



## **“We specialize in young people who don't show up”: Molly Baldwin of Roca on how an eight-second pause can change lives**

Eleanore Catolico  
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**Eleanore Catolico: Can you please introduce yourself and describe the problem your organization is addressing, and how you are responding to it?**

**Molly Baldwin:** My name is Molly Baldwin. I'm the CEO and founder of Roca. We are hyper-focused on young people at the center of urban violence. Our mission is to relentlessly disrupt violence by engaging young people, police, and systems to heal trauma, find hope, and drive change. We specialize in young people who don't show up. They're not coming to programs. They're not complying with probation orders. They're either engaged in violence or have suffered a lot of violence, and they're highly resistant and disengaged.

There are two key components. One, we call Relentless Outreach. We go to young people as often and as much over time as needed. Two, we've adapted cognitive behavioral therapy (CBT) to a nonclinical behavioral health version that we call Rewire CBT, which is about teaching young people where they are. It could be on the street. Maybe they show up at a center. Maybe they don't over a period of time. We teach them a little bit about the brain, helping them understand that what they think, feel, and do are three different things, and we teach them emotional-regulation skills. Over time, they can learn to take an 8- to 12-second pause between what they think and feel and what they do.

We mostly work with 16- to 24-year-olds, although we're beginning to work with some who are younger because of the nature of violence in urban areas. What's distinctive is that this is asynchronous and designed to be on the street. As much as there are formal lessons, it can also be done on a street corner, on the phone, on a work crew that we run after somebody's upset.

It's about bringing this youth mental health approach to them. People go to school every day and you can do it in the classroom – you've got the structure there. If you're in a place where young people show up on their own, the structure helps. Its power is that it's asynchronous. It's about practice.

We know that the brain can change at any time. At this age, it takes about 18 to 24 months. In natural interactions like catching up with someone, finding someone, getting them to a work crew, working out court stuff, working out parents' stuff – we include the Rewire CBT framework in everything we do and teach them skills over time. What we think is happening is that it's rebuilding the neural pathways to the prefrontal cortex, or maybe building them for the first time.

**Eleanore Catolico: What is the most surprising element of your work?**

**Molly Baldwin:** There are two things that are of unique value – we do Relentless Outreach and we do Rewire CBT.

We are not expecting them to come. If somebody gets court orders and they show up to court, they don't need to be at Roca. If you're going to school every day, you may need support, you may need mental health support. This group has a particular level of trauma. They've suffered violence. Many of them have committed violence. They're very resistant. They're fearful. They don't trust people. We do this thing we call Relentless Outreach. It's like legal stalking. If we get referred to someone, we try to find them if their risk level is high enough.

Relentless Outreach is about a three-year involvement at Roca. We know that young people can learn and build trust over time. Often, they have a relapse, which is important, and get angry and disappear. We go back and find them again.

Sometimes they do inappropriate things. They could show up at a building with a gun. They could threaten somebody in a work crew. They could do inappropriate things. We don't throw them out. We deal with the relapse. That's key to the development – getting this behavioral health to the street, to the person.

We're teaching some people in schools our Rewire CBT, but it's really for the population that's not showing up. How do you get this to people who wouldn't get it otherwise? That's its value. Those are the two key things.

**Eleanore Catolico: Could you elaborate on Rewire CBT and how it works in your model?**

**Molly Baldwin:** It's based on the fact that what we think, feel, and do are related but three different things. What I think is separate from what I feel. Getting that labeling and understanding is key.

The top brain is all the executive functioning, decision-making, and being able to take a pause and choose – agency is in the top brain. The bottom brain is the brain stem with your vital functions – your blood pumping, your breathing, and heartbeat. Then the

emotional part of the lower brain handles pleasure, pain, fight, flight, and freeze. It also records memories. It's highly reactive, both in good ways and bad.

We teach young people seven emotional-regulation skills so they can learn to take an 8- to 12-second pause. You might hear about it on the street and talk about it. You might fill out a little worksheet we use. You might even come to a group once because we feed you.

We think the practice is literally building the muscle to take a pause, and then giving people the skills to work through things. This is critical in youth mental health. It doesn't take the place of long-term counseling. It helps people understand what's going on with themselves. With this practice they can build the neural pathways to the thinking and executive function of the brain, and take this pause and make very different choices. It's about accessing agency. Previously if you were stuck because of trauma, because of fear, because of abuse, because of life, whatever else in your bottom brain, all you could do is react.

**Eleanore Catolico: The Youth Mental Wellbeing Co-Lab, which supports many organizations such as Roca, focuses on strengthening young people's resilience, providing them agency, and helping them build a sense of community and belonging. How do you see your relationship with these priorities?**

**Molly Baldwin:** They have us in the resilience bucket. We're building the skills for resiliency. What's important to understand is once somebody can take an 8- to 12-second pause between what they think and feel and what they do, only then do they have agency, because otherwise they're stuck in their bottom brain and they're highly reactive. Obviously, there's a sense of belonging as well.

If people are not safe, they haven't been taught emotional regulation. Whether they feel like they're safe – real or perceived – they're highly traumatized and often stuck in the bottom part of their brain. They're unable to access the prefrontal cortex, the decision-making and weighing up part. If you're stuck in your bottom brain, in the emotional part of your brain, you're not able to access executive functioning and you don't have agency. If the key is to help young people build the neural pathways to take an 8- to 12-second pause between what they think and feel and what they do, it is both about resiliency and about agency. Ideally, that's the result of our work.

We do have physical sites. Generally, they don't show up by themselves and we have to bring them. Later, they start to show up by themselves. There is a sense of belonging and community at the sites, which is important.

**Eleanore Catolico: How do you collaborate with other organizations working in this and other focus areas?**

**Molly Baldwin:** Because we've hyper-focused on urban violence, we obviously work with police, corrections, and probation. We also work a lot with city governments and some mental health organizations. Once somebody is ready to go to counseling, we either pay a counselor to come to us or we get the person to the counselor. We work

with employers, some job training programs, and hospitals. And we work a lot with child welfare.

Most of our young people are involved in multiple systems. There are all kinds of things going on. A young mother could be involved with both child welfare and probation systems, for example. We work with everyone and anyone we can that makes sense for the young person, given where they are in their development.

**Eleanore Catolico: What emerging work in this field are you excited about?**

**Molly Baldwin:** The brain science is really important. It helps us understand what's going on with people. Then, as you understand trauma and what it does to people, you also begin to see what it takes to access the thinking part of your brain. It's absolutely critical. The idea that you can have a nonclinical version of behavioral health is exciting and powerful. That's not to take away from formal counseling or formal clinical settings or approaches, because we need them. Lots and lots of people can't access those, or won't access those. The exciting thing is being able to bring this to the street.

**Eleanore Catolico: Which geographic areas are you active in?**

**Molly Baldwin:** We provide direct services in Massachusetts, Baltimore, Maryland, and Hartford, Connecticut. The Roca Impact Institute trains individuals and institutions who work at the center of urban violence, who work in juvenile justice systems or hospitals. We've been in 22 states across the US.

**Eleanore Catolico: Are your staff community members and social workers?**

**Molly Baldwin:** They don't have a clinical background, though a few might happen to. We have a nonclinical approach based on the science and evidence-based practices, and we've adapted it for nonclinical members. Some staff grew up in the organization, some are from the community, some went to college and showed up. Different ages, different backgrounds. We have intensive internal training and coaching. We're also working on developing an AI bot to enhance coaching and performance.

**Eleanore Catolico: How do you build trust and foster connections with young people, given that they are maybe not going to school and are hard to find? How do you enable them to continue to learn the skills?**

**Molly Baldwin:** Relentless Outreach is what we call it – being a pain in the ass, if you want to be truthful. You just go and go and go. The main thing is that we keep showing up. We're so annoying. You want to get rid of us, you don't want to talk to us, you hide in the house. People think we're the feds. We just keep going. We track everything we do. Time-on-task is key.

The approach of Rewire CBT is not judgmental. It's not that you're bad, you're wrong, you're sick, you're this, you're that. It's more of: "Here's some information – let's take a look at it. Oh, by the way, do you know what you're thinking, feeling, or doing differently?" Even people who are pretty healthy forget that. Sometimes our thoughts

and feelings and actions get all jumbled up. Most of our young people are in court or they have welfare issues or system issues.

Once we build a relationship, we don't sit waiting for them. We don't say, "Oh, when's Eleanore going to come?" We stay at it. Some people take six months. Finally, you start coming, you do well. Then you have a relapse. Very, very normal, healthy behavior for all of us. You tell us to go to hell and you leave, we go back and find you again. We want young people – without causing harm and violence – to get pissed off. We want them to get angry because we're trying to help people work through their trauma and the hardest things. It's only when it gets hard that we are able to help them learn to make a different choice.

### **Eleanore Catolico: Can you share an example of the impact of your work?**

**Molly Baldwin:** Here is a good example. There's a young person in Springfield who was referred to us when he got out of prison. If you get referred to us and we think you belong, we're hard to get rid of. Anyway, he didn't want to be involved, and we kept going. He got arrested again. He got referred. We did the same things. Went on and off for over a year, a year and a half. Finally, the third time he got out, probation said, "You're going to Roca, and you're going to do whatever they say, and you're going to stand on your head. I don't really care."

By then, he was on his third try. We started teaching him the CBT and showing up. We worked through the resistance. One day, he called his youth worker and he said, "Oh my God, this shit works." He was in the park with his girlfriend and he thought somebody was looking at him, and he called someone he called his boy to bring him his backpack and gun. He was sitting on the park bench waiting for him.

We have these seven skills, and one of them is take a pause. He took a pause. Then he thought, "Maybe that guy didn't even see me. I'm getting ready to shoot somebody who didn't even see me." He was then able to work through some decision-making. "Am I under threat or not? Is that true? Is it helpful?" By the time his friend showed up, he had gotten himself out of this state. His friend said, "I'll do it." He replied, "No." And he told his youth worker, which was amazing.

We have people call. One young person made a lot of changes in his life. He's finally holding a job. He calls a youth worker and says, "The guy who killed my brother is out front. I don't know what to do." He called instead of doing something. They worked through what to do – on little things, "I got really mad at my mother and I was going to hit her, and I took a breath." Because all of a sudden they're able to think, "Is this something I need to do or not?" How do you do that if you don't have executive functioning, if you can't weigh things out?

There are little things and there are big things. What we know about neural pathways is that regularity builds consistency, and you can guess what happens – you can change them. If you usually blow up because you feel tension, and you change enough to take

a breath, you can then hold a job. And when somebody tells you what to do, you don't go tell them to F off.

It's about working on these little things to get to the bigger things. We are working with 400 young women. Seventy to seventy-five percent are young mothers. Forty-four percent are involved in trafficking. Rewire CBT helps them take a pause so they can make decisions and use a skill. It could be about labeling their emotions. It could be about looking at their values and acting on those values. It could be about decision-making. It could be, "Stick with it, Eleanore." So if you get yourself in an emotional situation and it's very anxiety-producing, people do all kinds of things to get out of it instead of thinking, "Oh, I can just ride through this."

**Eleanore Catolico: CBT seems to help young people calm down and think through before making a rash decision. Have you also seen the opposite kind of change – not just someone avoiding bad decisions but also growing and realizing what they're capable of? Has it helped them flourish in other ways?**

**Molly Baldwin:** Yes. If you can start to access your executive functioning, you can make decisions and act on things you want to do. You can be the great mother you want to be, you can actually stay at a job, you can go to job training. It opens up these new things that you can't access when you're reacting all the time. There are lots of programs for people who want to go to college, get training, make more money, or grow. If that is the starting line, we're over here – working on getting them across and helping them stay on the other side of it.

In Hartford, we have a couple of new job-training partners that do training-to-placement, and we taught them Rewire CBT. The young women are learning it at Roca. After they complete some basic employment work with us, they go there and use the same language. It's taking them longer to get through the job training, but once they do, they're doing better. They're getting the benefits of both the resiliency and the agency.

**Eleanore Catolico: What have you tried that didn't work but that you learned from?**

**Molly Baldwin:** Before we knew about CBT, we ran a transitional employment program where young people got paid for work, but we built in relapse possibilities because we know if they could come to work all the time, they wouldn't need to be at Roca. Our basic transitional employment is point-and-go work, line-of-sight supervision, and minimum wage. It's not very exciting. We had hoped it would help with employment basics, but we discovered that it was not so good for employment but pretty good for reducing recidivism and addressing substance abuse. Once we learned CBT, it could do both those things.

We also know that CBT training is time-intensive. You have to be with somebody who knows what they're doing. That's one of the reasons we're looking at AI. We found out that Rewire CBT is helping our staff as well, which is critical.

Look, I'm old. I'm an old-time street worker. Ride up in somebody's face, knock on the door, go have it out with the kids. It worked for a while. The Relentless Outreach was always there, but you just can't tell anybody what to do and expect them to do it. We were always very honest. We were always very loving, but it's not helpful when a kid does something and you respond, "What the hell are you doing?"

The whole approach of CBT is getting people to look at what's going on with themselves, and it's far more empowering. That's been key. We have found that we are far more effective with young people who are at higher risk of criminal behavior and engagement than those at lower risk, because this model is very intensive. If we place lower-risk young people with several higher-risk ones who are committing more crime, the lower-risk youth don't get inspired in the right way – they can actually start committing more crime. There's all kinds of research that if you overrespond to lower-risk kids, it's not good. It gets worse. These have been some pretty powerful lessons.

We've all made these mistakes. We used to work with high-risk, middle-risk, and low-risk kids all together. Early in youth development, we assumed that building self-esteem would help people make better decisions. There's no evidence of that. We'd have gang members with a pretty good sense of self who were still dealing drugs and carrying guns. We had to switch how we approach these things. If you're at lower risk and I'm at higher risk, you are not inspiring me – unfortunately, I'm inspiring you.

You want to put your time and resources into higher-risk youth because it's a better bang for the buck. The ROI (return on investment) is higher since they cost more too with multi-year system involvement.

**Eleanore Catolico: Aside from funding, are there any challenges you've faced or are currently facing that you haven't been able to solve yet?**

**Molly Baldwin:** Housing and the cost of living are huge. There's been an increase in trafficking among young women, and there is high accessibility of guns. I'm old enough to notice that there are more guns than people now.

**Eleanore Catolico: What lessons from your work could others apply both inside and outside the field?**

**Molly Baldwin:** We don't all have to be brain scientists, but understanding the brain – the top brain, bottom brain, and understanding that what you think, feel, and do are different. Ideally, you grow up in a home that's safe, that's got adults that are caring, and they teach you emotional regulation. That's the whole part of growing up. To the point where, at different ages, people developmentally push the envelope, they act out, but there's safety around them.

This simple approach to brain science, which isn't everything, is extremely helpful. It's important to understand that there are some young people who aren't going to show up to programs. What are we going to do for them? Many of them are in harm's way.

Serious, serious harm's way. How you bring the work to them, whether it's Rewire CBT or showing up in outreach, is critical.

The other thing is that we use data a lot to check if we're on track or off track.

**Eleanore Catolico: What do you measure with data?**

**Molly Baldwin:** We have a theory of change that has short, medium, and long-term outcomes. We have a data system that we've tailored to our work. We track what's going on with young people and staff efforts. We have external evaluations on different things. We're tracking recidivism of high-risk young people in both Maryland and Massachusetts to look at differences.

In the short term, we're looking at engagement. If we're going out to find you, and you're starting to call us, that's a short-term output. We track emotional regulation, PTSD (post-traumatic stress disorder), skills, and distress. We look at the risk level in Roca's work with young people compared to other organizations.

**Eleanore Catolico: What significant insights has the data yielded so far?**

**Molly Baldwin:** In Massachusetts, for close to 10 years now, we've seen a 30 percent reduction in recidivism among high-risk young men. We also know that our young women, for example, start with higher risk scores than others, but we've seen positive change over time in Maryland. We have an early pilot and we're going to get more data this year. When we started Roca Baltimore, the COVID pandemic arrived a year and a half in, which was a little challenging.

Our first pilot data comparison showed a 17 percent reduction in recidivism. It will become better over time because we're tracking three years out – so once we get past the COVID disruptions, we'll have a clearer view of the data. The more we do CBT with young people, the more they show up, and the more they show up, the more they engage with people, and then the more they engage, the more they learn CBT. We definitely have that on track.

**Eleanore Catolico: How would you describe current attitudes toward youth mental health, and have you seen them shift in your community or field?**

**Molly Baldwin:** Clearly, the mental health of young people is not great in the country or the world. It's just not. At one level, people are understanding it more. On another level, I'm not so sure. If there are less resources, if housing is hard to get, if there's going to be less food in the country, if people don't have healthcare – then where are we headed in the United States? It's going to exacerbate those situations. It's not that clinical approaches aren't important and necessary. But there aren't enough people doing it, and not enough clinicians from backgrounds young people can identify with. So it's critical to give people the tools to work on these things themselves.

In the United States we say, "We have a youth mental health crisis," and yet what we're doing with the budget, with the country, and with our programs contradicts that. It feels a little split to me. A lot split, actually.

**Eleanore Catolico: How do you hear from and incorporate youth voices in shaping your work or the broader narrative on mental health?**

**Molly Baldwin:** We have an annual survey and series of group feedback sessions. We engage with young people quite enough, according to them. It's not like we're in an echo chamber. They tell us, "This is helpful, this is not." We use our own data to do some analysis. For example, we can tell that staff who are more comfortable with CBT, outreach, or direct conversations tend to get better results with young people. We're able to do some analysis by staff performance and youth outcomes.

External data is critical as well. There is good work happening in the country, mostly in behavioral health. Those groups tend to focus on helping young people access services, such as by offering a class in a school, which is great. We try to learn from that, but remember, we're trying to take the work to the street, not a classroom or a structured prison setting or a group where young people are already showing up. We're constantly trying to read, learn, think, and use the data.

Part of the criminal justice field is also finally starting to pay attention to this. We had an entire field that was into punishment, yelling at people, telling them what to do, or locking them up. I say, "Yes, but brains don't work that way."

There's still a ways to go. There's a real opening when you understand brain science, even in the simplest ways. I'm not totally sure how to do that yet, but what's exciting is that it removes labels. You can say, "Here's what happens with brains. We've got these three parts – the top brain, the bottom brain, and the brain stem. In the best of circumstances, you don't fully access your top brain till later. And by the way, you can change this." That's very empowering. Does it cover everything? Probably not, but it opens a different door.

**Eleanore Catolico: Most of the young people you serve are 16 to 24. What is their brain like at that age, especially in terms of learning emotional regulation? Are younger people more receptive or does it get harder as the brain matures?**

**Molly Baldwin:** I'm not a brain scientist, let's just make that clear. There are three times when your brain has more of what is called elasticity and plasticity, which means it can train more and has more potential. One is either ages zero to three or zero to six, depending on who you're talking to – there are different schools. The other one is mid-to late teens.

We now know that even in healthy, safe circumstances, we don't fully access the prefrontal cortex until our mid-20s, and then again right after having a baby, interestingly enough. So for this age group, it's not so crazy to be working on these skills, but it still takes about 18 to 24 months. You can't just do more, faster, better. Doesn't work like that. We try to hold on to them for up to three years.

**Eleanore Catolico: Do they want to stay and continue for that long?**

**Molly Baldwin:** Yes, at some point. It's open entry, open exit. We have a handful of people, despite similar serious criminal behavior, who are mandated by law. It doesn't really matter once they've started to make the change. That two- to three-year period is important. The reason we like three years, or the option for someone to leave and come back, is that behavior change takes 18 to 24 months to solidify and get those neural pathways going in the right direction. After that, they need support for other things because they're so far behind with everything else.

It's an extraordinary privilege, and a responsibility we take seriously, that we got the opportunity to get good at what we do, share it, and keep learning.

**Eleanore Catolico: Thank you so much.**

*Eleanore Catolico is a freelance journalist, writer and editor based in Michigan. Her solutions journalism has focused on initiatives in K-12 schools that address trauma, cultivate affirming and inclusive spaces and foster healthy peer connections.*

*\* This interview has been edited and condensed.*