

THE CENTER FOR SCHOOL BEHAVIORAL HEALTH AT MENTAL HEALTH AMERICA OF GREATER HOUSTON

A CELEBRATION OF COLLABORATION

FIVE YEAR
IMPACT REPORT
2012–2017

"THE CENTER FOR SCHOOL BEHAVIORAL HEALTH AT MHA OF GREATER HOUSTON IS GOING TO CHANGE THE FACE OF SCHOOL-BASED MENTAL HEALTH IN THE UNITED STATES."

WILLIAM O. DONNELLY, PH.D. ADJUNCT FACULTY, PSYCHOLOGY DEPARTMENT, BOWLING GREEN STATE UNIVERSITY

We are grateful to the following foundations and corporations who have provided generous financial support for the Center:

- The Stanford & Joan Alexander Family Foundation
- The Enrico & Sandra di Portanova Charitable Foundation
- Episcopal Health Foundation (EHF)
- The Fondren Foundation
- Hogg Foundation for Mental Health
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- Janssen Pharmaceuticals, Inc.
- The Meadows Foundation, Inc.
- The Meadows Mental Health Policy Institute
- MHA of Greater Houston Foundation, Inc.
- The Powell Foundation
- St. Luke’s Episcopal Health Charities (now EHF)
- Texas Mental Health Foundation

This report is dedicated to Andrea Usanga, Susan Fordice, and the original members of the School Behavioral Health Collaborative, who created the vision and laid the foundation for all that has been achieved in the past five years.

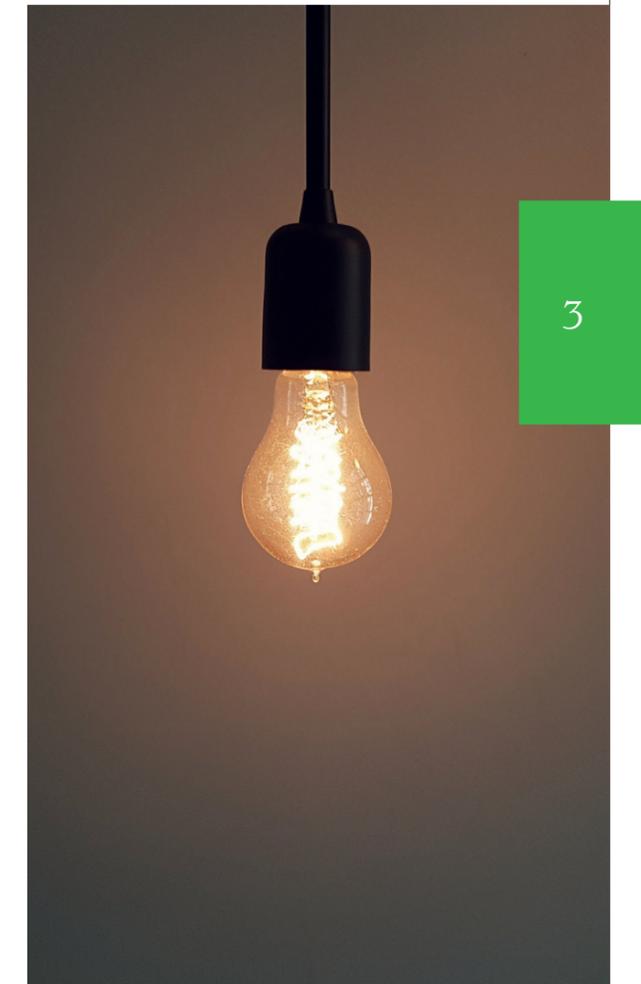
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*Under the leadership of Betsy Schwartz,
Mental Health America of Greater
Houston began working in systems
change in the 1990s.*

In the early days, we supported the development of the Houston Police Department’s Crisis Intervention Team, which is now a Mental Health Division and a recognized national leader and trainer. At the core of MHA of Greater Houston’s commitment to systems change is a belief in the power of a good idea. Under the tutelage of Dr. Susan Stone, MHA of Greater Houston developed a framework for this process which includes convening and interviewing key stakeholders, mapping current systems, researching national best practices, conducting site visits to learn from best practices, and bringing that knowledge back to Houston to develop recommendations for change. These endeavors in risking our credibility on pursuing good ideas were often difficult to fund. With limited resources and an abundance of commitment, we continued to assemble the right people willing to forge a new path and turn a good idea into reality. In 2002, the Swalm Foundation affirmed our approach with a \$3.1 million gift to create The Swalm Center for Community Action for the sole purpose of funding systems change. In 2016, Houston Endowment invested \$2 million in the School Behavioral Health Initiative and its 37 recommendations to create the Center for School Behavioral Health. These transformational gifts were investments in systems change, which is what is required to create something that will better serve the health and well-being of the present and the future for all of us in this growing region. In addition to the milestones highlighted in this report, the work of the Center and all of its members enabled us to be ready when Hurricane Harvey overwhelmed our region. Effective collaborations were in place to respond quickly to the behavioral health needs of our students. Every community needs an organization that is willing to risk a foray into the unknown. With the support and leadership of the Board of Directors, we have been able to be that organization. We are not shy in heralding the power of a good idea. With the Center for School Behavioral Health, the case has been made and the milestones will continue to build in the most prolific way possible – in partnership with others.

SUSAN FORDICE, FORMER CEO OF MHA OF GREATER HOUSTON





CITY OF HOUSTON

January 30, 2018

Janet Pozmantier, M.S., LPC, LMFT, RPT
Director, The Center for School Behavioral Health
Mental Health America of Greater Houston
2211 Norfolk, Suite 810
Houston, Texas 77098

Dear Ms. Pozmantier:

As the Mayor of the City of Houston, I strive each day to improve the well-being of all our citizens. For our great city to thrive today and in the future, it is incumbent upon us to ensure the mental health of our most vulnerable citizens - our children. No mayor can achieve this alone, and the Center for School Behavioral Health at Mental Health America of Greater Houston has been an invaluable partner in driving systemic change to improve the prevention, early identification and intervention, and treatment of behavioral concerns among students.

From inception, the Center has brought together school districts, community providers, government representatives, parents, and concerned citizens to advocate for sound policies and provide a platform for collective impact. The 37 Recommendations that guide the work of the Center have given school districts, community organizations, and even our Houston Health Department's My Brother's Keeper program a framework to develop behavioral health programming and measure success. That's why when Hurricane Harvey devastated our city, the Mayor's Office of Education turned to the Center to lead our children's behavioral health recovery efforts.

Going forward, the Center's work will be integral to the City's Complete Communities initiative. We have been deeply appreciative of the Center serving to facilitate community conversations regarding how mental health plays a pivotal role in student wellbeing and educational success. We wish to collaborate with the Center to link communities to mental health services, remove barriers to mental healthcare, and provide education and training for our community. The City also wishes to work with the Center for legislative solutions to increase access to public mental health services.

I am genuinely impressed with the first five years of the Center's accomplishments and have every confidence in your future success. With your help, we will truly be Houston Strong.

Sincerely,

Sylvester Turner
Mayor

Council Members: Brenda Stardig Jerry Davis Ellen R. Cohen Dwight A. Boykins Dave Martin Steve Le Greg Travis Karla Cisneros
Robert Gallegos Mike Laster Larry V. Green Mike Knox David W. Robinson Michael Kubosh Amanda Edwards Jack Christie
Controller: Chris Brown



December 27, 2017

The success of our county is dependent on an educated and healthy work force. The health of all of our citizens and the quality of life we all aspire to must include mental health. It is essential to our ability to cope with the demands of our days at work and in all of the important areas of our lives.

The impact of untreated brain and behavioral disorders is reflected in the number of students that go undiagnosed and untreated for years, until their behavior lands them in Harris County Juvenile Probation. It's all too clear that the school-to-prison pipeline feeds the Harris County Jail, which sadly is the largest mental health facility in Texas.

Meeting the mental and behavioral health needs for students in a county this large and diverse is a huge enterprise. Harris County covers an area of 1,777 square miles, with 25 school districts, 192 charter schools, and 392 private/parochial schools serving more than 875,000 students - and our population grows daily.

That's why I am proud of the Harris County agencies that have partnered with Mental Health America's Center for School Behavioral Health to reverse this devastating trend. Our leaders at Harris County Department of Education, Harris County Juvenile Probation Department, The Harris Center for Mental Health and IDD, Harris County Children's Protective Services, Harris County Commissioners' offices, Harris Health System, and Harris County Public Health have all played significant roles in the development of the Center and implementation of the 37 recommendations.

Through collaboration and community investment, the Center has become an invaluable change agent in the dismantling of the school-to-prison pipeline. In the future, when researchers search for examples of best practices for promoting the prevention, early identification, and treatment of behavioral health issues among students, no doubt they will be able to look to the Center for School Behavioral Health at Mental Health America of Greater Houston.

Sincerely,

Ed Emmett
County Judge

ADMINISTRATION BUILDING 1001 PRESTON, SUITE 911 HOUSTON, TEXAS 77002 (713) 755-4000 (713) 755-8379

THE POWER OF A GOOD IDEA

Our schools are overwhelmed with students experiencing serious mental health concerns. Many of these students enter the education system having experienced adverse childhood experiences and trauma. A large percentage of students in our public schools are impoverished, and the stress of living in food deserts and unstable environments takes a toll. Although the Texas population is growing, the \$5.4 billion slashed from public education in 2011 has never been fully restored, and as such, there are less counselors, nurses, resource aides, school social workers, and school psychologists in the schools. Essentially, the safety net for our children is frayed, and children are falling through what's left of the threads.

In response to an outcry from school districts that were inundated with unprecedented numbers of students experiencing serious behavioral health conditions, Mental Health America of Greater Houston (MHA of Greater Houston) convened over 50 individuals in April 2012. Representatives from almost 40 organizations, including school districts, behavioral health providers, child-serving and education-related agencies, and parents attended the meeting. Ten of the 20 largest school districts in Harris County, representing over 500,000 public school students, were in attendance.

“ I WISH MY TEACHER KNEW... IT'S HARD ENOUGH TO LIVE AT TIMES.”

We convene school districts and community stakeholders to promote systems change in school behavioral health.

At this first meeting, the purpose of the initiative—to improve the prevention, identification, and treatment of behavioral health issues among students—was affirmed. The group began a year-long, community-wide system change process to examine gaps in services, visit national best practice sites, conduct key stakeholder interviews, map area ISD behavioral health systems, and investigate state laws and special education policies. What they learned became the foundation for 37 consensus recommendations to improve the prevention, early identification and intervention, and treatment of behavioral health concerns among school-age children.

The 37 recommendations were compiled into a detailed report that was released by the community collaborative in February 2013. The report was the culmination of a tremendous effort by concerned stakeholders and the beginning of what became known as the Harris County School Behavioral Health Initiative (SBHI). It would not sit on a shelf.

“

Our school district is experiencing an ever increasing problem of elementary school age children with out of control behaviors so severe that they are currently being sent to Houston's NeuroPsychiatric Center via ambulance because they are destroying classrooms and attacking teachers. The number of teens sent to the District Alternative Education Program for drug and alcohol abuse has continued to increase. The current drugs of choice include Xanax and heroin. One teen tried to hang herself in the bathroom at the alternative school. Teachers, police officers and nurses report that self-cutting is on the rise. The district-wide School Health Advisory Council unanimously identified mental health as the number one health issue needing to be addressed in the district.”

HARRIS COUNTY SCHOOL DISTRICT, 2012

HARRIS COUNTY 2012

525,761

Children ages 5–17ⁱ

20%

or about 105,152 of these children had a mental illness or addictive disorder that caused at least some level of functional impairmentⁱⁱ

\$5.4B

slashed by the State of Texas Legislature from the education budget in 2011, leaving thousands of teachers and students without supportⁱⁱⁱ

8.5%

arbitrary cap on student enrollment in special education led to an increase in students not receiving treatment for mental health concerns^{iv}

70%

of youth in the juvenile justice system were identified as having a mental illness - many for the first time^v

\$38.38

per capita mental health spending. Texas was ranked last nationally^{vi}

References

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- ii US Surgeon General (1999) Mental Health: A Report of the Surgeon General. Retrieved from <http://www.surgeongeneral.gov/library/mentalhealth/home.html>
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- v National Center for Mental Health and Juvenile Justice. (2007). Blueprint for Change: A Comprehensive Model for the Identification and Treatment of Youth with Mental Health Needs in Contact with the Juvenile Justice System. Delmar, N.Y: Skowrya, K.R. & Cocozza, J.J. Retrieved January 16, 2015, from http://www.ncmhjj.com/wp-content/uploads/2013/07/2007_Blueprint-for-Change-Full-Report.pdf
- vi Growing Up in Houston, Children at Risk 2012-2014. Retrieved from http://childrenatrisk-org.vps-texaschoolguide-org.vps.ezhostingserver.com/wp-content/uploads/2017/06/01_Growing-Up-In-Houston-2012-2014.pdf

“

We believe schools are at the front lines of responding to child trauma and behavioral health issues. The team at Mental Health America of Greater Houston built the Center for School Behavioral Health for just this purpose – to support school districts, schools and educators in adopting best practices to improve the behavioral health of students.”

ELIZABETH LOVE,
SENIOR PROGRAM
OFFICER, HOUSTON
ENDOWMENT

8

LAUNCHING THE CENTER FOR SCHOOL BEHAVIORAL HEALTH

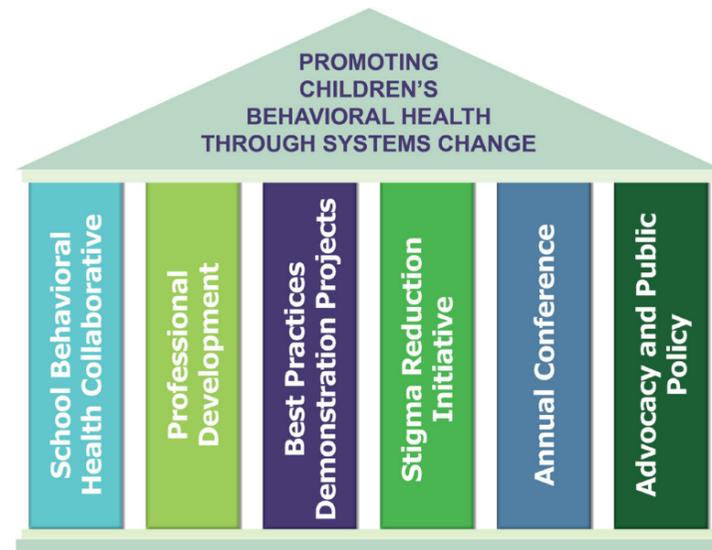
This 5-year report details the work toward fulfillment of the 37 recommendations between the release of the initial report in 2013 and June 2017.

HOUSTON ENDOWMENT

Although much was accomplished in the first three years, a significant three-year grant from Houston Endowment in March 2016 provided the resources to transform the SBHI into the Center for School Behavioral Health at Mental Health America of Greater Houston (the Center). The grant from Houston Endowment greatly increased our organizational capacity to engage school districts and child-serving organizations and offer more specialized trainings, conferences, best practices demonstration projects, and advocacy services.

WHAT WE DO

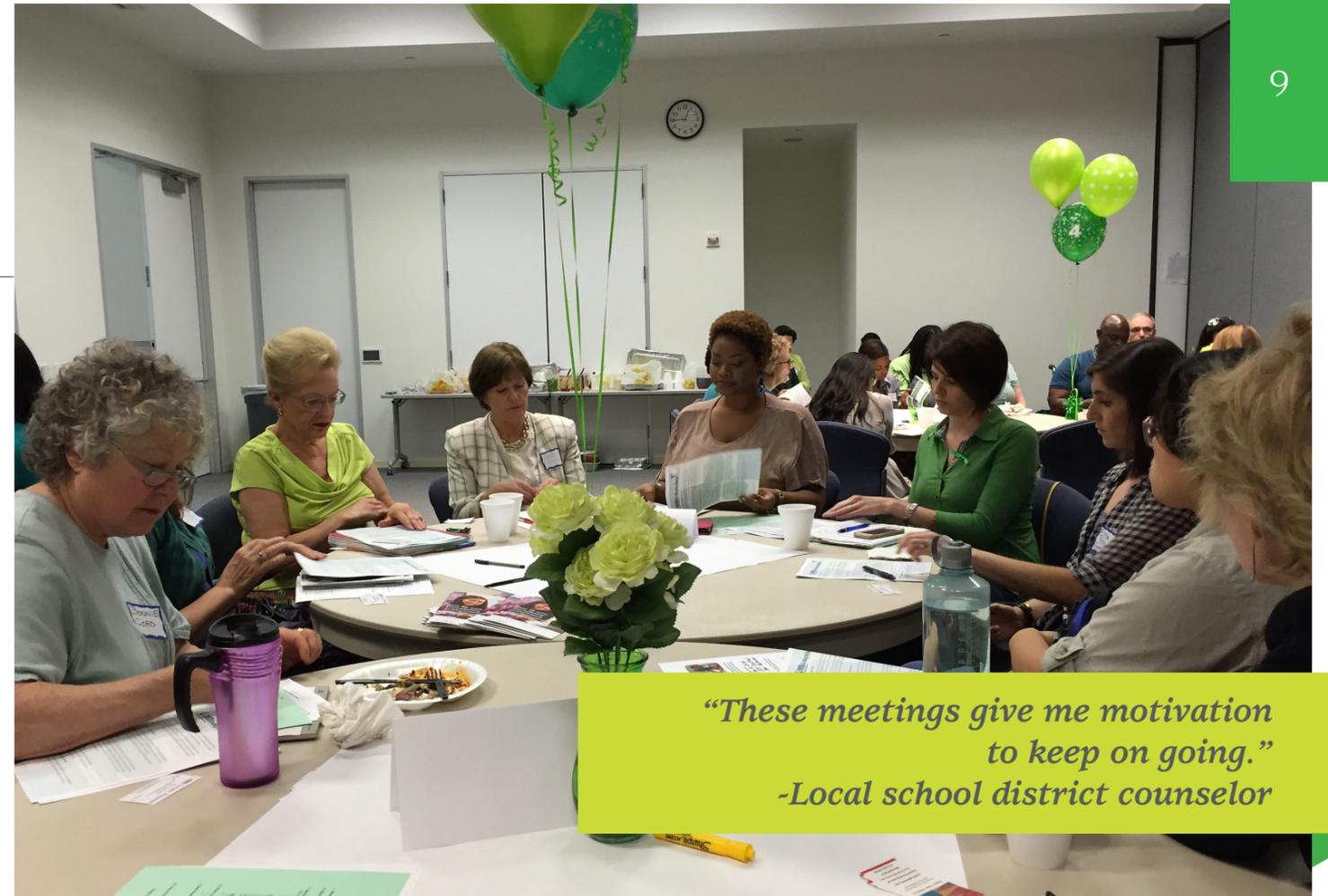
The mission of the Center is to serve as a “living laboratory” for incubating innovative, cost-effective and replicable best practices to improve the behavioral health of students by facilitating collective action; providing highly specialized professional development opportunities, technical assistance and community education; and conducting research, advocacy, and policy analysis. The Center has six components to promote children’s behavioral health through systems change.



WE COLLABORATE

We provide a foundation for organizations and school districts to build their behavioral health systems.

9



*“These meetings give me motivation to keep on going.”
-Local school district counselor*

SCHOOL BEHAVIORAL HEALTH COLLABORATIVE

We connect schools with key organizations to fill gaps in behavioral health services.

Beginning with the first convening in 2012, it became clear ongoing meetings and information sharing would be critical to effect systems change in behavioral health for students. To address this need, the School Behavioral Health Collaborative (the Collaborative) brings together representatives from school/charter school districts, child-serving agencies, educational organizations, and government officials, as well as parents and advocates, on a bi-monthly basis. Through networking and sharing of innovative behavioral health practices and policies, school districts maximize opportunities to bring new behavioral health services into schools and improve existing programs and policies.

Membership in the Collaborative has grown from 10 school districts and 30 organizations in 2012 to 26 public and charter school districts and 80 organizations in 2017.



(from left to right) Juliet Stipeche, Director of Education for the City of Houston and Donna Bahorich, Chair of the Texas State Board of Education, featured in a panel discussion at the January 2017 Collaborative meeting on education and mental health.

“

The Collaborative has become the glitter and glue of school behavioral health. The Center is the glue that holds us all together while the efforts and work of our schools and agencies is truly the glitter that reflects the amazing successes we are all seeing as we work with children, parents, the community and each other.”

LINDA RODRIGUEZ, ED.D.
COORDINATOR OF BEHAVIORAL MULTI-TIERED SYSTEM OF SUPPORT, PASADENA ISD

AGGREGATE ANALYSIS OF COLLABORATIVE MEETING PARTICIPANT SURVEYS

89%

felt the meetings were very or extremely worthwhile.

“It inspired me to begin an advisory counseling committee for my school district.”

86%

said the meetings were very or extremely relevant to them or their work.

“I meet so many great resources here.”

67%

indicated they learned a great deal about resources and information related to school mental health.

“I learn more about mental health at every meeting.”

SPOTLIGHT



**HOUSTON ISD
FOUNDING
COLLABORATIVE MEMBER**

IMPLEMENTING 12 OF 21 RECOMMENDATIONS FOR SCHOOL DISTRICTS.

“[The Center] has been essential. Almost every contact I have has been through the collaborative. For example, I just got off the phone with Legacy. I saw they are spotlighting the KIPP and YES Prep campus clinics at the next meeting...I immediately called them and said, ‘How can we get that same kind of support at HISD?’ The relationship we have with NAMI started with the Collaborative. We’ve connected with Pasadena ISD and I see them as really forward thinking. A stronger relationship with Communities in Schools has come through the Collaborative. When you have school and community organizations in the same room routinely, then I think we’re better able to connect our services. My strengthened relationship with The Harris Center led us to go from 9 colocations to 20. The Collaborative sends

a message we’ve been trying to send - that the resources to help the schools are not all found in the district office or the campuses. They’re in the community. So the district, campus and community have to work together to meet the needs of the kids. Without the Center, the district, campus and community aren’t together. I don’t think there’s any district that can say they can go at it alone. We’ve learned that PBIS alone won’t meet the needs of kids in HISD - it has to be bolstered with Social-Emotional Learning and mental health.”

-MICHAEL WEBB, PH.D., FOUNDING DIRECTOR OF SOCIAL AND EMOTIONAL LEARNING



SPOTLIGHT

MY BROTHER'S KEEPER - HOUSTON
MOVEMENT, CITY OF HOUSTON
HEALTH DEPARTMENT
MEMBER SINCE 2016

IMPLEMENTING 4 OF 6 RECOMMENDATIONS FOR ORGANIZATIONS.

"After we drafted the framework for the My Brother's Keeper (MBK) Houston System of Care, we used the Center's 37 recommendations as the measuring stick for whether we were on track for designing a model that would make a real systemic difference in a school setting. There is lots of talk about the need for social and emotional support for students, but very little conversation about the components that must be put in place within a school. The Center's 37 recommendations provide direction for all the components and systems that must be in place for there to be real support for some of our most vulnerable students and their families. There is no need for guess work. There is no time for guess work because real lives hang in the balance."

-KRISTI RANGEL, PUBLIC HEALTH
EDUCATION CHIEF

TYPES OF MEMBERS

(as of 5/31/17)

- 23 School Districts
- 3 Charter School Networks
- 6 Therapeutic Schools
- 2 Private/Parochial Schools
- 16 Child-Serving Organizations
- 13 Providers
- 3 Funders
- 24 Education & Advocacy Organizations
- 16 Public Entities

MEMBERSHIP THROUGH THE YEARS



Total Members: 42



Total Members: 65



Total Members: 106



WE EDUCATE

We engage education professionals in high-quality learning opportunities to share best practices and strategies.



*"This was by far the best conference I've ever attended during my 14-year career! Everything was truly outstanding."
-2016 Conference Attendee*

SPOTLIGHT



PROUNITAS
MEMBER SINCE 2015

IMPLEMENTING 8 OF 27 RECOMMENDATIONS FOR SCHOOLS AND ORGANIZATIONS.

"As a systems level organization that builds robust infrastructure of support for schools, service providers and community to collaborate around the whole child, ProUnitas continues to work closely with the Center for School Behavioral Health on numerous initiatives. The Center for School Behavioral Health has played a pivotal role in:

- Supporting ProUnitas in its early stages of development by providing it with a robust framework (37 Recommendations) to develop and incorporate effective mental health/Social-Emotional Learning systems

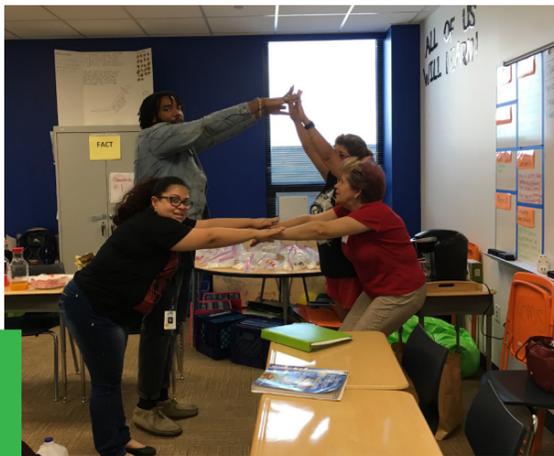
on its schools' campuses.

- Providing ProUnitas with a network of quality mental health/SEL providers to coordinate and facilitate their services on school campuses.
- Collaborating with ProUnitas as a lead partner on an inaugural BrigeUp at Menninger Grant for the 2016-2017 school year. The Center put its immense credibility and reputation behind ProUnitas (at the time had been in operation for six months) which in return played a significant role in securing the grant."

ADEEB BARQAWI, CEO, PROUNITAS

PROFESSIONAL DEVELOPMENT

We provide mental health training that gives child-serving professionals the ability to identify and appropriately respond to student behavioral health concerns.



YMHFA training participants engage in a fun activity to help them learn mental health first aid action steps.

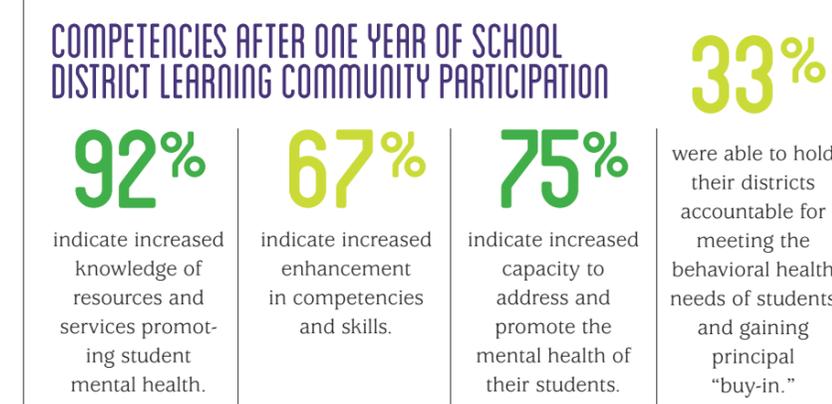
BUILDING TRAUMA-INFORMED ENVIRONMENTS

To address the needs of vulnerable youth and develop trauma-informed environments, the Center partners with agencies serving children that have a history of trauma or are at high risk of experiencing adverse childhood events.

Through the generosity of The Stanford and Joan Alexander Foundation, The Enrico & Sandra di Portanova Charitable Foundation, and The Powell Foundation, the Center funded one staff member from each of five organizations to become a certified Youth Mental Health First Aid (YMHFA) facilitator. Five facilitators from YMCA of Greater Houston, Harris County Protective Services, Harris County Juvenile Probation Department, KIPP Houston Public Schools, and Houston Parks and Recreation partnered with the Center team to train 358 frontline staff from their respective agencies in YMHFA. Through the YMHFA training, staff at these agencies increased their understanding of signs and symptoms of mental illness and enhanced their skills to assist youth that may be going through an emotional crisis.



Although the Collaborative meetings provided a platform for school districts to meet and partner with child-serving behavioral health organizations, the needs of school district administrators to have a space to share and learn from each other soon became apparent. Launched through a generous grant from the Episcopal Health Foundation in 2015, the School District Learning Community provides a bi-monthly opportunity for school district administrators to assess the status of their student behavioral health initiatives, learn from local models, share best practices, and set and achieve quality goals for improving the scope and delivery of student behavioral health services in each district.



SPOTLIGHT



PASADENA ISD
FOUNDING COLLABORATIVE
MEMBER

IMPLEMENTING 20 OF 21 RECOMMENDATIONS FOR SCHOOL DISTRICTS.

"Our district approach uses the Center's 21 School District Recommendations as a roadmap for improvement. We have created numerous partnerships of service for our students/families & awareness of other services. Specifically, we piloted a DBSA bipolar/depression group in two of our high schools; offer mental health training opportunities; refer Spanish speaking parents to NAMI; partner with The Harris Center for Mental Health and IDD and now have three LPCs dedicated to serve PISD students through our referral process, just to name a few. The School District Learning Community has helped us learn about best practices from others; i.e. SEL, action-based learning, restorative practices, etc., and we have had the opportunity to share all of our lessons

learned from a School Climate Transformation Grant received from the U.S. Department of Education. As a result, PISD has provided consultation, professional development, site visits and resources to other Collaborative member school districts and private schools. Finally, the Center has provided networking opportunities, awareness and knowledge of grant opportunities, a hub for sharing what works as well as what is not working and ideas to address those problems, highly engaging and relevant professional development through monthly meetings, newsletters, and the annual conference and grant opportunities to pilot action research in the areas of mental health and trauma."

-LINDA RODRIGUEZ ED.D., COORDINATOR OF BEHAVIORAL MULTI-TIERED SYSTEM OF SUPPORT

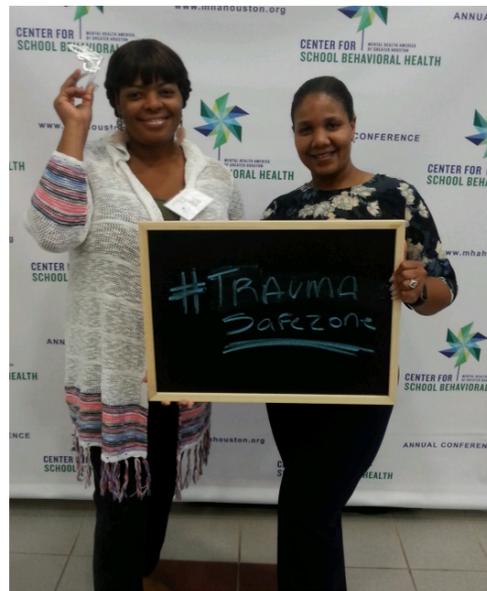
DISTRICT LEARNING COMMUNITY PARTICIPANTS

| District | # of School District Recommendations Implementing as of June 2017 |
|-----------------------------|---|
| Spring Branch ISD | 10 of 21 |
| Harmony Public Schools | 8 of 21 |
| La Porte ISD | 10 of 21 |
| Houston ISD | 12 of 21 |
| Sheldon ISD | 11 of 21 |
| KIPP Houston Public Schools | 8 of 21 |
| Cypress-Fairbanks ISD | 13 of 21 |
| Pasadena ISD | 20 of 21 |
| Channelview ISD | 19 of 21 |
| Fort Bend ISD | 14 of 21 |
| YES Prep | 6 of 21 |
| Aldine ISD | 2 of 21 |
| Humble ISD | 11 of 21 |

CENTER FOR SCHOOL BEHAVIORAL HEALTH ANNUAL CONFERENCE

We empower educators to enhance student behavioral health and provide appropriate assistance to students who struggle with behavioral health issues.

The Center for School Behavioral Health Annual Conference provides an additional strategy to support the professional growth of educators, school personnel, and staff of child-serving organizations. Designed to highlight local innovative ideas, national model programs, and research, the conference offers an opportunity for participants to meaningfully engage in dialogue with experts and colleagues, as well as learn best practices for addressing behavioral health needs in schools. The first conference, *Educator Strategies for Addressing Student Trauma*, was held in collaboration with Region 4 Education Service Center on October 21, 2016 with 300 attendees.



Conference attendees have fun with the Center's photo booth

“

We love partnering with the Center. They bring such expertise and passion to every project, and the first conference was a huge success. We look forward to strengthening our partnership and growing the conference in years to come.”

GINGER E. GATES, PH.D.,
DIRECTOR,
SPECIAL
EDUCATION
SOLUTIONS,
REGION 4



“I am the only school counselor on my campus, and [the conference] has encouraged me to challenge myself to meet the needs of all students to a greater degree. I have created more social skills groups, purchased more materials to be able to work with more struggling students, and am motivated to continue my learning journey.” **COUNSELOR, ST. FRANCIS DE SALES CATHOLIC SCHOOL**

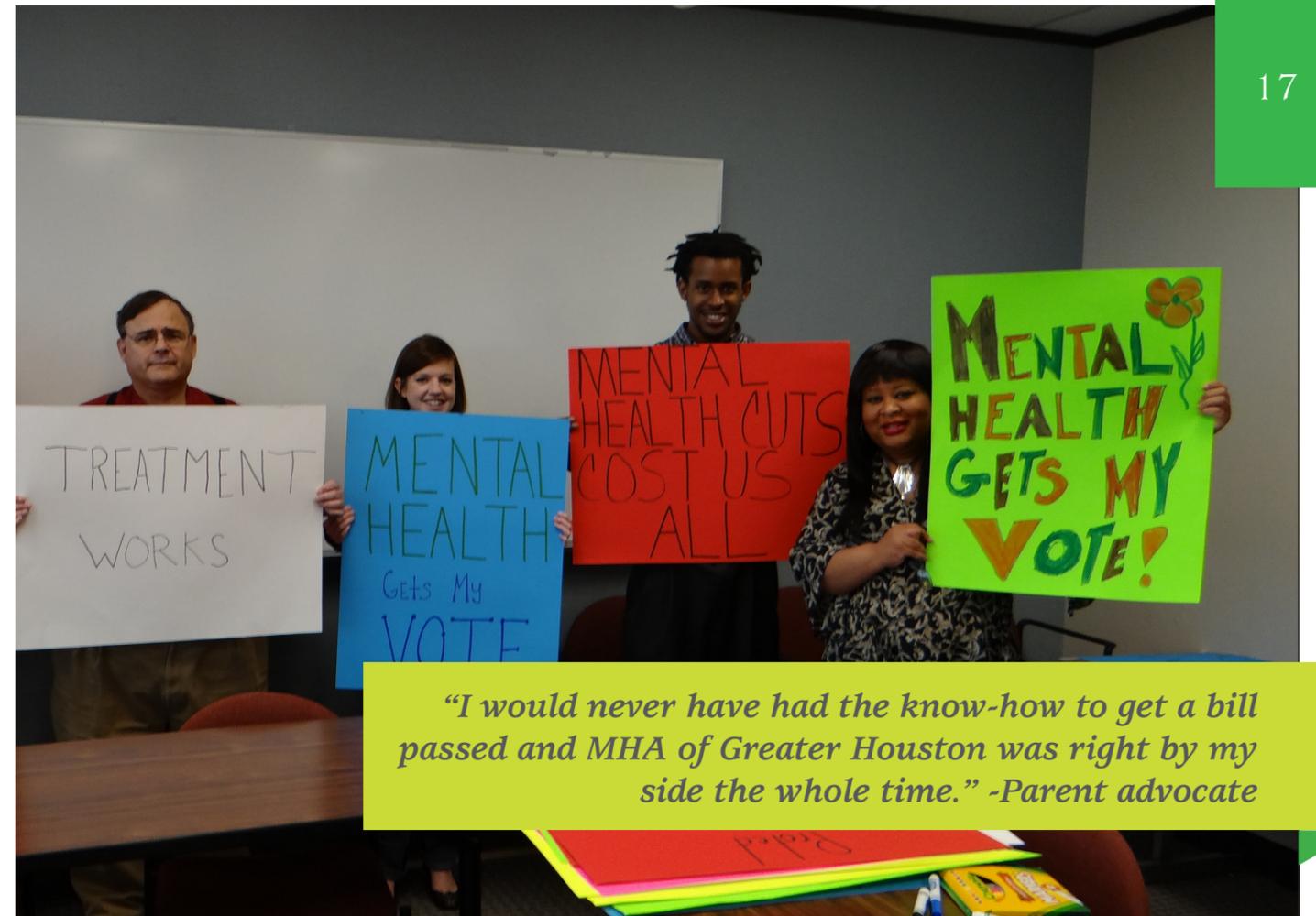
2016 CONFERENCE

| | | | | |
|------------------|-------------------------------|----------------------|--|---|
| 300 Attendees | 29 Public School Districts | 4 Charter Schools | 100% of follow-up respondents said they acquired new knowledge at the conference and have used it in their job. | 77% of follow-up respondents reported that knowledge gained from the conference led to changes in how their campus/district addresses student behavioral health. |
|------------------|-------------------------------|----------------------|--|---|



WE ADVOCATE

We champion legislation promoting children's behavioral health throughout Texas.



“I would never have had the know-how to get a bill passed and MHA of Greater Houston was right by my side the whole time.” -Parent advocate

ADVOCACY AND PUBLIC POLICY

2013

Released in time for the 83rd Texas Legislative Session in 2013, the 37 Consensus Recommendations specified in the SBHI report outlined seven areas in which the State Legislature could improve the prevention, early identification and intervention, and treatment of behavioral health issues among students. MHA of Greater Houston and colleagues statewide were able to effect progress in five of the seven Consensus Recommendations targeted at the Texas State Legislature. The 83rd Legislature appropriated funds totaling \$75 million — a 59% increase from the previous biennium — to children’s community mental health services. Included in this sum was \$2.1 million to eliminate the statewide children’s waiting list and \$5 million to provide training to educators to recognize risk factors for mental health issues and available intervention options (HB 3793, Coleman, Hinojosa). In addition to community mental health services, substance abuse funding was increased by over \$25 million. This included \$10.7 million to increase reimbursement rates to substance abuse providers; \$10.1 million to provide services to individuals identified through the Department of Family and Protective Services; and \$4.9 million to eliminate the children and adult waiting list for services.

The most comprehensive reform was the enactment of SB 460 (Deuell, Zaffirini) / HB 3224 (Coleman) in response to Recommendation seven, which mandated teacher training candidates, as well as current educators, be trained in signs and symptoms of mental health issues in students and how to assist students needing help. For the first time in the state’s history, educators would be prepared to identify early signs of student distress and perhaps, save lives.

2015

In the 84th Legislative Session, MHA of Greater Houston built upon our successful passage of SB 460 during the 83rd Legislative Session. SB 133 (Schwertner) / HB 2220 (Coleman) expanded the availability of free Mental Health First Aid training beyond teachers to include school counselors, nurses, teacher’s aides, school bus drivers, principals, assistant principals and school resource officers.

2017

During the 85th Legislative Session, MHA of Greater Houston made progress on several critical bills. The Texas State House of Representatives passed HB 3887 (Coleman, Zaffirini) to include training in trauma-informed practices for school personnel, as well as HB

BUILDING A COMMUNITY OF ADVOCATES

“The legislative victories we secured in 2013 were the result of an extreme amount of hard work among our SBHI members. We were able to present legislators with compelling research and testimony about why school personnel — who are on the front lines of addressing a host of issues among their students — must be trained in how to recognize behavioral health issues. It was truly gratifying to see the strong majorities of support the legislation received in both the House and Senate. Along with the significant funding increase for mental health and substance use prevention and treatment services, the 83rd Legislature sent a clear signal that it intended to tackle behavioral health issues head-on and provide a better quality of life for those living with these illnesses.”

-ANDREA USANGA, FORMER DIRECTOR OF POLICY AND GOVERNMENT RELATIONS, MHA OF GREATER HOUSTON

2623 (Allen, Thompson, Zaffirini) to provide transition services to youth following a placement in a juvenile justice facility, rehabilitation center or hospital for more than 30 days. Unfortunately, both bills were narrowly defeated in the Senate Education Committee by a 5-4 vote. MHA of Greater Houston’s final piece of legislation filed in the 85th Legislative Session was HB 3853 (Coleman), providing a licensed clinical social worker to every public school campus, as funding is available. HB 3853 was heard before the House Public Education Committee but not sent to a vote. These causes will remain the priorities of our future advocacy work.

MOBILIZING AN ADVOCACY TASK FORCE

The Advocacy Task Force (ATF) was created in January 2017 to engage our network in the legislative process. During the 85th Legislative Session, 19 email updates were sent to the 54 ATF members with action items included, such as posting on social media and calling representatives on behalf of our bills. A *Pizza and Politics* calling party resulted in 325 calls made to the Texas Legislature in two hours.



Advocacy Task Force members make calls to the Texas Legislature regarding HB 3887 and HB 2623.

ADVOCACY IMPACT

MHA OF GREATER HOUSTON’S ADVOCACY EFFORTS LED TO THE PASSAGE OF SB 460 IN 2013, WHICH PROVIDED FREE YOUTH MENTAL HEALTH FIRST AID TRAINING TO TEXAS EDUCATORS

2014:
2,868 trained

2015:
11,525 trained

2016:
11,774 trained

2017:
12,557 trained

TOTAL:
38,724 trained

THE STORY BEHIND THE BILL

Linda de Sosa, parent advocate, championed SB 460 through the 2013 legislative process along with Andrea Usanga, former Director of Policy and Government Relations at MHA of Greater Houston.

“The bill stalled in the House and was killed seven times before finally being passed the day before the session ended. I asked Andrea what would happen if I could make a phone call to one of my connected travel clients. She told me to go for it and I did, resulting in the path toward the successful passage of SB 460 on the day before the end of the session.

It is wonderful to see what can be done to help children with the same needs as my children. I would never have had the know-how to get a bill passed and MHA of Greater Houston was right by my side the whole time. I later learned from other states that had passed the same bill that they all used lobbyists and it took an average of three legislative sessions. I am glad I didn’t know that since we got it passed in the first one by ourselves. I just knew that I was able to channel my passion for the mission and my grief for my son to save lives, as the lieutenant governor told me when he let me know it had passed.”

-LINDA DE SOSA, PARENT ADVOCATE

SPOTLIGHT



FINDING KARIS' SMILE

Wearing a huge smile and her favorite shimmery shirt, 10-year-old Karis Lee points to her winning artwork displayed during the #HTXMentalHealth Children's Art Showcase Awards Reception and Gallery. Karis' mental health challenges began when her family relocated to Texas after living overseas - the move led her to suffer from childhood stress.

With the help of school counselors and teachers, Karis started to adjust to her new life. Through her school, Karis developed a new appreciation for drawing and its usefulness as a means to express her emotions. As part of her journey, her school counselor encouraged her to participate in the Children's Mental Health Art Showcase. Karis delightfully entered an original piece, "Running Away." The drawing depicted how she felt about herself most days in her new environment. Karis shared, "I imagine myself as a horse, calm and friendly, but ready to fight back. In this picture, I

drew everything that makes me sad or mad on thorns that are trying to slow me down and pull me back. I drew me, the horse, running away out of the thorns, toward the carrots, the things that make me joyful."

The Center is proud to offer community awareness projects like the Children's Mental Health Art Showcase to help empower children like Karis to express their understanding of mental health and how they feel about themselves. The showcase also encourages children, families and schools to have age-appropriate conversations about mental health and resources in the Greater Houston Region.

22



Each May, City Hall goes "green" for Children's Mental Health Month

OUTREACH BY THE NUMBERS

56

number of media mentions 2012-2017

176

number of Art Showcase Submissions 2015-2017

3,321

social media plays of the "Your Child's Emotional Backpack" Public Service Announcements

1,200

individuals received monthly e-newsletter with information on children's mental health resources, trainings and research.



WE INCUBATE

We improve behavioral health systems in schools and develop innovative practices through partnerships with school districts and community organizations.

23



BEST PRACTICES DEMONSTRATION PROJECTS

After the release of the February 2013 report, MHA of Greater Houston secured resources to fund pilot projects in three school districts to promote implementation of the Center's 37 Recommendations. Through what has now become known as the Best Practices Demonstration Projects, the Center provides school districts with technical support, expertise, and seed funding to partner with community organizations to design, deliver, and evaluate new ways to promote the prevention, early identification and intervention, and treatment of behavioral health issues among students. The goal of the Best Practices Demonstration Projects is to jump start comprehensive system change within school districts through the implementation of unique methodologies based on the 37 consensus recommendations.

BEST PRACTICES RESULTS (2013-2017)

2,382 Total Staff and Teachers Trained

26,120 Students Served through Direct Assistance or Referrals

2013-2017 BEST PRACTICES DEMONSTRATION PROJECTS

2013-2014

Channelview ISD
Engaged a Community Youth Services worker at the elementary level to maximize the impact of early intervention.

Goose Creek CISD
Implemented Positive Behavioral Intervention and Supports at all Goose Creek campuses.

Spring Branch ISD
Provided a specialist to reduce the recidivism rates of students transitioning to home campuses from alternative disciplinary placements.

2015-2016

Goose Creek CISD
Trained administrators, support personnel, and educators district-wide YMHA to improve student behavioral health outcomes.

Spring Branch ISD
Revamped elementary disciplinary alternative setting using action-based learning to improve student behavioral health outcomes.

2016-2017

Alief ISD
Provided mental health services and integrated student supports to all newcomer high school students.

Pasadena ISD
Advanced the implementation of trauma-informed behavioral health services in schools.

Spring Branch ISD
Maximized trauma- and bereavement-informed therapies to better support affected students by improving school climate.

YES Prep Public Schools
Implemented a universal prevention program aimed at improving student outcomes by strengthening the teacher-student relationship

BEST PRACTICES DEMONSTRATION PROJECTS IMPACT HIGHLIGHTS

ALIEF ISD (2016-2017)

78% of students had a neutral or positive Academic Improvement Rating.

88% of students experiencing trauma showed reduced trauma symptoms after program completion.

PASADENA ISD (2016-2017)

OF THE 249 STUDENTS WHO RECEIVED COUNSELING RELATED TO TRAUMA:

71% improved their score on the Universal Trauma Screener, indicating that the counseling was effective.

64% improved school attendance.

83% evidenced a decrease in office disciplinary referrals.

POSITIVE ASSESSMENTS FROM STUDENTS AND STAFF:

- Trauma-certified staff felt better equipped to provide counseling services to students who have experienced any form of trauma.
- Campus counselors recommended that every counselor in the district take these courses as a standard requirement.
- Students were eager to attend groups and disappointed if groups were postponed or rescheduled.

YES PREP (2016-2017)

82% of teachers demonstrated increased use of empathy.

SPOTLIGHT



SPRING BRANCH ISD
FOUNDING COLLABORATIVE
MEMBER

IMPLEMENTING 10 OF 21 RECOMMENDATIONS FOR SCHOOL DISTRICTS.

"Outside of the networking and learning that the Collaborative provides, the funding opportunities have also provided our district with learning that has shifted the way we have structured our organization to maximize the supports that our highest need students can access. In the 2015-16 school year, the Center funded us to re-design our elementary alternative learning program. This has allowed our district to learn concretely about how to support students who are suffering from mental illness and to seek modes of support other than suspension. Since this project was funded, we have continued to scale up our supports that now include a

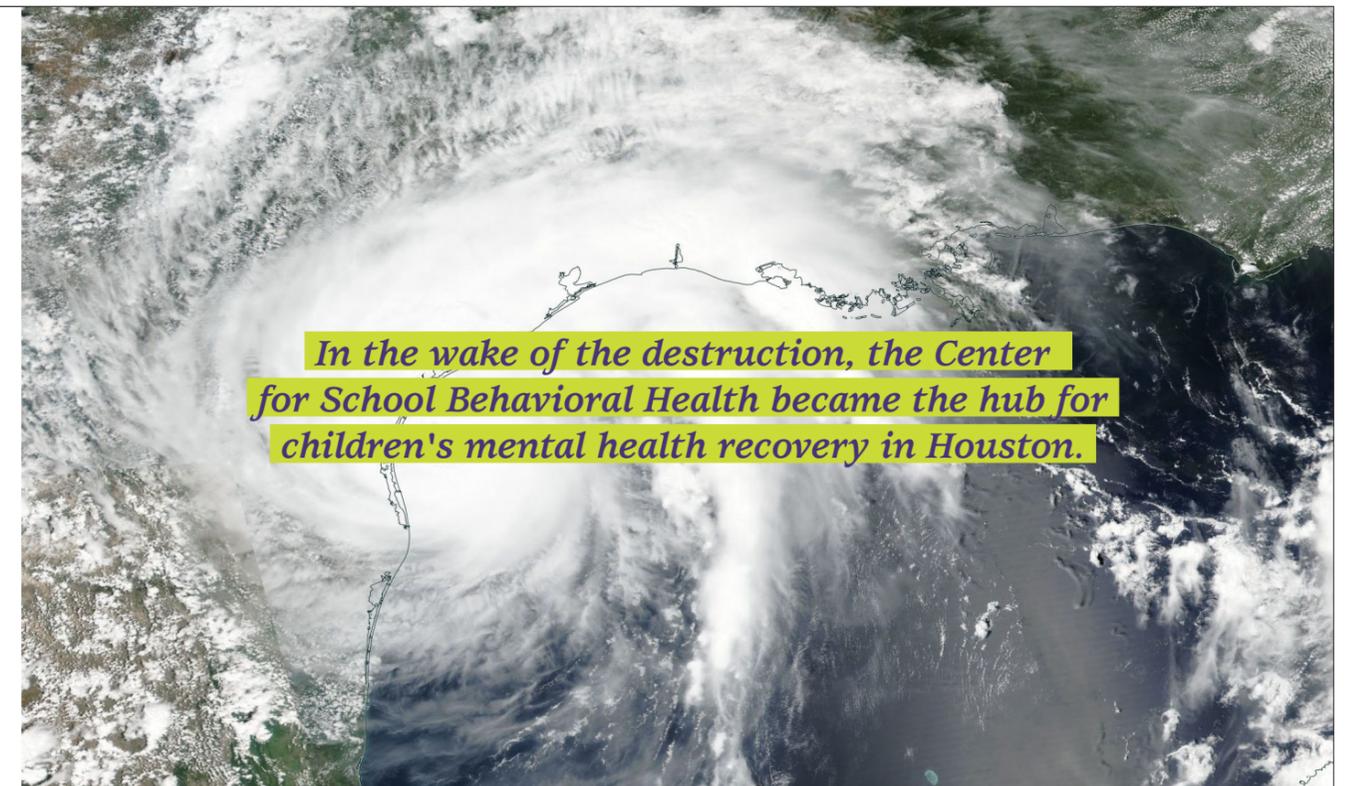
transition liaison for all students transferring back to their home campus from our disciplinary alternative centers. More recently in the 2016-17 school year, the Center funded our district to create systems and interventions that can support students suffering from PTSD and maladaptive grief. The learning that has come out of this project has been transformational and has given a reason for our most senior leaders to come together to understand the power of providing interventions for students during the school day and the turn-around that is possible when students have access to needed interventions."

NATALIA FERNANDEZ, M.A.,
DIRECTOR OF SYSTEM OF CARE



HURRICANE HARVEY

This Center for School Behavioral Health Five Year Report documents the trajectory and impact of the Center's work on system-wide improvement in the prevention, early identification/intervention and treatment of behavioral health issues among students in the Greater Houston Region, as well as the state of Texas, from April 2012 to June 2017. Although much progress has been made, the landfall of Hurricane Harvey August 26-30, 2017 brought unprecedented and accelerated change to the school mental health landscape.



In the wake of the destruction, the Center for School Behavioral Health became the hub for children's mental health recovery in Houston.

WEEK 1

- The Mayor's Director of Education and her staff identify the Center as the central coordinating organization for children's mental health recovery from the storm.
- The Center uses social media to share evidence-based trauma-related recovery resources for children experiencing natural disasters.
- The September 7th Center Collaborative meeting is revamped to focus entirely on Harvey recovery.

WEEK 2

- Center Collaborative member school districts are surveyed to assess immediate and short-term mental health recovery needs. Results indicated a need for self-care and trauma training for faculty and staff, and disaster-related resources and information.
- A new web page providing evidence-based trauma-related recovery resources for children experiencing natural disasters is added to the MHA of Greater Houston website.
- The September 7th Center Collaborative meeting welcomes 99 participants to learn about self-care and how to identify and support students experiencing trauma.
- The Center is awarded a grant through the City of Houston Mayor's Office and UNICEF to provide training in trauma-informed classroom strategies, mindfulness, and psychosocial support groups for the most severely affected schools.
- The Center is identified by Children at Risk to lead hurricane recovery efforts related to children's mental health.

WEEK 4

- The Center develops Harvey-specific trainings in trauma and mindfulness.
- Center staff begin outreach to 183 high poverty and historically underserved schools severely affected by the storm.
- Speakers for the October 2017 Conference are instructed to include trauma recovery content in all 24 sessions and two keynote presentations.

WEEK 5

- To coordinate efforts to reach affected schools, the Center begins convening 18 providers of post-Harvey mental health/trauma training and treatment.
- The Center is invited to be an inaugural participant and Executive Council member of the Governor's Hurricane Harvey Task Force on School Mental Health Supports.

ONGOING EFFORTS

- In week 6, the Center facilitates the first Harvey-related trauma and mindfulness trainings for educators. Trainings continue throughout the school year.
- In week 10, the first facilitator training for psychosocial support groups is held. Groups are held for students throughout the school year.

RECOVERING FROM HARVEY

The Center is at the forefront of Houston-area children's mental health recovery, working closely with the Mayor's Director of Education to coordinate efforts to assist the most significantly affected Greater Houston-area schools. The Houston/Harris County Hurricane Harvey Relief Fund and other philanthropic entities received donations from around the world, and a substantial portion of the funds are being used to provide behavioral health services for students. The Center partners with international aid organizations such as UNICEF and Save the Children, as well as Texas Children's Hospital's Trauma and Grief Center, to bring psychosocial education and training for teachers, students, and families. The Meadows Mental Health Policy Institute is organizing a coordinated response to develop a comprehensive and sustainable system of mental health treatment for children and their families, and the Center is an integral partner in this effort.

At the state level, Governor Greg Abbott established the Hurricane Harvey Task Force on School Mental Health Supports and invited the Center to sit on the Executive Council. The Texas Education Agency is spearheading the effort in partnership with other state agencies and community-based organizations, and will develop a list of tiered supports and resources that can be used by school leaders to address the mental health needs of Hurricane Harvey-affected staff, students and families.

Harvey was horrible, but children struggled with mental health concerns prior to the storm, and without a systems change, they will continue to do so. What is remarkable about all these efforts is a collective vision that the Harvey mental health response will lead to a new sustainable infrastructure for promoting the prevention, early identification/intervention, and treatment of behavioral health issues among students.

HEALING HARVEY'S HURT

"The Center has been instrumental in helping to disseminate trauma-informed care to those schools that were most adversely affected by Hurricane Harvey and its aftermath. Our Trauma and Grief Center at Texas Children's Hospital is eager to continue our ongoing partnership with the Center in an effort to reach the many children and adolescents who may not have any other means of accessing best practice, trauma-informed interventions. We believe that our academic-community collaborative efforts will help to provide a blueprint for other cities exposed to natural disasters for years to come."

JULIE KAPLOW, PH.D., DIRECTOR, THE TRAUMA AND GRIEF CENTER AT TEXAS CHILDREN'S HOSPITAL

“,
“
THE INVISIBLE WOUNDS LEFT BEHIND AFTER THIS STORM ARE OFTEN THE MOST DIFFICULT TO RECOVER FROM.”

-Governor Greg Abbott, Austin American Statesman, October 16, 2017

Thank you for the extraordinary drive and leadership the Center provides to the community of stakeholders here in Houston . . . I am grateful that the children of Houston have such strong advocates working on their behalf.”

LISA SZARKOWSKI, VICE PRESIDENT HUMANITARIAN EMERGENCIES AND EXECUTIVE COMMUNICATIONS, UNICEF USA



THE WAY FORWARD

As we embark upon the next five years, the Center will focus on the following priorities:

COLLABORATE Engage high-level school district administrators and school board members to encourage deep, system-wide implementation of the 37 recommendations.

EDUCATE Expand the Center's Annual Conference to reach school districts throughout the state and implement a system to assess the transfer of skills and knowledge to school and classroom practices.

ADVOCATE Promote legislation encouraging the adoption of integrated social-emotional learning for students, trauma training for educators, transition planning, and embedding behavioral health professionals on each school campus.

COMMUNICATE Expand the Emotional Backpack Project to reduce stigma and infuse behavioral health into campus culture throughout the Greater Houston Region.

INCUBATE Update the 37 Recommendations developed in 2013 and continue incubating innovative best practices to address new recommendations.

SPOTLIGHT



The inaugural cohort of Emotional Backpack Leaders attends a train-the-facilitator training at the MHA of Greater Houston office.

THE EMOTIONAL BACKPACK PROJECT

In an effort to centralize the Center's programmatic offerings and create a means for schools to infuse mental health into the campus culture, the Center expanded the "Your Child's Emotional Backpack" Campaign and created the Emotional Backpack Project. Participating schools send selected staff to two train-the-facilitator days during the school year to receive training modules on mental health signs and symptoms, suicide prevention and trauma. Additionally, trained facilitators receive lesson plans for leading a school-wide "I Wish My Teacher Knew..." campaign and a Mental Health Art & Writing Expo; parent training modules; and magnets and backpacks to promote the Project. Fourteen schools are participating in the 2017-2018 pilot program, and we look forward to watching this program grow and infuse systemic change in our local school districts.

VISION FOR THE FUTURE

CALL TO ACTION

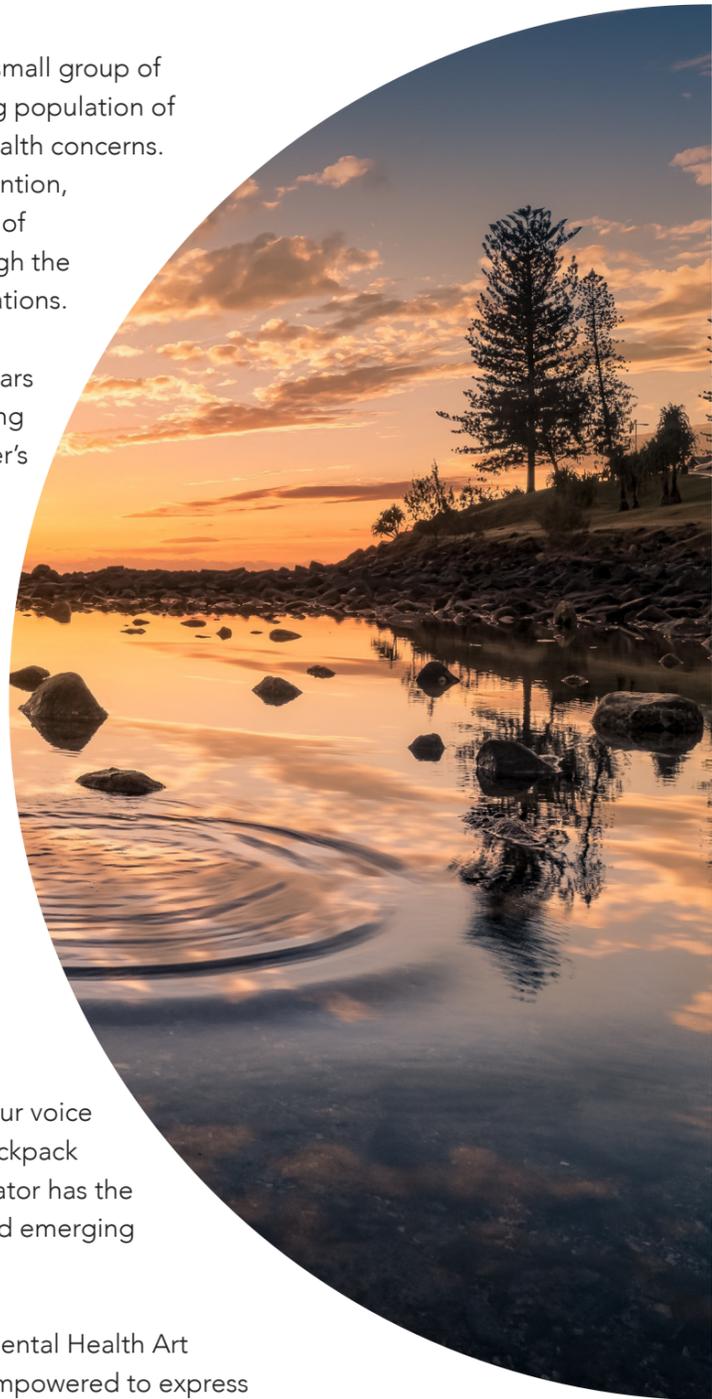
In 2012, MHA of Greater Houston convened a small group of concerned stakeholders to address the growing population of students experiencing significant behavioral health concerns. A commitment was made to improve the prevention, early identification/intervention, and treatment of behavioral health issues among students through the implementation of 37 Consensus Recommendations.

A pebble was tossed into the water, and five years later, the ripples are ever widening, now reaching thousands. The collective strength of the Center's partners - school districts, philanthropists, the business community, child-serving organizations, advocates, educational institutions, government officials, parents, and students - propels the ripples every day toward the shore.

But strong currents - in the form of stigma, low prioritization of the connection between social-emotional learning and academic success, absent early warning systems, inadequate state funding, barriers in access to care, and a shortage of qualified treatment professionals - push us back all too often. We need your help.

We need you to join our Collaborative, raise your voice in grassroots advocacy, bring the Emotional Backpack Project to every school, and ensure every educator has the information and tools to understand trauma and emerging mental health concerns.

We need your help promoting the Children's Mental Health Art Showcase so more students like Karis can be empowered to express their feelings. We need your financial support so we can continue to help schools meet an increasingly urgent need for school behavioral health transformation. And we need you to persist in shining the light on mental health so the darkness will forever be extinguished. With your help, the ripples will reach the shore.



37 CONSENSUS RECOMMENDATIONS

RECOMMENDATIONS FOR THE TEXAS LEGISLATURE

1. Restore the \$5.4 billion in education funding cuts made during the 82nd Legislature.
2. Restore the almost \$13 million in funding cuts made to Communities in Schools during the 82nd Legislature.
3. Increase funding for substance abuse prevention, intervention and treatment for children and adolescents.
4. Increase funding for children's mental health treatment services.
5. Designate at least 5% of current funding for children's mental health treatment services to prevention programs, such as mental health literacy, personal safety, and suicide prevention.
6. Appropriate General Revenue funds to increase grants for school-based health clinics.
7. Require, in educator preparation programs, that teachers receive training in the detection and education of students with behavioral health issues.

RECOMMENDATION FOR HARRIS COUNTY COMMISSIONERS COURT

Increase funding for the Community Youth Services program.

RECOMMENDATION FOR THE STATE BOARD OF EDUCATION

Adopt comprehensive standards in Social and Emotional Learning for kindergarten through 12th Grade.

RECOMMENDATIONS FOR COMMUNITY BEHAVIORAL HEALTH ADVOCATES

1. Conduct an anti-stigma, public awareness campaign regarding children's mental health issues.
2. Develop a policy paper for school districts explaining the link between behavioral health and academic performance.

RECOMMENDATION FOR THE DEPARTMENT OF STATE HEALTH SERVICES (DSHS), IN CONJUNCTION WITH THE TEXAS EDUCATION AGENCY (TEA) AND REGIONAL EDUCATION SERVICE CENTERS

Compile a list of the following programs and tools from which school districts may choose to implement:

- Best practice-based, culturally competent universal prevention (including violence-prevention), mental health promotion and positive youth development programs.
- Validated mental health and substance abuse screening instruments that school districts can use to identify students with mental health and substance abuse issues.
- Best practice-based, culturally competent mental health and substance abuse interventions.

RECOMMENDATIONS FOR COMMUNITY ORGANIZATIONS THAT PROVIDE SCHOOL-BASED SERVICES

1. Routinely track data on student outcomes and share with school personnel.
2. When possible, provide behavioral health interventions before or after school.
3. Ensure that behavioral health services are integrated into school-based medical services.

37 CONSENSUS RECOMMENDATIONS (CONT.)

RECOMMENDATIONS FOR SCHOOL DISTRICTS

1. Require teachers, nurses, counselors, principals and all other appropriate personnel to receive culturally competent training in how to recognize and appropriately respond to signs of behavioral health issues in students.
2. Implement best practice-based culturally competent mental health and substance abuse interventions.
3. Implement a best practice-based, culturally competent universal prevention program in each school.
4. Implement Positive Behavioral Interventions and Supports (PBIS), or programs with similar components, district-wide with fidelity.
5. Implement curricula focused on social skills and good decision-making.
6. Offer opportunities for parents and students to receive education about signs of behavioral health issues in students, as well as parent support groups.
7. Adopt clear and comprehensive policies that ensure students who are identified or referred receive appropriate interventions and/or referrals for services at the lowest appropriate level, including ensuring that:
 - Evaluations for Section 504 services are integrated into the RTI process.
 - The RTI process has sufficient flexibility, including providing parents and external psychological/psychiatric evaluations with a “fast-track” to a special education or Section 504 evaluation.
 - A process exists for referring students with identified behavioral health issues who are not eligible for special education or Section 504 services to appropriate community services.
8. Work with community agencies/advocates to ensure parents have information about their rights regarding referral to, and during, the Special Ed/Section 504 processes.
9. Implement strategies to improve school disciplinary policies, including:
 - Reviewing and revising student codes of conduct to minimize discretionary removals, as well as time spent in out-of-school placements.
 - Reviewing data on disciplinary placements among campuses and helping campuses with high numbers of placements to develop and implement alternative strategies, including progressive sanctions.
10. Collaborate with out-of-school district placement entities to provide transitional service plans for returning students.
11. Ensure at least one licensed behavioral health professional at each school.
12. Ensure at least one nurse at each school.
13. Create a dedicated “navigator” position in schools to help coordinate behavioral health interventions and referrals.
14. Partner with universities to fill appropriate behavioral health/navigator positions with interns/fellows.
15. Develop strategies to enroll more students in Medicaid and the Children’s Health Insurance Program.
16. Centralize some decisions about behavioral health interventions at the district level and show support for their implementation.
17. Designate appropriate space to be used for behavioral health interventions.
18. Partner with community agencies to provide behavioral health services using tele-health technology.
19. Host an annual “agency fair” so school administrators are knowledgeable of available programs to support their schools’ behavioral health initiatives.
20. Partner with community agencies to conduct comprehensive needs assessments for at-risk student populations.
21. Request parental permission to obtain and share important data with other agencies by which a student is being served in order to foster a team of support for the student.

RECOMMENDATION FOR COMMUNITY BEHAVIORAL HEALTH PROVIDERS

Review their utilization data for children’s behavioral health services and seek to coordinate the provision of services on-campus.

APPENDIX B

2018 MHA OF GREATER HOUSTON BOARD,

STAFF & TRUSTEES

MHA OF GREATER HOUSTON BOARD OF DIRECTORS

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Taylor Snyder, Development and Communications Coordinator
Rebecca Fowler, Advocacy & Veterans Behavioral Health Coordinator
Valerie James, Veterans Behavioral Health Peer Services Coordinator
James Spencer Walker, Veterans Behavioral Health Treatment Court & Wellness Coordinator
Josephine Engels, Center for School Behavioral Health Coordinator

APPENDIX C

COLLABORATIVE PARTICIPANTS

2012-2017

SCHOOL DISTRICTS

1. Aldine ISD **
2. Alief ISD **
3. Alvin ISD
4. Channelview ISD **
5. Clear Creek ISD
6. Cypress-Fairbanks ISD **
7. Dayton ISD
8. Deer Park ISD
9. Fort Bend ISD
10. Galena Park ISD **
11. Goose Creek CISD **
12. Hitchcock ISD
13. Houston ISD **
14. Humble ISD
15. Katy ISD **
16. Klein ISD
17. La Porte ISD **
18. Lamar CISD
19. New Caney ISD
20. Pasadena ISD **
21. Sheldon ISD
22. Spring Branch ISD **
23. Spring ISD
24. Tomball ISD
25. Waller ISD

CHARTER SCHOOL SYSTEMS

1. Harmony Public Schools
2. KIPP Houston Public Schools
3. YES Prep Public Schools

THERAPEUTIC/SPECIAL NEEDS SCHOOLS

1. Fusion Academy
2. Gateway Academy
3. Neuhaus Education Center
4. The Harris School
5. The HUB Houston
6. The Monarch School **
7. The Westview School
8. University of Texas Charter School

OTHER SCHOOLS: PRIVATE, PAROCHIAL, INDEPENDENT CHARTER SCHOOLS

1. St. Francis Episcopal Day School
2. St. Francis De Sales Catholic School
3. St. Michael's Learning Academy

4. Sanchez Charter School (Association for the Advancement of Mexican Americans -AAMA)

INSTITUTIONS OF HIGHER EDUCATION

1. Baylor College of Medicine
2. Lone Star College-Montgomery County
3. The Baker Institute at Rice University
4. The University of Houston
5. University of Texas Health Science Center**

BEHAVIORAL HEALTH CLINICAL PROVIDERS

1. Admore Care, LLC
2. Avida Care Services, LLC
3. Baylor Teen Health Clinic
4. Be Free Wellness
5. Bee Busy Wellness Center
6. Bo's Place
7. Children's Assessment Center
8. re:MIND (formerly Depression and Bipolar Support Alliance of Greater Houston) **
9. Family Houston **
10. Fort Bend Women's Center
11. DePelchin Children's Center **
12. Easter Seals Greater Houston
13. Good Neighbor Healthcare Center
14. Greater Gulf Coast Cooperative
15. Harris Health System
16. Houston Behavioral Healthcare Hospital
17. Houston Group Psychotherapy Society
18. Kingwood Pines Hospital
19. Legacy Community Health
20. Memorial Hermann Health Centers for Schools **
21. Montrose Center**
22. New Hope Housing
23. Nick Finnegan Counseling Center
24. Richards Institute of Education & Research
25. Santa Maria Hostel **
26. Save the Children
27. Spring Branch Community Health Center
28. To Educate All Children (TEACH)
29. Texas Children's Hospital:
 - a. Trauma & Grief Center
 - b. Public Health Pediatrics
 - c. Government & Community Relations

30. The Harris Center for Mental Health & IDD (formerly MHMRA) **
31. UTHealth Department of Psychiatry & Behavioral Sciences **
32. Vecino Health Centers **
33. Westpark Springs

PARENT ADVOCATES

1. Linda DeSosa **
2. Kay York **
3. Bonnie Cord **
4. Gayle Fisher

COMMUNITY EDUCATION & ADVOCACY ENTITIES

1. Advocates of Healthy Minds
2. Attention Deficit Disorders Association, Southern Region **
3. Children's Museum of Houston
4. Children at Risk **
5. Crime Stoppers of Houston, Inc.
6. Connect Community
7. Disability Rights Texas **
8. Doctors for Change
9. First3Years
10. Good Reason Houston
11. Houston NVC
12. Leadership for Educational Equity
13. Linkup Greater Houston
14. Meadows Mental Health Public Policy Institute
15. Mental Health America of Fort Bend
16. National Association for Mental Illness (NAMI) of Greater Houston **
17. ONE Houston
18. One Voice Texas **
19. Peace of Mind
20. PsychTrac
21. SER Jobs for Progress
22. Texans Care for Children **
23. Teach For America
24. Texas French Alliance for the Arts
25. Volunteers for America **

PUBLIC ENTITIES

1. City of Houston Health Department - My Brother's Keeper **
2. City of Houston, Mayor's Office (Director of Education)
3. Harris County Budget Management
4. Harris County Department of Education **
5. Harris County Juvenile Probation Department **
6. Harris County Commissioner for Precinct One Rodney Ellis **
7. Harris County Office of Legislative Relations
8. Harris County Precinct Three **
9. Harris County Public Health
10. Houston Police Department
11. Office of Senator John Whitmire **
12. Region 4 Education Service Center **
13. Texana Center

CHILD-SERVING ORGANIZATIONS

1. Borderline Personality Disorder Support and Recovery (BPDSR)
2. Catholic Charities
3. ChildBuilders **
4. Communities in Schools **
5. Council on Recovery (formerly Council on Alcohol and Drugs Houston)
6. CHAT - Culture of Health, Advancing Together
7. Crisis Intervention of Houston **
8. DiscoverU
9. Eating Recovery Center
10. FuelEd Schools
11. Girls Empowerment Network (GEN)
12. Harris County Protective Services **
13. Healing Species Texas
14. Lighthouse Learning & Resource
15. My Person Foundation
16. ProUnitas, Inc
17. Writers in the Schools (WITS)
18. YMCA
19. Yogiños: Yoga for Youth

FUNDERS

1. Houston Endowment Inc.
2. BridgeUp at Menninger
3. Episcopal Health Foundation

** Founding member



HOUSTON
ENDOWMENT



Mental Health America of Greater Houston

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Houston, TX 77098

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