

Grant Approval Memo



Grantee: Covenant House Alaska
Request Amount: \$310,000.00
Project Title: Meeting Youth Where They Are: Expanding Behavioral Health, Substance Use and Recovery Services Across CHA
Grant Term: 2/16/2026 to 2/15/2027
Fund Source: FY26 Trust Focus Area Strategy Implementation
Trust Staff: Kelda Barstad

Requested Motion:

The Program and Planning Committee recommends that the Board of Trustees approve a \$310,000 authority grant to Covenant House Alaska for the Meeting Youth Where They Are: Expanding Behavioral Health, Substance Use and Recovery Services Across CHA grant. These funds will come from the Trust Focus Area Strategy Implementation line of the FY26 budget.

Staff Analysis:

- What does this project do?
Trust funds will pay for behavioral health services to be co-located at the Covenant House Alaska campus.
- Who is receiving the funds?
Covenant House Alaska (CHA) serves homeless youth in the Anchorage area ages 13-24. They operate a youth shelter and youth engagement center that is open 24/7, 365 days a year. CHA also operates programs for youth including: education and employment, housing navigation, rapid rehousing, Minor Accessing Care and Kindness (MACK) units, Rights of Passage, Passage House, Covey Lofts, and homelessness prevention services.
- Why is staff recommending this project?
Youth experiencing homelessness, exploitation and human trafficking will have access to mental health and substance use disorder services on campus, eliminating a barrier to services dramatically increasing the likelihood that youth will follow through with assessment and treatment compared to an off-campus program. A significant majority of youth served by CHA meet AMHTA beneficiary criteria. In the most recent full analysis of youth accessing services at the Youth Engagement Center, 65% had a mental illness, 33% had a developmental disability, 58% struggled with alcoholism or substance use, and 10% had experienced a traumatic brain injury. This project primarily focuses on beneficiary youth with mental health and substance use disorders, while also providing preventative services to the broader population of homeless youth.
- Will this be a multi-year project?
This project was piloted last year to reduce the high number of critical incidents experienced on campus. In FY24 CHA documented 106 critical incidents, including 34 overdoses, 14 suicide attempts, and 14 sexual assaults. After program implementation, from August 2024 to October 2025, the Specialist met with youth 389 times, provided 280 staff consultations, made 48 referrals to VOAA services, and trained 114 staff. These interventions have contributed to a

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measurable decline in critical incidents. In FY25, incidents dropped to 30, including one overdose incident. Additional funding is requested this year to expand access to substance use prevention and treatment on campus. If a sustainable funding source cannot be located, another proposal may be submitted in the future.

Trust Five Year Funding History

Fiscal Year	Project Title	Amount	Status	Final Expended
2025	Building Capacity for Crisis Intervention and Behavioral Health Support at Covenant House Alaska	\$136,000	Active	TBD
2025	Covey Academy Youth Employment Training	\$250,000	Closed	\$250,000
2024	Mental Health Clinician for CHA's Youth Engagement Center	\$97,586	Closed	\$97,586
2024	Covey Academy Youth Employment Training	\$250,000	Closed	\$250,000
2023	CHA's Covey Academy	\$250,000	Closed	\$250,000
2023	CHA Culture Coordinator and DEI Department	\$50,000	Closed	\$50,000

Comp Plan Identification

Area of Focus	Objective	Comments
Area of Focus 4: Substance Use Disorder Prevention	4.3 Improve treatment and recovery support services to promote wellness and reduce the impact of mental health and substance use disorders	

Trust Focus Area Connection

Budget Area	Strategy	Comments
Mental Health & Addiction Intervention	MHAI - Improve Treatment & Recovery Support Services	

Project Description (from grant application)

Covenant House Alaska (CHA) proposes a comprehensive, multi-agency approach to address one of the most pressing gaps in our communities' behavioral health continuum: the lack of accessible mental health and substance use disorder (MH/SUD) services for youth experiencing homelessness, exploitation, and human trafficking. CHA serves approximately 1,000 youth ages 13–24 each year, and

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more than half qualify as Alaska Mental Health Trust beneficiaries, including youth with mental illness, substance use challenges, co-occurring disorders, and trauma histories.

CHA's direct care staff are trained paraprofessionals skilled in case management, education, employment, and life skills. However, they are not licensed MH/SUD clinicians, and the youth we serve increasingly face acute behavioral health crises, substance use disorders, and untreated trauma. While CHA partners with Southcentral Foundation (SCF) to operate a daytime Wellness Center staffed by a Behavioral Health Consultant, and with Volunteers of America Alaska (VOAA) to provide part-time on-site behavioral health support, significant gaps remain. Youth in transitional living, Covey Academy Residential, Covey Lofts, the MACK House minor shelter, and off-site apartments have limited access to MH/SUD services. CHA also lacks evening support groups, on-site SUD assessments, and consistent psychosocial education programming during the hours when most youth are present. Staff also require more advanced training to respond safely and effectively to escalating MH/SUD needs.

To address these challenges, CHA proposes a three-pronged initiative designed to build a more comprehensive and sustainable behavioral health system for beneficiary youth.

Performance Measures

How much did you do?

- a. Total number of youth (beneficiaries and non-beneficiaries) who engaged with a clinician and partner Peer Support/Recovery staff during the reporting period.
- b. Total number (#) of unduplicated youth Trust beneficiaries served during the reporting period, broken down by primary beneficiary category.
- c. Number (#) of staff members who received coaching, crisis support, or MH/SUD training from VOAA staff, or partner Peer Support/Recovery staff. How well did you do?
- d. Provide a narrative that describes the timeline, activities, successes, challenges, and any lessons learned during the reporting period.
- e. Number (#) of crisis incidents requiring de-escalation by a staff member during the reporting period, broken down by month.
- f. Number (#) and percentage (%) of youth participants who felt they were treated with dignity and respect while participating in the program.
- g. Staff competency indicators, such as pre/post training ratings of confidence in responding to MH/SUD crises.

How well did you do?

- a. Provide a narrative that describes the timeline, activities, successes, challenges, and any lessons learned during the reporting period.
- b. Number (#) of crisis incidents requiring de-escalation by a staff member during the reporting period, broken down by month.
- c. Number (#) and percentage (%) of youth participants who felt they were treated with dignity and respect while participating in the program.
- d. Number (#) and percentage (%) of youth participants who were satisfied with the services they received while participating in the program.

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Is anyone better off?

- a. Number (#) of unduplicated youth who received any of the following by engaging with a clinician during the reporting period:
 - i. On-site assessment MH/SUD assessment or screening
 - ii. Individual or group counseling
 - iii. Peer support sessions
 - iv. Referral for services
- b. Two statements from youth describing how their quality of life was impacted by the services they received from the clinician.
- c. Number (#) and percentage (%) of youth participants who demonstrate improvements in any of the three leading indicators correlated most highly with adverse outcomes (such as returning to homelessness, vulnerability to trafficking, incarceration, injury, early mortality): 1) lack of income; 2) lack of connections with stable adults, and 3) unaddressed barrier conditions such as mental illness, substance abuse or alcoholism, developmental disability, or traumatic brain injury.

Sustainability (from grant application)

CHA's leadership is committed to strengthening training and support for our frontline staff to improve outcomes for youth and create a stronger organization. CHA's Strategic Plan 2028 outlines a vision to "foster staff professional development and wellness, ensuring safety for youth and staff, and cultivating our culture." We are committed to finding long-term funding to support this work.

CHA takes a holistic approach to sustainability, focusing on long-term financial, programmatic, and operational strategies supported by a multifaceted fundraising approach. Our \$15 million FY26 budget is supported by a blend of federal, state, local, corporate, individual, and foundation dollars. Approximately 60% of CHA's budget is private, flexible dollars, which can be used for non-grant-funded positions.

Current funding for the VOAA T&S Specialist position ends in December 2025. VOAA will continue to support this position until an award from the AMHT. This project will support the transition of the T&S Specialist position to a Mental Health Clinician in July 2026, which supports long-term sustainability. A licensed clinician will be able to bill eligible payors for therapeutic services. Similarly, Peer Support or Recovery services from our partners are eligible billable services. This strategy will create an ongoing revenue stream that embeds our partners' critical behavioral health support into CHA's continuum.

We believe this initiative will increase staff retention and satisfaction, which are critical to the long-term effectiveness and sustainability of any organization. As we continue to improve our outcomes, we attract more and diverse funding streams to support this critical work.

Who We Serve (from grant application)

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A significant majority of youth served by CHA meet AMHT beneficiary criteria. In the most recent full analysis of youth accessing services at our YEC, 65% had a mental illness, 33% had a developmental disability, 58% struggled with alcoholism or substance use, and 10% had experienced a traumatic brain injury. This project primarily focuses on beneficiary youth with mental health and substance use disorders, while also providing preventative and early-intervention benefits for the broader population of highly vulnerable young people we serve.

We have already seen how enhanced behavioral health support improves outcomes for beneficiaries. The on-site T&S Specialist from VOAA has been indispensable in helping CHA's paraprofessional staff safely and effectively respond to MH/SUD crises, particularly amid the opioid epidemic. Many youth are reluctant to disclose diagnoses, leaving staff unsure how to interpret behaviors or intervene therapeutically. The T&S Specialist has helped bridge this gap by coaching staff, modeling trauma-informed responses, and providing one-on-one support to youth. From August 2024 to October 2025, the Specialist met with youth 389 times, provided 280 staff consultations, made 48 referrals to VOAA services, and trained 114 staff.

These interventions have contributed to a measurable decline in critical incidents. In FY24 CHA documented 106 critical incidents, including 34 overdoses, 14 suicide attempts, and 14 sexual assaults. In FY25, incidents dropped to 30, including one overdose incident. While opioid-related events have significantly decreased, staff are observing rising alcohol misuse, underscoring the continued need for comprehensive MH/SUD and peer-led recovery supports.

This project will meaningfully improve outcomes for Trust beneficiaries by:

1. Increasing youth access to on-site MH/SUD treatment, assessment, and referrals conducted by partners and CHA staff;
2. Improving staff's ability to recognize, de-escalate, and respond to crises; and
3. Reducing preventable harms and strengthening long-term stability for youth with complex behavioral health needs.

By expanding clinical capacity, peer support, recovery services, and staff training, this project ensures Trust beneficiaries receive care that is timely, coordinated, and truly responsive to the intensity of their needs.

Estimated Numbers of Beneficiaries Served Experiencing (from grant application)

Mental Illness:	400
Developmental Disabilities:	175
Substance Abuse	300
Traumatic Brain Injuries:	50
Number of people to be trained	80

Project Budget (from grant application)

Other Costs	\$310,000.00
Other Costs (Other Sources)	\$0.00

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Other Costs Narrative	<p>Purchased services:</p> <p>Volunteers of America Alaska: 1 FTE Training and Support Specialist/Mental Health Clinician: \$100,000 (Includes salary + 26% fringe for 1.0 FTE dedicated to CHA (T&S Specialist for March – June, Mental Health Clinician to be hired for July – February) (LOS attached)</p> <p>Contracted Peer Support or Recovery Services with Alaska Behavioral Health and/or True North Recovery: \$150,000</p> <p>CHA Staff Behavioral Health MH/SUD Training:</p> <p>Options include but are not limited to:</p> <ul style="list-style-type: none">• Center for Adolescent Studies Mindfulness-Based Substance Abuse Training (\$1,000 per course): Up to 10 staff• Alaska Commission for Behavioral Health Certification: Chemical Dependency Counselor (CDC); \$250 w/degree or \$1,200 w/out degree per certification; up to 10 staff• Other behavioral health and MH/SUD training courses and certifications as identified <p>Total training costs not to exceed \$18,000</p> <p>Administration: \$42,000 for administrative costs associated with this program.</p>
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Other Funding Sources (from grant application)

n/a	\$0.00
Total Leveraged Funds	\$310,000.00