Annual Report 2017
What a transformative year it’s been! You have moved the needle forward on one of the most urgent public health crises of our time and we cannot thank you enough. For the millions of children who are suffering as a result of Adverse Childhood Experiences (ACEs), we thank you for helping to prevent, screen, and heal the effects of toxic stress. Your advocacy and support is transforming the standard of pediatric care across the country and ensuring that children and families exposed to adversity can change their trajectory and lead healthy lives. Here’s what you have done:

• Provided family-focused integrated care and interventions aimed at promoting healthy relationships and stress-regulation.

• Continued our 3.5-year research study funded by the Tara Health Foundation, in partnership with Benioff Children’s Hospital Oakland and UCSF, to better understand the biological effects of chronic exposure to adversity and test the results of clinical interventions in treating and preventing toxic stress.

• Launched the National Pediatric Practice Community (NPPC) to support and equip medical professionals with the tools they need to incorporate pediatric screenings for ACEs into their practices.

• Developed a Stress Health Public Education Initiative to educate parents and caregivers about the connection between ACEs and health outcomes, and provide them with tools to help protect their children’s growing brains and bodies from adversity.

• Established the Center for Youth Wellness as a thought leader in the field of child well-being with Founder and CEO Dr. Nadine Burke Harris reaching nearly 13,000 clinicians, philanthropists, and educators in various talks and interviews across the nation to raise awareness about childhood adversity and toxic stress.

We hope you read the pages of our 2017 Annual Report with the same excitement and joy we feel about what we have accomplished together in 2017 and the meaningful work that lies ahead. The philanthropic funding that sustains our work has empowered us to reach parents, policymakers, and pediatricians while working towards ensuring universal screening for ACEs as a standard part of pediatric practice. We look forward to a day where every child has a happy and healthy childhood.

Thank you for supporting this vision. Thank you for ensuring that all children can thrive.

Nadine Burke Harris
Founder and CEO

Christopher Padula
Executive Director
We’re at a tipping point.

Now is the time to leverage the science, clinical understanding and public interest to reach thousands of pediatricians and millions of parents.

Our Actions in 2017

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BUILD A MOVEMENT

Through a robust public speaking and thought leadership platform, messages about the impact of childhood adversity—and how communities can break the cycle—reached national audiences across education, science, literature, medicine and policy sectors. Because of these efforts, thousands of providers, educators, and policymakers across the country have new understanding of ACEs, toxic stress, and the promising interventions to address them.

Spreading Awareness of ACEs Across the Nation:

This research helped us to understand the attitudes and baseline awareness of ACEs for parents and caregivers and the barriers to screening for clinicians.

Conducted Multi-City Insights Research:

- 750 participants
- 12 practice community interviews
- 22 parent/caregiver interviews across three cities
Launched in 2017: Stress Health Initiative

Center for Youth Wellness launched the initial phase of Stress Health, a national public education campaign designed to empower parents and caregivers to address and ameliorate the impacts of adversity for their children. The first phase, a large-scale social media awareness campaign, garnered the level of engagement typically only seen by brands like Apple, Samsung, and the film industry.

StressHealth.org
Growing a community on social media through a targeted awareness campaign.

- **1.5M** REACH
- **1M** VIDEO VIEWS
- **650k** ENGAGEMENT
- **25k/450%** COMMUNITY GROWTH
Launched in 2017: NPPCaces.org

National Pediatric Practice Community on Adverse Childhood Experiences

The NPPC is a national peer group of providers interested in applying ACEs and toxic stress science to medical practice and expanding knowledge, building capacity, accessing resources, and shaping the field of trauma-informed medical practice.

Membership in the NPPC includes:

- Access to the latest science and practice resources on the NPPC member website
- Networking
- Monthly information-rich communications
- Training opportunities

NPPC is also working with a select number of medical practices to help us better understand the experience and process of integrating ACEs screening into a variety of clinical settings. Data, insights and learnings from these pilot sites will be shared with NPPC members.
Our NPPC program team and our research team had a busy year in 2017, with journal publications, poster presentations in the US and abroad, and a wealth of new training resources made available to providers. Since the launch of the NPPC, we have seen the online community grow into a dynamic network supporting ACEs screening.

### Program Design and Research
- Provider and consumer insights study conducted
- Conversations with providers who are already screening
- Early conversations with pilot sites

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#### APR-JUN
- **Pre-Launch and Launch**
  - Webinar on NPPC Launch with Dr. Burke Harris
  - NPPCaces.org is officially launched in May 2017
  - Enrollment in NPPC begins

#### JUL-SEPT
- **Preparation for Pilot Site Training**
  - Training Materials for Pilot Sites are developed and refined based on learnings

#### OCT-DEC
- **Training of Pilot Sites and Content Development**
  - First pilot site training in November 2017
  - Content developed for NPPC Member site

120 new resources developed and curated for providers

400 ACE-Q downloads in the U.S. and abroad

345 clinicians joined NPPC as members

### 4 new pilot sites
- Institute for Family Health, New York, NY
- Zuckerberg San Francisco General Hospital, San Francisco, CA
- Marin Community Clinics, San Rafael, CA
- Santa Barbara Neighborhood Clinics, Santa Barbara, CA

### Moving the Research Forward

2 publications in peer-reviewed journals
- **Prevent, Screen, Heal: Collective Action to Fight the Effects of Early Life Adversity**
  - Burke Harris N, Silverio Marques S, Oh DL, Bucci M, Cloutier M.
- **Adversity and Academic Performance Among Adolescent Youth: A Community-Based Participatory Research Study**
  - Purewal Boparai, Sukhdip

4 poster presentations
- American Academy of Pediatrics National Conference and Exhibition, Chicago, IL
- Advancing the Science of Community-Engaged Research, Washington, DC
- International Society of Psychoneuroendocrinology Annual Conference, Zürich, Switzerland
- International Society for Traumatic Stress Studies’ Annual Meeting, Chicago, IL
Our Kids: Patient Profile at Time of Referral

- **Gender**: 51% Female, 49% Male
- **Age**: 36% ages 0-5, 39% ages 6-12, 21% ages 13-18, 4% ages 19-21
- **Ethnicity**: 70% Black/African American, 15% Hispanic/Latino, 15% Other
- **ACE-Q score**: 10% 0, 35% 1-3, 55% 4+

*Percentages derived from a formative evaluation of our clinical data from 2013-2017

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**Intervention Spotlight: Biofeedback**

Our young patients have access to state-of-the-art interventions such as biofeedback.

Biofeedback training can help participants learn to regulate their physiological functioning by using signals from their own bodies such as heart rate, breathing rate, muscle tension, skin conductance, and temperature. Neurofeedback (also called EEG biofeedback) can help participants learn to regulate their neurological function, or brainwave activity.

Both modalities utilize non-invasive sensors to measure activity from the brain and body, displaying it as a video game on a computer screen. Similar to when we look in the mirror to fix our posture, brush back our hair, or notice the spinach stuck in our teeth, the feedback offers participants a reflection of their internal brain-body functioning. Participants are then given visual and audio feedback to help guide them towards more calm, alert, and attentive states.

With biofeedback training, the main objective is to support the brain and body's ability to manage toxic stress. Much like learning to ride a bike or strength training at the gym, biofeedback training requires active participation. With enough practice, participants can improve their brain-body health and performance.

CYW is exploring the best way to collect and disseminate data gathered using bio- and neurofeedback to better inform our program and the growing body of ACEs interventions.
Our Model: A Family-Focused Integrated Health Approach

1. **Child Medical Health**
   Children are seen at Bayview Child Health Center (BCHC) where they are screened for ACEs as part of their intake.

2. **Child Behavioral Health**
   Children with an ACE score of 4 or more are offered services at the Center for Youth Wellness and develop a treatment plan with their therapist.

3. **Parent Stress Management**
   Therapists also work with parents and provide them with resources and tools to help manage stress levels.

4. **Parent Natural Supports**
   Together, they identify existing supports in the parent’s circle who can help serve as a buffering support to the parent.

CYW services are family-focused because exposure to ACEs is an intergenerational public health issue. The aim is to understand a child within the context of her relationships and environment. As such, CYW Clinical Programs design individualized treatment plans to achieve the greatest clinical impact for a child and her family. Addressing these four areas ensures an intergenerational approach to wellness.

“I am daily inspired by the growth and change my patients undergo. Seeing patients apply the things they’ve discovered in our sessions, and bearing witness to the positive changes and psychological ‘Eureka’ moments they have is the most uplifting and rewarding part of my work.”
— Perry Chen, Senior Integrated Clinical Social Worker

2017 Service Utilization

- 154 patients served by CYW
- 570 BCHC patients screened for ACEs with CYW ACE-Q
- 27 patients/families successfully completed CYW treatment
As a foster mom I’ve had many children in my home over the years and I brought them to Bayview Child Health Center, which is how I became connected with the Center for Youth Wellness. My children are participants at both centers.

I remember first meeting Dr. Burke Harris when she came and spoke to a group of us foster moms-to-be several years ago. My first impression of Dr. Burke Harris was “Wow. Here is a woman of color who really owns her floor.” More than that, I remember her saying something that really stood out for me - she said “our children of color.”

The way she was speaking was more like “us, as a team” rather than “you guys.” In my daily life I often think of the African proverb “It takes a village to raise a child,” and so when I heard Dr. Burke Harris use those words, I thought to myself “Can she be a part of our village? Can we trust her?” The more I became acquainted with her and the Center I thought “Yes - this sister is for us. She wants us to be healthy; she wants us to be well.”

When I started bringing my daughter to the Center for Youth Wellness, walking through the door it didn’t feel like it was “them” and “us” - it felt like we were visiting family. The staff were genuinely interested in getting to know me as her mom, and also getting to know my daughter.

After working with CYW for so many years as a parent, I decided I wanted to take a more active role. I joined the Community Advisory Council in order to not only help advocate for other parents and children in our community, but also to help CYW understand the vibrancy of our culture. The fact that they are willing to take feedback from the community shows that this really is a village and we are all here to work toward a healthier Bayview Hunters Point.

Artiese Williams
Community Advisory Council Member, Mother, Parent Advocate

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Community Advisory Council

Natalie T. Ah Soon - Co-chair Regional Pacific Islander Taskforce
Alexis Alexander - Bayview Hunters Point Resident
Jo Elias-Jackson, MPA/HSA - Community Advocate
Monica Ferrey - Community Health Leader, Healthy Generations Project
Rebecca M. Gallegos - Community Advocate, Centerplate at AT&T Human Resources
Alonzo D. Good Anderson - Counselor, Healthright 360, Community Advocate
Lenika Howard - Community Advocate
G. L. Hodge - Nonprofit Consultant
Artiese Williams - Bayview Hunters Point Resident
Toni Hunt Hines - Movement Builder, Coordinator, Coleman Advocates for Children and Youth
Joi Jackson-Morgan - Executive Director, 3rd Street Youth Center & Clinic
Beauvien Latimore - Bayview Hunters Point Resident
Rebecca Mendez - Health Equity Research (HER) Lab Manager, San Francisco State University, Community Advocate
Ieeshea Romero - Program Director, Inneract Project, Bayview Hunters Point Resident
Lottie Titus Whiteside - Community Engagement Specialist, Hope SF
Jeanette Wright - Community Engagement Director, NexGeneGirls
Creating Change Through Public Policy

The California Campaign to Counter Childhood Adversity (4CA), of which CYW is a founding member, continues to grow its capacity to advocate for public policies, reaching a total of 190 organizations involved to-date. 4CA members work to advocate for policies that address childhood adversity in the state of California.

In 2017, we carried out the first 4CA Policymaker Education Day, bringing over 100 advocates from all corners of the state to educate 85 legislators and their staffers at the day-long event in Sacramento.

Additionally, CYW is working at the national level to educate policymakers on the issue of ACEs and toxic stress towards a vision of all children being screened in a medical setting.

4CA endorsed 3 pieces of legislation, all of which were passed into law in October 2017:

• Integrate Mental and Physical Health Education as part of Continuing Medical Education (AB 1340, Maienschein), this bill requires the Medical Board to include a course for primary care providers on integrated mental and physical health care, to identify and treat mental health issues in children and young adults in its continuing education requirements.

• CA Mental Health Services for Low-Income Children (AB 340, Arambula), forms a taskforce to determine the best way to integrate trauma screening for children into routine health screening through MediCal.

• California Values Act (SB 54, De León), prohibit state or local resources from supporting mass deportations of immigrants and ensure public institutions serve as safe spaces for children, families and communities.
Thank You For Your Generous Support In 2017

The generous philanthropic support we received in 2017 allowed us to do more than we ever imagined. We have advanced clinical practice, published groundbreaking research, galvanized a public health movement, and most importantly have screened and provided treatment for hundreds of children and families. CYW is 100% philanthropically funded, and it’s your support that enables this critical work to continue.

It has been my pleasure to serve as the Board Chair of the Center for Youth Wellness and witness this incredible team in action. When I give to the Center for Youth Wellness, I’m reminded of our shared commitment to raise critical awareness about the effects of childhood adversity on our brains and bodies, and to provide a pathway for these children to lead healthy and fulfilled lives.

Thank you for providing treatment to patients and families exposed to adversity in San Francisco, for educating audiences across the country about the effects of toxic stress, and for equipping medical providers with the tools to protect more children.

On behalf of the Center for Youth Wellness Board and our wonderful staff, I can’t thank you enough.

Mary Pang, Board Chair,
Managing Director, J.P. Morgan

• What excites me the most about the work of CYW is the grave importance of their overall mission, the dedication and passion the team brings to raising awareness and providing requisite tools to communities to help screen children for toxic stress and adverse childhood experiences. All of which is to serve as a pathway for these children to lead healthy and fulfilled lives.

• What motivated me to join CYW’s Board is the realization of the importance of galvanizing private capital and driving public awareness around the core issues borne by toxic stress in children. The clear vision the CEO and CYW’s leadership have set forth served as a catalyst to extend my non-profit and professional experiences to be a part of this special, shared “movement”, allowing us to witness the unfolding impact it will have on young people’s lives.

• My vision for the organization during my tenure as Board Chair, will be to empower our brilliant Board to better serve CYW, to expand the Board to fill the skills and experience gap to better serve CYW, and to help the entire CYW organization grow its operating budget, its talent and its resources with the most important goal of serving the communities where ACEs and toxic stress are most acute.

Mary Pang, Board Chair
Managing Director, J.P. Morgan

Loel Solomon, PhD
Vice President, Community Health, Kaiser Permanente

Nadine Burke Harris, MD, MPH, FAAP
Chief Executive Officer, Center for Youth Wellness

Daniel Lurie
Founder & Chief Executive Officer, Tipping Point Community

Mary Kelly Persyn, JD
Founder and Principal, Persyn Law and Policy

Natalie Walrond
Director, Cross-Sector Initiatives, WestEd

Emily Webb, MPH
Director of Community Health Programs, California Pacific Medical Center
Financials

2017 Operating Revenue & Support

- 79% Foundations | $5,129,184
- 9% Individual Donors | $583,780
- 7% Corporate | $450,000
- 4% In-Kind | $236,139
- 1% Other Revenue | $87,333

Total | $6,486,436

2017 Operating Expenses

- 27% Movement Building | $1,733,252
- 22% Research and Evaluation | $1,464,325
- 21% Clinical Program | $1,334,612
- 20% Management and General | $1,317,388
- 10% Development | $671,195

Total | $6,520,772

CYW’s expenses slightly exceeded our revenue in 2017, yet our general operating reserves remain strong. Our audited financial statements received an unqualified opinion with no deficiencies or material weaknesses in our internal controls.
It is so very important to support the Center for Youth Wellness because it is committed to helping our most vulnerable families here in San Francisco. Dr. Burke Harris and the CYW team are transforming the way society responds to trauma, and at the earliest stages of child development, this can prevent so many physical and emotional ills.”

— JaMel Perkins, Supporter

$500,000+

$100,000 – $499,999
50,000 - $99,999
Hellman Foundation  
JaMel and Tom Perkins  
Sarlo Foundation of the Jewish Community Federation and Endowment Fund

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Mimi and Peter Haas Fund  
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Anonymous  
The EACH Foundation  
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Happy Family Brands  
Ray and Dagmar Dolby Family Fund  
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