

# Dismantling the Cradle to Prison Pipeline<sup>®</sup> in Houston and Texas

## A Study of Solutions

PREPARED BY  
*American Leadership Forum*  
*Class XXV*



**AMERICAN  
LEADERSHIP  
FORUM**

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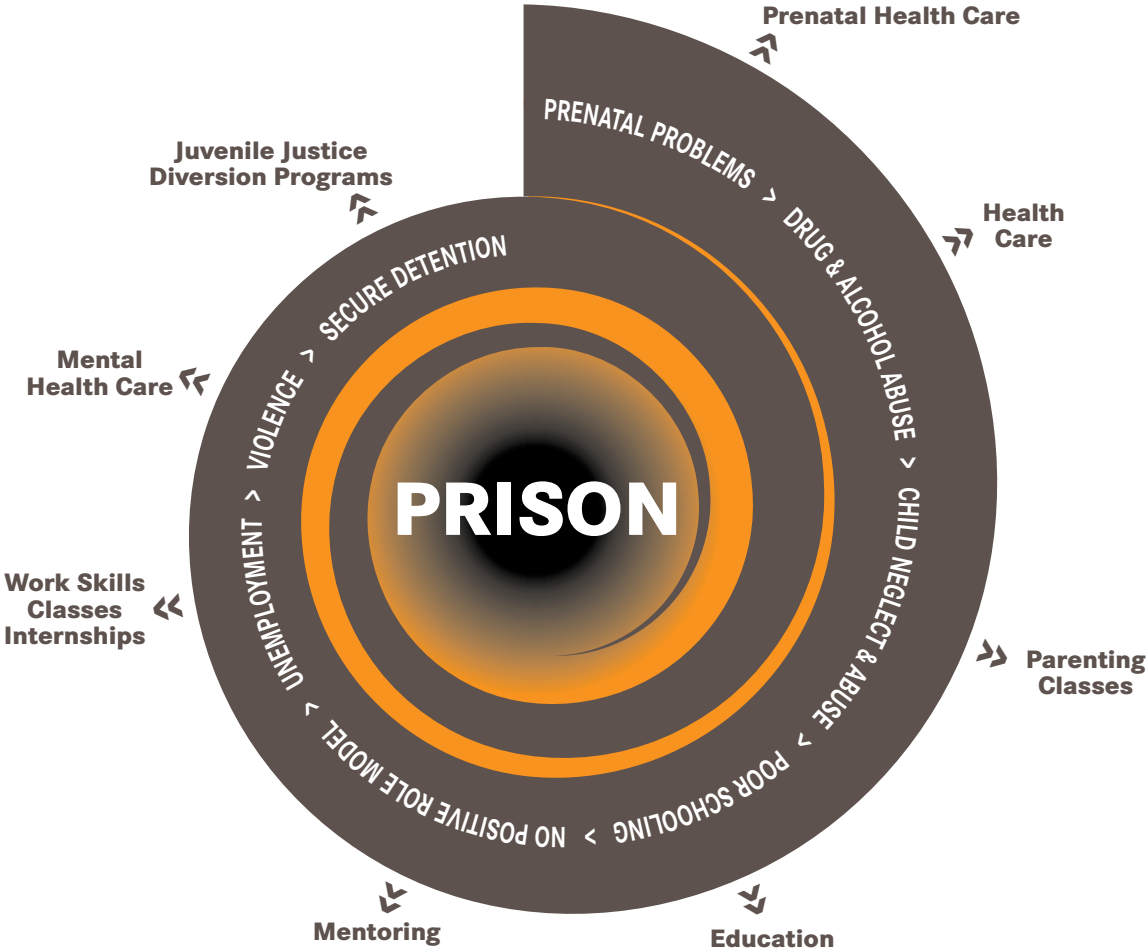
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# Introduction: What is the Cradle to Prison Pipeline® crisis?

Today, in Houston, Texas, many factors channel large segments of our population away from productive lives and toward prison. They include illiteracy, poverty, poor health care, domestic violence, mental health issues, teen pregnancy, unemployment, lack of positive role models, truancy and more.

The Children’s Defense Fund calls this the Cradle to Prison Pipeline® crisis. The more risk factors young people have, the greater the likelihood they will enter the Pipeline. Once in it, kids are caught in a downward spiral that makes it almost impossible to get out. This report tells the stories of people trying to help them.



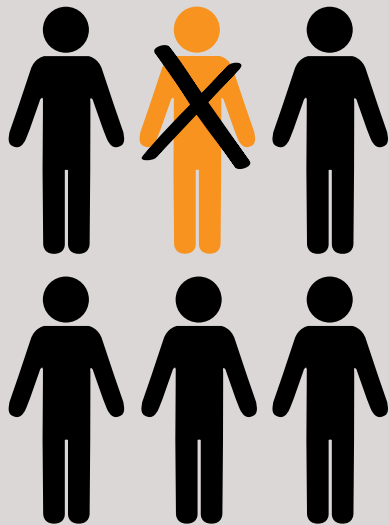
### Social and economic costs

Lack of education channels young people into the Pipeline.

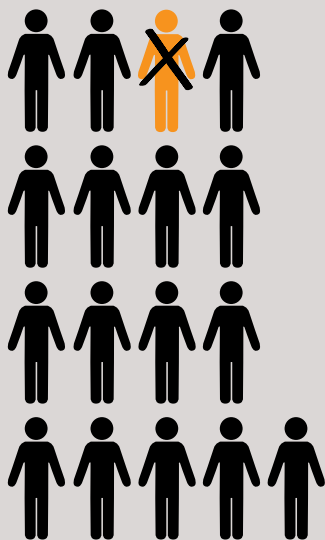
Keeping them in school could save immense sums of money.



African American boys born in 2001 stand a one-in-three lifetime risk of going to prison.



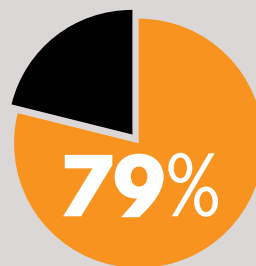
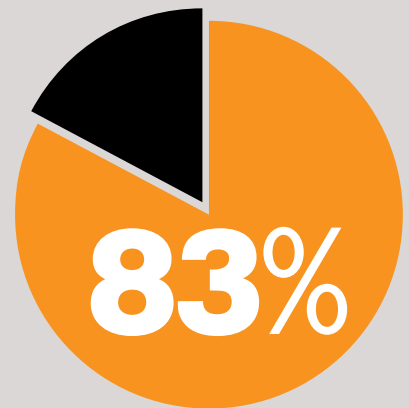
Hispanic boys stand a one-in-six risk of the same fate.



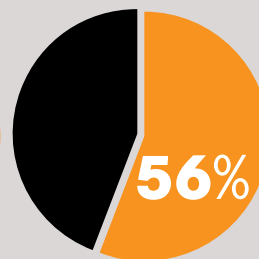
Anglo boys a one-in-seventeen risk.

High rates of incarceration are connected with child poverty and educational disparities:

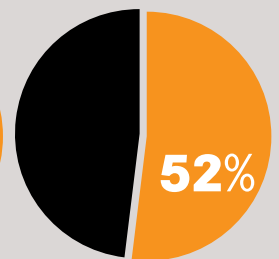
83% of African-American fourth graders in Texas cannot read at grade level



79% compared to of Hispanic children

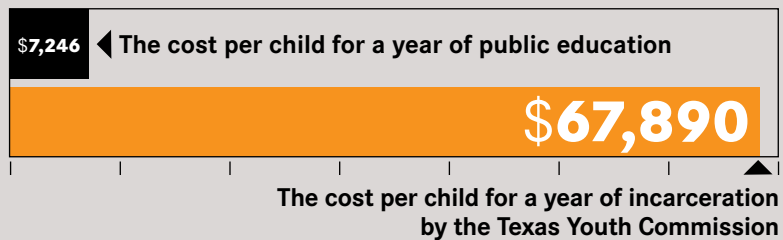


56% of White children



and 52% of Asian children

The cost implications of high rates of incarceration are serious:



\$7,246 ← The cost per child for a year of public education

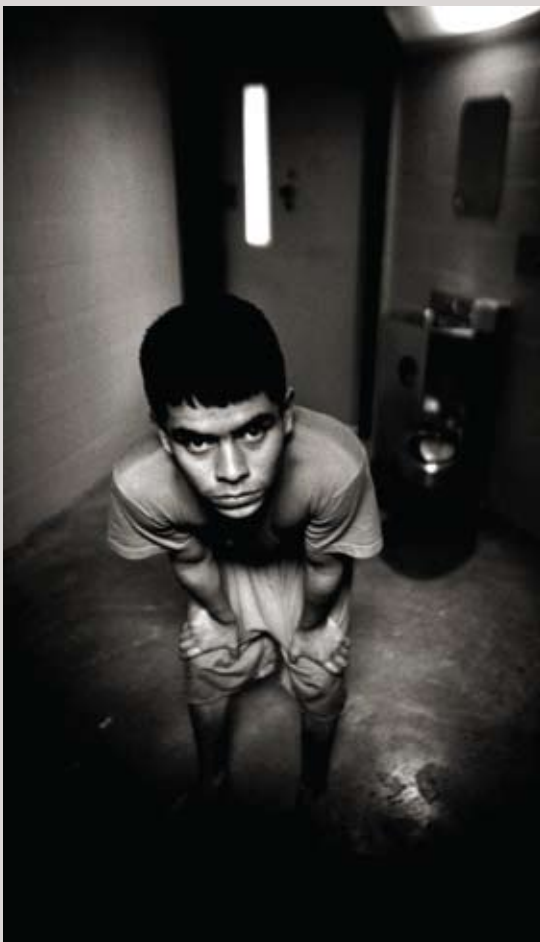
\$67,890

The cost per child for a year of incarceration by the Texas Youth Commission

*The Cradle to Prison Pipeline® Problem:*  
You can easily measure the cost to taxpayers.

**It's impossible to measure the cost to humanity.**





**To raise awareness of the Cradle to Prison Pipeline problem, the Children's Defense Fund has launched a national campaign. American Leadership Forum Class XXV chose to focus on this issue.**

**In this report, we focus on innovative organizations proving that the Cradle to Prison Pipeline can be dismantled through prevention and intervention. These organizations create a more positive future for young people and save taxpayers billions of dollars by avoiding the costs of incarceration.**

Twenty-six leaders from various fields of expertise comprise American Leadership Forum (ALF) Class XXV. This group chose to study the Cradle to Prison Pipeline issue and to analyze organizations that have successfully extricated people from the Pipeline in their communities. We studied these organizations' missions, systems and tasks with the eyes and minds of doctors, police officers, judges, lawyers, artists, activists, teachers, parents, CEOs, and philanthropists.

In this report, American Leadership Forum Class XXV highlights some of these successful programs and their practices.

We identified four key areas as points where the Pipeline can be stemmed: early childhood development; education; health/mental health care; and juvenile justice. In each area, we identified three or four organizations whose practices address the Cradle to Prison Pipeline crisis and can serve as templates for future success.

Our goals: to educate business and community leaders about model programs and create the "public will" to promote investment in preventive programs. As statistics throughout this report will show, pennies spent on early prevention – before children get sick, into trouble, drop out or suffer family breakdown – can save dollars in "cure" down the road.

You may notice the omission of some landmark institutions whose success has changed the cultural landscape of our communities. Our intentions are not to slight them, but to draw your attention to other organizations that define new niches. We simply did not have the resources to explore every worthy organization.

There are numerous ways to help keep people out of the Pipeline. The organizations we have identified, as well as others, need money, volunteers, expertise, awareness and more.

#### **You can help by:**

- 1.** *Providing direct financial assistance that enables the expansion of facilities or staff*
- 2.** *Volunteering time to agencies that need it, such as those who offer mentoring*
- 3.** *Contributing expertise that helps these organizations scale up their services*
- 4.** *Providing training, jobs or internships for those in need*
- 5.** *Raising awareness of the Cradle to Prison problem and the organizations working to dismantle it*
- 6.** *Encouraging others in your network to help*
- 7.** *Studying the practices of these innovators and applying them in your community*
- 8.** *Advocating legislative changes that focus on prevention and early intervention instead of costly incarceration.*

**Addressing the Cradle to Prison Pipeline crisis will significantly and positively impact the future of all Houstonians.**

**This is a living document. Your feedback will expand our findings and help address every aspect of this issue. To learn about additional programs that are working to dismantle the pipeline, please visit: [www.zero2three.org](http://www.zero2three.org).**

# About the American Leadership Forum

## Houston/Gulf Coast Chapter Class XXV

The American Leadership Forum joins and strengthens diverse leaders to better serve the public good. The intense year-long fellows program fosters learning and trust among experienced leaders from every sector of Houston. The result: a unique forum that removes barriers between people, fosters open discussion of issues, and develops solutions that benefit the entire community.

Joseph Jaworski founded The American Leadership Forum in Houston in 1981 to address what he saw as a crisis of leadership throughout the country. The Houston/Gulf Coast Chapter is now one of nine.

The American Leadership Forum is a nonprofit organization with a volunteer board. To date, 26 classes of approximately 20 leaders (called Fellows) each have completed the program to become Senior Fellows.

Each class implements a leadership initiative of the group’s choosing.

Benefits include a continuing supply of effective and enlightened leaders trained in collaboration and consensus building and a stronger, more cohesive community in the Houston/Gulf Coast area.

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### FELLOWS IN CLASS XXV:

**Tracy Baskin**  
*Executive Director/CEO*  
Houston READ Commission

**Terry Bell**  
*President & Chief Investment Officer*  
Rockwell Fund, Inc.

**Barbara Best**  
*Texas Executive Director*  
Children’s Defense Fund

**John Burruss, M.D.**  
*Associate Dean of Clinical Affairs*  
Baylor College of Medicine

**Donna Fujimoto Cole**  
*President & CEO*  
Cole Chemical & Distributing, Inc.

**Martin Cominsky**  
*Regional Director*  
Anti-Defamation League

**Jane Cummins**  
*Executive Director*  
Educational Programs Inspiring Communities, Inc.

**Tony Diaz**  
*Founder/Director*  
Nuestra Palabra: Latino Writers Having Their Say

**Stuart Dow**  
*Headmaster*  
Emery Weiner School

**Sean Gorman**  
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LeBoeuf, Lamb, Greene & MacRae LLP

**Pauline Higgins**  
*Senior Vice President, General Counsel and Corporate Secretary*  
Metropolitan Transit Authority of Harris County, Houston

**Robert Ivany**  
*President*  
University of St. Thomas

**The Honorable Martha Hill Jamison**  
*Former Judge*

**Sylvia Kerrigan**  
*Assistant General Counsel*  
Marathon Oil Company

**Ronald Lewis**  
*Partner*  
Marshall & Lewis LLP

**Lisa Malosky**  
*Freelance Sports Reporter*

**Sister Jane Meyer**  
*Head of School*  
St. Agnes Academy

**Albert Myres**  
*Government & Public Affairs*  
Reliant Energy

**The Honorable Melissa Noriega**  
*Houston City Council Member*

**Eduardo Nunez**  
*General Manager*  
Global Procurement  
ExxonMobil

**Susan Snider Osterberg**  
*Educator*  
University of Houston

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**Daniel S. Perales**  
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**Mourhaf Sabouni**  
*Principal*  
AUTOARCH Architects LLC

**Vu Thanh Thuy**  
*CEO*  
Radio Saigon Houston

# Prenatal Care and Early Childhood Development

The overriding characteristic of those caught in the Cradle to Prison Pipeline crisis is poverty. Poverty is not simply an absence of property. It is also a way of thinking, speaking, interacting with others and looking at the world. Poverty sets boundaries on expectations and possibilities.

Children of impoverished parents don't choose to be born into poverty. Their ability to leave it is impaired by the perception, shared by many of us, that having more money or more things can cure poverty.

The organizations we showcase in this section work to address the root causes of poverty. They apply the same rigor to treating it as we would in treating a disease such as malaria. They all:

- Take the treatment to the field
- Evaluate outcomes to determine what works and what doesn't
- Publish success stories so that others can learn from them.

## Organizations making a difference

Among the many worthy organizations currently active in Houston, we chose to highlight:

- Healthy Family Initiatives, including its Building Strong Families, Dads Make a Difference and Nurse-Family Partnership programs
- ChildBuilders
- The Lee High School Infant/Toddler Child Care Center.

These organizations' programs represent three important practices in improving the health and well-being of children and families in effective and cost-efficient ways.

1. Healthy Family Initiatives provides **in-home visitation programs** that have a proven record of preventing child abuse and improving parenting skills.
2. ChildBuilders provides a community-based prevention program that **teaches children and adolescents to become effective parents** and to protect themselves from abuse.
3. The Lee High School Infant/Toddler Child Care Center provides **access to affordable, on-site child care** that can help reduce dropout rates among teen parents.

Children of impoverished parents  
don't **choose** to be born into poverty.

# Healthy Family Initiatives (HFI): early prevention services result in social and fiscal benefits to participants and community

## ► PROGRAM:

Healthy Families; Dads Make a Difference; Building Strong Families; Nurse-Family Partnership

## ► PIPELINE IMPACT POINTS:

Prenatal/Infant; Parenting; Early Childhood Development

### Focus on change at the earliest points in the Pipeline: prenatal or at birth

Healthy Family Initiatives' (HFI) purpose is to strengthen families. They do that by identifying best practices in prevention and building community capacity to implement them.

### Visible and quantifiable results in health and parenting

HFI programs produce important positive outcomes:

- Timely immunizations and wellness checks for children
- Reduced use of hospital emergency rooms
- Fewer teen pregnancies and longer intervals between pregnancies
- Improvements in parenting skills and knowledge
- Dramatic increases in parent employment, education and family self-sufficiency
- Reductions in stresses that lead to abusive behaviors toward children
- Virtual elimination of child abuse and neglect in participating families
- Significant reduction in domestic violence.



**Reduce government aid costs and increase the tax base**

Home visitation models have demonstrated the effectiveness of one-on-one, culturally competent, client-accessible services, whether in-home or community-based. They also demonstrate how investments in prevention benefit HFI’s clients and the community. HFI programs reduce the cost of government aid:

- The program costs \$3,000 to \$8,000 per family for one year
- Foster care or juvenile justice intervention costs \$30,000–70,000 for one year.

These programs increase the overall tax base by raising both the number of individuals employed and their income.

- Average family income *before* the program: \$13,000 (including public assistance)
- Average family income *after* one year: \$32,700 (with less than 1% of families still receiving government assistance)
- Increased employment and income result in an estimated annual contribution in federal, state and local taxes of more than \$400,000.



INITIATIVE	SUCCESS RATE
Preventing child abuse and neglect	99%
Pursuing further education	90%
Procuring timely childhood immunizations	90% (vs. 64% of general Houston population)
Accessing medical care through permanent provider, rather than expensive ER visits	95%
Increase in family income	30%
Do not require public assistance after program	99%

### **Replicable programs designed to scale upward**

In its pilot programs, HFI serves more than 1,500 people annually. These programs begin pre-natally or at the birth of a child. And they cost significantly less than incarceration or foster care.

Collaboration and the engagement of community resources are keys to strengthening families. HFI works with many local and state entities to bring the broadest array of services to at-risk families at the earliest possible time. The group leverages local philanthropic support and other funding opportunities to build scale. Having started in the Gulfton area, HFI programs now reach citywide.



### **A True-Life Success Story**

## Where the Pipeline begins

### **A mother and father of limited means are about to have another child**

Manuel packed his bags and prepared to leave. He and Lucia, the mother of his two-year-old son, didn't get along well anymore. Manuel felt that leaving would make his life simpler. Finding his own place would eliminate arguments about money, child care, their small apartment and another baby coming shortly. Still, he regretted the end of the relationship.

Lucia knew that if he left, he might not support her. She also knew that if he didn't support her, she and her babies would face a difficult road. Nevertheless, their constant bickering tired her. Though neither really wanted their relationship to end, she too felt they both would feel happier apart.

Then someone who knew the couple referred them to Healthy Family Initiatives. A caseworker, Luz Benitez, visited the family in their home to see if HFI's Building Strong Families program could help. At the conclusion of this visit, she invited them to participate. Despite Manuel's reluctance, he agreed with Lucia to meet with Luz twice a month to discuss parenting and relationship-building. When these sessions proved helpful, they attended group sessions with couples similar to themselves. There they learned about building relationships with each other, employers and outsiders. They also learned ways to address money and child-rearing problems.

Manuel and Lucia re-committed to their relationship after Luz Benitez convinced them to participate in the Building Strong Families program. They married and now are proud parents of a new baby daughter.

# Healthy Family Initiatives

Nurse-Family Partnership (NFP):  
improves lives of high-risk families using  
preventive health measures and education.

► **PROGRAM:**

HFI Nurse-Family Partnership

► **PIPELINE IMPACT POINTS:**

Prenatal/Infant; Parenting

Another HFI program worthy of special mention is the Nurse-Family Partnership (NFP). The most rigorously tested program of its kind, the NFP demonstrates exceptional social benefits and cost-effectiveness. Healthy Family Initiatives functions as the lead agency for replicating this program model in the Houston area.

## **Changes behavior in low-income, first-time parents, during pregnancy and after birth**

This nurse home-visitation program improves the health, well-being, and self-sufficiency of low-income, first-time parents and their children. NFP nurse home-visitors work with clients to:

- Improve pregnancy outcomes by helping women engage in good preventive health practices
- Improve child health and development by helping parents provide responsible and competent care
- Improve economic self-sufficiency by helping parents plan for their future, continue their education and find work.



**NFP reduces family risk factors**

Nationally, NFP provides nurse home-visitation services in 22 states to low-income, first-time mothers who voluntarily participate. Reported outcomes for all programs include:

- 46% increase in father presence in the household
- 31% fewer closely spaced subsequent pregnancies
- 50% reduction in language delays at age 21 months
- 67% reduction in behavioral/intellectual problems at age six.

Randomized controlled trials of NFP were conducted in Elmira, New York (1977); Memphis, Tennessee (1988); and Denver, Colorado (1994). The following consistent program effects were found in at least two of the three trials:

**How the program benefits children**

- 48% reduction in child abuse and neglect
- 59% reduction in arrests
- 90% reduction in adjudications as PINS (person in need of supervision) for incorrigible behavior.

**How the program benefits mothers**

- 61% fewer arrests
- 72% fewer convictions
- 98% fewer days in jail.

**Net return of \$5.70 per dollar spent for high-risk populations**

NFP’s approach has undergone an external cost-benefit analysis. In the Elmira trial, net reductions in public costs began accruing by the time the child turned four years old. Evidence suggests effectively targeted programs produce even larger economic returns and benefits.

In 2003, the RAND Corporation independently estimated that the return for each dollar invested in Nurse-Family Partnership was \$5.70 for the higher-risk population served and \$2.88 for the entire population.

A 1998 RAND study identified at least four types of significant savings to government agencies accruing from the NFP program:

- Increased employment and earnings by program participants leading to higher state and federal income tax revenues, Social Security contributions, and state and local sales tax revenues
- Decreased government assistance use including Medicaid, Food Stamps, welfare and general assistance by counties
- Decreased government expenditures for education, health, and other services, including special education, emergency room visits and homeless shelters
- Decreased criminal justice system spending on arrest, adjudication and incarceration.



When looking at *high-risk populations alone*, a 2005 RAND study reported greater savings:

- A net benefit to society of \$34,148 per participant, or a \$5.70 return per dollar invested in Nurse-Family Partnership
- Reduction of pre-term births for high-risk mothers by over 40% in two states
- Increases in birth intervals, resulting in less stress on families.

NFP programs can translate into significant cost savings for Medicaid. A Washington State Institute for Public Policy (WSIPP) study found:

- NFP ranked highest in terms of cost return among pre-kindergarten, child welfare, youth development, mentoring, youth substance abuse prevention, and teen pregnancy prevention programs
- Estimated NFP costs per family: \$9,118
- Estimated benefits to society: \$26,298
- Net return to society: \$17,180 per family served
- \$2.88 return per dollar invested.

The benefits above came from the entire population. They most likely would be higher when looking at high-risk families alone. Additional cost savings could also come from reductions in pre-term births, subsequent pregnancies, welfare usage, or child injury and immunizations.



### **NFP: Growing through partnerships**

The Nurse-Family Partnership (NFP) National Service Office currently supports a network of implementing agencies, serving families in more than 280 counties in 22 states.

A team of public health, nursing, education, and program evaluation professionals at the National Service Office support the Nurse-Family Partnership Implementing Agencies. This office also collaborates with Public/Private Ventures based in Philadelphia; Invest in Kids based in Denver; and other partners where Nurse-Family Partnership currently operates.

The organization wants to make the program available to all low-income, first-time families by partnering with local agencies like HFI, fund raisers and public entities.

# ChildBuilders: educates children on healthy relationships in a high-impact, low-cost manner

► **PROGRAM:**

Parents Under Construction; We Help Ourselves; Love U2

► **PIPELINE IMPACT POINTS:**

Prenatal/Infant; Parenting; Education

ChildBuilders educates children and youth about personal safety, healthy relationships and how to be nurturing parents in the future. Using its “train the trainer” approach, ChildBuilders can reach large numbers of children with a small staff and at a cost of less than \$25 per child.



## Educate young children to prevent child abuse while creating the next generation of nurturing and caring parents

Providing innovative education programs since 1974, ChildBuilders trains teachers, nurses, counselors, and volunteers to teach children how to be safe, to build healthy relationships, and to be nurturing parents to future generations via the following three programs:

- **Parents Under Construction**, a research-based, award-winning program that teaches children today the parenting skills they will need tomorrow
- **We Help Ourselves**, a safety education program designed to help children and adolescents learn to stay safe, how to handle threatening situations, and how to get help
- **Love U2**, a curriculum designed to help middle- and high-school students develop healthy relationships. It addresses such powerful issues as attraction, infatuation, rejection, dating, breaking up, and dealing with a broken heart.

**Proven effective at making positive impacts in children’s lives**

Through the 390 professionals and volunteers trained, nearly 50,000 children and adolescents participated in ChildBuilders programs in 2007.

Since 1991, ChildBuilders has trained over 3,000 professionals and volunteers in the Parents Under Construction curriculum, which is available in English and Spanish. In that same time, more than 70,000 children and adolescents have participated in the program.

Parents Under Construction has proven effective in 17 independent evaluations and has been honored with six awards. Research indicates that Parents Under Construction:

- Grows stronger children by teaching mentally healthy discipline techniques
- Improves student behavior
- Enjoys overwhelming parental approval
- Helps kids retain knowledge and attitude changes for at least five years after participation.

**Highly cost-effective programs reach large numbers of children**

ChildBuilders represents a cost-effective model that can create a new generation of caring and nurturing parents while also protecting children from child abuse. The annual cost of ChildBuilders’ primary prevention programs is less than \$25 per child, while the annual cost for treating severely abused children is \$70,000 per child.

**ChildBuilders: training the trainers approach**

Using a “train the trainer” approach, a small staff can train thousands of teachers, nurses, counselors and volunteers, who then teach children. If taken to scale, ChildBuilders could make a significant impact in promoting healthy social and emotional development in all children and families in the Houston area.



# YMCA & Lee High School: teen parents stay in school and learn to be successful parents

► **PROGRAM:**

Lee High School Infant/Toddler Child Care Center

► **PIPELINE IMPACT POINTS:**

Parenting; Education

Teen mothers drop out of school because they don't have anyone to care for their children. The Lee High School Child Care Center helps keep these young women out of the Pipeline. It does so by ensuring teen parents graduate from high school and learn appropriate parenting skills.

The Center is currently licensed for a maximum of 24 children (ages 6 weeks to 2 years). It operates from 8:00 am to 4:30 pm during all school days and summer school.

- Total annual budget: \$183,254
- Estimated annual cost for care per child: \$7,625

**Dependable, accessible child care directly benefits teen parents**

The YMCA manages this onsite licensed infant toddler child care center. Access to child care they can trust and depend on eases the daily burden of teen parents who attend Lee High School. About 80 such students attended Lee during the initial program design.



Teen mothers **drop out** of school because they don't have anyone to **care** for their children.

### High participation rates and social support create successful parents

Still in its pilot stages, the program already reports that participating teen parents graduate, have fewer school absences, use appropriate parenting skills, and participate fully in the program. Infants and toddlers demonstrate progress in all developmental stages. Having a support system increases teen parents’ opportunities for success.

- All teen parents bonded with children, staff, and other teen parents in the program
- Teen parents learned how to develop the building blocks for healthy children
- 25% of infants entered the Center behind their appropriate developmental stage in motor and language skills; after one year, 100% of the infants in the program were at or above developmental norms for their age
- 100% of parent-students participated in parenting classes; 100% received mentoring on a daily basis from child care teachers; 100% reported they have increased knowledge and skills in caring for babies
- In the 2007-2008 school year, the Center served a total of 26 infants and toddlers.

### Keeping teens in school

Access to affordable, onsite child care helps reduce dropout rates among teen parents. Graduating from high school makes going to college and gaining good employment possible for teen parents.

- Six Lee High parents with children in care at the Center graduated in June 2008.

### Connects to other programs to provide more comprehensive assistance

The Center connects to numerous other programs offered at Lee through collaborating community organizations. These include a prevention program, health clinic, and young father’s program.

Students also use a food/clothing pantry when in need and give back to the pantry when they can.

A Lee High teacher oversees a child development cooperative that provides the students with experiential learning.

A pre-employment lab provides an opportunity to learn skills that will enable students to gain employment.

Finally, working with HISD and Houston Community College, teen parents can earn professional and academic credit as a child-care worker.

### Infant Developmental Rate Improvement

**25%**  
of infants entered the Center behind their appropriate developmental stage in motor and language skills.

**100%**  
of the infants in the program were at or above developmental norms for their age after one year.

# Education

Education plays a major role in improving children's lives. We observed several particularly effective models.

## **Organizations that make a difference:**

- Genesys Works
- Pro-Vision, Inc.
- Cristo Rey High School

Each guides young people toward college instead of jail. These programs directly affect youths who don't have positive role models. The programs give students exposure to the corporate world and teach them the skills needed to survive. In doing so, these three programs help address the Cradle to Prison Pipeline crisis:

They help the most at-risk youth in our city. Their success relies on several factors:

- Intensive parent involvement
- Intensive student commitment with long school hours
- Experiential activities in the community
- Active mentorship from positive role models.

## **Teaches students the way out of the Pipeline**

At-risk students face many barriers to graduation. The institutions described here offer a good education and an environment that helps them thrive. The programs build students' self-confidence, help them set challenging goals for success, and help them reach those goals.

Parents are key to the success of students in these schools, as are the mentors who agree to serve as role models. Properly selecting, training, and matching these role models to the students creates an effective pathway out of the Pipeline for many at-risk students.

Exposing students to professional work environments also provides opportunities that many caught in the Pipeline would not otherwise see. Internships in real business environments help students see what they can achieve if they work hard and finish school.

At-risk students face  
**many barriers** to graduation.

# Genesys Works: the pipeline to the professional world for at-risk youth

► **PROGRAM:**

**Training and Internship Program**

► **PIPELINE IMPACT POINTS:**

**Education, Mentoring, Work skills**

Genesys Works hires and trains students from low-income high schools to do technical or accounting services for major corporations during their senior year. The experience they gain shows them how to be successful for the rest of their lives.

## **Students learn and work in real businesses**

Students undergo an intensive eight-week training program the summer before their senior year. They learn both the technical aspects of information technology, engineering drafting, or accounting, and how to succeed as a professional. Once trained, students work for one of the program's corporate clients, which include most of the Fortune 500 companies in Houston. During that year, students discover they can succeed as professionals and change the direction of their lives.



### 90 percent go on to college

Genesys Works measures its success in two ways. First, more than 90% of participants go to college when they finish the program.

The more important way, more difficult to measure, looks at whether the students pursue and find productive careers *after* college and whether this productivity follows them throughout their lives.

Genesys Works has demonstrated that low-income students with prior educational deficiencies can succeed in the corporate world if given the right knowledge, tools and opportunities. The Genesys Works model has great potential to help teachers, counselors, and administrators bring relevance into the classroom, set the bar high, and expect more from their students. This year, educators will attempt to measure a change in school culture as a result of the Genesys Works program.

### Currently supported by 30 major corporations

Currently, about 30 major corporations engage Genesys Works students during their senior year. If the entire business community participated in the program, many more young people could look forward to professional careers. The program is 80% self-sustained by the fees companies pay for the student labor. But Genesys still needs to fund-raise about 20% of its expenses.

With the support of the business community and the appropriate funding, this program can influence the entire education system.

### A True-Life Success Story

## A life alternative to the business of poverty

At 15, Hector, a high school junior, worked at a Subway sandwich shop. He was the oldest of four siblings. His parents didn't finish elementary school. Hector had absolutely no expectations of continuing his education beyond high school. On the contrary, his cousins continually encouraged him to join 'their business': drug dealing.

Hector enrolled in Genesys Works instead. After training, he worked in the IT department of Reliant Energy and then at United Space Alliance in the Space Shuttle program. He discovered he could succeed in the corporate world, but needed to go to college. He was admitted to Texas A&M University – the only person from his high school graduating class to go there. Although most didn't expect Hector to stick with college, his former supervisors encouraged him to stay on every time he wanted to quit.

Today, as a senior at A&M, Hector looks forward to graduating in May. He works at Hewlett Packard where he will likely remain after graduation with a great salary. He also convinced his younger siblings to enroll in Genesys Works. His sister just finished the program and enrolled at the University of Houston. Genesys Works broke the cycle of poverty in Hector's immediate family forever. Although his cousins still deal drugs, Hector has avoided that path and is on track to reach his full potential.

# Pro-Vision, Inc.: leading at-risk male youth to develop personal growth, self-confidence, and success

## ► PROGRAM:

All-Male Middle Charter School; Manhood Development Academy; Job Enterprise Academy

## ► PIPELINE IMPACT POINTS:

Education; Mentoring; Work skills

Pro-Vision, Inc. dedicates itself to providing at-risk young males a way out of the Pipeline via education, mentoring, and personal development.

### Addresses Houston's male youth dropout crisis

Pro-Vision provides at-risk students with a comprehensive program that inspires hope, provides direction, and gives encouragement. Pro-Vision is the parent organization of three programs that address the challenges faced by at-risk young males:

- The All-Male Middle Charter School, the first all-male charter school in Houston and the state of Texas, targets young men in grades 5 through 8 who face challenges that prevent them from achieving success in a traditional school setting
- The Manhood Development Academy, Pro-Vision's founding program, addresses the dropout crisis among young males and gives them alternatives to drugs, gang culture, and incarceration
- The Enterprise Academy Program fulfills the economic and social potential of participants age 15-18 by teaching them the skills they need to become productive and successful in the workplace.



### Quantifiable successes

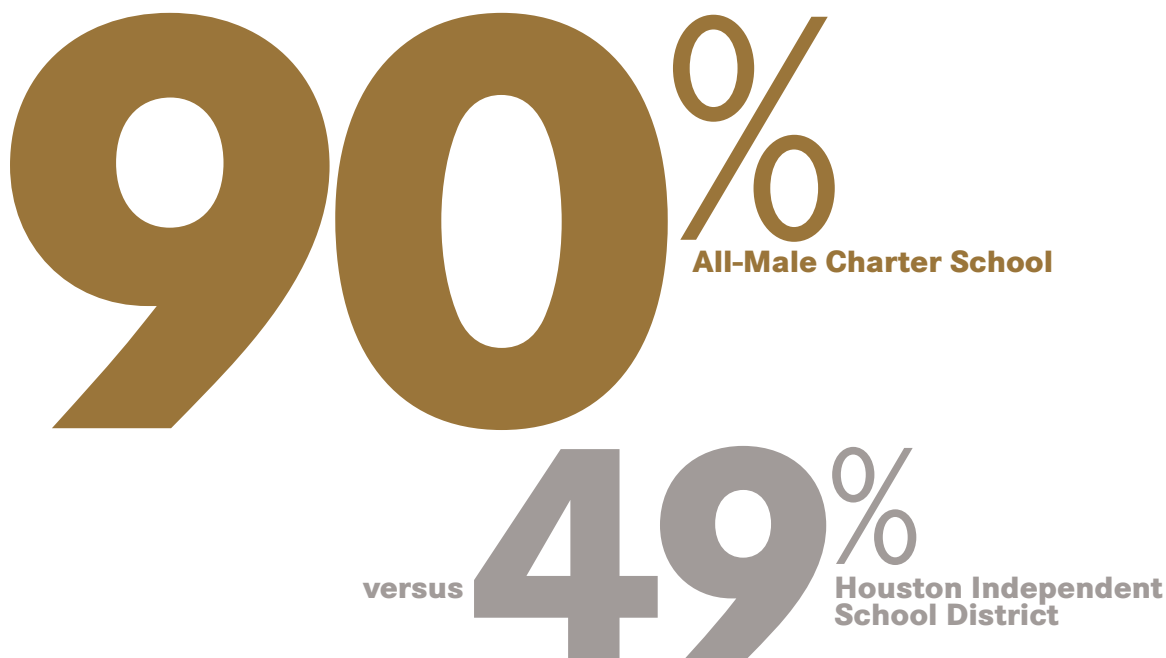
- More than 90% of students at the All-Male Charter School graduate from high school compared to 49% in the Houston ISD.
- The charter school achieves a 95% attendance rate due to parental commitment and involvement and ongoing counseling for students
- The Manhood Development Academy sustains an attendance rate of more than 90%
- Pro-Vision alumni contribute to the teaching and instructional team, counselors, tutors and volunteers in the Manhood Development Academy, All-Male Charter School, and Job Enterprise Academy.

### Planned growth and alliances

Pro-Vision relocated to its new 16-acre campus in the Sunnyside Neighborhood of southeast Houston in November 2008. It opened with a newly constructed academic building, which is part of its \$7.6 million capital campaign. Phase Two will build a gymnasium and classroom building. It will also include planning for a high school.

Pro-Vision Job Enterprise Academy continues to attract local businesses and companies to serve as program mentors and onsite apprenticeship/internship providers. They also develop and maintain key academic and community alliances to help guide the program and its growth.

### Graduation Rates



# Cristo Rey Jesuit College Preparatory High School of Houston:

## providing intensive academic and experiential learning

### ► PROGRAM:

Corporate Internship Program, Cristo Rey High Schools with Nationwide Campuses

### ► PIPELINE IMPACT POINTS:

Education; Mentoring; Internships

A nationwide network of Cristo Rey High Schools provide academic instruction while giving students the skills they need to work in the business world. Corporate partners hire Cristo Rey students and provide them opportunities to use their skills and fund their education. A Cristo Rey Jesuit College Preparatory High School will open in Houston for the 2009-2010 academic year

### **Students develop work skills while maintaining full academic schedules**

Cristo Rey's Corporate Internship Program (CIP) combines two commonly used business concepts—employee leasing and job sharing—and gives students the means to finance their education. Through CIP, each student earns up to 70% of the cost of his or her education by working in entry-level positions at professional offices in Houston. Longer school days and a longer school year balance out the time spent gaining real-world experience on the job.

CIP uses corporate salary funds to pay for high school interns who share a job. The funds for the students' work go to the School, which reinvests them in educational instruction. Four students share each job, allowing each of them to learn concepts and use them in a real-world environment. The salary-funding strategy makes the program affordable to all who are interested.



### **Facilitates students' success academically and professionally**

Students work as a four-person team to share one full-time, entry-level position at a local professional office. Each student works one day a week and they all rotate the fifth day, for a total of five full days per student per month.

Cristo Rey achieves their success using the following tactics and strategies:

- Students work regular business hours
- Students do not miss class time because school schedules are structured to work with the program
- Students' earnings go directly to the high school, covering up to 70% of the cost of their education.

Roughly two-thirds of students receive financial aid to supplement their earnings. On average, families spend approximately \$1,500 per student per year on tuition. In comparison, prep schools nationwide cost families an estimated average of \$17,000. Those in major markets cost much more.

### **Part of a proven network**

Every Cristo Rey Network school begins by thoroughly assessing the needs and interests of a community. The Jesuits of the New Orleans Province completed a study in June 2008 to evaluate areas of greatest parent, student, and business demand for a Cristo Rey high school in Houston and to select a site.

As a result, Houston will have a high-performing academic institution committed to the academic, personal, and professional development of economically disadvantaged students. Cristo Rey graduates enter adulthood firmly grounded in a strong educational tradition.

### **Revenues from Corporate Internship Program plus tuition cover operating expenses**

A Cristo Rey high school has the backing and experience of a national network with a long track record behind it. The bedrock of a Cristo Rey model high school is the Corporate Internship Program. Upon reaching full enrollment, Cristo Rey Network high schools are able to cover more than 90% of their operating expenses through the CIP and a modest tuition.

By partnering with local business and not-for-profit organizations, Cristo Rey model schools are changing the face of urban education in the United States.

Cristo Rey Network high schools  
are able to **cover more than 90%**  
**of their operating expenses**  
through the CIP and a modest tuition.

# Health and Mental Health Care

The lack of mental and behavioral health care contributes to keeping people inside the Pipeline. If unaddressed, these issues can push individuals to the margins of society and make it difficult if not impossible to escape the Cradle to Prison Pipeline problem.

## **Organizations that make a difference**

We found three examples of programs that use effective health and mental health care programs to address the Cradle to Prison Pipeline crisis:

- The Harris County Hospital District Community Behavioral Health Program
- The Council on Alcohol and Drugs Houston K.I.N.D.E.R.x. Clinic
- The Baylor College of Medicine Teen Clinics.

These organizations have proven successful in bridging the gap between mental health care/behavioral health care and the more routine aspects of health care and social integration in general. Common features:

- Location of services with traditional primary care provider resources
- Efforts to screen and intervene at earliest possible stages of impairment
- Easy access within neighborhoods (as opposed to traditional medical centers)
- Services that engage the entire family and support groups.

These programs successfully provide mental health care intervention and treatment within community health care settings. They exemplify ingenuity in their creation and implementation. All three began through philanthropic support.

The **lack** of mental and behavioral health care contributes to keeping people **inside** the Pipeline.

# Harris County Hospital District: provide intervention into mental health challenges as early as possible

▶ **PROGRAM:**

**Community Behavioral Health Program (CBHP)**

▶ **PIPELINE IMPACT POINTS:**

**Health and Mental Health Care**

The Community Behavioral Health Program (CBHP) approaches a child's mental health issues as a whole, not as bits and pieces that need fixing. They use the strength of collaboration with the family, the school, and other programs to fit the intervention to the individual. This collaboration provides a strong foundation for the child's health and success.

### **Interventions and treatments benefit individuals, families, and communities**

The CBHP offers a variety of interventions as early as possible in the child's life to address behaviors that can derail a child's success. Having a team of clinicians, psychiatrists and counselors makes interventions more possible.

The organization engages the child, the entire family and the school to achieve the best possible outcomes.

If children need more substantial interventions, CBHP guides them to the Mental Health Mental Retardation Association of Harris County (MHMRA Harris County), Harris County Protective Custody (HCPC), or other agencies.



### **Documented success**

CBPH has served hundreds of children and families. Even though difficult to measure, outcomes have proven to be highly positive. This success has caused CBHP to win several national awards of recognition for the success and quality of its interventions.

### **Intervening before trouble starts leads to greater success**

Evaluating and intervening at early stages, before a child receives a label of ‘troublesome’ or ‘bad,’ allows a child to achieve much greater success in school and in life. Intervening at these earlier stages benefits society and the individual enormously and helps avoid failures that lead to high dropout rates, limited employability, and high incarceration rates.

### **Tax-funded: serving the under- and uninsured**

The CBHP works within the Harris County Hospital District, the fourth largest public health care system in the country. This tax-funded system delivers mental health and health care to enormous populations of uninsured and underinsured individuals. It delivers this care at a scale that offers the opportunity for community-wide engagement.

The CBHP promotes synergy amongst the largest and most important components of a child’s development. These systems have the greatest opportunity to exert positive influences on children’s lives before they fall too far into the Pipeline and into substantial anti-social behavior and juvenile justice involvement.

## **A True-Life Success Story**

# Helping William navigate out of the Pipeline

The story of William demonstrates CBHP’s success. This young man’s family hovered around the federal poverty line. His older siblings, aunts and cousins provided inconsistent care while his single mother worked one of her two jobs. William’s genetic problems made it difficult for him to concentrate and tolerate frustration. He endured enormous emotional swings. With this background, he didn’t form attachments with his peers and his school became quite frustrated with him. Approaching adolescence, he grew dangerously close to being relegated to the margins of society.

When the CBHP engaged him, they assessed William for physical and emotional problems, which led to treating him with medication for attention and concentration disorders. Treatment allowed him to participate in activities that helped him deal with his social problems. CBHP counseled his family so they could better understand the challenges facing him. William’s school counselor and teachers participated fully. As a result, William accomplished several things: his grades improved and he passed all classes; his peer group expanded; and his family grew less frustrated.

At this point, William will likely complete his high school education, thereby avoiding the many barriers presented to the high school dropout. He will also have a greater capacity to make friends and live up to the expectations of an employer.

# The Council on Alcohol and Drugs Houston: addresses essential health care needs of pregnant women with substance abuse problems and their children

## ► PROGRAM:

K.I.N.D.E.Rx. Clinic

## ► PIPELINE IMPACT POINTS:

Health, Prenatal & Infant

The K.I.N.D.E.Rx. Clinic focuses on women who are pregnant and have substantial substance abuse issues, and on the newborns delivered by these women. For mothers, this program provides prenatal care, health assessment, sobriety maintenance, and mental health care throughout pregnancy. For newborns, it provides pediatric care where necessary.

### **Reduce or eliminate the use of alcohol and drugs during pregnancy**

The Clinic works with pregnant women, many of them still adolescent, to get and keep them off alcohol and drugs during pregnancy. The program also focuses on providing effective treatment for those newborns with *in utero* alcohol and drug exposure to reduce the long-term consequences of this exposure. These young mothers desire to overcome their substance abuse problems so they can have a healthy pregnancy and deliver a healthy newborn.



The Clinic applies a comprehensive approach. They provide traditional medical care in concert with:

- Effective sobriety maintenance interventions
- Mental health care treatment
- Counseling to minimize *in utero* exposure to developing fetuses.

The Clinic also provides expert postnatal care for newborns who have been exposed during pregnancy and incorporates the precise interventions proven to be effective in this extremely high-risk population.

### **A long history of success**

The Clinic has operated at The Council for many years and has provided interventions for hundreds of pregnant women and their newborn infants. The long-term outcome of these interventions will not be known until the children mature. But the Clinic has seen a significant reduction in the number of exposures to substances of abuse for pregnant women and their fetuses.

### **Reducing exposure decreases behavioral issues later**

*In utero* exposure to alcohol and drugs commonly contributes to behavioral disturbances in children and adolescents. By reducing or eliminating this exposure, we can decrease behavioral disturbances later in life. Intervening as early as possible helps avoid many of the problems that later push children into the juvenile justice system.

### **Collaborating to work at a larger scale**

Prenatal care exists throughout our community in many settings, including the Federally Qualified Health Centers (FQHC's), the Harris County Hospital District, and innumerable private obstetrical offices.

Implementing the Clinic model across those many systems is more a matter of promoting the opportunity than raising funds because these interventions are already incorporated into our larger health care financing system through public payers like Medicaid and CHIP, or standard third-party health insurance providers.

Through the work of the Clinic, we see how primary health care, specialty care, and behavioral health care can collaborate to help both young mothers and their children.



# The Baylor College of Medicine Teen Health Clinics: Providing a comprehensive health safety net for adolescent moms, at-risk teens and young, inner-city males

## ► PROGRAM:

The Teen Clinics

## ► PIPELINE IMPACT POINTS:

Health Care; Parenting

### Clinic Services and History

The Baylor Teen Health Clinics (THC's) began as a one-day-a-week, adolescent maternity clinic at the Jeff Davis Hospital in 1969. Today, seven inner city primary and reproductive care clinics provide free or low cost health care, counseling and education to indigent young men and women from 13 to 25 years of age. The THC's pioneered programs that provide medical care, preventive education and social services to sexually active and pregnant teens. Last year, these teens visited the clinics more than 26,000 times.

The clinics also support young, at-risk males with social and medical interventions and care. The goal: to reduce behavioral and health risks. Young men who receive medical care and social services are more likely to avoid the legal system. Their families are also more likely to participate in preventive health care.

Eighty-five percent of THC's patients have family incomes at or below the poverty level. Few qualify for private or public insurance because of age, immigration status or the request for reproductive care. Consequently, they frequently use local emergency rooms for primary, acute and chronic health related care.

### 2008 patient income levels:

100% of poverty and below	85%
101% - 150%	8%
151% - 200%	3%
201% - 250%	2%



## Located Near the Needs

Baylor located the seven clinics in areas of high infant mortality and teen pregnancy. The clinics provide free or low cost:

- Comprehensive primary health care
- Family planning services
- Screening and treatment for STI (sexually transmitted infections) and HIV
- Health education and risk reduction
- Prenatal care
- Sports physicals
- Wellness exams
- Nutritional services
- Counseling and case management in a culturally and age-appropriate environment.

## Innovative Programs

### Maternity care for teen moms; support for dads

The Clinics' Centering Pregnancy Program provides young, pregnant and parenting teens (and their partners) with prenatal care in 12 group sessions. These sessions include:

- Medical care
- Support and education on pregnancy, parenting and relationships
- Co-parenting lessons.

The program helps young fathers develop a strong family connection and gives them tools to establish paternity, declare child support and be a good father. This helps provide financial security for the child. It also reduces child abuse and domestic violence.

To date, 588 young moms have participated in this innovative approach to maternity care. Results show moms have fewer medical complications; more dads establish paternity and pay child support; and both parents play active roles in the child's life.

**Male Only Clinics:** To improve the health of poor women, we provide health care to their partners. With no appointment necessary, the clinic provides free primary and reproductive care services to 15 - 28 year old men three days per week in locations that rotate. The clinic also offers counseling, job training and case management that helps teens avoid problems with the law. The percentage of male clients has increased from 14% in 2005 to 22% in 2008.

### Core Male Services:

- Testing and treatment of STIs
- Treatment of minor illnesses
- Testicular cancer screening
- HIV testing and counseling
- Sport and job physicals
- Mental health screening.

Year	Total Clients	Female Clients	Male Clients	% Male Clients
2005	6,975	5,980	995	14%
2006	9,640	7,958	1,682	17%
2007	9,696	7,739	1,957	20%
2008	9,977	7,743	2,234	22%

### Teen Health Clinics in Schools

Uninsured families delay or forego medical treatment for their children. This can impair the children's studies.

To respond to this need, Baylor – with the support of public and private funding – has established two clinics in Houston Independent School District high schools. At both schools, the majority of students lack insurance.

### Lee High School

The Lee High School Clinic opened in 2006. Of the 2,200 students at Lee, most are first-generation, Hispanic immigrants, below or near the poverty line. They come from 72 countries and speak 40 different languages. More than a third enroll in English-as-a-Second-Language

classes. Ninety-two percent qualify for free and reduced-cost lunch programs.

### Cesar E. Chavez High School

This school lies less than a quarter mile from four chemical plants. More than eighty percent of the 2,375 students are Hispanic. More than two-thirds qualify for free or reduced-cost lunch programs. Most are below or near the poverty level. Nearly one-third of the Hispanic students report their property has been stolen or deliberately damaged at school. Improving this school will require reducing gang activity. The Chavez High School Clinic opened in 2008.

Clinic profiles	Lee HS	Chavez HS
Uninsured Students	1,883	2,111
Students	1,924	2,375
<b>Percentage Uninsured</b>	<b>97%</b>	<b>88%</b>
Number of Student Visits in the Clinic	1,591	519
Number of Sports Physicals	227	253
Number of Sports Injuries	155	63
Number of Well-adolescent Check-ups	7	0
Number of General Medical Problems	348	25
Number of Pregnancy Tests	188	6
Number of Positive Pregnancy Tests	23	4
Number of Pregnancy Diagnostic Visits	21	4
Number of Gynecological Exams	375	8
Number of STI tests	150	2
Number of Positive Chlamydia/Gonorrhea	22	1
Number of HIV Counseling/Testing	86	2
Number of statutory rape cases reported	5	5
Number of referrals made for Prenatal Care	21	4

# Juvenile Justice

According to data gathered by Mental Health America of Greater Houston as part of Operation Redirect, nearly six out of every 10 children processed through the Harris County Juvenile Detention Center have behavioral health issues that likely contributed to their delinquency.

According to Texas Appleseed, during the 2006–2007 school year 28,616 students were sent to Disciplinary Alternative Education Programs (DAEPs) in the Houston area. This number represents about 20% of the total statewide referrals. These alternative schools act as a gateway into the juvenile justice system, creating what many call the “School-to-Prison Pipeline.”

Special education and minority students make up the bulk of these referrals to DAEPs. Statewide data shows that up to 55% of children under the care of the Texas Juvenile Probation Commission (TJPC) or Texas Youth Commission (TYC) have a significant mental health problem. Despite this, TJPC reports that only 59.5% of juveniles on probation who need mental health services actually receive them.

The juvenile justice system’s challenges in Harris County include:

- Inadequate facilities
- Limited alternatives to secure detention
- Routine prosecution of all offenses
- A perception in some communities of inconsistent enforcement by some law enforcement agencies regarding minorities.

Correctional systems and programs that seem to prioritize incarceration over rehabilitation compound these problems.

## **Organizations making a difference**

The three programs described on the following pages channel children away from the juvenile justice system and into better lives:

- Harris County Stay-in-School Program
- Harris County and the Annie E. Casey Foundation
- Harris County Protective Services for Children and Adults.

Nearly six out of every 10 children processed through the Harris County Juvenile Detention Center have **behavioral health issues** that likely contributed to their delinquency.

# Harris County Stay-in-School Program (SSP): intervene before a child enters the system

► **PROGRAM:**

**Stay-in-School Program**

► **PIPELINE IMPACT POINTS:**

**Juvenile Justice Reform, Education**

Harris County Stay-in-School Program (SSP) is a highly successful collaborative effort between the District Attorney's Office, the TRIAD Prevention Program, seven Justice of the Peace Courts, and 11 school districts. The program combats the pervasive problem of truancy.

## **Keeping students in school keeps them out of jail**

SSP focuses on preventing a student from missing school. It succeeds by providing a more effective sanction for a child who refuses to attend school and intervening before the child enters the juvenile justice system.

SSP provides services through three levels of intervention:

1. Media truancy prevention campaign
2. Truancy warning letters (sent from the district attorney's office), associated diversion agreements, and truancy learning camps
3. The warning letter, issued upon three unexcused absences.



### **Reduces truancy by 80%**

When a student participates in diversion agreements and the truancy camps, they are able to stay in school. They also see the consequences of not attending school. The warning letter has had the largest effect on reducing the number of cases filed. Since the initial pilot project, it has deterred approximately 80% of the recipients from becoming a truancy case.

One Caucasian male said, “The letter scared me. I thought I would not be able to get my high school diploma, and I knew my family would not like that. So I had to make a decision.”

“I haven’t missed a day of school since I got this letter. Oh yeah, it had an impact. I ain’t miss no more.” So said a Hispanic male student who benefited from the Harris County Stay in School Program (SSP).

### **Decreases number of children who enter Juvenile Justice system**

SSP has produced an amazingly low number of referrals to Juvenile District Court. In 2002–2003, 666 letters were sent to students from four participating school districts, and no students were referred to Juvenile District Court. The 2003–2004 school year yielded only six referrals from almost 4,000 letters. The trend continued in 2004–2005, with only 53 referrals generated from almost 12,000 letters. Even with over 33,000 warning letters in the 2007–2008, the referrals stayed under 100.



# Harris County and the Annie E. Casey Foundation: divert children from unnecessary secure detention

► **PROGRAM:**

Juvenile Detention Alternatives Initiative (JDAI)

► **PIPELINE IMPACT POINTS:**

Juvenile Justice Reform

Juvenile Detention Alternatives Initiative (JDAI) changes the way the police, the Harris County Juvenile Probation Department, and the Courts interact with children. They create objective standards for secure detention to reduce the number of children who end up in jail.

## **Diverts youth from a variety of directions**

Delinquent youth who end up in the “deep end” of the juvenile justice system, in its detention centers and other locked institutions, too often fail to become successful, productive adults. Too many of these youth come from poverty. Too many have learning disabilities and mental health and substance abuse problems.

In 1992, the Casey Foundation launched JDAI. Through JDAI, sites across the country create and test new ways to establish smarter, fairer, and more effective and efficient juvenile justice systems.

The Foundation’s reforms rely on family-focused interventions, and create opportunities for youth to develop in a healthy, positive way. As a result, more youth stay out of jail.



### **JDAI shows success in jurisdictions around the country**

JDAI sites across the nation achieve measurable results using strategies such as:

- Innovative screening methods
- Relying on hard data
- Collaborating between systems and communities
- Developing effective alternatives to incarceration.

Results are well documented:

- In Cook County, Illinois, the average detention population dropped by 37% and youth arrests decreased by more than half
- Multnomah County, Oregon, decreased its detention population by two-thirds and decreased arrests by almost half
- Bernalillo County, New Mexico, reduced its average daily population in secure detention between 1999 and 2003, while seeing a 26% drop in juvenile crime.

### **Uses nationally available resources to improve local conditions**

With support and training from the Annie E. Casey Foundation, the Houston JDAI group created several task forces. These task forces are working to:

- Identify medium-risk cases, expedite their release, and follow up with them
- Understand whether alternatives to incarceration are being used
- Reduce the length of time a child spends in custody
- Reduce racial disparity in the juvenile justice system
- Expand availability of non-secure program slots
- Ensure that interventions are timely and appropriate.

The Casey Foundation/JDAI experiment demonstrates how a private/public partnership can leverage national resources with local ones to improve a problem facing our children.

JDAI works nationwide to reduce the flow through the Pipeline. Houston's business community can identify and support such efforts and thereby improve the quality of life in Houston and its labor pool.



# Harris County Protective Services for Children and Adults: keeps children and families together with well-coordinated networks

► **PROGRAM:**

**Systems of Hope**

► **PIPELINE IMPACT POINTS:**

**Health and Mental Health Services; Juvenile Justice Reform**

Systems of Hope operates on the premise that the mental health needs of children, adolescents, and their families can be better met within their home, school, and community environments than through the use of expensive institutional settings.

## **Family-driven care provides greater benefits for youths**

The Systems of Hope program provides services to youth diagnosed with a severe emotional disturbance. Systems of Hope delivers an array of mental health services and supports to these youth and their families through a consistent and coordinated process.

This intervention model assists families as they interact with other systems such as Juvenile Justice, Education, and Child Welfare by providing support and education. Systems of Hope helps the families of at-risk youth effectively manage their lives.

Care teams provide services that benefit the community by:

- Increasing a child's school performance
- Decreasing the number of school days a child misses
- Decreasing the child's contact with the juvenile justice system
- Preventing children from being placed in expensive out-of-home care.



**Quantifiable and well-evaluated success**

Both the DePelchin Children’s Center and the United States Substance Abuse Mental Health Services Administration (SAMHSA) evaluate Systems of Hope. The SAMHSA 2008 Report Card shows that participating youth:

- Spend more time in school
- Improve their school grades
- Improve their behaviors: they exhibit fewer disciplinary problems and have fewer arrests
- Demonstrate improved emotional health: they show improved levels of emotional well-being and make fewer suicide attempts.

**Individualized systems and support**

Systems of Hope abides by consistent values and principles that promote community-based services and supports. Their treatment plans, which involve family members and clients during all steps, let the youth actively participate in their own care. Flexible funding can provide non-traditional services to support the mental health of the youth, such as mentoring, art therapy, relocation of family to a safer community, medication, and so on.

**National funding and local coordination keep at-risk youth out of jail**

The Center for Mental Health Services, an office of SAMHSA, funds the Systems of Hope program. The Harris County Protective Services for Children and Adults oversees it. Houston’s program is one of 121 sites funded since 1992.

Systems of Hope partners with other child-serving agencies, Harris County Juvenile Probation, Mental Health and Mental Retardation Authority of Harris County, DePelchin Children’s Center, and City of Houston Health and Human Services. They actively pursue a variety of opportunities to leverage private and public funds most effectively and efficiently.

Systems of Hope received a grant in 2005 and began serving youth and families in October 2006. The funding for this six-year grant ends in September 2011.

**Expulsion/Suspension Rates**

61.4%

of youth at intake had either been expelled, suspended, or both from school in the prior six months.

After six months in the program the rate dropped to

28.6%

## A True-Life Success Story

### Systems Of Hope Testimonial: Overcoming Abuse

Taren came to Systems of Hope (SOH) in June 2007 with a history of three psychiatric hospitalizations in the previous six months. They included one suicide attempt. She was also on probation for shoplifting. After enrolling in SOH, Taren's hospitalizations decreased dramatically with only one in 2008. She completed her probation successfully and her school

attendance improved. Taren participates in the SOH Youth Advocacy Council and exhibits leadership skills in that group. Although successfully discharged from SOH in August 2008, she still attends SOH activities and frequently stops by the office to visit with staff. She told her story to the American Leadership Forum.

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## Hi, my name is Taren and this is my story...

I grew up in a single-parent household. My dad was in and out of jail. I rarely saw him but my mom and I were close. I did all the little kid things like drawing pictures and saying I love you Mommy. My mom met a man named Mr. J. He was nice at first and then it started. He would beat my mom in front of me. I would run out screaming and crying, "Help!" I thought it would stop. Little did I know that it was the beginning of everything horrible. He kept beating her and stealing from us to support his drug habit. I wondered why someone who claimed to love you took so much from you – not just material things, but trust.

When Mr. J went to jail for drugs, I thought I could finally live in peace. But I was so wrong. When I was six, I got in trouble at school. I tried to explain to my mom, but she didn't care. She called me a liar and got an extension cord. The last thing I remember is going to a neighbor's house. I looked in the mirror and saw all the purple bruises. My eyes were red. And it hurt to sit down or walk. This abuse continued for the next two years.

Four years later, Mr. J came home. At first, I thought he had changed but I was wrong. I was fooled by what I wanted him to be instead of what he really was – an ex-con who was addicted to crack. He would blow up for anything and say sorry like it was okay as long as he apologized.

Then my mom found out she was pregnant with his son. After the baby came, we moved to a bigger apartment. I thought everything would change and it did for a little while. But soon, the beatings started again. They beat on each other and then on me. It was a never-ending cycle of bruises, blood, and pain.

Then in October of 2005, Mr. J went too far. He climbed into my bed and attempted to pull down my underwear. It was painful. I hit his hand, got out, ran to the shower and turned the water on hot as I could stand. He came to the door and kicked it, calling me a coward. I was so traumatized by it! I still am. Talk about pain. Nothing happened and he got away with it.

So I started to act out. I got caught for shoplifting and was sent to a mental hospital. I was diagnosed with severe clinical depression, post-traumatic stress disorder, manic-depressive disorder (bipolar), and a mood disorder. I was okay for a while. Then in February, I tried to commit suicide and was in and out of the hospital for at least 3 months.

It took me a while to figure out that I am more than my past. I have a bigger support system than I realized: my friends, family and godchildren. I'm so much more than a girl who was beaten and molested. I'm a girl who can change the world. I am so lucky I found Systems of Hope.

There, people actually listened to what I had to say. That's one of the things I value most. Before Systems of Hope I was lost and part of me did not want to be found. Now, I'm so much better. They helped so much and I am forever grateful. I still have struggles, but they have become much easier to manage. I love that. The new Taren is so much happier. I find joy in the simple things like waking up in the morning, and playing with my nephew and my godchildren. Just being happy. I love my life now.

# Conclusion

We can address the Cradle to Prison Pipeline crisis successfully. Each organization highlighted in this report – as well as many other worthy organizations – create pathways out of it. With enough resources and your help, they can scale up and dismantle the Pipeline completely.

In the Introduction, we stated that you can help by:

1. *Providing financial assistance*
2. *Volunteering time*
3. *Contributing expertise*
4. *Providing training, internship and jobs*
5. *Raising awareness*
6. *Encouraging others to help*
7. *Applying the practices of these innovators in your community*
8. *Advocating policy change.*

Doing just one of these things will make a crack in the Pipeline. Helping just one child can make a difference that lasts generations.

If every organization in this report had enough resources to help all the children who need their services, the human and financial costs to society could be reduced exponentially.



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To learn more about the  
Cradle to Prison Pipeline:

American Leadership Forum Class XXV: [www.alfhouston.com](http://www.alfhouston.com)  
Click on publications to find Class XXV project.

Children's Defense Fund Cradle to Prison Pipeline® Initiative:  
[www.childrensdefense.org/cradletoprison](http://www.childrensdefense.org/cradletoprison)

Additional programs working to dismantle the pipeline: [www.zero2three.org](http://www.zero2three.org)