



Real Families. Real Problems. Real Help.

ANNUAL REPORT 2009

## Message from the Board Chair



It is with great pleasure that, on behalf of the board, I report to the community the activities for the fiscal year ending March 31, 2009. In this report there are two main topics that are worthy of mention.

The first is the successful breakfast event that took place on September 23, 2008. Vanier and almost 300 guests welcomed Bill Wilkerson to speak to the community about children's mental health issues and why it makes good business sense to take care of these issues early in children's lives. The breakfast event was Vanier's first in a series of annual planned events that, over time, will increase the awareness level of Vanier and Children Mental Health issues to the overall community. It is time to move out of the shadows with these issues and Vanier's community breakfast was a great start in this goal.

In 2009 we also witnessed the turning of a new chapter in relation to Executive Director leadership within Vanier. With sadness we said goodbye to Dr. Barrie Evans who moved on to lead psychological services at the Thames Valley School Board after leading Vanier for the past 18 years. For many of us, Barrie has been the face of Vanier and has provided exceptional leadership to the organization over his many years as the Executive Director. Barrie was appropriately recognized at a retirement party in January that was well attended by community leaders, Vanier's board and staff, and family and friends of Barrie. It was a great evening and the first time many of us had the opportunity to hear Barrie belt out a few tunes. As we moved into a new chapter, we welcomed Willy Van Klooster, as the incoming Executive Director. As a board we have been pleased with the transition that has taken place in this critical role. As Willy begins his journey with Vanier we will certainly hear more from him in the future.

In closing, I want to thank several groups. I am grateful to the Board of Vanier for placing your trust in me to lead the board this past year through so much transition. To Barrie Evans, for the leadership he has given Vanier over these 18 years. To Willy Van Klooster, for the leadership you have shown during your first few months and the leadership you will show as you drive Vanier forward. To Nancy, Joanne, Gary, and Sue for your dedication to Vanier and your thoughtful approach during the leadership transition. To Vanier Leaderful team and staff, for making a difference in children's lives on a daily basis.

Sincerely,

Stephen Bolton,  
Board Chair



## Board of Directors

### Back row, L to R

Willy Van Klooster,  
Executive Director

Stephen Bolton,  
President

Harry Van Bavel,  
Treasurer

Mike Elkassem

Sherry Foran,  
Vice-President

Jenna Weaver

Janice Straub

### Front row, L to R

Anne Kozak

Joanne Reid

Rosemary Craen

### Absent:

Joe Compeau, Secretary

Elise Feightner

Rick Jess

Leigh Vanderloo

## Leadership Team

Willy Van Klooster,  
Executive Director

Joanne Sherin,  
Director of Clinical Services

Nancy Miller,  
Director of Intensive Services

Gary Wood,  
Director of Finance and  
Administration

Barrie Evans,  
Past Executive Director

Glenda Schaefer-Green,  
Early Years

Kim Stevens,  
Training & Education

Debby Timmermans,  
Residence

Evert (Kip) Veenendaal,  
Residence

Louise West,  
Support Services

## Administration

Susan Atchison

Lesley Marriott

Dolly Panth

Nada Turudic

Claudia Urquizu

## Community Mental Health Services

Patricia Cranmer

Leo Desjardins

## Leaderful Team

Wendy Acton, CMHS

Susan Barnes, SCIP

Richard Claes, Residence

Sandy Dobaczewski,  
Family Bridges

Donald Efron, CHMS

Susan Giles, Administration

Judy Jones,  
Day Treatment

Gillian Kerr, Residence

Phil Kirchgessener, IT

John MacKay,  
Crisis & Intake

## Crisis and Intake

Rose Najim

Martha Neeb

Judith Scott

Marion Whitfield

## On-Campus Day Treatment

Karen Boyd

Denise Brackenbury

Tina Gowing

Stephen Holden

Annette Riley

John Timmerman

## Early Years

Carol Dickson

Julia Dunlop

Gillian Hubick

Barbara Jones Warrick

Terri Lane

Kelly Leitch

Dana Libby

Janine Owen

Jill Pariser

Devonne Strachan

## Drivers

Robert Boisvert

David Jamieson

Sandy Northup

## HOPE (Parent Mentoring Program)

Bonnie Montminy

## Intensive Family Service

Carolyn Averill

Stephen Averill

Diana Chupa

Brenda Forbes Granger

Sara Hall-Sears

Diana Tontodonati-MacKay

## Medical

Beverley Irwin

## Occupational Therapy

Diana Lloyd

## Psychiatry

Dr. Sanaa Helmi

## Psychology

Dr. Jeffrey Carter

Dr. Esther Goldberg

Ericka Mirc

Dr. Carla Smith

## Residential Services

Sascha Ackland

Jared Barr

Tim Brown

Robyn Driscoll

Sandra Hamilton

Sandra Hemming

Tara Hines

Karen Kirkby

Jordan MacKay

Brian McDonagh

Mike Newton

Lindsay Norton

Laura O'Brien-Fagnoli

Angie Pearson

Robin Peter

Sandra Pontes

Catherine Ramey

Janet Rayner Valdron

Kara Rayner  
Mary Saltern  
William Scullion  
Diana Serezo  
Theresa Stock  
Robin Thorel  
Rachel Wathy  
Keith Wilson

#### **Relief Staff**

Janet Ackland  
Ivana Anderson  
Nic Baron  
Candace Bonduro  
Marshal Burnham  
Deena Cairns  
Kristy Carignan  
Jill Chromczak  
Krystle Cooney

Brian Coulbeck  
Wendy Csinos  
Doris Diver  
Amanda Down  
Sarah Earnshaw  
Anthony Farrugia  
Nicole Gardin  
Kara Gavigan  
Jacklyn Hinton  
Inga Langlois  
Denise Laprise  
Arthur Lawton  
Marcy LeDuc  
Melissa Masciotra  
Ron Moore  
Mary Mungar  
Tina Papegeorgiou  
Vera Ramos  
Douglas Rayner

Jennifer Skeggs  
Andrew Smaldon  
Melanie Studholme  
Amanda Walden  
Tara Wilson  
Lisa Wolsey  
Jacklyn Wood  
Farahnaz Zarrintaj  
Reanne Zrini

#### **SCIP**

Bonnie Coulter  
Kim Rodrigues  
Dina Sakellis

#### **Students/Interns**

Jennifer Anderson  
Faviola Arriaza  
Sylvia Domanski

Pam Eaton  
Dana Glass  
Kristine Johnson  
Stephanie Kuiak  
Jennifer Landry  
Jessica Serruys  
Tricia Malyk  
Leah Montoux  
Nadia Nesson  
Lindsey McGuire  
Shannon Rooks  
Chris Siegel  
Jean Sommerdyk  
Rhea Tessel  
Ryan Tileman

#### **Support Services**

Mahadeo Bhagwandeem  
Louisa Englehart

Doris Lewando  
Jimmy Mahabir  
Matthew Sabourin  
Cathy Tyler-Smith  
Barbara Villani

#### **W. D. Sutton Teachers**

Tim Coombs  
Andrea Draper  
Barbara Hoyer  
Christel Mikelic  
Wendy Olson  
Kandee Peckham  
Matt Sharrard

## New Case Management System

iCase went live at Vanier on May 4, 2009. Jeff Carter and Phil Kirchgessner began work in earnest on iCase in the spring of 2008.

At the time, we were primarily focussed on creating a new system for storage and retrieval of client data that would reflect the way we did business at Vanier. Reporting to our stakeholders, funders and community partners easily was our main goal. We have achieved this objective with the new data structure and we look forward to making iCase a component of our IT strategy of integration of technologies in the service of better care for our clients, better information for our stakeholders, funders and community partners and better operations for all of our staff.

“The staff at Vanier are so non-judgmental. I felt that they accepted my child and our whole family and were there to help, not find fault.”



## Breakfast Event

On September 23, 2008 Vanier held its first Breakfast Event at the Four Points Sheraton. We were delighted to have Bill Wilkerson as our featured guest speaker. Mr. Wilkerson is the CEO of the Global Business and Economic Roundtable on Addiction and Mental Health. He also serves as the General Chairman of the US/Canada Forum on Mental Health & Productivity.

Mr. Wilkerson particularly focused on strategies to promote and protect the mental health of the Canadian workforce, which is linked to family and children's mental health concerns. The event was attended by 290 people and the funds (\$10,000.00) raised have been used to support the "Focused Family Therapy & Clinical Internship Program" at Vanier. Vanier anticipates hosting another successful Breakfast Event on September 30, 2009. Dr. Fraser Mustard will be our guest speaker.

## Krista Sepp Memorial Awards

The Krista Sepp Memorial Awards were established in 1991 to honour the memory of Krista Sepp, who lost her life on February 3 1989, while performing her duties as a Child and Youth Counsellor. Each year, the Krista Sepp Memorial Awards are held to recognize the high quality work and dedication of Child and Youth Counsellors and Workers from across Ontario.

This year, Vanier nominated two individuals, Annette Riley for the Mentoring Award, which honours the ongoing contributions of a direct service staff who has been in the CYC/CYW field for more than six years, and Robin Thorel for the Horizon Award, which recognized the promising work of a direct service staff who has been in the CYC/CYW field for less than six years.

Robin Thorel was the recipient of the Provincial Horizon Award. 22 Vanier staff and family members helped celebrate with Annette and Robin at the Krista Sepp Memorial Award Celebration Luncheon in Richmond Hill on May 1, 2009. Robin is the first Vanier CYC from the residential program to win this prestigious award.



Annette Riley (center)  
nominated for the  
Mentoring Award

## New Website

This year Vanier embarked on a mission of re-creating the Vanier website. A committee comprised of staff members Sue Giles, Phil Kirchgessner, Lesley Marriott, Nancy Miller and Joanne Sherin collaborated with The Lashbrook Group to create a product that is informative and user-friendly

**The switch was flipped on May 6**

**Check it out at [www.vanier.com](http://www.vanier.com)**

**We welcome your comments!**



Robin Thorel winner of the  
Provincial Horizon Award

# From Our Programs

## HOPE

Project HOPE – Helping Other Parents Excel - began in 2000 as the first program of its kind in Ontario. It is run for parents, by parents, and its goal is to empower parents who are dealing with challenging behaviour in their children through one to one parent mentoring, information sharing, and advocacy on behalf of children's mental health. Thanks to the generosity of the May Court Club of London, HOPE continues to support parents and children, promote positive parenting and raise awareness of children's mental health issues in London and area through our affiliation with school boards, provincial advocacy groups, and other parent groups.

### Highlights for 2008/2009:

- HOPE continued to support parents through one to one mentor support, crisis support, and by helping them cope with the difficulties and isolation of raising a high needs child
- HOPE mentors assisted parents in preparing for and attending meetings, understanding their children's rights, and educating themselves regarding their child's mental health challenges and effective parenting approaches
- Parent mentors worked with families to identify resources and services (educational, health, social) for their children and to learn how to be effective advocates for their children's needs
- Throughout this school year, HOPE has held a series of group meetings at Montcalm Secondary School to help ensure high risk students remain in school
- As members of Parents for Children's Mental Health, HOPE mentors collaborated in raising awareness of provincial funding shortfalls through television, radio and newspaper interviews focusing on their personal stories raising children with mental health challenges

## School Community Intervention Partnership (SCIP)

The School Community Intervention Partnership (SCIP) is a collaborative children's mental health program committed to an effective early response to elementary school children who present with externalizing behaviour problems as identified by their school teams. SCIP's interventions/treatments reflect approaches that are evidenced based, multi-disciplinary, and attentive to diversity and collaboration. SCIP's services are delivered in the least restrictive setting (home, school, community) and in partnership with schools, families, and community agencies/services.

### Highlights for 2008/2009:

- A significant decrease in externalizing difficulties at home, school, and in the community was found post intervention by pre/post CAFAS score differences
- An increase in parenting skills and parenting competency was found post Triple P implementation; 100% of parents felt the group helped them deal more effectively with their child/teens behaviour
- 100% of parents and 100% of teachers who completed satisfaction measures at client case closure were satisfied with the SCIP Program (score of at least 5 or greater out of 7)
- SCIP received 81 new referrals this school year and provided service to 142 families



## Community Mental Health Services

The Community Mental Health team provides a range of prevention and time limited, goal focused therapy services to London and Middlesex families.

### Highlights for 2008/2009:

- Service targets - 623 registered clients served, 369 non-registered clients served in their schools for a total of 992 clients served.
- Another successful year for the clinical training program for interns & students
- The RAPP-TAPP-C program from federal funds launched November 2008 with the target population being families with children under 12 who are coming to the attention of fire and police authorities.
- Clinical outcomes – programs gathering CAFAS scores are intensive family services, focused family therapy and the Francophone services and the outcome scores show improvement in over 80% of families

## The Early Years Team

The Early Years Team provides services to young children ages 0 to 6 and their families who may be experiencing serious difficulties including; attachment disorders, anxiety, emotion regulation issues, school failure adaptation, sleep issues, poor peer relationships, anxiety and uncontrolled aggression. The Early Years team provides comprehensive clinical assessments, multidisciplinary consultation, family therapy, parent-child therapy, in-home parent support, a day treatment school program for young children, psychological assessment, psychiatric consultation and assessment, parenting & social skills groups, public education workshops, occupational consultation, speech and language consultation, and case management. Services are provided in the environment best suited to each family; at Vanier, in the home, the child's school or in the community including London-Middlesex, Sarnia-Lambton and Elgin and Oxford counties.

### Highlights for 2008/2009:

- Continuation of the Early Intervention Program (EIP) for another year.
- Reduction of the waitlist from 9 months to 4 1/2 months.
- Development of new community relationships with First Nations communities in Middlesex County. Early Years staff provided specific training to staff for the prevention of child abuse and presented on the topic of woman abuse at the RCMP sponsored First Nations Family Violence Conference in March 2009.

## Residential Treatment Services

We provide a home-like environment for children with serious and complex mental health challenges. We work closely with families to build on their strengths and to develop strategies to support the child to be successful beyond residence. Children, age 7-14, have access to 18 beds across 2 residences, as well as specialized classrooms, psychology, psychiatry, family therapy, and group therapy.

### Highlights for 2008/2009:

- Parents are involved in all aspects of residential life and making decisions about their child's treatment program
- More than 65 children and their families received service in the residential program in the last year
- Assessments of the children at the time of their admission and again at the time of their discharge show a 25 to 40% improvement

"I knew there was something wrong. We went to all kinds of appointments, but it wasn't until we got to Vanier that my son was diagnosed. We're finally back on track."



## Family Bridges Program

The Family Bridges Program is an innovative treatment foster program designed to support children and youth whose parents are unable to have them at home due to their serious and complex emotional and behavioral problems.

### Highlights for 2008/2009:

- No Physical Restraints required since March 2008 to current date (May 2009);
- Consistently being client centered;
- Consistent success with community integration, specifically relating to community schools, as our clients have not been in community placements for many years.



## On Campus Day Treatment Program

The staff of the On Campus Program work very hard to help children develop skills in the area of self regulation, empathy, school readiness, and relationship building. This is done through the minute by minute teachable moments that occur in class as well as through social skill training, compliment circles, and individual time spent 1:1. Our goal is to help clients redefine school to be an enjoyable, safe and rewarding environment.

### Highlights for 2008/2009:

- Our school wide activities that have included parent teacher BBQ, Snowfest day ( without snow!), drumming presentations, Remembrance day assembly, skating dates, Spring breakfast and PJ day, play day and graduation party.
- Opportunities for children in the school to be exposed to diverse cultures to promote inclusively and tolerance. These have included not only an International Pot luck but also Pen pal to Africa program that has been highly successful.

## Children and Youth Crisis Intake (CIT)

The Crisis and Intake team reduces stress and confusion while accessing Child and Youth Mental Health Services. Telephone crisis intervention is available 24 hour seven days a week for youth and their parents /guardians living in the London and Middlesex counties. CIT also provides a single point of intake service for all non-residential programs (including day and overnight respite) located at Vanier, Craigwood Youth Services and Western Area Youth Services as well as support while waiting for Services.

### Highlights for 2008/2009:

- Call volumes have been fairly consistent over the past five years (approx. 4000 calls per year). This year 4700 calls were recorded.
- We have managed to manipulate our resources so that two workers are sharing a full time CIT position as well as a full time RAP position. This arrangement has been key to a successful new initiative for children under 12 who are having trouble with the law including fire setting.
  - We have engaged the Spanish Community through outreach and are beginning to host a Spanish Parent Group
  - We received recognition from LHSC for the value of a group we co run with them which creates crisis plans and identifies supports for children and youth being discharged from inpatient mental health services at the hospital.
  - 34 per cent of 234 responders to the satisfaction questionnaire agree that they would have used the Emergency Room if CIT was not available.



# Vanier Values

## 1. All hands on deck!

We value a work ethic where there is a willingness for each person to do his/her part, share the load, contribute to teamwork and not expect that others will do the work. We expect everyone to be a leader and a good role model in carrying their own load.

## 2. It's not about you!

When we have a different viewpoint from others we will try to resolve conflicts by focusing on the issues not on the person. We will strive not to be critical, putting down or make personal comments. Instead we will strive to be objective and in turn, we expect that others will be receptive. When we give performance feedback, we will try to make it specific and constructive. We will develop a culture of "blame free debriefing"

## 3. Laugh, play, grow!

It's about having a sense of fun, humor and playfulness in our work! We will strive to have fun together and enjoy our work. We do not laugh at others but with others..

## 4. Don't judge a book by its cover!

We believe that there's much more to a person than their appearance and we do not judge people by skin color, ethnicity, gender or other superficial characteristics. We expect the best in people not the worst.

## 5. Look after yourself, look after others and look after this place!

We recognize that we are at risk of burning out because of the stressful nature of our work. In order to prevent this, we must practice self-care on a regular basis; we must look out for each other and take some responsibility for caring for the environment in which we work.

## 6. Sticks and Stones and Words hurt me!

We value assertiveness in people but not aggressiveness. There are many forms of aggression other than physical. We discourage gossip and unfounded rumor. We understand that words can be hurtful.

## 7. There's no "U" in win; no "I" in team!

We are more effective if we work as a team. If we help others to do their work, others will do the same for us when the time comes. We all like to receive recognition for a job well done. A quick word of praise or thanks for a colleague goes a long way. Coming to work with a positive attitude helps us to do our work better and helps our colleagues. Be a member of the 'dream team' and not the 'scream team'! We will all stick together in times of stress and that it's a case of "one for all and all for one."

## 8. Being the best we can be!

We strive to select the best and to continue to grow and develop our staff. We recognize and encourage high performance. We celebrate success and achievement.

## 9. Get Real!

Sometimes others have unrealistic expectations of us and we also have unrealistic expectations of ourselves. We need to realize that we can't do it all; we can't be all things to all people. We can't be a Jack/Jill of all trades and master/mistress of none. It's o.k. to do a good job of what we can do in a day.

## 10. The best policy!

We expect all our staff to show honesty and integrity in all their dealings. This means doing the right thing, being transparent and having no hidden agendas.

# Highlights from the Auditor General's Report 2008

## Kids need stability ..... A snapshot of the current crisis in Children's Mental Health Services

- 15 – 21 percent of Canadian children and youth are affected by some form of mental illness health disorder requiring intervention
- In Ontario as many as 654,000 children and youth have at least one diagnosable mental health disorder
- Disorders are increasing in frequency and severity
- One in six children and youth with a mental health disorder in Ontario receives some form of mental health service
- Little or no funding increases to agencies over the past 10 years

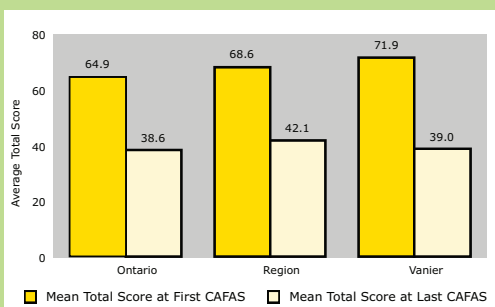


# What is CAFAS?

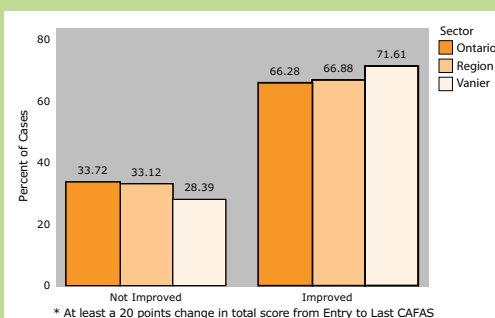
The Child & Adolescent Functional Assessment Scale is a staff rated instrument being used in all provincial children's mental health organizations because it has demonstrated good reliability, validity, clinical acceptability, and utility as an outcome measure. The 8 clinical scales measure the degree of impairment in the functioning of kids and teens with emotional, behavioural, psychiatric, psychological, or substance abuse problems. It's a "snap shot" of that client at that time. The scales are: school/work, home, community, behaviour towards others, moods/emotions, self harm, substance use, thinking. The 2 caregiver subscales look at material needs and family social support. The ratings correspond to numbers. Higher numbers indicate higher risk, lower numbers indicate lower risk.

## October 2007 – September 2008

### Treatment Outcomes: Change in Average Total CAFAS Score from Entry to Treatment to Last CAFAS



### Cases with Reliable Improvement (20 Points)\* on CFAS - Entry to Last



# Funders and Donors

## Ministry of Children and Youth Services

Royal Bank of Canada  
 Archangelo Rea Family Foundation  
 The Ministry of Public Safety  
 May Court Club of London  
 Ivey Connects Students  
 Wolverine Tube  
 London Professional Fire Fighters Association  
 Modern Martial Arts & Fitness Centre  
 Greek Orthodox Ladies of Philoptochos Society of Holy Trinity  
 Ross Sutton  
 Optimist Club of Fanshawe  
 Mrs. Joan Smith  
 Mocha Shriners  
 Elise Feightner  
 Edward Hassan  
 Dr. George Jenkins  
 Andrew & Helen Spriet  
 Dr. Rosemary Craen  
 Harry Van Bavel  
 Paul & Mary Lynn Mansell

Joe & Debbie Compeau  
 Janet Stewart  
 Carolyn E.J. Glass  
 Theresa & Ron Mikula  
 Tania Goodine  
 Susan Yeigh-Hollyman  
 Stephen Bolton  
 Scott Ferguson  
 Rick & Gail Hoevenaars  
 Leonard D. Macdougall  
 Kathleen Murphy/Harry Joosten  
 Jack & Joanne Smit  
 Frank & Marianne Kennes  
 Dr. Rudolph & Mrs. Jeanette Lewis  
 Dr. John R. Dubois  
 Dr. Evan Ralyea  
 Dr. Ben & Mrs. Judy Goldberg  
 Andrew Tesiorowski  
 Janice Straub  
 Yvette Laforet Fliesser  
 William E. Duffield  
 William & Marian Bieman  
 Wendy & Brad Mertz  
 Sue Giles  
 Maria Sanchez-Keane  
 Lisa Heslop

Joy Lang  
 John & Mary Dame  
 Jim & Liz Etherington  
 Eddie & Elizabeth Escaf  
 Dr. Rose Marie Jaco  
 Bev Irwin  
 Valerie Laufman  
 Susan D. Agranove  
 Sherry Foran  
 Sarah Knowles  
 Paul Hubert  
 Natasha Seemann  
 Karen Bax  
 Janet McEwen  
 Henriette Jansen  
 Dr. Margaret Steele  
 Dr. Jane Gloor  
 Dr. Elizabeth Osuch  
 Dr. Bill Avison  
 Dorothy Panabaker  
 Doreen E. Curry  
 Donald & Virginia Tremblay  
 Craig Campbell  
 Beth Mitchell  
 Ann V. Hern  
 Angela M. Killoran



## The May Court Club of London

Dedicated to the nurturing of the well-being of the children of our community who are in need of social, educational, physical or emotional support.

The May Court Club is the oldest service club in Canada. It was founded in Ottawa in 1898 by Lady Aberdeen, the wife of the Governor – General, as a volunteer service organization for women.

The Junior League Club of London joined the Association of May Court Clubs of Canada in 1934. In 2009, they are celebrating 75 years in our community. Over these years, the club has raised and donated over \$1.5 Million to the community of London.

The May Court Club of London pledged \$50,000 as initial operating monies for Madame Vanier Children's Services. On July 01, 1965, the facility was incorporated and commenced operation in Fontbonne Hall, a 100 year old converted mansion. To supplement the funding from the May Court Club, the Ontario Ministry of Community & Social Services provided an operating subsidy. Over the subsequent years, The May Court Club has donated continuously in support of Vanier. We are very grateful to the May Court Club of London and congratulate them on their 75 years of changing the lives of children in the London community.

# Revenue and Expenses

## MADAME VANIER CHILDREN'S SERVICES

### Comparative Consolidated Statement of Operations

	Unaudited March 31/09		Audited March 31/08	
<b>REVENUE</b>	\$	7,173,677	\$	7,202,424
<b>EXPENSES</b>				
Salaries & Benefits	\$	5,595,079	\$	5,589,405
Occupancy Costs		386,496		458,813
Office Expense		202,369		227,701
Promotion & Publicity		16,169		15,115
Board Expense		31,838		11,337
Staff Travel / Professional Development		102,842		116,052
Membership Dues		18,837		19,025
Purchased Professional Services		386,636		431,427
Program Costs		359,551		258,707
Amortization		129,350		151,003
<b>TOTAL EXPENSES</b>	<b>\$</b>	<b>7,229,167</b>	<b>\$</b>	<b>7,278,585</b>
Surplus (Deficit)	\$	(55,490)	\$	(76,161)

*Note: At the date of publication of the Annual Report, the audited financial statements were not available. The audited financial statements will be available at the Annual General Meeting on June 16/09 ^ and on our website at [www.vanier.com](http://www.vanier.com).*

“Finally! I don’t feel like I’m all alone. I’m not a bad parent after all. My daughter needs help and she is getting it thanks to Vanier.”





### **Mission Statement**

Vanier helps children to reach their full potential by working with the child and family's unique strengths, needs and culture to prevent or reduce serious emotional problems.



**Real Families. Real Problems. Real Help.**

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