

FY26 Strategic Plan

Kenneth Young Northwest Suburban ROSC

Kenneth Young Center

December 31, 2025

**Council Mission:**

The mission of the Northwest Suburban ROSC Council is to reduce stigma, improve access to timely and equitable care, and expand recovery-oriented supports for individuals and families impacted by substance use and co-occurring mental health disorders throughout Northwest Suburban Cook County and Kane County.

**Council Vision:**

The Northwest Suburban ROSC envisions a community where individuals with lived experience are respected, supported, and empowered; where recovery-oriented services are accessible, culturally responsive, and coordinated; and where recovery is recognized as possible for all.

**Needs Assessment:**

Community demographics (population, race/ethnicity, poverty level, etc.)

The Northwest Suburban ROSC service area includes Suburban Cook County and Kane County, located northwest of Chicago. The service area covers approximately 1,229.8 square miles and serves a combined population of approximately 2,894,406 residents (2023 Census Reporter).

Cook County demographics include: Caucasian/White (40%), African American (22%), Asian (8%), Native American (0.2%), Pacific Islander (0.1%), Other (0.25%), and Two or More Races (3%). Twenty-seven percent (27%) of residents identify as Hispanic.

Kane County demographics include: Caucasian/White (53%), African American (5%), Asian (4%), Native American (0.1%), Pacific Islander (0.1%), Other (0.25%), and Two or More Races (4%). Thirty-three percent (33%) of residents identify as Hispanic.

In both counties, the most commonly spoken languages at home are English, Spanish, and Indo-European languages. Approximately 77,799 residents across the service area are veterans.

Target Population: Individuals ages 14–65, with a particular focus on youth and young adults (ages 14–25) and veterans.

**Overdose data from the service area:**

KYC staff reviewed the 2024 Illinois Youth Survey (IYS) data and determined that many students may benefit from an individual substance use assessment based on the CRAFFT assessment criteria (C= ridden in a CAR driven by someone intoxicated; R= use alcohol/drugs to RELAX; A= use alcohol/drugs while ALONE; F= FORGET things you did while intoxicated; F= FAMILY or friends tell you to reduce drinking/drug use; T= gotten into TROUBLE while using alcohol/drugs). The Suburban Cook and Kane County Illinois Youth Survey reports show the following:

## Cook County (Non-Chicago) Illinois Youth Survey (2024):

### **SUBSTANCE USE CONSEQUENCES: During the past 12 months:**

	<b>10th</b>	<b>12th</b>
Did you ever use alcohol or drugs to relax, feel better about yourself, or fit in	9%	15%
Did you ever use alcohol or drugs while you were by yourself, alone	7%	11%
Did you ever forget things you did while using alcohol or drugs	7%	13%
Did your family or friends ever tell you that you should cut down on your drinking or drug use	3%	4%
Have you ever gotten into trouble while you were using alcohol or drugs	4%	6%
Have you ever ridden in a car driven by someone (including yourself) who was "high" or had been using alcohol or drugs	6%	11%
<b>Experienced 2 or more consequences (indicating the potential need for substance use disorder assessment according to the CRAFFT Screening Test)</b>	<b>9%</b>	<b>16%</b>

## Kane County Illinois Youth Survey (2024):

### **SUBSTANCE USE CONSEQUENCES: During the past 12 months:**

	<b>10th</b>	<b>12th</b>
Did you ever use alcohol or drugs to relax, feel better about yourself, or fit in	9%	11%
Did you ever use alcohol or drugs while you were by yourself, alone	9%	11%
Did you ever forget things you did while using alcohol or drugs	6%	6%
Did your family or friends ever tell you that you should cut down on your drinking or drug use	3%	3%
Have you ever gotten into trouble while you were using alcohol or drugs	3%	3%
Have you ever ridden in a car driven by someone (including yourself) who was "high" or had been using alcohol or drugs	7%	8%
<b>Experienced 2 or more consequences (indicating the potential need for substance use disorder assessment according to the CRAFFT Screening Test)</b>	<b>9%</b>	<b>11%</b>

Qualitative feedback obtained by the ROSC Council emphasized the need for:

- Increased community education on substance use and recovery
- Trauma-informed supports for individuals and families
- Expanded recovery support options for diverse populations
- Greater coordination and visibility of available services

### **Gaps identified in our ROSC community needs assessment:**

The survey highlights several gaps affecting how community members understand and access behavioral health and substance use supports. While respondents generally value harm reduction and believe people with mental illness and substance use disorders deserve respect, they also report significant barriers to care. Many described difficulty finding harm reduction resources, MAR providers, and mental health or substance use treatment services, pointing to limited availability, unclear pathways, and transportation challenges.

Stigma remains a major concern. Respondents consistently noted that stigma toward addiction, mental health, and MAR persists in their communities, which can discourage individuals from seeking help and undermine effective treatment.

The results also showed a need for stronger community education. Definitions of “sobriety,” “recovery,” and risk and protective factors vary widely, and many respondents expressed uncertainty or acknowledge a lack of knowledge about addiction.

Finally, families face ongoing stressors, especially related to housing, budgeting, communication, and transportation, that make it harder to maintain stability and engage in care.

Overall, the findings point to three primary needs: improving access to behavioral health and harm reduction services, expanding education to reduce stigma and increase understanding of addiction, and strengthening supports that address the social and economic conditions affecting families.

Data Source: Kenneth Young Center ROSC Community Needs Assessment Survey, FY26

Quarterly reporting during FY26 further identified:

- Gaps in school-based substance education
- Youth reluctance to seek help due to stigma and peer pressure
- Barriers for families related to transportation and scheduling
- Need for safe, trauma-informed environments
- Ongoing demand for harm reduction education, training and supplies

These findings demonstrate the ongoing need for a coordinated Recovery-Oriented System of Care that prioritizes equity, access, education, and lived-experience leadership.

### **Council Outreach and Communication Plans:**

Purpose:

To increase awareness of recovery support services, reduce stigma related to substance use and recovery, and promote collaboration among community stakeholders across the ROSC service area.

Objectives:

- Educate the community on recovery, trauma, and substance use
- Engage youth, families, veterans, and individuals with lived experience
- Promote ROSC activities, services, and events
- Strengthen collaboration among community partners

**Target Audiences:**

- Individuals with lived experience and families
- Youth and young adults
- Veterans
- Schools and educators
- Law enforcement and justice partners
- Healthcare and behavioral health providers
- Faith-based organizations
- Community members and policymakers

Information will be shared to engage, educate, and connect stakeholders through newsletters, social media, community presentations, council meetings, and events.

**Key Messages:**

- Recovery is possible
- Stigma is a barrier to care
- Harm reduction saves lives
- There are multiple pathways to recovery
- Access, Education and Training

**Communication Channels & Frequency:**

- Monthly council meetings
- Quarterly community presentations
- Annual and quarterly resource guide updates
- Weekly social media outreach
- Community events and partner-hosted activities

**Roles and Responsibilities:**

- Council leadership and KYC staff coordinate outreach
- Council members support dissemination and engagement
- Membership recruitment follows established protocols

**Evaluation & Feedback:**

- Event attendance and participation
- Social media engagement analytics
- Resource guide usage
- Community and partner feedback
- Quarterly council review

## **Council Goals, Objectives, and Outcome Measures:**

### **Goal 1: Reduce Stigma Around Recovery**

- Share 12 recovery stories from youth, BIPOC, and LGBTQ+ voices by June 2026.
- Present data to 5 community groups by March 2026 to challenge myths.
- Partner with 10 schools, clinics, or faith groups by December 2025 to promote recovery-positive language.
- Create materials in 3 languages by May 2026 to reach diverse communities.

### **Goal 2: Expand Harm Reduction Access**

- Expand harm reduction supply distribution by 5 sites by February 2026.
- Expand mobile outreach by 25% to underserved areas by April 2026.
- Train 15 new partners in trauma-informed harm reduction by June 2026.

### **Goal 3: Close Referral Gaps**

- Train 50 professionals in trauma-informed referrals by May 2026.
- Develop and distribute a referral list with partners by June 2026.

## **Outcome Measures and Progress Tracking:**

KYC will employ 1FTE as a ROSC Council Coordinator to oversee all administrative responsibilities associated with the council. This includes, but is not limited to, scheduling meetings, reporting activities, building relationships with stakeholders, and effectively implementing the strategic plan. The Council Coordinator will report to the Sr. Manager of Recovery Support Services. A second Project Associate will support the team with administrative, logistical matters and expense management.

The ROSC Council will hold monthly meetings and submit meeting minutes to IDHS/DBHR. Expenditure vouchers, monthly and quarterly performance reports, and annual closeout reports will also be submitted by their stated deadlines.

The ROSC Council will implement the following three community projects in FY26.

1. Community Education Campaign to Reduce Stigma: launch a multilingual education campaign to address stigma surrounding substance use and recovery. The campaign will feature recovery success stories, anti-stigma resources, and youth-led awareness initiatives, especially in under-resourced and immigrant communities. Community events will be co-designed with Peer Recovery Specialists and local leaders to ensure the greatest impact.
2. Integrated Resource Navigation & Warm Hand-Off Network: formalize partnerships with local emergency departments, jails, shelters, and community-based organizations to implement a warm hand-off model that ensures individuals are not lost between systems. The project will also create a community-facing resource map and toolkit for direct service staff.

3. Harm Reduction Kit Distribution and Training Expansion: expand harm reduction efforts by training community partners, offering mobile kit distribution, and integrating harm reduction education into KYC's youth programming. Trainings will be co-facilitated by people with lived experience and adapted for specific populations, including LGBTQ+ youth, Spanish-speaking residents, and individuals experiencing homelessness.

Progress will be measured through the annual community needs survey to ensure that the ROSC Council is still addressing identified needs, and its work remains relevant and beneficial to the community. An annual ROSC Council survey will also be conducted to obtain feedback from members on the effectiveness of the meetings, the topics they would like to cover, and the activities they want to engage in for the year that align with the strategic plan.