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The HHSC *Colonias* Initiative

OVERVIEW

The Texas Health and Human Services Commission (HHSC), in keeping with its strategic priority of enhancing the conditions that support good health and self sufficiency in South Texas *colonias*, has launched a new initiative that will better coordinate the delivery of services to *colonias* by health and human services agencies. The purpose of the initiative is to identify ways of providing *colonia* residents with access to state-funded programs in ways that are tailored to the unique conditions of their environment.

This initiative will work in collaboration with the Texas A&M University *Colonias* Program, the Texas Workforce Commission, the Texas Education Agency and other agencies to assist residents of *colonias* to maximize the State's resources in a way that will provide them with the most needed services. A primary objective of the initiative will be to enhance collaboration among HHS and partner agencies so that they work together more effectively, communicate more efficiently and avoid duplication of services. This will result in a health and human services infrastructure that is able to increase the availability and accessibility of critical services to the *colonias* population.

The Colonias Initiative will place strong emphasis upon developing new models of coordinated, interagency service delivery that are responsive to the needs and conditions of local *colonias*.

A NEW MODEL OF SERVICE DELIVERY

Access to health and human services in most of Texas, both urban and rural, is predicated upon the availability of things that most of us take for granted, such as paved roads, public transportation, clean water supply, sewage and sanitation, telephones and other communication means, and centrally-located health and human services facilities. Because this basic infrastructure is poor or lacking in most *colonias*, the usual ways of making services accessible have often proven to be ineffective. In addition, the fragmented way in which health and human services are usually delivered only serves to compound the problem.

New ways of thinking about service delivery design must be found if *colonias* residents are to have the same access to services as other Texas citizens have. The *Colonias* Initiative seeks to do this through a community empowerment model in which *colonia* residents, with the cooperation and support of HHSC and partnering agencies, will design a community-oriented and culturally competent health and human service delivery model.

This service delivery model will be designed to meet the needs of *colonia* residents, as defined and prioritized by *colonia* residents. The success of the service delivery model

will be evaluated on the basis of criteria selected and agreed upon by *colonia* residents, in coordination and cooperation with HHSC and partnering agencies.

NEEDS ASSESSMENT PROCESS

To begin with, interviews and focus groups will be conducted with *promotoras* who are already working to serve *colonias* residents. *Promotoras* are in an ideal position to help to shape the service delivery model because they live in the *colonias*, they visit the homes of other *colonias* residents in providing services, and they frequently interact with health and human service agency representatives. Advice from *promotoras* will be sought with regard to how *colonias* residents would want to be involved in identifying their needs.

Based upon input from *promotoras*, and with their assistance, various interviews, forums and “*platicas*” (informal conversations) will be conducted in targeted *colonias*. The purpose of these is to provide environments in which *colonias* residents will feel empowered to identify and express their needs for health and human services and how they feel they should be addressed in their community. Because the presence of “official” agency representatives can sometimes suppress local participation and expression, HHS agencies will not participate initially in these forums and interviews. Coordination and support will be provided by the HHSC *Colonias* Initiative project director, by *promotoras*, and by representatives of the Texas A&M *Colonias* Program.

It is anticipated that *colonias* participants will establish some form of advisory or steering committee to work on an ongoing basis with HHSC agencies and their partners to create a service delivery model that the community feels best meet their priority needs. These committees will also work with the HHSC agency teams and their partners in evaluating the success of the service delivery approaches that are implemented.

COORDINATED SERVICE PLANNING

Input from *colonias* residents concerning their needs and how they feel they can best be met will be reviewed by a regional HHS agency partnership workgroup, under the leadership of the HHSC project director. This workgroup, in partnership with *colonias promotoras* and residents, will develop a comprehensive service plan for each *colonia* that will call for a coordinated and integrated approach that best meets the identified needs of residents.

The comprehensive service plan will assign agency specific roles and responsibilities and will include a detailed implementation schedule. The plan may include elements borrowed, as warranted, from existing service delivery models, as well as elements that reflect a new approach to service delivery, such as using *promotoras* to carry out caseworker and/or service coordination functions.

START-UP AND FUTURE EXPANSION

The initiative will start as a pilot program in 3 *colonias*: **Progreso**, in Hidalgo County; **Cameron Park**, in Cameron County; and **Sebastian**, in Willacy County. These *colonias* have been selected for the pilot initiative based on the following factors: 1) their unique

demographic characteristics (e.g., rural vs. urban); 2) the presence of a Texas A&M Community Resource Center in each of the selected colonias; and 3) the fact that they are all located in the Rio Grande Valley, which ensures the manageability of the pilot program. The pilot program start-up date is September 1, 2000. It is expected that the initiative will produce a model for program design that can be readily expanded to other colonias throughout Texas.

Vision, Mission, Goals, and Guiding Principles and Values

VISION

The vision of the Colonias Initiative is to provide an integrated, sustainable system of service delivery that builds upon the strengths, cultural identity, and self-determination of the Colonias residents, and promotes opportunities to fully and freely pursue productive lives.

MISSION STATEMENT

The mission of the Colonias Initiative is to improve the opportunities for enhancing the quality of life in the *colonias* by increasing the availability and accessibility of agency services to *colonias* residents.

GOALS

- Improve the integration and coordination of the delivery of health, human services, employment, and educational services in the *colonias* in order to promote independence and self-sufficiency.
- Develop and implement processes to evaluate the outcomes and effectiveness of the *Colonias* Initiative.

GUIDING PRINCIPLES AND VALUES

- Promoting independence and self-sufficiency
- Cultural competency
- Local control and integration of local partnership with *Colonias* Initiative Workgroup. All action at the regional level will require the participation and support of HHSC leadership.
- Empowerment of individuals and communities
- Respect for the thoughts, values and desires of *colonias* residents
- Inclusion of all voices in the community
- Sustained commitment of partnership leaders to mission of the Colonias Initiative.
- Efficient use of limited resources
- Identification and employment of best practices
- Initiative must be adaptable to the changing needs of the community over time

Implementation Workplan

#	Task Description	Who?	Start	End	Products
1.	Develop workplan & obtain Commissioner Gilbert's approval	Luna; Devin; Gilbert	8/16/00	8/31/00	Approved implementation plan
2.	Designate regional workgroup	Luna; Gilbert; CEO's	8/16/00	9/15/00	Regional workgroup ready to begin work
3.	Design and prepare for needs assessment for targeted colonias	Project Team; Colonias residents and promotoras	8/28/00	9/29/00	Assessment processes and procedures defined and ready to implement for 3 colonias.
4.	Conduct needs assessments in colonias	Project Team; Colonias residents and promotoras	10/2/00	11/15/00	Most pressing needs identified and prioritized for targeted colonias.
5.	Develop coordinated service plan for each colonia	Project Team; Reg. Wrkgrp; Colonias residents and promotoras	10/16/00	11/30/00	Coordinated service plans developed and prepare to implement in targeted colonias.
6.	Provide training re: coordinated service plan	Project Team; Reg. Wrkgrp; Promotoras	12/1/00	12/29/00	Staff & promotoras trained and prepare to implement in targeted colonias.
7.	Implement coordinated service plan	Project Team; Reg. Wrkgrp; Promotoras	1/2/01	Ongoing	Service delivery begins
8.	Evaluate project implementation	Project Team; Reg. Wrkgrp; Colonias residents and promotoras	8/16/01	Ongoing	"Lessons learned" that can be used to improve process for replication in other colonias.
9.	Evaluate service delivery outcomes	Project Team; Reg. Wrkgrp; Colonias residents and promotoras	8/16/01	Ongoing	Evaluation of impact of service delivery on key outcomes; identify best practice approaches with potential for replication in other colonias.

Attachment A - The Colonias

Environment

WHAT ARE COLONIAS?

The colonias are generally described as unincorporated communities burdened by the lack of adequate physical infrastructures such as running water, storm drainage, sewers and paved streets. Today, over 1,400 colonias along the Texas/Mexico border are home to an estimated 400,000 Texans. Many residents of these communities experience a sense of geographic, social and economic state of isolation.

Colonias residents are Texans who have a profound sense of family, history and cultural pride. They are driven by an untiring commitment and desire to enhance the quality of their lives and those of their children.

Colonias residents are plagued by serious problems such as a high incidence of diarrheal diseases amongst children, and the constant threat of hepatitis caused by pit privies that contaminate shallow wells and the daily difficulty of living without water.

The high rate of population growth in the colonias is likely to bring an increased demand for a far-reaching array of health and human services, employment, job training and development and educational opportunities.

GENERAL DEMOGRAPHIC PROFILE OF THE RESIDENTS OF THE COLONIAS

According to the Texas Water Development Board, the colonias have an estimated population of about 400,000 -- and growing. At that size, the colonias population represent about 2% of the current Texas total population, and about 10% of the 43-county Texas/Mexico border region total population (here the border region is defined consistent with Senate Bill 501, enacted during the Texas 76th Legislature).

A recent study conducted by the Texas Department of Health (TDH) suggests that, like in the rest of the Texas/Mexico border region, the majority of the colonias population is of Hispanic origin (around 90%). The same study indicates that about 40% of the Colonias population were born outside of the United States, mostly in Mexico and Central America.

Many colonias residents are bilingual. Although about 42% of colonias residents speak Spanish at home, the research conducted by the TDH suggests that in 65% of colonias households at least one person speaks English.

Estimates of the distribution of the colonias population vary. The Research Department of the Texas Health and Human Services Commission estimates that if the age structure of the colonias were similar to that of the border region, there could be as

many as 125,000 children under the age of 18; about 234,000 non-elderly adults, and; about 41,000 elderly adults age 65 or older in the colonias.

CONDITIONS THAT GIVE RISE TO HHS NEEDS

Community Infrastructure and Environmental Issues

Studies and reports reviewed regarding infrastructure and environmental conditions indicate that residents of the colonias face challenges in the following areas:

1. Below average housing conditions.
2. Below average road conditions that exacerbate the physical isolation many residents of the Colonias experience.
3. A poor flood control (drainage) infrastructure that creates health risk environments in areas near stagnant waters.
4. Poor waste disposal resources (e.g., lack of adequate garbage pick up and adequate sewage systems).
5. Health risks associated with agriculture-related pesticide runoff.
6. Risk of exposure to hazardous chemicals (lead and mercury, in particular) contained in ceramic cookware and in cosmetic and beauty products purchased in Mexico.
7. Exposure to contaminated / unsafe water due to industrial development and to residual chlorine accumulated in stored water.
8. Exposure to contamination and other health hazards due to the existence of numerous illegal dump sites (there may be up to 20,000 in entire border region).
9. Lack of confidence in quality of tap water (complaints of bad tasting, smelly water).
10. Exposure to contaminated foods, especially fish, caught in contaminated waters.

Household/Individual Circumstances

Studies and reports reviewed regarding socioeconomic conditions indicate that residents of the colonias face challenges in the following areas:

1. Below average income levels, resulting in higher than average rates of poverty (as compared to the entire State).
2. Above average levels of unemployment / underemployment.
3. Insufficient access to health insurance coverage, especially through private insurance.
4. Lack of sufficient English language proficiency among many Colonias residents that increases the sense of personal / institutional isolation.
5. Below average levels of educational attainment.

6. Above average incidence of diabetes.
7. Above average incidence of certain diseases, such as diarrhea and other gastrointestinal diseases, and of other infectious diseases, especially Hepatitis A.
8. Inadequate/unreliable transportation.
9. Increased risks associated with tobacco, alcohol, and illegal drug use as a result of insufficient access to prevention, intervention, and treatment.
10. Low levels of engagement (participation) in at-large (state and regional) civic and political institutions due to lack of trust in governmental and other large-scale institutions.

Needs of Colonias Residents

At this point in time, there is not a single instrument or study from which a systematic, comprehensive, and precise quantification of unmet human needs across the entire colonia community could be made.

However, given the less than ideal living conditions, widespread poverty, and inferior than average physical infrastructure that some studies have documented, the Research Department of the Texas Health and Human Services Commission expects that during the community forums, colonia residents will likely confirm a strong need for the following programs, services and strategies (and possibly for others not listed here):

1. More timely, sufficient, and culturally sensitive, information about programs, services and contacts.
2. Maintenance / improvement of inter-agency referral mechanisms to reduce duplication and fragmentation of service provision.
3. Improved access to disease prevention resources (e.g., information; screening and testing; immunizations; family planning; pre-natal care).
4. Increased environmental education (e.g., education about how to manage to achieve the healthiest and safest living conditions possible in an area where there are many environmental and health hazards).
5. Improved access to general health education (health education topics including, but not limited to, pre-natal care; breast-feeding; bottle preparation; nutrition; food and water safety and exercise).
6. Improved access to adequate health insurance coverage and access to affordable health services on this side of the border (including routine medical, dental, and pre-natal care, and emergency services).
7. Need for economic assistance programs.
8. Increased nutrition assistance programs.
9. Increased programs and services for persons with physical and or mental / disabilities.

10. Increased education and training programs (at all levels), including vocational training and re-training.
11. Increased childcare services.
12. Increased long-term care and adult day care services.
13. Increased prevention, intervention, and treatment services to deal with drug and alcohol abuse.
14. Increased awareness of and access to programs and services that protect children and adults from abuse and neglect.
15. Increased awareness of and access to youth programs and counseling to prevent crime.
16. Increased outreach to the seasonal and migrant worker population.
17. Increased presence and reliability of transportation alternatives.
18. Increased peer assistance in outreach efforts to serve families and children living in colonias.

BIBLIOGRAPHY

Children Trust Fund of Texas Council (CTFC). Unmet Needs of Families With Children Ages Birth to Four Years in Seven Texas Communities. October 1998.

Ellis, David. Socioeconomic Differentials Among Selected Colonia and Non-Colonia Populations on the Texas-Mexico Border. Doctoral Dissertation. Texas A&M University. College of Architecture. Department of Urban and Regional Science. August 1995.

Texas A&M University. College of Architecture. Center for Housing and Urban Development. Colonias Program: Stronger Texas Communities Through Partnerships. Report downloaded over the Internet. July of 2000.

Texas A&M University. College of Architecture. Center for Housing and Urban Development. Cinco Colonia Areas: Baseline Conditions in the Lower Rio Grande Valley. November 1993.

Texas A&M University. College of Architecture. Center for Housing and Urban Development. Las Colonias del Rio Alto Bravo: Baseline Conditions in Webb and El Paso Counties. August 1994.

Texas Commission on Alcohol and Drug Abuse (TCADA). 1996 Texas School Survey of Substance Use on the Texas Mexico Border and in Colonias. December 1998.

Texas Commission on Alcohol and Drug Abuse (TCADA). 1998 Texas School Survey of Substance Use Among Students on the Border: Grades 4-12. Executive Summary. September 1999.

Texas Department of Health. Office of Border Health. Survey of Health and Environmental Conditions in Border Counties and Colonias. Technical Report. Summer 2000.

Texas Department of Health. Bureau of Clinical and Nutrition Services. Special Supplemental Nutrition Program for Women, Infants, and Children (WIC). Research Findings on the South Texas Colonias Population. September 1999.

Texas Department of Health. Office of Border Health. Survey of Health and Environmental Conditions in Selected Colonias of El Paso County, Texas. Final Report. September 1996.

Texas Department of Health. 1993-1994 Annual Report.

Texas Department of Human Services. Colonias Factbook Summary (A survey of Living Conditions in Rural Areas of South and West Texas Border Counties. June 1988. Downloaded over the Internet. Site: <http://chud/tamu.edu/colonias.factbook.htm>

Texas Water Development Board and Texas Natural Resources Conservation Commission. Texas Border Region Environmental Infrastructure Needs Assessment. April 1997.

Attachment B - Current HHS Activities in the *Colonias*

PAST AND PRESENT COLONIAS INITIATIVES

Over the years, several initiatives have been launched to address the challenges of life in Texas' *colonias*. Within Texas State government, there are a number of programs targeting *colonias* and their residents. For example, the Texas Water Development Board (TWDB) is in the process of providing water and sewer service to *colonias*, and the Texas Department of Housing and Community Affairs (TDHCA) has been funding connections of *colonia* homes to water and sewer mains for several years. TDHCA's Self-Help Housing Center program has established five housing training projects in *colonias* from Brownsville to El Paso.

Efforts such as the Colonias Program administered through the Texas A&M University School of Architecture's Center for Housing and Urban Development have proven to be extremely effective in combating isolation of *colonia* residents. The Texas A&M program is designed to assist residents of *colonias* to improve the quality of their lives and their communities. It seeks to catalyze "community-self-development," a process whereby residents become involved in activities to strengthen the social infrastructure of the community, which in turn supports appropriate development of the community's physical and economic infrastructure. The program achieves this by helping *colonia* residents access education, health, human services, job training, youth and elderly programs, among others.

The Colonias Program has established thirteen community resource centers along the Texas/Mexico border from Brownsville to El Paso and is currently in the process of establishing four more. The Colonias Program also has hired, trained and supervises 80 *colonia* residents who serve as paid outreach workers (*promotoras*), helping their neighbors learn of the programs available at the centers and in nearby towns. Further, the Colonias Program, with help from the State Energy Conservation Office through the Texas Transportation Institute, has provided 15-passenger vans to support the centers and their surrounding *colonias*. The Secretary of State's office has provided coordination for physical infrastructure projects in *colonias*.

HHS AGENCY ACTIVITIES

The HHSC Coordinated Strategic Plan for FY 2001-2006 includes fourteen strategic priorities, whose purpose is to focus HHS agency planning and activities for enterprise-wide projects and individual agency efforts to achieve critical outcomes. The strategic priorities were adopted by HHS agency CEOs in response to the needs identified from agency consumer input and statewide local planning forums. Although several of the

strategic priorities have an impact upon *colonias* conditions, the following strategic priority has a specific *colonias* focus:

ENHANCE THE CONDITIONS THAT SUPPORT GOOD HEALTH AND SELF-SUFFICIENCY IN THE BORDER COLONIAS.

Listed below are summaries of *colonias* programs that are currently being offered by HHS agencies in support of this strategic priority.

Texas Rehabilitation Commission (TRC)

Current Activities

- Residents of the *colonias* with disabilities continue to be identified and referred to TRC for determination of eligibility and the provision of services.
- TRC provided training to Texas A&M staff regarding the VR Program and process, assigned central office and regional liaisons to the *Colonias* Project, and provided program brochures in English and Spanish.

Planned Activities

TRC Regions I and V staff will:

- develop referral/liaison contacts between local TRC staff and Texas A&M Community Resource Centers staff and establish referral procedures
- develop a system to track referrals from the *colonias* and develop a reporting system

Agency Resources Required

TRC plans to continue working toward the achievement of employment outcomes for residents of *Colonias* with disabilities within current financial and staff resources.

Texas Department of Health (TDH)

The services provided by the Texas Department of Health are often associated with clinical services; however, public health includes activities that may sometimes go unnoticed by the general public. These include prevention of epidemics, protection against environmental hazards, promotion of healthy behaviors, and assuring the quality and accessibility of health services. All of these activities benefit *colonias* residents, and all Texans, on a daily basis.

Current Activities

Services are provided to *colonias* residents either directly through TDH or through agencies that contract with TDH. The broad spectrum of services that are available to *colonias* residents includes regulation and control of environmental health threats, regulatory, licensing and inspection programs to ensure the sanitary disposal of solid

waste and safe handling of hazardous wastes, immunizations, WIC programs, and family planning. Screening and diagnostic testing are also provided to colonias residents including screening for cancer, sexually transmitted infections, HIV, tuberculosis, and diabetes. Colonias residents also receive eye exams and dental exams.

Operation Lone Star event is one example of TDH collaborating with other entities to provide colonias residents with preventive health services. This particular endeavor involves the efforts of TDH, the U.S. Navy and Marine Reserves, the Texas Army National Guard, and local health departments.

Texas Small Town Environmental Program (STEP) is another activity that TDH has implemented in addressing the needs of colonias residents. Since 1994, TDH has partnered with Texas Natural Resources Conservation Commission, Texas Department of Housing and Community Affairs, The Texas General Land Office, and the Texas Water Development Board in applying the self-help model of The Rensselaerville Institute. STEP operates through the collaborative efforts of these agencies in providing guidance, assistance, and support to community leaders and residents as they address their water and wastewater infrastructure problems. A public/private partnership formed between TDH and The Meadows Foundation in 1998 has enabled four colonias to complete their self-help water or wastewater projects. Approximately 2,300 residents in 484 homes have benefited from these projects. Five other colonias have ongoing projects expected to serve 2,700 residents in 568 homes.

Planned Activities

Continued expansion of Texas Small Town Environmental Program (STEP) to reach more communities.

A follow-up study to “Survey of Health and Environmental Conditions in Texas Border Counties and *Colonias*” is planned in the border counties of Cameron, Hidalgo, Webb, Maverick, Val Verde, and El Paso. Additional data will be collected on household structure, general sanitation, health conditions, and potential sources of exposure to environmental contaminants. The follow-up survey will include a child pesticide-poisoning project in border counties.

Agency Resources Required

TDH has invested time and resources to improving the living conditions of border residents and to promote good health and self-sufficiency in the colonias of South Texas. TDH commits the Office of Border Health and its resources to meeting this priority.

Texas Department of Human Services (TDHS)

Current Activities

- Local Innovation Project: Dress for Success, 13 counties of Region 11: provide clothing and accessories for employment interviews, employment, and retained employment to low-income individuals with barriers to employment.
- Several presentations have been made at the *Colonia* sites and have provided a thorough overview of the agency and the Texas Works program to the “Promotoras” from all the *Colonias*. “Promotoras” work directly with the local DHS offices to arrange for appointments and to disseminate information to agency clients in the *Colonias*.
- Project Alberto utilizes “Promotoras” to go into the *Colonia* communities to seek individuals who are potentially eligible for Medicaid services. The “Promotoras take application packets with them, help the potential clients complete the application, then return the completed application packet to the local TDHS office. The idea is to have a complete application packet with all information, so that the Texas Works Advisor can immediately take action on the application. If more information is needed, a “Promotora “ is assigned to the client to go back to the client to get the information. This system allows certification of Medicaid cases without inconveniencing the client with a face-to-face interview.
- In Laredo, the Texas Works program has been providing itinerant services to the *Colonias* by housing a Texas Works Advisor in the Community Center twice a month. The advisor provides information and referrals, helps clients complete applications, and accepts reports of changes. At this time, they do not provide eligibility determination in the centers.

Planned Activities

- Eliminate language barriers

Texas Department of Mental Health and Mental Retardation (TDMHMR)

Current Activities

- The Department has established a specific initiative “Action committee on *Colonias* Committed to Expand and improve access to Services to create new Opportunities” (ACCESO) to address improving access and services for persons living in the *colonias*.
- ACCESO is currently engaged in providing education/training to promotoras at Texas A & M community resource centers. All training is conducted in Spanish in the *colonias* and cover of a wide range of topics on stress, anxiety,

depression, and mental health. Training curriculums have been developed and implemented. Other ACCESO partners along the border are replicating the content of this curriculum in their training to local area promotoras and providers. Public information and services (if appropriate) to *colonia* residents is conducted on site at A & M community resource centers and door-to-door to *colonia* residents.

- ACCESO partners have identified and are developing other partnerships with local providers, church groups and grassroots organizations engaged in outreach to *colonias*.

Planned Activities

- Will continue to work with local authorities to identify individuals in the *colonias* to establish relationships/partnerships and to begin to persons in need of services so that services can be offered.

Agency Resources Required

TDMHMR will continue to use existing agency resources to address issues affecting access to services in the *colonias*. The department is committed to this important initiative. New funding will be needed to expand services in the counties where *colonias* exist.

Texas Commission for the Blind (TCB)

Current Activities

- Vision screenings
- Intake informational interviews regarding TCB services
- Vocational rehabilitation services, including surgery and ancillary services, to eligible individuals
- Referral of individuals not eligible for TCB services to community funding resources.
- Collaboration with Texas A & M *Colonias* Project providing training for community service workers (Promotoras) on blindness and TCB services.

Planned Activities

- TCB participation will include aggressive efforts by agency staff in El Paso and Harlingen to inform colonia residents of vision related issues, determine eligibility, and deliver services.

Texas Commission for the Deaf and Hard of Hearing (TCDHH)

Current Activities

- The agency has recently increased services in the border areas through a Regional Specialist project serving HHSC Region 11, with an increased focus on the *colonias*.

Texas Interagency Council on Early Childhood Intervention (ECI)

Current Activities

In FY 2000, the ECI state office, in coordination with ECI local programs in Region 10 and Region 11, has increased efforts to find ECI-eligible children in these regions, including the *colonias*, through the development and implementation of Child Find Pilot Projects. ECI services are available to all ECI-eligible children and their families.

Planned Activities:

Provide training, technical assistance, and outreach to the *colonias* areas, including to the promotoras or community liaisons, and ECI providers, to ensure timely and appropriate referrals for ECI services.

Texas Department on Aging (TDoA)

Current Activities

- Provide a statewide, locally based system of services designed to maintain personal independence through the provision of supportive services, transportation, and senior center activities; and provide opportunities for increased personal productivity through community service volunteering.
- Through interagency initiatives, make these services accessible to older persons living in the *colonias*.

Planned Activities

- Approximately 10 area agencies on aging will fund respite services during this strategic planning period, and make them available to over 300 older persons and their families in various areas of the state, including a few *colonias* along the Texas-Mexico border.
- Expand nutrition, medication assistance and access to aging services along the Texas-Mexico border.

Texas Department of Protective and Regulatory Services (TDPRS)

Current Activities

- PEI has contracted with Texas A&M University to provide Texas Families: Together and Safe services to families in the *colonias*.
- APS in Region 10 (El Paso) has worked with the *Colonias* Provider Council and has participated in public awareness activities at the various *colonias* community center sites
- CCL coordinates with TDH in monitoring children's immunizations in licensed facilities and registered homes in the *colonias*.

Texas Commission on Alcohol and Drug Abuse (TCADA)

Current Activities

- TCADA is monitoring service delivery and is tracking the numbers of colonia residents in prevention, intervention and treatment services by TCADA-funded providers.
- To support the efforts of the TCADA-funded border providers, TCADA:
 - has expanded the counselor testing sites to include Brownsville and Laredo to encourage increasing the numbers of LCDCs along the border;
 - increased the amount of literature in Spanish from the agency clearinghouse and is targeting monolingual Spanish populations through Prevention Resource Centers and other private citizens, community workers, etc.; and
 - is developing training opportunities for border providers in collaboration with the Texas Addiction Technology Transfer Centers and the federal Center for Substance Abuse Treatment.
- The Border Initiative Task Force, established early in the program, brings together interested organizations from both sides of the border to share information on successful service delivery strategies, research, training and project evaluation information.

Planned Activities

- TCADA will expand the number of counselor testing sites from the current 4 to 6, to encourage increasing the number of LCDC's along the border.

Agency Resources Required

TCADA will continue to use existing agency resources to address this priority. The agency will provide information supporting creative and innovative strategies for

service delivery to Texas legislators, and will work within the HHSC system to build partnerships to support an exceptional item requests for additional funding through the LAR process.

Children's Trust Fund of Texas (CTF)

Planned Activities

CTF will include in its next Request for Proposal Release a requirement to Respondents, where *colonias* exist, to include in their Plan of Operation how and when they plan to serve families and children living in *colonias*.