



# ABBOTT HOUSE

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## Our Mission

Building lasting foundations under children, families and adults with complex needs that provide opportunities for promising futures.

### Our Vision

We make promising futures a reality!

### Who We Are

The heart of our work at Abbott House is dedicated to helping human beings recover from deep trauma, or intervening to prevent trauma in the first place.

We support over 2,800 children in foster care, unaccompanied immigrant children, struggling families and adults with developmental disabilities in the New York region. We accomplish this by providing safety, promoting healing and restoring hope. These are the foundations needed to make promising futures a reality.

Individuals and families frequently come to us from trauma-ridden pasts and often have lost their sense of place in the world. They come to us with the notion of a future that is stalled in the present. Our goal is to help them create a durable sense of family, home and community, and prepare them for a promising future.

Family comes first at Abbott House. We work hard to reunite families and create new ones so those entrusted to our care feel a sense of belonging rooted in hope and community.

Our work is not intended to be a 'fix,' rather it is a conscious investment in individuals and indirectly, their communities. We use the term durable foundations to describe the essence of our work. "Durable" means lasting and dependable. "Foundations" means fundamental, a basic girding to individual's makeup that is a repository of resilience and skills to be relied on in times good and bad.





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## Who You Help

### CHILDREN

You help children in foster care by providing the foundational development of healing, safety and hope they need to thrive in family settings. Through counseling, health care, life skills, academic support, employment training and the like, you help them find their place in the world.

### UNACCOMPANIED IMMIGRANT CHILDREN

You support immigrant children seeking asylum. They cross our country's southern border unaccompanied by adults.

You help to support their needs as we transition them to a family member or find a permanent home.

### FOSTER FAMILIES

Courageous families open their homes and hearts to Abbott House children and adolescents. The best place for a child to learn and grow is in a family environment, and Abbott House strives to ensure that each child entrusted to our care is given that opportunity in nurturing Foster Homes.

But foster parents can't do it alone. Because of you, we are able to provide foster parents with the support they need 24/7 to handle the complex needs of the children.

### YOUR COMMUNITY

To build a strong social fabric, we need to make it possible for all of our residents to contribute to their fullest potential. The future prosperity of any society depends on its ability to foster the health and well-being of the next generation. When communities invest wisely in children and families, the next generation will pay that back through a lifetime of productivity and responsible citizenship.

### STRUGGLING FAMILIES

You help families who are struggling and in jeopardy of having their children removed from their home.

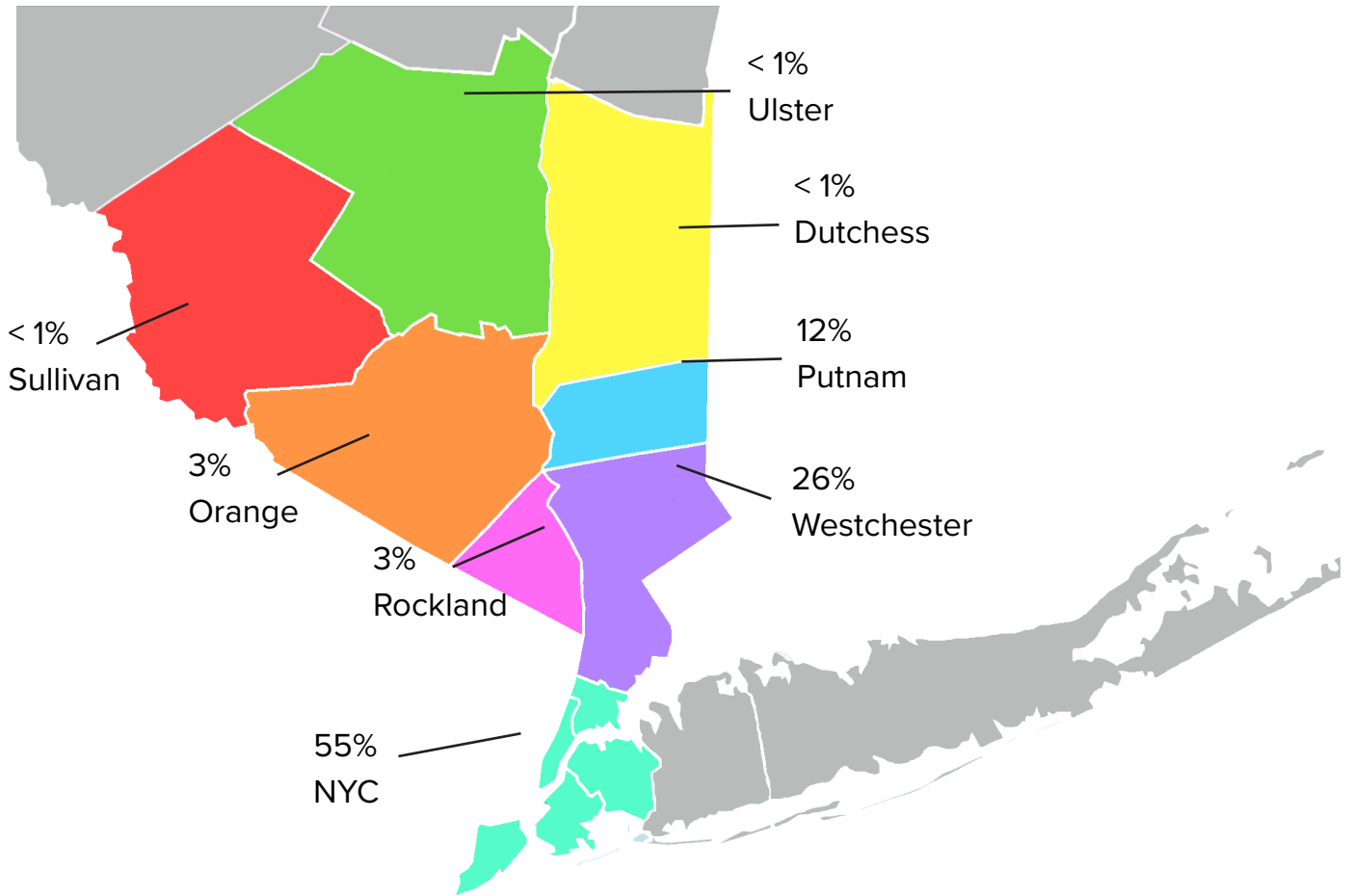
Through your help in supporting our Prevention Services, you help to stabilize families, offer the resources they need and keep families together.

### ADULTS WITH DEVELOPMENTAL DISABILITIES

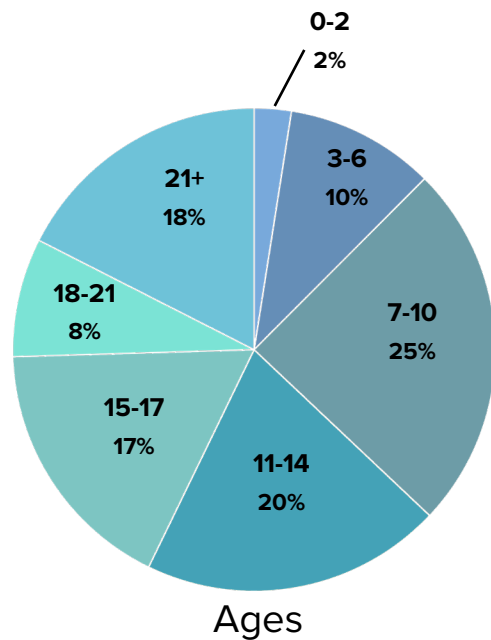
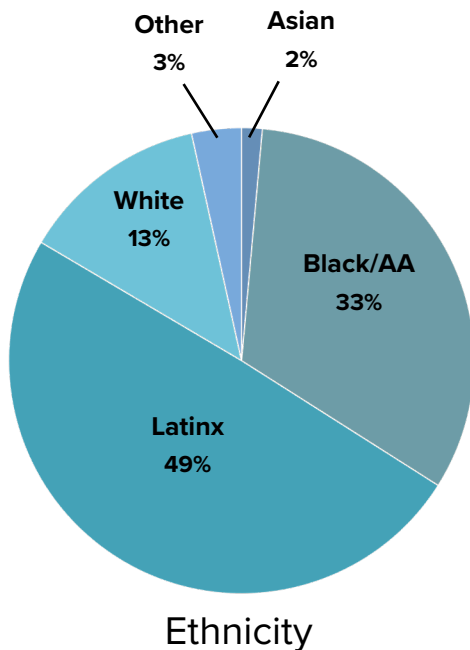
You help adults with developmental disabilities live in a safe, supportive and nurturing environment. Your support provides resources that help each individual live a meaningful and dignified life.



# Who We Served



**Abbott House provided direct care to 2,869 people in 2021.**





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## Our Leadership

On October 29, 1965, Abbott House held its first inaugural dinner, a coming out of sorts with the invocation spoken by Dr. Martin Luther King, Jr. entitled “The Dignity of Family Life.” King sounded themes of community, identity and family particularly appropriate to the times. “Who is my neighbor?” he challenged. “A great man (has) the capacity to project the “I” into “thou”.

Dr. King’s words found common ground with the Abbott House leadership at the time, and common ground with the history of Abbott House yet to be written.

Over fifty years later, dedicated and experienced professionals in business, education, human services, and non-profit management continue to lead Abbott House into the next decade.



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## Services

### Children and Families

#### FOSTER CARE AND ADOPTION

Abbott House recruits, trains, and supports courageous families to open their homes and hearts to Abbott House children and adolescents. For children and teens who need additional support or who have not yet been matched with a foster family, residential care in a group home setting serves as a safe and nurturing atmosphere as they continue their individual journeys toward permanency. One community residence provides services for seriously emotionally disturbed children.

#### PREPARING YOUTH FOR ADULTHOOD

The Preparing Youth for Adulthood (PYA) program works with adolescents starting at age 14 and young adults in foster care and serves as a vehicle for youth to learn how to be self-sufficient and make a positive transition into adulthood. Young adults in PYA learn how to research and apply for colleges or vocational schools; how to apply for housing; budgeting and money management; accessing community resources; consumer awareness; legal issues; interpersonal relationships; paying and monitoring utilities; housekeeping and home management; food management; and life coaching.

#### H.E.A.R.T. (Helping Each Adoptive and Guardianship Family Remain Together) PERMANENCY RESOURCE CENTER

Sometimes raising adoptive or guardianship children has special challenges. H.E.A.R.T. offers support and resources to families raising adoptive or guardianship children at no cost. Having a history in foster care is not required. Services include in-home counseling for children and post-adoption parents or guardianship caregivers. Training, referrals, advocacy and support groups are also offered.

#### WELCOMING CHILDREN FROM AFAR

Abbott House welcomes children entering the United States from other countries without an adult guardian. We provide three Transitional Resource for Children (TRC) programs to support these children. The first is short-term care and support at our Irvington Campus while a family member or sponsor is identified. During their stay, children receive room and board, case management, counseling, legal, medical and educational services. We also support children with long-term and short-term foster care and adoption when a family member or sponsor is not available. Bi-lingual foster families are recruited, trained, and supported.

#### COMMUNITY SCHOOLS RESOURCE

Abbott House recognizes that the needs of the whole child must be met in order for students to succeed. We partner with the New York City Department of Education to provide services to elementary schools in the Mount Eden community of the Bronx.

Our goal is to develop school communities in which students evolve into productive adults who will continue to grow economically and academically. We take a holistic approach to supporting student success that includes after school and summer programming, family engagement, social services, and physical and mental health services. We engage parents, families, and other members of the community as part of a process to transform each school.

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## JUVENILE JUSTICE

Abbott House provides temporary care and custody of youth accused of committing delinquent or criminal acts and detained by police arrest or court order.

Abbott House offers a highly structured setting while providing for the safety and well-being of youth, staff and for the community while youth wait their court dates and the disposition of their cases.

The goal is to provide these youth with new skills and opportunities so that their first contact with the justice system will be their last. High quality and varied programming is tailored to the diverse needs of the residents. **100% of our youth after participating in our program were allowed to return home to their families.**

## HEALTH HOME SERVICES

We connect all client care providers in a partnership to develop a plan that leads to improved health. We believe this helps children and family's long-term health and well-being. Abbott House helps:

- Schedule appointments for services.
- Locates and refer children to other community resources.
- Ensures service providers work together on the child's plan of care.
- Gets resources to prevent crisis and achieve health goals.
- Helps if a child moves from a hospital stay to another community service.

## Counseling Services

Abbott House Counseling Services are community-based resources open to individuals, children and families. Our therapists provide family-focused treatment for children, adolescents, parents and other caregivers as well as individual therapy to adults. We use a variety of evidence-based approaches to treat emotional, behavioral or relationship problems. Together we set goals and work toward resolving difficulties. Counseling can help people better understand the problem, find solutions, identify strengths and find new ways to improve well-being.

## Adults with Developmental Disabilities

Abbott House provides services to more than 100 individuals with intellectual or developmental disabilities. We have 16 residential programs (15 Individualized Residential Alternatives and 1 Intermediate Care Facility). Our homes are located throughout Westchester and Rockland Counties as well as the Bronx. Our homes provide a caring and safe home-like atmosphere with round-the-clock support from highly trained and dedicated staff.

Abbott House operates two community based Day Habilitation programs. The focus is for every individual to be a meaningful member of our community. Our day programs are designed to offer an array of exciting, diverse opportunities encompassing health, well-being, recreational, and social activities.

Abbott House implements programs & activities to enhance lives and offers a Self-Advocacy program. Self-Advocacy allows the opportunity for people to speak up for themselves as well as an avenue for showing support for peers. It is about having the right to make life decisions without undue influence or control. The program teaches people about their rights and responsibilities and ways to protect their rights. These skills and the opportunity to "be heard" build self-confidence and enriches the lives of those participating.





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## Supporting Promising Futures

### YOU CAN MAKE PROMISING FUTURES A REALITY!

Your support helps Abbott House build foundational supports for every child, family and adult that we serve. You help them find their place in the world. Without you, we could not begin to make a difference in their lives. We all critically depend on our partnership.

By supporting promising futures you make an investment in children, families and adults with complex needs. But most of all you invest in our community.

In our experience, a sit down with a member of our senior team can be useful in helping prospective donors like you discover if Abbott House is a fit for what you would like to accomplish in the world.

We're eager to listen to your own ideas to support our work to contribute to the future of our children, families and adults with complex needs.

### BROAD PROGRAM INVESTMENT

Choosing to contribute to Abbott House through our Broad Program helps give us the flexibility to use your support where it is needed most. An investment here helps strengthen the capacity of Abbott House in the expansion and qualify of:

- Our overall adult practice
- Our overall children's practice
- The Abbott House Learning Center for Professional Training

### BUILDING BLOCK INVESTMENT OPPORTUNITIES

- Safety
- Healing
- Hope

### PARTNER WITH US TO FUND PROMISING FUTURES!

Contact [development@abbotthouse.net](mailto:development@abbotthouse.net) to learn more about available opportunities



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## Why We Must Help Children and Families Now

### Because if we don't...

The consequences for children and families are dire. We want to end generations of abuse, neglect and poverty. Our communities prosper when children thrive.

### Here are some sobering facts you need to know.

The long-term financial impact of abuse and neglect is staggering. Without educational prospects, adults who were in foster care are more likely to be homeless, unprepared for employment and limited to low-skill jobs and dependent on welfare or Medicaid.<sup>13</sup>

### NATIONWIDE CHILD ABUSE

- A report of child abuse is made every 10 seconds.
- 6.6 million children are referred to child protection agencies annually.<sup>2</sup>
- In 2015, there were 683,000 victims of child maltreatment. This would pack 10 modern football stadiums.<sup>15</sup>
  - Of these:
    - 75% suffered neglect.
    - 7% suffered physical abuse.
    - 8% suffered sexual abuse.
- The US has one of the worst records among industrialized nations – losing an average between four and seven children every day to child abuse and neglect.<sup>1,2</sup>
- Over 78% of perpetrators of child maltreatment were parents acting alone, together, or with other individuals.<sup>15</sup>
- In 2015, 1,670 children died from abuse and neglect, and 75% of these children were younger than 3 years old. More than 49% of them were under a year old.<sup>15</sup>
- Studies also indicate significant undercounting of child maltreatment fatalities by state agencies — by 50% or more.<sup>10</sup> That's roughly ¼ of your child's elementary school class.

### EDUCATION AND ECONOMIC IMPACT

- Only 50% of foster youth graduate high school by age 18, only 10% attend college, and as little as 2% graduate with a bachelor's degree.<sup>14</sup>
- 5 weeks is the average amount of school missed each year in foster care.
- 7th grade is the reading level they will have at age 17.
- 50% of foster alumni will be unemployed by age 24.
- 31% of foster alumni will become homeless by age 18.

### HEALTH IMPACT

The U.S. Center for Disease Control and Prevention links adverse childhood experiences (which include other household dysfunctions along with abuse and neglect) with a range of long-term health impacts.<sup>4</sup>

- Individuals who reported six or more adverse childhood experiences had an average life expectancy two decades shorter than those who reported none.<sup>5</sup>
- Ischemic heart disease (IHD), Chronic Obstructive Pulmonary Disease (COPD), liver disease and other health-related quality of life issues are tied to child abuse. 1 in 4 foster alumni will be diagnosed with PTSD as an adult (2 x the rate of US war veterans).
- In one study, 80% of 21-year-olds who reported childhood abuse met the criteria for at least one psychological disorder.<sup>6</sup>
- 71% of female foster alumni will become pregnant by 19.
- 80% of domestic child sex trafficking victims are former foster youth.<sup>15</sup>

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## FOSTER CARE FACTS

- On any given day, there are 428,000 children in foster care in the US.
- Children remain in state care for an average of nearly 2 years, while 6% of children in foster care have been there for five or more years.
- The average age of kids in care is nearly 9.
- In 2015, more than half of children entering U.S. foster care were young people of color.
- 20% of foster youth are LGBTQ<sup>15</sup>
- While most children in foster care live in family settings, a substantial minority — 14% — live in institutions or group homes.
- In 2015, more than 62,000 children — whose mothers' and fathers' parental rights had been legally terminated — were waiting to be adopted.
- In 2015, more than 20,000 young people aged out of foster care without permanent families.
- 100% of foster children rely on Medicaid for their medical and dental needs<sup>15</sup>

## FINDING PERMANENT FAMILIES<sup>15</sup>

There are four ways children can leave foster care for permanent homes: Reunification with birth parents, adoption, guardianship, or placement with relatives.<sup>4</sup>

In 2015:

- More than 214,000 children exited foster care and were reunified with their birth parents, adopted, placed with relatives or placed in a guardianship.
- Reunification is the most common outcome for children exiting state care. More than half of the children who left foster care were reunified with a parent or primary caretaker.
- The children who exited foster care, 22% were adopted, 9% were discharged to guardianship, and 6 percent were placed permanently with a relative.

## AGING OUT

- When children in foster care cannot return home to their families, the prospects for landing in safe, loving, permanent homes grows dimmer as time goes by. Many will simply “age out” of the system when they turn 18, without a family and without the skills to make it on their own.
- More than 20,000 young people aged out of foster care, simply because they were too old to remain.
- Youth who age out of foster care are less likely to graduate from high school and are less likely to attend or graduate college.

## RESOURCES

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14. Foster Care 2 Success National Fact Sheet, 2014
15. U.S. Department of Health & Human Services Administration for Children and Families Administration on Children, Youth and Families Children's Bureau, 2015 Child Maltreatment Report



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## Why We Must Help Adults With Disabilities Now

### Because if we don't...

The consequences for these adults and their aging families are dire.

Many become abused, their health rapidly declines and some end up in poverty.

Our communities prosper when everyone reaches their full potential.

### Here are some sobering facts you need to know.

#### NATIONWIDE

- 4.92 million or 19% of the U.S. population live with an intellectual and/or developmental disability.<sup>1,9</sup>
- Males have twice the prevalence of a developmental disability than females.<sup>5,7,8</sup>
- 28% are living in poverty<sup>9</sup>
- Over 115,000 families are currently on residential waiting lists for independent living support.<sup>9</sup>
- More than 25% of family care providers are over the age of 60 years and another 38% are between 41-59 years.<sup>9</sup>
- 83% of women and 32% of men are victims of sexual assault.<sup>9</sup>
- 40% of women report they have been assaulted.<sup>9</sup>
- Half of the people with developmental disabilities who are assaulted will be victimized a minimum of 10x over the course of their life.<sup>9</sup>

#### HEALTH IMPACT

- Lifetime costs can reach up to \$2.4 million due to services such as special education, extra medical care, supportive care and therapeutic care.<sup>4</sup>
- People with intellectual and developmental disabilities have poorer health and poorer access to health care.<sup>6</sup>
- They are more likely to lead sedentary lifestyles.<sup>9</sup>
- 11.5% of women with developmental disabilities reported that they have never visited a gynecologist. 26.8% of women age 40 or older never had a mammogram.<sup>9</sup>

- They are more likely to have a diagnosis of diabetes than people without disabilities.<sup>9</sup>
- 1 in 2 people with a developmental disability has chronically high blood pressure.<sup>9</sup>
- For those with severe or profound developmental disabilities, the life expectancy rates are reduced by 25% on average.<sup>9</sup>
- Only 61.7% report they could see their family members whenever they wanted.<sup>9</sup>
- Transportation or staffing limitations are barriers to spending time with friends.<sup>9</sup>
- 24.0% report that they have no one to talk to about personal things and often feel lonely.<sup>9</sup>



#### RESOURCES

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8. (Developmental Disabilities Monitoring Network Surveillance Year 2010)



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## What are Intellectual and Developmental Disabilities?

People with this disability experience significant limitations in one or more of their conceptual, mental, physical, social and practical everyday living skills. A number of people with intellectual and/or developmental disabilities are mildly affected, making the disability difficult to recognize without visual cues. Many adults with intellectual disability can live independent, productive lives in the community with support from family, friends and human service organizations. Others have substantial limitations in language, learning, mobility, self-direction, capacity for independent living and economic self-sufficiency and require lifelong individually planned and coordinated care. Those with developmental disabilities include individuals with cerebral palsy, epilepsy, developmental delay, autism and autism spectrum disorders, down syndrome, fetal alcohol spectrum disorder (or FASD) or any of hundreds of specific syndromes and neurological conditions that can result in impairment of general intellectual functioning or adaptive behavior similar to that of a person with intellectual disability.

### HOW DOES HAVING A DISABILITY AFFECT SOMEONE'S LIFE?

The effects vary considerably among people who have them, just as the range of abilities varies considerably among all people. Children may take longer to learn to speak, walk and take care of their personal needs, such as dressing or eating. It may take longer to learn in school. As adults, some will be able to lead independent lives in the community without support, while others will need significant support throughout their lives. However, with early intervention, appropriate education and supports as an adult, every person with an intellectual and/or developmental disability can lead a satisfying, meaningful life in the community.

### WHAT ARE THE CAUSES?

The overall cause is the impairment of the development of the brain before, during or after birth, or during childhood years. While there are many conditions that are beyond anyone's control such as genetic conditions, or problems at birth, poverty increases the risk of exposure to alcohol, drugs, smoking, malnutrition, childhood diseases, exposure to environmental health hazards and inadequate health care.

Children in disadvantaged areas are often deprived of many common cultural and educational experiences. Research suggests that such under-stimulation can result in irreversible damage and can serve as a cause of intellectual disability.

### HOW CAN SOME IMPAIRMENT OF BRAIN DEVELOPMENT BE PREVENTED DURING CHILDHOOD?

By helping families and pregnant women gain access to health care and supporting them in becoming aware of the steps to keep children safe and healthy.

Some can be prevented during childhood by knowing the causes and taking steps to keep children safe and healthy.

- Childhood immunizations to protect children from at least six diseases that can lead to brain damage: including measles, mumps, pertussis (whooping cough), Hib disease, varicella (chicken pox), and pneumococcal disease.
- Injury prevention to avoid brain damage, such as using bicycle helmets and safety seats and seat belts in automobiles; preventing near-drowning; preventing falls and protecting babies from severe shaking.
- Newborn screening to identify treatable genetic conditions.
- Using medicines containing acetaminophen (Tylenol) instead of salicylate (aspirin) which is known to cause Reye's Syndrome.
- Reducing exposure to lead, mercury and other toxins in the environment that are known to cause brain damage.
- Protecting children from household products that are poisonous.

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## What's the Connection Between Supporting Children/Families and Supporting Adults with Disabilities?

Many children in foster care have some type of intellectual and/or developmental disability and we have developed a special expertise in supporting them. As they age out of foster care, we are able to offer a continuum of support as adults.

- 15% of children age 3 -17, or 1 in 6 children in the U.S. has some type of developmental disability.<sup>1,2</sup>
- Children from families with low income have higher prevalence of intellectual/developmental disabilities.<sup>5</sup>
- Many children and adults have more than one type of intellectual or developmental disability resulting in a variety of challenges requiring different types of care and services.<sup>9</sup>
- 64% of the children that are maltreated every year have at least one developmental disability. There is a direct correlation between the severity of the disability and the likelihood of abuse occurring.<sup>9</sup>
- One in three children with an identified disability for which they receive special education services are victims of some type of maltreatment (i.e., either neglect, physical abuse, or sexual abuse) whereas one in 10 nondisabled children experience abuse. Children with any type of disability are 3.44 times more likely to be a victim of some type of abuse compared to children without disabilities. (Sullivan & Knutson, 2000)<sup>10</sup>
- Looking specifically at individuals with intellectual disability, they are 4 to 10 more times as likely to be victims of crime than others without disabilities (Sobsey, et al., 1995).<sup>10</sup>
- Children with intellectual disability are also at risk of being physically and sexually abused.<sup>10</sup>





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## Leadership Talking Points

### Did you know that...

- The long-term impact of abuse and neglect is staggering.
- Children who are abused or neglected are behind academically, they don't get exposed to a variety of life skills, cultural experiences, and lack a foundation of health and wellness.
- Children in foster care are more likely to be homeless, unprepared for employment, and limited to low-skill jobs and dependent on welfare or Medicaid.
- Children and adults with developmental disabilities are likely to be abused or neglected and often repeatedly.

### When someone asks you about Abbott House...

**The heart of our work is helping human beings recover from deep trauma, or intervening to prevent and minimize trauma in the first place.**

We work with:

- Children in foster care
- Unaccompanied immigrant children
- Struggling families
- Children and adults with developmental disabilities

### Our Mission:

- Abbott House builds foundations under children, families and adults with complex needs that provide opportunities for promising futures.
- We need to make it possible for everyone to contribute to their fullest potential.

### Our Vision: To Make Promising Futures a Reality!

