

Instead of therapy, violence and chaos

In Illinois residential treatment centers, youths are assaulted and sexually abused. But the state keeps sending them.

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In residential treatment centers across Illinois, children are assaulted, sexually abused and running away by the thousands — yet state officials fail to act on reports of harm and continue sending waves of youths to the most troubled and violent facilities, a Tribune investigation found.

At a cost to taxpayers of well over \$200 million per year, the residential centers promise round-the-clock supervision and therapy to state wards with histories of abuse and neglect, as well as other disadvantaged youths with mental health and behavioral problems. On any given day, about 1,400 wards live in the centers, although far more cycle through each year.

In the best cases, the facilities rebuild and even save young lives. But the Tribune found that many underprivileged youths — most of them African-American — are shuttled for years from one grim institution to another before emerging more damaged than when they went in.

Reports of patient-on-patient sexual assault are commonplace at some of Illinois' largest and most relied-on facilities. Child prostitution schemes take root. Vulnerable children are terrorized by older ones and taught a life of crime. Some are preyed on sexually by the adults paid to care for them. And staggering numbers of wards, some as young as 10, flee to the streets.

In the three years from 2011 through 2013, Illinois residential facilities sent the state Department of Children and Family Services 428 reports alleging a ward was sexually assaulted or abused while in their care, according to DCFS records not previously made public.

The facilities submitted an additional 1,052 reports that a ward was physically assaulted during those three years — in some instances by staff but usually by a peer.

And facilities notified DCFS of 29,425 incidents when a ward ran away or went missing. That is an average of nearly 27 runaway reports a day among wards in Illinois facilities.

Out on the streets where they had no family, friends, money or life skills, some runaways committed carjackings, armed robberies and home break-ins, the Tribune investigation found. Others fell victim to gang rapes and sex trafficking.

“I don't know who's there for me,” said Meisha Singleton, 19, as she walked the Near North Side on a recent morning carrying her only change of clothes in a crumpled plastic bag.

Placed in state protective custody at age 14 after she was kicked out of her home at gunpoint and then sexually assaulted, Singleton was sent in 2012 to the 112-bed Indian Oaks Academy in Manteno, Ill. There she was attacked by peers, repeatedly bullied and taunted, government reports show.

Over the next year, Singleton ran away at least 11 times, government records show. She said she survived by prostituting herself in Chicago. Indian Oaks discharged

her earlier this year.

“I’m hurting,” she said. “I hate living like this, but the world isn’t fair, and I have to make my way.”

Operated by nonprofit agencies, for-profit firms or religious charities, Illinois’ roughly 50 residential centers range in size from 10 to 150 beds and are spread from the North Side of Chicago to the farmland of southern Illinois. Some are large dormitories that occupy former state-run asylums and orphanages, while others are campuses lined with cottages.

The violent conditions inside these facilities have largely been hidden until now because strict juvenile privacy laws shield basic reports of harm to youths from the public, the media and even many government regulators.

Reporters pierced the secrecy by gathering more than 10,000 pages of confidential juvenile case files from sources across the state, and also using public records laws to get police and state monitoring reports. The Tribune also compiled internal DCFS data on facility discharge outcomes and rates of key events like runaways, detentions of youths, assaults and sexual abuse.

Taken together, the records provide an unprecedented look at the chaos, drug abuse, violence and victimization within many of the taxpayer-financed centers.

Serious child safety breaches emerged at facilities throughout the state, including several of the most respected institutions, the records showed. The Tribune’s investigation centered on three of Illinois’ most relied-on centers where officials continued to send wards despite persistent patterns of violence, sexual victimization and runaway episodes:

■ At the 48-bed Lawrence Hall Youth Services facility on Chicago’s Northwest Side, young residents squared off in gang fights, coerced peers into sex, smoked marijuana in front of staff and routinely walked out of the facility to work as prostitutes, break into apartments, steal cars and rob passers-by, records show. DCFS kept sending in young wards even as the nonprofit lagged well behind other facilities in the department’s performance measures.

■ At the 59-bed Rock River Academy in Rockford, a facility for girls, former residents described being pummeled by peers upon arrival. During the most recent nine-month period, Rock River filed reports of aggressive behavior by state wards more frequently than any of the 50 Illinois facilities where DCFS places children and teens, according to a review of DCFS records.

■ At Indian Oaks, which specializes in treating children who have endured sexual trauma, the Tribune identified 17 reports of sexual assault or abuse during a 2 1/2-year period starting in September 2011. Facility reports to DCFS and police dismissed nearly half of those incidents as consensual, even when alleged victims were not old enough to consent or had cognitive impairments.

When young wards are hurt, the Tribune found, police and state officials rarely share their investigative reports with each other, making it difficult to uncover patterns of abuse and act aggressively to protect children.

The state’s beleaguered child welfare agency, which has had four directors in the past year and seen its budget sliced by more than 10 percent since 2009, is more than a year behind in analyzing facility performance records that show how many



ANTHONY SOUFFLE/
CHICAGO TRIBUNE

FREQUENT RUNAWAY: “I don’t know who’s there for me,” said Meisha Singleton, 19, as she walked the Near North Side on a recent evening. She’s a former resident of Indian Oaks Academy in Manteno, Ill., where she was attacked and bullied, government reports show.

Reliance on residential treatment

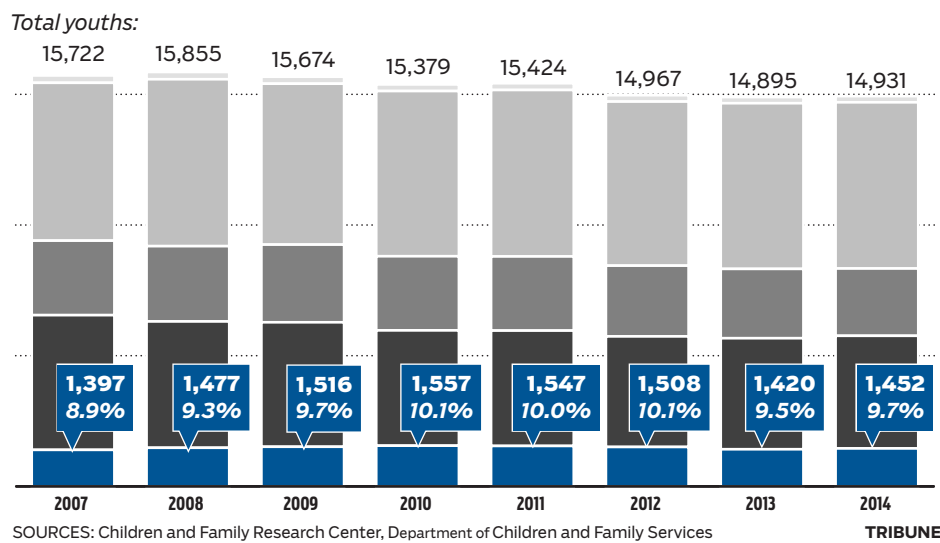
Residential treatment centers are increasingly used across America as a way to house and treat youths as young as 5 and as old as 21 who have significant behavioral, emotional, mental health or substance abuse problems.

The centers range from locked facilities to therapeutic boarding schools and small campuses with cabins divided by age and gender. They range in size from 10 beds to more than 200.

In Illinois, more than 1,400 juvenile wards are in residential centers on any given day, or about one in 10 wards. Government and facility officials acknowledge that many could be better served in less restrictive and less costly group and foster homes. Some of the state's largest facilities earn about \$340 per youth per day, with the funds coming from government agencies, local and state school districts, Medicaid and other programs.

PLACEMENTS FOR ILLINOIS WARDS AT YEAR'S END

■ Residential treatment centers ■ Specialized foster homes ■ Group homes
 ■ Traditional foster homes ■ Kinship foster homes



days kids go on the run from each center, or are sent to jail or psychiatric hospitals.

And DCFS does little to analyze or act on Unusual Incident Reports that facilities are required to submit whenever a ward is hurt or put in harm's way while in their care.

"If you were getting these reports as a parent, you would be up in arms about the facility," said Cook County Public Guardian Robert Harris, whose office has filed court motions to remove individual wards from residential facilities for their safety.

DCFS acting Director Bobbie Gregg said she was outraged and disappointed to hear the Tribune's findings, adding that she was not aware youths were repeatedly sent back to facilities plagued by assaults, sexual abuse and runaways.

"What you're describing is not something that has been brought to my attention, but it is something that ... we should look into," Gregg said. "Whenever any of our children are harmed in our custody, I'm not satisfied."

The Tribune provided DCFS with its findings before interviewing Gregg. At that interview she said she had begun exploring ways to safeguard wards in residential treatment. Although the agency has 16 employees monitoring such facilities, Gregg said she plans to require more stringent oversight of the Unusual Incident Reports sent by the centers.

Acknowledging that the department does not have the ability to analyze those reports to quickly spot patterns, she said she was planning data upgrades.

"I, too, am frustrated that it takes us too long to get data to be able to make meaningful changes in our system," she said. "Like so many things, it's a question of resources."

She said she has set a goal of moving 165 wards from residential facilities to fos-

ter homes by Jan. 31. “Children should be raised in homes with families and not in institutional centers,” she said.

Hope, then pain

As Michele Gans struggled to get help for her daughter, Emma, she saw residential treatment as her last, best chance.

The 16-year-old suffered from mental illness and hadn’t been getting effective therapy from the clinics and programs in their western Illinois community.

Fifteen months later, Gans abruptly removed her daughter from Rock River Academy in 2013 after a beating by peers left Emma with a broken facial bone, two black eyes and chunks of hair torn from her head, according to Gans and facility reports.

Gans, a psychiatric nurse, said she arrived at the Rockford hospital to find her daughter “covered by cuts and contusions. She was bleeding profusely.”

Emma had been improving at Rock River — she had a good therapist and adapted to the institution’s routines, Gans said. But the girl’s progress unraveled in a flurry of violence that shows how even children who benefit from residential care can still end up hurt and terrified inside facilities where the balance of power sometimes rests with the most aggressive youths.

Melees, fistfights and even stabbings are common in residential facilities across the state, the Tribune found, with chairs, pens and shards of glass used as weapons. The violence is fueled by an environment where youths say they are picked on and thrashed unless they earn respect by fighting back.

“The main thing they’d always stated when we first got there was that it’s a safe place and there’s enough staff to keep us safe from harm. But they couldn’t provide protection for me when I needed it,” said Krystle Gall, 23, who says she still has back pain from a severe beating by peers at Rock River.

Sometimes staff at these facilities reacted casually to the violence or even encouraged it, records show.

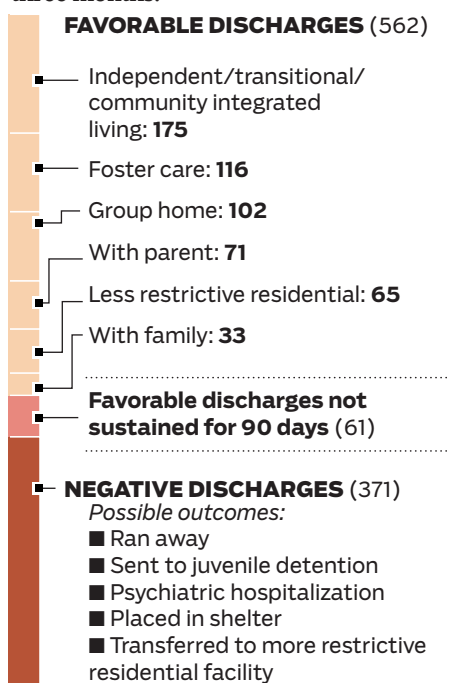
In 2012, a worker at Lutherbrook Child and Adolescent Center in Addison found a 17-year-old boy allegedly sodomizing a 15-year-old boy in a weight room, but the employee waited until the next day to notify supervisors, according to police records. A second staff member then falsely told residents that the younger boy was the perpetrator and they “should handle this matter themselves.”

Police reports state that a group of residents chased the 15-year-old outside, beat him to the ground and kicked him for several minutes until a neighbor with a knife rescued him. Lutherbrook declined to comment on that incident.

At Rock River, Emma’s problems started in May 2013 when a roommate began behaving in a sexually inappropriate way, facility records show. After Emma sought help from staff, other residents threatened her, and Emma was moved to a different suite of rooms in the red brick facility.

Negative outcomes for many youths

Illinois residential treatment facilities should help youths “step down” to less restrictive group or foster homes. But DCFS data on 994 wards discharged from facilities in 2012 — the most recent data available — show only about half had sustained a favorable discharge for three months:



SOURCE: DCFS

TRIBUNE



ANTHONY SOUFFLE/CHICAGO TRIBUNE

'SHE WAS SCARED TO DEATH TO RETURN': Michele Gans' daughter Emma, left, was attacked at Rock River Academy. The beating by peers left Emma with a broken facial bone and chunks of hair torn from her head. Gans brought her daughter home to western Illinois.

As Emma cleaned her new room with a bleach wipe, three of her suite mates confronted her. They said: "Why don't you leave and move back to Suite 5!" according to a report the facility sent DCFS.

One of those girls, then-16-year-old Ashley Phillips, grabbed some of Emma's clothes and threw them at her, saying, "Let me help you pack." When Emma stuffed a bleach wipe in Phillips' mouth, the three girls began kicking and punching Emma, according to the facility's report.

Two staff members were in the suite, but their calls for help were not immediately heeded because other facility workers were occupied with emergencies elsewhere, records show.

"Code was called several times before additional staff arrived due to other crises," said the facility report to DCFS. "During the melee, (Emma) fell to the floor and (the others) continued to punch, kick and pull her hair."

The girls "managed to pull great plugs of hair out," the report said.

"We started beating Emma. The staff let us fight," Phillips recalled in an interview with the Tribune. By the time help came, Phillips said, "she's leaking blood."

In the aftermath, as Gans was considering whether to withdraw Emma from Rock River, an employee took her aside and said the facility didn't have enough staff to ensure her daughter's protection, Gans recalled.

Gans brought her daughter home. There the girl has struggled.

"It was really quite painful to take her away," Gans said. "The community-based treatment is not working as well. But she was scared to death to return to Rock River."

The brutality and turbulence inside facilities are one reason residents flee — often for just a few hours, but sometimes for weeks and months.

Among the 1,284 individual wards who were gone from facilities for at least a day last year, 42 are still missing, DCFS officials say. They include several believed to be victims of sex trafficking in states as far away as Florida. One 16-year-old ward who has been gone from Indian Oaks since January was traced by police to an online escort service in the Wisconsin Dells.



ANTHONY SOUFFLE/CHICAGO TRIBUNE

AWOL: In September, a youth attempted to run away from the 40-bed Kemmerer Village residential treatment center in Assumption, Ill. She bolted into the cornfields outside the facility. Staff eventually found her and talked her into returning.

While experts say there are many reasons youths run from placements, DCFS statistics from 2011, the most recent available, show the runaway rate at residential centers was more than double that of foster homes.

Behind the statistics are grievous, even deadly, consequences for youths and surrounding communities.

In October, two 17-year-old state wards ran from the UCAN residential facility on Chicago's Northwest Side and led police on a chase in a stolen Toyota Camry before crashing the car into a concrete barrier in the Little Village neighborhood, killing one of the teens, Darnell Williams Jr., and seriously injuring the other.

A 10-year-old boy named B.J. went AWOL from Lawrence Hall at least three dozen times during a two-month period in 2011, sometimes for days, and acknowledged being a lookout for the Latin Kings street gang. One Lawrence Hall report to DCFS said staffers followed B.J. after he left the Northwest Side center "until the neighborhood began to be unsafe."

Then the 95-pound boy was on his own.

Illinois' crisis

Administrators and workers at several prominent residential centers told the Tribune that as many as a third of the children in their care should never have been admitted in the first place.

Among them are growing numbers of teens too volatile for the facilities to handle effectively — including those with violent criminal records and severe behavior disorders who can dominate an institution, disrupt treatment and threaten the safety of everyone else inside.

But they also talked about higher-functioning children who could thrive in a family-type setting but wound up in residential centers because Illinois does not have enough specialized foster homes equipped to care for kids with behavioral and mental health challenges.

"Some of our children who are ready to go, there is no place for them," said Mike

Chavers, Indian Oaks' executive director. "The reality is, most kids don't need residential treatment centers. They would be better off in foster homes with support."

Serving a child in specialized foster care also costs taxpayers less than half of the \$340-per-day rate that DCFS and Medicaid pay the state's biggest residential centers. But unlike many of their counterparts from New Jersey to Indiana, Illinois officials have been slow to build a robust network of community mental health programs for disadvantaged youths.

"You have a shortage of services, and we don't have a good solution for that problem," DCFS Associate Deputy Director Kristine Herman told the Tribune. "We are relying on residential as placement. But residential is not as viable as a family. It is a place where kids go to live that is not truly beneficial to them."

With few other options in Illinois, the percentage of young state wards whose first placement was a residential facility or group home rose steadily from 13 percent in 2006 to 21 percent in 2012, before dropping to 18 percent last year, according to DCFS data submitted this year to a federal court monitor.

The increase in these institutional placements "is not for therapeutic reasons," noted an analysis this year by the Children and Family Research Center at the University of Illinois at Urbana-Champaign.

Few people in state government or running the centers argue that the system is working. But efforts to change it have been piecemeal and slow.

Under Gov. Pat Quinn, officials launched a yearslong multi-agency effort to transform the state's Medicaid-funded health care system in ways that could reduce dependence on residential care. Separately, a federally funded pilot program is providing home-based services to troubled youths and their families in four midstate counties. Both efforts are years away from seeing results, officials said.

Meanwhile, Illinois' residential facilities have seen only one increase — of 2 percent — to their state reimbursement rates in the last seven years, although the costs of serving kids, maintaining properties and paying for employee health care have risen steadily.

"Every little bit helps, and we certainly appreciate it," said Mike Havera, executive director of Kemmerer Village in downstate Assumption. Still, "if the cavalry are coming, I don't see anyone on the horizon."

At least six of Illinois' high-profile residential centers have closed in recent years amid revenue shortfalls and outcries from community members after residents fled the facilities and committed violent or criminal acts. Those losses have exacerbated the shortage of placements for mentally troubled youths.

Since 2011, DCFS has placed 16 residential facilities and group homes on brief "intake holds" that stopped placements of wards at the centers because of problems ranging from quality of care to issues with timely reporting and staffing. But in only one case did the hold last as long as a year. Most — including a 2012 hold on Lawrence Hall and a self-imposed hold by Rock River this summer — were lifted after a few months.

Consider the 15-bed all-female south suburban Sadie Waterford Manor, which had nearly 2,000 police service calls last year, including 994 runaway reports. The facility was shut for two months this summer — not by DCFS but by Crestwood fire officials, who declared the premises unsafe for occupancy. After repairs including a \$40,000 sprinkler system were completed, DCFS sent in more wards.

Since then, two Sadie Waterford runaways, ages 14 and 15, reported being sexually assaulted outside the facility in separate incidents, according to facility officials and Cook County Sheriff Tom Dart, whose deputies helped Crestwood police with service calls from the center.

"We cannot continue to experiment with these kids and say, 'Let's just keep do-

ing things that we know are not working,' ” Dart told the Tribune.

Lester Harris, CEO at Sadie Waterford, said the facility offered close supervision and engaging activities to the girls who stayed there. “And yet if they choose to go, they’re going,” he said.

Like some other states, Illinois has laws allowing residential centers to secure their exit doors to prevent escapes by youths whose behavior creates “an established pattern of foreseeable serious risk of bodily harm to self or others.” But officials in Illinois have balked at authorizing the locks, saying it could violate the human rights of children placed in state protective custody through no fault of their own.

Locking the exit doors also isn’t a comprehensive solution to problems at facilities where residents don’t feel safe or want to stay. The Tribune found some unlocked Illinois facilities had few runaways even though they serve youths with severe behavior disorders.

Still, several facility administrators said it’s time for state officials to consider more protective measures — from physical barriers to higher staffing levels and better training.

“If you think about the facility as a parent, well, we expect parents to protect children from harmful behavior and not let them run away,” said Sister Catherine Ryan, who runs the Maryville Academy network of youth treatment centers. But the power to lock an exit door can be abused, she said, “so it has to be clear which children, and under what circumstances.”

Overwhelmed

Illinois’ system for protecting and treating juvenile wards is so frayed that it can overwhelm even centers with experienced and dedicated leadership.

The Rice Child + Family Center in Evanston nearly closed seven years ago because of alarming rates of runaways and resident-on-staff assaults.

“The kids were not safe. Our staff was struggling,” said Nancy Ronquillo, president and CEO of Children’s Home + Aid, the \$65 million-a-year nonprofit that runs the facility as well as several other Chicago-area youth programs. “We had to decide whether we were going to give our 30-day notice to DCFS.”

Instead, Rice eliminated its troubled unit for older teenage girls and focused on a much younger population, offering therapies from yoga and drumming to complex-treatments focused on the youths’ underlying trauma. The average age of a facility resident is now 11 1/2.

Yet even with children who are less physically challenging to staff, the 45-bed facility still had 162 runaway incidents last year, a number that has climbed steadily from 31 in 2010, according to police and facility records.

Most of those children were returned within 24 hours, Ronquillo said, but she acknowledged that Rice’s persistent runaways underscore a broader problem.

By the time a juvenile ward gets to a residential center, he or she has usually bounced through as many as 10 foster homes and often suffered further mistreatment and abuse. Ronquillo said juvenile wards should be diagnosed much earlier and placed in residential centers for shorter stints of about six months while authorities work to identify and support a suitable foster home, ideally with a relative.

“The system around the kids is dysfunctional,” agreed Mary Shahbazian, who runs the Allendale Association center in Lake Villa.

Even at Allendale’s picturesque campus of cottages spread across 120 acres by a lake, the starting-level \$12-per-hour “direct care” jobs are dangerous and exhausting. Staff burnout and churn can demoralize residents whose only stable relationship may be with a favorite employee, Tribune interviews show.

While Allendale should have 120 frontline workers, “at any given time, we have about 20 open positions,” Shahbazian said. About a third of these employees quit

within 12 months, and nearly half said in exit interviews that the pay was too low and the work too demanding.

In its desperation to find workers, Allendale took on several who turned out to be “bad actors,” Shahbazian acknowledged.

A facility mental health specialist was charged last year with aggravated battery after he allegedly slammed an 11-year-old boy’s face onto a school desk — breaking off two of his front teeth — because the youth didn’t answer a math question. After the fired worker agreed to pay the boy’s medical bills, Lake County prosecutors dropped the charges with the family’s consent.

Also last year, Allendale fired three staff members because they made inappropriate contact with residents in off hours, Shahbazian said. The year before, records show, the facility notified police that several female residents were planning to go AWOL with the help of a 30-year-old former employee who was allegedly luring them into prostitution.

“When no one was looking, he kissed me, grabbed me and said, ‘You’re mine.’ When I was there, I felt helpless.”

—Keaira Sanders, now 19

In that July 2012 incident, four teens left the campus — two were 15, the other two 17. A day later, Chicago police found one of the older girls; she had been sexually assaulted in the city. The other three were “most likely prostituting” themselves in Chicago, a DCFS caseworker told Lake Villa police a month later.

One of the 15-year-olds was picked up by police in Tennessee two months after she vanished, according to a police report. The whereabouts of the other two remain unclear.

Keaira Sanders, a former Allendale resident who arrived with a history of being sexually abused, was targeted in 2012 by a male employee who took her to the laundry room and molested her, according to DCFS and police reports and Sanders’ account.

“When no one was looking, he kissed me, grabbed me and said, ‘You’re mine,’ ” said Sanders, now 19. “When I was there, I felt helpless.”

There were no police charges, but the employee left the facility amid this case and a separate allegation of molestation.

Even one of Allendale’s most trusted workers turned out to be a predator. In July, veteran facility program director Kelvin Perry, 51, was imprisoned for sexually assaulting a 16-year-old girl who had been under his supervision.

“One day he told me to get the towels from the kitchen and take them to the laundry room, and that’s where he made his move. He got me against the wall,” said victim Treona Thomas, who had been brought into DCFS custody because she endured childhood sexual abuse and was placed at Allendale in 2012.

As program director, Perry stood out as someone she could talk to about her painful past, Thomas told the Tribune. “He was somebody I trusted in and confided in.”

She did not make a complaint and even came to consider him a boyfriend. The sexual encounters continued at the facility and then after she was discharged, according to court records and her account.

“I felt like I should tell somebody, but at the same time I felt like they all knew him for 15 years. I was just some girl,” Thomas said. “Now I realize he took advantage of me.”