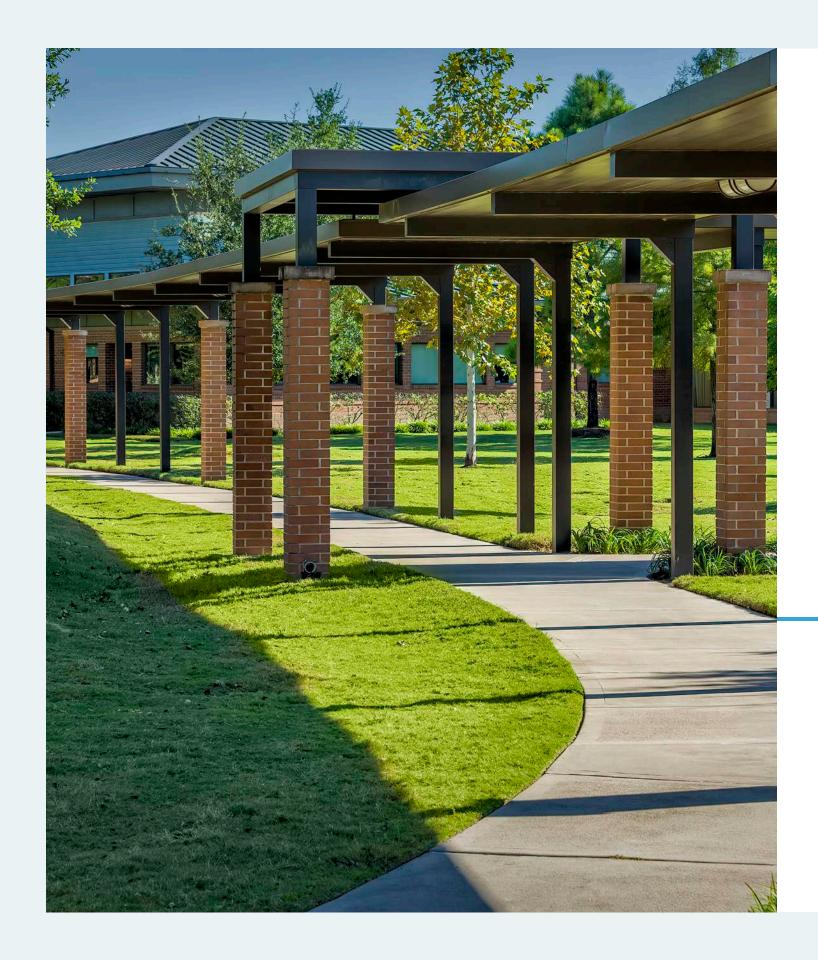
ANNUAL REPORT ON GIVING
JULY I, 2020 - JUNE 30, 2021

HOPE begins I



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HOPE begins I



hope is an adventure,
a going forward,
a confident search for
a rewarding life.

- KARLA MENNINGER ME

While the past year had its share of twists and turns for us all, we are grateful to the many donors and friends who kept The Menninger Clinic's mission moving ahead. Because of you, we continue to help the growing number of people who are experiencing anxiety, depression, addiction and other complex mental health challenges. *Because of you*,

HOPE begins HERE.

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The Menninger Clinic strives to create a healthy world by excelling in the art and science of mental health care.

Dear FRIENDS,

During the past year, I continued to be inspired by the extraordinary power of hope and our patients' capacity for healing at The Menninger Clinic.

The path to Menninger is never an easy one. Often, patients who arrive at The Clinic are struggling with long-standing mental health disorders, or have faced life-altering traumas and loss. The pandemic has only intensified these issues at Menninger and around the world. Today, record numbers of people are reporting symptoms of anxiety, depression and substance use disorder.

As a national leader in mental health care, Menninger is committed to rising to the challenge before us. In this Annual Report on Giving, you will read about some of the ways we are taking on urgent problems in mental health, like addiction, suicide and clinician shortages. I am especially proud of our work to expand services that meet patients where they are in their mental health journey — and where they need us to be — whether in their home, online or in person at The Clinic.

None of this would be possible without our donors, who are with us every step of the way, helping to change the conversation around mental illness and investing in a more hopeful future for mental health. On behalf of all of us at Menninger, thank you.

Sincerely,

Armando E. Colombo

PRESIDENT AND CHIEF EXECUTIVE OFFICER

YEAR IN REVIEW

How We Made an Impact on Mental Health

NAMED A TOP 10

"Best Hospital" in psychiatry

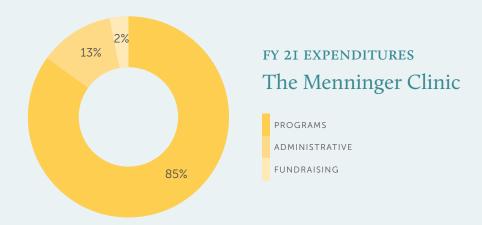
FOR 31ST CONSECUTIVE YEAR.

More than \$5.2 million

IN CHARITABLE CONTRIBUTIONS TO THE MENNINGER CLINIC FOUNDATION TO SUPPORT MENNINGER'S MISSION.

Every dollar

DONATED HELPED TO FURTHER THE CLINIC'S PROGRAMS AND SERVICES.





Outpatient Services Center Breaks Ground

In late 2020, Menninger broke ground on a new 33,000-square-foot Outpatient Services Center. The center, which is made possible by \$14 million in donor support, will increase capacity for outpatient care, including virtual visits. Since the pandemic's onset, telehealth visits have more than quadrupled. Pictured from left are: Ronny Cuenod, board chair of The Menninger Clinic; Armando Colombo, president and chief executive officer; Judge Eric Rosen, longtime friend of Menninger; and Jeff Paine, board chair of The Menninger Clinic Foundation.

PATIENT CARE

812 Inpatient admissions

14,458 Outpatient visits

10,506 Telehealth visits

RESEARCH

- I4 Peer-reviewed articles published
- **I2** National presentations
- Studies underway with partners including our affiliate Baylor College of Medicine, Texas Tech University, Stanford University and others



Researcher Receives Innovation Grant for Suicide Prevention

Menninger Research Scientist Hyuntaek Oh, PhD, was awarded a prestigious Young Investigator Innovation Grant from the American Foundation for Suicide Prevention. Dr. Oh, who is an assistant professor with Baylor College of Medicine, is investigating alterations in brain connectivity in suicidal patients who use opioids. Using neuroimaging, his study aims to characterize the link between opioid use disorder and suicide risk. He also will test whether transcranial magnetic stimulation (TMS) treatment reduces opioid craving and suicidal thoughts.

EDUCATION & TRAINING

- 77 Trainees across a range of disciplines, from psychiatry and psychology to social work, nursing and research
- **I,592** Participants in continuing education for mental health professionals
 - I3 Continuing education virtual presentations

TRAINING BY THE NUMBERS

TRAINEES	2019	2020	2021	THREE-YEAR TOTAL
General Psychiatry Residents (PGY2, PGY4)	18	20	28	66
Child Psychiatry Fellows	6	6	13	25
Neurology and Neuropsychiatry Fellows	О	О	I	I
Undergraduate Medical Students	II	7	9	27
Psychology Post-Doctoral Fellows	2	2	2	6
Psychology PhD Interns	I	I	I	3
Neuropsychology Post-Doctoral Fellows	О	0	I	I
Research Fellows	I	I	I	3
Research Interns	3	2	2	7
Post-Graduate Social Work Fellows	3	4	2	9
Master of Social Work Interns	4	5	4	13
Master of Science in Nursing Students	I	2	I	4
Psychiatric Nurse Residents	5	3	2	10
Undergraduate Nursing Students*	90	62	0	152
Pharmacy Post-Doctoral Residents	I	I	I	3
Pharmacy Doctoral Candidates	6	7	5	18
Pastoral Counseling Interns	0	2	3	5
Addictions Intern	I	I	I	3
Recreational Therapy Interns	Ι	I	I	3
TOTAL TRAINEES	154	127	78	359

^{*} No rotations in 2021 due to COVID-19.

Menninger staff celebrate The Clinic's new partnership with the Pro Football Hall of Fame to provide mental health services to retired NFL football players.



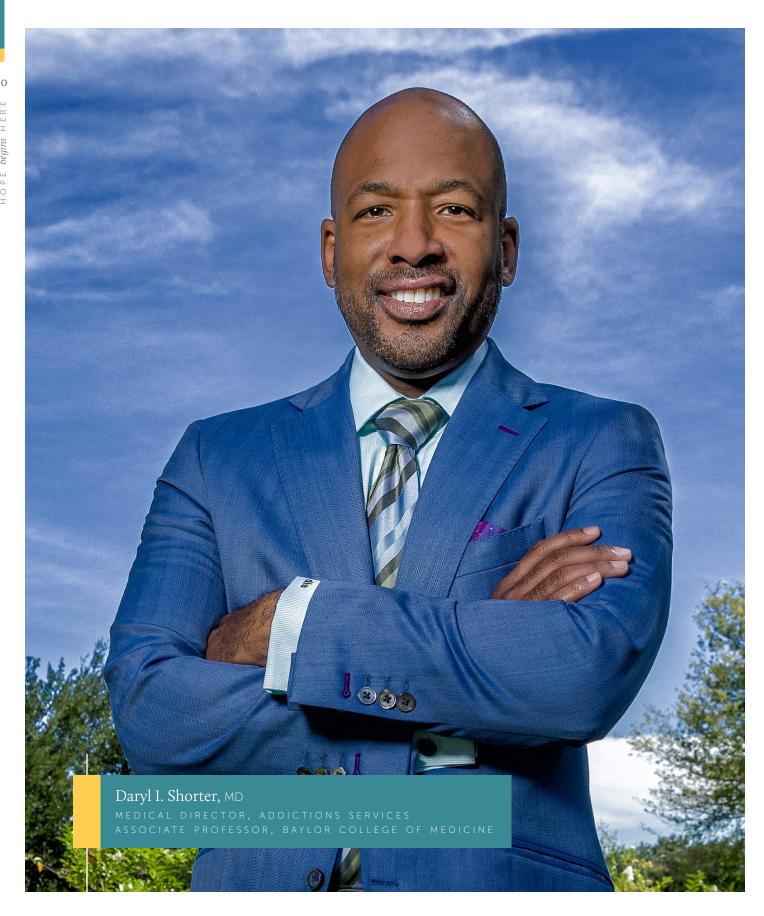
OUTREACE

- 15,559 Local adolescents reached with schoolbased social/emotional education and mental health intervention
 - **9I** Virtual presentations to the community about mental health
 - **\$3** Million in charity care and patient assistance provided



Donors Give Access to Life-Saving Care

With the support of donors, Andrés Treviño was one of 17 adolescents who received life-saving inpatient treatment at no cost to his family. Because his school participated in The Clinic's BridgeUp program, which facilitates mental health intervention in underserved schools, Andrés was quickly connected to the care he needed after it was discovered he was contemplating suicide. "I'm grateful to Menninger and BridgeUp for helping us when we didn't have anywhere else to go," says his mother Gisela.



Navigating ADDICTION DURING THE PANDEMIC

New program helps people, near and far, to maintain sobriety

The COVID-19
pandemic triggered
a troubling uptick
in drinking and drug
use among Americans.

According to the Centers for Disease Control and Prevention, in June 2020, 13% of people in the United States reported starting or increasing substance use as a way of dealing with stress or emotions related to COVID-19. Last year also saw heavy drinking among women increase by 41% and a record-setting rise in drug overdose deaths. As the pandemic drags on, what started as a temporary coping mechanism has turned into addiction for some.

"The pandemic has affected everyone, but those struggling with substance use disorders have faced some remarkable challenges," explains Daryl Shorter, MD, medical director of Addictions Services at Menninger and associate professor of psychiatry at Baylor College of Medicine. "Because of the increased stress, isolation and real inability to connect with others, we have seen people escalate their substance use or develop substance use disorders, as well as other mental health conditions. We are also seeing people with increased depression, anxiety and suicidal ideation."

Throughout the pandemic, people with substance use disorders have found the hope and healing they need at The Menninger Clinic. About 65% of Menninger patients have an addiction — to alcohol and drugs, or behaviors like gambling, sex and using the internet — which is treated simultaneously

with other psychiatric conditions. The Clinic's philosophy is that recovery from both disorders is more likely if they are treated at the same time.

While in the hospital, patients are cared for by Menninger's skilled and compassionate addictions treatment team, including master's-prepared addictions counselors and peer recovery specialists who have battled addiction themselves. From admission to discharge, patients are supported every step of the way. But, inpatient treatment for addiction is just the beginning of the recovery process. A smooth transition from hospital to home is critical.

A RISKY TRANSITION

Studies show that individuals in recovery are most vulnerable to relapse, and to drink or take drugs, during the first 90 days after discharge from a treatment facility. The transition from the supportive environment of a psychiatric hospital to going it on their own can come as a shock.

That's why, in March, Menninger launched Navigator, an innovative new program designed to help patients maintain their recovery from drugs or alcohol once they have discharged and returned home. For a subset of patients, transition to a residential treatment program after discharge may provide more support than they need, while an intensive outpatient program (IOP) may provide too little. Navigator was developed to meet that gap in care.

Studies show that individuals in *recovery* are most vulnerable to relapse during the first 90 days after discharge from a treatment facility.

or other local recovery resources, drug and alcohol monitoring with random sobriety testing, access to the team seven days a week and monthly reports outlining their progress.

CROSS-COUNTRY ACCESS

Navigator is offered via telephone, secure messaging and teleconference, giving patients access to their recovery team no matter where they live. Navigator's accessibility has been helpful during the pandemic when travel has been more difficult. The program is an attractive treatment option for busy working professionals who live outside of Houston.

Patients in the program receive wrap-around support, To ensure accountability, Navigator participants including up to four hours of contact with their receive a SoberLink alcohol monitoring device to use recovery team per week, assistance finding a sponsor at home. The device — essentially a breathalyzer — is



Daryl Shorter, MD, explains how to use e SoberLink alcohol monitoring device.

preprogrammed to notify the person at scheduled intervals that they need to complete a test within a certain amount of time. Participants also are required to complete random drug tests at a lab facility near them. Their case manager will immediately notify family members and outpatient providers if there are concerns about a recurrence of substance use.

"Navigator helps people to rebuild the trust that has been negatively impacted by their substance use. These services improve relationships within families, and in some cases, with employers," Shorter says.

Accountability starts from the moment patients walk out of the hospital. If they're at the airport contemplating a pre-flight drink, they can reach out to the Navigator team for help saying no. Back at home, they receive daily calls or texts to keep them on track. The program customizes check-ins according to each person's needs and lifestyle.

While the service is still relatively new, Navigator is already proving to be an effective way to help patients sustain their recovery. Shorter would like to expand the program to serve even more people struggling with addiction throughout the United States.

"With Navigator, you have in-the-moment data about substance use. You can offer assistance, support or a specific treatment intervention much more quickly, and you can do it using technology so that the geographical barriers that once existed are removed," says Shorter.

DONORS MAKE A DIFFERENCE

Innovative programs like Navigator are needed to help fill wide gaps in care for people living with addiction. Only about 10% of those with a substance use disorder ever receive treatment.

With help from our generous community of donors, Menninger is working to strengthen the continuum of evidence-based addictions care. A fundraising campaign is underway to establish The Center for Addiction Medicine and Recovery on The Clinic's campus. The

project includes the build-out of 5,000-square-feet of specialized therapy suites, group meeting space and psychopharmacology lab on the second floor of the upcoming Outpatient Services Center.

The center will provide care and recovery services for adolescents and adults with addiction and substance use issues. It will also serve as a training site for addiction professionals, a hub for research with academic affiliate Baylor College of Medicine, and a collaborative beacon for experts in the addiction and behavioral health fields.

"I envision The Center for Addiction Medicine and Recovery as a place with opportunities for projects and research that lead to novel treatments for addictive disorders of all kinds," says Shorter. "I envision The Center for Addiction Medicine and Recovery as a place with opportunities for projects and research that lead to novel treatments for addictive disorders of all kinds,"

Daryl I. Shorter, MD Medical Director, Addictions Services



Construction of the Outpatient Services Center is underway and will be complete by July 2022.

Menninger plans to establish The Center for Addiction Medicine and Recovery on the second floor.

STORIES OF HOPE



"We have the opportunity to help people reclaim their lives from the control of substance use disorders. And we'll do that with compassion and bringing the right amount of hope."

Gordon Meltzer, RSPS, MHPS, QPSS Peer recovery specialist and former Menninger patient

A doctor shares how treatment for addiction at Menninger saved his relationships and his life.

I was an extremely busy, successful primary care physician. From the outside, my life looked to be in order. On the inside, and within my family, it was in shambles.

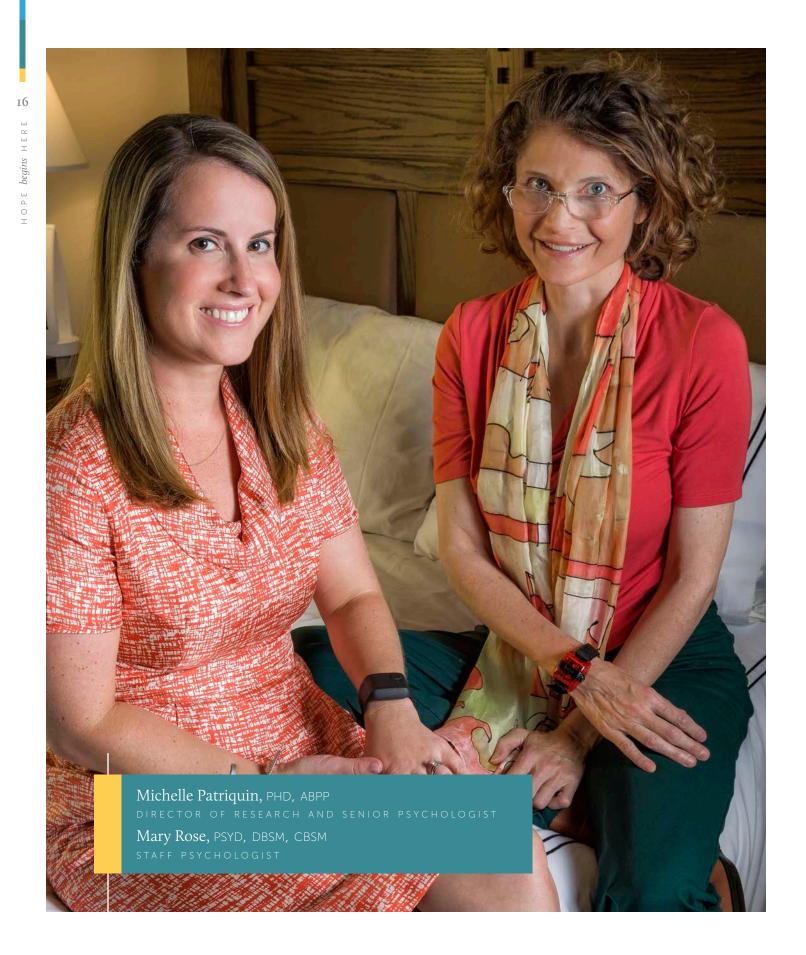
My alcoholism had destroyed my marriage and relationship with my daughters, and it was obvious my career in medicine was next. I had hit my personal bottom. My family soon gave me an ultimatum: get help or get out!

For the first time, I became willing to seek real help at Menninger. When the door closed behind me on the unit, I felt the biggest sense of relief I'd ever felt in my life. I finally could push pause on the endless daily stressors and resentments in my life and avoid the use of alcohol to numb them.

Menninger kept me busy with group therapy sessions, one-on-one counseling, chaplain services, diagnostic testing, medical care, nutritional instruction and physical conditioning. The team worked together in a seamless fashion to address all areas of my life — greatly impressing this seasoned primary care clinician!

I also began sessions with Gordon Meltzer, peer recovery specialist, to talk about 12-step work and its role in recovery. My sessions with Gordon were the turning point that changed the course of my life. His compassion, honesty, wisdom and love filled the room and my heart. His counsel started me on the daily road to recovery I'm blessed to be on today.

My stay at Menninger saved my marriage, my family and my career. Today my relationships are restored, and my medical practice is reaching heights I never thought possible. While we know there is no cure for alcoholism, there is treatment that works if we seek it out. Menninger not only changed the course of my life but saved it. Gratitude fills my heart as I write this.



THE Life-Saving POWER OF SLEEP

New efforts to improve patients' sleep may help reduce the risk of suicide

Sleep is something we often take for granted. But the time we spend snoozing has a tremendous impact on both our physical and mental health.

We all have experienced what happens when we don't get enough shuteye: we are more irritable, have problems focusing, and in general, just don't feel 100 percent. Unfortunately, the side effects of poor sleep go far beyond feeling cranky or tired.

From our own research, as well as well-established scientific literature, we know that subpar sleep also increases suicide risk. On the flip side, getting better sleep, lowers risk.

For that reason, Menninger researchers and clinicians are pioneering new ways to help patients slumber more soundly. Last year, Menninger launched a one-of-a-kind Sleep Medicine Service located on The Clinic's campus. Also underway are two landmark studies aimed at improving sleep and reducing the risk of suicide.

"The goal of our research is to move forward clinical care," explains Michelle Patriquin, PhD, ABPP, Menninger's director of research and an associate professor at Baylor College of Medicine. "And now that we have a clinical service providing evidence-based treatment for sleep, it is just outstanding. Translating our scientific findings into direct clinical care is a huge achievement."

THE LINK BETWEEN SUICIDE AND SLEEP

Sleep is the body's way of resetting and healing itself. While we sleep, the brain forms new pathways to help us learn and remember. Insufficient sleep chips away at a person's executive function — the ability to make decisions, solve problems and control emotions and behavior.

"Those executive function skills mediate the relationship between sleep disturbance and psychiatric issues. So, more sleep disturbance equals more impulsivity and depletion of executive function, and more suicide risk," BETTER SLEEP Patriquin says.

It's not surprising, then, that a disproportionate number of suicides happen between 2-4 a.m. According to Mary Rose, PsyD, DBSM, CBSM, a staff psychologist with the Sleep Medicine Service and associate professor at Baylor, some patients report having serious suicidal thoughts or making unsuccessful suicide attempts in the early morning hours, only to fall asleep exhausted and awake later with a fresh perspective.

"When people say, 'I'm going to sleep on it,' that's a good decision, because we know if we are sleep deprived, we are not going to make good decisions," Rose says.

The need for a breakthrough in suicide prevention is greater than ever. Over the past 30 years, suicide rates have risen 30%, making it the 10th leading cause of death in the United States. In 2019, more than 47,500 people died by suicide, 1.4 million attempted suicide and 3.5 million planned a suicide attempt.

While the issues underlying mental illness and suicide risk often are complex and take time to address, sleep offers a promising therapeutic target because interventions rapidly improve a patient's mood and mental state.

"When we focus on sleep, it cuts down on the agitation and drops some of the rawness and bad feeling. Then patients can engage more," Patriquin says. "If you have sleep disturbance causing a poor psychological state, you can't really get at the other issues. It's almost a roadblock."

FOR MENNINGER PATIENTS

Conveniently located on Menninger's campus, the Sleep Medicine Service helps adults and adolescents improve their sleep, maximizing the benefit of other mental health treatment. Together, a psychiatrist board certified

"When we focus on sleep, it cuts down on the agitation and drops some of the rawness and bad feeling. Then patients can engage more."

Michelle Patriquin, PHD, ABPP



Patriguin and Rose collaborate on ways to improve patients' sleep.

in sleep medicine, and a clinical psychologist board certified in behavioral sleep medicine, evaluate how sleep may be affecting behavior and mood. They also diagnose and treat common sleep issues such as sleep apnea, insomnia, narcolepsy and restless leg syndrome.

Medication management of sleep disorders is offered, along with CPAP/BiPAP management. Other evidencedbased treatments include cognitive behavioral therapy for insomnia (CBTI) and image rehearsal training to reduce nightmares by visualizing more pleasant dreams.

"Ideally, we reinforce that the bedroom is a place to sleep — not a place to worry," Rose says. "We help to

identify dysfunctional thoughts, feelings and behaviors, to challenge them and to replace them with more adaptive ones."

INTERRUPTING THE "SAFETY-SLEEP-SUICIDE SPIRAL"

The highest risk period for suicide is widely recognized as the first 90 days after discharge from inpatient psychiatric care, making patients' hospital stay an important time to improve sleep and reduce suicide risk. However, Patriquin believes that common hospital safety procedures are disrupting patients' sleep, contributing to the risk of suicide after discharge.

"We call it the Safety-Sleep-Suicide Spiral," Patriquin says. "Sleep disturbance has a snowball effect. If you don't get good sleep one night, and then another night, your mental health will keep going down, and that can increase the risk of suicide. Unfortunately, our only safety method — and the only method for hospitals globally — is to have visual checks on a patient every 15–30 minutes. But this disturbs sleep. New methods are needed to interrupt this spiral."

Patriquin and her team have published research on their "Safety-Sleep-Suicide Spiral" theory in the Journal of Affective Disorders and the Journal of Psychiatric Research. With support from Menninger's donors, the researchers are now developing a new application of wearable technology, called PsychVitals, which aims to reduce disrupted sleep by providing an alternative to visual checks. Patients wear a wristwatch-like device while sleeping that streams real-time physiological and sleep data via Bluetooth to a centralized nursing station.



The goal is for PsychVitals to allow nurses to monitor patients without waking them, protecting both the patients' safety and mental health. The study also is building a real-time algorithm to predict suicide risk using wearable-based metrics, such as heart rate, heart rate variability, sleep quality and physical activity.

The hope is that this proof-of-concept study will *pave the way* for a larger study focused on bringing the technology to inpatient and outpatient psychiatric settings.

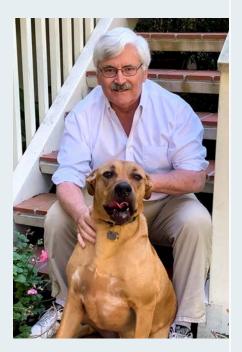
Next steps include recruiting 40 patients for the study, which will offer insight on the potential of the technology to replace visual checks and determine how well the metrics predict fluctuations in suicide risk. The hope is that this proof-of-concept study will pave the way for a larger study focused on bringing the technology to inpatient and outpatient psychiatric settings.

Patriquin intends to integrate the PsychVitals study with The Clinic's ongoing development of an inpatient protocol for cognitive behavioral therapy for insomnia (CBTI-IP), which also has been made possible by Menninger's donors. Preliminary data from the CBTI-IP study show that improvements in patients' sleep are associated with a reduced risk of suicide.

Together, CBTI-IP and PsychVitals have the potential to improve sleep and save lives at psychiatric hospitals across the country, Patriquin says.

"I am very excited because our data show we are making significant progress in reducing the shocking risk of post-discharge suicide. It has to be changed. That's our goal."

STORIES OF HOPE



"... somebody has to raise their hand and say it's okay to have depression."

Kent Halkett
Former Menninger patient

Halkett, now semi-retired, lives in Nashville. His personal account of his mental health journey was the cover story of the January/February 2021 issue of the Tennessee Bar Journal.

After surviving a suicide attempt, Kent Halkett shines a light on mental illness in the legal field and advocates for change.

In the mid-1990s, as a partner in an international BigLaw firm, I was diagnosed with depression. Less than a year later, with therapy and medication, I thought myself to be cured. However, in 2013, my depression came back with a vengeance. I tried to kill myself on a Sunday night, and by Tuesday morning, I was on my way to Menninger from Los Angeles.

For many people with a mood disorder, like myself, the biggest hurdle is the intense feeling of shame. But after breathing, eating and sleeping with 15 highly accomplished individuals for nearly seven weeks while I was in Menninger's Professionals program, I recognized that I wasn't alone. It was obvious that my depression wasn't something to be ashamed of.

Everyone in the legal field knows that law is a stressful profession. Most accept that stress comes with the territory and try to buck up. I was quite successful in hiding my mood disorder for a long time. In a recent survey, almost 18% of professionals in large firms reported having contemplated suicide, which is a shocking number. Attorneys are supposed to be problem solvers, and they have a hard time wrapping their minds around mental illness. However, somebody has to raise their hand and say it's okay to have depression.

The bottom line is that a mood disorder is a medical condition no different than diabetes. With the right treatment and support, you can be as healthy and contribute to society as much as anybody else. After Menninger, I've reached the place mentally where I've been very healthy for years. That's why this year I decided to share my mental health journey with the legal profession. It is a message of *hope*.

Jasmine Gaw and Claire Wisdom

Taking on THE TALENT GAP

Grateful Menninger patient invests in training the next generation of counselors

Derry Seldin arrived at Menninger's former Topeka, Kansas, campus in 1987 as a troubled young adult, burdened by racing thoughts and rollercoaster moods. Over the next 10 months of his stay, he thrived in The Clinic's nurturing environment and began to envision a future for himself.

"Slowly, but surely, I was getting better," Seldin says. "I was very, very lucky to get the help that I needed — it saved my life." $\,$

While at Menninger, Seldin struck up a close relationship with John Hart, one of the first licensed clinical professional counselors (LCPC) in the state of Kansas. The two met weekly for therapy. Seldin felt at ease in Hart's company and made significant progress. "It was just what I needed," he says. When it was time to leave Menninger, Hart paved the way for Seldin to work at the local Heritage House bed-and-breakfast, a historic farmhouse where The Menninger Clinic originally opened in 1925.

That first job later led to Seldin's career in the hotel business, a move to St. Louis and a fateful meeting with his future wife, Wendy. The couple will celebrate their 27th wedding anniversary next year.

Today, Seldin has a full and satisfying life. But he doubts he would be on the same path if not for the care and compassion he experienced at Menninger. Alarmingly, counselors like Hart are in short supply. About 37% of the U.S. population, or 122 million Americans, live in areas experiencing a shortage of mental health professionals, according to a USAFacts study published in June 2021.



ICTURED FROM LEFT: Angela Koreth, MS, LPC-Supervisor, Jasmine Gaw, LPC-Associate, Claire Wisdom, LPC-Associate and Robyn Dotson Martin, MS, LPC-Supervisor.

To address the growing workforce crisis, Derry and outpatient and community-based programs to Wendy recently endowed a training fellowship at Menninger in Hart's honor, helping to cultivate new generations of mental health providers known as licensed professional counselors (LPC) in Texas. The new John Hart, PhD, LPC-S Licensed Professional Counselor Fellowship enables those with a master's degree in psychology, counseling or a related field to earn licensure as counselors. Called LPC-Associates until they are fully licensed, the fellows are trained to work with individuals, families and groups.

"It's good for the community, it's good for getting experienced clinicians into the mental health community, and it helps by giving fellows the excellent training you can only get at Menninger," says Hart of the fellowship. The long-time Menninger psychologist, renowned for his expertise in anxiety and obsessive-compulsive disorder, is now in private practice and a consultant for Menninger. "I am very thankful and appreciative of Derry's gift. It is an honor to have the fellowship in my name."

A UNIQUE PROGRAM

The LPC fellowship joins Menninger's rigorous training programs in psychiatric nursing, psychology, psychiatry and social work. Throughout the 18-month training program, fellows rotate among Menninger's inpatient,

experience the full continuum of care. They also participate as members of interprofessional teams, participate in educational seminars and attend Grand Rounds held by Baylor College of Medicine's Menninger Department of Psychiatry and Behavioral Sciences.

"The educational component of Menninger, and the philosophy of the institution to educate, is really what makes this a unique program," says Robyn Dotson Martin, MS, LPC-S, one of two supervisors for the fellowship. "Fellows are not just earning hours; we also are teaching them the principles of education and continued learning, which makes some of the best clinicians."

The fellowship will help fill the growing gap in mental health providers across the country, says co-supervisor Angela Koreth, MS, LPC-S. "More schools are offering counseling degrees because the field is naturally growing," she says. "The pandemic has opened up a lot of people to getting mental health services, but there is a shortage of well-trained providers...or there are long waiting periods to see a clinician."

MEET THE TRAINEES

Out of 20 applicants for the fellowship, two made the final cut: Claire Wisdom and Jasmine Gaw.



"I am very *thankful* and appreciative of Derry's gift. It is an honor to have the fellowship in my name."

John Hart, PHD, LPC-S

After college, Wisdom found success working in not-forprofit fundraising, but discovered her life's purpose while volunteering with a high school ministry. She quickly shifted gears and enrolled in the Houston Graduate School of Theology's counseling degree program. On a tour of Menninger, she was taken by The Clinic's peaceful and collegial environment and seized the opportunity to work as a mental health associate on the



Derry and Wendy Seldin

Comprehensive Psychiatric Assessment Service (CPAS) unit. Wisdom was thrilled to continue on at Menninger as an LPC-Associate and Hart fellow.

"It's an amazing privilege to be in a program that prioritizes learning," Wisdom says.

Gaw was inspired to pursue a career in mental health after a close friend died by suicide. Wanting to be a support system for people struggling with mental illness, she enrolled in the psychology degree program at the University of Houston and, after graduating, applied to the LPC fellowship program at Menninger. Since being accepted, Gaw has happily immersed herself in The Clinic's close-knit and supportive community.

"I like how much Menninger cares, not only about the patients, but also about the staff as well. I love the teamwork — everyone is involved. I love that education is taken very seriously. It's an amazing training experience," Gaw says.

HOPE FOR THE FUTURE

Wisdom and Gaw exemplify the sort of talented and passionate trainees Seldin hopes to support with his generous endowment of the Hart LPC Fellowship. He says the decision to give came easily.

"I was inspired to help because Menninger helped me."

Robyn Dotson Martin, MS, LPC-S

Claire Wisdom shares a day in the life of a Menninger LPC-Associate



8:30 AM I hop on my computer for the Adolescent Treatment Program (ATP) virtual morning meeting. It's good to know what's happening on the unit, so I can be prepared for anything that might happen in the therapy groups I help lead with Samer, one of the social workers.



10:30 AM I have time for a short break, so I take a walk around the campus with another Menninger trainee, Hannah. We bring our coffee and talk about how we are feeling one month into training — a little overwhelmed, but we're settling in!



12 PM One of my favorite parts of the fellowship is the didactics courses. Today we continue a series on the history and philosophy of treatment at Menninger. I worked on one of the units as a mental health associate for a year before starting the Hart LPC Fellowship, so I thought I knew everything there was to learn -1 was so wrong.



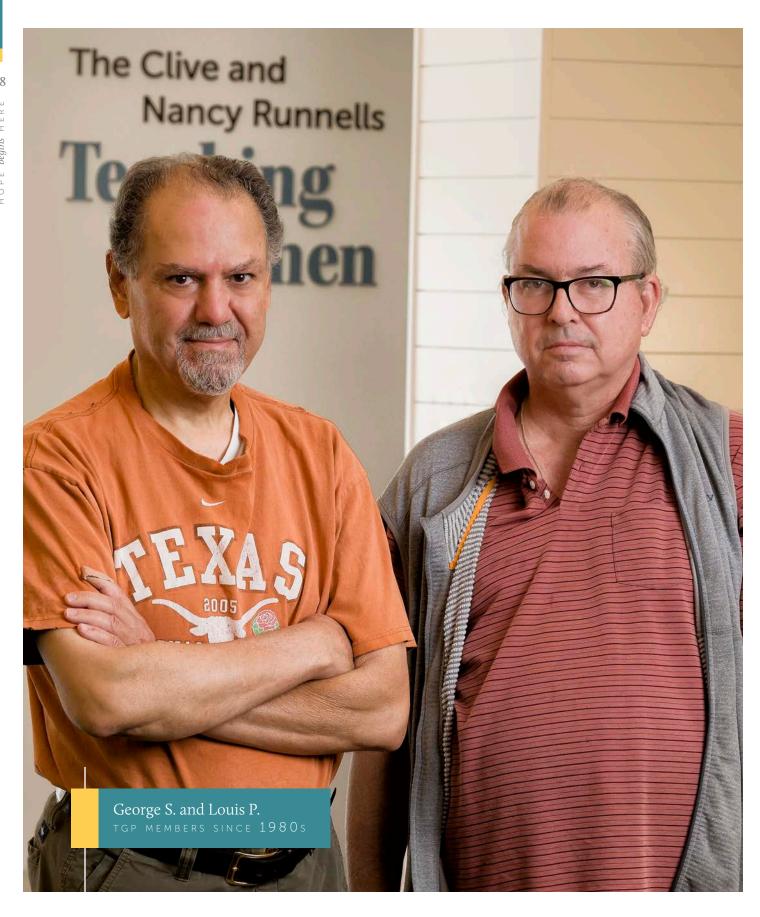
1PM | I join a diagnostic conference for an outpatient assessment patient | met with earlier this week. I've really enjoyed the interdisciplinary approach here at Menninger. I'm always eager to hear other team members' perspectives and learn from their expertise.



2 PM I head to ATP for an individual therapy session with a patient. This patient will most likely be discharging soon, and I'm glad we have a few more sessions before they leave.

Staff social worker

4PM Last item on today's agenda is to lead the self-esteem and resiliency group with Samer. Leading groups on ATP is my favorite way to end the day. Kids always let you know what they are thinking, so there is never a dull moment!



RENOVATED AND Reunited

The Gathering Place reopens to members

In September, we welcomed back members of The Gathering Place to their newly updated psychosocial clubhouse.

It was a long-anticipated event. Members and staff were thrilled to be together again more than a year and a half after The Gathering Place (TGP) closed due to the pandemic and renovations.

Donors' generosity made this joyous moment possible. The "Building Better Futures" capital campaign, which was completed in summer 2020, raised more than \$900,000 to renovate The Gathering Place. Some of the improvements include a new teaching kitchen, larger gym and group exercise room for yoga and meditation, as well as new furnishings and equipment.

Now, the safe and welcoming community, established in 1984 by three mothers of children with mental illness, is housed in an incredibly beautiful space. Thanks to your generosity, we can continue to offer this vital source of mental health and social support to future generations of people with serious and persistent mental illness.

"It's a heartfelt experience to witness the adoration and appreciation of the clubhouse members," says Shalla Parker, MA, MS, program manager of The Gathering Place. "It has been such a joy to share in their excitement regarding the renovation. The members love and need this place!"

OUT, BUT ALSO good for my brain. THE

George S.



A seating nook offers a peaceful place for members to read or chat.

The gathering room has been transformed into a warmer, more comfortable space.

"The kitchen is great. I hope we can do cooking classes,"

Louis P.



"We are so grateful for everyone who makes TGP possible."

Chris B.

Member of The Gathering Place

STORIES OF HOPE



Chris B. finds a community in The Gathering Place

I was an outgoing newspaper advertising sales manager when my anxiety and depression became too much. I moved back in with my parents, and rarely left the house. Isolated, I was in a dark place for a while.

With help from The Gathering Place, I forged relationships and found a renewed purpose. Transitioning from a life of solitude to one of connection took some getting used to. The first few weeks at TGP, I hung back and read books in a corner chair. Then, I began taking courses and chatting with other members. I started getting to know people here and there and found experiences I could relate to - a sense of camaraderie.

As time went on, I put my newspaper experience to work by publishing a monthly newsletter for TGP with other members. Each month, the newsletter staff celebrated our hard work with a popcorn party. Then, we handed out copies of the finished newsletter to our fellow club members. It was a fun time for everyone, and it felt good being part of a team and having a finished product. I'm unbelievably proud of everyone.

After TGP temporarily closed because of the pandemic, the need for human connection was greater than ever. Working from home, I created a digital version of the newsletter to help members stay in touch. I also started holding Zoom get-togethers every Monday and Friday, in addition to a Wednesday Spanish class. It was great to see all those faces again and stay connected.

I think I can speak for many members when I say that being able to attend and belong to a community such as The Gathering Place, especially being surrounded by the beautiful new renovations, helps to instill a sense of pride in all of us. We are so grateful for everyone who makes TGP possible.

Patrick Kennedy Inspires at Annual Luncheon

DONORS RAISE \$375,000 FOR MENNINGER PROGRAMS



Patrick Kennedy and Armando Colombo

It was a beautiful spring afternoon on Thursday, May 6, as guests of Menninger's Annual Signature Luncheon trickled into the ballroom of the Hilton Houston Post Oak Hotel. While the luncheon looked a little different than in years past (guests donned face masks and a COVID-19 screening station stood at the ballroom entrance), the sense of community and shared purpose remained the same.

In total, nearly 400 donors and sponsors came together, online and in person, to increase awareness of mental health and support Menninger's mission, raising \$375,000 for The Clinic's research, education and outreach programs. The event was two years in the making after the global pandemic forced the luncheon's postponement in 2020, but most would agree it was worth the wait.

Chaired by donors Stacy and Michael Ellington, the luncheon featured former U.S. Congressman Patrick Kennedy, who spoke about the state of mental health









in America, and how the pandemic has exposed the country's mental health vulnerabilities. Kennedy emphasized the need for early intervention through school-based programs, more investment in scientific research and greater collaboration among advocacy groups.

"We must take this moment of learning with COVID and say 'now things have changed.' We can't afford to sit on our hands any longer. We have to be proactive," he said.

Kennedy also called Menninger a "model of excellence" for the nation and praised The Clinic for creating more access to treatment through innovative programs, like Menninger 360 — a "hospital without walls" that brings intensive treatment directly to patients in their homes and communities.

The annual Vital Balance Award, which recognizes exceptional individuals and organizations who are advancing mental health, was awarded to State Representative Four Price, a six-term member of the Texas House of

Representatives. Price was honored for his vigorous advocacy on behalf of Texans affected by mental illness and his work to improve mental health care in the state.

"Throughout his legislative career, Four has used his voice to advocate for mental health and shape public policy for the betterment of the lives of everyone in the state of Texas," said luncheon chair Michael Ellington.

We are grateful to the many donors and lead sponsors who ensured the luncheon's success, including The Louis L. Borick Foundation, the Cuenod Families with InduMar Products, Letty Knapp with Vivie and Chris O'Sullivan, Jim and Carole Walter Looke, Linda and John Griffin, Leslie Ward with AT&T Texas, The Stanford and Joan Alexander Foundation and H-E-B.

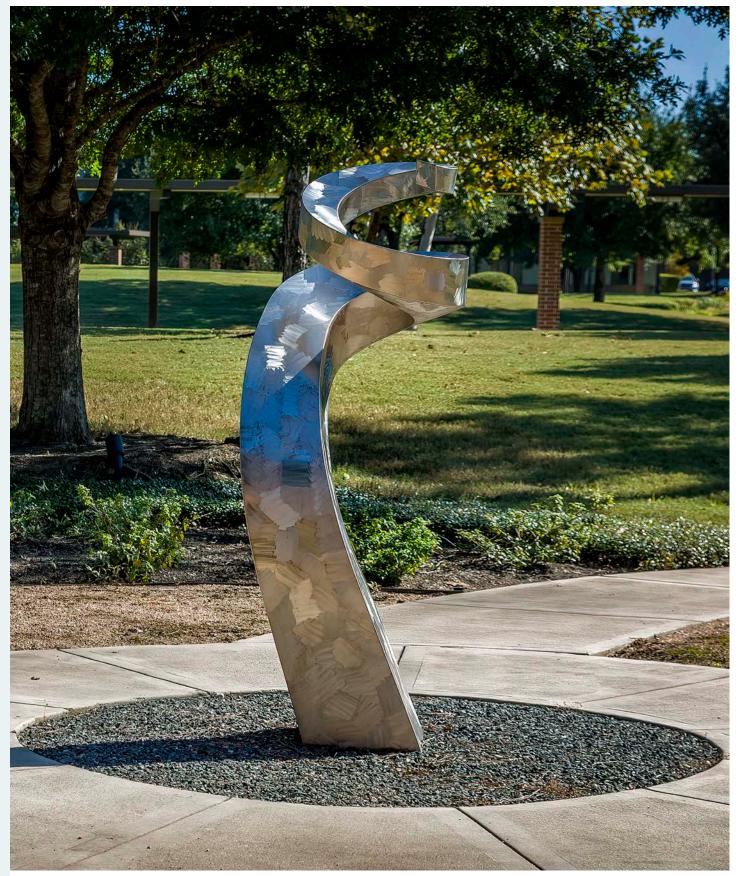
FINANCIAL STATEMENT

THE MENNINGER CLINIC AND THE MENNINGER CLINIC FOUNDATION

For the years ended June 30, 2020 and 2021*

CLINIC STATISTICS	2021	2020
	64.9	54.2
Inpatient Average Daily Census	25.6	29.4
Pathfinder Average Daily Census	14,458	
Outpatient Visits Faculty & Staff	488	11,742 470
REVENUE		
Patient Care	56,215,230	47,153,356
Gifts without Donor Restriction	343,676	10,396,373
Grants & Other Revenue	16,801,094	2,931,174
TOTAL REVENUE	\$73,360,000	\$60,480,903
OPERATING EXPENSES		
Salaries & Benefits	36,200,754	34,426,159
Medical Staff Expenses	17,953,429	10,043,024
Non-Labor Expenses	5,824,996	14,379,591
Depreciation & Amortization	4,055,639	3,833,906
Interest Expense	761,572	745,726
Provision for Doubtful Accounts	582,633	710,185
TOTAL OPERATING EXPENSES	\$65,379,023	\$64,138,592
OPERATING INCOME	\$7,980,977	\$(3,657,688)
NON-OPERATING ITEMS	6,518,413	(372,376)
CHANGE IN NET ASSETS	\$14,499,390	\$(4,030,065)
EXPENSE CATEGORIES		
Program	85%	85%
	13%	13%
Administrative	13/0	13/0

^{*}Audited



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Leading THE WAY

Menninger Executive Team Looks to Future

Beginning with the arrival of President and Chief Executive Officer Armando Colombo in September 2019, Menninger leaders have taken a close look at ways to strengthen The Clinic's mission into the future.

As Menninger approaches its 100th anniversary in 2025, a five-year strategic plan, developed with input from across the organization, is guiding their efforts. The plan focuses on five pillars: people, patient care, growth and innovation and financial stewardship.

To support the plan's implementation and success, new roles were developed for The Clinic's executive team and key leaders were recruited. Notably, in January 2020, Robert Boland, MD, came on board as senior vice president and chief of staff, overseeing patient care, research and academic training programs. Dr. Boland also serves as executive vice chair of the Menninger Department of Psychiatry and Behavioral Sciences at Baylor College of Medicine. He previously served as vice chair of education and director of the psychiatry residency program at Brigham and Women's Hospital and as an associate professor of psychiatry at Harvard Medical School. Board certified in psychiatry with expertise in medical education, psychosomatic medicine and geriatric psychiatry, he is an alumnus of Georgetown University, where he earned his undergraduate and medical degrees.

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