

ThriveNYC

150-Day Update



The City of New York
Mayor Bill de Blasio

Chirlane McCray
First Lady of New York City
Board Chair, Mayor's Fund
to Advance NYC

Richard Buery
Deputy Mayor for Strategic
Policy Initiatives

Mary T. Bassett, MD, MPH
Commissioner
Department of Health
and Mental Hygiene

NYC

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Introduction and Summary of Key Milestones



ThriveNYC: An Overview

On November 23, 2015, First Lady Chirlane McCray announced the launch of *ThriveNYC*, a decisive turning point in the way New York City approaches mental health and substance misuse. *ThriveNYC* is an action plan to begin changing the way people think about mental health, and the way City government and its many partners deliver services. It includes 54 initiatives that address the mental health needs of New Yorkers at every stage of their lives. The City is investing \$850 million in this work in its first four years.

With *ThriveNYC*, our city is directly addressing a public health crisis that has lurked in the shadows for far too long. At least one in five adult New Yorkers is likely to experience a mental health disorder in any given year. And it's not only adults who are suffering—we also know that 50% of all lifetime cases of mental illness begin by age 14, and 75% begin by age 24.

ThriveNYC puts New York City at the forefront of the movement to develop a comprehensive solution to a pervasive problem. Our work is guided by six key principles:

- **Change the Culture:** Make mental health everybody's business. It's time for New Yorkers to have an open conversation about mental health.
- **Act Early:** Give New Yorkers more tools to weather challenges and invest in prevention and early intervention.

- **Close Treatment Gaps:** Provide New Yorkers in every neighborhood—including those at greatest risk—with equal access to care that works for them and their communities, when and where they need it.
- **Partner with Communities:** Embrace the wisdom and strengths of local communities by collaborating with them to create effective and culturally competent solutions.
- **Use Data Better:** Work with all stakeholders to address gaps, improve programs, and create a truly equitable and responsive mental health system by collecting, sharing, and using information and data better.
- **Strengthen Government’s Ability to Lead:** Affirm City government’s responsibility to coordinate an unprecedented effort to support the mental health of all New Yorkers.

Early Progress

This document is a product of the Mental Health Council, which was charged with releasing an update on *ThriveNYC* within 150 days of the release of the original report. We will chronicle our progress to date, identify our legislative priorities, and document other cross-agency initiatives that will drive mental wellness forward in New York City and beyond. Though not intended to be comprehensive, this update shows that less than six months after the launch of *ThriveNYC*, there is measurable progress toward our goal of creating a city where every New Yorker can thrive.



Looking Forward

That being said, our work has only just begun and will pick up speed as a number of key initiatives launch in the coming months. The “Looking Forward” section of the update outlines the work we’ve done to build these initiatives, and previews what New Yorkers can expect as these initiatives grow toward full capacity.

Below is a selection of key milestones from *ThriveNYC*’s first 150 days, which we describe in greater detail later in the update.

Change the Culture

Mental Health First Aid: We launched a citywide effort to train New Yorkers in Mental Health First Aid, which teaches people how to help friends, family members, and co-workers who may be suffering. At the end of May 2016, we are ahead of target:

- More than **2,300** New Yorkers trained in how to identify signs and symptoms of mental illness, respond in a crisis, and connect people to treatment.
- **120** instructors completed their training and have begun training others.

Public Awareness Campaign: We are changing the conversation around mental health and helping people and communities take action through a multimedia public education effort.

- **\$2-million-dollar** “Today I Thrive” public awareness campaign launched; the subway ads alone are estimated to reach 2 million people.

Crisis Intervention Training: We are working with the NYPD to provide officers with the tools and knowledge they need to de-escalate crisis situations and respond to challenges related to mental health, substance misuse and other disabilities.

- **2,500** NYPD officers trained.

Act Early

Mental Health Clinics in Community Schools: We are establishing Community Schools as trusted places where students can access a wide variety of essential services—including mental health services.

- **37** new clinics opened, with an additional **15** anticipated in the next school year.

School Mental Health Consultants: We are creating a network of Mental Health Consultants who will ensure that every school has access to experts who can help educators meet the needs of their students.

- **23** Consultants hired, with all 100 to be in place by the end of the year.

Newborn Home Visiting Program: We are bringing public health professionals into the homes of new parents to provide education on a range of topics, including child development, secure attachment and bonding, safe sleep practices, and breastfeeding.

- **281** families residing in shelters and raising newborns have been visited by a public health professional.

Creating Awareness about Relationship Equality (CARE): We are teaching healthy relationship skills to teens in foster care.

- **263** young people in foster care and 243 foster care parents and staff have participated in workshops.

Close Treatment Gaps

Maternal Depression: We will screen all pregnant women and new mothers for postpartum depression. If they need help, we will also connect them to appropriate care.

- **29** hospitals responsible for 78% of newborn deliveries in NYC annually have committed to screen all mothers in their care for maternal depression.

Runaway and Homeless Youth Shelters: We will provide mental health services for all young people in Runaway and Homeless Youth Shelters.

- **1,700** mental health interventions have been provided to vulnerable young people, and mental health services are available at all City-contracted sites.

NYC Support: We are creating one central access point for anyone who wants to connect to mental health services.

- Experienced provider selected to manage what will be one of the nation's most comprehensive and accessible systems.
- System is on track to go live in Fall 2016.

Partner with Communities

NYC Mental Health Service Corps: We are embedding mental health professionals in high-need communities at primary care, mental health, and substance use treatment sites.

- **110** Corps members selected, with a total of 125 to be hired by July 2016.

Weekend of Faith for Mental Health: We partnered with houses of worship to spread the word about the importance of talking openly about mental health and seeking treatment.

- **More than 1,000** faith communities representing 250,000 New Yorkers discussed mental health at services on the weekend of May 20-22.

Virtual Learning Center: We are creating a free, online learning center where non-clinicians can go to learn more about mental health and quickly connect to professional resources.

- **50** faith leaders provided feedback on the web-based learning center we're developing.

Use Data Better

Child Health Survey: We collected reliable, representative, citywide data on the health, emotional wellness, and development of children in NYC.

- Completed Child Health, Emotional Wellness and Development Survey (CHEWDS), a cross-sectional survey of more than **3,000** families.

Mental Health Innovation Lab: We are building a resource to support innovation and the use of evidence-based practices among City agencies and our partners.

- The Lab is supporting the roll-out of Connections to Care and Early Years Collaborative by working closely with local groups to close treatment gaps, promote prevention, and use data better.

Strengthen Government's Ability to Lead

Mental Health Council: We are bringing City leaders together to advance mental wellness.

- **20** City agencies collaborating to advance the goals of *ThriveNYC*.

We are grateful to the many partners who helped make these early achievements possible, including the New York City Council, which under the leadership of Speaker Melissa Mark-Viverito has played a crucial role in helping us put *ThriveNYC* into action.



Early Progress

CHANGE THE CULTURE

Changing the culture around mental health is a top priority of *ThriveNYC*. Stigma doesn't only intensify the suffering of mental illness—it also prevents people from seeking the treatment or other supports that can transform their lives. We must replace a culture of shame and punishment with a culture of support. Several *ThriveNYC* initiatives are already advancing this goal.



REAL-LIFE IMPACT

After participating in a Mental Health First Aid (MHFA) training, Amy* reached out to her instructors and thanked them for opening her eyes to the fears that were preventing her from reaching out to her brother, who has a long history of severe mental illness. The training helped Amy let go of her old views and taught her the importance of listening in a nonjudgmental way. In her MHFA course, Amy learned about the importance of self-help and other support strategies that she was able to recommend as a supplement to the professional mental health services her brother is receiving.

***Not her real name**

Mental Health First Aid (MHFA) Training

We wouldn't look the other way if we encountered someone who broke her leg or was suffering from an asthma attack. Unfortunately, that is often what we do when it comes to people who are suffering from a mental illness.

In order to provide New Yorkers with the knowledge and skills they need to help the people in their lives, the City has committed to train 250,000 New Yorkers in Mental Health First Aid (MHFA) over the next five years. At the end of May 2016, we are ahead of target:

- More than 2,300 New Yorkers from all five boroughs have been trained in MHFA, including First Lady Chirlane McCray and Deputy Mayor Richard Buery. The rate of training will ramp up as additional instructors receive their certifications. We are on track and project training a total of 10,500 New Yorkers by the end of 2016.
- 120 instructors have completed the week-long training, received their certification, and begun training others. This puts us on track to reach our goal of training 240 instructors by the end of 2016.
- MHFA training is now available to the public three times per week. All trainings are free, and people can sign up online at nyc.gov/thrivenyc.
- MHFA training is now offered in Spanish. We expect to offer Mandarin trainings by the end of the year.

Excerpt from People.com (2015):

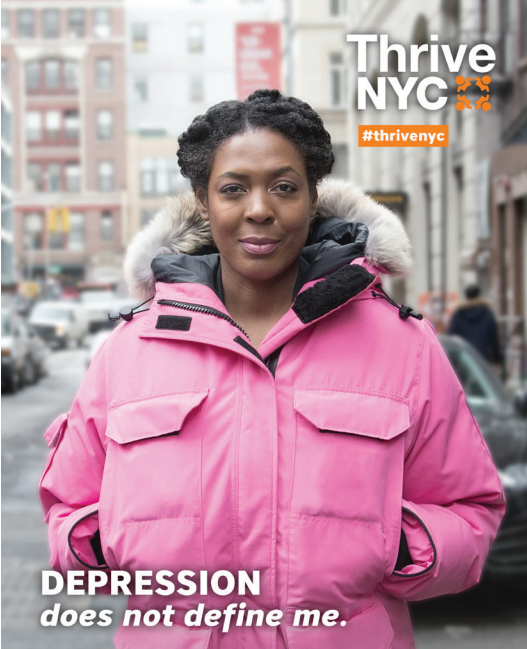
NEW YORK CITY POLICE OFFICER SAVES MAN FROM SUICIDE WITH COMPASSIONATE HUG

Officer Campoverde, who recently completed NYPD's Crisis Intervention Team training which instructs officers on how to recognize signs of mental illness, reached over the railing, grabbed the man's waistband, and pulled him to safety.

He then attempted to calm him down with a heartwarming gesture.

"Is it OK if I give you a hug, do you want a hug?" he asked, according to NYPD News.

After replying yes, the troubled man fell into the officer's arms and began sobbing.



Thrive NYC
#thrivenyc

DEPRESSION does not define me.

TODAY I THRIVE
- ASIKA

Depression can affect anyone and is treatable.
Let's talk openly about mental health issues. Together we can heal.

To learn more about mental health visit nyc.gov/thrivenyc

NYC

Crisis Intervention Training (CIT)

NYPD officers frequently encounter New Yorkers in need of mental health support. Crisis Intervention Training (CIT) helps officers effectively de-escalate crisis situations and respond to challenges related to mental health, substance misuse, and other disabilities. The City is engaged in a comprehensive effort to train both new recruits and a targeted group of active patrol officers and supervisors in CIT.

In keeping with the Mayor's Task Force on Behavioral Health in the Criminal Justice System Action Plan, the NYPD met its target of training 350 police officers in CIT by Fall 2015, and CIT has been incorporated into the NYPD Training Academy for new recruits. Building on this initial success, approximately 2,500 NYPD officers covering 115 precincts have been trained as of April 2016. Our goal is to train 5,500 officers.

Of the officers who received the training, 97% would recommend the training to their peers, and the media has reported on several cases of CIT-trained officers who helped to save the lives of people in crisis. The Mayor's Office of Criminal Justice and NYPD will conduct a robust evaluation of the training this year.

The Department of Corrections is also committed to providing its staff with the tools they need to address the mental health crisis in our jails. To date, the Department of Corrections has trained 158 Corrections officers and 61 civilians in CIT, and they expect to train 350 staff by the end of 2016.

Public Awareness Campaign

In order to change our city's mindset around the mind, we launched "Today I Thrive," a \$2-million-dollar ad campaign to raise awareness among New Yorkers about the prevalence of mental illness and the growing availability of effective treatment. The campaign—which includes TV, newspaper, social media, bus shelter, and subway ads, and palm cards in 11 languages—highlights the stories of people who are living full lives while managing a mental health condition. The subway ads alone are estimated to reach 2 million people.

Our goal is to help more New Yorkers understand that seeking help is an act of strength, not weakness. As a brave New Yorker named Bernard explains in his video, "It's up to you to admit you need help. And when the help comes, grab it and things will change."

ACT EARLY

Acting early is about helping New Yorkers develop their emotional fitness. As more of us learn positive coping skills, fewer of us will develop mental illness, and those who do will recover more quickly and completely.

We are investing in prevention and early intervention for all New Yorkers, with a special focus on our youngest citizens. In order to safeguard the future of our children, we must act early and make sure they are getting the mental health support they need, as soon as they need it. As First Lady Chirlane McCray likes to say, it is easier to grow strong children than to repair broken adults.

Mental Health Consultants Serving All Schools

While different schools have different levels of need when it comes to mental health, our Mental Health Consultants program was designed to ensure that every school has access to experts who can help educators meet the needs of their students. For the approximately 900 school campuses that do not currently have a Mental Health Clinic or other mental health resources, we are connecting them to Masters-level Mental Health Consultants. They are conducting needs assessments and facilitating training, linkages, and referrals to City and community-based mental health resources that are specially tailored to each school.

By the end of May, 23 Consultants and 6 Field Supervisors were operational and will serve 210 schools. By September, we aim to hire 40 more Consultants who will serve an additional 350 schools. We are on track to reach our total goal of hiring 100 Consultants and providing service to the remaining 340 schools by the end of 2016.

Mental Health Services in All Community Schools

We have opened 37 new Mental Health Clinics in Community Schools, and we plan to open an additional 15 in the next school year. We assessed the mental health needs of all 130 Community Schools—94 of which are also Renewal Schools—to ensure that every single one offers mental health services.

23 

Mental Health Consultants and 6 Field Supervisors are now serving 210 schools.

37

new Mental Health Clinics opened in Community Schools.



281 families received educational support from the Newborn Home Visiting Program.



REAL-LIFE IMPACT

Newborn Home Visiting Program

When Natalie* moved into a Queens shelter with her baby boy, she did not have a crib for him. When a public health professional from the Newborn Home Visiting Program learned that the baby was still sleeping in a car seat, she provided Natalie with both a crib and education on safe sleep practices.

***Not her real name**

Expansion of Newborn Home Visiting Program

The Newborn Home Visiting Program brings public health professionals into the homes of new parents to provide education on a range of topics, including child development, secure attachment and bonding, safe sleep practices, and breastfeeding. The professional also connects families to community resources and can screen mothers for depression. We have expanded the program to reach women and families in homeless shelters located in Brooklyn, Queens, Staten Island, Manhattan, and the Bronx. Since expanding into the shelter system, the program has successfully provided education and connections for an additional 281 families, and we anticipate being able to support 1,600 families living in shelter in 2017.

Relationship Counseling for All Foster Care Teens

The Creating Awareness about Relationship Equality (CARE) initiative teaches healthy relationship skills to teens in foster care so they will be better prepared to prevent, recognize, and respond to dating violence. Since launching in February, we have hosted CARE workshops for 263 young people and 243 foster care parents and staff. Our ultimate goal is to annually train 5,000 young people and 900 foster care parents and staff.



REAL-LIFE IMPACT

Services for Youth in Shelters

Alex* is a young person who was no stranger to trauma when he first came to one of the City's Runaway and Homeless Youth centers. While he enjoyed therapy, he often missed his sessions, and his mental health care was interrupted when he was incarcerated. But after leaving jail in Spring 2015, the center's mental health team was able to engage Alex with increasing consistency. By February 2016, he was regularly seeing a psychiatrist, therapist, and art therapist. Together, they explored how childhood trauma led to his aggressive and unpredictable behaviors. A few months later, he moved into a transitional house and is now working a part-time job for the first time in more than a year. Alex continues to receive mental health services and has developed close relationships with the members of his mental health team.

***Not his real name**

CLOSE TREATMENT GAPS

In order for New York City to thrive, we must expand access to care. But availability of care is not the only gap that needs to be closed. We are also working to close gaps in quality, cultural competence, language diversity, and targeting resources to those New Yorkers who need help most.

Maternal Depression Learning Collaborative

The City of New York is committed to screening all pregnant women and new mothers for postpartum depression. If they need help, we will also connect them to appropriate care.

Our first step was bringing hospital systems on board. This effort is being led by NYC Health + Hospitals, the Greater New York Hospital Association, and Maimonides Medical Center. So far, 29 hospitals representing 78% percent of all births in New York City have joined the effort. Launched in February 2016, our goal is to screen and treat all pregnant mothers in their care by the end of 2017.

Early Child Treatment Capacity Expansion

This July, the NYC Department of Health and Mental Hygiene (DOHMH) will launch a network of seven early childhood mental health therapeutic centers to serve young children who are attending an EarlyLearn Center or Pre-K for All program and have serious mental health needs. The network will be supported by a technical assistance center and citywide training program for clinic providers. We anticipate serving approximately 4,200 people each year. This represents a major expansion of the City's capacity to identify and treat children from birth to five years old who are experiencing mental health challenges.

Mental Health Services for All Youth in Runaway and Homeless Youth Shelters

As part of *ThriveNYC*, the Department of Youth and Community Development has administered more than 1,700 mental health interventions to young people in their Runaway and Homeless Youth system. These acts include psychological evaluations, service referrals, and individual and group therapy. Mental health services are available to all youth at all contracted sites. A breakdown by program area:

- Transitional Independent Living Programs: 465 interventions
- Drop-In Centers: 600 interventions
- Crisis Shelters: 719 interventions

PARTNER WITH COMMUNITIES

Mental health is a deeply personal issue, and when people are ready to seek help they often turn to the people and places they are closest to, both emotionally and geographically. A key element of *ThriveNYC* is building strong communities, and helping people develop social ties and participate in activities that promote mental health, social trust, and resilience.¹ This means connecting neighborhood residents, non-profit organizations, social centers, and local leaders with government agencies and health and mental health professionals. When these stakeholders work together to strengthen the well-being of a community, the result is often happier and healthier residents—because we know that mental health and civic health are closely related.

NYC Mental Health Service Corps

People are far more likely to ask for help if they are in a place they feel comfortable, and if they can talk to people they trust. Our Mental Health Service Corps is an unprecedented effort to deploy close to 400 clinicians to substance use disorder programs and mental health clinics, and especially primary care practices in high-need neighborhoods throughout the city. We are currently recruiting a diverse group of physicians and recently-graduated Doctoral and Masters-level clinicians to join the Corps.

We will bring the Corps to full capacity over the next three years. So far, we have hired 110 Corps members, putting us on track to reach our Year One target of 125. We plan to launch the Corps in July 2016.

Connections to Care

Connections to Care (C2C) is an innovative, \$30-million-dollar effort to bring mental health resources to community-based organizations that already provide other needed services to New Yorkers. We have selected 15 community-based organizations to partner with us on this initiative. They provide services ranging from daycare to workforce development, and reach people across all five boroughs. Each organization will bring in experts from their partner institutions to train and mentor their staff members on addressing mental health needs of low-income New Yorkers. The training will cover:

¹ Tebes, J. K., Matlin S. L., Hunter B., Thompson A. B., Prince D. M., & Mohatt, N. (June 2015). Porch Light Program - Final Evaluation Report. Retrieved from consultationcenter.yale.edu/Porch_Light_Program_Final_Evaluation_Report_Yale_June_2015_218966_1095_5.pdf

- How to identify people in vulnerable populations who might be suffering from a mental health condition
- How to provide help and use basic counseling and support skills
- How to connect people to appropriate ongoing treatment

By early 2017, C2C will have trained approximately 600 staff members at community-based organizations and served approximately 9,000 participants. We plan to serve 40,000 New Yorker over five years.

Weekend of Faith for Mental Health

Clergy members are on the front lines of the mental health crisis, and we have worked closely with them throughout the development and implementation of *ThriveNYC*. During the weekend of May 20-22, more than 1,000 faith communities representing a quarter of a million New Yorkers and a broad spectrum of religions participated in the City's first-ever Weekend of Faith for Mental Health. At mosques, churches, synagogues, and temples throughout the city, New Yorkers spoke about the importance of sharing our stories, helping those who are struggling with mental illness, and seeking treatment if we are in need. First Lady Chirlane McCray, Deputy Mayor Richard Buery, other senior City Hall staff, and City Commissioners visited congregations to help spread the word.

NYC's first-ever Weekend of Faith for Mental Health (top, bottom)



Credit: Mayoral Photography Office



Credit: Mayoral Photography Office

Early Years Collaborative

Multiple City agencies are working with more than 40 community-based organizations in the South Bronx and Brownsville to implement the Early Years Collaborative (EYC). The aim of EYC is to work with local groups to launch interventions that promote early childhood success and bonding, which are key features for long-term mental health and resilience. EYC is currently focusing on Healthy Pregnancy, School Readiness, and Secure Attachment. While still in the implementation phase, we are making great progress on community outreach. By Fall 2016, we will have collected a significant amount of community data that will inform EYC's interventions.

Workforce Summit

On May 25, we convened a full-day Workforce Summit to propose and develop shared solutions to these challenges. Advocates, academic experts, leaders of health systems and insurance plans, trainers, and representatives from our colleges and universities came together to discuss how we can work together to create the mental health workforce our city deserves, with a focus on four key objectives:

- Identify and act on strategies that help health and mental health professionals: (1) implement and lead collaborative models, and (2) coach and support task-shifted roles.
- Diversify the field by creating strategies to attract and recruit a workforce that is more ethnically and socio-economically representative.
- Develop standardized workforce data that can be collected and analyzed on a regular basis.
- Facilitate the growth and optimized use of task-shifted roles and careers, such as community health workers and peer counselors.

Workforce Summit on May 25



Credit: Mayoral Photography Office

USE DATA BETTER

For all that we know about how to prevent and address mental illness, there are still just as many—if not more—questions that need to be answered for *ThriveNYC* to succeed. We will invest in getting better data—both traditional surveillance methods and innovative tools such as crowd-sourcing—to measure our progress and determine where we need to focus our future efforts. We will also help other stakeholders use data better and adopt proven methods.

Mental Health Innovation Lab

The City is establishing a Mental Health Innovation Lab that will help drive the use of evidence-based best practices, test new strategies and interventions, and ensure that data is put to work on behalf of efforts to create real change for New Yorkers. The Lab is currently supporting the roll-out of Connections to Care (C2C) and the Early Years Collaborative (EYC).

- **C2C:** The Lab is working with the NYU McSilver Institute, RAND Corporation, and NYC Center for Economic Opportunity to help C2C grantees use data and quality improvement methods to optimize their projects.
- **EYC:** In cooperation with the Institute for Healthcare Improvement, DOHMH Division of Family and Child Health, and NYC Administration for Children's Services, the Lab is leading a Learning Collaborative of more than 40 community-based-organizations in the South Bronx and Brownsville in an effort to craft, test, and adopt initiatives that improve childhood well-being and parental attachment.

Child Health Survey

DOHMH completed the Child Health, Emotional Wellness and Development Survey (CHEWDS), a new cross-sectional survey of more than 3,000 families. CHEWDS collected reliable, representative, citywide data on the health, emotional wellness, and development of children ages 12 and younger living in New York City, including their service usage and needs. For instance, we found that 11% of NYC children aged 3 to 12 displayed emotional and behavioral problems. We also identified differences in prevalence across race/ethnicity and socioeconomic status. These findings will inform our child-focused initiatives. DOHMH is currently disseminating the findings to public health professionals and the general public.

School Mental Health Survey

The Department of Education completed a comprehensive survey of the availability of school mental health programs and resources. More than two-thirds of all schools participated in the voluntary survey, which will be used to help schools meet the mental and behavioral health needs of their students.

STRENGTHEN GOVERNMENT'S ABILITY TO LEAD

Mental Health Council

Mayor Bill de Blasio permanently established the NYC Mental Health Council in March 2016, bringing together 20 City agencies to work collaboratively on advancing mental wellness and managing *ThriveNYC* initiatives. The Council meets quarterly and serves as a key vehicle for sharing different perspectives, breaking down silos, and harnessing resources from multiple agencies to achieve common goals. At an initial meeting, the Council agreed upon three cross-agency objectives:



1) Build a Culture for Mental Health: The establishment of the Council represents a major step forward in our effort to make sure promoting mental wellness remains a top citywide priority. The diverse responsibilities of the agencies—including education, economic security, public safety, and child welfare—recognizes that every sector in our city has a role to play in creating communities and conditions that promote mental health.²

2) Improve the Workforce: Our city's workplaces—and the people who work in them—have a major role to play in promoting mental health.

Healthy Workplaces: Given how much time New Yorkers spend at work, it is imperative that employers prioritize the mental health of their employees. As NYC's largest employer, City government will lead the way by taking concrete steps to make our workplaces more mental health-friendly.

² Botezat I., Campion R. J., Garcia-Cubillana E. P., Guðmundsdóttir D. G., Halliday W., Henderson N., et al (December 2015). Joint Action on Mental Health and Well-being, Mental Health in all Policies: Situation analysis and recommendations for action. Retrieved from <http://www.mentalhealthandwellbeing.eu/assets/docs/publications/MHiAP%20Final.pdf>

Task-Shifting: Task-shifting is the idea that many types of care, prevention, and promotion initiatives can be provided, at least in part, by a range of non-specialists, including peers, family, and co-workers who are supported by specialized providers. City agencies will put this concept to work by training their staff members on the tools and skills they need to help New Yorkers who are dealing with a mental health issue.

Cultural Competence: In order to improve the workforce, we must also make sure it is as diverse as the city itself. That means recruiting New Yorkers from many different cultures so people can speak with someone who is fluent in their first language and understands where they're coming from.

3) Address Substance Misuse: The Council and the agencies it represents will play a central role in connecting New Yorkers to substance misuse information and proven harm reduction and treatment resources. These include both traditional counseling and life-saving tools like naloxone, which can prevent opioid overdose deaths. Today, thanks to a standing order issued by the Commissioner of Health, naloxone is available for purchase by any New Yorker at more than 690 pharmacies across the city. Interagency cooperation was also essential to the City's successful effort to combat the dangerous drug known as "K2," which resulted in an 85% decline in synthetic cannabinoid-related emergency department visits between July 2015 and May 2016.

Moving forward, the Council will consider other opportunities to put the combined impact, authority, and reach of City agencies to use in the fight against substance misuse in New York City.



Naloxone is now
available at more than

690
PHARMACIES
across NYC.

PROMOTE FEDERAL AND STATE LEGISLATION TO SUPPORT THRIVENYC GOALS

In order to achieve our ambitious goals and create long-term systems change, the City must partner with leaders in Albany and Washington, DC, to secure new resources and policies that will bring about better and more innovative care that is aligned with the six guiding principles of the Roadmap. As a national leader on mental health issues, New York City is also embracing this opportunity to rally support behind legislation that will benefit the entire country.

State Policy Recommendations

Recommendation: Improve Access to Screening and Treatment for Maternal Depression

Maternal depression screening and referral to treatment is essential to improving the health of both mother and child. Earlier this year, the United States Preventive Services Task Force issued a recommendation that women should be screened for maternal depression during pregnancy and after giving birth. In order to achieve this recommendation, it is critical that Medicaid policy permit infant health care providers to bill maternal depression screening to an infant's Medicaid plan, either by adding maternal depression screening to Medicaid's Early and Periodic Screening, Diagnostics, and Treatment (EPSDT) benefit, or by some other mechanism.



We support state legislation that expands women's access to **maternal depression screening**.

The City supports the New York State Department of Health's recent policy to provide Medicaid coverage for postpartum maternal depression screenings conducted by maternal health care providers and infant health care providers. However the benefits of implementation will not be realized without an additional billing policy change that would enable pediatric care providers to screen all mothers for maternal depression regardless of their Medicaid coverage, and provide confidentiality safeguards for these women.

We strongly recommend that maternal depression screening be incorporated into the EPSDT benefit, or that changes be made that will permit infant health care providers to bill the infant's Medicaid for maternal depression screening performed during the pediatric visit. Other jurisdictions, including Illinois, Virginia, Minnesota, North Dakota,

and Colorado, have already done so. This policy change will both enable and encourage infant health care providers to screen all Medicaid-eligible mothers for maternal depression during the pediatric visit, regardless of their Medicaid coverage.

Additionally, the Mental Health Council supports two pieces of proposed State legislation that would require maternal health care providers to offer a maternal depression screening for every pregnant woman and new mother.

Recommendation: Expand Telepsychiatry Services

Telepsychiatry is an invaluable tool that allows mental health professionals to provide critical services via videoconferencing to people who cannot access treatment in person for a variety of reasons, including mobility challenges, limited local options, or the stigma of being seen asking for help. As of January 2016, New York State Office of Mental Health (OMH) regulations allow for the use of telepsychiatry in OMH-licensed clinic programs to a patient at a distant location. However, both the patient and the clinician must be physically located at licensed clinics.

The City commends the State for recognizing telepsychiatry as an important treatment resource. We recommended the law be expanded to take fuller advantage of this tool.

- **Expand the range of licensed clinicians who can provide Medicaid-funded telepsychiatry services to include clinical psychologists, licensed clinical social workers, and licensed family therapists.** Telepsychiatry offers an opportunity to improve access to not only psychiatry, but also other mental health services such as talk therapy, which is often the form of treatment that clients prefer. This expansion would make it easier for people in underserved communities—for instance, Chinese New Yorkers who speak Mandarin—to get help.
- **Expand the range of locations where New Yorkers can receive telepsychiatry to include rehabilitation programs and homes.** This change should be coupled with privacy and emergency provisions to ensure the safety of patients.

With these expansions, telepsychiatry will be better positioned to fulfill its promise of helping people stick with their treatment and reducing costs related to preventable hospitalizations and emergency room visits.

Federal Policy Recommendations

In May 2016, First Lady Chirlane McCray traveled to Washington, DC, and encouraged Congressional leaders to pass The Recovery Enhancement for Addiction Treatment (TREAT) Act and the Mental Health Reform Act, both of which would make it easier for New York City to build on our initial successes.

Recommendation: Expand Access to Buprenorphine

Over the last decade, more than 7,000 New Yorkers have died as a result of an opioid overdose.

And for every opioid-related death, hundreds more New Yorkers are misusing these powerful drugs. What makes every life lost to opioids especially tragic is that we have access to medications that can help people recover. These include buprenorphine, which stops cravings and prevents withdrawal symptoms. Unlike methadone, another effective medication for the treatment of opioid use disorders, buprenorphine can be prescribed in primary care settings.

The City has already made a commitment to train at least 1,000 new providers to prescribe buprenorphine. But we could do even more with the passage of the TREAT Act, which would ease counterproductive restrictions and greatly expand the use of this lifesaving drug. Right now, federal law only allows certified physicians to prescribe buprenorphine. This shuts out nurse practitioners and physician assistants, who can prescribe virtually all other medications. Federal law also limits the number of patients a certified physician can treat. The TREAT Act proposes to change these limits in order to expand access to this lifesaving treatment.

Under the TREAT Act, the first-year patient limit for certified doctors would be lifted from 30 to 100 patients, and in subsequent years they could treat an unlimited number of patients. The TREAT Act would also allow nurse practitioners and physician assistants to administer buprenorphine.

Recommendation: Pass the Mental Health Reform Act of 2016

The Mental Health Reform Act will improve and modernize how the federal government allocates mental health funding and expand access to high-quality, evidence-based care, making it easier for the City and our partners to bring resources to the people who need them most, including new mothers and people who don't have a place to live. We are especially supportive of the Act's measure to bring mental health services into primary care locations, which will go a long way toward breaking down the wall between physical and mental health.

Looking Forward

In our first 150 days, we have laid the groundwork for a number of major initiatives that will build on our initial progress and bring the promise of *ThriveNYC* to many more New Yorkers.

NYC Support



Finding the right mental health services can be a complicated and time-consuming effort. All too often, people give up or don't even try because they can't figure out the system on their own. That's why we are launching NYC Support, an improved, expanded and centralized resource for New Yorkers searching for mental health support.

NYC Support will be the place to turn for anyone seeking mental health services, similar to how 311 serves as a single access point for City services. But we will not only guide people to resources—we will also follow up to make sure they're actually getting the help they need.

NYC Support is on track to go live in October. In April 2016, we announced that the Mental Health Association of New York City will serve as our primary partner in this effort. The Association is also bringing on Beacon Health Options, Crisis Text Line, NAMI-NYC Metro, and Community Access to support their work.

NYC Support will:

- Allow New Yorkers to speak with a certified peer specialist who can support those struggling with mental health challenges.
- Allow New Yorkers to connect with mental health resources via text messaging and the web.
- Provide ongoing non-crisis counseling, such as follow-up phone sessions.
- Provide follow-up support through phone calls or texts designed to connect NYC Support users with the care they need.
- Provide more comprehensive crisis intervention, suicide prevention, and follow-up services for individuals who are at risk of suicide.

NYC Support will be available in Spanish, Mandarin, and Cantonese, and will have access to interpretation services for the 150 most commonly spoken languages.



Social-Emotional Learning

Social-Emotional Learning (SEL) teaches students how to build healthy relationships, handle conflict, and make good choices. These skills are the foundation of a healthy and productive life, and we need to start teaching them to our children as early as possible. That's why the City is expanding SEL supports in early childhood education and care settings. Beginning in Fall 2016, the Department of Education and Administration for Children's Services will train and support 9,000 teachers, assistants and school leaders across all Universal Pre-K and EarlyLearn sites on how to use SEL skills in the classroom, and how to engage families as teaching partners.

Virtual Learning Center for Community-Based Organizations

The City is developing a free, universally-available online learning center where non-clinicians can go to learn more about mental health and connect to professional resources. Our goal is to provide useful tools and knowledge to people who are already working with New Yorkers facing mental health and substance misuse challenges. Our initial audience will be clergy and leaders in our immigrant communities. DOHMH has been meeting with potential users to make sure the Center reflects their priorities. The Center is scheduled to go live in Fall 2016.

Geriatric Mental Health in Senior Centers

Mental illness knows no boundaries, including age. Our eldest citizens, especially those who are socially isolated, are at an increased risk for depression and suicide. That is why the NYC Department for the Aging (DFTA) will place a Licensed Clinical Social Worker or a professional with similar skills in up to 25 of our largest senior centers. We will roll out this program by July 2016 and expect to reach approximately 3,750 people annually. If the initiative proves successful, we will consider bringing it to other centers.

Veterans Outreach Team Expansion

New York City is home to 230,000 veterans, nearly a quarter of whom have a probable diagnosis of post-traumatic stress disorder and/or major depression. While many services are available to those in need, more than 40% percent of veterans in New York City report being unaware of what help is available, or uncertain about how to navigate the systems that provide assistance.

We must do more to help those who have sacrificed so much to keep us safe—and we will. By the end of 2016, we will launch a NYC Veterans Outreach Team that will help veterans navigate the mental health system and connect with care, with a focus on prevention and early intervention. This work is a collaboration between the Mayor's Office and the newly created Department of Veterans' Services.

Conclusion

The full measure of a major public health campaign can only be taken after years or even decades of sustained effort. That being said, a small snapshot can yield big insights into where a movement is headed, and how quickly it's traveling toward its destination. By virtually any measure, at the 150-day mark *ThriveNYC* is on track and gaining speed.

More New Yorkers are sharing their mental health stories.

More resources are available in those neighborhoods that need them most.

More police officers have the specialized knowledge they need to confidently engage people struggling with mental illness.

More students won't have to leave their school to talk to a mental health professional.

And that's just the beginning—looking forward, there is so much more to come.

ThriveNYC

Year One Update



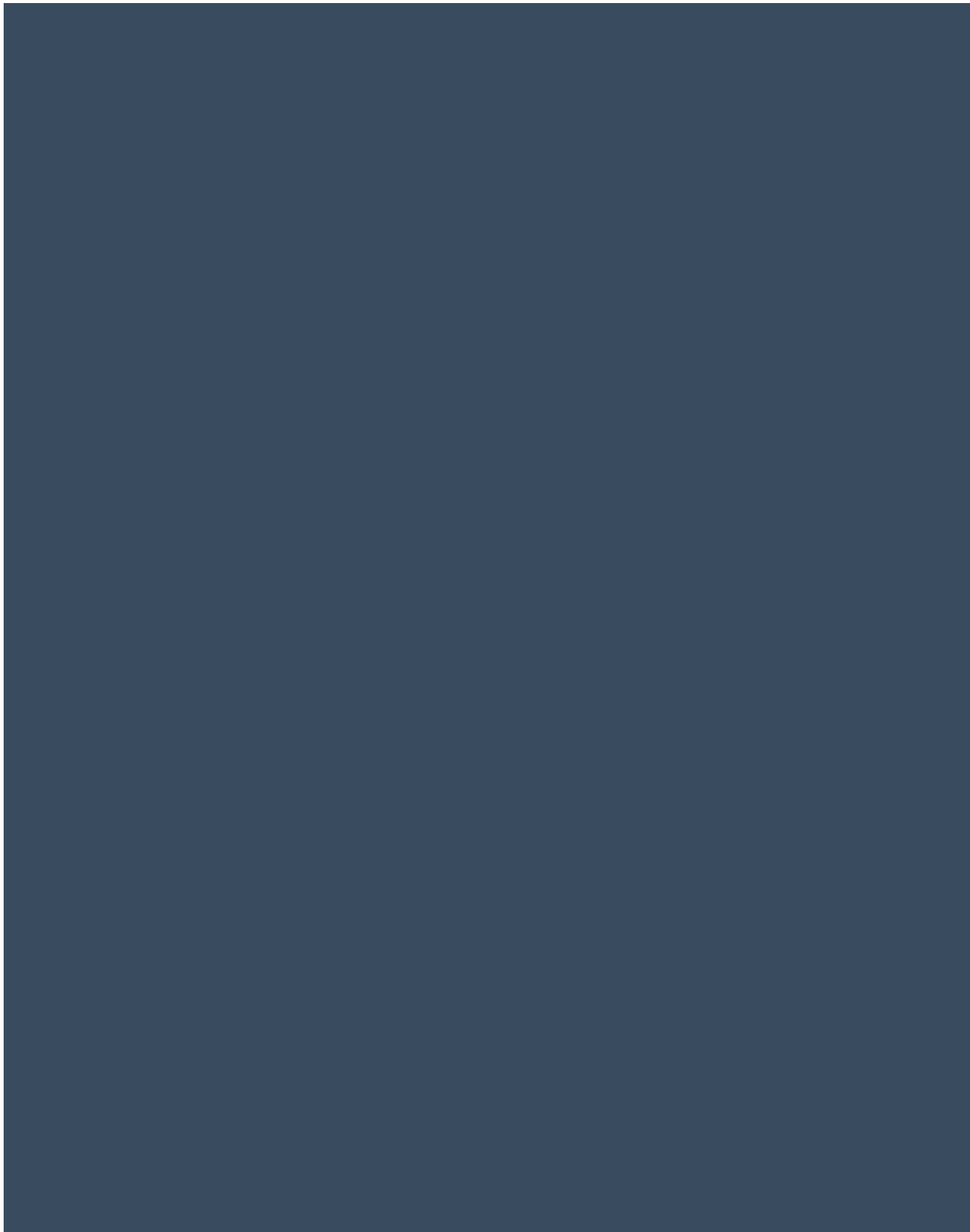
The City of New York

Chirlane I. McCray
First Lady of New York City
Board Chair, Mayor's Fund
to Advance NYC

Richard R. Buery
Deputy Mayor for Strategic
Policy Initiatives

Mary T. Bassett, MD, MPH
Commissioner
Department of Health
and Mental Hygiene

NYC



SIX GUIDING PRINCIPLES

-  **Change the Culture**
-  **Act Early**
-  **Close Treatment Gaps**
-  **Partner with Communities**
-  **Use Data Better**
-  **Strengthen Government's Ability to Lead**

INTRODUCTION

In November 2015, First Lady Chirlane McCray launched ThriveNYC, a decisive turning point in the way New York City approaches mental health and substance misuse.

ThriveNYC is a roadmap designed to begin changing the way people think about mental health and the way City government and its many partners deliver services. With 54 initiatives backed by an \$850 million investment over four years, it is the most comprehensive mental health plan of any city or state in the nation.

Nearly 80% of the 54 initiatives under the umbrella of ThriveNYC are up and running and serving New Yorkers throughout our City. The initiatives are organized into six core principles that ThriveNYC seeks to advance, which include: change the culture, act early, close treatment gaps, partner with communities, use data better, and strengthen government's ability to lead.

In practical terms, that means many New Yorkers can now get help for issues like depression and anxiety in the same place they see their primary care doctor or go to school.

More New Yorkers have received training in Mental Health First Aid, which teaches people how to recognize the signs and symptoms of mental illness and help those who may be suffering.

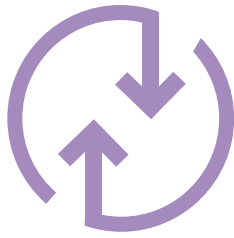
More New York mothers are being screened and treated for maternal depression.

And *all* New Yorkers now have access to confidential, high-quality, around-the-clock mental health support through their phone or computer.

This report provides details on these 2016 Year One achievements and many others. Together with our partners, we have laid a solid foundation from which to build on in the months and years to come.

First Lady Chirlane McCray, with her family, at the launch of the ThriveNYC Roadmap at the Hunter College Silberman School of Social Work on November 23, 2015.





CHANGE THE CULTURE

Changing the culture around mental health is a foundational building block of ThriveNYC. Far too many of us still think of “depression” and “addiction” as dirty words—shameful afflictions that must be hidden at all costs. And far too many of us still do not think about mental wellness the same way we think about physical wellness—as something that can be actively improved and strengthened as part of an everyday commitment to overall health. We can change that—and we are.

Mental Health First Aid

Through ThriveNYC, 250,000 New Yorkers will be trained in Mental Health First Aid (MHFA) over five years (through December 2020). MHFA educates people on how to help friends, family members, and co-workers who may be suffering from a mental health condition. It also helps to reduce biases against mental illness and allows people to more comfortably engage with mental health issues. MHFA will also train and certify 500 individuals as First Aid instructors.

Progress to Date: In Calendar Year 2016, the initiative successfully trained more than 8,400 First Aiders and 221 instructors citywide. Both of these figures are ahead of original projections.

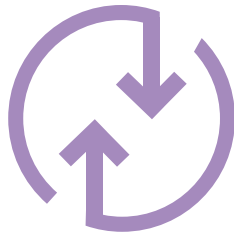
Public Awareness Campaign

The aim of this campaign is to publicly reshape the conversation around mental health by sharing positive messages about resiliency and recovery and the City’s new resources to connect New Yorkers to services. The campaign includes paid media ads on television, in public city spaces, and online. Additionally, ThriveNYC has hired an outreach team that engages the public by distributing print materials, participating in community events, and sharing information about mental health opportunities and linkages. ThriveNYC has also worked closely with the faith-based community to expand mental health awareness throughout New York City.

Progress to Date: The “Today I Thrive” public awareness campaign launched and has now reached more than 4 million people. The NYC Well campaign launched “Connect, Heal, Thrive” in October 2016 to let people know that comprehensive connection to care is now available through call, text, and chat for all New Yorkers.

Crime Victim Assistance Program

Crime victim advocates are specialists tasked with mitigating trauma in the aftermath of crime. They give victims information about the criminal justice process, help victims develop a safety plan to reduce the likelihood of repeat victimization, provide assistance with accessing needed services, such as safe affordable housing, Office of Victim Services compensation, medical care, and public benefits, and they link victims to other local service providers for additional and more specialized assistance. The City will place Victim Advocates in 77 New York Police Department (NYPD) precincts and 9 Housing Bureau Police Service Areas (PSAs). In 71 precincts and all 9 Housing Bureau PSAs there will be both a General Crime Victim Advocate and a Domestic Violence Victim Advocate. The remaining 6 precincts will have 1 Victim Advocate who will serve all categories of victims.



Progress to Date: Crime Victim Advocates have been placed in 26 precincts throughout New York City. NYPD is on target to reach all precincts and Housing Bureau PSAs by 2018.

Crisis Intervention Training

Crisis Intervention Training (CIT) provides NYPD officers and staff with the tools and knowledge they need to de-escalate crisis situations and respond to challenges related to mental health, substance misuse, and other disabilities. The ultimate goal is to train 5,500 NYPD officers by 2018.

Progress to Date: CIT training is ahead of schedule, with more than 4,900 NYPD officers and staff trained thus far.



ACT EARLY

Recognizing and treating mental health issues as soon as possible makes recovery easier and more likely. ThriveNYC's Act Early initiatives give New Yorkers more tools to weather mental health challenges. We are investing in prevention and early intervention for all New Yorkers, with a special focus on our youngest citizens. In order to safeguard the future of our children, we must act early and make sure they are getting the mental health support they need, as soon as they need it.

Mental Health Clinics in Community Schools

Community Schools are trusted places where students can access a wide variety of essential resources—including mental health services. Through school-based services—students can receive treatment on-site and return to their classrooms ready to learn.

Progress to Date: All 130 Community Schools serving more than 57,000 students received a mental health assessment. Now these schools are providing mental health services and 54 of these schools opened new clinics in the 2016-2017 school year.

Mental Health Consultants Serving all Schools

This initiative establishes a network of 100 Mental Health Consultants who will ensure that every school has access to experts who can help educators meet the needs of their students in over 900 schools without on-site services.

Progress to Date: Currently, there are 86 mental health consultants and 11 supervisors who have been hired and most are already in the field serving schools throughout the city. All 100 consultants are anticipated to be in place by March 2017.

Expansion of Newborn Home Visiting Program

An additional 1,600 mothers of newborns in New York City will benefit from the expanded provision of the Newborn Home Visiting Program in family shelters. The program includes home visits, child development education, maternal depression screening, secure attachment and bonding, safe sleep practices, and breastfeeding.

Progress to Date: To date, 904 eligible Department of Homeless Services-involved families have been visited and 593 maternal depression screenings have been provided.

During the summer, a middle school student in Brooklyn passed away from an illness. The administrators requested help to support the school community after this tragedy. Prior to the start of school, the School Mental Health Consultant collaborated with the School Counseling Manager, Principal, Assistant Principal, and the School Based Support Team to plan for a response during the first week of school. Together, they developed a plan to provide a “comfort room,” a place where students would be able to talk about their grief in a group setting.

New York City First Lady Chirlane McCray visits a Community Schools program at P.S.15 Roberto Clemente School in Manhattan, where she also discussed mental health awareness and ThriveNYC.





Relationship Counseling for All Foster Care Teens

Workshops on healthy relationships help young people prevent, recognize, and respond to dating violence. The goal of this training is to reach 900 foster care parents and staff, and 1,000 foster care youth during the first year of the program ultimately aiming to reach all 11-21 year olds in Foster Care.

Progress to Date: There are 922 foster care parents who have participated in CARE Workshops and 124 workshops that have been offered to juveniles in Foster Care, with 943 individuals served.

Social-Emotional Learning

The Department of Education (DOE) and the Administration for Children's Services (ACS) incorporate Social-Emotional Learning (SEL) into training programs to help adults build healthy social-emotional development in children. The overall initiative implements an evidence-based teacher curriculum in Pre-K for All and EarlyLearn Programs.

Progress to Date: ACS selected 80 EarlyLearn programs to receive professional development for their 1,600 center-based staff during the 2016-17 school year. ACS's Early Childhood Education vendor, the Crittenton Children's Center, will train all staff at contracted EarlyLearn centers and home-based programs in the Trauma Smart model over the next several years. In 2016, ACS began hiring social workers to provide support t

First Lady Chirlane McCray and ACS Deputy Commissioner Lorelei Vargas play "The Feelings Game" at ACS's Trauma Smart Kick-Off event while addressing Social-Emotional Learning at the Harriet Tubman Early Childhood Education Center in the Bronx on December 10, 2016.



First Lady Chirlane McCray and Deputy Mayor for Strategic Policy Initiatives Richard Buery join parents at P.S.188 for a conversation about mental health in Manhattan on March 10, 2016.



EarlyLearn contractors as they begin their training, and provided training to ACS Early Childhood Education field staff who interact with EarlyLearn programs, as well as to other staff and partners.

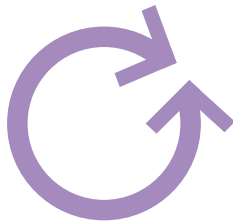


The DOE selected 115 Pre-K for All programs for intensive SEL professional development programming for the 2016-17 school year that will benefit approximately 6,000 students. Families and students alike in 19 programs participate in ParentCorps, a family-centered program designed to help young students develop the foundational skills for learning. ParentCorps will serve roughly 900 students.

In addition, DOHMH launched an Early Childhood Mental Health (ECMH) Network to provide outpatient services at seven Early Childhood Therapeutic Center clinics throughout all five boroughs for these young children, some of whom may be referred from Early Learn and Pre-K for All centers. The Early Childhood Mental Health Network also provides mental health consultation and training for teachers/staff in early learning center-based programs.

CLOSE TREATMENT GAPS

ThriveNYC seeks to close substantial treatment gaps and provide New Yorkers in every neighborhood—especially those at greatest risk—access to care and treatment when and where they need it. A key element of our vision for a thriving New York City involves expanding access to care.



NYC Well

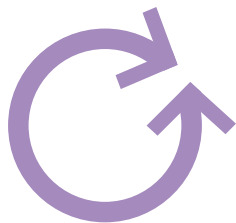
NYC Well is New York City's free, comprehensive, 24/7/365 one-click, one-call point of access to mental health and substance misuse services. New Yorkers can connect to NYC Well in over 200 languages by calling 1-888-NYC-WELL (1-888-692-9355), texting the word WELL to 65173, or chatting with a counselor or peer specialist at www.nyc.gov/nycwell. NYC Well provides confidential crisis counseling, referral to behavioral health services, mobile crisis, follow-up services, short-term counseling, and peer support services.

Progress to Date: In October 2016, NYC Well successfully launched. More than 20,000 calls, texts, and chats were received during the first full month of the program.

CUNY Mental Health Digital Platform

The CUNY mental health digital platform provides students with high quality, low cost mental health services and self-care resources in a way that is familiar and comfortable for them to use. Students can access information and resources online and from their phone or mobile devices, and can download vetted applications related to mental health, health insurance, food security, and reproductive health. This approach aims to reduce the stigma of getting help for mental health problems and encourages students with mental health concerns to reach out to campus or community-based services. Student use and preference will be surveyed to see which they deemed most helpful.

Progress to Date: In October 2016, MyCUNY Canvas launched a web and mobile-based service that provides an online interactive and anonymous peer-support network, self-improvement tools, and emotional health resources. Also in October 2016, the HealthyCUNY App launched on multiple CUNY campuses, providing CUNY students with resources for maintaining positive mental health, sexual health, food and fitness assistance, health insurance, and benefits. As of December 2016,



At a NYC Baby Shower, a mother bonds with her newborn to foster healthy emotional development at the New York Public Library on February 6, 2016.

When Alex* arrived in New York City from the Southwest after his family rejected him because of his gender identity, he was homeless and at risk for poor behavioral health outcomes. Alex heard about DYCD-funded programs and visited the Uptown Drop-In Center for service. He was connected with a safe place to stay. Over time, Alex developed relationships with a number of staff members, including a therapist, who is supported with funding through ThriveNYC. Through this relationship and ThriveNYC services, Alex engaged in new and healthier forms of self-care.

* Name has been changed

HealthyCUNY had 5,354 page views.

Close Gaps on Maternal Depression

New York City set a goal to screen and treat all pregnant women and new mothers for pregnancy-related depression in hospitals and clinics that participate in a citywide collaborative. NYC Health + Hospitals and Maimonides Medical Center committed to reach and serve each of the women in their care within two years. NYC Health + Hospitals and Maimonides Medical Center, along with the Greater New York Hospital Association and NYC Department of Health & Mental Hygiene, are leading a collaboration with 29 participating city hospital systems to close this treatment gap. These hospitals are responsible for 80% of the live births in New York City.

Progress to Date: Participating hospitals identified 34 clinic sites for screening, connecting women to care and treatment, and expanding access to supports for more at-risk-women. Over 100 members of the collaborative have been provided training in Perinatal Mood and Anxiety Disorders (PMADs); participate in monthly team learning sessions; implement a model where doctors, nurses, and nurse practitioners are working with behavioral health care managers actively involved in depression maintenance, and use data to enhance standards of practice, screenings, and treatment referrals.

Expand Access to Buprenorphine

Buprenorphine is a medication that helps people recover from opioid addiction by preventing withdrawal symptoms and stopping cravings associated with addictions. We will train 1,000 new primary care providers over three years to prescribe this crucial medication.

Progress to Date: Beginning in July, 81 primary care prescribers have been successfully trained, surpassing the goal of training 75 prescribers in 2016.

Expand Access to Naloxone

Naloxone is a medication that reverses overdose from heroin and opioid analgesics. Making this medication widely available means that more people have a tool to save lives. The aim of this initiative is to distribute 7,000 naloxone kits citywide.

Progress to Date: Opioid Overdose Prevention Programs have received 7,575 naloxone kits, surpassing ThriveNYC's original distribution goals.

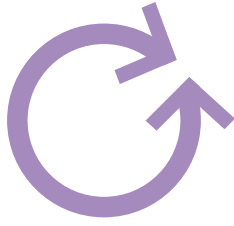
Runaway and Homeless Youth Shelter Services

Serving young people in the City's Runaway and Homeless Youth residential programs and drop-in services, including many LGBTQ youth, this program provides mental health sites for a vulnerable population.

Progress to Date: Mental health services are available to youth at all contracted sites. There have been 616 interventions, which include psychological evaluations, service referrals and individual therapy, provided in Transitional Independent Living Programs. There have also been 779 interventions in Crisis Shelters and 1,327 interventions in Drop-In Centers, with 1,676 youth having participated in group counseling sessions.

Geriatric Mental Health Services

Licensed Clinical Social Workers and professionals with similar skills will be placed in 25 of the City's largest senior centers to provide expert on-site



First Lady Chirlane McCray visits the Council Center for Senior Citizens and meets with a group of seniors to understand their perspectives on mental health services in Brooklyn on December 7, 2016.



clinical services and offer engagement sessions. Seniors are introduced to relationship-building games that help develop close connections between their peers and the clinical staff. These informal sessions also destigmatize mental health and promote a smooth transition in advance of clinical services. The mental health professionals, who will serve seniors from nearby centers as well as from the surrounding communities, will provide mental health services to approximately 3,750 people every year.

Progress to date: Social workers were placed at 15 of the 25 proposed senior centers during the first year. As of December 2016, 5 of the 15 centers had begun providing clinical services on-site and all 15 centers offer engagement sessions. Over 4,476 seniors have already benefited from these activities.

Peer Specialist Training

Peer support staff in mental health, substance use, and community health are an emerging workforce. People with lived experience offer an evidence-based approach to help peers by providing education, support, and coaching. Certain types of peer work are now reimbursable by Medicaid. Given the growing demand for services, an equally growing workforce is needed. The training prepares a peer to take the test to become New York State certified, which allows individuals who are currently working as peer specialists to maintain their jobs and equips those entering the peer support workforce for the first time to obtain entry-level employment opportunities.

Progress to Date: Training has begun. The first 38 peer specialists graduated from the program as of December 2016.

Workforce Summit

An expanded and culturally competent workforce is needed to reshape and expand New York City’s mental health workforce through the implementation of collaborative care models, as well as the recruitment of a socio-economically, ethnically diverse workforce.

Progress to Date: In May 2016, DOHMH convened a full-day Workforce Summit to propose and develop shared solutions to challenges related to strengthening the city’s mental health workforce. A Workforce Summit report is scheduled for release in early 2017. The final report provides action plans to address the following four areas for mental health workforce improvement: 1) diversify and expand the mental health workforce in New York City; 2) enhance existing mental health training programs; 3) create better pipelines and career ladders for peers and community health workers; and 4) develop metrics for improving the mental health workforce in New York City.

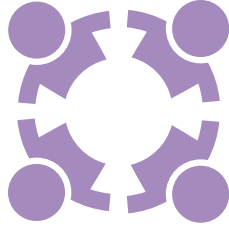


Participants engage in a learning session during the Workforce Summit at CUNY on May 25, 2016.

PARTNER WITH COMMUNITIES

Mental health is a deeply personal issue, and when people are ready to seek help they often turn to the people with whom they are closest, both emotionally and geographically, including family members, friends, faith leaders, neighborhood elders, or a friendly staff member at a local civic organization. That is why ThriveNYC seeks to embrace the wisdom and strengths of local communities by collaborating with them to create effective and culturally competent solutions. We must provide them with the options and information they need to be of service when one of their





A young man with a previous diagnosis of clinical depression enrolled in an internship program at a community based organization (CBO). He learned of the death of his father while at his internship site. When asked whether he had someone who he could speak with to help him cope with the grief after the death of his father, the young man replied that he had a counselor at the CBO—a counselor hired through Connections to Care (C2C). The internship site staff realized that seeing a C2C counselor helped him deal with the loss of his father and also helped improve his clinical depression. The site staff followed-up with him to ensure that he continued treatment to support him through his grief. Due to his well-established rapport with the organization's C2C counselor, the client reached out to his counselor and is continuing to meet with him regularly to help support his healing process.

The C2C counselor has continued to work with the young man to keep him engaged in his current internship and educational opportunities and to help support his mental wellness.”

First Lady of New York City Chirlane McCray speaks about ThriveNYC at Masjid 'Eesa ibn Maryam (Jesus, Son of Mary Mosque) in Queens on May 20, 2016.



neighbors is dealing with a mental illness, and recognize that strengthening social ties and creating vibrant communities is the foundation for good mental health.

Mental Health Service Corps

The Mental Health Service Corps (MHSC) program is an unprecedented effort to take mental health care to the neighborhoods that need it most. Over three years, this program aims to deploy close to 400 physicians and Masters and Doctoral-level clinicians to work in substance misuse programs, mental health clinics, and primary care practices in high-need and under-resourced communities throughout the city. Corps members, who can put the hours they work toward meeting licensing requirements, receive training, supervision, and coaching rooted in the principles of ThriveNYC.

Progress to Date: In the inaugural class of Mental Health Services Corps, there are 112 clinicians actively serving over 3,000 New Yorkers in behavioral health and primary care settings citywide.

Connections to Care (C2C)

C2C is a \$30 million dollar effort that integrates mental health support into the work of community-based organizations that serve low-income New Yorkers across all five boroughs. The organizations range from daycare to workforce development providers. Each entity partners with a mental health provider to train and mentor their staff members on addressing mental health needs of low-income New Yorkers. Community-based workers learn and use the following four mental health care practices and skills with C2C participants: screening, psychoeducation, Mental Health First Aid training, and motivational interviewing. The Year 1 goal was to train 669 CBO staff in these methods and to serve 2,483 within six months of launch. Ultimately, this partnership will serve up to 40,000 New Yorkers over five years.

Progress to Date: There have been 725 CBO staff members supporting the needs of New Yorkers who regularly participate in the 15 community-based organizations that are part of the Connections to Care initiative and, thus far, C2C has provided services to nearly 2,500 individuals.

Weekend of Faith

Clergy members are strong voices in their communities. That is why the City partnered with them to organize a Weekend of Faith for Mental Health that invited faith leaders across the City to participate and speak on the topic of mental health.

Progress to Date: On the weekend of May 20-22, 2016 more than 1,000 faith communities serving 250,000 New Yorkers from a broad spectrum of faiths came together to openly discuss mental health. Faith communities discussed the importance of helping those who are struggling with mental illness and the need to end the stigma that prevents people from seeking care. First Lady Chirlane McCray, Deputy Mayor Richard Buery, and other City leaders visited mosques, churches, synagogues, and temples throughout the city to support this effort.

Early Years Collaborative

This collaborative promotes the health and well-being of young children in New York City through a partnership with City administrators and



partnering CBOs. Since 2015, the Early Years Collaborative has coached CBO staff on assessing whether their current methods of working with 0-3 year olds promotes the following three areas: healthy pregnancy, school readiness, and secure parent-child attachment. Through data collection, the collaborative strategically improves this work, specifically with regard to the three outcomes noted above. Ultimately, through engaging in the EYC’s “improvement strategy,” CBOs can work collectively in their respective communities to improve the lives of young children, parents, and caregivers.

Progress to Date: The Early Years Collaborative (EYC) has worked with approximately 40 South Bronx and Brownsville Health and Human Services organizations. In addition to individual learning and data sharing sessions, EYC hosts site visits monthly and 70% of partnering organizations participate in these activities at any given time.

Friendly Visiting to Combat Social Isolation Among Seniors

Many homebound older adults suffer from the ill effects of social isolation, which can include depression and anxiety. Friendly visiting offers seniors an opportunity to develop and nurture long-lasting friendships with trained volunteers who spend time with them in their homes and with whom they can share ideas, mutual interests, and experiences. Many of the volunteers are trained in Mental Health First Aid and can recognize when to refer seniors for professional assistance. The Friendly Visiting Program aims to serve up to 1,200 seniors each year.

Progress to Date: The program launched in July 2016 and has begun providing services to homebound seniors, serving 362 older adults so far.

USE DATA BETTER

Data collection and analysis are a key part of any evidence-based decision making process. It also helps us to demonstrate that these are initiatives worth investing in. When providers routinely use real-time data to inform individual care outcomes, it can markedly improve their ability to ensure that the patient is receiving the right care in the right order. ThriveNYC seeks to work with all stakeholders to address gaps, improve programs, and create a truly equitable and responsive mental health system by collecting, sharing, and using information more strategically. Using data better enables us to learn what is and is not working, and to try different strategies as needed.

Mental Health Innovation Lab

The Mental Health Innovation Lab aims to drive the use of evidence-based best practices and provides necessary technical assistance and support to City agencies and local service providers. There is a need for a central repository of information regarding best practices that supports innovative strategies that help to close treatment gaps. The Lab allows City agencies to share information about successful program implementation, creates opportunities for collaboration, and supports demonstration of effectiveness. In addition, the Lab helps put research findings into practice and provides learning collaborative approaches and quality improvement methods. The Lab also identifies and applies innovative strategies and tools for collecting data and informing decision-making.



Progress to Date: The Lab has established a Center for Innovation in Mental Health with the CUNY School of Public Health, and initiated work on several collaborative projects including the following ThriveNYC initiatives: Virtual Learning Center, Early Years Collaborative, and Connections to Care (C2C). The lab has hired several staff members, including a Senior Director, Implementation and Improvement Scientist, Data Analyst, and Development Associate, and continues to build its team. The Lab is building its capacity to collect evidence-based data, disseminate best practices, and become a central source of information for those who want to duplicate successful programs.

Dr. Gary Belkin, Executive Deputy Commissioner for Mental Hygiene of DOHMH, speaking at NYC's first-ever Workforce Summit on mental health at CUNY on May 25, 2016. DOHMH plays a lead role in the implementation of ThriveNYC, working on topics ranging from program design to data collection and use.



Child Health Survey

The Child Health, Emotional Wellness and Development Survey is designed to collect reliable, representative citywide data on the health, emotional wellness, and development of children ages 12 and younger in New York City. Data from this population-based survey is being used to help guide decisions about health initiatives and understand barriers to care. The data is also being analyzed to provide information to the public, government and policy organizations, and other public health and research professionals via publicly available reports, testimonies at public hearings, analyses in peer-reviewed journals, and internal and external data sets.

Progress to Date: The City collected citywide data via a cross-sectional survey of more than 3,000 families. Additional data collected included questions around children's health, access to services, development and family context. Interviews were conducted in English and Spanish and the analysis and dissemination are ongoing.

STRENGTHEN GOVERNMENT'S ABILITY TO LEAD

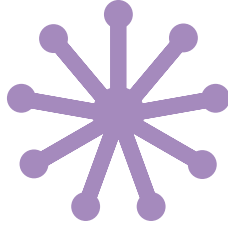
Every day, City agencies work with stakeholders from the public, private, and non-profit sectors on policies that have the potential to improve the lives of communities throughout the five boroughs. In order to achieve the goal of protecting the mental health of all New Yorkers and be proactive, City government must consider mental health in all policies. ThriveNYC affirms the responsibility of City government to coordinate efforts to support the mental health of all New Yorkers.

Cities Thrive: National Mental Health Conference

In Fall 2016, New York City hosts the Cities Thrive Mental Health Leadership Conference, organized around ThriveNYC's key principles. Policy leaders and implementers from cities across the country came together to share promising mental health initiatives and develop a plan for national advocacy.

Progress to Date: The Cities Thrive Conference took place November 14-15, 2016. More than 60 cities participated. Distinguished guests included representatives from the World Health Organization, U.S. Congress, the Substance Abuse and Mental Health Services Administration, the U.S. Conference of Mayors, and the American Psychiatric Association.

First Lady Chirlane McCray announced the formation of a Cities Thrive Coalition to advocate for change at the national and local levels in order to



First Lady Chirlane McCray and Deputy Mayor Richard Buery thank Mayor's Office Mental Health First Aid Training participants on the City Hall Steps on May 18, 2016.



improve mental health and support a stronger, more integrated, and better-funded behavioral health system. This group will also serve as a learning network for the sharing of evidence-based best practices. By the end of 2016, 107 cities signed up to join the network. The coalition made a call to action for members to call their senators to support the 21st century Cures Act and sent a letter with congressional leadership outlining priorities for the federal lame duck session to pass mental health reform legislation, appropriate a billion dollars to combat the opioid crisis, and fully fund mental health grant programs.

Reshaping the Community Services Board

The Community Services Board is a body mandated to advise the DOHMH in areas related to the City's community mental health, developmental disabilities, and alcoholism facilities, services, and programs. The Board has been redesigned to represent a broad spectrum of communities, organizations, and viewpoints to engage in a public health approach to mental health. Board members represent a culturally diverse group of individuals, from all five boroughs, and have a broad range of expertise in specialty areas in mental health, developmental disabilities, and substance misuse.

Progress to Date: The new board's 15 members were announced and the first meeting convened on December 1, 2016. Subcommittees, representing the three behavioral health specialty areas, and associated committees, focusing on specific, vulnerable populations, such as LGBTQ individuals and those involved in the criminal justice system, have been established. The LGBTQ committee kick-off meeting was held, and the criminal justice meeting is scheduled for mid-February.

Mental Health Council

Established via an Executive Order in March 2016, the Council serves as a key vehicle for managing ThriveNYC mental health initiatives, policy-making, and problem-solving across City government. The Council brings together City agencies to work collaboratively to advance mental wellness and address barriers to achieving the goals of the Mental Health Roadmap.

Progress to Date: More than 20 City agencies have collaborated to advance the goals of ThriveNYC. The group issued the ThriveNYC 150-Day Report and identified the following cross-agency objectives:

- 1) Build a culture for mental health by looking at opportunities for enhancing mental wellness through community engagement and urban design.
- 2) Improve the workforce by focusing on Mental Health First Aid trainings within city agencies, as well as disseminating Mental Health supports (including self-care, stress management, wellness, and Employee Assistance Program/benefits information).
- 3) Address substance misuse by exploring city agency-specific actionable approaches to the opioid crisis.

LOOKING FORWARD

In 2017, we will continue to ramp up existing programs, evaluate early progress, urge federal leaders to do their part in making mental health and substance misuse a priority, and strengthen relationships with other stakeholders. The ThriveNYC team will also launch a number of new initiatives, including:

1) Trauma Services for Families with Young Children: ACS has partnered with Montefiore Medical Center to provide Group Attachment Based Intervention (GABI) to families receiving prevention services. GABI is a group therapy model for parents with very young children, ages 0-3, who have experienced trauma, mental illness, or other challenges that affect the attachment relationship. These services treat both parents and children to promote secure attachment, reduce the impact of trauma and mental illness, and promote healthy parenting skills. GABI is tailored for our hardest to reach, most vulnerable families by operating on a drop-in basis up to six times per week. In Spring 2017, ACS will launch 5 sites citywide that will serve a total of 480 families per year.

2) Veterans Outreach Team Expansion: VetsThriveNYC is committed to extending hope, healing, and wholeness to the veteran community in New York City. The outreach team will engage veterans and their families by directing them to peer opportunities, clinics, service providers, allies, and community resources. The team will engage with the veteran community by providing direct one-on-one case management, making referrals to service providers through VetConnectNYC, launching a multimedia marketing strategy and mobile application, participating in events designed for veterans, and collaborating with faith-based organizations. More than 2,000 veterans out of the City's total 210,000 veteran population will be reached annually.

3) Virtual Learning Center: The Virtual Learning Center (VLC) is a free, universally-available online Learning Center that will offer mental health education and skills-building tools to community organizations. The initial targeted users include faith-based leaders and immigrant community leaders. Upcoming modules include: 1) Self-care/stress management and 2) Problem-solving treatment. The VLC will launch in 2017.

CONCLUSION

Making care more accessible, increasing public awareness of the symptoms of mental illness, and launching the first-of-its-kind 24/7 mental health connection to care are just a few accomplishments that have come out of Year One of ThriveNYC.

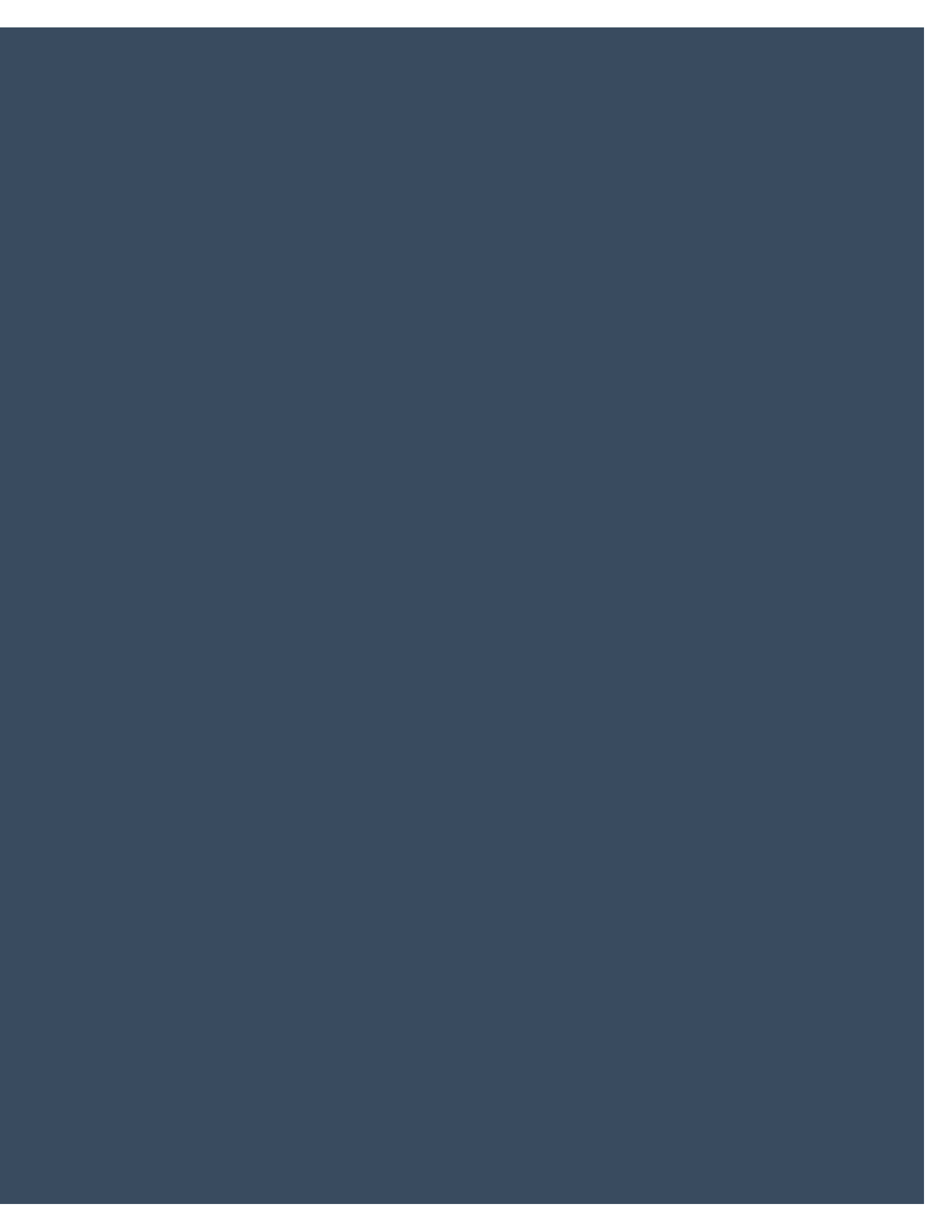
With the help and support of thousands of individuals, the mental health reform movement is growing and momentum continues to build.

The ThriveNYC team is tremendously grateful to all partners within New York City government and external collaborators who helped get this revolutionary effort off the ground.

We look forward to strengthening this foundation as we explore new ways to connect New Yorkers to mental health care in Year Two.

Gabriel Ramos, DVS Whole Health & Community Resilience Coordinator, assisting a Navy veteran with resources and providing him with information on NYC Well.





Thrive NYC

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