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THRIVENYC: ENHANCING ACCESS TO MENTAL HEALTH SUPPORT FOR EVERY NEW YORKER IN NEED



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to End Domestic
and Gender
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Relations

Launched by First Lady Chirlane McCray and Mayor Bill de Blasio in 2015, ThriveNYC closes critical gaps in mental healthcare and activates every part of City government to promote mental health. In Fiscal 2019, this work was consolidated under the management of the Mayor's Office of ThriveNYC, which partners with 12 City agencies and almost 200 community-based organizations to implement over 30 innovative programs that reach hundreds of thousands of New Yorkers every year. ThriveNYC's programs advance four goals:

- Promote mental health for the youngest New Yorkers
- Eliminate barriers to care
- Reach people with the highest need
- Strengthen crisis prevention and response

ThriveNYC brings mental health support to communities and locations where it never existed before. ThriveNYC does this by reaching people with the highest need—those with serious mental illness, those affected by trauma and those living in historically underserved neighborhoods—and by breaking down barriers to care for all New Yorkers. ThriveNYC's programs are motivated by six foundational principles: change the culture; act early; close treatment gaps; partner with communities; use data better; and strengthen government's ability to lead.

ThriveNYC is committed to countering painful, long-standing and racist inequities in mental health. One way ThriveNYC advances equity is by concentrating new mental health support where it is needed most: in Fiscal 2020, over 70 percent of service locations for ThriveNYC programs were in federally designated mental health provider shortage areas, meaning neighborhoods with low levels of mental health providers per capita.

To understand the impact of ThriveNYC's work, ThriveNYC uses an approach similar to other large-scale public health initiatives. This includes data on nearly 200 reach and impact metrics for ThriveNYC's programs, which is regularly updated on ThriveNYC's website. Depending on how the data is collected for each measure—such as through an annual survey, regular client screening or observation—the data is updated either quarterly, semi-annually or annually. ThriveNYC's measurement approach is informed by a Science Advisory Group comprised of leading national and international experts in epidemiology, mental healthcare and the social drivers of mental health. In March 2020, this Science Advisory Group published two population-level measures that can be directly associated with ThriveNYC's contributions to the mental healthcare landscape in New York City. If the entire range of efforts to promote mental health across City government—including ThriveNYC's work to close gaps in care—continues, the City can expect to see improvements in the following population-level measures within five years:

1. More New Yorkers with mental health needs are connected to treatment. Defined as 1) more New Yorkers with an identified mental health need receive treatment, and 2) greater equity in connection to treatment.
2. Fewer mental health needs become crises. Defined as 1) fewer mental health emergencies, as measured by 911 dispatches and emergency department visits, and 2) less disparity in mental health emergencies.

The COVID-19 pandemic has profoundly affected the mental health of New Yorkers. To ensure that services continued to reach people who need care, nearly all of ThriveNYC's 30 programs have continued to deliver services during the pandemic. Many programs—specifically those that reach New Yorkers with the highest need and those that strengthen crisis prevention and response—have continued to provide in-person services, including in over 100 shelters for families with children, all runaway and homeless youth residences and drop-in centers and at over 40 high-need sites within the NYC Health + Hospitals system. Mobile treatment teams continued to provide intensive, ongoing, community-based treatment to people with serious mental illness, many of whom are experiencing homelessness. And several programs introduced new tele-mental health services, including those for isolated older adults and students.

During the COVID-19 pandemic, the Mayor's Office of ThriveNYC also launched new engagement strategies to eliminate barriers to care for particularly high-need populations. For example, to reach veterans during the pandemic, ThriveNYC and the Department of Veterans' Services (DVS) launched Mission: VetCheck, in which volunteers from the veterans' community were trained to make supportive check-in calls to veterans. Volunteers have made over 22,000 calls to veterans since Mission: VetCheck began in April 2020, with nearly 10,000 calls made during the first four months of Fiscal 2021. Mission: VetCheck has helped reduce social isolation for veterans and is addressing veterans' needs during the pandemic (callers made almost 800 referrals back to DVS for help with issues like food assistance, housing insecurity, unemployment, and COVID-19 testing information during the first four months of Fiscal 2021). ThriveNYC trained over 200 employers and employees in workplace mental health strategies during the first four months of Fiscal 2021 and over 150 faith leaders representing diverse faith traditions in how to promote mental health during and following a disaster. In addition, ThriveNYC created an Online Guide to Mental Health Support New Yorkers Can Access While Staying Home, which has had over 41,000 visits since late March (10,000 during the first four months of Fiscal 2021) and includes a directory of remote mental health services. More information, as well as additional COVID-19 mental health resources and toolkits, is available on ThriveNYC's website.

PROMOTE MENTAL HEALTH FOR THE YOUNGEST NEW YORKERS

Half of all lifetime mental health disorders appear before the age of 14. ThriveNYC supports several programs to promote healthy development and lifelong positive mental health practices of young New Yorkers, grounded in research showing that early identification and treatment of mental health disorders can build mental health in the long term.

ThriveNYC also partners with the Department of Education (DOE) to significantly enhance access to mental health support in New York City's public schools. In Fiscal 2020, ThriveNYC partnered with DOE to offer onsite mental health support in high-need schools, including clinicians in 248 schools and access to onsite mental health clinics in 129 of those schools. ThriveNYC supports training to help educators and caregivers better identify symptoms of trauma and emotional and psychological distress in order to meet the mental health needs of their school communities. In the beginning of the 2019/2020 school year, the City launched a new partnership between ThriveNYC and DOE: School Response Clinicians, licensed social workers who support students across the city. These social workers provide early intervention as well as support in times of immediate emotional distress, provide onsite counseling, and help connect students to long-term care if necessary.

During the COVID-19 pandemic, students in high-need schools and students enrolled in school-based mental health clinics continued to receive counseling remotely and School Response Clinicians offered wellness check-in calls and individual mental health sessions remotely to students in emotional distress or crisis. Additionally, school-based mental health support was added to the newly created Regional Enrichment Centers, offering in-person social and emotional support to children of frontline workers.

In October 2020, the City announced two new budget-neutral initiatives that will add new mental health services to hundreds of schools in the neighborhoods most affected by the COVID-19 pandemic. The first program, the School Mental Health Specialist Program, represents a re-engineering of the School Mental Health Consultant Program, an existing ThriveNYC program implemented by the Department of Health and Mental Hygiene in partnership with the Department of Education. Launched in 2016, the Consultant Program employed social workers and mental health counselors to survey existing mental health resources in public schools, create mental health plans tailored to individual schools, and, when needed, connect students to mental health support in their community. In the new program, these same mental health workers will now serve as Mental Health Specialists and provide direct service to students through trauma-informed group work at 350 schools in the neighborhoods hardest hit by the COVID-19 pandemic. Each Mental Health Specialist will serve up to five schools. In addition to their work with students, they will provide mental health education to caregivers and school staff to help them address students' mental health needs and strengthen community and family ties. The budget for the Consultant Program will now support the new Mental Health Specialist program, with the new model requiring no additional costs.

To bring additional support to students in the neighborhoods most affected by the COVID-19 pandemic, ThriveNYC also worked closely with NYC Health + Hospitals and the Department of Education to structure a new partnership between the City's public hospitals and over 25 public schools. This partnership, called Pathways to Care, will expedite referrals from schools to connect students to care at outpatient mental health clinics, where students can receive ongoing therapy, psychiatric evaluation, medication management, and other clinical services.

ELIMINATE BARRIERS TO CARE

One in five adults in New York City experiences a mental health disorder in any given year. Yet hundreds of thousands of individuals in need are not connected to care. Barriers to care vary, ranging from a lack of nearby care options and complicated healthcare systems, to insurance coverage, and language barriers as well as the cultural responsiveness of providers. ThriveNYC addresses these barriers and increases access to care in many ways. Below are highlights from this work.

NYC Well is the City's comprehensive mental health helpline. Available by call, text or online chat, NYC Well provides a safe, easy way for New Yorkers to connect to care no matter where they are, what emotional state they are in, or what signs and symptoms they express. Trained counselors and peer support specialists provide brief counseling, peer support, assistance navigating the behavioral healthcare system and help setting appointments with mental healthcare providers and substance use providers. The service is free, confidential and has the capacity to respond in over 200 languages. NYC Well has answered over 1 million calls, texts and chats from people seeking mental health support since launching in 2016. NYC Well also deploys Mobile Crisis Teams operated by hospitals and community-based organizations to respond to urgent mental health needs. Mobile Crisis Teams can include nurses, social workers, psychologists and psychiatrists, community liaisons and peers. Teams can arrive within hours of a referral and services can include assessment, crisis counseling and connection to ongoing services.

During the COVID-19 pandemic, NYC Well responded to high need. NYC Well answered 44 percent more contacts in the first four months of Fiscal 2021 than in the first four months of Fiscal 2020. Mobile Crisis Teams continued to go to people's homes when needed, with protocols in place to screen for COVID-19 symptoms before teams entered a home and with access to personal protective equipment for team members.

The Connections to Care (C2C) program is an innovative partnership between 14 community-based organizations (CBOs), the Mayor's Office of ThriveNYC, the Mayor's Office for Economic Opportunity, the Mayor's Fund and the Department of Health and Mental Hygiene. Through C2C, CBOs work with mental health providers who train and coach CBO staff to screen their clients for mental health needs, offer direct support when appropriate, and link to local health providers for further care if needed. During the COVID-19 pandemic, C2C providers continued to operate both onsite where necessary as well as remotely, conducting mental health screening and referrals by phone. Providers developed new ways to support clients during the pandemic, including creating virtual support groups on relevant topics such as anxiety, grief, and loss and delivering social work services outdoors, in parks.

In the first four months of Fiscal 2021, C2C trained 50 employees from participating CBOs (for a total of 1,913 since 2016) and reached 1,535 people from all five boroughs (for a total of 47,717 since launch in 2016). This includes 298 participants who were referred to clinical mental healthcare in the first four months of Fiscal 2021 (for a total of over 5,427 since launch). Service levels during the first four months of Fiscal 2021 were lower than during the same period in Fiscal 2020 due to shifts in service delivery practices during the COVID-19 pandemic, as many C2C providers began delivering services via phone and video and experienced data collection challenges during remote service delivery.

In March 2020, the City suspended Mental Health First Aid (MHFA) trainings due to COVID-19 safety precautions. In June 2020, the City announced that, for the remainder of 2020, Mental Health First Aid trainings would be replaced with a new virtual model specifically designed to address the impact of the public health emergency. The City redirected MHFA staff to deliver mental health disaster response and coping sessions to target communities. These sessions reached over 7,000 residents in the communities hardest hit by the pandemic in the first four months of Fiscal 2021.

REACH PEOPLE WITH THE HIGHEST NEED

Many who are particularly vulnerable to mental illness—often those who have been exposed to trauma—are especially underserved. ThriveNYC implements programs that bring new, dedicated support to these individuals, with a current focus on victims of crime, families living in shelters, aging New Yorkers, veterans, vulnerable young people and people living in historically underserved neighborhoods. Below are some highlights from this work.

PEOPLE HARMED BY CRIME, VIOLENCE OR ABUSE

From 2016 to October 2020, the Crime Victim Assistance Program supported over 177,000 people. Before the launch of ThriveNYC, many crime victims navigated the complicated landscape of the criminal justice and social service systems alone. Only Housing Police Service Areas and three precincts had an onsite victim advocate to serve victims of domestic violence. Beginning in 2016, through ThriveNYC, victims of any kind of crime can be served by the Crime Victim Assistance Program, which operates in precincts and Housing Police Service Areas citywide. The program provides supportive counseling, connections to individual or group therapy, safety planning, assistance with victim compensation and help navigating the legal and financial challenges that can emerge after a crime has occurred.

During the COVID-19 pandemic, Crime Victim Assistance Program advocates ceased in-person services to ensure safe operations and transitioned to phone outreach and support. This contributed significantly to the lower-than-average volume of services the program provided during the first four months of Fiscal 2021 compared to the same period in Fiscal 2020.

FAMILIES LIVING IN SHELTERS

In partnership with ThriveNYC, the Department of Homeless Services (DHS) has placed over 340 licensed social workers in over 100 shelters for families with children across the city. These clinicians served over 21,000 families in shelter since the inception of the program in 2016. Through ThriveNYC's partnership with DHS, families with children residing in shelter now have access to dedicated licensed social workers who conduct behavioral health assessments and engage families around their barriers to permanent housing. These assessments include behavioral health history and screenings for current concerns, as well as developmental screenings for children, among other things.

During the COVID-19 pandemic, the City's shelters remained open and fully operational, providing essential services and support to families experiencing homelessness. Social work services were provided by licensed clinical social workers virtually and in-person in some instances in family shelters.

AGING NEW YORKERS

Older adults have high rates of late-onset mental health disorders, yet low rates of assessment and treatment. Before ThriveNYC, many older adults went without ready access to mental health support. ThriveNYC and the Department for the Aging (DFTA) partner to bring clinicians to 48 older adult centers operated by DFTA. In Fiscal 2020, services expanded from the original 25 older adult centers included in this program to include 23 additional older adult centers. Over 19,456 clinical sessions (including both short-term and long-term clinical treatment) have been provided since

services began over four years ago. Over 61 percent of clients have experienced a clinically significant reduction in depression symptoms. During the COVID-19 pandemic, clinicians provided tele-mental health services to clients and conducted new client assessments by phone or virtually.

VETERANS

To enhance mental health for veterans, ThriveNYC partners with DVS to support outreach teams that work directly with veterans and their families and caretakers, connecting them to a range of community-based services as they transition home. This program is designed to serve recent veterans and those who have been veterans for many years, both of whom may need connection to services and support. In the first four months of Fiscal 2021, this program made 413 successful connections to care, placing the program on target to exceed its annual target of 608 connections to care in Fiscal 2021. This high volume of connections to care has been possible, in part, because of referrals from the Mission: VetCheck initiative. Connections to care through this DVS program remain high for the second year in a row; in Fiscal 2020, this program exceeded its annual target, as well, due to a high volume of referrals related to the City's one-time outreach effort to encourage veterans to enroll in the Fair Fares program, which provides reduced-cost MetroCards to eligible New Yorkers.

VULNERABLE YOUNG PEOPLE

The Department of Youth and Community Development (DYCD) funds Runaway and Homeless Youth (RHY) Drop-in Centers, Crisis Services and Transitional Independent Living Residential Programs, which provide specialized services to vulnerable youth, including LGBTQ+ identifying youth. Since 2016, ThriveNYC has partnered with DYCD's RHY programs to enhance mental health services offered to young people residing in more than 50 RHY residential programs and served in eight drop-in centers across all five boroughs. More than 15,000 young people have been served through this program since 2016. During the COVID-19 pandemic, mental health support continued to be provided to youth both in-person and through new tele-mental health services at residential programs (which remained open and operational) and drop-in centers (which operated on a modified schedule).

PEOPLE LIVING IN HISTORICALLY UNDERSERVED NEIGHBORHOODS

In January 2020, NYC Health + Hospitals launched a redesigned Mental Health Service Corps, an innovative program that provides three years of high-quality training to early-career behavioral health clinicians and embeds them at over 40 H+H sites across the five boroughs. Seventy-six percent of service locations included in this program are located in federally designated mental health professional shortage areas. During the COVID-19 pandemic, Corps Members continued to deliver in-person and remote mental health services.

STRENGTHEN CRISIS PREVENTION AND RESPONSE

To prevent crises and help New Yorkers with serious mental health needs function well in their communities, ThriveNYC works with several City agencies to ensure those with critical needs can access and stay connected to treatment. Below are highlights from this work.

Co-Response Teams, a collaboration between the New York City Police Department (NYPD) and DOHMH, are a pre- and post-crisis intervention. Each team includes two police officers and one behavioral health professional from DOHMH. Teams are available 16 hours a day, seven days a week to assist people with mental illness and substance use disorders who may be at an elevated risk of harm to themselves or others. Co-Response Teams connect or re-connect people to care or another stabilizing support, including medical, mental health, legal, housing and other social and clinical services. In the last four years, these teams have had over 4,400 face-to-face encounters (defined as in-person engagement) with New Yorkers and have assisted more than 2,000 people across the city (defined as clinical assessment, counseling, psycho-education, service referral, connection to care or other stabilizing support, or transportation to a hospital, clinic, or doctor's appointment). In addition to creating greater stability for these New Yorkers, Co-Response Teams also reduce the subsequent number of enforcement interactions with the Police Department. During the first four months of Fiscal 2021, Co-Response Teams engaged 289 new people. In March 2020, Co-Response Teams suspended in-person deployments due to COVID-19 safety precautions. At that time, Co-Response behavioral health professionals continued to offer community members support and connections to care, remotely due to COVID-19 safety precautions. In-person deployments resumed on August 29, 2020. Since the pandemic began, these teams have connected by phone with

people and their support networks (such as family members, service providers, and friends) 7,554 times, often with multiple calls per person engaged as the teams work to connect people to stabilizing support.

ThriveNYC also partners with DOHMH to implement several new mobile treatment team models. As one example, ThriveNYC provides additional substance use expertise to 40 of the City's Assertive Community Treatment (ACT) Teams, which provide intensive, mobile, community-based mental health treatment and rehabilitation services to New Yorkers with serious mental illnesses. These ThriveNYC-enhanced teams have the capacity to serve 2,720 individuals at a time. Beyond ThriveNYC, there are eight additional New York State-funded ACT teams and one additional City-funded team in New York City. In total, ACT teams have capacity to serve 3,312 individuals at a time.

ThriveNYC supports four Forensic ACT (FACT) Teams, which provide the same intensive mental health treatment and rehabilitation services as ACT teams, and include additional staff focused on serving clients with current or recent justice system involvement. Beyond ThriveNYC, there is one additional New York State-funded FACT team in New York City. In total, FACT teams have capacity to serve 340 clients at a time.

ThriveNYC also supports Intensive Mobile Treatment (IMT) teams managed by DOHMH. IMT teams provide a particularly flexible model of mental health treatment and intensive support to adults with mental illness and/or substance use disorders, homelessness and/or transience and escalating behaviors. IMT teams include mental health, substance use, and peer specialists who help individuals maintain a treatment plan and facilitate connection to housing and additional supportive services. IMT teams currently have the capacity to serve up to 297 individuals at a time.

Collectively, mobile treatment teams in NYC have a capacity to serve over 3,949 clients at a time. Due to the unique needs of each client, the duration of service for each client served by a team can vary, but teams work to engage clients for several months.

During the COVID-19 pandemic, ACT, FACT and IMT teams provided a combination of tele-mental health and in-person services and achieved a high level of client retention. The most recent data on client retention shows that mobile treatment teams were able to keep clients engaged in care at nearly the same levels before and during the pandemic. Across mobile teams, the percentage of clients who continued to receive treatment from a team for three months or longer was 82 percent during the first three months of the pandemic (April–June 2020), as compared to 85 percent in the three months before the pandemic (January–March 2020).

NOTE ON THE EFFECT OF THE COVID-19 PANDEMIC

Due to considerable COVID-19-related operational adjustments, there were substantial changes in how clients were served through many City services, including ThriveNYC programs. Nearly all of ThriveNYC programs have continued to offer critical support to New Yorkers during the COVID-19 pandemic, although operational adjustments resulted in reduced numbers of clients served for some programs. One short-term stabilization program, the Support and Connection Center in East Harlem, and two in-person training programs (Mental Health First Aid and Crisis Intervention Training) suspended operations during COVID-19 due to safety precautions. These programs remained suspended during the first four months of Fiscal 2021.

SELECTED PERFORMANCE INDICATORS	Actual		4-month Actual		Target	
	FY19	FY20	FY20	FY21	FY20	FY21
Promote mental health for the youngest New Yorkers						
Schools with access to ThriveNYC-funded on-site clinical mental health services (with DOE)	247	248	248	248	248	248
Mental health workshops and trainings conducted for teachers, school staff, mental health professionals, families and students (with DOE and DOHMH) <small>*Includes Community Schools, Prevention and Intervention Program, School Mental Health Specialists, Social Emotional Learning, Youth Mental Health First Aid</small>	9,151	7,781	1,381	1,351	7,057	4,000
Eliminate barriers to care						
People who live or work in NYC trained in Mental Health First Aid (with DOHMH)	53,186	34,351	17,676	N/A	53,000	N/A
Supportive connections provided by NYC Well, a behavioral health helpline (with DOHMH)	274,400	262,200	84,800	120,567	268,600	303,600
Individuals who received mental health support through Connections to Care (with OEO)	14,741	11,508	3,434	1,535	10,900	4,000
Reach people with the highest need						
Individuals who, after reporting a crime, received support to deal with the emotional, physical and financial aftermath of crime through the Crime Victim Assistance Program (with NYPD)	59,008	49,904	21,662	12,258	55,000	35,000
Veterans, family members and caregivers who were successfully connected to care, services or resources through VetsThriveNYC (with DVS)	504	1,402	607	413	500	608
Young people who received mental health support in a city-funded residential program or drop-in center serving runaway and homeless youth (with DYCD)	2,569	2,648	1,440	1,575	2,800	2,600
Percentage of families living in shelter who received biopsychosocial screenings from mental health clinicians (with DHS)	66%	79%	78%	79%	80%	80%
Individuals who received clinical services from Mental Health Service Corps behavioral health clinicians (with H+H)	N/A	2,749	N/A	2,759	2,475	4,950
Strengthen crisis prevention and response						
Individuals who received services from long-term mobile community-based treatment providers (with DOHMH) <small>*includes ACT, FACT, and IMT Teams</small>	4,706	4,477	4,143	4,026	3,649	3,649
New individuals engaged by a Co-Response Team (with DOHMH and NYPD)	686	677	250	289	400	400

NOTEWORTHY CHANGES, ADDITIONS OR DELETIONS

- For the indicator “Mental health workshops and trainings conducted for teachers, school staff, mental health professionals, families and students (with DOE and DOHMH),” the Fiscal 2021 target was adjusted to reflect the suspension of Youth Mental Health First Aid training during the COVID-19 pandemic. Additionally, the Fiscal 2021 target was adjusted to reflect a change in the programs included in this indicator. The Mental Health Consultant Program is no longer included in this indicator, as the program has been transformed into the Mental Health Specialist Program, which currently offers direct trauma-informed group work for students and training for teachers, parents and caregivers in 350 schools in the neighborhoods hardest hit by the COVID-19 pandemic. Training conducted through the Specialist Program is reported as part of this indicator.
- For the indicator “People who live or work in NYC trained in Mental Health First Aid (with DOHMH),” neither the first four months of Fiscal 2021 data nor the Fiscal 2021 target are reported because this training was suspended during the COVID-19 pandemic with no anticipated restart date in Fiscal 2021.
- For the indicator “Individuals who received mental health support through Connections to Care (with OEO),” Fiscal 2020 data was revised to reflect the most current data, which includes provider corrections to previously submitted data. For this indicator, the Fiscal 2021 target was adjusted because program funding ends eight months into the Fiscal Year, in February 2021, as planned at the completion of a five-year pilot period.
- For the indicator “Individuals who, after reporting a crime, received support to deal with the emotional, physical and financial aftermath of crime through the Crime Victim Assistance Program (with NYPD),” the Fiscal 2021 target has been adjusted to reflect modified operations and service levels during the COVID-19 pandemic.

ADDITIONAL RESOURCES

For additional information on items referenced in the narrative, go to:

- ThriveNYC’s data dashboard:
<https://thrivenyc.cityofnewyork.us/dashboard/>
- ThriveNYC news:
<https://thrivenyc.cityofnewyork.us/news/>
- ThriveNYC’s Guide to Mental Health Support New Yorkers Can Access While Staying Home:
https://thrivenyc.cityofnewyork.us/mental_health_support_while_home