



# ST. MICHAEL'S SCHOOL & NURSERY

WILMINGTON, DELAWARE

**MISSION:** *To provide high-quality childcare, provider and family training, and early childhood advocacy for Wilmington's children and families.*

**GRANTS:**     \$5,000     MAY 1998  
                  \$70,300    JANUARY 1999  
                  \$212,972   NOVEMBER 2000

Since it opened in 1890, St. Michael's Day Nursery has been a safe and nurturing place for parents to leave their young children – providing hot meals, loving childcare and basic moral and social lessons to prepare children for more formal grade school learning. But in 1988 – almost 100 years after the school's founding – Executive Director Helen C. Riley noticed a sea change in the world of early childhood education.

“We were confronted with major changes because of new state regulations and greater public attention to the quality of early childcare,” says Riley. “We knew that St. Michael's had the potential to meet new standards, but that we would have to begin thinking more strategically and focus on the operation of the business as well as the education and care of our children. To do that, we would have to change people's attitudes about the childcare profession.”

During the 1980s, few members of the Nursery's staff had any college education. Many were

long-time employees who showed great love and commitment to the children they served, but were not certified “educators.” The staff itself was fairly small, with a director, receptionist and a part-time bookkeeper.

The board of St. Michael's was very much involved with the details of running the Nursery and had done a fine job of keeping the organization going steadily for many years. Because of its solid reputation, St. Michael's was drawing more and more middle-class families who needed childcare while both parents worked. The organization was turning a small profit, but a careful look at the numbers caused it to question whether it was serving the needs of those families in the surrounding neighborhood who could not afford private childcare. Enrollment statistics had changed from previous decades, when all the children served were African-American and half received tuition assistance. In the '80s, St. Michael's was serving 165 children (half white and half African-American), 10 of whom received state assistance

and 15 of whom received a 25 percent tuition break from St. Michael's.

For the first time, St. Michael's also was experiencing the effects of serious competition, as new childcare programs sprouted and vied for the same resources and referrals St. Michael's



St. Michael's students are introduced to the world of books and reading.

previously had accessed. The board of directors was divided about what they wanted the organization to be, but they recognized that no matter which way they steered St. Michael's, they were going to need more money. Serving a broader socioeconomic base of families would require more tuition assistance. And meeting the demand for more qualified caregivers, updated facilities (the current building had some rooms that had not been painted in 30 years), and better student-teacher ratios would require money too.

"Our 100-year anniversary was approaching," says Riley, "and we thought it might be a prime opportunity for fundraising. We just weren't sure how to get organized."

In preparation for the centennial, St. Michael's hired a consultant to raise funds that would enable it to increase the amount of tuition assistance available to the community and increase the number of certified educators in its faculty. The board set a goal of raising \$300,000. They raised \$308,000.

"The board members started to become believers,"

says Riley. "They realized that with focused attention on our goals, we could reinvigorate St. Michael's."

The board, which was becoming more diversified and involved, decided to balance financial soundness with the original mission of the Nursery – to serve the surrounding community. St. Michael's increased the number of scholarships it was offering so that 45 to 50 percent of the children who attended received some amount of tuition assistance (at this writing, 70 percent of the students receive assistance).

One long-time board member, Muff Scott (Riley calls her "The Board Builder"), began encouraging the involvement of younger people on the St. Michael's board. This group included Ann Wick, who became a critical player.

"This infusion of ideas and talent created a new energy and hopefulness at St. Michael's," says Riley.

With the help of the Jessie Ball duPont Fund, Riley attended an institute for nonprofit executives conducted by the North Carolina-based Center for Creative Leadership. She was the only representative from an early childhood center.

"That's when I started to focus on real change for St. Michael's," says Riley. "I learned to ask new questions, and I learned a new vocabulary for envisioning and creating change."

When Riley started communicating her vision for

St. Michael's to the rejuvenated board, she found that using more professional, "nobler" language about the field of early childhood education appealed to them. She felt empowered by her ability to talk with them as people who understood the industry, and their confidence in her leadership grew. However, the board did not yet feel ownership of the new ideas and vision. Riley and Wick went to the duPont Fund to ask for help turning the board into a team where everyone could become more aware of the need and potential for changing the way St. Michael's did business.

The duPont Fund awarded St. Michael's \$5,000 in 1998 to conduct an organizational audit. St. Michael's hired an outside consultant to interview staff and board members, parents, other childcare directors, representatives of local media, businesses and corporations, state officials and experts at the University of Delaware. The audit highlighted the organizational assets of St. Michael's, such as its strong reputation for providing quality childcare, its downtown location, and its strong and committed board and executive director.

The audit also identified the complexities that challenged St. Michael's and that, if left unaddressed, could inhibit organizational change and undermine peak performance. These factors included the financial strain that resulted from a dual commitment to quality and diversity, the small and limited administrative staff, the difficulty of finding and retaining quality childcare faculty, a limited fundraising base, and limited

public understanding of the economics of quality early care and education.

Ultimately, the audit called St. Michael's a "learning organization," one that looks for ways to improve and refine its operations, with longevity and quality as its goals. Because of its strengths, resources and committed leadership, the audit reported:

*St. Michael's – unlike many nonprofit organizations – can be almost any organization it wants. It could become a Family Resource Center, a training center for child care workers, a wrap-around care facility, or a laboratory school...The challenge before St. Michael's involves much more than selecting a course of action from a laundry list of change options. Rather, the organization and its Board must engage in the process of 'identity work'...When all is said and done, identity work demands honest and open conversation and ample time for reflection and discernment. Organizations must consider who they are before becoming who they want to be.*

Along with addressing a list of immediate changes generated by the audit, St. Michael's agreed that it needed to clarify its identity and create a strategic plan for the organization. A newly planned Justice Center on Walnut Street, just blocks from St. Michael's, created a potentially new market for childcare services.

A second duPont Fund grant included \$13,000 for St. Michael's to hire a consultant to begin this

second phase of work. Among the early changes: the Nursery changed its name to St. Michael's School and Nursery.

“School is the place where a community of people come together to learn and teach each other lessons that will ultimately enrich their lives



Executive Director  
Helen Riley (right)  
and consultant  
Linda Boyden  
work to plan the  
school's expansion.

As the board began to probe its role and vision for St. Michael's, Wick explains, it became obvious that “the questions we were asking applied not just to St. Michael's but to all Delaware childcare providers, educators, parents and policy makers concerned about the well-being of infants, toddlers and preschoolers who spend their weekdays away from home. Questions like: How do we retain a first-class faculty and staff in a competitive job market with a very limited budget? How can

and the lives of all those they touch,” says Ann Wick, who has just completed a four-year term as board president. “That's what we want to be.”

we serve the increasing numbers of children who require tuition assistance without burdening families who are not receiving help? How do we convince an aging population and the policy makers they elect that a new commitment of time and resources to children in their early years is essential? As the state's oldest childcare provider, we at St. Michael's hope to begin a community discussion about what we can do for Delaware's youngest citizens.”

After the organizational audit, the board reconfigured its traditional committees into “learning clusters.” These clusters carefully studied the many complex facets of the early education and care industry, including research and trends in brain development and education, government policies and funding, full cost of quality childcare systems, as well as the school's current location in downtown Wilmington.

In addition to clarifying its mission and role in the community, St. Michael's identity work revealed that the organization needed more money and Helen Riley needed more help. Together, board and staff created three new positions: financial director, development director and educational program director.

They also identified a church building for sale adjacent to their existing facility that would be ideal for renovation and program expansion.

The enlarged facility will allow St. Michael's to serve 25 to 30 percent more children. The summer

camp program will be expanded from 20 to 36 children, ages 6 to 8. St. Michael's will formalize its School's Out program to serve 15 to 20 children year-round.

"The entire property will become an early childhood campus on a main thoroughfare in downtown Wilmington," says Wick. "St. Michael's has a proud tradition and longstanding reputation for providing the best. Our new aim is to become the model for early education in Delaware and beyond."

Of course, new staff positions and physical plant changes cost money. The second duPont Fund grant also included \$60,000 in matching funds (St. Michael's raised \$120,000 for the 2:1 match) to begin making changes. Riley used \$7,000 from a duPont Fund technical assistance grant to hire a fundraising consultant, who determined that St. Michael's could undertake a capital campaign for as much as \$3.3 million.

In the fall of 2000, the duPont Fund awarded St. Michael's \$212,972 to support the administrative demands of the school as it began the capital campaign.

"The duPont Fund support was a vote of confidence for us," says Riley. "It said to other foundations and funding sources that St. Michael's was serious about becoming a major voice in early childhood care for Wilmington."

In the spring of 2001 The Longwood Foundation awarded St. Michael's a matching grant of

\$873,000. St. Michael's currently is in the "quiet" phase of the campaign and has reached 73 percent (\$2.5 million) of its goal.

"Ultimately, this is a story of an organization turning 100 years old that valued its past and tradition, but was on hold, a sleeping giant not looking to the future," says Riley. "As the board matured and grew, with the help of good advice and some very fine consultants, they brought that maturity and growth to the process. The changes in the early childhood industry, the rise in recognition of early childhood education as a professional field, the increased need for quality care – all of this presented us with an opportunity to combine our history, reputation and dynamic potential. Once we all shared a better appreciation for the complexities of early education and the critical need for it, we felt an obligation, a responsibility to change and grow for the benefit of so many children and families. When things get hectic around here, these are the lessons I rely on to keep going."

The St. Michael's faculty, staff and directors are well aware of the growing pains and challenges they still face. But with new foundation blocks in place, they look forward to becoming a significant resource for the community. In fact, St. Michael's has just been honored with the Governor's Award for Excellence in Early Education.

*For more information, please contact Helen C. Riley at 302-656-3389.*



# THE MENNINGER FOUNDATION

TOPEKA, KANSAS

**MISSION:** *To conduct research and design interventions that provide state-of-the-art mental health care.*

**GRANTS:**     \$ 24,720    september 1994  
                  \$ 152,000   september 1995  
                  \$ 292,500   september 1997

**M**odern campaigns to name depression as a debilitating and widespread disease have made it a more commonplace topic of discussion. Television commercials and newspaper and radio advertisements encourage people who suffer the symptoms of depression to seek professional help before the disease becomes life-threatening. For those who have the resources to seek professional help, such early intervention and methods can make the difference between a life of daily torment and inertia and a productive life. For those without resources, however, depression can go unnamed and misunderstood, creating a cycle of frustration and self-destruction that can inflict devastation not only on the lives of depressed people, but on the lives of those around them.

Recognizing the need for greater access to quality mental health services and intervention for people without resources, the Menninger Foundation in Topeka approached the Jessie Ball duPont Fund in 1994 for a grant to allow low-income women

to participate in its small group therapy sessions. Its research and treatment branch, the Menninger Clinic, already had an international reputation as a preeminent mental health and psychiatric residential treatment facility. Its Women's Program had been cited by *Mirabella* and *American Health* for excellence in women's mental health in 1993, and the June 1994 issue of *McCall's* recognized Menninger for its "outstanding expertise in depression." However, Menninger had to limit the services it could provide to people from Topeka who were unable to pay for services they need.

But as scientists at Menninger found new success with small group therapy for women suffering from trauma and depression, they wanted to understand better how socioeconomic position affected their clients' treatment and interventions. They also realized that by expanding their research to include women from all socioeconomic levels, they could make the Women's Program more reflective of the demographics and needs of the

Topeka and Shawnee County area where they are located.

With these clearly articulated goals, Menninger sought financial support from the Jessie Ball duPont Fund to offer scholarships and subsidies to women who had traditionally been absent



Dr. Martin Maldonado (holding baby) participates in women's group therapy session.

from its therapy groups and research – those on Medicaid or with an annual gross income of less than \$15,000. A relatively small duPont Fund grant of \$24,720 enabled Menninger to begin its outreach.

Between October 1994 and July 1995, Menninger's Women's Program invited "all women 18 years or older" who had been dealing with sexual abuse, depression (particularly postpartum depression), body image and self-esteem issues, anger and grief to participate in its expressive arts therapy groups to help women "express, explore, and deal with their feelings." The newspaper advertisements noted that "medical cards, insurance and a

sliding-fee scale [could] be used for payment," and that a limited number of scholarships were available.

By October 1995, Menninger reported that the pilot program generated "unprecedented numbers."

"We did not anticipate the overwhelming response to the scholarships offered for low-income and minority women," said Dr. Walter Menninger, Chairman of Menninger Trustees. "We had more women respond than we could accommodate. For the anger group, we had over 80 calls requesting scholarships. We had 40 requests for scholarships for the depression group."

More than half of the 49 participants who qualified for group therapy sessions met the financial need criterion. Twenty-four full scholarships were awarded, with half of those supporting the participation of minority women.

But more than scholarships, the grant opened a window of opportunity for people to begin talking about the need for mental health care in low-income communities. Publicity about the grant led the local chapter of the American Association of University Women to host a reception for the director of the Women's Program to describe the need filled by the pilot program. All of the women's groups in the community were invited to the reception, including all of the African-American groups, Hispanic groups and service organizations.

“As a result of this meeting,” Menninger said, “an ongoing networking community coalition was established.”

The success of the depression therapy groups, in particular, stimulated discussion at the Menninger Clinic about ways to continue penetrating the broader community with the organization’s expertise. For example, some Menninger scientists had been working on the connection between depression in mothers and depression in children.

“We wanted to create a more comprehensive intervention program to understand what psychiatric factors in mothers put babies at risk for future problems, especially in low-income communities,” said Dr. Efrain Bleiberg, senior executive vice president and director of research for Menninger. “It’s not that wealthier families don’t have problems. They do. But they have considerably more support.”

As many as 15 percent of all infants exhibit mental health problems in the first year of life, and that number is significantly higher among disadvantaged populations.

“The early warning signs can go unrecognized,” said Bleiberg, “because parents, community care-givers and even medical professionals too often lack basic information about infant mental health.”

According to Bleiberg, the seeds for child and family research that would stretch across

socioeconomic levels had been germinating at Menninger for quite some time, but the success of the Women’s Program grant encouraged the organization to move forward. In 1995, Menninger applied for and received a \$152,000 grant from the Jessie Ball duPont Fund to start an Early Childhood Intervention Therapy and Counseling pilot program out of its newly formed Child and Family Center. The organization hoped to develop and promote a national model for low-cost early childhood intervention services that could be carried out in community mental health centers. In addition, Menninger hoped to increase awareness of depression and other factors that affect the lives of children in Shawnee County, where 11 percent of all births are to single teens and 22 percent of children receive economic assistance.

Under the direction of Dr. Peter Fonagy and the day-to-day leadership of Dr. Martin Maldonado, the two-year grant allowed Menninger professionals to work directly with families identified and served through Family Service & Guidance Center, a local mental health agency. Menninger staff trained approximately 28 staff members at the Center (including case managers, child and family therapists and intake workers) to begin offering a new range of therapy and assessment services for young children and their families. Together, the Menninger and local professionals offered relationship therapy for parents, cognitive and educational therapy for parents, behavioral therapy for infants and children, and social advocacy assistance to families.

Menninger staff also created an in-home therapy and education program for parents and children in lower socioeconomic groups, particularly to serve families that lacked transportation and those unlikely to attend scheduled sessions. Over the course of the grant, Dr. Maldonado provided in-home consultations and evaluations for 60 children, many of whom had been abused or neglected by their parents. In addition, Dr. Maldonado conducted staff consultations and therapeutic interventions in more than 80 cases at the Maternal Infant Care Project of the Shawnee County Health Department for cases involving infants with behavior and emotional difficulties and mothers with emotional or mental health disorders. Again, such outreach into the community and collaboration with community agencies marked a new way of doing business for Menninger.

The success of that second grant resulted in an even larger grant in 1997: \$292,500 to build a network of community services to provide therapy and counseling to at-risk children and their families. This phase of Menninger's work allowed the organization's staff to include non-referred infants through the development and use of screening tools.

"It allowed us to cast a wider net and to consult with babies who would not be picked up normally," said Bleiberg. "We found there were at least as many problems in the non-referred babies as there were in the referred."

As a result of their work with non-referred cases,

Menninger created two specific interventions for parents. The first, "BabyTalk," enhances the capacity of mothers to connect with their babies by making them more aware of the baby's developmental state and encouraging them to put themselves in the baby's shoes. The second intervention, designed with Healthy Families of Topeka, is called "Prepare." Prepare works with women who are deemed to be at-risk because they are very anxious, have abused substances during pregnancy, are depressed, or are afraid of their baby. Prepare offers parents some resources and strategies for approaching the baby, caring for the baby, and feeling less threatened or anxious about having a baby.

During this most recent three-year grant period, Menninger achieved a number of goals, including:

- ✿ Establishment of a local and regional center for early mental health interventions. Menninger's infant mental health team is sought regularly for evaluation and treatment of infants with emotional and behavioral difficulties by numerous health care agencies, physicians, pediatricians, family physicians and neurologists in Topeka and the region, including other cities in Kansas, Missouri, Nebraska and Oklahoma.
- ✿ Training for key health care staff in local agencies such as Early Head Start, Head Start, Topeka and Shawnee County Health Department, the Breastfeeding Clinic and the Intensive Care Unit at Stormont-Vail

Regional Medical Center, the Maternal Infant Care Program of the Shawnee County Health Department, Topeka Association for Retarded Citizens, Parents as Teachers, Healthy Families Topeka, and the USD 501 Parkdale Preschool Program.

- ✿ Establishment of the Kansas Association for Infant Mental Health (KAIMH) and its educational program. Menninger also has promoted the promulgation of training materials through KAIMH's website ([www.kaimh.org](http://www.kaimh.org)), where a number of slide presentations, papers and a newsletter are disseminated in collaboration with staff from Kansas State University.
- ✿ Development of a database of 160 infants and families, from which Menninger will generate statistical analysis of the symptom patterns that afflict infants, their correlation with stress factors, parent-infant relationships, and their response to treatment.
- ✿ Creation of a screening tool called "Alarm Signs" for emotional/behavioral difficulties in the first year of life – a brief interview that covers difficulties in crying, feeding, sleeping, communication, relatedness and emotional status of the baby, as well as maternal/parental depression, domestic violence and substance abuse in the caregivers. The interview takes about three minutes to administer and is effective in identifying at-risk children and parents.

- ✿ Development of an inventory of infant and parenting problems (ECAP – Early Childhood and Parenting).

- ✿ Publication of numerous articles for use in the field of early childhood intervention, including Dr. Martin Maldonado's book *Models of Clinical Intervention in Infancy and Early Childhood*.

For Menninger, the initial small grant of \$24,720 that allowed the organization to offer its first group therapy scholarships to poor and minority women has blossomed into a new way of serving people with mental disabilities. By reaching out to nontraditional clients in Topeka, Shawnee County and beyond, Menninger's expert staff has been able to make a difference in the lives of children and families who previously had not had access to state-of-the-art psychiatric research and care.

"It's intellectually and scientifically a very important step that has allowed the organization to grow and enhance its skill and expertise," said Bleiberg. "We have grown not only in our ability to do psychiatric assessments of people, but in our capacity to understand ultimately how to help people's lives. We are not just writing about psychiatric syndromes, but we actually are helping people get on a better track, leading to a fuller, healthier, better adjusted life."

*For more information, please contact Ruth Ann Schwart at 800-288-3950.*