



2011 ANNUAL REPORT

Suffering in Silence

For most students, it was a typical day at school filled with classes, quizzes, and socializing with friends. For sixteen year old Karen, this day was unlike the rest – she had reached her breaking point.

Following her last class, Karen parked herself in the school office. She sat there for a few minutes before office staff took notice and asked if she needed anything. Karen stayed quiet and then stated that she didn't want to go home. Counseling staff were called in to speak with Karen. She wouldn't say what was going on, but firmly refused to go home.

Karen was an average student; she seemed to get along fine with her peers and never caused problems in class. Administrators knew Karen lived at home with her father, but didn't have any idea what could be causing Karen to refuse to return

home. After speaking with Karen's dad, it was decided that Karen would be brought to Bill Wilson Center.

Karen arrived wearing an oversized black hooded sweatshirt and baggy jeans; hair matted and covering what little part of her face that was visible from behind her hood. Karen appeared to be extremely uncomfortable and kept her head down, careful not to make eye contact with anyone.

After going through the intake process, Karen was lead to our residential wing and introduced to staff and other youth in the program. While Karen remained very quiet, staff hoped she would soon open up, as is usually the case with new residents.

Staff took turns speaking with Karen throughout the evening, but despite our staff's best attempts, Karen barely said more than a few words on her first day. On her second day, Karen was introduced to her case manager, who would also be her family therapist.

Karen's case manager quickly realized that she just wasn't ready to talk about her problems at home. Rather than trying to force Karen to open up right away, her case manager reviewed the goals of our residential program and informed Karen of the various services that were available to her while staying at the shelter. They went over the youth groups that take place each day, counseling sessions, and health screenings. Upon hearing that we had a nurse that would meet with residents on-site, Karen showed some relief. She wanted to meet with the nurse as soon as possible.

During Karen's appointment the next day, it was discovered she was suffering from a medical condition – a female problem. It all began to make sense – Karen lived with her dad and her mom was not in the picture; she was too embarrassed to talk to her dad about the problems she was having. Not knowing how to ask for help, Karen had been suffering in silence for months.

Thankfully, after receiving medical treatment, Karen made a full recovery. With the problem identified and medical intervention underway, Karen and her dad began family counseling sessions and focused on communication skills. They realized the importance of having a trusted female in Karen's life. They worked together and identified Karen's aunt as a possible source of female support. Thankfully, Karen's aunt was more than happy to build a stronger relationship and be the female role model Karen needed.

After a few weeks in the program, Karen returned home. Her personality had begun to shift while at the shelter. She was less closed off and began to socialize with staff and residents. She and her father continued with aftercare counseling. As time went by, Karen's warm, bubbly personality finally started to shine through. She began to take more care in the way she dressed and style her hair off her face.

Karen continues to pop in for visits with staff. Each time she visits, our staff rejoices at the transformation Karen has made.



LETTER FROM SPARKY

Dear Friends,

Another year has gone by and Bill Wilson Center continues to adapt to meet the changing needs of youth and families in our community and, at the same time, deal with the uncertainty of public funding.

This year we saw major changes to our local juvenile justice system, as County Supervisors passed legislation to ensure that children under the age of 13 would not be placed in juvenile hall. New reports, most notably the Annie E. Casey report "No Place for Kids – The Case for Reducing Juvenile Incarceration", demonstrated that there is a high rate of recidivism among kids placed in juvenile detention. The report found that community-based solutions such as counseling and therapeutic foster care led to success with these children.

In response to the County's new direction, Bill Wilson Center continued to develop our new, best practice, Multidimensional Treatment Foster Care (MTFC) program. This evidence-based intervention for juvenile offenders is a positive alternative to placing youth in juvenile hall or the ranches. These foster homes have only one youth in care at a time while we work closely to integrate each youth into support services. Checking in with support staff daily, these foster parents ensure that each youth receives the one-on-one time they need. At the same time, parents are receiving services to help with successful reunification.

MTFC studies have demonstrated significant successes and show this approach to be cost effective. What could be better than deterring kids from crime and saving taxpayers' money at the same time?

To provide a safe and caring home for these youth and youth in foster care, we are searching for more foster parents. We provide great training and support for

LETTER FROM SPARKY (continued)

our foster families, and they provide the caring support.

The families also receive a stipend for each child or teen to help with expenses. Call us if you'd like more information.

Caring homes and families are a recurring theme for our kids. Sometimes even the best of families have a tough time for a while – teen years can be difficult, but many of the kids we serve have raised themselves – or tried to. When dad's in jail and mom is addicted to drugs or alcohol, there's no one to set the right example. For the parenting youth we serve, it is especially important that they learn quickly that there are positive ways to parent. We connect youth to caring adults and we teach our young parents to be good parents.

As you read this letter, please know that your contributions to Bill Wilson Center are important and appreciated. Whether you're a donor, volunteer, funder, foster family or advocate for youth, you help to make a difference. Thank you!

Best Regards,



Sparky Harlan
Executive Director



Bill Wilson Center is a nonprofit, community-based agency that has been serving Santa Clara County for 38 years.

Bill Wilson Center provides a full continuum of services needed to help and support Santa Clara County's youth and families through counseling, housing, education, and advocacy.

Bill Wilson Center Vision

Bill Wilson Center is working to prevent poverty in the next generation by connecting youth with employment, education, housing, and adult mentors and role models.

Bill Wilson Center Mission

Bill Wilson Center supports and strengthens the community by serving youth and families through counseling, housing, education, and advocacy.

PROGRAMS AND STATISTICS

Bill Wilson House provides short-term housing for homeless, runaway, and out-of-control youth ages 11 – 17. Through intensive individual, group, and family counseling the program reunites families whenever possible, prevents future problems, and stabilizes the lives of youth to keep them safe.

Program Statistics: Of the 383 youth who stayed at the shelter, 78% were reunited with their families, 89% decreased school-related problems, 89% decreased runaway behavior and 90% decreased substance abuse. Bill Wilson Center provided 2,326 individual and family counseling sessions, 327 group sessions, 497 aftercare sessions, and 5,138 bed nights.

Demographics: 56% of the youth are female; 7% are under 12, 55% are 13 – 15, and 38% are 16 – 17. 51% are Hispanic, 20% are Caucasian, 13% are African American, 6% are Asian or Pacific Islander, and 10% are Native American, mixed race, or other.

Drop-In Center is a resource center for homeless and at-risk youth, ages 13 – 25. Located in Downtown San Jose, the program provides basic necessities, as well as comprehensive services including counseling, job readiness training, housing assistance and health screenings/education. The Drop-In Center is a stepping-stone to getting youth off the streets and on their way to a more stable life.

Program Statistics: 809 youth were served; 63% of youth who received extensive case management exited street life.

Demographics: 60% of the youth are male; 6% are under 18 years old and 94% are 18 – 25. 35% are Hispanic, 24% are Caucasian, 25% are African American, 4% are Asian or Pacific Islander, and 12% are Native American, mixed race, or other.

Transitional Housing Program provides housing and support services for youth ages 18 – 24. Homeless youth, including those who are emancipated from foster care, and pregnant and parenting youth and their infants or toddlers qualify for the program. Youth are provided with case management, individual and group counseling, educational and employment services, and independent living skills training to prepare them to transition into permanent housing. In addition, THP Plus serves former foster youth and provides housing, support, and case management.

Program Statistics: There were a total of 141 youth in THP and 51 children of parenting youth. 72 youth were served in THP Plus.

Demographics: 62% of the youth are female; 44% are Hispanic, 19% are Caucasian, 3% are Asian or Pacific Islander, 23% are African American, and 11% are Native American, mixed race, or other.

Transitional Housing Placement Program provides housing and life skills to youth ages 16 – 19 who are dependents of the court. The goal of the program is to help youth build the skills needed to maintain permanent housing and live independently.

Program Statistics: There were a total of 14 youth in THPP and 6 children of parenting youth.

Demographics: 80% of the youth are female; 50% are Hispanic, 15% are Caucasian, 10% are Asian or Pacific Islander, 15% are African American, and 10% are Native American, mixed race, or other.

Quetzal House is a short-term group home for girls ages 13 – 17 who are chronic runaways from the foster care system. Quetzal provides counseling and support in a home-like setting in order to reduce destructive behaviors and reunite the girls successfully with mainstream foster care.

Program Statistics: 11 girls stayed for a total of 1,280 bed nights. 73% were able to return to their homes or to a lesser level of care.

Demographics: All Quetzal House residents are females between the ages of 13 and 18. 55% are Hispanic, 18% are Caucasian, 18% are Asian or Pacific Islander, and 9% are African American.

Family and Individual Counseling Center provides low-cost, professional counseling services for families, children, couples, and individual adults who may be experiencing a wide variety of mental health problems. The focus of the program

PROGRAMS &

is to help individuals develop the skills and confidence they need to handle any crises they may face. School Outreach Counseling provides on-site counseling services to students in local middle and high schools. Counselors are available to address such issues as gang involvement, depression, suicidal ideation, problems at home, poor school performance, drug abuse prevention, and sexuality.

Program Statistics: Counseling was provided to 558 people through 59 couple's counseling sessions, 310 family counseling sessions and 1,785 individual counseling sessions. 87% reported reduced family conflict. The School Outreach Counseling Program served 350 youth under age 18 and provided 2,660 individual counseling sessions, 59 group sessions and 91 family sessions.

Demographics: 57% of Counseling clients are female; 20% are under 13, 13% are 13 – 17, 22% are 18 – 30, 24% are 31 – 45, and 21% are over 45. 36% are Caucasian, 41% are Hispanic, 7% are Asian or Pacific Islander, 3% are African American, and 13% are Native American, mixed race, or other.

Centre for Living with Dying offers emotional support to adults and children facing life-threatening illness or the trauma of losing a loved one. Tools for coping with loss and trauma through individual counseling or grief groups are provided. The Centre also provides crisis intervention services and education on grief and loss to those in the community whose professions touch death and illness, including emergency and safety personnel, medical personnel, and school personnel.

Program Statistics: 549 individuals were served through individual and group grief counseling.

Demographics: 76% of clients are female. 1% are under age 5, 11% are 5 – 12, 8% are 13 – 17, 13% are 18 – 30, 23% are 31 – 45, and 40% are over 44. 4% preferred not to disclose their ages. 47% are Caucasian, 28% are Hispanic, 3% are Asian or Pacific Islander, 5% are African American, and 17% are Native American, mixed race, or other.

Foster Care Services provide stable, caring homes for children of all ages in the social services system. The Foster Care Program prepares the child for either their return to appropriate birth family members, placement into an adoptive family, or adoption by the foster family. 64 children were placed in Bill Wilson Center foster homes.

Contact Cares provides objective listening, caring involvement, information and referrals to meet the needs of Santa Clara County through a multipurpose, 24/7 helpline staffed by trained volunteers who, along with staff, answered a total of 27,940 calls.

Mental Health Services provide support to children, families, and transition age youth. Services include therapy, psychiatric treatment, and therapeutic behavioral services. 298 children, adults, and transition age youth were served. 52% were female. 22% are Caucasian, 41% are Hispanic, 6% Asian/Pacific Islander, 14% are African American, and 17% are Native American/ mixed race or other.

Restorative Justice Program provides first-time juvenile offenders in San Jose an alternative to incarceration. 105 youth between the ages of 12 and 18 were served; 6% are 12 and under, 90% are 13 – 17, 4% are 18. 70% are male. 34% are Caucasian, 48% are Hispanic, 10% are Asian or Pacific Islander, 5% are African American, and 3% are Native American, mixed race, or other.

Safe Place provides youth in the community access to over 367 Safe Place sites maintained by Bill Wilson Center. 128 youth sought help through Safe Place. 59% of the youth are female. 14% are Caucasian, 53% are Hispanic, 8% are Asian or Pacific Islander, 13% are African American, and 12% are Native American, mixed race, or other.

Volunteer Case Aide Program connects children in foster care to caring adults who can help them with a variety of needs such as tutoring, mentoring and supervised visitations. 1,099 foster youth were served during the 6 months the program ran this fiscal year.

EXPENSES

EXPENSES:	11,445,210
Fund Development	281,649
Centre for Living with Dying	284,764
Family Services	628,867
Youth Services	297,884
Drop-In Center	805,084
Management and General	1,095,592
Foster Family Services	819,535
Mental Health Services	2,376,287
Transitional Housing	2,505,201
Residential Services	2,350,347

INCOME

INCOME*:	11,529,631
Other Income	170,986
Special Events	85,186
Contributions	180,506
Fees for Services	219,649
In-Kind	378,391
Foundations – Corporation	282,015
Government Funding	10,212,898

* Income does not include \$1,747,347 in funds for capital improvements.



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