Catalyst IN DEPTH
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Other victims

In a city wracked with violence, children carry their pain to school, hampering their ability to focus. Chicago Public Schools leadership wants to help, but too often obstacles stand in the way.

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Schools should provide help for traumatized children

By Lorraine Forte
Editor-in-Chief

On the surface, the two stories are unrelated: the appalling upsurge in shootings and homicides in Chicago this year and the Chicago Teachers Union's announcement of plans for a strike authorization vote.

But look closer—there's a connection. Union leaders want the district to negotiate on a host of issues, among them the lack of social workers and other mental health clinicians in schools. It's a need that's become more critical given this year's upsurge in violence. By the first weekend in June, the murder tally for 2012 was more than 200, a 50 percent increase compared to the same period in 2011. Over 800 shooting incidents have been reported, compared to about 700 last year.

Clearly, violence is endemic in too many neighborhoods and, by extension, touches too many schools and leaves too many children traumatized. Is it reasonable to expect children to be attentive and eager to learn after they've heard about or seen violence, fatal or not?

Even adults feel edgy, unsettled and unfocused in the aftermath of shootings. When a shooting happens in my neighborhood, Woodlawn, half of my workday morning is taken up by discussing the details with a co-worker who lives nearby. Part of relieving the stress we feel is to share details we know or have heard—Was anyone killed? Where did it happen? Did you hear the gunshots? You know the situation is out of hand when you can discern and describe the difference between gunfire and firecrackers.

We have an outlet for our anxiety. But what about the schoolchildren who don't?

Indeed, once the crime scene tape comes down, the media reports—if the shooting was sensational enough to make the news—are off the airwaves and the peace vigils and funerals are over, what's left? Communities, including children, that must deal with the aftermath.

Ideally, schools would be a refuge in these cases, especially in poor communities that lack other institutions and social capital to provide support. But as the CTU and others have pointed out, schools do not have enough social workers and clinicians to meet schools' mental health needs. The social workers that CPS provides—based on a school's enrollment and the needs of special education students—instead spend most of their time managing special education cases. Each school has a counselor, but counselors have a host of duties that don't include mental health support. Outside organizations provide counselors, but only to some schools.

Yet according to a survey by Communities in Schools of Chicago (CISC), mental health issues are more urgent than ever. The need for services to address the emotional and behavioral well-being of students ranked as a top priority among principals in the CISC network. (For more on the survey and CISC's work on school mental health, see CISC Executive Director Jane Mentzinger's op-ed online at www.catalyst-chicago.org.)

With the right training, teachers can provide in-class support for children to help them cope with the emotional aftereffects of trauma. But the burden cannot, and should not, be on teachers. Society pays them to teach, not perform therapy.

Yet the impact of trauma can easily lead to poor academic performance and a troubled school climate. Children who have lost a sibling, parent, friend or neighbor to violence are likely to act out and become angry in school or simply not pay attention in class. Teens who travel to high schools in rough neighborhoods can easily become "hyper-vigilant," as one social worker puts it, against potential trouble. As a result, they are more likely to strike out at the slightest provocation, in the neighborhood or in the hallways at school.

Mental health programs and social-emotional supports, such as peace circles and therapy groups, can ultimately make it easier for teachers to teach and students to learn.

Barbara Shaw, head of the Illinois Violence Prevention Authority, applauds CPS for recognizing the potential impact of trauma and violence on children. The district has begun training social workers and counselors in research-based strategies to help children cope with trauma. But because these clinicians are already stretched thin, only about 13 percent of those who were trained have gotten therapy groups up and running.

The union is right to put clinicians on the negotiating agenda. Mental health needs must be part of the school improvement equation.

MENTAL HEALTH GAP

Communities in Schools of Chicago provides social services to a network of 159 schools. Here are some findings from a 2011 survey of principals regarding school mental health.

- **64%** identified mental health services as a top 3 priority, just behind health education and violence prevention.
- **60%** believe that mental health issues are a significant factor in student absences.
- **80%** believe that mental health issues affect classrooms more now than three years ago.
- **59%** agreed that schools are providing more mental health programs now than three years ago.

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Counselor Jorge Santaella takes a Shields student to his office to talk. Santaella works full-time at the Southwest Side school because Brighton Park Neighborhood Council pieces together various grant funds to pay his salary. In one survey, principals said mental health services ranked as a top need at their school. **[Photo by Cristina Rutter]**

Tragedy's aftermath

District leaders understand that children who have witnessed violence or other traumatic events often have trouble in school. But without extra resources or staff, schools are hard-pressed to offer the mental health support that would help students cope with their experience. ***COVER STORY: PAGE 4***

8 Crisis team swamped by more cases
The unit of specially trained social workers and psychologists has shrunk in recent years, but the number of cases has more than tripled.

10 A temporary fix
Turnaround schools receive extra money that is often spent on social-emotional help for students. But the progress these schools have made is in danger when the short-term cash runs out.

12 A necessary luxury
Chicago Talent Development High has a full-time social worker to coordinate schoolwide mental health programs. The catch: Paul Fagen's job is paid for with outside funding.

14 A safe start from trauma
A state-funded program that offers counseling to young children who have been exposed to violence serves only a fraction of children who would benefit from help.

DATA GUIDE

PAGE 9
- Crisis response calls

PAGE 14
- Safe from the Start funding

ON THE COVER: Children play near a memorial for 13-year-old Schanna Gayden in the playground of Funston Elementary School in Logan Square, where she was killed in July 2007 by gang crossfire. **[Photo by Carlos Javier Ortiz]**

No summer break

Schools will be on vacation, but *Catalyst Chicago* will continue to provide the latest in education news. To keep tabs on contract negotiations, the longer school day and more, go to catalyst-chicago.org.

DAKI0061638

Tragedy's aftermath

Students who witness shootings, lose a parent or experience other trauma often have trouble focusing in school and fall behind academically. CPS leaders want schools to provide therapy strategies that have been proven effective elsewhere. But a lack of resources has hindered the district's plan.

WHY IT MATTERS

Research has established a link between the experience of trauma and school misbehavior and academic failure. Hard data on the number of traumatized children is sketchy, but surveys show that as many as a quarter of children in rough Chicago neighborhoods have witnessed a shooting. Helping these children is proving to be difficult.

- This year, Chicago Public Schools trained 205 social workers, psychologists and counselors in an evidence-based trauma group therapy program. But only 13 percent of those trained got groups underway.
- CPS is providing no extra staff and few resources to support mental health services, such as group therapy programs in schools. Fewer than 4 percent of traditional CPS schools have full-time social workers.
- CPS' crisis team has shrunk over the past five years, though it is handling three times the number of calls.
- A state program for young traumatized children can serve only 300 a year in Chicago, and some locations have waiting lists.

By Sarah Karp

Arianna Gibson's preschool teacher lost it at the funeral when she saw the little girl's unbearably small casket. The principal at Arianna's school, Libby Elementary, couldn't stand to see her buried. "Who puts babies in the ground?" Kurt Jones asks.

Jones and his school team struggled to cope with the death of the 6-year-old, who was killed when someone began shooting into the living room at her grandmother's Englewood home in August 2011. But as much as the Libby staff struggled, they were adults with support systems and stability in their lives. They immediately began to worry about Arianna's two brothers, 9 and 11, also students at Libby. The boys were sleeping in the room where Arianna was shot.

Given the tragedy, the Libby staff worried that the two boys' home was consumed with stress and drama. At the peace vigil in response to Arianna's murder, one faction of the family walked in front, another in the back. The brothers didn't need to be around that tension day and night, Jones says.

Arianna was killed the day before school started, so her brothers missed the critical first days of school—the days that would set the tone for the rest of the year. Jones sent a counselor and Arianna's preschool teacher to the grandmother's house, where the family was staying, with a stack of bus cards in hand so the children could be brought to school. "The boys needed to be here," Jones says.

Once the boys were back, everyone made an effort to be available for them. Sometimes, one of the boys would stop by counselor Ingrid Smith's office, just looking for a little nurturing. "They needed a lot of extra hugs," Smith says.

A growing body of research points to the lingering effects of trauma on children. When no one helps them to cope with the emotional aftermath, children can become angry, irritable and aggressive in response to the stress of violence, according to the National Child Traumatic Stress Network. Traumatized children often lose the ability to concentrate, become withdrawn or act out.

When children are exposed to a lot of trauma, they are highly sensitive, says Michael Wilson, a clinical supervisor at Uhlich Children's Advantage Network (UCAN), a social welfare agency in Chicago. They can be hyper-sensitive or numb. "The trauma debilitates you," Wilson says.

Exposure to gun violence is only one type of

DAKI0061639

Students at Morrill Elementary participate in a peace circle, a process that lets students talk about their problems and resolve conflict. Although peace circles provide short-term help, some students need more intensive mental health support. **[Photo by Cristina Rutter]**

trauma children are confronted with in tough communities. Counselors say children experience a range of upsetting events, from mothers who die to fathers who go off to prison. One counselor tells the story of two children who witnessed a car crash that killed their friend. The students can't stop thinking about the cries of the mother, as her dead child was being pulled from the car.

"They think about it when they wake up and when they go to sleep," says Jorge Santaella, a counselor for Brighton Park Neighborhood Council who works at Shields Elementary School in Pilsen.

In Chicago schools located in poor, crime-ridden neighborhoods, the problem is especially acute. Results from the Chicago Youth Development Study showed 80 percent of inner-city teen boys reported exposure to violence. Of children exposed to violence, more than 40 percent show symptoms of post-traumatic stress, according to the National Center for Posttraumatic Stress Disorder.

Meanwhile, a survey last year by the nonprofit group Communities in Schools of Chicago found that mental health services ranked as a top need among 105 principals whose schools are part of the non-profit's network.

CEO JEAN-CLAUDE BRIZARD'S ADMINISTRATION believes that, at least to some degree, exposure to violence and other traumatic events causes children to come to school ready to fight and unable to focus on classwork. Peace circles and peer juries may calm the waters on the surface, but increasingly, those who work in schools are coming to the realization that some children need more support.

As part of what the district calls a "holistic approach" to safety and security, CPS has embarked on a massive training of social workers and school-based counselors in how to conduct group therapy for children who have experienced trauma. The therapy program is called Cognitive Behavioral Intervention for Trauma in Schools, known as CBITS (pronounced "see-bits"). The approach was developed by the RAND Corp. for children in Los Angeles who were exposed to violence and was found to be effective with children who lived through Hurricane Katrina. Through CBITS, students learn how to tune into their feelings and realize that their reactions are normal.

Eventually, CPS officials want to see trauma therapy used widely, believing it will help curb behavior problems, reduce suspensions and expulsions and ultimately, raise achievement.

But money for bringing trauma therapy to schools is in short supply. CPS has no plan to add extra personnel in schools to lead the groups. Instead, principals—who will have more discretion over their budget this year—are being told to consider spending some of the money on additional counselors or social workers.

If this year is predictive of what is to come, without dedicated staff and a clear directive, the district's effort is likely to be scattershot. Only about 13 percent of the 205 social workers, psychologists and school-based counselors who were trained in CBITS have gotten groups going, according to CPS.

"We try to help them with whatever obstacles they encounter," says Jennifer Loudon, the di-

DAKI0061640

Counselor Jorge Santaella talks with a student at Shields Elementary. The Brighton Park Neighborhood Council used money from the state's Neighborhood Recovery Initiative to bring Santaella to Shields, where he recently launched a trauma therapy group. **[Photo by Cristina Rutter]**

rector of Youth Development and Positive Behavior Supports.

Still, Barbara Shaw, executive director of the Illinois Violence Prevention Authority, applauds CPS leadership for recognizing the role of trauma in the lives of children. Just doing that makes the district a leader, she says.

Counselors working at community-based agencies say they are relieved to see some principals taking the issue of trauma seriously. "It is like there's been an alarm set off," says Denise Gray-Bunkley, UCAN's director of Clinical and Counseling Services.

But in addition to the lack of clinical staff in schools, other barriers remain. Students in poor communities are highly mobile, making it tough to do ongoing counseling. Some school staff and families are reluctant to embrace group therapy. Counselors say that even when they are gung-ho, families won't sign consent forms and teachers don't want students pulled from class.

Some parents feel that suggesting therapy is equivalent to suggesting something is wrong with their child, Gray-Bunkley says.

Libby Elementary illustrates how these barriers play out in real life. The social worker is at the school only two days a week and, like other CPS social workers, fills most of her time working with students who have special needs. The guidance counselor works mainly on test administration and special education case management. Libby has no trauma group.

Jones says the school tries to help students by being nurturing and talking with them to resolve anger and conflict. Jones says he can empathize with his students—when he was growing up, his teenaged brother was killed.

After Arianna Gibson's murder, the school was briefly a haven for Arianna's brothers. But two months after Arianna's death, the family moved and the two boys transferred.

Even if Libby had an active CBITS group, the move would have scuttled a chance for the boys to participate. Students are not supposed to take part in the trauma group therapy until at least three months after an event, because experts in CBITS say that children need some time to process a tragedy before participating in group therapy.

"We begged them to stay," Jones says, closing his eyes. "We don't know where they are. Their new school won't know what they've been through."

LIKE SO MANY SCHOOLS in rough Chicago communities, a web of violence seems to surround Morrill Elementary. In early April, violence came to the school's door, almost literally: A 7- year-old was wounded by random gunfire on the porch of the house across the street from the old brick school.

Principal Michael Beyer says he went to the house the next day and another child was outside playing, just steps away from a dried blood stain.

The shooting victim was supposed to return to school two weeks later, but the girl was afraid to go outside, so the counselor arranged to have someone cross the street with the child and

DAKI0061641

bring her into the building.

Still, the school found it hard to figure out exactly how else to respond to the incident. The girl had just transferred into the school two weeks before, and few students even knew her.

When asked if they wanted to talk about the incident with a counselor, no students took the opportunity. At a community meeting, parents and residents said only that they wanted more security around the school. Beyer says he renewed his request for more cameras, but high schools have first priority. Meanwhile, the anti-violence group CeaseFire convinced Beyer to open up the gym in the evening for teenagers.

Beyer, who came to the school last August, has sought out ways to give students an outlet to talk about what is happening in their lives. He brought in the Mansfield Institute for Social Justice and Transformation, an organization that is part of Roosevelt University, to run peace circles so students could talk about and resolve conflict. The Mansfield Institute brought in student counselors from Roosevelt to run small groups for students, and also stationed a VISTA volunteer at the school to coordinate services.

Beyer's social worker also took advantage of an Illinois Violence Prevention Authority program that pays for a school-based counselor two days a week. (The program is offered in a handful of schools in 18 Chicago neighborhoods.)

But getting children the right therapeutic help is not easy.

One day in mid-April, in a small room, the eyes of four adults are bearing down on Nathan, a chubby 3rd-grader with pointy ears who inexplicably began thrashing his friend in the bathroom. Usually, peace circles involve more than one student, but Nathan's teacher sent him alone. (Note: For privacy reasons, Nathan's real name is not being used.)

All peace circles open up with an ice-breaker. At Morrill, students choose an object from a basket. Nathan picks a sponge shaped as the letter "N". He is supposed say why he picked the object, but refuses at first, shrugging his shoulders. Eventually, he explains that he picked the sponge because his name starts with that letter.

Those in the group then take turns talking about what upsets them. Nancy Michaels, associate director of the Mansfield Institute, says she gets upset when people judge her.

Nathan stares at the floor, then the wall, then the ceiling. When he gets a turn, he says, "I get upset when people talk about my mom. I get upset especially because she's dead. That is why I get angry."

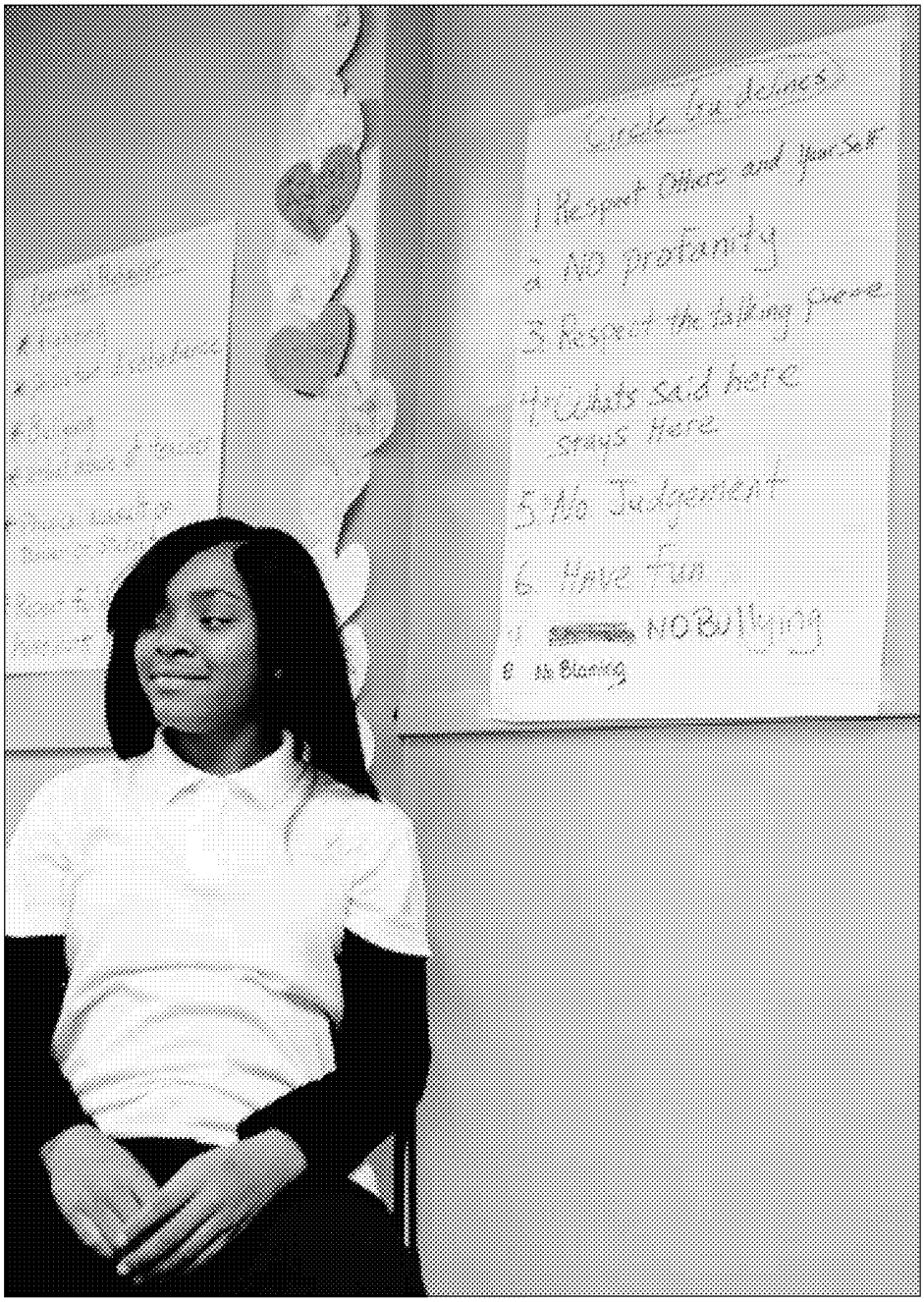
"I would get upset too," says Michaels, sharing that her mother died also. "It would be a challenge to figure out the best way to react."

But peace circles are only designed to give students a better way to deal with conflict, not dig too deep into traumatic events. Greg Fuller, a Roosevelt student, tells Nathan that he should not respond by hitting. "If you can't ignore it, then you have to figure out something else to do," Fuller says.

Nathan says he knows he should tell the teacher, and try to walk it off when he feels anger rising inside of him. He seems relieved when Michaels says she is going to take him back to class, pull the classmate he hit into the hallway and have Nathan apologize. If the conflict isn't resolved, Nathan says he is sure to be beaten up after school by the classmate's older brother.

Afterward, Michaels says Nathan seemed to be saying what everyone wanted to hear. "He has heard it before," Michaels says.

Fuller, who volunteers in the classroom, notes that Nathan is being raised by his father, who doesn't seem to be able or willing to deal with the boy's emotional issues.



A 6th-grade girl at Morrill was brought into a room for a peace circle. Students must promise to abide by certain rules to take part in the circles. **[Photo by Cristina Rutter]**

DAKI0061642

Crisis team swamped by more cases

The phones ring at a steady pace.

"Crisis," Catherine Malatt answers, pulling out a pad of paper. It is a Thursday morning in early May. A principal is calling, with an out-of-control child in his office. Malatt takes notes, asking the principal what he is doing and what his next steps are. Satisfied that he knows what to do, she tells the principal to call back later and tell her how it went.

Close by and within ear-shot, psychologist Daniel Zoller follows up on an incident report about a fight, helping the school's disciplinarian figure out a response.

After her call, Malatt turns her attention to reports of shootings that injured two CPS students. One was shot in the back several times on Wednesday afternoon, just blocks away from his school, and was seriously injured. The other was shot Wednesday evening. Both shootings appear to be gang-related.

Malatt says she is awaiting more information, but she doesn't send staff from the crisis office out to the schools. The principals have told her that they don't need help. Malatt stresses that every shooting is taken seriously and that a member of the team will follow up with the principal.

Another member of the crisis team is out at an elementary school. A teacher died overnight after suffering seizures. Earlier, in a 6:30 a.m. phone call, the principal told Malatt that she never had to navigate such an experience. Just yesterday, the teacher was in school.

As Malatt and her team take calls and make calls, they scroll through their email in-boxes looking at incident reports. It is their job to figure out if reported incidents merit follow-up and to contact the school to encourage them to take the appropriate steps.

By 10 a.m., Malatt has received 146 reports.

CPS' crisis intervention team was created more than 20 years ago, as it became apparent that schools needed help responding to crises. The team is made up of specially trained psychologists and social workers that help schools get through tragedies. The unit also trains school clinicians, teachers and school-based police officers in trauma response.

But as the number of reports increases, staffing is down. In the 2008-2009 school year, a team of eight handled 500 calls. In 2010-2011, a team of five handled 1,750 calls.

Malatt says that schools aren't necessarily coping with more crises. Instead, she says, "our work is better known in the school communities, and they request assistance more often than previously. Our schools trust us and we respond quickly and appropriately." If needed, the unit can request additional clinicians from the citywide pool.

Like so many other units in CPS that have been hit by budget woes, Malatt says her team uses resources "strategically" and turns to outside agencies when need be.

ONE AREA WHERE AWARENESS has likely resulted in more calls is teen suicide. About a third of the 1,750 incidents concerned a distressed child who was talking about killing himself or herself.

Megan Watkins, a crisis interventionist, says she attributes the high number of calls to awareness: The crisis team has trained school counselors to recognize signs that a student is considering suicide.

Watkins notes, however, that few students actually go through with the idea. "Lake Forest already has three suicides this year," she says. "We have had five."

According to the Centers for Disease Control, Chicago has one of the highest rates in the country of children who have tried suicide. Ten percent of teenagers in Chicago reported attempting suicide in the CDC's 2011 Youth Risk Behavior Surveillance Survey. Nationally, on average, 6.9 percent of teens reported attempting suicide.

Barbara Shaw, executive director of the Illinois Violence Prevention Authority, says young people in Chicago and other urban centers are more susceptible. "Where the surroundings are depressing and there is a presence of drugs and alcohol, a lot of kids don't have a sense of the future," she says.

Zoller notes that children respond to trauma in different ways. Some internalize it. Some become angry or unable to control their emotions. Zoller says he often has to explain to school administrators that they should try not to judge children too quickly when they act out.

One of the goals of the crisis intervention team is to have a "trauma-informed school," in which teachers, counselors and principals learn to understand children's reaction to trauma.

As Zoller talked earlier to the school's dean, he calmly explained that one of the children involved in the fight might need help. During the conversation, he found out that one boy was screaming and yelling and threw over the desk. The boy was suspended.

But with further probing, Zoller discovered that the boy was also self-mutilating. The young man's friends told the dean that they are worried about the youth's erratic behavior.

Zoller suggested that the next time the boy fights, the dean call 911 and have him transported to an emergency room to be evaluated by a psychiatrist.

"Explosive behavior is a red flag for trauma," Zoller says.

ABOUT 14 PERCENT OF THE CALLS to the crisis unit are about a death of a student or school staff.

Zoller says that schools need to address these situations promptly to keep students from reacting in dramatic, inappropriate ways. This year, the unit rolled out a new manual for schools to use in developing a crisis plan. It includes everything from a template of a letter to go to parents about an incident, to lists specifying who should be told, when, and how.

Calmeca Elementary School Principal Frances Garcia says that having a plan in writing is helpful, but when a tragedy strikes, it is important to have the crisis team step in. On May 18, a Saturday evening, she got a call alerting her that Alejandro Jaime, an 8th-grader at her school, was shot and killed.

"This was a popular child, a child who had friends in every grade," she says.

Garcia says Alejandro was the first student

ANNIE KAWALSKI, A MORRILL SOCIAL WORKER, knows Nathan well. She says she has explained to his father the adverse effects of Nathan's behavior on his learning, and suggested that he consult a mental health professional. But the father has not followed through.

Kawalski and Morill's school-based counselor were trained in CBITS, which would likely help Nathan. But Kawalski hasn't been able to get a trauma group up and running. Like other CPS social workers, she must spend the bulk of her time working with special education students, and Kawalski says she doesn't always know which of the other students are dealing with tough emotional issues.

The students Kawalski suspects might benefit from therapy are different age ranges. "You can't put a 3rd -grader in the same group with an 8th -grader," she says.

Though some special education students could be part of group therapy, many counsel-

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CRISIS RESPONSE

Last year, CPS' five-person crisis response team received school reports for more than 1,750 incidents. Team members were sent out to schools for about 13 percent of those incidents.

TYPE OF REPORT	
Suicide threat, depression	35%
Injury of student	19%
Assault, bullying, fighting	14%
Student fatality/homicide	10%
Alleged abuse	9%
Non-student fatality	4%
Other	9%

Source: Chicago Public Schools

she ever lost and she didn't know what her first step should be. "I, myself, was dealing with grief," she says.

Malatt was immediately in touch and let Garcia know that she would have a staff member at the school first thing on Monday morning. When Garcia arrived at 7 a.m., Zoller walked in the door with her.

As the news traveled through the school, everyone was in tears, from teachers to preschoolers to Alejandro's classmates. Zoller held meetings with the staff and then went into classes and pulled Alejandro's friends aside to talk.

"It was tremendously helpful," Garcia says.

In the weeks since, a place has been set up where students can go if they feel overwhelmed. Zoller continues to follow up, but the day-to-day interaction with students is left to school staff.

The counselor will stop everything and talk with students if need be.

Garcia says the school is not yet back to normal. Amid plans for graduation, school staff and students have plans to present Alejandro's diploma to his mother and to hold a special memorial ceremony.

At the ceremony, a rocket that Alejandro built for science class will be launched into the sky.

—Sarah Karp

ors and social workers have found that it is difficult to conduct sessions that meet the needs of both special education and general education students.

At the same time, Kawalski says working with students who aren't in special education is not at the top of her priority list. She rolls her eyes at the thought of CPS officials now pushing that approach.

Michael Kelly, an assistant professor of social work at Loyola University, says the way CPS manages social workers—unlike districts elsewhere, in Illinois and other states—makes it difficult to launch mental health programs. CPS hires and assigns social workers centrally, and has them report to an administrator in citywide specialized services rather than to the school's principal.

"Anecdotally, we have seen this to be problematic and to affect the school community in multiple ways," Kelly says. "They are sent willy-nilly to schools…. It affects their ability to do anything else."

WITH LIMITED BUDGETS, MANY PRINCIPALS LOOK to outside agencies for mental health partnerships. Some of those partnerships have been done through formal agreements, but often a principal or a social worker will bring in an organization to do some work without any contract or formal understanding, Kelly says.

In 2010, Kelly authored a study on partnerships between Illinois schools and outside mental health agencies. "People are out there just trying to get things done," he says.

CPS now wants to bring some order to these relationships. For one, the administration wants the community-based organizations that send social workers to schools to use CBITS, Anger Coping or Think First. Anger Coping and Think First are group therapy programs for students who are having trouble controlling their anger and can be used for elementary and high school students. Loudon says the programs have been shown to be effective.

CPS recently issued a request for proposals to identify vendors who are trained in these programs and create a preferred vendor list for principals.

This year, the state's Neighborhood Recovery Initiative is using its school-based counselors to implement CBITS in schools. Announced by Governor Pat Quinn in January of 2010, the $50 million initiative targets the most violence-plagued communities and provides money for job training, programs for parents and young people, and school-based counseling.

Organizations in the 18 targeted Chicago communities got lists of schools in their area and were left to reach out to them and find out which principals wanted to work with them.

Some organizations with long-established ties to schools knew exactly where to go. Brighton Park Neighborhood Council Executive Director Patrick Brosnan says that parents asked for mental health services. Previously, BPNC pieced together grant funding for counselors for four schools. The Neighborhood Recovery Initiative will let BPNC offer a bit more support.

"Brighton Park is a violent community," Brosnan says. "Children hear gunshots every night. They are living with that."

At BPNC's four schools, the teachers know that they can send a student who is acting up to the counselor, rather than to a disciplinarian. "Our counselor can look and see if there is something else going on," he says. "Usually there is."

But in neighborhoods where community groups and schools didn't have the same ties, charter schools in many cases were the first to open their doors.

The principal and staff at three Perspectives schools on the Calumet campus and Chicago International Charter School's Ellison campus welcomed the school-based counselors from UCAN and got groups going at the beginning of the school year. Meanwhile, two district-run elementary schools, Morgan and Ogelsby, couldn't get groups started until January because of bureaucratic issues.

Other organizations report the same problem. Some principals at district-run schools said they already had programs. Other principals didn't want to spend time or energy on the concept. CBITS requires two trained adults to co-facilitate groups, so if the community organization could only provide one, sometimes schools couldn't or wouldn't commit the second.

In a few cases, principals were hostile to the idea and viewed group therapy as just one more drain on already-limited time that could be spent teaching reading or math.

Yet the clinicians who have gotten CBITS groups up and running say they see students change as they go through it.

Tracey Evans is a school-based counselor who was placed in Bronzeville Charter School by Passages. She says two boys in her CBITS group were at a playground where a friend was shot dead.

"If the bullet would have flown in another direction, they could have been hit," she says. The boys are in 8th grade and often aren't open to talking. They told Evans that until they went to CBITS, they had never talked about the incident or how vulnerable it made them feel.

Now, the two of them come to her to talk when they are feeling overwhelmed or sad.

Jorge Santaella started his first CBITS group at Shields in May. At the first session, most of the students shared their experiences and what was bothering them. But Santaella says one little girl couldn't bring herself to reveal what had happened to her. After the others spoke, she simply admitted that things are not good at home.

Still, the step was encouraging, Santaella says. "It was a start."

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DAKI0061644

A temporary fix

At Fenger High, extra funds have provided critical mental health and social-emotional support to students. But what happens when the money runs out?

By Sarah Karp

Only 16 district-run schools have their own full-time social worker, and most of the 16 are turnaround schools that will only have the extra resources temporarily.

One of these is Fenger High in Roseland, a school that CPS points to as a model: Located in a troubled community where violence is common, the extra support provided for students has made a difference, district officials maintain. Principal Elizabeth Dozier boasts of a sharp—66 percent—decrease in student misconduct reports since she took over in the summer of 2009.

Fenger's enrollment is down by about 40 percent, which means there are simply fewer students to punish. But Dozier contends that the decline is due to a transformation in how the school deals with students who are acting out.

That transformation is financed with a three-year, $6 million federal school improvement grant. The money pays for initiatives like the CARE team, which is comprised of a psychologist, social worker and counselor.

But next school year will be the last year Fenger has the extra money. "I don't know what we are going to do," says Dozier. "I really don't. We still have the same students here, living in the same neighborhood."

Schools in violence-plagued neighborhoods are desperate for extra mental health support. The difference between what is happening at these schools, compared to turnaround schools, is stark.

Take McKay Elementary in Chicago Lawn and Bradwell Elementary in South Shore, both communities where homicides and other crime are common. Bradwell is a turnaround school run by the Academy for Urban School Leadership. It has two social workers, one social work assistant and one youth intervention specialist. McKay has just one counselor. Other clinicians come from the citywide pool and are assigned based on the needs of the special education students.

McKay's school improvement plan notes the dearth of services, stating "Counseling services are not readily available for students or families who are in need."

WITH THE RIGHT RESOURCES, though, schools can make inroads in providing social-emotional support.

When fights erupt at Fenger, students are sent to peace circles to resolve the conflict, or teachers talk them through the situation and give them the tools to resolve the dispute on their own.

Dozier also organized schedules so that teachers have time to talk to each other about students, making it easier to identify teens who are acting out, withdrawn or giving up. If the teachers flag a student, they fill out a referral form. Then the CARE team meets to figure out what the student needs.

Sometimes the team pushes the student to get involved in an after-school activity, such as mentoring or a leadership program. But often the student is brought into counseling or group therapy.

Social worker Patrick Gauld has been running an Anger Coping and a CBITS group at Fenger for two years. CBITS stands for Cognitive Behavioral Intervention for Trauma in Schools, a group therapy pro-

Fenger Principal Elizabeth Dozier has spent much of a federal grant on mental health support for students, including ongoing group therapy. Dozier says these programs have led to a drop in reports of student misconduct at Fenger. **[Photo by Marc Monaghan]**

DAKI0061645

Fenger senior Elayne Sledge says an anger group therapy program helps her control her temper. **[Photo by Marc Monaghan]**

gram for children who have been exposed to trauma that CPS wants schools to adopt. Anger Coping is another therapy program that CPS is promoting in schools.

Some of the participants have been witness to, or the victim of, gun violence. More commonly, the child's primary caregiver, a mother or a grandmother, has died.

Beyond the group sessions, Gauld says the students benefit from developing a support system of peers who know and understand what they have been through. Some of the students have even volunteered to be co-facilitators because they find it useful to continue to participate.

"We forget that our students go through a lot and that many of them have difficulty leaving problems behind when they walk in the school door," Gauld says.

Gauld has seen a marked decrease in students experiencing the symptoms of post-traumatic stress. They say they are sleeping better and are more able to deal with their emotions.

Elayne Sledge, a senior who is participating in the Anger Coping program, says therapy groups and other supports have completely changed the culture inside Fenger.

Sledge says she, too, has experienced personal changes. Instead of acting out when she gets upset, she wiggles her shoulders—a calming technique taught in the group.

Sledge taught her young daughter some of the techniques also.

"It is going to make me a better role model," Sledge says. "I used to get mad and cuss people out. Now I just breathe and talk to myself, in my head. I tell myself it [showing anger] is not worth it."

DAKI0061646

A necessary luxury

In many neighborhoods, violence is common and helping students cope is essential. But often schools must look for outside funding to pay for full-time social workers.

By Rebecca Harris

Early one spring morning at Chicago Talent Development High School, social worker Paul Fagen hands out bags with insignia from different colleges as a reward for the two students who have arrived on time for today's peer mediator meeting. Next time, he promises, there will be breakfast—an additional incentive to lure mediators to school early.

"They love the idea of being a Peace Keeper," Fagen later explains. "They don't love the idea of coming to school early." Though most of the students are late to the before-school meeting, where they share their mediation experiences with each other, the school's "Keep the Peace" initiative is in full swing: Students have participated 159 times in conflict resolution sessions led by student Peace Keepers.

After some brief chitchat—"We will talk about if there is any swag we should get," like T-shirts to identify the peer mediators—and a reminder to come earlier next week, the meeting kicks off.

Damon Washington, a sophomore who just became a Peace Keeper, tells the group that he resolved his first conflict yesterday. Fagen asks how it went.

"It was crazy, but at the same time it was a lot of fun," Damon says. "They kept arguing. It took them a long time to calm down."

Fagen asks Damon what strategies he used. "I told them, you should be more mature. You are arguing like you're freshmen," Damon replies.

Fagen suggests that instead of criticizing the students, Damon could have asked them to do what they learned in freshman seminar—take a deep breath. He'll soon make a "cheat sheet" for the Peace Keepers, as a reminder of the different strategies they can use.

Damon continues, "I told him he was being disrespectful, and he could get a detention for that."

Fagen reminds Damon that he shouldn't threaten students with detentions he can't give. "Being disrespectful is too vague. I would remind him of the ground rules," he says. The rules are simple: no name calling, no interrupting, be fully committed to the process and don't bring up information that is unrelated to the issues being discussed.

AT CHICAGO TALENT DEVELOPMENT High, a charter school located in rough West Garfield Park, Keep the Peace is a necessity, Fagen explains. Even for "the most put-together student," the journey to and from school is often fraught with stress and danger, he explains. And violence can erupt unexpectedly. Earlier this year, a shooting a block away disrupted a mobile medical van's visit to the school to provide physicals and immunizations. Staff kept students inside, away from the chaos.

Exposure to violence "raises the hyper-vigilance of our students," Fagen says. "They have to be on guard." As a result, even an accidental bump in the hallway could be perceived as a threat and lead to a fight, so the school has to have some way to help students resolve conflict peacefully.

To help ease the educational path of students exposed to violence or trauma, social workers like Fagen can play a vital role in providing mental health support. But the luxury of a full-time social worker who can devote time to these issues is rare in CPS.

Instead, most of the district's social workers spend the bulk of their time working with special education students. Guidance counselors could help fill the gap, but they spend much of their time organizing and administering tests. Outside agencies have social workers in some schools, but it is unclear if anyone keeps track of where they work or how many students they reach.

Meanwhile, few schools have the money to hire their own social workers. The most recent CPS budget data show that just 16 schools have done so.

Fagen came to Chicago Talent Development through a PepsiCo Foundation-funded initiative called Diplomas Now, which operates in 25 schools in 11 cities, and won a federal Investing in Innovation grant in 2010. Chicago Talent is the only high school in the city that participates. The program, run by Johns Hopkins University and Communities in Schools, is designed to closely monitor students' behavior, academics and attendance on a biweekly basis, and provide help for students who fall behind.

Yet the extra support from Diplomas Now is only a stop-gap, unless money is found to replace the federal grant when it runs out in fiscal year 2015.

Fagen, a licensed clinical social worker, spent a year as a CPS consultant helping high schools coordinate behavior supports for students. His dry humor and calm, matter-of-fact demeanor give him a youthful energy. Students know to come to him for hand lotion and snacks. Nearly half a dozen times one day, they comment on the mustache he is growing for an upcoming play—when he's not working, Fagen's an accomplished professional actor.

Keep the Peace helps to fulfill what Fagen considers to be the most important part of his job: ensuring that social-emotional support reaches not just the 10 percent of students who might be headed for trouble, but the 90 percent who are doing OK and need to stay on track. Fagen notes that he's also trained the security staff and the dean to "de-escalate"—or calm down—students who are upset. It's all part of a strategy to nurture troubled students and encourage them to participate in school rather than respond in ways that could create even more problems.

He calls it a "mental health prevention plan."

AFTER THE KEEP THE PEACE SESSION, Fagen observes a teacher's morning meeting. The 20-minute meeting starts with a 5-minute "mood check-in," after which teachers discreetly pull aside upset students to see if they can get through the day or need extra support.

Next is a 10-minute mini-lesson on a topic like Black History Month, social-emotional learning or goal-setting. Once a week, the mini-lesson consists of students setting goals to improve grades, behavior

DAKI0061647

Social worker Paul Fagen meets with peer mediators, called Peace Keepers, at Chicago Talent Development High School. Fagen says students need the conflict-resolution program and other social-emotional supports because neighborhood violence has left them constantly on guard against perceived threats. **[Photo by Marc Monaghan]**

or attendance. And every day, the meeting ends with a compliment circle, where one student gets the chance to have everyone say something nice about him or her.

"As a mental health professional, I am constantly pushing more schoolwide interventions," Fagen says. "If we do the compliment circle every day, over time, that kid who's seeking attention might get it [in a more positive way]. If that were absent, you might have some of those kids become withdrawn."

In between today's meetings with students and staff, Fagen enters student data into the computer so that the system can track their progress. He uses any down time to catch up on data entry because on many days, he's constantly in motion. Typically, his day stretches from 7:45 a.m., when he arrives at work, until school ends at 4 p.m.

Recently, Fagen worked with staff members from a local shelter for women and children to run two groups for students who have been exposed to violence and trauma. Staff members who know students are dealing with specific issues approach those students about the groups. Only when the student agrees to participate does the teacher pass the information along to Fagen, who asks the students about violence they have witnessed or experienced and screens them for symptoms of trauma exposure.

But Fagen points out that the standard screening tool doesn't cut it. It refers to one traumatic experience, but many of his students have seen several violent incidents at home or in the community.

"Anecdotally, I can imagine that I can screen every student in my building and all of them will have had one of the trauma indicators, whether or not they are showing symptoms," Fagen says. "It is almost a universal need. I have yet to screen a student who has only had one traumatic experience."

At lunchtime, Fagen meets with a group of three girls who come in holding foam food trays. They're part of the Illinois Subsequent Pregnancy Program at Sinai Community Institute, which aims to help teen moms prevent a second pregnancy. The students get training to become peer health educators as well as support and social activities. "Making it not all gloom and doom" is important, Fagen says. "We get so caught up in [the fact] that this is serious business, we forget there is room for levity, for celebrating."

Fagen has the young women fill out sheets listing their goals, then offers them a taste of dark chocolate and eats his lunch—a peanut butter and jelly sandwich, chips, dried apricots and almonds.

Next is a game of stress bingo. The cards list different categories: external stressors, internal stressors, symptoms of stress, and stress relievers. Students use chips to mark off squares each time Fagen calls out a stressor, symptom or stress reliever that is on their bingo card.

It's also a tool for discussion, as Fagen explains the different concepts so the students understand their own relationships to stress. "Why would it be a stressor if someone in your family was using drugs?" Fagen asks.

"The police might come to your house and arrest you," one girl says. Another student points out that getting all A's could actually be a source of stress. "Other people might try to bring you down," she notes.

Fagen bridges the conversation to their children's well-being, noting that too much stress can prompt teen moms to shake their babies and, potentially, harm them.

After the session, Fagen talks about ways to get the same information out to the whole school. "What if we had a stress bingo game for every classroom, and that was a morning lesson for a week?" Fagen asks.

Tell us what you think. Leave a comment at www.catalyst-chicago.org or send an email to rharris@catalyst-chicago.org.

DAKI0061648

A safe start from trauma

Exposure to violence is all too common in some neighborhoods and can cause developmental delays in youngsters. But counseling reaches only a fraction of children.

By Rebecca Harris

After recovering from a devastating illness, Veronica Coney hoped to make a fresh start with her four children in a home she rented in Chicago Lawn.

Then she and her children overheard a murder in the alley. A few weeks later, her children saw a dead body on the street as they were driving to school. In another incident, one child saw someone holding a gun outside school. The family often heard the sound of gunfire in the neighborhood.

Their hopes for a new beginning were dashed. "I was kind of wigging out," Coney says. "I didn't feel safe at all."

The children didn't either. Her toddler daughter, who was 2, quickly became "very, very clingy," she says. Her son, then 12, was terrified to go outside. At school, some of her children began to have behavior and attitude problems.

Coney reached out for help and began receiving counseling through Family Focus Englewood, a social service agency that provides such help through Safe from the Start, a program for families in which at least one child up to the age of 5 has been a victim of, or witnessed, a violent incident.

Experts say that exposure to violence and trauma can impact young children not just emotionally but also cognitively, causing developmental delays. Although the program does not work directly with CPS, school-aged siblings of younger children are included in counseling sessions.

REACHING FEW CHILDREN

Safe from the Start provides counseling for children who have been exposed to violence. But many families who could benefit from the program are not aware of it, are on waiting lists or don't seek out the services because of the stigma sometimes associated with mental health problems.

PROGRAM STATS	ILLINOIS	CHICAGO
Children served	1,014	279
Funding	$8.5m	$300k

Source: Illinois Violence Prevention Authority, Chicago Department of Public Health

While hard data on the number of children who have been exposed to violence is limited, the number is likely high in many Chicago neighborhoods. The Centers for Disease Control found in a 2008 survey of over 4,500 children that more than 25 percent of them had witnessed a violent act in the last year, and 60 percent of children had been exposed to violence in some way—either as a witness, by learning of a violent act against a family member, neighbor or close friend, or by being threatened at home or school.

Another older study offers a more grim picture. A 1985 survey by psychiatrist Carl Bell and psychologist Esther Jenkins found that of 500 Chicago children at several South Side elementary schools, 25 percent had witnessed a shooting, and one in three had seen a stabbing.

Awareness of the impact of trauma exposure is growing among those who work with young children. But to make better decisions about services, "there's a need to better understand the volume of children who are impacted," says Marlita White, director of the Office of Violence Prevention in the Chicago Department of Public Health.

White adds that her department is "participating in conversations" about ways to track these numbers, such as surveys and data-sharing collaboration among social service agencies.

Last year, Safe from the Start sites in Chicago served just 279 children and 132 adults. Statewide, about 1,600 adults and children each year receive services through the program, according to data from the Illinois Violence Prevention Authority. Chicago's four sites are part of 11 Safe from the Start-funded sites statewide.

PARENTS OF VERY YOUNG CHILDREN often don't understand the potential impact of exposure to violence or trauma. To combat this lack of knowledge, Safe from the Start sites around the state convene community councils. In Chicago, the four sites serve the entire city.

The councils' goal is to get the word out about services and increase community awareness, ultimately preventing children's exposure to violence.

They also reduce stress and provide support for families "at the zip-code level," White says.

Providers often find themselves torn between wanting to get the word out, and knowing that they don't have capacity to serve all the children who need help.

At one presentation to parents at First Start preschool in West Englewood, social worker Kate Goetz—an infant mental health specialist at Family Focus—asks parents to define violence. She talks about how exposure to violence harms children, and notes the Carl Bell study.

"Why do we have so much violence?" Goetz asks the group. A lively discussion follows, with parents giving reasons that range from bad parenting, to ignorance, to gang-bangers on the corner wearing nice shoes—implicitly showing children that violence pays—to racism in school funding.

But one thread ties all the factors together: "Children learn from what they see around them," Goetz emphasizes.

The parents talk more about whether they think their children would, or should, feel comfortable coming to them to talk about fears and worries. As the event ends, one woman, Margaret Davis, tells a story that illustrates the potential long-term impact of trauma.

Years ago, she says, her son witnessed a shooting. At the time, she and his father were separating and the situation was already causing the boy to have problems in school. The shooting upset him even further, and he ended up repeating kindergarten.

After the shooting, "he couldn't focus anymore," Davis says. "He would just look out the window."

Although the boy was clearly having problems, "they didn't do anything at that school" Davis continues, explaining that he was never referred for services. She took him to see a psychiatrist when he was

DAKI0061649

7, but that move didn't go well because the doctor just wanted to rely on medication for her son, which she opposed.

Now, Davis' son is 16 and doing better in school. But he still acts "too rebellious," she says.

SCHOOL IS OFTEN THE PLACE where the symptoms of trauma exposure emerge, says Mary Reynolds, a social worker with Casa Central Social Services, the West Side provider for Safe from the Start.

The program also provides training for preschool and child care teachers, parents, and others in how to recognize trauma exposure and work with young children who show the signs. Statewide, Safe from the Start presentations reach about 11,000 people a year.

Reynolds has worked with a number of children who, as she describes it, were "expelled" from—asked to leave—day care or preschools because of behavior problems that are linked to trauma exposure. Young children who are dealing with the after-effects of trauma exposure "are often extremely difficult to care for. But they're the kids who more than anyone need stable, consistent, safe places to be," she says.

Among the youngest children, the signs include being "clingy," having a hard time with transitions from one place or activity to another, and excessive crying.

Older children may have trouble paying attention. "[It] can look like the kid is bouncing off the walls," Reynolds says, and teachers might mistakenly think that a child has Attention Deficit Hyperactivity Disorder or another behavior disorder.

Some children might regress in their development, forgetting how to use the bathroom or even how to talk. Or they may develop frequent headaches or stomachaches, leading to absences from school.

"For a lot of the kids we work with, school is a place where a lot of stuff gets acted out, a place where their behaviors and symptoms are misunderstood, misdiagnosed, or mistreated," Reynolds says.

Reynolds works regularly with teachers to help make classrooms feel safer, something that CPS clinicians may not have the time or training to do. One key element is a stable routine, and teaching students to ask for help or tell their teacher if they are stressed, worried, sad, or can't pay attention.

Veronica Coney, who overheard a murder occurring outside her home, talks with counselor Kate Goetz about how to keep her children from being negatively affected by community violence. **[Photo by Jason Reblando]**

AT CASA CENTRAL, 60 percent of children in Safe from the Start have witnessed domestic violence, 10 percent have been victims of abuse or neglect, and the remaining 30 percent have been exposed to more than one kind of violence, whether at home or in the community.

"Neighborhoods where there's a higher level of community violence also tend to have a higher level of child abuse and neglect," Reynolds says. "Some of that correlation can just be stress-related, in the same way that when we see the economy tank, child abuse spikes."

While Safe from the Start focuses on children from birth to 5, Reynolds says counseling includes the whole family. "If there's an older sibling that is having a hard time, it's going to be really hard for the younger sibling to get back on track," she says. "More often than not, the violence has been experienced in one way or another by the entire family."

Referrals come from schools as well as social service and domestic violence agencies, and concerned parents who identify the need. The waiting list for her program is four or five months long.

But other children may fall through the cracks. "Especially when we are talking about little kids, 5 and under, they might not be in school, they might not be in preschool," Reynolds says. "They might not have anyone around them other than their family members to notice signs of trauma exposure,"

In sessions with counselor Goetz, Veronica Coney says she has learned coping strategies to soothe her own, and her children's, fears. Goetz helps her "make sure we know how to use emotions and put them in their proper place so we won't act out," Coney explains.

Working with Safe from the Start has taught Coney and her children "to distinguish between what's safe and what's not safe." Now, when her children are upset by noise outside, Coney asks them, "Is everything in the house okay? Are you safe?"

The exercise allows her daughter to regain a sense of safety, Coney explains. "Once she [answers and] says, 'I am safe,' she knows her life is not in danger."

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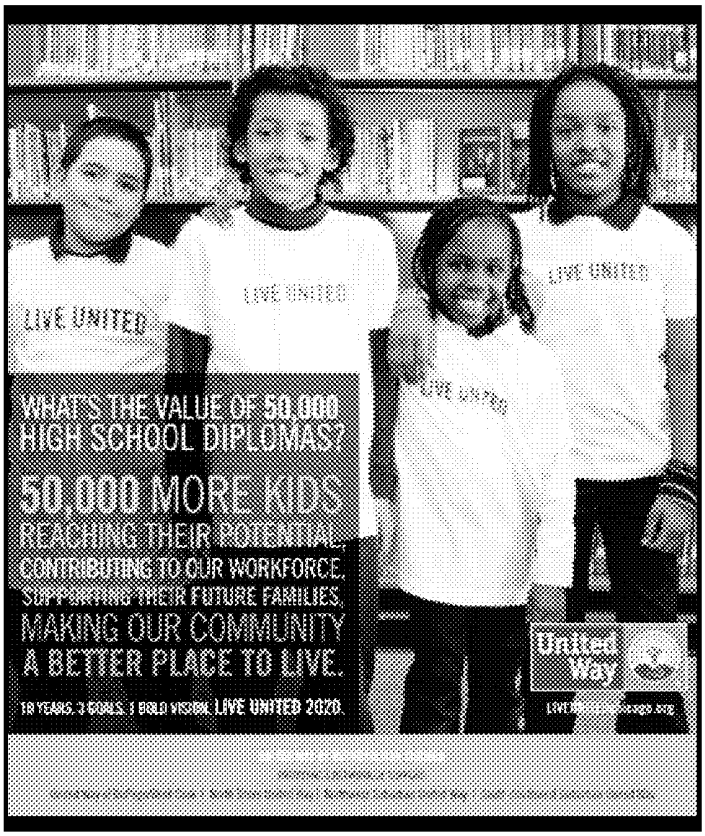

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