## FOSTERING MENTAL WELL-BEING: Strengthening Support Systems at Home, School, & Beyond

#UTHealth Houston School of Public Health

MICHAEL & SUSAN DELL CENTER for HEALTHY LIVING **CATCH**<sup>®</sup> GLOBAL FOUNDATION

## **Our Moderator**



#### Abby Rose

#### **Director of Implementation & Engagement** CATCH Global Foundation













Empower school communities to cultivate Whole Child wellness as a lever for student success and social equity.



Schools embrace health as an enduring value.



Used by over **16,500** educators globally and reaching **4,300,000** youth annually



## **Our Proven-Effective Approach**



- Largest evidence-base of effectiveness
- Skills-forward approach
- Standards-aligned
- Online platform (SSO via Clever & ClassLink)
- Bilingual English & Spanish content



- Boosts utilization and subject confidence
- Engaging and FUN
- In-person, virtual, and self-paced
- Basic, booster, and advanced levels
- Fosters teamwork and health champions

## Policy, Systems, & Environment

- Needs assessments and goal setting
- Coordinated Whole Child implementation
- Promoting best practices and systems
- Institutionalization for sustainability
- Technical support and assistance





















A

Health Ed Journeys

PE Journeys

SEL Journeys

CATCH My Breath

Substance Misuse Prevention

CATCH Healthy Smiles

Sunbeatables® & Be Sunbeatable™

® & Kids Club (OST) Ie™

Early Childhood





Healthy children in a healthy world.

We advance health and healthy living for children and families through cutting-edge research, innovative community-based programs, and dissemination of evidence-based practices.

#### STRATEGIC PLAN GOALS



#### **Center Resources**



WEBSITE msdcenter.org



WEBINARS go.uth.edu/webinars



**NEWSLETTER** bit.ly/MSDCenterNewsletter



**EXPERT BLOGS** go.uth.edu/CenterBlogs



SOCIAL MEDIA



RESEARCH AND RESOURCE STATION

go.uth.edu/CenterResources



VISIT OUR WEBSITE

go.uth.edu/TexasChildHealth



## **Today's Panelists**

#### Roshni Koli, MD

#### **Chief Medical Officer** Meadows Mental Health Institute

#### Michelle Rawcliffe, MPH

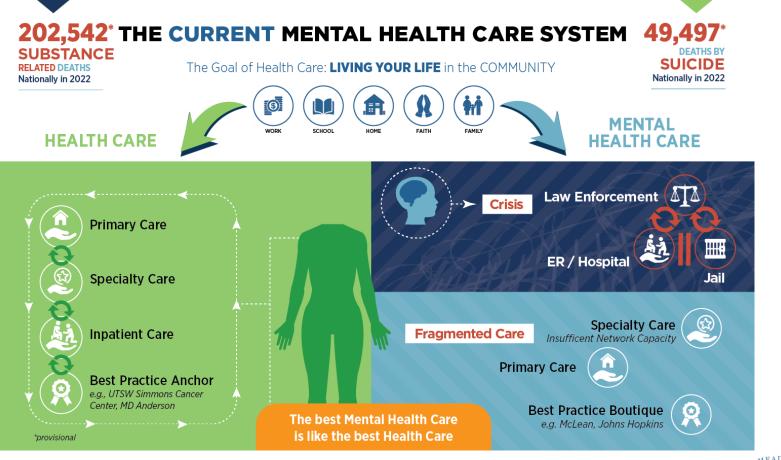
**Curriculum & Content Manager** CATCH Global Foundation

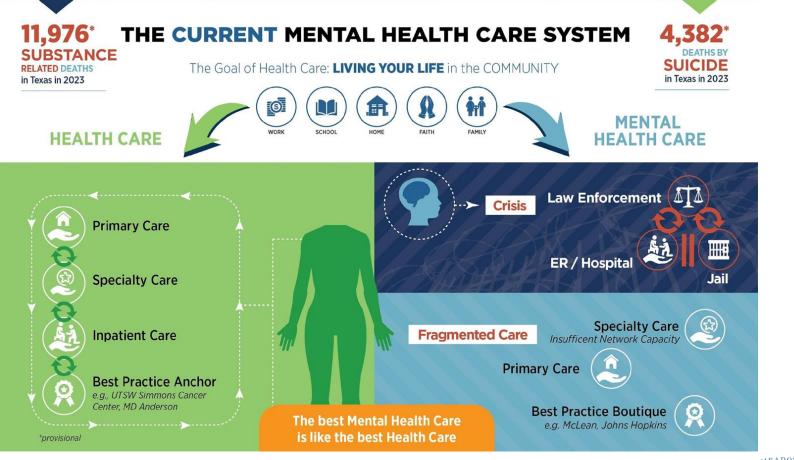




## Fostering Mental Well-Being: Strengthening Support Systems at Home, School, and Beyond

Roshni Koli, MD Chief Medical Officer Meadows Mental Health Policy Institute





| 10

#### **Current State of Pediatric Mental Health**

AAP-AACAP-CHA Declaration of a National Emergency in Child and Adolescent Mental Health

TEEN GIRLS WHO PERSISTENTLY FELT SAD OR HOPELESS INCREASED DRAMATICALLY FROM 2011 TO 2021

🛑 Teen Giris	Teen Boys	57%
36%)		
21.		29%

#### The projected costs and economic impact of mental health inequities in the United States

If left unaddressed, mental health inequities could lead to about US\$14 trillion in excess costs between now and 2040, according to our analysis

PROTECTING Youth Mental Health

The U.S. Surgeon General's Advisory

## Youth Risk Behavior Surveillance System Data

Texas (2023)

#### **Current State of Mental Health**

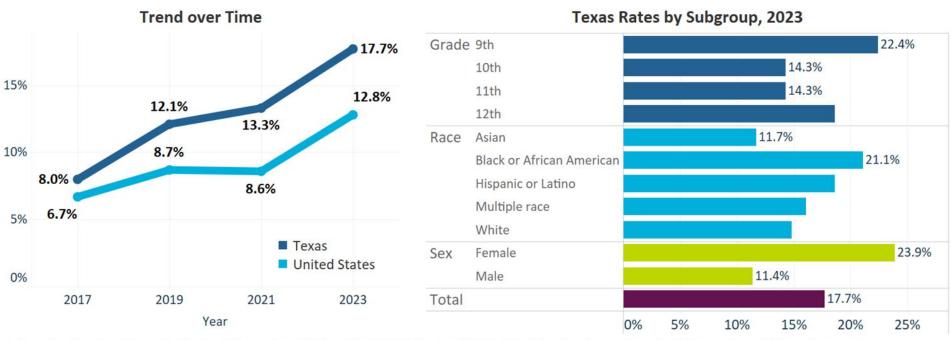
The Percentage of High School Students Who:*	<b>2011</b> Total	<b>2013</b> Total	<b>2015</b> Total	<b>2017</b> Total	<b>2019</b> Total	<b>2021</b> Total	Trend
Experienced persistent feelings of sadness or hopelessness	28	30	30	31	37	42	
Experienced poor mental health <sup>†</sup>	-	-	-	-	-	29	-
Seriously considered attempting suicide	16	17	18	17	19	22	
Made a suicide plan	13	14	15	14	16	18	
Attempted suicide	8	8	9	7	9	10	
Were injured in a suicide attempt that had to be treated by a doctor or nurse	2	3	3	2	3	3	$\diamondsuit$



In wrong direction No change In right direction

## **Safe At School**

# Percent of respondents who did not go to school because they felt unsafe

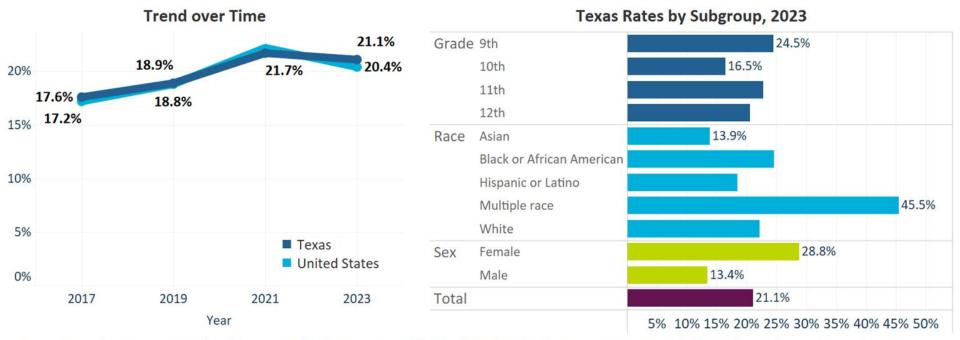


Source: Centers for Disease Control and Prevention (CDC). 1991-2023 High School Youth Risk Behavior Survey Data. Available at yrbs-explorer.services.cdc.gov.

## **Suicide and Suicidal Ideation**

YOUTH RISK BEHAVIORAL SURVEY

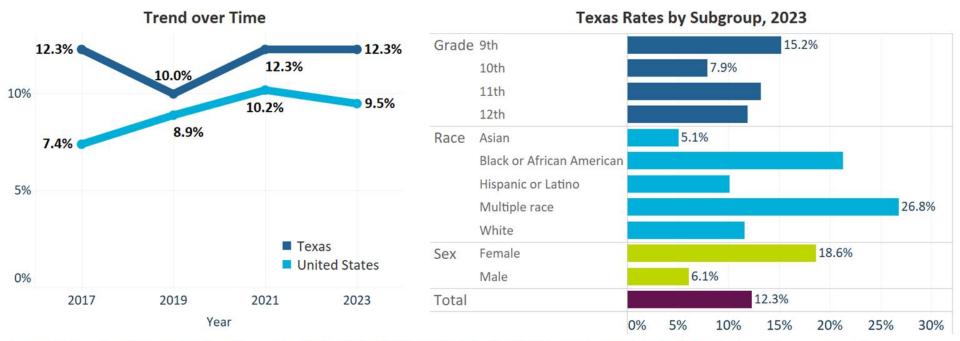
# Percent of respondents who seriously considered attempting suicide



Source: Centers for Disease Control and Prevention (CDC). 1991-2023 High School Youth Risk Behavior Survey Data. Available at <u>yrbs-explorer.services.cdc.gov</u>.

YOUTH RISK BEHAVIORAL SURVEY

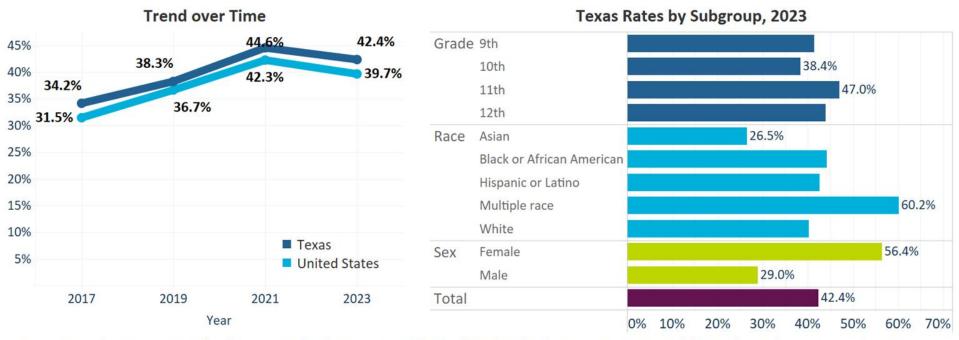
#### Percent of respondents who attempted suicide in prior 118 12 months



Source: Centers for Disease Control and Prevention (CDC). 1991-2023 High School Youth Risk Behavior Survey Data. Available at yrbs-explorer.services.cdc.gov.

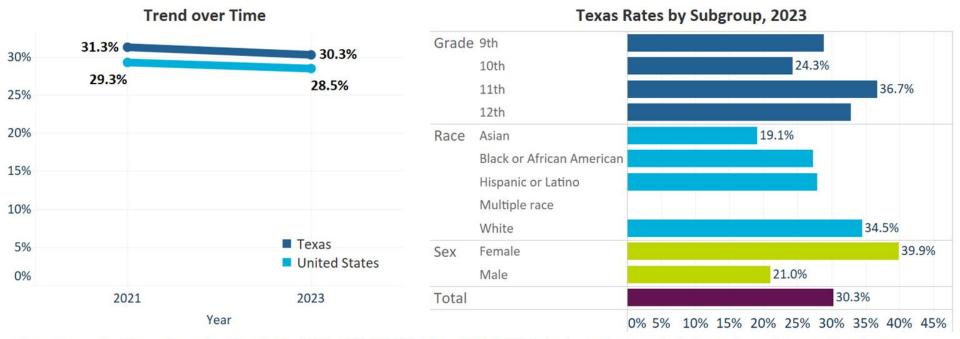
## **Depression and Mental Health**

#### Percent of respondents who felt sad or hopeless

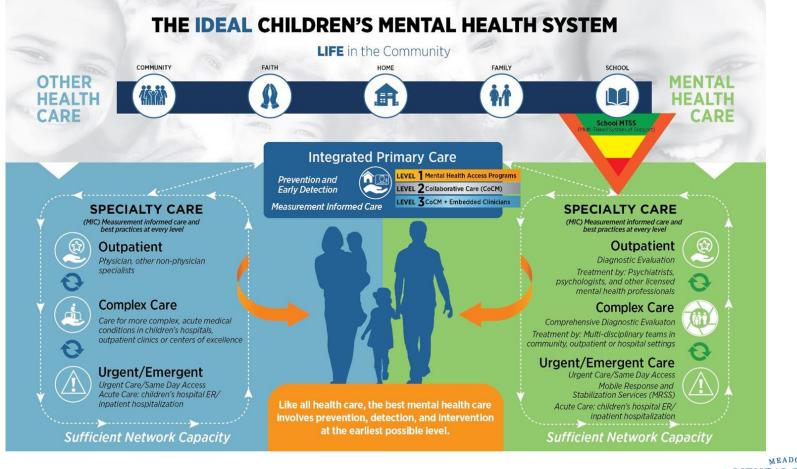


Source: Centers for Disease Control and Prevention (CDC). 1991-2023 High School Youth Risk Behavior Survey Data. Available at yrbs-explorer.services.cdc.gov.

# Percent of respondents who reported that their mental 121 health was most of the time or always not good



Source: Centers for Disease Control and Prevention (CDC). 1991-2023 High School Youth Risk Behavior Survey Data. Available at yrbs-explorer.services.cdc.gov.



## Legislative Impact

### **Sustained Success at the Texas Capitol**

Session	Medicaid Behavioral Health Budget	Total Behavioral Health Budget	Cumulative Increase	% Increase from 84th
84th (2015)	\$3.00B	\$6.59B	-	-
85th (2017)	\$3.52B	\$7.60B	\$1.01B	15%
86th (2019)	\$3.32B	\$8.20B	\$1.61B	24%
87th (2021)	\$3.68B	\$8.86B	\$2.27B	34%
88th (2023)	\$3.48B	\$11.68B	\$5.09B	77%

- Behavioral health funding in the 2024-25 budget totals \$9.37 billion, an increase of \$1.25 billion (15.3%) from the 2022-23 budget.
- The supplemental budget, SB 30, includes another **\$2.31 billion** for **inpatient facilities and mental heath capacity**.

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#### **Texas Child Mental Health Care Consortium**

#### **Key Initiatives**

	Child Psychiatry Access Network (CPAN)
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Community Psychiatry Workforce Expansion Expand Child and Adolescent Psychiatry Fellowships

### **Texas Child Mental Health Care Consortium**

#### • SB 11 – 86<sup>th</sup> Legislature

- Leveraged health-related institutions (medical schools) to improve mental health care for children and adolescents
- Created the Texas Child Mental Health Care Consortium
- \$99 million dollars to fund five initiatives
- There are 35 members:
  - 12 medical schools
  - HHSC, health systems, non-profits (including MMHPI)

88<sup>th</sup> Legislative Session: **\$337.1 million** to fully fund the request of the **Texas Child Mental Health Consortium**, including \$172.7 million to make the **Texas Child Health Access Through Telemedicine (TCHATT)** program available to any willing school district in the state.

#### **Key Initiatives**

Texas Child Health Access Through Telemedicine (TCHATT) Expand Child and Adolescent Psychiatry Fellowships

Child Psychiatry Access Network (CPAN) Community Psychiatry Workforce Expansion

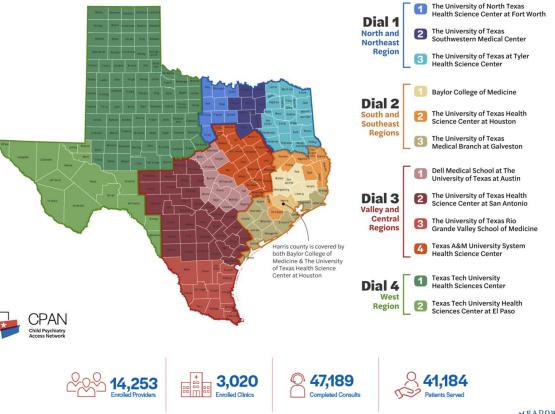
Research Initiatives (YDSRN and CTRN)

#### **CPAN**

The Child Psychiatry Access Network (CPAN) offers real-time access to a multidisciplinary network of mental health experts in regions including child psychiatrists-for peerto-peer consults by phone, vetted and personalized referrals and resources, and behavioral health CMEs.

#### Dial (888)901-2726 to reach CPAN

Then dial the numbers below for region and institution

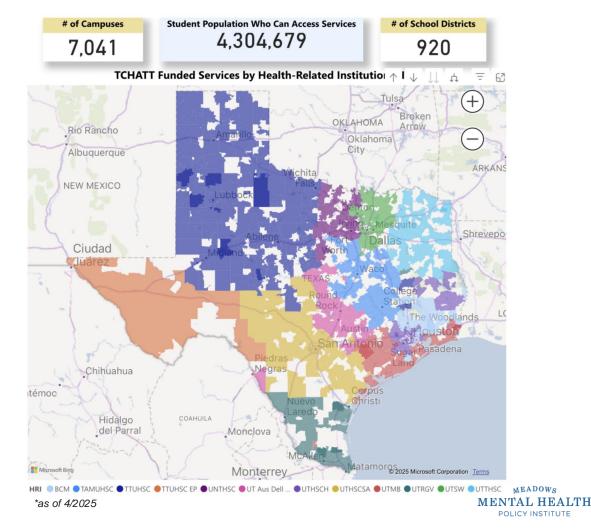


Data Through 3/4/2025

### TCHATT

Texas Child Health Access Through Telemedicine (TCHATT) provides telemedicine or telehealth programs to school districts to help identify and assess the behavioral health needs of children and adolescents and provide access to mental health services.

Funding allocated this session allows any willing district to have access to TCHATT services.



#### **Intensive Services for High-Needs Youth**

The 88th Legislature continued building out the continuum of care of intensive, evidence-based services for high-needs youth. These included:

- \$172.7 million for the Texas Child Health Access Through Telemedicine (TCHATT) to find high-risk youth and initiate intervention;
- **\$14 million** for **Youth Mobile Crisis Teams**, so communities can **respond urgently to youth in crisis**;
- \$32.45 million to sustain and expand Multisystemic Therapy (MST) team capacity to treat most at-risk youth; and
- \$4.2 million of state general revenue to expand Coordinated Specialty Care (CSC) team capacity, the gold standard of treatment for youth experiencing psychoses.

## Primary Care: Integrated Behavioral Health

### **Integrated Behavioral Health (IBH) Models**

#### Peer to Peer Consultation

Example: Child Psychiatry Access Program (CPAP)

- Primary care provider (PCP) reaches out to BH professional for "curbside consult"
- Psychiatrist discusses case with PCP or pediatrician, provides recommendations re: diagnosis and treatment alternatives
- Best used in regions with specialist shortages (e.g., child psychiatry, peri-natal, rural)

#### Colocation

Example: Primary Care Behavioral Health (PCBH)

- Psychiatrist/therapist provides direct services within primary care setting
- Short-term psychotherapy, brief consultation, ad hoc collaboration with PCP or pediatrician

#### y Integrated Care Example: Collat

Example: Collaborative Care Model (CoCM)

- Evidence-based model of care focused on improving mental health within primary care
- Patient has integrated BH team: PCP or pediatrician, behavioral health care manager (BHCM), and psychiatric consultant
- Required elements: measurement-based care and treatment registry

### **Essential Components of Integrated Behavioral Health**



### Screening



### Standardized Tracking



### Measurement **Informed Care**



### Availability of a **Psychiatric** Consultant

MEADOWS HEALTH

#### **Five Core Principles of Collaborative Care Model**

CoCM has five primary evidence-based principles

Patient-centered team care

**Population-based care** 

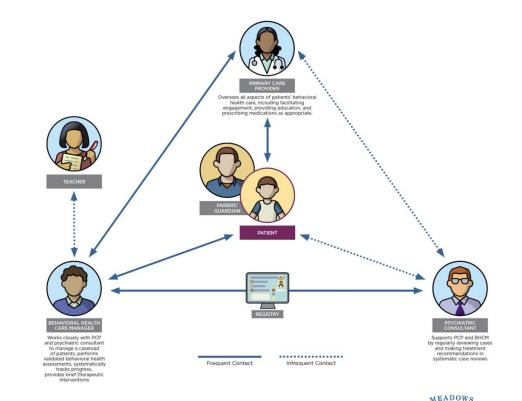
Measurement-based treatment to target

Accountable care

**Evidence-based care** 

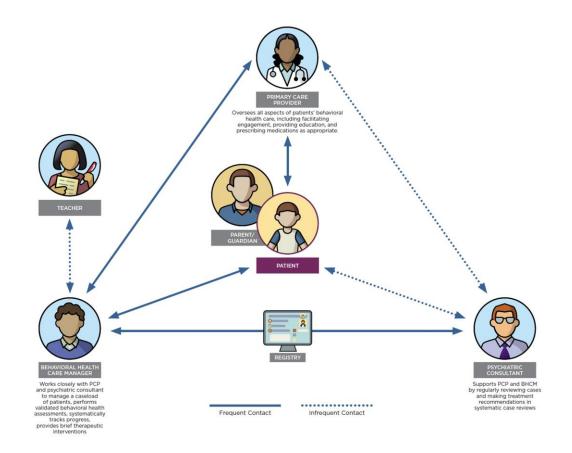
### What is Collaborative Care (CoCM)?

- CoCM is an extensively evidencebased model for integration of mental health treatment into primary care
- The model leverages a speciallytrained care manager to facilitate teambased care with the primary care provider and a designated psychiatric consultant
- CoCM is a population health intervention that prevents patients from falling through the cracks
- CoCM has been shown to be effective for various mental health problems across diverse populations and treatment settings



MENTAL HEALTH POLICY INSTITUTE

#### **Collaborative Care (CoCM) Team**





MEADOWS MENTAL HEALTH POLICY INSTITUTE

## Thank you!

Roshni Koli, MD **Chief Medical Officer** 

#### MEADOWS MENTAL HEALTH POLICY INSTITUTE



THE HACKETT CENTER FOR MENTAL HEALTH

**TRAUMA & GRIEF CENTER** Meadows Institute

Meadows Institute DALLAS

Meadows Institute PANHANDLE



# Championing Mental Health Literacy in Schools



**CATCH**°





### **District & State**

- Policies
- Resources



### Schoolwide

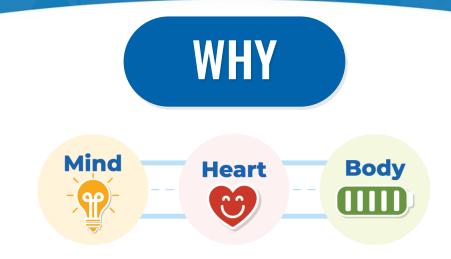
- Social-Emotional Learning
- Systems, policy, and environment



#### Classroom

- Mental Health Literacy Education
- Skills-Based Health Education

CATCH



- Impacts learning
- Impacts student behavior
- Foundational Skill Building
  - Health Literacy
  - Mental Health Literacy
  - Social & Emotional Competencies
- Improves community within the school and beyond





#### Champions

#### **Wellness Teams**





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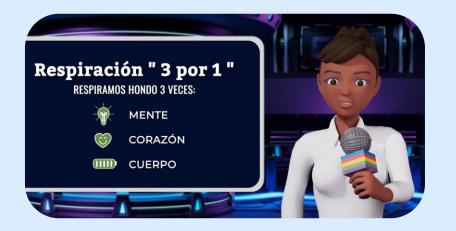


- Wellness Teams
- Data driven initiatives
- Champions & Counselors
- Behavioral Health Staff
- Family & Community Engagement
- Professional Development



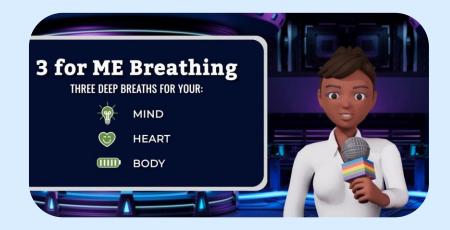
# Time for a mindfulness activity!





# **3-for-Me Breathing**











EVENTS & PROFESSIONAL DEVELOPMENT

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# **Professional Development**



catch.org/professional-development#contact



Tier 1 Mental Health Education



1-hour virtual or in-person training



Participants will learn how to implement Tier 1 mental health education, standards-aligned curriculum, and strategies to create a school culture promoting whole child wellness.



## **California & Texas Educators**









- Systems of Support
- Services and Resources
- Education
- Coordination
- School Climate
- Staff Mental Well-being

- □ Family & Community
  - Engagement
- Reducing barriers to access
- □ Culturally responsive support
- Crisis prevention
  - & intervention



Any questions?











#### Active Travel, Active Lives: A Public Health Perspective on School Commutes for



Wed, May 28

## **Thank You**

**Questions?** Contact Us!

catch.org

msdcenter.org

**@msdcenter** 



@CATCHhealth