

Meadows Mental Health Policy Institute

Multisystemic Therapy for Texas Youth – January 2025

Multisystemic Therapy (MST) is a **proven family- and community-based treatment for at-risk youth** with intensive needs and their families.¹ It is most effective for treating youth who have **committed violent offenses**, have serious **mental health** or **substance use concerns**, are at risk of **out-of-home placement**, or who have experienced **abuse and neglect**.²

What is MST?

- MST is an **evidence-based program** for **youth (ages 12–17)** and their families that keeps youth safely at home, in school or employed, and out of trouble over the long term.
- The **goals** are to: (1) reduce youth **criminal activity**; (2) reduce other types of **antisocial behavior**, such as drug abuse; and (3) save **taxpayer dollars** by reducing rates of incarceration and out-of-home placement.

Why Should Texas Invest in MST?

- MST is rated **“well-supported”** by the **Title IV-E Prevention Services Clearinghouse**.
- Juvenile offenders who receive MST experience **54% fewer rearrests** over a 14-year period and **75% fewer violent felony arrests** over a 22-year period.³
- MST is **one of only three proven programs**⁴ that addresses family functioning and association with deviant peers, key risk factors for **reducing violence, other antisocial behaviors, and juvenile justice involvement**.⁵
- A cost-benefit analysis of MST versus treatment as usual or no treatment found that the total program benefit (\$25,201) minus implementation costs was **\$16,847 in net benefits to taxpayers and others** (primarily crime victims). Stated differently, for every dollar spent on the implementation of MST, the **societal return on investment was \$3.02**.⁶
 - For an upper range of cost effectiveness, an evaluation of MST in New Mexico showed an average savings of **\$71,000 per youth**, beyond the cost of treatment, through **posttreatment reductions in juvenile crimes and Medicaid behavioral health treatment claims**. For every dollar spent on MST services, **\$5.87 was returned**.⁷

Who Delivers MST?

- MST is delivered by **specialty trained masters-level or bachelors-level staff**, including Qualified Mental Health Professionals (QMHPs).
- Supervisors are highly trained masters- or doctorate-level professionals who supervise one or two teams of two to four full-time MST professionals.
- MST teams are structured to handle a caseload of roughly **20 youth** at any given time.
- The average length of treatment for MST is between **three and five months**.⁸

- MST teams must be trained by MST® Services or a licensed partner organization and have a valid program license with MST® Services and the Medical University of South Carolina.

What does MST Look Like in Practice?

- MST is delivered **in the youth and family's natural environment** – home, school, and community. Treatment targets the specific relevant strengths and needs of the family and is provided in an ongoing and intensive manner. MST professionals work with the family throughout the week and are on call and available 24 hours a day, seven (7) days a week.⁹
- MST **reduces delinquent and antisocial behavior** by addressing the core causes of such conduct, expanding the focus of treatment beyond the youth to include the network of systems responsible and caring for them, including family, peers, school, and neighborhood.
- MST includes a **built-in suite of services** (i.e., family therapy, vocational support, skills training) that other types of interventions often outsource to outside providers.¹⁰ These built-in services result in cost savings.
- Structured clinical supervision and quality assurance processes are integral to the model.¹¹

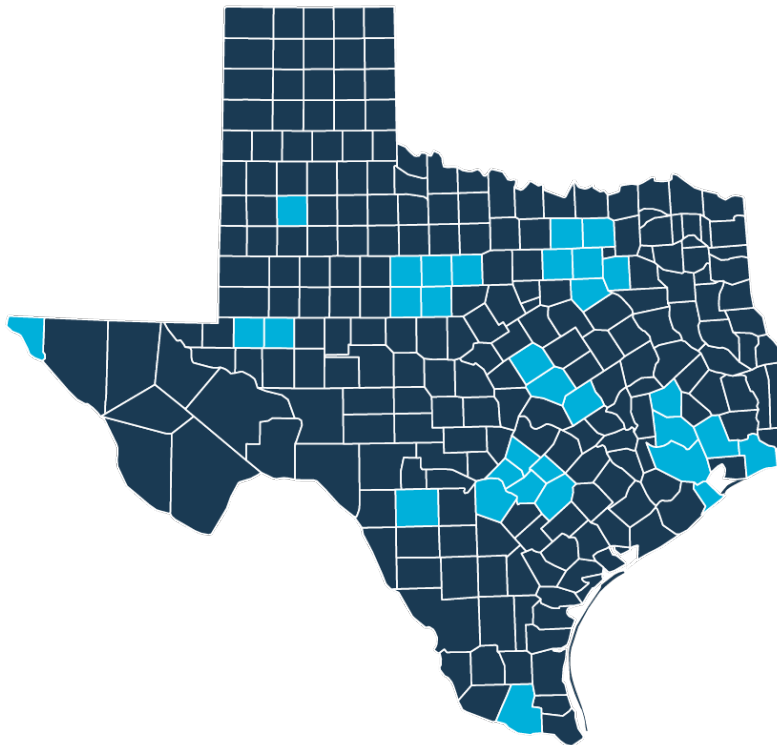
What is the Extent of the Need in Texas?

- Using the statewide roll-out of MST in Louisiana and other states, we estimate that approximately **7,000 Texas youth and their families** could benefit from MST services; Texas would need approximately **140 teams** to meet this need.

Which Texas Communities Have Access to MST?

- Until 2022, only **Harris County, El Paso County, and Nueces County** had MST capacity, funded primarily through juvenile justice dollars.
 - In 2021, the 87th Legislature appropriated **\$2 million** in funding through the Texas Juvenile Justice Department (TJJD) to add a front-end MST team in both Harris County and El Paso County to *prevent youth and adolescents from entering the juvenile justice and child welfare systems*.
- In June 2022, in response to the **Uvalde tragedy**, legislative leadership provided **\$4,725,000** to the Health and Human Services Commission (HHSC) to expand MST capacity. This funding resulted in **seven (7) additional MST teams**:
 - Hill Country MHDD Centers (Uvalde, Comal, Hays counties)
 - Bluebonnet Trails Community Services (Guadalupe, Caldwell, Gonzales counties)
 - Denton County MHMR Center (Denton County)
 - LifePath Systems (Collin County)
 - North Texas Behavioral Health Authority (Ellis County)
 - StarCare Specialty Health System (Lubbock County)
 - Tropical Texas Behavioral Health (Hidalgo County)

- In 2023, the 88th Texas Legislature appropriated **\$32,450,000** for MST: **\$2 million** through TJJJ to continue the two front-end teams, and **\$30,450,000** through HHSC: **\$9,450,000** to continue the seven post-Uvalde teams, and **\$21 million** to establish 15 additional MST teams:
 - LifePath Systems (Collin County)
 - PermianCare (Midland, Ector counties)
 - North Texas Behavioral Health Authority (Dallas County)
 - North Texas Behavioral Health Authority (Kaufman County)
 - Betty Hardwick Center (Callahan, Jones, Shackelford, Stephens, Taylor counties)
 - Harris Center (Harris County)
 - Gulf Coast Center/Southwest Key Programs (Galveston County)
 - Tropical Texas Behavioral Health (Hidalgo County)
 - My Health My Resources of Tarrant County (Tarrant County – two teams)
 - Center for Health Care Services/Clarity Child Guidance (Bexar County – two teams)
 - Central Counties Services (Bell, Coryell, Milam counties)
 - Spindletop Center (Jefferson County)
 - Tri-County Behavioral Healthcare (Liberty, Montgomery, Walker counties)



¹ Henggeler, S.W., & Schoenwald, S.K. (2011). Evidence-based interventions for juvenile offenders and juvenile justice policies that support them. *Social Policy Report*, 25(1): 1–20.

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- ² MST Services. (2022). *MST research at a glance*. <https://info.mstservices.com/researchataglance>
- ³ Vidal S., Steeger C., Caron C., Lasher L., & Connell C. (2017, November). *Placement and Delinquency Outcomes Among System-Involved Youth Referred to Multisystemic Therapy: A Propensity Score Matching Analysis*. *Adm Policy Ment Health*, 44(6):853-866. <https://pmc.ncbi.nlm.nih.gov/articles/PMC5857953/>
- ⁴ The efficacy of MST has been established through 28 highly-rigorous random control trials carried out over the last thirty years. MST Services (2020). *Multisystemic Therapy® (MST®) research at a glance. Published outcomes, implementation, and benchmark studies*. <https://cdn2.hubspot.net/hubfs/295885/MST%20Redesign/Marketing%20Collateral/Case%20Study%20and%20Reports/R@aG%20Long%202020.pdf>
- ⁵ Henggeler, S.W., & Schoenwald, S.K. (2011).
- ⁶ Washington State Institute for Public Policy. (2019, December). *Multisystemic Therapy (MST) for court-involved/post-release youth*. <http://www.wsipp.wa.gov/BenefitCost/Program/36>
- ⁷ Dopp, A. R., & Saranga Coen, A. (2015). *New Mexico MST outcomes tracking project: Results for New Mexico's MST providers, July 2005–June 2015*. New Mexico's Children, Youth & Families Department and the Center for Effective Interventions.
- ⁸ MST Services. (n.d.). *What is MST? Fact Sheet*. <https://cdn2.hubspot.net/hubfs/295885/MST%20Redesign/Marketing%20Kit/Marketing%20Kit%20Collateral%20Digital%20Files/Fact%20Sheet/Fact%20Sheet%20MST%20Therapy%20Overview%2005222018.pdf>
- ⁹ MST Services. (n.d.). *What makes MST such an effective intervention*.
- ¹⁰ MST Services. (n.d.). *Dramatic cost savings for communities*. <https://cdn2.hubspot.net/hubfs/295885/MST%20Redesign/Marketing%20Kit/Marketing%20Kit%20Collateral%20Digital%20Files/Infographics/Infographic%20-%20MST%20Cost%20Savings.pdf?t=1530302876904>
- ¹¹ Henggeler, S. W. (2016). *MST update 2016 including published MST research findings 2014 to present*. Presented at Blueprints for Health Youth Development Conference. https://www.blueprintsprograms.org/conference/presentations/2016/T2-A_MST_Updates.pdf