



FOSTERING RESILIENCY IN  
A POST-PANDEMIC WORLD:  
**Recommendations for Boys & Girls  
Clubs of Greater Houston**

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**BHP**

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## Executive Summary

The Hackett Center for Mental Health (The Hackett Center) partnered with the Boys & Girls Clubs of Greater Houston (BGCGH) to address the impacts of COVID-19 on youth<sup>1</sup> in the Greater Houston region. BGCGH places a high priority and emphasis on resiliency programming, which is critical as the Greater Houston community has been significantly impacted by numerous traumatic events in recent years. These events, coupled with the ongoing COVID-19 pandemic and a heightened awareness of racial tensions and inequities, have culminated in an urgent realization by BGCGH leadership that the organization must prioritize strategies to increase youth resiliency. In this report, we (The Hackett Center) offer recommendations for BGCGH developed from our synthesis and analysis of information gathered from BGCGH leadership and their Blue Ribbon Panel, a group of 22 subject matter experts passionate about working with children and youth in Greater Houston.

## Blue Ribbon Panel

In May 2021, The Hackett Center facilitated a listening session with BGCGH leadership and their Blue Ribbon Panel. The purpose of the Blue Ribbon Panel was to convene subject matter experts committed to youth development and after-school programming to (1) identify and co-create solutions to address inequities exacerbated by COVID-19 and (2) provide guidance on resiliency initiatives that focus on social justice, health, education, and economic development. *Resiliency, in this context, means identifying and prioritizing evidence-based practices proven to mitigate the impact of adverse childhood experiences while simultaneously creating positive experiences that increase youth well-being and ability to withstand and recover from trauma.*<sup>2</sup>

The Blue Ribbon Panel members were encouraged to be bold and innovative with their recommendations, not limit their suggestions to traditional approaches, or feel constrained by actual or potential program costs or resources needed; no idea was off the table. The related strategies, programs, and interventions that we recommend in this report are intended to be additions to current BGCGH programming, not replacements, with the goal of strengthening or enhancing current approaches. We anticipate that these recommendations, once implemented, will increase BGCGH's recovery efforts over the next 24–36 months. After this timeframe, BGCGH may decide to continue certain strategies for the longer term.

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<sup>1</sup> For the purpose of this report, when referring to Boys & Girls Clubs' service recipients (known as club members), we use the term *youth* to include both children and adolescents, ages 6–17 years.

<sup>2</sup> Bhushan, D., Kotz, K., McCall, J., Wirtz, S., Gilgoff, R., Dube, S.R., Powers C., Olson-Morgan, J., Galeste, M., Patterson, K., Harris, L., Mills, A., Bethell, C., Burke Harris, N. (2020). *Roadmap for resilience: The California Surgeon General's report on adverse childhood experiences, toxic stress, and health*. Office of the California Surgeon General. DOI: 10.48019/PEAM8812.

## Guiding Principles and Findings

When implementing strategies, programs, or interventions, it is imperative that BGCGH consider a set of guiding principles. Common themes emerged throughout the listening session that we translated into the following six guiding principles.

All strategies, programs, or interventions should be:

- operated through a whole-child and whole-family lens;
- evidence-based;
- culturally informed, sensitive, and responsive;
- equitable;
- community connected; and
- measured and evaluated.

With these guiding principles as a framework, the findings from the Blue Ribbon Panel are as follows:

BGCGH youth have experienced varying levels of trauma and grief and will require supports to build resiliency and address the inequities exacerbated by COVID-19.

COVID-19 and existing inequities highlighted by events in 2020 have led many young people to feel disenfranchised, powerless, and disconnected from their communities.

Fostering resiliency takes time and effort and requires active motivation to develop those skills.

BGCGH has a unique staffing model and serves a diverse community that spans a large geographic area with an array of needs.

Club communities vastly differ, and individual cultures and experiences should be represented in program approaches while viewing youth as partners, not simply as service recipients.

The report that follows offers 15 detailed recommendations in five areas, as well as a discussion of larger contextual issues related to youth trauma and loss. The 15 recommendations we present align with each of the five findings above and are focused on specific needs, approaches, and strategies. BGCGH already has a process in place to review and make decisions about program and curricula; therefore, we did not focus on specific programs. Rather, we focus on the larger issues that can affect the resiliency, mental health, and well-being of the

youth the Boys & Girls Clubs serve. We believe that this report will act as a guide and framework for future BGCGH strategies, programs, and interventions for Houston-area children and youth affected by a myriad of traumatic events.

We appreciate the financial generosity of BHP whose sponsorship made this report possible and the time and collaboration of the 22 Blue Ribbon Panel members who offered background information, innovative suggestions, and resources for partnership that will support Boys & Girls Clubs youth now and into the future.

Selecting and implementing these bold future resiliency strategies and programs with fidelity can significantly benefit the youth being served by BGCGH and ensure profound personal growth.

## Organization Overview and Project Background

The Hackett Center for Mental Health (The Hackett Center), a regional center of Meadows Mental Health Policy Institute, partnered with the Boys & Girls Clubs of Greater Houston (BGCGH) to address the impacts of COVID-19 on the youth BGCGH serves by placing a high priority and emphasis on resiliency programming. Youth who adjust successfully demonstrate resilience to adversity, which includes successful recovery from adverse life events, individually and on a group and the community level. Recent traumatic events in the greater Houston area, coupled with the ongoing COVID-19 pandemic and a heightened awareness of racial tensions and inequities, have culminated in an urgent realization by BGCGH leadership that the organization must prioritize strategies to increase youth resiliency. This report offers recommendations for BGCGH from our synthesis and analysis of information gathered from BGCGH leadership and their Blue Ribbon Panel, a group of 22 subject matter experts passionate about working with children and youth in Greater Houston (see Appendix A: Blue Ribbon Panel Participants).

## Demographics and Program Reach

Boys & Girls Clubs of America serves over 4.6 million youth, operating 4,738 club sites across the country. Of the youth served nationally, 71% are ages 6–12 and 29% are ages 13–17. Demographically, 30% of club members identify as white, 26% as Black, 23% as Hispanic/Latino, 7% as multiracial, 3% as Asian American/Pacific Islander, 55% as male, and 45% as female. The organization’s impressive reach and commitment to quality programming allows it to make a significant difference in the lives of youth nationwide in pursuit of its mission, “to inspire and enable all youth, especially those who need [the clubs] most, to realize their full potential as productive, caring, responsible citizens.” For this report, when referring to Boys & Girls Clubs service recipients (club members), we use the term *youth* to include both children and adolescents ages 6–17 years.

BGCGH serves more than 30,000 youth in the Greater Houston area, and over 98% of these club members come from communities that are considered under-resourced, and 66% come from single-parent homes. The BGCGH club members range from 6–17 years old, with 69% ages 6–12 and 31% ages 13–17. Club member demographics in 2020 show 45% of youth identifying as Black, 46% as Hispanic/Latino, 4% as white, 1% as Asian American/Pacific Islander, 4% as multiracial, and a relatively even male/female split. Attendance at BGCGH programs is robust, with roughly 3,000 youth a day attending in 2019 and a 26% increase in attendance during the school year.

## The Disproportionate Impact of COVID-19 and Other Community Traumas

Beyond the basic demographics, lived experiences among youth served vary widely. The organization aims to recognize and celebrate that diversity in its programming while also

developing supports that address inequities and adverse events experienced by club members. Greater Houston has had numerous tragic events in recent years, including natural disasters, mass shootings, and social injustices that diminish feelings of safety, in addition to a global pandemic. These traumas, coupled with other adverse experiences (toxic stressors like physical or emotional abuse, chronic neglect, caregiver substance abuse or mental illness, exposure to violence, and/or parental separation and divorce) can lead to significant behavioral and physical health issues in children and youth.<sup>3</sup> Adverse events have caused significant grief and trauma in the Greater Houston community, with COVID-19 in particular exacerbating existing inequities that disproportionately affect BGCGH youth and their communities.

The pandemic alone has had a significant and disproportionate impact on communities of color. A 2020 analysis of over 55 million patient health records found that Black, Hispanic/Latino, and Asian patients had significantly higher rates of COVID-19 infection, hospitalization, and death compared to their white counterparts.<sup>4</sup> Throughout this pandemic, non-Hispanic/Latino Black adults (48%) and Hispanic/Latino adults (46%) have been more likely to report symptoms of anxiety and/or depressive disorder than non-Hispanic/Latino white adults (41%).<sup>5</sup> Even before the pandemic, communities of color faced challenges accessing mental health care—nearly three-quarters (73%) of Asian and Pacific Islander, 69% of Black, and 67% of Hispanic/Latino individuals with mental illness did not receive necessary mental health care.<sup>6</sup>

The exacerbation of existing inequities has culminated in an urgent need for BGCGH to increase its focus on resiliency. While the organization's existing mission, model, and current programs aim to build resiliency, *there is a pressing need to implement a framework for incorporating more high-dosage interventions related to resiliency to address post-pandemic trauma and grief among the youth served.* As an organization known to foster a safe, constructive environment for youth, and one that predominately serves youth of color, BGCGH has an opportunity to address the current negative impacts of COVID-19, along with longstanding health and racial inequities and community trauma. This report may also have larger implications given that the

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<sup>3</sup> Nelson, C., Zulfiqar, B., Nadine, B. H., Andrea, D., & Muthanna, S. (2020). Toxic stress and PTSD in children: Adversity in childhood is linked to mental and physical health throughout life. *BMJ Open*. <https://doi.org/10.1136/bmj.m3048>

<sup>4</sup> Rubin-Miller, L., Alban, C., Artiga, S., & Sullivan, S. (2020). *COVID-19 racial disparities in testing, infection, hospitalization, and death: Analysis of epic patient data*. Kaiser Family Foundation. <https://www.kff.org/coronavirus-covid-19/issue-brief/covid-19-racial-disparities-testing-infection-hospitalization-death-analysis-epic-patient-data/>

<sup>5</sup> Kaiser Family Foundation. (2021). *How the COVID-19 pandemic is affecting people's mental health and substance use* [Press release]. <https://www.kff.org/coronavirus-covid-19/press-release/how-the-covid-19-pandemic-is-affecting-peoples-mental-health-and-substance-use/>

<sup>6</sup> Chaves, K., Gray, D., Barton, B., Bonnett, D., Azam, I., Hahn, C., Goldstein, E., Hall, I., Harris, N., Muhuri, P., King, J., Lankford, A., Lau, D., Liang, L., Liu, S., Matosky, M., Matthews, T., Morgan, R., Moser, R., ... Valentine, M. (2020). *2019 national healthcare quality and disparities report*. Agency for Healthcare Research and Quality. <https://www.ahrq.gov/sites/default/files/wysiwyg/research/findings/nhqdr/2019qdr.pdf>

Boys & Girls Clubs of America has a nationwide model operating in many cities and communities across the country.

### **BGCGH Programs and Pillars**

BGCGH pursues its mission through the implementation of thoughtful programming to support youth development.<sup>7</sup> This programming elevates inclusion, social justice, leadership skills, and the five core competencies of the social emotional learning framework (self-awareness, self-management, responsible decision making, social awareness, and relationship skills). Lessons and activities are adapted to be age-appropriate for club members, and programs are developed and retired over time. Each program is aligned with one of the following core pillars:

- Healthy Lifestyles
- Good Character and Citizenship
- Academic Success
- Workforce and Career Readiness

The following information, taken from BGCGH materials, explains the four pillars in more detail, as well as the added component of family engagement that is prioritized in all programming.

**Healthy Lifestyles:** These programs help youth improve fitness, eating behaviors, and interactions with others, with the goal of improved physical fitness and reduced health-related risk factors.

**Good Character and Citizenship:** These programs help youth improve social skills and positive behavior through service, with the goal of improved self-confidence, sense of safety, and interactions with others.

**Academic Success:** These programs give youth the opportunity to engage in enrichment activities designed to increase connections with school and improve their academic performance, with the goal of improved reading skills, retention, and attitudes toward school.

**Workforce and Career Readiness:** These programs give youth exposure to career opportunities and help them make relevant connections between personal finances and their career choices, with the goal of improving their ability to recognize career pathways and increasing their interest in pursuing meaningful employment, education, or military experience after high school.

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<sup>7</sup> Boys & Girls Clubs of Greater Houston. (2020). *Logic model*. [Unpublished].



**Family Engagement:** Family engagement is an important component of BGCGH programming, and although not a separate pillar, it is a concept that is incorporated into all core program areas. BGCGH takes a family-centered and strengths-based approach to making decisions, setting goals, and achieving desired outcomes for club members and their families. The organization believes in creating and sustaining strong relationships with families through engagement, empowerment, and access to community partners and resources to positively impact the well-being of the whole family.

## Resiliency After COVID-19: The Current Effort

The COVID-19 pandemic has required Boys & Girls Clubs in Greater Houston and across the country to rapidly retool and rethink how to serve youth amidst a global crisis that has exacerbated existing inequities. Boys & Girls Clubs of America responded with a *Response, Recovery, Resiliency* campaign. In the 2020 Response phase, BGCGH focused on the urgent and immediate needs of club members and their families, including addressing food insecurity and providing child care for essential workers. In 2020–2021, BGCGH entered the Recovery phase by offering safe programming and beginning the long process of helping members cope with the ongoing effects of the COVID-19 pandemic and related stressors. In 2021, BGCGH is launching the 24–36 month Resiliency phase to build on its Recovery efforts by addressing trauma and learning loss, also looking ahead to life after the pandemic.

In this context, *resiliency is defined as the process of adapting well in the face of adversity, trauma, tragedy, threats, or significant sources of stress*. Notably, resiliency is more than “bouncing back” from difficult experiences; it can also involve profound personal growth as individuals build the skills and supports necessary to develop resiliency.

## Blue Ribbon Panel

To prepare for the Resiliency phase, on May 12, 2021, BGCGH convened a Blue Ribbon Panel, a brain trust of community leaders committed to youth development and after school programming. Participants represented a range of organizations with varying relevant experiences and perspectives, including K–12 and higher education, mental health services, philanthropy, and the workforce development.

During the Blue Ribbon Panel listening session, participants acknowledged the impact that COVID-19 has had on Houston-area youth and brainstormed strategies for responding to those traumas and building ongoing resiliency among BGCGH club members. The participants, who represented organizations from workforce development to community services to NASA, drew from their vast wealth of knowledge and brought to the session bold and innovative ideas and an eagerness to continue working with BGCGH as community partners.

The Blue Ribbon Panel participants responded to this **guiding question** in the context of each of BGCGH's four pillars:

*Given the disproportionate impact of COVID-19 on youth of color, what strategies, programs, and/or interventions are needed to foster resiliency in the youth served by Boys & Girls Clubs? These strategies, programs, and/or interventions should help to address the pre-existing disparities exacerbated by the pandemic and equip youth with the resiliency skills and resources necessary to succeed in school, the workforce, and life.*

Throughout the conversation, participants were encouraged to be innovative and not be constrained by existing programming or resources. The strategies developed for the Resiliency phase are intended to be an addition to BGCGH's existing programming. Due to the time-limited nature of this phase (24–36 months), BGCGH has the opportunity to offer strategic and intensive programming that would normally fall outside of its operating scope. The Resiliency phase aims to be big and bold, to ensure that youth “bounce back” from the pandemic, and build resiliency that will positively impact their futures.

## Findings and Recommendations

As the Blue Ribbon Panel members discussed their ideas about resiliency strategies for Houston-area youth, they identified several overarching considerations that BGCGH should attend to when implementing any of the recommendations outlined in this report. Based on the discussion, The Hackett Center synthesized the information into a rubric as a tool to guide the review and decision-making about programs and services. (This Strategy Evaluation Rubric can be found in Appendix B.)

These **guiding principles** suggest that any strategy, program, or intervention executed or reviewed by BGCGH should be:

### **Operated through a “whole child and whole family” lens.**

A child does not exist in a vacuum—addressing mental health requires also addressing physical health, life skills, relationships, and family. In all programs, BGCGH should take its members lived experiences into account holistically. This would include engaging and including parents and caregivers as part of the interventions offered.

### **Equitable.**

Programs should be delivered equitably, ensuring that youth have access to the level of services and supports they may individually need regardless of community or personal circumstances. Some club members will inevitably require more resources, supports, and interventions than others. It will be necessary to assess and then deliver programming to the appropriate level of need for each member.

**Culturally informed, sensitive, and responsive.**

BGCGH serves a diverse membership, and, even among those youth, significant cultural differences exist based on members' backgrounds and lived experiences. BGCGH should be thoughtful in developing programming that is culturally informed and ensure that the values and resiliency skills taught reflect and resonate with the members it serves.

**Evidence-based.**

Programs should be based on evidence and informed by best practices to maximize impact. Evidence-based practices are those that have been carefully evaluated and are supported by empirical data demonstrating improved outcomes.

**Community-connected.**

It will be important for BGCGH to actively engage with club members' families and leverage community partnerships and resources whenever possible to provide youth with continuity and quality services. This would mitigate resource burdens for BGCGH, in addition to strengthening the connections youth and their families have with resources in their wider community.

**Measured and evaluated.**

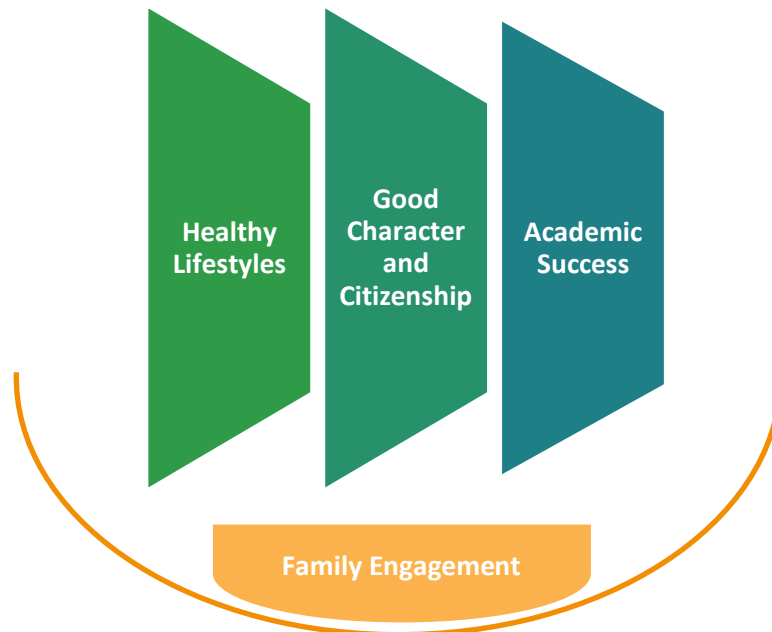
To understand impact, any intervention or program BGCGH offers must be measured and evaluated to ensure that the services are achieving the stated goals. This would include fidelity assessments to track outcomes to ensure that high-quality programs are delivered as intended.

As we worked with the Blue Ribbon Panel and BGCGH to craft specific recommendations under each of the core pillars, it was evident that many of the suggested strategies, programs, and interventions would straddle multiple BGCGH focus areas. Attempting to fit a program neatly into a specific pillar created artificial siloes and lessened the impact of the bold ideas the panel was charged with developing. This report removes those siloes and presents the findings and recommendations in an integrated way, as they were presented in the listening session. For each finding, we have indicated which core pillars the programs and strategies will cover with graphics (see Figures 1–5).

**Finding 1: BCGGH members have experienced varying levels of trauma and grief and will require supports to build resiliency and address the inequities exacerbated by COVID-19.**

The pandemic has caused disproportionate suffering among communities of color. While all BCGGH youth have experienced some amount of grief and trauma due to COVID-19, those who have experienced significant upheaval may require more intensive supports.

**Figure 1. Core Pillars Addressed in Finding 1**



**Recommendation 1a:** *Implement a tiered system of supports to help clubs address varying behavioral and emotional needs by giving all club members access to universal Social and Emotional Learning (SEL) supports at the base level, with built-in targeted small group and intensive individualized supports as needed.*

Specifically, this system of supports could include the following elements:

Tier 1 Universal. Incorporate an evidence-based, trauma- and grief-informed resiliency curriculum into programming. This universal support would be made available to every club member. The Trauma and Grief Component Therapy for Adolescents (TGCTA) is an evidence-based, assessment-driven treatment for adolescents ages 12–19 who have been exposed to trauma, bereavement, traumatic bereavement, or other life adversities, placing them at high risk for severe and persistent distress, functional impairment, and developmental disruption. TGCTA is flexible and can be tailored; certain modules have been used as universal, preventative interventions for youth who are at-risk of experiencing

adversities. For example, Module I of TGCTA focuses on basic emotional regulation and coping skills that are applicable to all students dealing with stress.

Tier 2 Small Group. For youth who require more targeted interventions, clubs can create small group programming to foster specific resiliency skills or provide a safe space for structured conversations around grief and trauma. TGCTA also contains modules for small group intervention that would be suitable for youth who have a demonstrated a high level of risk for severe and persistent distress. TGCTA has shown effectiveness in reducing posttraumatic stress reactions, maladaptive grief reactions, depression, school problems, and disruptive behavior/violence. Positive outcomes include improved emotional and behavioral functioning, grade point averages (GPAs), peer relations, and school interest.

Tier 3 Individual. To offer individualized therapy services and supports for youth who require more intensive interventions, BGCGH can partner with community providers. The Texas Child Health Access Through Telemedicine (TCHAT) program has a reach that could fit BGCGH's needs, as it delivers grief- and trauma-informed telemedicine services to students in public schools who are experiencing more serious mental health challenges. The multidisciplinary team of TCHAT providers works together to assess, triage, and stabilize a young person and to connect youth and families with mental health providers in their community for ongoing care. Other valuable community partners are Local Mental Health Authorities (LMHAs). Texas Health and Human Services contracts with 37 LMHAs to deliver mental health services in communities across Texas.

Throughout the planning and implementation of this system, it will be imperative to properly train staff to work effectively at the tier(s) most appropriate to the youth they will be expected to serve so that they can convey the related resiliency and SEL skills. It will also be important to initiate, strengthen, and support partnerships with community providers for interventions outside the scope of what staff are qualified to offer.

**Recommendation 1b:** *Highlight and celebrate community partnerships and referral systems that worked during the pandemic. Evaluate and reimagine the referral process.*

COVID-19 pushed providers to re-define how they assess, triage, and refer cases. By examining referral systems that worked for youth widely and BGCGH club members specifically, then working to entrench those systems in post-pandemic life, BGCGH can build more sustainability into these high-dosage resiliency interventions. An example of a referral system that has worked in Texas is the unified case management system leveraged by youth homelessness advocates and service providers.

**Recommendation 1c:** *Extend supports and training to families to teach parents and caregivers communication and resiliency skills to implement at home.*

As part of the “whole child, whole family” approach, it is critical to extend what youth learn while attending BGCGH programs to their parents and caregivers as well. Such training for family members will help keep them apprised of what their children are experiencing, expose them to the coping skills being taught, and give them the additional language and communication skills necessary to support ongoing resiliency development at home.

A weekly family dinner at the club is an example of a program that could help youth and families build these skills together and transfer them to home. It would bring families in to enjoy a healthy meal while they learn and practice healthy communication skills the staff and club members are modeling. It will be critical to be mindful of familial and cultural context—not all families may be able to have a regular family dinner at home given work schedules and food insecurity. Choosing language that gives them flexibility to adapt the model to suit their unique needs and situations will be important.

**Recommendation 1d:** *Address learning loss in youth.*

As we transition back to school, learning loss will be a key focus for club members. The pandemic disproportionately affected the learning of Black, Hispanic/Latino, and Indigenous youth. In mathematics, for example, students of color are about 3–5 months behind in learning, while their white counterparts are only about 1–3 months behind.<sup>8</sup>

Examples of methods to address learning loss would include high-dosage tutoring and working with Education Service Centers to identify pre-existing programs BGCGH can connect members to in their districts.

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<sup>8</sup> Dorn, E., Hancock, B., Sarakatsannis, J., & Viruleg, E. (2020). *COVID-19 and learning loss—Disparities grow and students need help*. McKinsey & Company. <https://www.mckinsey.com/industries/public-and-social-sector/our-insights/covid-19-and-learning-loss-disparities-grow-and-students-need-help>

**Finding 2: COVID-19 and existing inequities highlighted by events in 2020 have led many young people to feel disenfranchised, powerless, and disconnected from their communities.**

**Figure 2. Core Pillars Addressed in Finding 2**



**Recommendation 2a:** *Equip youth with the skills, resources, and language they need to identify issues important to them and develop actionable steps to advocate on those issues. Create a space where club members can engage in advocacy with the goal of developing personal resiliency through building community resiliency.*

Empowering and equipping youth with the skills, resources, and language necessary to advocate against injustices within their communities can help youth develop the equivalent skills, resources, and language required to advocate for themselves. BGCGH can offer learning opportunities on issues of social importance—for example, by bringing in speakers virtually to reach members of all clubs followed by a youth-facilitated discussion—to build key knowledge. By leveraging community partnerships, club members can have opportunities to advocate using their developing skills. For example, clubs or BGCGH might engage the mayor’s office on the Resilient Houston campaign and seek opportunities to involve youth.

**Recommendation 2b:** *Continue to empower youth with tools and skills necessary to access resources and navigate difficult situations throughout their lives.*

Life skills that support financial literacy, healthy communication, healthy relationships, and workforce readiness, among others, are a necessary part of fostering club members’ resiliency so youth can “bounce back” from adverse events and look ahead to develop protective supports. In addition to continuing to provide a life skills curriculum, BGCGH should identify ways to leverage community partnerships and develop bold programming that further connects youth with their communities. Examples would include high-dosage workforce programming,

such as job shadowing and partnering with community organizations to engage youth in high-impact projects with real-world applications. Many Blue Ribbon Panel participants were eager to highlight the potential of community partnerships in this regard, some offering their own organizations as potential partners (see Appendix C. Suggested Resources by Blue Ribbon Panelists).

**Finding 3: Fostering resiliency takes time and effort, and it requires active motivation to develop those skills.**

The school year following a pandemic will be taxing for many students who may find themselves reticent to engage in resiliency-building activities in their time outside of school.

**Figure 3. Core Pillars Addressed in Finding 3**



**Recommendation 3a:** *Incentivize youth leadership and participation in service and advocacy programs.*

Incentivizing participation in age-appropriate ways, such as through monetary compensation or additional privileges, would help to garner more participation in programs that build resiliency. Additionally, partnering with school districts to help club members receive course credit or community service hours for their participation could further incentivize participation and build alignment between school and outside-of-school programming.

**Recommendation 3b:** *Leverage what interests young people to help them build resiliency skills, positive assertiveness, and the ability to advocate for themselves and their communities.*

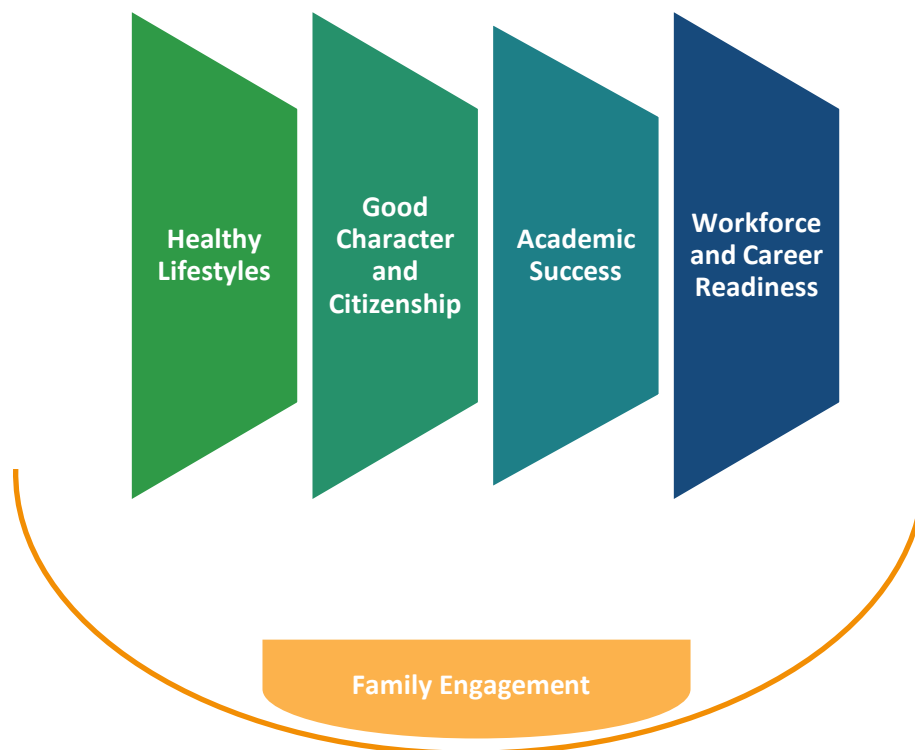


Helping youth find and use their voices organically requires meeting club members where they are and leveraging what interests them. Tie resiliency lessons and service/advocacy projects into the activities that youth find engaging, such as social media, photography, sports, and arts. (Refer back to Recommendation 2a for more on youth advocacy.)

**Finding 4: BCGGH has a unique staffing model and serves a diverse community that spans a large geographic area with an array of needs.**

BGCGH serves club members in a geographic region spanning five counties. The clubs themselves are predominately staffed by part-time employees, with some full-time staffing as oversight. This presents unique opportunities and challenges as BCGGH works to build and implement this Resiliency programming phase.

**Figure 4. Core Pillars Addressed in Finding 4**



**Recommendation 4a:** *Hire a full-time staff member charged with developing and stewarding community partnerships related to programming.*

With BCGGH’s large service area, it will be critical to have robust local partnerships to develop and measure impactful and equitable programming. A full-time staff member committed to identifying and fostering community partnerships would help the BCGGH to develop and

implement bold, impactful programs that serve a variety of purposes across all five counties. This additional position could also support the evaluation and measurement of programs to ensure their success.

**Recommendation 4b:** *Reduce the adult-to-youth ratio in programming to one that is conducive to meaningful relationship development to accomplish program objectives at the quality and depth desired.*

Reducing this ratio and investing in additional personnel to maintain this balance would allow staff to engage more deeply with the youth they serve and foster a safe space for youth to discuss difficult issues during resiliency-building activities. The minimum standards in Texas for before- or after-school programs recommends a ratio of 26 school-age youth to one adult.<sup>9</sup> Research has shown that when caregivers have fewer children and youth to supervise and the group size is limited, the likelihood of injuries and illness in children is reduced and the opportunity for positive adult-child interactions is increased.<sup>10</sup> We recommend striving for a ratio of 10–12 youth to one adult. Reducing staffing ratios would also enable BGCGH staff the ability to connect more personally with parents/guardians of its club members.

**Recommendation 4c:** *Perform evidence-based fidelity assessments to track outcomes to ensure programs are high quality and delivered as intended.*

It will be important to measure and evaluate programming to ensure that resources are being invested wisely and staff have the support they need to implement high-dosage interventions during the Resiliency phase. (Refer back to Recommendation 4a for more on an additional staff member to support measurement and evaluation.)

**Recommendation 4d:** *Build sustainability and scale into the model by being prepared for staffing changes.*

As clubs are predominately staffed by part-time employees and are subject to turnover, BGCGH should consider investing in a resource that allows them to replicate training with new hires so that all staff members are prepared to offer resiliency programming. For example, training a full-time staff member in the resiliency curriculum and core behavioral health principles could allow for a train-the-trainer approach, providing BGCGH with the ability to offer in-house

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<sup>9</sup> Texas Administrative Code, 26 §746.1601 (2003).

[https://texreg.sos.state.tx.us/public/readtac\\$ext.TacPage?sl=R&app=9&p\\_dir=&p\\_rloc=&p\\_tloc=&p\\_ploc=&pg=1&p\\_tac=&ti=26&pt=1&ch=746&rl=1601](https://texreg.sos.state.tx.us/public/readtac$ext.TacPage?sl=R&app=9&p_dir=&p_rloc=&p_tloc=&p_ploc=&pg=1&p_tac=&ti=26&pt=1&ch=746&rl=1601)

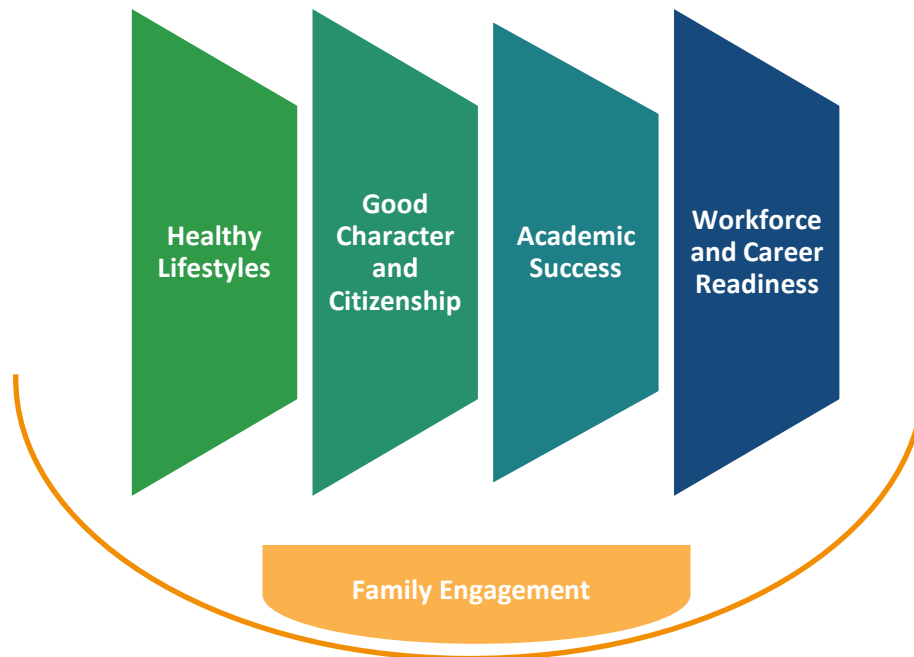
<sup>10</sup> Miranda, B. (2017, July 15). *Higher child-to-staff ratios threaten the quality of child care.* Child Trends.

<https://www.childtrends.org/blog/higher-child-staff-ratios-threaten-quality-child-care>

professional development to new hires to ensure ongoing integration of these important principles.

**Finding 5: Club communities vastly differ, and individual cultures and experiences should be represented in program approaches while viewing youth as partners, not simply as service recipients.**

**Figure 5. Core Pillars Addressed in Finding 5**



**Recommendation 5a:** *Determine whether the values and operational definitions that BGCGH upholds are representative of the families and communities the clubs serve. Work in partnership with club members and community leaders to develop culturally informed programming.*

As BGCGH works to define the resiliency principles and values it upholds, consider who is making these decisions and whether they are reflective of the existing values that youth and families may bring through the door. Ideally, work in partnership with youth, their families, and the larger community to develop culturally sensitive and reflective programming, in addition to hiring staff that have diverse lived experiences reflective of the communities served.

**Recommendation 5b:** *Provide training on engaging with youth as partners, not simply as service recipients.*

Youth-adult partnerships are shown to be one of the most effective ways to engage both youth and adults in meaningful activities that contribute to positive youth development. Youth involved in positive, meaningful, respectful relationships with adults have been shown to improve skills and competencies while decreasing risky behaviors.<sup>11</sup> Youth-adult partnerships take place when youth and adults plan, learn, and work together, with both groups sharing equally in the decision-making process.<sup>12</sup> Additional staff training will be needed to help staff learn how to engage with club members as true partners.

**Recommendation 5c:** *Ensure that programs and interventions are equitable across the service area, investing more resources in regions with fewer community partnerships and programming options.*

BGCGH club sites span five counties within Greater Houston. While this large geographic coverage area gives many youth access to BGCGH sites, not all sites are located in communities with an abundance of resources or partnership opportunities. To ensure that all club members have access to services, programs, and interventions required for high-dose resiliency building, there will need to be an equitable distribution of resources, including strategies to reach the clubs in areas with access challenges.

## Conclusion

Boys & Girls Clubs of Greater Houston has recognized and responded to the needs of its club members and families throughout the COVID-19 pandemic. Clubs mobilized and implemented a Response and Recovery action plan to address immediate needs and provide ongoing support to youth and communities. As we continue to emerge from this COVID-19 era, BGCGH is committed to equipping its club members with resiliency best practices so that they can overcome adversity, develop into healthy and productive individuals, and act as change agents within their communities and the world. To accomplish this goal, BGCGH commissioned the Blue Ribbon Panel of experts, convened and facilitated by The Hackett Center, to brainstorm innovative programs, interventions, and strategies to help the youth served. Selecting and implementing these future resiliency programs with fidelity can significantly benefit the youth being served by BGCGH and ensure profound personal growth.

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<sup>11</sup> Innovation Center for Community and Youth Development, National 4-H Council, National Network for Youth, & Youth Leadership Institute. (2003). *Youth-adult partnerships: A training manual*. <https://ucanr.edu/sites/UC4-H/files/2424.pdf>

<sup>12</sup> Texas Network of Youth Services & Prevention and Early Intervention/Community Youth Development Division of the Texas Department of Protective and Regulatory Services. (2002). *Making it work A guide to successful youth-adult partnerships*. <https://ucanr.edu/sites/UC4-H/files/2423.pdf>

# APPENDICES

## Appendix A: Blue Ribbon Panel Participants

Name	Title	Organization
Funlola Are, PhD	Psychologist, Assistant Professor of Psychiatry and Behavioral Sciences	The University of Texas Health Science Center at Houston (UT Health Houston)
Peter Beard	Senior Vice President, Regional Workforce Development	Greater Houston Partnership UpSkill Houston
Angela Blair	Generation Moody Education Director	The Moody Foundation
Tracey Burnett-Greenup, LPC-A	Chief Program Officer	Family Houston
Sarah Daniel	Principal, Community & Indigenous Affairs	BHP
	Program Director, North America	BHP Foundation
Mike Feinberg	President	Texas School Venture Fund
		WorkTexas, Neighborhood Schools, and Community Preschools
Elizabeth Fowlkes	Senior Vice President, Strategy	Boys & Girls Clubs of America
Jamie Freeny, DrPH, MPH	Director, Center for School Behavioral Health	Mental Health America of Greater Houston
Teandra Gordon, PhD, LMFT-S	Vice President of School Based Health	Legacy Community Health
Cuiera Green	Project Director	Boys & Girls Club of Brazoria County
Clifford Grimes	Director of Organizational Development	Boys & Girls Clubs of America
Anna Hardway	Chief Program Officer	Children At Risk
Carolyn Moore Khourie, PhD, RDN*	Associate Professor, Nutrition and Food Sciences	Texas Woman's University
	BGCGH Board of Directors, Program Chair	Boys & Girls Clubs of Greater Houston

Name	Title	Organization
Amanda McMillian	President and CEO	United Way of Greater Houston
Elizabeth Newlin, MD	Vice Chair, Child Psychiatry UT Health Houston Department of Psychiatry	UT Health Houston, McGovern Medical School
Daniel Newmyer	Vice President of Education	Space Center Houston
Grady Prestage, Commissioner Fort Bend County Precinct Two*	Fort Bend County Commissioner	Fort Bend County
Kristi Rangel	Public Health Education Chief	City of Houston Health Department  My Brother’s Keeper (MBK) Houston
Mike Rockwood, EdD	Deputy Superintendent	Lamar Consolidated Independent School District
Angela Seaworth	Lecturer, Director of Philanthropic Initiatives and Capacity Building	Texas A&M, Bush School, Center for Nonprofits & Philanthropy
Leslie C. Wang, MBA	Board President  Associate Director	Texas Partnership for Out of School Time (TXPOST)  Center for Philanthropy and Nonprofit Leadership at Rice University
Lisa Wright, MBA*	President/CEO	Community Health Choice

\*BCGGH Board Members

Appendix B: Strategy Evaluation Rubric

# Strategy Evaluation Rubric



*Boys & Girls Clubs of Greater Houston should consider the guiding principle(s) outlined below when evaluating or reimagining any strategy, program, or intervention intended for implementation.*

Strategy/Program/Intervention Name:

Circle the Program Core Area(s) the strategy satisfies:

**Academic Success**

**Healthy Lifestyles**

**Good Character & Citizenship**

**Workforce & Career Readiness**

Add a ✓ to the guiding principle(s) the strategy satisfies:



Operated through a "whole child and whole family" lens

\_\_\_



Equitable

\_\_\_



Culturally informed, sensitive, and responsive

\_\_\_



Evidence-based

\_\_\_



Community-connected

\_\_\_



Measured and evaluated

\_\_\_

Notes:



## Appendix C: Suggested Resources by Blue Ribbon Panelists

Suggestion	Name	Organization	Contact Information
<b>Healthy Lifestyles</b>			
Emotional Backpack Training Program: counselors, teachers, staff, volunteers, after-school staff	Jamie Freeny	Mental Health America of Greater Houston	<a href="mailto:jfreeny@mhahouston.org">jfreeny@mhahouston.org</a>
FuelEd: an organization that helps adults (teachers) manage their own trauma so they can help kids.	Leslie Wang	Rice University	<a href="mailto:lesliecwang@rice.edu">lesliecwang@rice.edu</a>
Trauma and Grief Component Therapy for Adolescents	Julie Kaplow	Trauma and Grief Center	<a href="mailto:jkaplow@mmhpi.org">jkaplow@mmhpi.org</a>
<b>Good Character and Citizenship</b>			
Houston Coalition Against Hate	NP <sup>13</sup>	NP	NP
<b>Workforce and Career Readiness</b>			
Family Houston can offer employment coaching services onsite	NP	Family Houston	NP
Shadowing opportunities	Funlola Are	UTHealth Houston	<a href="mailto:funlola.are@uth.tmc.edu">funlola.are@uth.tmc.edu</a>
SER Houston – summer internships (Workforce Solutions)	NP	NP	NP
Children’s Museum -Makers Space Lab	NP	NP	NP
TRX Labs -East End -Maker Space	NP	NP	NP
Work Texas	Mike Feinberg	Neighborhood Schools	713-202-0549 <a href="mailto:mfeinberg@worktexas.org">mfeinberg@worktexas.org</a>
Put multiple projects on the Space Station	Daniel Newmyer	Space Center Houston	NP

<sup>13</sup> Blue Ribbon Panel participants shared information regarding community resources for potential partnerships with BCGGH; however, some participants only shared partial information. NP = not provided.



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