced into virtual learning by the COVID-19 pandemic triggered a tidal wave of mental health woes for the children. Upon returning to school in person, one child developed anger issues. Another experienced sudden, crippling anxiety. Olivia's oldest came home crying every day.

"There was so much crying," she said. "They were always on top of me. That was overwhelming. There was no time for me. From the moment they came home, they were all over me."

She got them into therapy about a year ago. Diagnoses were made, treatment plans formed. With a safe space, healing began, and the fruits were immediately born.

"The crying stopped. All the crying every day coming home, it stopped," Olivia said. "They're finally letting me go. They have a little more control over their lifestyle. I feel more open to do more things and move around. Now they take charge. They come home, take showers, eat dinner."



Stefanie Lynch,
Case Manager and
Trauma Specialist

The children work with Stefanie Lynch, a case manager and trauma specialist who joined the Trauma Clinic about a year and a half ago, thanks to a grant from the Winnebago County Community Mental Health Board. YSN used the funds generated by the half-cent sales tax referendum to open the Trauma Clinic, which provides treatment through Cognitive Behavioral Therapy, Dialectical Behavioral Therapy, Play Therapy, and Motivational Interviewing with

wraparound services for youth in the community. The program also provides transitional living and mobile services for adolescents.

"I noticed with them talking to someone else and opening up with them, it's not mommy," Olivia said. "Mommy is mommy and a person outside can be an extra friend to listen to or talk to. It changed everything."

"Parents need to be safe and healthy so their kids can be safe and healthy." "If I send those beautiful children

back home with a mom who's struggling, they're going to continue struggling."

A child of the 70s, Olivia grew up in a time when mental health was rarely discussed. She adopted the intergenerational mentality that she had to carry all the weight for her family.

"I'd just take it day by day and try to work with my children with a smile," she said. "I really don't do much for myself. It's always something to do with the kids."

"This woman does everything, and she's incredibly selfless and has stepped up to the plate for her family," said Lynch, adding that Olivia also cares for her grandchild during the day. While she's not exactly booking a solo vacation, she can now do the chores and grocery shopping without interruption, which goes a long way for her mental health.

"It's a huge relief," Olivia said.

Lynch makes meaningful connections with clients and their family members. After all, she uses the same tools she shares with them, including a simple technique of pressing her thumbs in her pockets.

"It's a grounding technique that allows us to feel something very specific," Stefanie said. "And for children, it's also a way to keep our hands to ourselves."

That was clutch for another client, a boy in elementary school whose struggles with bullying manifested in the form of anger and violence. He began seeing Lynch in October 2021, and his behavior and quality of life changed quickly.

"It was gradual, but within the first couple of months you could see the change in him," the boy's mother, Marcia, said. "He's actually doing quite phenomenally, and he still uses that technique as much as he possibly can."

"He was so likeable and sweet," Stef said. "Not enough people realize there's beautiful people under these behaviors."



Jail keys on continuity of care during, after incarceration

Once an inmate leaves the Winnebago County Jail, Lt. Anthony Ponte would prefer to never see them again. The key to drive down recidivism, in his eyes, isn't either greater access to mental health services in the jail or beyond its walls. It's linking the work done in both of those worlds.

"Our goal is to become a gold standard facility when it comes to continuity of care," Ponte said. "That means building on relationships with our community partners, but also with probation, pretrial services, and judges. It's the whole criminal justice system for which the continuity of care is important."

The past two grant cycles, the jail has used funds from the Winnebago County Community Mental Health Board to enhance its behavioral health services by increasing access to medication, providing counseling daily, and better tracking recidivism.

The results during the most recent grant cycle speak for themselves. In 2022, on average, more than 35 inmates have been started on new medications each month, and more than 40 have had their medications adjusted.



Those numbers are the direct result of the addition of three behavioral health clinicians, leading to 210 individual counseling sessions. The wait time to see a counselor is down from 2 weeks to 6 days.

For quite some time, Megan Johnson, the supervisor of the mental health site who's worked at the jail for 18 years, was the only counselor on staff.

"I might have had a lot of contacts with inmates before, between 300 and 350, but because it was just me, I wasn't able to spend much time with them," she said.

Staff now boasts a full-time nurse practitioner dedicated exclusively to seeing mental health patients.

Suicide risk assessments and prevention services have been enhanced, and the jail has added many more group sessions, as well.

In Seeking Safety, Counselor Kirstin Roby works with inmates wrestling specifically with substance abuse.

"This is something I'm very passionate about," Roby said. "I have a lot of people in my life who have been affected by addiction, and it's rewarding when inmates learn to heal from within - when they start answering the question, 'What's the reason you first started using?'"

Counselor Kevin Verde, who runs the Thinking for Good group, said most inmates aren't thrilled about group work but often come back with "interesting revelations."

"One guy came back and said he broke up with his 'other girlfriend,'" Verde said. "It isn't so much what I teach, but getting them to engage in self-insight and their own thinking processes. Do I want to feel a different way about myself? The group is really something a lot of people don't like, but when they have that moment where they recognize a cognitive dissonance, that's really incredible to see."

The newly hired staff are vital in connecting patients with services outside the jail, for when they're released, and then staying in touch with them. Ponte said an important area of reform is changing policy so that personal information can be released from the jail to outside providers to ensure continuity of care.

"We're doing things that aren't being done elsewhere," he said. "We want to follow their success, and we don't want to see them here again."

Currently, more than 70 percent of inmates have been incarcerated between one and 10 times. About 20 percent have been booked between 11 and 30 times, leaving about 8 percent who have been locked up 31 or more times.

The data is tracking in the right direction. Fighting is down. And anecdotally, Johnson is seeing significant change when she makes her rounds.

"Being able to see them get back on their medications and getting a smile back on their face, eating and showering and having someone who's checking in with them, that's what keeps me coming back every day," she said.

CARE program connects inmates with life-saving services after incarceration

There are leaps, there are bounds, and then there's the growth of the University of Illinois College of Medicine's Compassionate Appreciation for Recovery in Everyone (CARE) program, funded in part by the Winnebago County Community Mental Health Board.

The CARE program is a partnership with the Winnebago County Jail and UI Health Mile Square Health Center-L.P. Johnson Rockford built to connect inmates to mental health and substance use disorder services once released. It also focuses on providing education and employment referrals and better tracking outcomes through electronic client records.

In the first quarter of Fiscal Year 2022, the CARE Program served just two individuals. Over the next three quarters, it averaged just shy of 100.



Jordan Vold,
Physician
Assistant

Jordan Vold, a physician assistant with UI Health Mile and co-director of the CARE Program, emphasizes medication-assisted recovery, such as Suboxone and Vivitrol. He said one of the biggest barriers to getting patients life-saving medications is unwarranted stigma.

"When we're talking about substance abuse recovery, we need to be using the language of,

"This is a chronic disease," Vold said. "We don't give a diabetic a hard time if they're bringing a Coke to the office and checking on their blood sugar. We don't view it on the same moral plane."

Vold said the mortality rate for a released inmate with opioid use disorder is 40 times that of the general population.

"That shows the importance of same-day, next-day access to life-saving treatments," he said.

Through the CARE program, he recently administered Vivitrol to a patient who has been incarcerated more than 50 times. In another case, a long-acting form of Suboxone called Sublocade had a near-immediate, transformative effect on a patient who requested he be taken directly from jail to the clinic for the injection.

"For a week and a half, he was sick as a dog, and within 5 minutes of treatment, he was ready to get something

to eat," Vold said. "He's working his program, and he's remained in recovery."

In its second year of operation, the CARE program has added two new components: case management focused on program intake, including assessment of a patient's social determinants of health; and trauma-informed care geared toward educating physicians how to appreciate and address trauma in patients with opioid use disorder.



Tricia Corrigan,
Nurse
Practitioner

Tricia Corrigan, who has been a nurse practitioner at the jail for 10 years, is the other co-director of the CARE Program. She said a patient's long-term success hinges on the work done while they are incarcerated.

"The reality is, when they come to jail, this is their time to pause and get sober for a while," Corrigan said. "Outside of the jail, most of our patients have chaotic lifestyles."

Corrigan helps connect patients with Peer Recovery Specialists such as Anita Bramble.

"I meet with these patients at their most vulnerable moments, and it's crucial to meet them where they are and tell them what they're going through is normal," Bramble said. "It feels great to make them feel like they're a person, not just an addict. It's amazing to have the opportunity to do that and do that so quickly."

The reality is most patients will end up being behind bars once again. Recovery is not linear, and success is a moving target.

"Our measure of success isn't them owning a home," Corrigan said. "Sometimes success looks like instead of getting arrested on a weekly basis, we're seeing them every few weeks."

"It's most often two steps forward, one step back," Vold said. "It's an interesting dance that way."



WCCMHB

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