



Mt.  
**HOPE**  
family center

ANNUAL REPORT 2012

Dear Friends,

Federal grants fund much of the work we do at Mt. Hope Family Center. Looking ahead at how we will be affected by the Congressional budget cuts and the Sequestration is vital to continuing not only our research, but our intervention and prevention services in the community. As of now, we know that all federal agencies, including the National Institute of Mental Health, will be required to cut spending by 10%. Since grants are paid over several years, this means even current research funding will be reduced.

I am working with our advisory board, our staff, and our university and community partners to evaluate available resources and identify how best to meet this new challenge. There is no doubt that our commitment remains strong to conduct groundbreaking research and provide evidence-based services for at-risk children and families.

- Our research is relevant and important. We know in times of economic downturn incidences of maltreatment increase. Discovering more evidence-based interventions maximizes limited funding and provides families with the best chance for successfully coping with difficult situations.
- By building innovative collaborations with local and national groups such as the University of Rochester Pediatric Group and the Institute of Child Development at the University of Minnesota, we continuously strengthen our knowledge base and expand our network of resources.
- We continue identifying new ways to serve children and families. Three newly funded projects in 2012 enable us to reach new populations and address various types of trauma. You can read more about these initiatives in the Clinical Programs and Research sections.

**PEACE** reaches out to military families for the first time and continues our membership in the prestigious National Child Traumatic Stress Network.

**SOLAR** follows up former Summer Camp participants to study the links between early maltreatment and later substance abuse. It is remarkable that we are reaching out to children (now young adults) that we served over a decade ago.

**TRAIN** will identify children affected by prenatal alcohol exposure and provide and evaluate the efficacy of a new combination of interventions.

- We are part of the University of Rochester, one of the nation's leading research centers, and we have over thirty years of proven work, which we hope will give us an advantage in securing future research funding during this era of diminishing resources.

The author Bern Williams said, "Man never made any material as resilient as the human spirit." Ultimately, that is what drives us to continue. It's that child who proudly shows his therapist his report card with all positive remarks about his improved behavior and the mother who regains custody of her child after working hard in Incredible Years parenting classes. We know our work changes lives and it motivates us to make sure Mt. Hope Family Center continues growing in the future.

Thank you for your interest in and support of our work.

Best regards,



Sheree L. Toth, Ph.D.

Executive Director



# Clinical Intervention and Prevention

Mt. Hope Family Center provides six evidence-based models in our clinical intervention and prevention programs. We help approximately 900 at-risk children and families annually through our clinical services and research projects, and even more through community outreach and collaboratives. The Monroe County Department of Human Services (DHS), state and federal grants, United Way of Greater Rochester (United Way), and private donations fund these services.

## CLINICAL SERVICES

**Child-Parent Psychotherapy (CPP)** – This preventive intervention focuses on treating child trauma and its impact on attachment relationships of parents and children ages birth-six years. Therapists meet with both parent and child weekly for 10-12 months. We are one of the nation's premiere facilities in providing CPP services, researching its efficacy, and disseminating the model throughout the United States.



**Cognitive Behavioral Therapy (CBT)** – This short-term intervention addresses thoughts, feelings, and behaviors in children ages 3-16 years with symptoms of stress, depression, anxiety, or anger management difficulties. Therapists meet with clients for approximately 16-20 sessions. We use **Trauma Focused CBT (TF-CBT)** for children who experienced trauma and exhibit posttraumatic stress disorder (PTSD) symptoms. **Alternatives for Families CBT (AF-CBT)** specifically helps families struggling with conflict, aggression, or violence.

**Incredible Years Parenting Group (IY)** – This award-winning preventive curriculum teaches effective parenting skills and positive behavior management through group discussion and role play. Parents meet at the center for 14 group sessions.

**Interpersonal Psychotherapy (IPT)** – This 12-16-week intervention helps adults and teens struggling with depression. When participants identify their symptoms, understand how relationships affect their depression, and how depression impacts other aspects of their lives, they can develop better relationship and parenting skills, and identify ways to avoid future depressive episodes.

## CLINICAL PROGRAMS

Mt. Hope Family Center conducts intervention programs in these areas: trauma treatment (specifically coping with violence and other stresses), family functioning, parenting, conflict resolution, and developing positive interpersonal relationships in children.

**Preventive Services** – We provide each of the evidence-based interventions detailed above through a contract with the Preventive Unit of the Monroe County

Department of Human Services. Some highlights from 2012 include:

CPP, CBT, IPT, and PATHS served 151 children, 63 of whom were in foster placement at the beginning of service and 88 resided at home. Of the group in foster care, five (12.6%) returned home. Of the 88 children residing at home, 86 (98%) remained at home at the completion of their treatment.

100% of children enrolled in PATHS improved their functioning through achievement of treatment goals as indicated by counselor reports.

100% of children enrolled in CBT decreased their total behavior problems during program enrollment [from pre to post] as indicated by a point reduction noted on the Child Behavior Checklist.

**Behavioral And Social Interventions for Children / Building All Skills in Children (BASIC)** – This community partnership with United Way, Children's Institute and six accredited urban childcare centers provides an integrated network of preventive and therapeutic services on-site in the childcare centers.



Universal programs like Preschool PATHS are provided to entire classrooms. We provide behavioral consultations with participating centers and CPP or TF-CBT for higher need children and families.

**Healthy Futures** – This partnership with Starlight Pediatrics, DHS, Society for the Protection and Care of Children (SPCC),

Children's Institute, and Coordinated Care Services, Inc. is funded by a grant from the Centers for Disease Control and Prevention and provides evidence-based services to Starlight patients newly entering foster care. Mt. Hope Family Center provides any needed trauma screenings, TF-CBT, CPP, or IPT services through the Monroe County Visitation Center.

## National Child Traumatic Stress Network

Two clinical projects are funded through service grants from the Substance Abuse and Mental Health Services Administration of the U.S. Department of Health and Human Services (SAMHSA). This establishes the center as a member of the National Child Traumatic Stress Network (NCTSN), a nationwide partnership of academic and community-based centers aimed at improving care for children and families struggling with abuse, neglect, community violence, and other forms of trauma. Mt. Hope Family Center is the only member in Western New York.

As part of our membership, clinical staff members engage in collaborative workgroups with other NCTSN members, addressing such topics as domestic violence, physical and sexual abuse, trauma symptoms in the child welfare population, and the impact of trauma on young children. At presentations offered locally



and nationally, our staff disseminates information gleaned from research and practice at Mt. Hope Family Center and involvement in NCTSN. In February, project staff attended the All-Network Conference in Baltimore, MD, where they collaborated with members to build and enhance their knowledge of trauma treatment and the evidence-based models practiced at Mt. Hope Family Center. They also met with model developers and discussed implementation and product development.

Both SAMHSA funded projects provide and evaluate CPP, AF-CBT, and TF-CBT to promote resilience in children ages 0-17 who have been exposed to traumatic situations.

**Promoting Positive Pathways (PPP)** – In its third and final year, PPP provided services to 180 participants involved with the child welfare system, including foster care. Of those, 40 children and 40 parents/caregivers received TF-CBT, 30 children and 30 parents/caregivers received CPP and 20 children

and 20 caregivers were served through AF-CBT. Data analysis will continue in 2013.

### Promoting Emotional Adjustment in Children Experiencing challenges

**(PEACE)** – This new program builds on the success of PPP and will enroll 360 young children and their families

(90 each year) over four years. PEACE continues work with children and families in the child welfare system and expands to include military families, whose children often face challenges due to the unique stresses of deployment and loss. During 2012, a Community Advisory Board formed and initiated three focus groups with military families and military-oriented service providers regarding service member and family needs and available services. PEACE will begin enrolling families and collecting data in 2013.



NCTSN

The National Child  
Traumatic Stress Network

## After School Program Reaches 25 Years

For two and a half decades, elementary aged children from high-risk homes and neighborhoods have learned healthy social skills and non-violent conflict resolution at Mt. Hope Family Center's After School Program. If you visit a classroom, it looks like any you might find in another school, with nametags, drawings and the daily schedule on the wall. But, then you find a poster titled, "Sometimes I Feel...", filled with cartoon faces showing various expressions or a red, yellow and green traffic signal with three steps for problem solving and you realize more than crafts and homework happen in here.

### The Need

Mt. Hope Family Center began as a therapeutic preschool in 1979, integrating research on how maltreatment affects human development with clinical services for at-risk children. In this unique non-clinical setting, we learned more about normal and abnormal early development and what clinical interventions worked best with young children. Its success led us to ask if there could be a similar program for older children as they faced the socio-emotional challenges and academic structures of school. So, in 1987, our After School Program opened its doors to children ages 6-11.

### PATHS Club

At first, each counseling team developed their own lesson plans based on the developmental stages and needs of their group. Then, in 2002, a pivotal change occurred when we adopted a curriculum specifically designed to improve the social and emotional skills of children, Promoting Alternative Thinking Strategies (PATHS). This research-based program provided comprehensive training, assessment and teaching resources for multiple ages. Clinical Director Jody Todd Manly explained its significance, "Since everything we do at the center is based on research findings, it was a perfect fit. This was such a fundamental change, that we renamed the program PATHS Club."

The PATHS curriculum covers five domains of social and emotional development: self-control, emotional understanding, positive self-esteem, relationships and interpersonal problem-solving skills. The lesson plans

weave a behavioral theme, like "teamwork and sharing" or "respecting others when you disagree," throughout the class. Each concept builds upon the previous ones over the seven-week session and counselors reinforce them during formal activities, such as role playing and informal ones, such as crafts or play time. At the end of the class, the group meets to reflect on the day and, more importantly, discuss some practical applications for that concept outside of class.

### 2012

Thanks to continued support and funding through the Monroe County Department of Human Services (DHS), nearly 1500 children have attended the After School Program over the past 25 years. In 2012, we held three 21-day sessions with 20-25 children in each one. Half of the children are referred by DHS and the other half are recruited from the community. Based on a Child Behavior Checklist conducted at the beginning and end of this year's PATHS Clubs, 100% of the children enrolled showed decreased overall negative behaviors.

We are also grateful for two significant private gifts this year. The **Marie C. and Joseph C. Wilson Foundation** provided \$8000, which we will use for our Summer PATHS program in

2013. A \$2000 mini grant from the **Greater Rochester Health Foundation** allowed us to purchase indoor and

outdoor sports equipment, including a water slide, ping pong table and climbing structures as well as balls, jump ropes and Frisbees for the children to earn as rewards and continue physical activity at home.

25 YEARS

## AFTER SCHOOL Program



# Research

Research provides the foundation for all we do at Mt. Hope Family Center. By identifying different processes in normal and atypical child development, we better understand what factors contribute to poor adaptation and psychopathology, and what promotes resilience and healthy development. We primarily focus on the most at-risk children in our community who live in environments prone to maltreatment, community violence and maternal depression, and base all of our clinical interventions and preventions on research findings. You can find more detailed project descriptions and contact information on our webpage, [www.mthopefamilycenter.org](http://www.mthopefamilycenter.org).

**Principal Investigators** are with the University of Rochester's Department of Clinical and Social Sciences in Psychology and Mt. Hope Family Center unless otherwise noted. Dante Cicchetti, Ph.D. is with The Institute of Child Development at the University of Minnesota.

## Biobehavioral Research in Different Generational Experiences (BRIDGE)

Project BRIDGE is a multidisciplinary team from the fields of psychology, engineering, cardiology, and communications developing new methods of studying the parent-adolescent relationship. BRIDGE will follow middle school students and their families over a two-year period, analyzing emotional reactivity through several methods including: a recently designed wireless EKG monitor, paralinguistic voice analysis systems, and emotion reporting techniques.

**STATUS:** BRIDGE is finalizing Wave 1 data collection by this fall and will begin Wave 2 at that time.

**Principal Investigators:** Melissa Sturge-Apple, Ph.D., Patrick Davies, Ph.D., Wendi Heinzelman, Ph.D., Zeljko Ignjatovic, Ph.D. – University of Rochester Department of Electrical and Computer Engineering; Spencer Rosero, M.D. – University of Rochester Medical Center Department of Cardiology

**Special thanks to our funder:** Eunice Kennedy Shriver National Institute of Child Health and Human Development

## Building Healthy Children (BHC)

BHC is a home visitation-based program that provides and evaluates preventive interventions for women who had their first child prior to the age of 21 years, and meet other criteria. Approximately half of the families, the treatment group, receive



a combination of three evidence-based programs: CPP, IPT, and Parents as Teachers. University of Rochester Medical Center outreach workers assist with support services such as food, housing, medical care,

and transportation for three to five years. The other half, or comparison group, receive annual screening assessments and service referral as needed.

**STATUS:** Since 2007, BHC has enrolled 497 families, with 274 in the treatment group. At intake, children ranged in age from one week to 24 months and mothers ranged in age from 14 to 23 years.

- 99% of treatment participants have avoided foster care placement.
- 98% of treatment participants and 95% of the comparison group avoided indicated Child Protective Services (CPS) reports during their enrollment and 94% of all families have continued without CPS involvement after completing the program.
- 92% of treatment families completing the program remain current with pediatric care, compared to 77% in the comparison group, among children who were at least 15 months of age.

**Principal Investigator:** Sheree L. Toth, Ph.D.

**Special thanks to our funding partners:** Monroe County DHS, United Way, U.S. Health Resources and Services Administration through the New York Department of Health



### **Inspiring Possibilities in Teens (IPT)**

IPT began in 2011 and hopes to determine if a proven preventive intervention for depression in adolescents, IPT-A, can prevent Major Depressive Disorder in low-income, high-risk teen girls. This five-year project works with girls ages 13-15 and their mothers, focusing on relationships, emotions, problem solving and life skills.

**STATUS:** As of the end of calendar year 2012, IPT has enrolled 137 families; 76 were determined to be eligible and remain active with research. We plan to enroll 350 families.

**Principal Investigators:** Sheree L. Toth, Ph.D. and Dante Cicchetti, Ph.D.; Co-Investigator: Jody Todd Manly, Ph.D.

**Special thanks to our funder:** The National Institute of Mental Health

### **Study Of Late Adolescent Resilience (SOLAR)**

During 2004-2008, the National Institute on Drug Abuse (NIDA) funded a study at Summer Camp investigating the relationship between the chronic stress associated with maltreatment and risk factors for later substance use and mental health problems in children 10-12 years old. Over five years, SOLAR will reconnect with 700 of those participants, who are now 18-20 years old, and evaluate their substance use and mental health, socio-emotional well-being, personality, and relationships in addition to assessing memory, inhibitory abilities, attention, and intelligence.

**STATUS:** Funding began in September and the new team will begin interviews in January, 2013.

**Principal Investigators:** Fred Rogosch, Ph.D., Dante Cicchetti, Ph.D.

**Special Thanks to our Funder:** The National Institute on Drug Abuse

### **Successful Transitions in Ethological Perspectives (STEP)**

STEP examines the behavioral and physiological ways children cope and respond to different types of conflict between parents. This multi-faceted study focuses on 244 families with children ages four and five and combines clinical observation and information from the families with physiological data, to determine signs of distress or fear in the children.

**STATUS:** STEP began Wave 3 data collection and is currently coding observational tasks from the project.

**Principal Investigators:** Patrick Davies, Ph.D., Melissa Sturge-Apple, Ph.D.

**Special thanks to our funder:** Eunice Kennedy Shriver National Institute of Child Health and Human Development

### **Summer Camp**

Children ages 6-11, from low income, high-risk homes spend a week enjoying traditional camp recreation, while participating in research-related activities, social skill building exercises and individual time with trained counselors. The staff uses a variety of assessment

tools for evaluating the children cognitively, emotionally and physiologically, checking daily levels of the stress hormone cortisol, and collecting DNA samples to study genetic influences on adaptability.

**STATUS:** In 2012, 213 children attended camp.

**Principal Investigators:** Fred Rogosch, Ph.D., Dante Cicchetti, Ph.D.

**Special thanks to our funder:** National Institute of Mental Health



# Training, Dissemination and Recognitions

As part of the University of Rochester, we offer future research scientists and clinicians a variety of training and hands-on opportunities not available elsewhere. By sharing our research findings through training, professional publications and lay media, we increase the understanding of how trauma affects human development and the most efficacious clinical treatments.

## Training and Dissemination

In addition to training received through our NCTSN membership, approximately 30 undergraduate students and 10 graduate students were involved with Mt. Hope Family Center in research and clinical capacities in addition to 12 student counselors in our PATHS After School Program and 50 in Summer Camp.

Our monthly Brown Bag Lunch series, hosted by Dr. Sheree Toth and Dr. Patrick Davies, offered University of Rochester clinical and developmental psychology graduate students presentations on professional development and current MHFC-affiliated research updates.

Dr. Toth and Dr. Jody Todd Manly spoke to various groups throughout the Rochester area including: the Hillside Family of Agencies, United Way's Women's Leadership Council, The Perinatal Network of Monroe County and the University of Rochester's "Launching Careers" Seminar Panel.

The University of Leipzig invited Dr. Manly to Germany to train researchers on the Maltreatment Classification System she developed with former Mt. Hope Family Center staff members Doug Barnett, Ph.D. of the Child and Family Study Group at Wayne State University and Dante Cicchetti, Ph.D.

## Publications

Mt. Hope Family Center research scientists published 23 papers in professional journals during 2012. You can find the complete list of titles under the Publications section of our webpage, [www.mthopefamilycenter.org](http://www.mthopefamilycenter.org).

Dr. Toth continues her role as an Associate Editor for *Development and Psychopathology*, is on the editorial board of



*Child Maltreatment, Journal of Child and Family Studies* and an ad hoc reviewer for over 12 other journals. Dr. Manly serves on the editorial board of *Development and Psychopathology* and is an ad hoc reviewer for eight other journals. Dr. Rogosch serves as an Associate Editor for *Development and Psychopathology* and an ad hoc reviewer for over 10 other journals.

## Recognitions

Dr. Sheree Toth received the prestigious **Dr. David Satcher Community Health Improvement Award** for making a "significant contribution to community health in the greater Rochester region through research, education, clinical services and outreach efforts."

The Monroe County ACCESS/ Office of Mental Health awarded Dr. Manly their "**Got Dreams**" Award for Mental Health, recognizing her trauma-informed care and efforts in bringing attention to how trauma shapes an individual's behavior.

Dr. Robin Sturm, clinical coordinator for BHC, received the **Career Achievement Award** at the Greater Rochester Awards for "exhibiting innovation, leadership and creativity to help deliver positive, measurable results."

Dr. Dante Cicchetti was honored in Zurich, Switzerland, with **The Klaus J. Jacobs Research Prize** recognizing his groundbreaking work in the field of developmental psychopathology.



## Fundraising

Thank you to everyone who supported us through one of these community efforts.

**Raising on the Roof, “Push Yourself for Prevention”** – As part of a Webster Schroeder High School senior project, teacher Paul Valenti camped on the school roof in the January snow; agreeing to stay one minute for every dollar students donated up to 48 hours. The project raised \$3000 for the center.

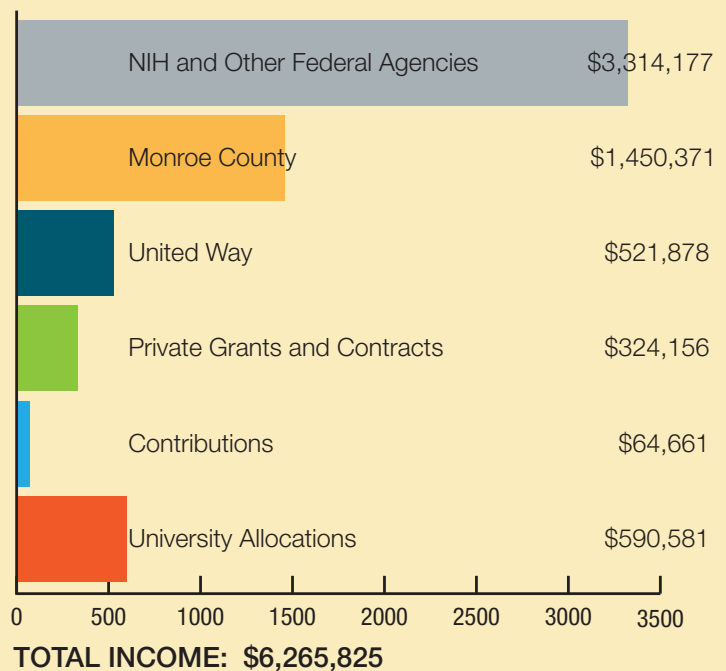


**Blue Jean Days** in April asked area businesses and university organizations and departments to help us recognize *National Child Abuse Prevention Month* by donating \$5 for the chance to wear jeans to work or holding events on our behalf. The various events raised \$15,000.

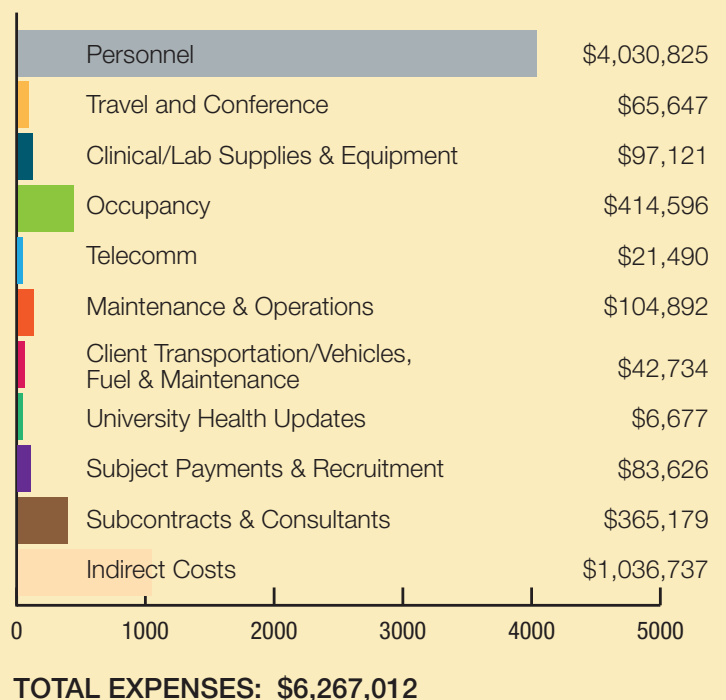
**Thanksgiving Baskets** – Four students at Webster Schroeder High School collected over \$1200 from friends, family and staff and purchased all the ingredients to serve Thanksgiving to 11 families.

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### INCOME



### EXPENSES



# Thank you to our financial donors in 2012.



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