

Program Description & Theory of Change: ThriveKids Student Wellness Program

The ThriveKids Student Wellness Program is an initiative led by Manning Family Children's, in collaboration with LCMC Health and other public and nonprofit partners across Louisiana. ThriveKids operates in Jefferson Parish, Orleans Parish, and through partnerships with the Juvenile Justice Intervention Center (JJIC) and the hospital's Trauma Unit.

Program Description

ThriveKids aims to improve academic and healthcare outcomes for students by providing a holistic model of care that integrates school-based therapy, care coordination, and outpatient behavioral health services. The ultimate vision is to advance health equity by ensuring all students, particularly those affected by trauma or systemic barriers, have access to the mental and physical health support needed to thrive in school and life.

Need

ThriveKids targets three high-need student populations: students enrolled in Jefferson Parish and target charter schools in Orleans Parish, youth exiting the Juvenile Justice Intervention Center (JJIC), and students recovering from traumatic injuries.

School-Based Mental Health Needs

In Louisiana, the youth mental health crisis is particularly acute. In 2022, over 51,000 K–12 students, more than 14% of the school-aged population, experienced a major depressive episode, yet 62.5% did not receive any form of treatment (Hopeful Futures Campaign, 2022). These mental health needs disproportionately affect students of color and those in low-income communities. As of 2024–2025, 89.2% of students in Orleans Parish and 80.6% in Jefferson Parish come from economically disadvantaged backgrounds, and 91.7% of students in Orleans

Parish identify as Black, Hispanic, or another student of color (Louisiana Department of Education, 2025). These demographic disparities are exacerbated by severe shortages of qualified mental health professionals in schools. In 2022, Louisiana had one school psychologist for every 3,365 students and one school social worker for every 1,979 students, far below the recommended ratios of 1:500 and 1:250, respectively (Hopeful Futures Campaign, 2022).

Youth & Immigrant Youth Exiting Detention

Students exiting juvenile detention face a distinct set of challenges that impede their successful reintegration into school or opportunity youth programs. Youth in detention are disproportionately Black and low-income, and are far more likely to have experienced trauma, disrupted education, and undiagnosed mental health issues. Nationally, 70% of youth in the juvenile justice system have a diagnosable mental health condition, and 90% have experienced at least one traumatic event (Teplin et al., 2013; Abram et al., 2004). Once released, these youth encounter systemic barriers such as a lack of school reentry support, fragmented service systems, and stigma, all of which reduce their likelihood of academic success and increase their risk of recidivism. Effective reentry programs that integrate care coordination, mental health services, and school support are vital for improving long-term outcomes for this population (Leone & Weinberg, 2010). Immigrant youth exiting detention often face compounded challenges due to trauma histories, disrupted education, limited access to linguistically and culturally appropriate care, and legal uncertainty. As a result, youth often face delays in school registration, encounter language and cultural barriers, and struggle with academic engagement (Gelatt & Batalova, 2024).

Students Recovering from Trauma

Children and adolescents who experience traumatic injuries, such as gun violence, car accidents, or abuse, often face complex emotional and physical recovery processes that impact their ability to return to school. Trauma is linked to increased risks for post-traumatic stress disorder (PTSD), depression, and academic difficulties (SAMHSA, 2014). These students are often discharged from hospitals with limited school reintegration planning or follow-up care. Without school-based care coordination, these students risk falling behind academically or disengaging entirely from school (Garbarino et al., 1992).

Stage of Development

Launched in 2019, ThriveKids is in its expansion and integration phase. With sustained investment and evolving partnerships, the program has transitioned from an early implementation stage to a more established model, although certain components, such as JJIC, are still in development.

Context

ThriveKids operates in a complex and evolving context shaped by social inequities, racial disparities, and policy-driven reform efforts in youth mental health, juvenile justice, and school reentry. In both Orleans and Jefferson Parishes, high percentages of students are low-income and students of color, and growing numbers come from immigrant backgrounds, particularly from Latin American countries. ThriveKids is committed to culturally responsive and linguistically accessible care. Recognizing the unique challenges faced by immigrant youth exiting detention, the program has hired bilingual staff, implemented a language line for staff who aren't bilingual, and is developing a partnership-driven approach at the Juvenile Justice Intervention Center

(JJIC) to build bridges between ThriveKids, families, and immigrant-serving community organizations.

At the policy level, ThriveKids' work is bolstered by increasing public and philanthropic attention to school-based mental health, telehealth infrastructure, and reentry to school programs for justice-involved youth. However, it also exists within an underfunded and fragmented service ecosystem where program success often depends on strong local partnerships, sustainable funding, and community trust.

Activities

Key program activities include school-based therapy sessions with licensed mental health professionals; care coordination, including specialist referrals, transportation and telehealth setup, and school health integration; Juvenile Justice Intervention Center (JJIC) and trauma recovery reentry support helping youth transition back into schools with ongoing mental and physical health support; outpatient therapy services; community education workshops; and professional development sessions for school personnel and community partners.

Stakeholders

Key stakeholders in this program are the students and families as direct recipients of services; school administrators as collaborators in student support, JJIC and trauma unit staff as partners in care transitions; ThriveKids staff and management as program management and implementers; and community leaders and policymakers such as the City of New Orleans, Agenda for Children and funders as financial backers, policy stakeholders, and advocates for youth.

The students' goals for program success are likely to include accessing care that helps them feel safe, supported, and ready to succeed academically and emotionally. And, likely to

look for evidence that services improve well-being, coping skills, academic performance, and reduce stigma or fear around mental health. The families' goals for program success are likely to include reliable, respectful care coordination and mental health support for their kids that is available in their preferred language. And likely to look for feedback that shows families feel involved, respected, and that services are accessible, culturally responsive, and effective. School administrators' goals for the program's success are likely to see evidence of improved student attendance, behavior, and academic engagement. And, might be looking for data demonstrating this evidence from the evaluation.

ThriveKids staff and management's goals for program success likely include delivering high-quality, coordinated services across settings, and they likely want insights into what is working, where coordination can be improved, and how staff can better meet the student and family needs. JJIC and trauma unit staff's goal for program success are likely successful reentry or youth into school or community-based services, and they may want to see metrics showing follow-through on referrals, improved school reintegration, and collaboration between systems. Community leaders, policymakers, and funders' goals for program success likely include inclusive and equitable systems for youth, community voice in service delivery, evidence that local investment in school-based wellness leads to filling systemic gaps and educational gains. They may also look for findings in the evaluation that reflect the impact of services and feedback to justify continued or expanded funding and partnerships.

Theory of Change

Problem: Students in Louisiana, particularly low-income, students of color, immigrant youth, and those exiting detention or recovering from trauma, face unmet mental health needs, fragmented care, and educational disengagement.

ThriveKids delivers school-based therapy, outpatient counseling, and care coordination (including reentry support for justice-involved and injured youth)

So That students can access linguistically and culturally appropriate mental health services and receive support navigating health and education systems [Short-term Outcome]

So That they and their families follow through on referrals, attend appointments, improve school attendance, and experience fewer disciplinary incidents [Intermediate Outcome]

So That students show improved emotional well-being and academic performance [Long-term Outcome]

So That all students, especially the most marginalized, are supported in thriving academically, emotionally, and socially, advancing health equity across communities [Vision/Goal]

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