

Meadows Mental Health Policy Institute

Multisystemic Therapy for Texas Youth – April 2026

Multisystemic Therapy (MST) is a **proven family- and community-based treatment for at-risk youth (ages 12–17)** 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

Why Should Texas Invest in MST?

- MST is **one of only three proven programs**³ that addresses family functioning and association with deviant peers, key risk factors for **reducing violence, other antisocial behaviors**, and **juvenile justice involvement**.⁴
- 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.⁵
- For an upper range of cost effectiveness, an evaluation 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**.⁶

Who Delivers MST?

- MST is delivered by **specially trained masters-level or bachelors-level staff**, including Qualified Mental Health Professionals (QMHPs).
- Supervisors are highly trained masters- or doctorate-level 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**.⁷
- 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 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.⁸
- 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.
- Structured clinical supervision and quality assurance processes are integral to the model.⁹

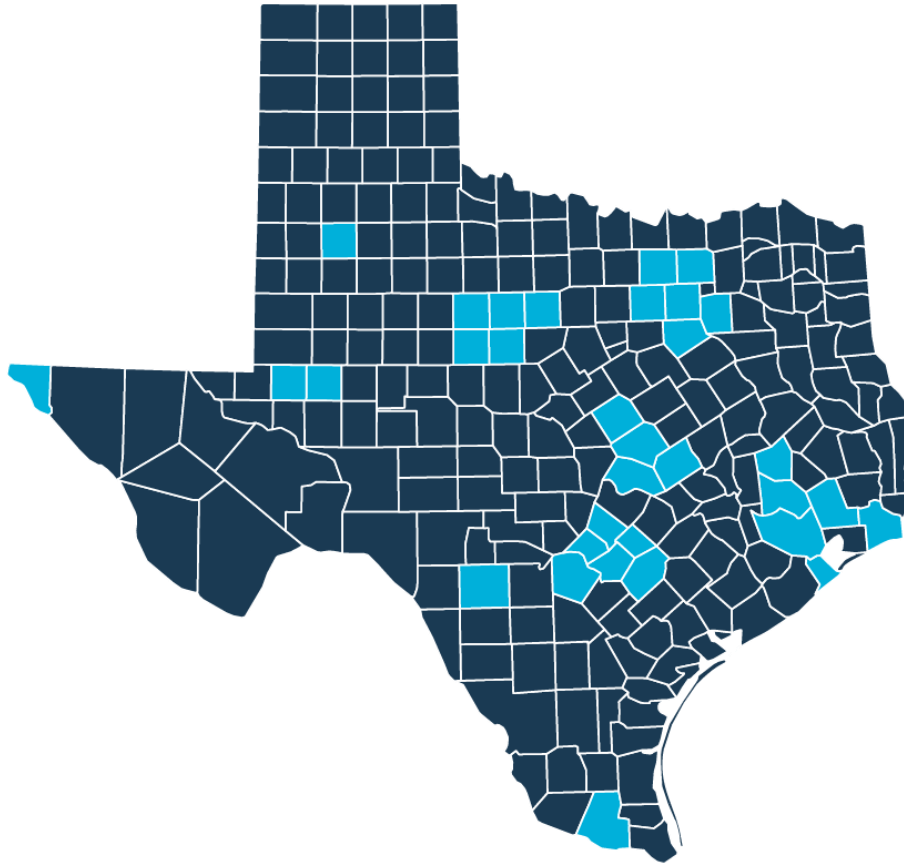
What is the Estimated Need in Texas?

- 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?

- In 2021, the 87th Texas Legislature appropriated **\$2 million** to the Texas Juvenile Justice Department (TJJD) to establish MST teams in 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) for **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, including **\$21 million** to HHSC for **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)
- In 2025, the 89th Texas Legislature continued funding for the 24 existing MST teams and appropriated **\$1.2 million** to TJJD to establish an MST team in Williamson County to treat youth and adolescents in the juvenile justice system and to prevent youth and adolescents from entering the juvenile justice and child welfare systems.

These efforts bring total MST capacity to 25 teams, statewide, or 18% of the estimated need:



What are the Outcomes in Texas?

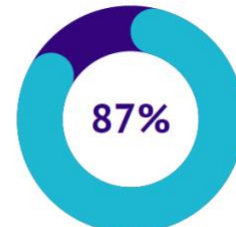
- For the 22 HHSC-funded teams, the following data reflects the outcomes for the **164 youth discharged from treatment** during the second quarter of FY 2026:



Youth Living at Home



Youth In School/ Working



Youth with No New Arrests

150 youths with opportunity for full course of treatment

Number of youth currently in treatment and have the opportunity to complete MST

122 days in Treatment (Average)

Average Number of days youths received treatment (Target: 120 days)

0.8 TAM-R score

MST Model Therapist Adherence Measure-R Score (Target: 0.61)

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.

² MST Services. (2022). *MST research at a glance*. <https://info.mstservices.com/researchataglance>

³ 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>

⁴ Henggeler, S.W., & Schoenwald, S.K. (2011).

⁵ 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/>

⁶ 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.

⁷ 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>

⁸ MST Services. (n.d.). *What makes MST such an effective intervention*.

⁹ 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