

**THE THIRTIETH LEGISLATURE
APPLICATION FOR GRANTS
CHAPTER 42F, HAWAII REVISED STATUTES**

Type of Grant Request:

Operating Capital

Legal Name of Requesting Organization or Individual: Dba:
Mental Health Association in Hawaii Mental Health America of Hawaii

Amount of State Funds Requested: \$ 300,000.00

Brief Description of Request (Please attach word document to back of page if extra space is needed):

The purpose of this request is to expand access to MHAH's Mental Health Resilience, Wellness, and Suicide Prevention Program. In the 12-month project period, 2,500 youth (8 – 24 years of age), and 5,000 adults will receive evidence informed resilience, wellness, and suicide prevention services through trainings and community based education. Services will be provided statewide with emphasis placed on reaching those in living in rural parts of the state; directly or indirectly impacted by the pandemic and Maui fires; and at risk/opportunity youth.

Amount of Other Funds Available:

State: \$ _____
Federal: \$ _____
County: \$ 120,000
Private/Other: \$ 100,000

Total amount of State Grants Received in the Past 5 Fiscal Years:

\$ 0.00

Unrestricted Assets:

\$ 399,107

New Service (Presently Does Not Exist): Existing Service (Presently in Operation):

Type of Business Entity:

501(C)(3) Non Profit Corporation
 Other Non Profit
 Other

Mailing Address:

1136 Union Mall, Suite 208
City: State: Zip:
Honolulu HI 96813

Contact Person for Matters Involving this Application

Name: Bryan L. Talisayan	Title: Executive Director
Email: bryan.talisayan@mentalhealthhawaii.org	Phone: 808-521-1846

Federal Tax ID#: [REDACTED]	State Tax ID#: [REDACTED]
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Authorized Signature

Bryan L. Talisayan, Executive Director
Name and Title

January 19, 2024
Date Signed



STATE OF HAWAII
STATE PROCUREMENT OFFICE

CERTIFICATE OF VENDOR COMPLIANCE

This document presents the compliance status of the vendor identified below on the issue date with respect to certificates required from the Hawaii Department of Taxation (DOTAX), the Internal Revenue Service, the Hawaii Department of Labor and Industrial Relations (DLIR), and the Hawaii Department of Commerce and Consumer Affairs (DCCA).

Vendor Name: MENTAL HEALTH ASSOCIATION IN HAWAII, INCORPORATED

DBA/Trade Name: Mental Health America of Hawai`i

Issue Date: 01/09/2024

Status: **Compliant**

Hawaii Tax#: [REDACTED]
New Hawaii Tax#: [REDACTED]
FEIN/SSN#: XX-XXX6458
UI#: No record
DCCA FILE#: 16266

Status of Compliance for this Vendor on issue date:

Form	Department(s)	Status
A-6	Hawaii Department of Taxation	Compliant
8821	Internal Revenue Service	Compliant
COGS	Hawaii Department of Commerce & Consumer Affairs	Exempt
LIR27	Hawaii Department of Labor & Industrial Relations	Compliant

Status Legend:

Status	Description
Exempt	The entity is exempt from this requirement
Compliant	The entity is compliant with this requirement or the entity is in agreement with agency and actively working towards compliance
Pending	A status determination has not yet been made
Submitted	The entity has applied for the certificate but it is awaiting approval
Not Compliant	The entity is not in compliance with the requirement and should contact the issuing agency for more information

**DECLARATION STATEMENT OF
APPLICANTS FOR GRANTS PURSUANT TO
CHAPTER 42F, HAWAII REVISIED STATUTES**

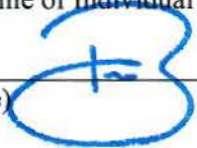
The undersigned authorized representative of the applicant certifies the following:

- 1) The applicant meets and will comply with all of the following standards for the award of grants pursuant to Section 42F-103, Hawaii Revised Statutes:
 - a) Is licensed or accredited, in accordance with federal, state, or county statutes, rules, or ordinances, to conduct the activities or provide the services for which a grant is awarded;
 - b) Complies with all applicable federal and state laws prohibiting discrimination against any person on the basis of race, color, national origin, religion, creed, sex, age, sexual orientation, or disability;
 - c) Agrees not to use state funds for entertainment or lobbying activities; and
 - d) Allows the state agency to which funds for the grant were appropriated for expenditure, legislative committees and their staff, and the auditor full access to their records, reports, files, and other related documents and information for purposes of monitoring, measuring the effectiveness, and ensuring the proper expenditure of the grant.
- 2) If the applicant is an organization, the applicant meets the following requirements pursuant to Section 42F-103, Hawaii Revised Statutes:
 - a) Is incorporated under the laws of the State; and
 - b) Has bylaws or policies that describe the manner in which the activities or services for which a grant is awarded shall be conducted or provided; and
- 3) If the applicant is a non-profit organization, it meets the following requirements pursuant to Section 42F-103, Hawaii Revised Statutes:
 - a) Is determined and designated to be a non-profit organization by the Internal Revenue Service; and
 - b) Has a governing board whose members have no material conflict of interest and serve without compensation.
- 4) The use of grant-in-aid funding complies with all provisions of the Constitution of the State of Hawaii (for example, pursuant to Article X, section 1, of the Constitution, the State cannot provide "... public funds ... for the support or benefit of any sectarian or nonsectarian private educational institution...").

Pursuant to Section 42F-103, Hawaii Revised Statutes, for grants used for the acquisition of land, when the organization discontinues the activities or services on the land acquired for which the grant was awarded and disposes of the land in fee simple or by lease, the organization shall negotiate with the expending agency for a lump sum or installment repayment to the State of the amount of the grant used for the acquisition of the land.

Further, the undersigned authorized representative certifies that this statement is true and correct to the best of the applicant's knowledge.

Mental Health Association in Hawaii, dba Mental Health America of Hawaii
(Typed Name of Individual or Organization)

(Signature)  January 19th, 2024
(Date)

Bryan L. Talisayan
(Typed Name) Executive Director
(Title)

Application for Grants

If any item is not applicable to the request, the applicant should enter "not applicable".

I. Certification – Please attach immediately after cover page

1. **Hawaii Compliance Express Certificate (If the Applicant is an Organization):** Attached
2. **Declaration Statement:** Attached
3. **Public Purpose:** Pursuant to Section 42F-102, Hawaii Revised Statutes, the public purpose served through Mental Health America of Hawaii's Mental Health Resilience, Wellness, and Suicide Prevention is improved community resilience, increased availability of skills-based suicide prevention efforts, and the reduction of the shame, stigma, and discrimination that surrounds mental health and illness. This will be accomplished through the provision of more than 20 evidence informed training programs, increased access to clinical mental health services for at risk youth, and community-based education efforts for youth and adults.

II. Background and Summary

1. **A brief description of the applicant's background:** Mental Health America of Hawai'i (MHAH) is a highly regarded 501(c)(3) non-profit organization serving the State of Hawai'i. For 81 years, MHAH has been fulfilling its mission "to promote mental health & wellness through education, advocacy, service, and access to care" through its vision of 'mental wellness for all.' We endeavor to reduce the shame and stigma of mental illness and improve the overall care, treatment, and empowerment of those with or at risk for mental health challenges across all stages of life in Hawai'i. Through our leadership, we've been expanding mental health awareness, preparedness, understanding, and action through training, education, and advocacy since 1942. We are a statewide organization with offices on the islands of O`ahu and Maui.
2. **The goals and objectives related to the request:** The overall goal of MHAH's Mental Health Resilience, Wellness, and Suicide Prevention program is to foster a culture of mental health resilience, wellness, and prevention in youth and adults throughout the state. Specific ongoing objectives throughout the project period will include:
 - a. Expand access to evidence informed resilience and wellness training for adults:
 - b. Increase the number of adults trained to identify potential mental health crises, how to respond, and the resources available.

- c. Increase the number of youths aged 8 - 18 trained to identify signs of and risks for bullying and suicidal ideation, how to respond, and the resources available to them.
- d. Increase the number of adults trained to implement MHAH's Youth Suicide & Bullying Prevention curriculum in rural parts of the state.
- e. Enhance anti-stigma community-based education through digital community based educational efforts.

- 3. The public purpose and need to be served:** Pursuant to Section 42F-102, Hawaii Revised Statutes, the public purpose served through Mental Health America of Hawai'i's Mental Health Resilience, Wellness, and Suicide Prevention is improved community resilience, increased availability of skills-based suicide prevention efforts, and the reduction of the shame, stigma, and discrimination that surrounds mental health and illness. This will be accomplished through the provision of more than 20 evidence informed training programs, increased access to clinical mental health services for at risk youth, and community-based education efforts for youth and adults.

Considering nearly four years of effects from the global pandemic, and now, the worst wildfire in the nation in 100 years, the need for mental health resilience, wellness, and prevention education has never been more critical. There is clear evidence that the pandemic continues to have a negative impact on mental health status. In fact, according to an article on CNBC, Dr. Alex Desatnik, a clinical psychologist, noted that it will take "at least a generation" to resolve the mental health damage from the pandemic. According to Mental Health America's Mental Health Risk Assessments, data from ongoing online mental health screenings show that 175.4/100,000 Hawaii residents scored with severe depression; 207.1/100,000 report frequent suicidal ideation; 57.6/100,000 were positive for PTSD; 227.1/100,000 identify as trauma survivors; and 65.9/100,000 at risk for psychosis. The Hawaii Department of Health's Injury Prevention and Control Sections EMS & Injury Prevention System Branch reports death by suicide as the second leading cause of fatal injuries in Hawai'i between 2016 and 2020.

The ongoing disaster on Maui Island has resulted in an increased demand for ongoing mental health support, resilience building, and suicide prevention efforts. The disaster itself has an immediate and devastating impact, but through the long recovery process, losses of physical, social, cultural, and in some cases spiritual structure takes years to rebuild. Initial estimates show nearly 2,000 residential homes and more than 6,000 people have been displaced, nearly half of which were youth. It is yet unclear how many Maui Island residents have lost their jobs because of the tragedy, though a correlation between increased unemployment rates and increased deaths by suicide. Research demonstrates a clear link between disasters and poor mental health outcomes, and mental health recovery from them is a complex process which everyone will experience and heal from differently. According to a household-level rapid needs

assessment conducted by the Department of Health, initial findings are alarming: 1) Two months after the fire, 56% of households are in temporary housing; 2) 64% report barriers when signing up to receive disaster assistance; and 3) 22% of households rated their own mental health as poor or very poor. However, this data is limited in sample size (n=228) and statistics are expected to progressively worsen, particularly after mitigating factors such as the Red Cross and FEMA support begin to tone down.

Youth are especially impacted by disasters of this scale with the most manifested conditions being trauma, depression, anxiety, and substance use, with further impact trickling down from those who take care of them. In addition to the impacts of the fire, youth were already, and continue to be, severely impacted by the pandemic, with the CDC noting that COVID-19 created traumatic stressors for youth mental wellbeing. *Evidence has demonstrated that there is a critical need for mental health and resilience education and suicide prevention programs for all youth.* Late last year, the SAMHSA released its *National Guidelines for Child and Youth Behavioral Health Crisis Care* to express the need to improve prevention efforts and crisis response for children and youth. Earlier that same year, the US Surgeon General declared a youth mental health crisis in the U.S. According to the Hawaii Department of Health's Injury Prevention and Control Sections EMS & Injury Prevention System Branch, death by suicide was the second leading cause of fatal injuries in Hawai'i between 2016 and 2020. During the same period, suicide was the 4th leading cause of fatal injury for those 0 – 15 years of age, and the 1st leading cause for those between the ages of 16 and 29.

4. **Describe the target population to be served:** The target population to be served by MHAH's program includes youth (8 – 24 years of age) and adults living in the State of Hawaii. Special emphasis will be placed on reaching those living in rural areas of the state; those directly and indirectly impacted by the lingering impacts of the pandemic and the Maui Island fires; and at risk/opportunity youth.
5. **Describe the geographic coverage:** Mental Health America of Hawaii's Mental Health Resilience, Wellness, and Prevention program is designed to be implemented statewide through virtual and in-person programming.

III. Service Summary and Outcomes

MHAH's Mental Health Resilience, Wellness, and Suicide Prevention training program fosters change with individuals, families, communities, and systems by improving coping skills, reducing shame and stigma, and enabling consumers to be effective conduits to crisis resources. Increased resilience provides for a culture of harmony, not just for oneself, but community wide, particularly given the ongoing and lasting impacts of the pandemic and Maui fires.

1. **Describe the scope of work, tasks and responsibilities:** In the 12-month project period, MHAH will provide 2,500 youth (8 – 24 years of age), and 5,000 adults with evidence informed mental health resilience, wellness, and suicide prevention education.
 - a. **Training Program:** While our full cadre of training’s will be made available, for the purposes of this project, the following trainings will be emphasized **and provided at no cost to participants for around \$40/person in State GIA funds:**

Training & Projection	Description
Youth Suicide & Bullying Prevention Program (2,000 youth; 200 adults):	<p>Created in 2008, MHAH has trained nearly 35,000 youth and adults in the Youth Suicide and Bullying Prevention Program. <u>An approved training by the 2019 legislative Act 270, the program is made up of 4 components:</u></p> <ol style="list-style-type: none"> a. Become a Defender (BAD): The BAD curriculum introduces 4th – 6th graders with anti-bullying and bullying prevention training without yet incorporating the topic of suicide prevention. b. Self-Care for Youth (SCFY): SCFY incorporates the concepts of resilience and wellness to 7th – 12th graders that are designed to help them feel stronger, more hopeful, and able to cope with stress and provide healthy support for their peers. c. Suicide & Bullying Prevention: Ideal for middle through high school aged youth, this core curriculum of the YSBP program demonstrates increased knowledge of bullying and suicide, identifies risk factors and warning signs, and provides skills and resources to help prevent and/or intervene. d. College Mental Health (CMH): Designed for 18 – 24-year-old undergraduate students, the CMH curriculum address the importance of healthy coping strategies, dealing with stress and anxiety, peer pressures, sudden independence, and how these can impact (positively and negatively) their success in their first four years of college. Emphasis is placed on coping strategies and protective factors. e. Training for Trainers: This 8-hour training provides adult participants with the necessary skills and tools to implement the full YSBP program to youth they serve in the communities in which they live.

<p>Mental Health First Aid Certification Courses (700 adults)</p>	<p>Mental Health First Aid is an 8-hour training that teaches participants how to identify, understand, and respond to signs of mental illnesses and substance use disorders. Three versions are currently available through MHAH including Youth (for youth serving adults, family members, and others with frequent contact with youth); Adult (general community adults); and Public Service (police, EMS, fire personnel).</p>
<p>Suicide Prevention Foundations (800 adults)</p>	<p>Also known as SP 101, this curriculum, which is approved by the 2019 Act 270 requirements, is a foundational suicide prevention training. Participants are introduced to the landscape of the issue of suicide risk/protective factors, warning signs, best practices for connecting with someone who may be suicidal, safe messaging, and community resources.</p>
<p>LivingWorks SafeTalk (900 adults; 250 youth)</p>	<p>LivingWorks SafeTalk is a 4-hour training that equips people to be more alert of someone thinking of suicide, how to reach out and help them keep safe by promptly connecting them to further support. Using a simple yet effective model, LivingWorks SafeTalk empowers everyone to make a difference</p>
<p>LivingWorks ASIST (700 adults; 250 youth)</p>	<p>LivingWorks ASIST is a two-day in-person workshop featuring powerful audio visuals, discussion, and simulations. You will learn how to recognize when someone may be thinking about suicide and how to provide a skilled intervention and develop a safety-plan with the person to connect them to further support. This workshop increases participants willingness, confidence, and capacity to provide suicide first aid.</p>
<p>General Resilience Trainings (1,300 adults)</p>	<p>General resilience trainings will include the following evidence informed curriculum:</p> <ol style="list-style-type: none"> 1. Healing & Grief 2. Sleep Hygiene 3. Tips & Strategies for Surviving & Thriving 4. Live Your Life Well
<p>Advanced Trainings (400 adults)</p>	<p>Advanced resilience trainings which primarily target service providers, care givers, and others include the following evidence informed trainings:</p> <ol style="list-style-type: none"> 1. Trauma Informed Care (brief review) 2. Motivational Interviewing (basic review) 3. Waiting for Change: A Direct Service Providers Guide to Self-Care and Grief Literacy

4. Building a Foundation of Self-Care for Caregivers

- a. Public Service and Digital Based Education:** Considering that one of the most significant barriers to mental health services remains the shame, stigma, and discrimination associated with mental health and mental illness. Throughout the budget period, MHAH will implement a no shame campaign (www.noshamegethelp.org) through social media and the development and production of a 15 and 30 second public service announcement targeting both youth and adults. Based on a previous effort in 2021 (<https://www.youtube.com/watch?v=qrm7mHgp4Xc>) we anticipate Hawaii engagement and impressions to be upwards of 500,000 and the product can be used for multiple years. The intent of these efforts is to normalize talking about mental health and promote help seeking behaviors.

- b. At Risk Youth Clinical Mental Health Services:** Throughout the last two years, as the nation still struggles with a youth mental health crisis, and now, the impacts of the Maui wildfires, access to clinical mental health services for at-risk youth are more critical than ever. MHAH will work with it’s partners, Spill the Tea Café, to provide 200 mental health clinical services to at-risk youth who otherwise do not have the ability to pay for or access these vital services.

2. Projected annual timeline for accomplishing the results or outcomes of the service: The proposed activities will be implemented immediately upon award and will be ongoing throughout the budget period.

3. Describe its quality assurance and evaluation plans for the request: To evaluate the projects impact and reach, MHAH will use a variety of tools for measurements. These include registration forms, Alchemer (for post training knowledge assessments and participant satisfaction; pre/post assessments for youth programs; and data from focus groups), sign- in sheets (or Zoom participant lists). Data from these tools are analyzed monthly and reported to MHAH’s Executive Director and Board of Directors. Each month, progress is determined by trainings reach (whether the project is on track to meet its projected numbers and outcomes). Digital educational campaigns are measured through Facebook Analytics, Instagram Analytics, and website traffic. In addition to this, frequent testimonials from youth serving adults are used in the program evaluation process. For privacy, MHAH does not collect socio-economic or individually identifiable data from its youth participants who are less than 18 years of age.

4. Measure(s) of effectiveness that will be reported to the State agency through which grant funds are appropriated (the expending agency): Mentioned above, the evaluation process to assess the impact of the project will include data collection from

program participants and digital analytics. Data from these sources will be analyzed monthly to determine if changes in approach are required. Specific measures of efficacy that will be reported to the State agency include, but will not be limited to the following:

- a. Total youth reached by county.
- b. Total adult reached by county.
- c. Total reach by training curriculum.
- d. Digital impressions for community-based education.

Additional outcome measures include:

- a. Of those participating in a component of the Youth Suicide and Bullying Prevention Program, as demonstrated through pre and post knowledge assessments:
 - a. 45% of total participants will demonstrate increased knowledge and understanding of suicide prevention.
 - b. 35% will demonstrate an increase in knowledge and understanding of bullying prevention.
 - c. 85% will be able to identify the different types of bullying, the roles youth play in bullying, the warning signs/risk factors for suicide, and resources to get help for suicidal youth.
- b. 75% of those participating in youth self-care training program will be able to identify signs and symptoms of anxiety, stress, as well as learn 3-4 additional coping strategies.
- c. 95% of adult participants will demonstrate increased knowledge of suicide prevention, including risk factors, signs of crisis in youth, and available resources (historical average 80%).
- d. 95% of total Youth, Adult, and Public Service Mental Health First Aid training participants will complete the post-training assessment and achieve 3-year certification.

IV. Financial

1. **The applicant shall submit a budget utilizing the enclosed budget forms as applicable, to detail the cost of the request:** Attached
 - a. **Budget request by source of funds:** Attached
 - b. **Personnel salaries and wages:** Attached
 - c. **Equipment and motor vehicles:** Attached
 - d. **Capital project details:** Attached
 - e. **Government contracts, grants, and grants in aid:** Attached

2. **Anticipated quarterly funding requests for the fiscal year 2025:**

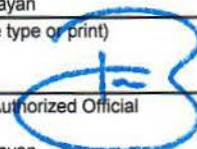
Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$75,000	\$75,000	\$75,000	\$75,000	\$300,000

3. **The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2025:** In addition to this GIA request, MHAH will be seeking funding for FY2025 from the following potential funders:
 - a. County of Maui, \$120,000 for services on Maui, Lana`i, and Moloka`i islands (application submitted)
 - b. Private and public foundations and fundraising, \$100,000 (applications ongoing throughout project period).
4. **State and federal tax credits granted within the prior three years:** Not applicable.
5. **Federal, state, and county government contracts, grants, and grants in aid granted in the prior three years:**
 - a. County of Maui, FY2022, \$95,000.00
 - b. County of Maui, FY2023, \$110,000.00
 - c. County of Maui, FY2024, \$110,000.00
6. **Balance of unrestricted current assets as of December 31, 2023:** As of December 31st, 2023, MHAH’s total assets are \$886,898 (unaudited), of which \$399,107, or about 45%, is unrestricted.

BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2024 to June 30, 2025

Applicant: Mental Health Association in Hawaii, dba Mental Health America of Hawaii

BUDGET CATEGORIES	Total State Funds Requested (a)	Total Federal Funds Requested (b)	Total County (Maui) Funds Requested (c)	Total Private/Other Funds Requested (d)
A. PERSONNEL COST				
1. Salaries	76,243		68,722	25,768
2. Payroll Taxes & Assessments	11,132		9,552	3,582
3. Fringe Benefits	15,291		10,621	12,157
TOTAL PERSONNEL COST	102,666		88,895	41,507
B. OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island	6,700		4,617	5,250
2. Ground Transportation	4,320		905	605
3. Professional Fees (accounting/audit)	10,200		4,500	
4. Lease/Rental of Space	11,800		5,033	
5. Staff Training	9,000			
6. Supplies	10,000			
7. Telecommunication	3,910			
8. Utilities				
9. Program Activities General	23,442		7,350	4,248
10. Program Activities Educational	15,962			5,000
11. Program Activities Training promo	3,500			
12. Grants to Other Orgs	50,000			20,000
13. Printing & Publications	3,500			
14. Equipment	5,000			
15. Insurance			1,691	
16. IT			2,744	
17. Life Insurance & Pension			4,265	
18. Professional Fees (1099)				15,000
19. Printing & Publications				8,390
20. No Shame, Get Help PSA & Education C	40,000			
TOTAL OTHER CURRENT EXPENSES	197,334		31,105	58,493
C. EQUIPMENT PURCHASES				
D. MOTOR VEHICLE PURCHASES				
E. CAPITAL				
TOTAL (A+B+C+D+E)	300,000		120,000	100,000
SOURCES OF FUNDING		Budget Prepared By:		
(a) Total State Funds Requested	300,000	Bryan L. Talisayan	808-521-1846	
(b) Total Federal Funds Requested		Name (Please type or print) Phone		
(c) Total County Funds Requested	120,000			
(d) Total Private/Other Funds Requested	100,000			
TOTAL BUDGET	520,000	Bryan L. Talisayan Name and Title (Please type or print)		

BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES

Period: July 1, 2024 to June 30, 2025

Applicant: Mental Health Association in Hawaii, dba Mental Health America of Hawaii

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)
Executive Director	1	\$95,000.00	5.00%	\$ 4,750.00
Program Director	1	\$67,607.00	25.00%	\$ 16,901.75
Training Program Manager	1	\$56,697.00	25.00%	\$ 14,174.25
Operations Manager	1	\$53,336.00	20.00%	\$ 10,667.20
Maui Community Coordinator	1	\$53,336.00	0.00%	\$ -
Mental Health Educator	2	\$85,000.00	35.00%	\$ 29,750.00
				\$ -
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				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
TOTAL:				76,243.20
JUSTIFICATION/COMMENTS:				

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2024 to June 30, 2025

Applicant: Mental Health Association in Hawaii, dba Mental Health America of Hawaii

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
Laptop	2.00	\$2,500.00	\$ 5,000.00	5000
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:	2		\$ 5,000.00	5,000

JUSTIFICATION/COMMENTS:

DESCRIPTION OF MOTOR VEHICLE	NO. OF VEHICLES	COST PER VEHICLE	TOTAL COST	TOTAL BUDGETED
N/A			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:				

JUSTIFICATION/COMMENTS:

Laptops for presentations on location, particularly on islands outside of Oahu and Maui

BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS

Period: July 1, 2024 to June 30, 2025

Applicant: Mental Health Association in Hawaii, dba Mental Health America of Hawaii

FUNDING AMOUNT REQUESTED						
TOTAL PROJECT COST	ALL SOURCES OF FUNDS RECEIVED IN PRIOR YEARS		STATE FUNDS REQUESTED	OTHER SOURCES OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY: 2022-2023	FY: 2023-2024	FY:2024-2025	FY:2024-2025	FY:2025-2026	FY:2026-2027
PLANS	N/A	N/A	N/A	N/A	N/A	N/A
LAND ACQUISITION	N/A	N/A	N/A	N/A	N/A	N/A
DESIGN	N/A	N/A	N/A	N/A	N/A	N/A
CONSTRUCTION	N/A	N/A	N/A	N/A	N/A	N/A
EQUIPMENT	N/A	N/A	N/A	N/A	N/A	N/A
TOTAL:	N/A	N/A	N/A	N/A	N/A	N/A
JUSTIFICATION/COMMENTS:						

GOVERNMENT CONTRACTS, GRANTS, AND / OR GRANTS IN AID

Applicant: Mental Health Association in Hawaii, dba Mental Health America of Hawaii

Contracts Total: 110,000

	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S./State/Hawaii/ Honolulu/ Kauai/ Maui County)	CONTRACT VALUE
1	Mental Health Resilience, Wellness, Education	7/1/2023 - 6/30/2024	Housing and Human Concerns	County of Maui	110,000
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30		10			Application for Grants

V. Experience and Capability

- 1. Necessary Skills and Experience:** Mental Health America of Hawaii has the necessary skills and experience to implement its proposed project. For 81 years, MHAH has been fulfilling its mission “to promote mental health & wellness through education, advocacy, service, and access to care” through its vision of ‘mental wellness for all.’ We endeavor to reduce the shame and stigma of mental illness and improve the overall care, treatment, and empowerment of those with or at risk for mental health challenges across all stages of life in Hawai`i. Through our leadership, we’ve been expanding mental health awareness, preparedness, understanding, and action through training, education, and advocacy since 1942.

Throughout the last eight decades, MHAH started and spun off some of Hawai`i’s major mental health organizations and programs, including Hawai`i’s Crisis Line, the first halfway house for adults with mental illness (which became Mental Health Kokua), Hale Kipa, Maui Family Support Services, and Hawai`i Families as Allies. MHAH has also been a leader in improving the care and treatment of people with mental illness through systems advocacy. MHAH has led or assisted with advocacy for the major laws impacting the treatment of people with mental illness, including the Civil Commitment law in 1976, the Patient’s Rights law (Act 272) and Residential Act (Act 218) in 1984, and the Psychiatric Advance Directive law and parity in health insurance coverage in the 1990s. Currently we focus our advocacy efforts on the state legislature and state departments to ensure the adequate availability and accessibility of mental health services. We also participate in advocacy that targets reducing toxic stress on families and individuals that negatively impacts mental health.

Since 2020, MHAH has hosted nearly 900 resilience, wellness, and prevention training courses for more than 30,000 total participants, including 10,000 school aged youth.

- 2. Facilities:** Existing facilities are sufficient to operate and maintain the proposed project. The locations used by MHAH on O`ahu and Maui are set up as accessible and standard business offices with desks, equipment and electronics. While most of our training programs are implemented at schools, businesses, public arenas, and virtually, each location has access to on-site training spaces.

VI. Personnel: Project Organization and Staffing

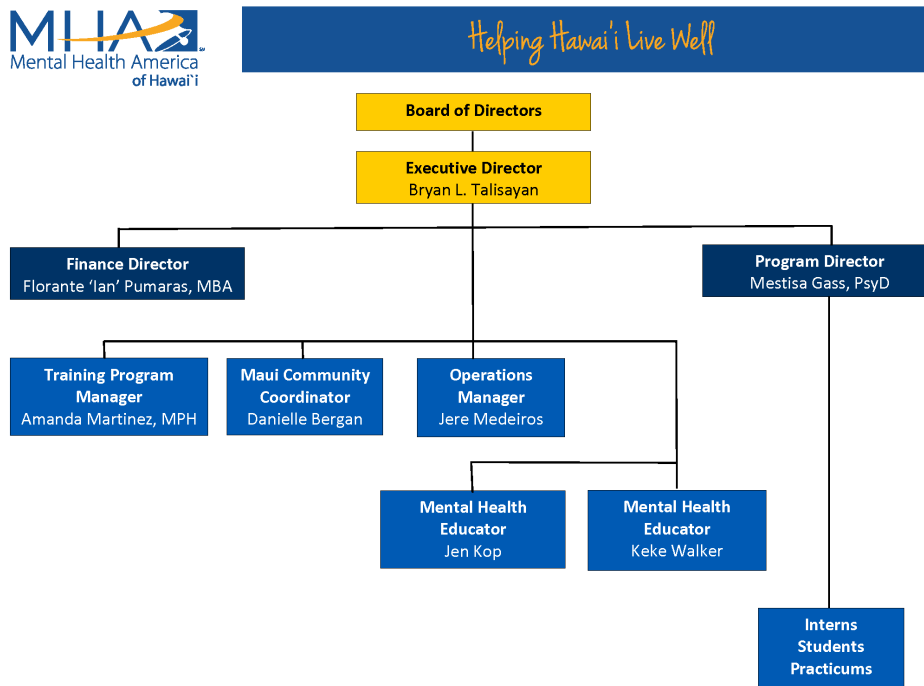
- 1. Proposed Staffing, Staff Qualifications, Supervision and Training:** Mental Health America of Hawaii has assembled a highly effective, qualified, and competent team to implement the Mental Health Resilience, Wellness, and Suicide Prevention programming. Each staff person has the necessary credentials to implement MHAH’s cadre of evidence informed trainings. Specific positions involved with the project include the following:

- a. **Bryan L. Talisayan, Executive Director:** The Executive Director is responsible for the overall implementation of programming, strategic direction, financial stewardship, and operations. In addition to his many years serving Hawai'i's most disenfranchised communities, his experience includes highly effective and progressively responsible leadership in governance, operations, project management, policy development, and grant writing and fund development. Bryan also has nearly twenty years of experience in the monitoring and oversight of government and private grant awards that have ranged from \$20,000 - \$1.5 million.
- b. **Mestisa Gass, PsyD, Program Director:** The Program Director is responsible for implementing direct trainings statewide, training design, and overall program quality assurance. Mestisa C. Gass, PsyD, is the Program Director for Mental Health America of Hawaii (MHAH). Dr. Gass received her M.A. in Clinical Psychology from Argosy University in 2009 and went on to achieve her Psy.D., in Clinical Psychology in 2013, also from Argosy University. She is also familiar with mental health challenges on a personal and community level. Having grown up in an isolated, Appalachian farming community, she experienced first-hand what limited access to mental health treatment and social services can do to individuals and families. She is a member of the Mental Health Task Force, the Statewide and Oahu Suicide Prevention Task Forces, and a board member for the Waipahu Aloha Clubhouse and the American Foundation for Suicide Prevention-Hawai'i Chapter.
- c. **Amanda Martinez, MPH, Training Program Manager:** The Training Program Manager serves as the primary youth training program implementation, design, and training for trainers statewide. Since 2017, she has trained thousands of youths and adults in Hawai'i with MHAH's Youth Suicide and Bullying Prevention and mental wellness trainings. She is also a certified trainer for Mental Health First Aid and Youth Mental Health First Aid trainings. Amanda earned her master's in public health from the University of Hawai'i at Manoa, specializing in Social and Behavioral Health Sciences. She is interested in mental health wellness promotion among youth and young adults, especially among sexual and gender minorities.
- d. **Jere Medeiros, Operations Manager:** The Operations Manager is responsible for the overall operations of the organization, both administrative and programmatic. This includes coordination of schedules, e-mail education development, and is key in running our state-wide help line. Jere has been with MHAH for more than a decade and is highly efficient and skilled in her role.
- e. **Danielle Bergan, Maui Community Coordinator:** The Maui Community Coordinator is responsible for the implementation of MHAH's programming throughout the County of Maui. Danielle is a certified instructor in several mental health and suicide prevention trainings. These are Youth Suicide and Bullying Prevention, safeTALK, Suicide Prevention Foundations (SP 101), ASIST, Youth Mental Health First Aid and Adult Mental Health First Aid. She is also co- chair of the E Ola Hou Prevent Suicide

Maui Task Force and the Chair of the Maui Area Service Board for Mental Health and Substance Abuse.

- f. **Keke Walker, Mental Health Educator:** The primary role for the Mental Health Educator is to conduct ongoing statewide outreach and implementation of MHAH’s evidence informed curriculum. Keke has nearly a decade of experience in working in social services and mental health. She earned her AS in Psychology and is about to complete her undergraduate degree in Psychology as well. Keke joined the MHAH team in October of 2023 and is making significant progress towards mastering the cadre of trainings.
- g. **Jen Kop, Mental Health Educator:** The primary role for the Mental Health Educator is to conduct ongoing statewide outreach and implementation of MHAH’s evidence informed curriculum. Jen is a graduate of Kamehameha Schools and received their bachelor’s degree in public health in the Summer of 2023 and graduated summa cum laude and is bilingual. Jen joined the MHAH team in October of 2023 and has already mastered much of the basic curriculum and will be fully trained in time for the start of this project.

2. Organizational Chart



January 2024

- 3. **Compensation:** Annual salary range paid by the applicant to the three highest paid employees of the organization:



Applicant: Mental Health Association in Hawaii, dba Mental Health America of Hawaii

- a. Executive Director: \$95,000 - \$107,000/annually
- b. Program Director: \$64,000 - \$68,000/annually
- c. Training Program Manager: \$54,000 - \$57,000/annually

VII. Other

- 1. Litigation:** Mental Health America of Hawaii is not involved in recent or pending litigation.
- 2. Licensure or Accreditation:** Not applicable.
- 3. Private Educational Institutions:** Not applicable.
- 4. Future Sustainability Plan:** This grant in aid request represents about 42% of MHAH's projected FY 2024 – 25 program budget, and 32% of the request would be expenses for the initial year only. Historically, MHAH has depended on, and been successful at securing government and private grants, corporate sponsorships, fundraisers, and individual contributions to sustain its programming, and will continue to depend on this process. In our experience during the pandemic, and now, with the historical fires, grantors and donors are increasingly aware of the importance of community mental health, particularly that for youth, and the need for critical resilience and prevention training. If additional years of state funding are not available, MHAH will increase fundraising efforts, including grants, corporate sponsors, and general contributions, to ensure the programs efforts are sustained in future periods.