On November 23, 2015 the City, under the leadership of First Lady of New York City Chirlane McCray, launched ThriveNYC, a decisive turning point in the way the City addresses mental health and substance misuse. The implementation of the program is overseen by the newly formed role of Executive Director of ThriveNYC reporting to the Deputy Mayor for Strategic Policy Initiatives in partnership with the Mayor’s Office of Operations and the Department of Health and Mental Hygiene (DOHMH). As of the end of October 2017, 98 percent of the 54 ThriveNYC initiatives—53 out of 54—have launched and continue to serve New Yorkers.

ThriveNYC is the de Blasio Administration’s response to a critical public health crisis; one in five adult New Yorkers is likely to experience a mental health disorder in any given year. Not only adults suffer—50 percent of all lifetime cases of mental illness begin by age 14. ThriveNYC puts New York City at the forefront of the movement to develop a comprehensive solution to a pervasive public health problem.

ThriveNYC’s initiatives are organized around six guiding principles:

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

**CHANGE THE CULTURE**

Stigma associated with mental health prevents people from getting the care they need. ThriveNYC is changing the culture by encouraging every New Yorker to be part of the solution.

Highlights of accomplishments during Fiscal 2018 under *Change the Culture* include:

- The City continued to expand Mental Health First Aid by successfully training 45,566 New Yorkers, bringing the total number of trained First Aiders to 69,993 by the end of Fiscal 2018. Efforts are in place to continue collaboration with private and public organizations to provide trainings.

- During the reporting period an additional 4,018 New York City Police Department (NYPD) officers received Crisis Intervention Training, which teaches officers to build empathy with people while helping them de-escalate negative emotions.

- NYPD’s Crime Victim Assistance Program (CVAP) helps mitigate trauma in the aftermath of crime. Crime victim advocates give victims information about the criminal justice process, help develop safety plans to reduce the likelihood of repeat victimization and provide assistance with accessing services. During Fiscal 2018, 58 advocates were placed in 29 precincts, bringing the total since launch in Fiscal 2017 to 110 advocates in 55 precincts. During the reporting period, CVAP served 40,408 individuals. Each of the 77
precincts and nine Police Service Areas (PSAs) will have a general crime victim advocate and a specialized Domestic Violence Victim Advocate, or an advocate managing both roles to address both types of crime, by the end of summer 2018.

**ACT EARLY**

Early intervention is key to preventing or mitigating the effects of mental illness. By investing in the mental health of the youngest New Yorkers, the City can safeguard its children’s future.

Highlights of ThriveNYC’s accomplishments during Fiscal 2018 under Act Early include:

- Social-Emotional Learning (SEL) is a process through which children and adults acquire and effectively apply the knowledge, attitudes, and skills necessary to understand and manage emotions; show empathy for others; and maintain positive relationships. During the reporting period, 70,366 students were served in programs with SEL. Additionally, 4,717 students in Administration for Children’s Services (ACS) Early Learn were enrolled in programs with SEL staff. DOHMH’s Early Childhood Mental Health Network provides mental health supports and a referral pathway for families. The Network’s seven early childhood therapeutic centers provided specialized mental health treatment to 1,193 families with children under five, mental health consultation to 2,532 Early Learn staff and caregivers at 76 sites and family peer support services to 874 families. The Network’s training and technical assistance center trained 603 clinical staff and early childhood allied professionals in topics and best practices related to early childhood mental health and social-emotional development.

- Mental health challenges present a major barrier to educational success, and all City schools must prioritize mental and emotional well-being. The City has placed 100 School Mental Health Consultants to enhance the mental health landscape in schools by providing a variety of preventive interventions designed to increase capacity, build supportive environments and strengthen family and community ties. Schools chosen to receive this service have no other enhanced mental health supports in the building. As of June 2018, the Consultant Program is covering 912 NYC public schools.

- The Creating Awareness about Relationship Equality (CARE) initiative teaches healthy relationship skills to teens in foster care and other ACS programs so they will be better prepared to prevent, recognize, and respond to dating violence. During the reporting period, 602 youth and 118 caregivers and/or ACS partner staff attended CARE workshops. Additionally, 1,966 youth participants and 1,065 caregivers and staff have attended workshops since the launch of the initiative in February 2016.

- The Newborn Home Visiting Program includes home visiting and education around an array of topics related to parenting and child development. During the reporting period, 1,329 eligible families served by the Department of Homeless Services were visited. Since ThriveNYC’s November 2015 launch through June 2018, 3,062 families were successfully visited and 2,423 maternal depression screenings were conducted. The program set a goal to expand services to successfully visit 1,100 mothers of infants in City family shelters in Fiscal 2019.

**CLOSE TREATMENT GAPS**

Barriers to treatment worsen the effects of mental illness for many individuals. By finding and closing treatment gaps the City can create a holistic mental health system that works for everyone.

Highlights of ThriveNYC’s accomplishments during Fiscal 2018 under Close Treatment Gaps include:

- NYC Well, the City’s free, comprehensive, 24/7/365 one-click, one-call point of entry to citywide behavioral services, launched in October 2016. The service can be accessed via phone, text, or chat and delivers crisis counseling and referral to behavioral health services, including mobile crisis, follow-up services, and peer support services. Since launching, NYC Well has answered over 409,000 inbound calls, texts, or chats, 256,569 of which were answered during Fiscal 2018, a 60 percent increase over Fiscal 2017.

- The Maternal Depression Learning Collaborative aims to screen all pregnant women and new mothers for pregnancy-related depression in participating hospitals and clinics. The Greater New York Hospital Association and DOHMH are leading the collaboration with 25 participating City hospitals and hospital systems to close this treatment gap.
All 11 public hospitals and Gouverneur Hospital offer screenings and connect women to appropriate care. During Fiscal 2018, 43,343 prenatal and postpartum screenings were conducted by participating sites.

- The Peer Support Training program, which equips individuals who have lived experience with mental illness and substance misuse to take on workforce positions, successfully completed its second year of training. In Fiscal 2018, 262 peer specialists graduated from mental health, substance use, and family/youth peer advocate programs, bringing the total to 520 graduates since program launch, exceeding the goal of 400 graduates.

- The Department of Youth and Community Development (DYCD) served 2,802 individuals with ThriveNYC resources in its Runaway and Homeless Youth system. Participants received services including psychological evaluations, referrals, and individual and group therapy.

PARTNER WITH COMMUNITIES

The administration realizes that New Yorkers are more likely to access services in places they already go to receive care. By partnering with communities, the City can harness the wisdom and trust of community-based organizations (CBOs) to connect more New Yorkers with mental health care.

Highlights of ThriveNYC’s accomplishments during Fiscal 2018 under Partner with Communities include:

- The NYC Mental Health Service Corps program successfully placed clinicians and physicians at primary care practices, mental health clinics, and substance use disorder programs in high-need communities throughout all five boroughs of the City, bringing the total of participating practices citywide to 161.

- Connections to Care (C2C), a $30 million initiative that launched in Fiscal 2017, brings mental health resources to CBOs that already provide a range of social services to New Yorkers. In Fiscal 2018, CBOs and their mental health providers trained over 350 staff and served over 11,000 individuals. Since the program’s inception, C2C has trained more than 1,300 staff and served over 19,500 individuals, surpassing its five-year goal.

USE DATA BETTER

The City is investing in collecting better data to measure progress and determine where to focus future efforts. The City is also helping other stakeholders use data better and adopt proven methods.

- The Mental Health Innovation Lab was established to 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. During Fiscal 2018, the lab engaged in collaborative efforts to analyze ThriveNYC initiative-specific outcomes and population-level impacts, and has continued to provide support on collaborative projects including the following ThriveNYC initiatives: Maternal Depression, Early Years Collaborative, C2C and the ThriveNYC Learning Center.

STRENGTHEN GOVERNMENT’S ABILITY TO LEAD

- The Mental Health Council was established by Executive Order and is comprised of more than 20 City agencies from every sector of government, charged with ensuring the success of ThriveNYC by looking at policy and programming through a mental health lens. The Mental Health Council has identified and engaged in activities aligned with cross-agency objectives, such as addressing substance misuse, community inclusion and the promotion of workplace mental health best practices. These best practices include facilitating interagency efforts around Mental Health First Aid and the dissemination of mental health resources and information for City employees and their families.

- The Cities Thrive Coalition, spearheaded by the First Lady of New York City, recruited and mobilized nearly 200 cities, representing all 50 states and Washington, D.C., to advocate for a stronger, better funded, and more integrated behavioral health system.

- For the third year in a row, ThriveNYC organized a Weekend for Mental Health. Over 2,000 houses of worship and community groups in all 50 states, Puerto Rico and Washington D.C. dedicated time to open conversations about mental health and substance misuse using a resource toolkit developed by ThriveNYC.
NOTEWORTHY CHANGES, ADDITIONS OR DELETIONS

- The Fiscal 2017 total for ‘Individuals trained in Mental Health First Aid (DOHMH)’ has been revised to reflect updated data.

- ThriveNYC revised Fiscal 2019 targets for the following indicators: ‘Individuals (staff and parents) who receive mental health consultation in early care and education programs (DOHMH),’ ‘Schools served by the school Mental Health Consultant Program (DOE),’ ‘Eligible families residing in DHS shelters who have been successfully visited by the Newborn Home Visiting Program (DOHMH),’ ‘Naloxone kits distributed from DOHMH to Opioid Overdose Prevention Programs (DOHMH),’ and ‘Runaway and homeless youth served (DYCD).’

- Naloxone kit distribution is funded through combined ThriveNYC and other mayoral funds, including those from HealingNYC.

- The indicator ‘Mental Health Service Corps clinicians ever placed in primary care or behavioral health settings (DOHMH)’ replaces ‘Mental Health Service Corps members placed in primary care practices, mental health clinics, and substance use disorder programs (DOHMH).’ The new indicator uses more inclusive language to describe the site types to account for the full array of settings in which Mental Health Service Corps clinicians are placed. Additionally, the indicator now specifies ‘ever placed,’ to clarify that this value represents an action completed by the Mental Health Service Corps during the fiscal year, rather than a status on clinician placement.
ADDITIONAL RESOURCES
For additional information on items referenced in the narrative, go to:

- ThriveNYC: Year End Update: