



nami

National Alliance on Mental Illness

Gulf Coast



**Annual Report
2012**

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Gulf Coast

What is...NAMI Gulf Coast?

National Alliance on Mental Illness for Galveston and Brazoria Counties. NAMI Gulf Coast (GC) is a non-profit 501 (c)3 grassroots organization that provides support, education and referrals for families of people with mental illness.

What is the mission statement and vision of NAMI GC?

It is the mission of NAMI G C to provide education and support for families and professionals about mental illness and advocate for services for people with brain disorders. NAMI GC's vision is to eliminate the stigma attached to mental illness and have it viewed by the community with the same compassion as any other illness.

What services are provided by NAMI GC?

Education:

Provide workshops that educate families about adult members or a child who have a brain disorder. Education programs teach coping skills, brain disorder information, medication adherence, self-advocacy skills, behavior logging, etc.

Support:

Monthly chapter meetings from 6-8pm:

Referrals:

Referrals are provided for individuals seeking assistance while they try to maneuver through mental health services for a variety of needs primarily within Galveston and Brazoria Counties.

Newsletters:

NAMI GC distributes newsletters monthly to families affected by mental illness as well as the community in need of information on such issues.

Consumer Programs:

NAMI GC strives to support families coping with mental illness. Part of this support involves consumer (a person who has a mental illness) support through peer groups, education classes and social opportunities.

If you know anyone who could use our services or may be in need of a mental health referral please do not hesitate to send them our way.

How can you help?

Tell others about NAMI GC and its services. Let us know if you would like to volunteer for a rewarding and challenging experience. NAMI GC operates through the generosity of individual and corporate contributions. Financial support is welcome and will help NAMI GC continue its mission and vision.

Needs Statement

Galveston County

Galveston County lies approximately 30 miles south of Houston on the Upper Texas Gulf Coast. The 2010 census Galveston county population count was 291,302. That means that there are 72,825 people in Galveston County affected by mental illness (National NAMI: 1 in 4 people are affected by mental illness). There are two distinct types of mental illnesses. First, is serious to persistent mental illnesses which are caused by psychological, biological, genetic, or environmental conditions, and second, situational mental illnesses due to severe stress which may be only temporary. Serious mental illness consist of Depression, Bipolar disorder, Obsessive Compulsive disorder (OCD), Schizophrenia, Anxiety disorders, eating disorders, personality disorders, ADHD and more. Anyone can have mental illness, regardless of age gender race or socioeconomic level. Many people suffer from more than one mental disorder at a given time. Nearly 45% of those with any mental disorder meet criteria for two or more disorders, with severity strongly related to co morbidity. Mental illness can and should be treated. Nearly two-thirds of all people with a diagnosable mental disorder do not seek treatment. That means 24,275 people in Galveston County may be seeking treatment within a year. With proper treatment, many people affected with mental illness can return to normal, productive lives.

Community based services designed to break longstanding behavioral patterns that result in criminal justice involvement are needed in the following areas:

- Re-entry Services: Individuals returning to Galveston County after incarceration recognize both direct service needs and capacity building service needs for self sufficient independent living in the County after a period of incarceration.
- Offenders who have a serious mental illness released with full-time served receive no mental health treatment. Both substance abuse treatment and mental health services are limited in Galveston County and target individuals only with long term compromise to their ability to function.
- Prevention and early intervention services are needed to re-direct the path of addiction and mental illness for a substantial portion of the population. When the severity and prevalence of substance abuse and mental illness is reduced collateral damage to co-existing vulnerable populations is diminished.
- Nonviolent offenders need to be assigned to community based programs instead of jail time which ultimately cost the county \$80 per day (Marketplace Morning Report, Tuesday, August 11, 2009) versus community programs that can run \$12 – \$13 per day (Health Management Associates, Impact of Proposed Budget Cuts to Community-Based Mental Health Service, March 2011) and with minimal reentry challenges to face upon release.

Con'd needs for Galveston County

On a national level, one in five children has a diagnosable mental, emotional or behavioral disorder; and up to one in 10 may suffer from a serious emotional disturbance. Seventy percent of children, however, do not receive mental health services (SGRMH, 1999). As many as one in every 33 children and one in eight adolescents may have depression (CMHS, 1998); and once a child experiences an episode of depression, he or she is at risk of having another episode within the next five years (CMHS, 1998). Teenage girls are more likely to develop depression than teenage boys (NIMH, 2000); and both children and teens who have some chronic illness are at increased risk for depression. Today, suicide is the third leading cause of death for youth in the 15 to 24 year old range; and is the 6th leading cause for younger children, ages 5 to 14. These statistics are even more disconcerting when one realizes that there are proven, short-term, effective treatments for most depressions, if treatment is only made available. Youth with serious mental health problems are often first identified in the juvenile justice and the children's protective services systems. These are key points at which mental health services should be made available. In addition, diagnostic and early intervention services should focus on school systems. Presently the clinical mental health resources in Galveston County for children are very limited with the UTMB's four (4) beds for children, the Gulf Coast Center's Children's Services in League City, Family Service Center of Galveston County with locations on the Island and in Texas City, Devereaux Hospital in League City, and various private practitioners. As previously noted, Galveston County does fund FSCG to locate two mental health clinicians in their Juvenile Detention Center, and a ½-time clinician to work with youth on probation on the Island. These resources provide a core of expertise upon which to build.

Con'd Galveston Needs

While Galveston Alternative School is not a mental health program, they accept youth with serious personal, social, and mental health needs. In the context of a residential school program, they provide youth with an environment in which they can thrive, discipline with nurturing, and referral to mental health outpatient services when needed.

In general, the following efforts should receive support:

- Collaboration – Efforts to improve the collaboration and service integration among public and private providers of mental health services.
- Identification – Efforts for improved and systematic ways to identify youth in need of mental health services.
- Diversion – Efforts to divert youth with mental health needs to appropriate treatment services in the community.
- Treatment – Efforts to provide needed mental health services to youth and their families within the juvenile justice system.

In the general population of Texas in 2003, the Mental Health Association estimated that there were 151,464 children in the state who had a significant impairment due to mental illness, but only 39,598 (26%) received any services. In Galveston County, the same report found that of 1,688 youth in need, only 181 (11%) received services. While this data do not speak directly to youth in the juvenile justice system, there is reason to suppose that a disproportionate number of youth with mental illness do come in contact with the police and courts. If youth with mental illnesses were identified early and appropriate mental health services provided, some youth would not advance further in the juvenile, and later, adult justice systems.

There has been considerable attention given to the mental health needs of juveniles in the justice system. A recent article in the Houston Chronicle (11-28-2009) reports that an increasing number of youths appear to be in trouble with the law because of their underlying mental health needs. In 2008, 32% of juveniles in the juvenile probation pipeline had diagnosable mental health needs, and about 60% of youth in Texas Youth Commission facilities have mental health diagnoses, suggesting that there is a correlation between mental health needs and seriousness of offenses. In 2001, the Texas Criminal Justice Policy Council estimated that 22.4% of Texas youth under the supervision of a juvenile probation agency had identifiable mental health needs, so the numbers appear to be rising. This scenario is generating interest in collaborative efforts with mental health providers.

Con'd Galveston Needs

Many children depend on mental health services to help them function in school, in their family, and among peers in the community. Youth who do not receive essential medication and accompanying cognitive-behavioral therapy frequently find themselves expelled from school, delinquent in the community, or runaways. The suicide rate among children is a major cause of death. Approximately half of youth in the juvenile justice system have at least one mental disorder (Juvenile Probation Commission, 2003).

Understanding the link between the prevalence of mental health issues in school-aged children and in the juvenile justice population demonstrates the need for family-based prevention initiatives which have a dual benefit to the society and to the individual.

In summary, there are various mental health resources in the county but they are limited, specialized, and usually not aimed at pre-delinquent children or first-time offenders.

Efforts and funding are needed to accomplish the following:

- More collaboration between mental illness service providers, schools, and law enforcement.
- More individual, group, and family mental health outpatient services for youths.
- Substantially more public education about mental illness and its treatment, especially as it relates to youths.
- More outpatient treatment options available to the court system for youthful offenders who are exhibiting mental illnesses, can be safely maintained in the community, and who may not benefit from confinement in a detention facility.
- Community-based group programs that teach essential behavioral skills.
- Innovative interventions, such as building partnerships between police officers and mental health professionals.
- Programs to insure that children with mental illness are appropriately diverted to treatment settings and away from an overcrowded detention system.
- Outpatient counseling for adjudicated youth charged with sexual crimes, and for children ages 12 and under who have been chronically acting out sexually.

Needs Statement

Brazoria County

Brazoria County is situated on the lower Texas Gulf Coast and consists of 1,597 square miles. The county is home to a mixture of both rural and urban communities. It is bordered by Harris, Ft. Bend, Matagorda and Galveston counties. The northern part of the county has experienced phenomenal growth during the last few years. The City of Pearland experienced a 63% increase in population over the last six years (from 56,690 in 2004 to 92,600 in 2009 within the city limits). Along with growth comes the need for hospitals. Hospital Corporation of America (HCA), Memorial Hermann's Outpatient Imaging Center and St. Luke's Community Emergency are excellence medical facilities.

The 2010 census Brazoria county population count was 313,166. That means that there are 78,291 people in Brazoria County affected by mental illness (National NAMI: 1 in 4 people are affected by mental illness). There are two distinct types of mental illnesses. First, is serious to persistent mental illnesses which are caused by psychological, biological, genetic, or environmental conditions, and second, situational mental illnesses due to severe stress which may be only temporary. Serious mental illness consists of Depression, Bipolar disorder, Obsessive Compulsive disorder (OCD), Schizophrenia, Anxiety disorders, eating disorders, personality disorders, ADHD and more.

Anyone can have mental illness, regardless of age gender race or socioeconomic level. Many people suffer from more than one mental disorder at a given time. Nearly 45% of those with any mental disorder meet criteria for two or more disorders, with severity strongly related to co morbidity. Mental illness can and should be treated. Nearly two-thirds of all people with a diagnosable mental disorder do not seek treatment. That means 26,097 people in Brazoria County may be seeking treatment within a year. With proper treatment, many people affected with mental illness can return to normal, productive lives.

7.5 million Children are affected by mental, developmental or behavioral disorders (NAMI Texas). There are 2,585 youth in the Texas Youth Commission and (50%) and nearly half referred to the Juvenile Probation Commission (48%) had a mental illness (Mental Health Association in Texas). In the general population of Texas in 2003, the Mental Health Association estimated that there were 151,464 children in the state who had a significant impairment due to mental illness, but only 39,598 (26%) received any services. While this data does not speak directly to youth in the juvenile justice system, there is reason to suppose that a disproportionate number of youth with mental illness do come in contact with the police and courts. If youth with mental illnesses were identified early and appropriate mental health services provided, some youth would not advance further in the juvenile, and later, adult justice systems.

Con'd needs statement Brazoria County

Community based services designed to break longstanding behavioral patterns that result in criminal justice involvement are needed. The 2011-12 Brazoria County Community Plan representatives recognized the following community needs;

1. There is a need for funding to expand wraparound services to reduce recidivism and alter the trajectory of families destined for criminal justice involvement. Community based sentencing is proven far more effective and cheaper than jails.
2. People experiencing mental health issues who reach out for help are directed to an up to 2 year waiting list. While waiting the possibility of crisis, hospitalization, jail, homelessness, etc. become a reality. Local MHMR authority continues to serve almost double the clients state funds provide for. State funding is stretched to maximum capacity and local resources are limited. This places an additional burden on local mental health/recovery non-profit agencies.
3. Crisis responsive services are the focus of mental health services for Brazoria county residents. Crisis oriented services versus prevention services are a huge concern when healthy community approaches are proven to reduce the number of catastrophic incidences. With prevention, education and information families can look to healthy living styles. Without these elements the possibility of crisis only related services continues to be the norm for many in Brazoria County.
4. Inpatient psychiatric beds remain a need for Brazoria county. In many instances, beds are limited and scarce with mental health deputies calling area hospitals to find an open bed for people who are a danger to themselves or others. Inpatient psychiatric treatment is usually not an option until someone becomes a danger to self or others.
5. Veteran access to mental health programs and benefits are often complicated and overwhelming to those in the most serious need. Additional Veteran programs need to be available and more accessible. County collaborative Veteran's initiatives do exist but are limited and some are time restricted grants.
6. Therapy/counseling services are extremely limited. If families are fortunate enough to find these services then transportation many times becomes another challenge within a county that covers 1597 square miles.
7. Families from all socio economic levels need education and support so they can learn how to navigate the county mental health system when trying to get their family member care and services.
8. Suicide prevention education through the state is a system or concept of volunteer organizations and individuals. With little to no funds that trickle down to county suicide prevention education training is difficult to meet the need in comparison to Brazoria county deaths by suicide statistics
9. Individuals affected by mental illness are in need and interested in support groups but face many challenges when it come to transportation and location of services.

NAMI Gulf Coast Programs

Information and Referral: NAMI GC has a information and referral line that assists families with immediate crises, and offers support and outreach to families between meetings and education classes. Many times this lifeline is key in creating a connection for family members to gain support and education.

Partnerships Family Education: NAMI GC has developed an education curriculum for family and friends who are trying to cope with a friend or family member who has schizophrenia, depression or bipolar disorder. This 12 hour workshop pairs a trained family member with a mental health professional, both teaching family members about mental illness and its impact on families.

Visions for Tomorrow: The VFT program, modeled after our highly successful Partnerships program, is geared toward families who have a child and/or adolescent exhibiting signs of an emotional disturbance. The program was developed by our parent organization, NAMI-Texas, and is unique in its provision of child-care stipends. This allows parents to attend who couldn't otherwise afford to pay for child care.

Children's Services: NAMI GC offers a trained staff member to offers additional support and assistance to families trying to find resources while working with families to help them to become informed about the Admission, Review and Dismissal (ARD) process in local ISD's.

Family and Individual Support: NAMI GC coordinates monthly family and individual's with mental illness support groups called *Care and Share*, 30 per year, at various locations throughout the community. Families are trained to facilitate other family members in an effort to share support, ideas and experiences. The outcome: a wiser, more confident family members. Individuals also meet for support groups that are facilitated by mental health professionals with an opportunity to share experiences with others who are working on recovery.

Westover Cove: Over ten years ago, NAMI Gulf Coast was the driving force behind establishing a 15 unit apartment complex that provides affordable housing for people with mental illness. This project never sees a vacancy and continues a waiting list. NAMI GC remains active on the Westover Cove Board and continues to support resident events and the success from this endeavor.

Programs

Newsletters: NAMI GC distributes over 1100 monthly newsletters to families and people affected by mental illness, community, organizations and professionals in need of mental health information about local, state and national issues.

Great Minds Think Alike (GMTA): A new education awareness program designed for youth diagnosed with a mental illness ages 13-18. GMTA was designed by NAMI Texas to provide youth with the skills necessary to take a leadership role in their own recovery and to aid others who suffer from the symptoms of mental illness.

Furniture Bank/Voucher Program: As treatment takes effect and individuals and families prepare to get on with their lives, they often find that they don't have the living necessities that most people take for granted. NAMI GC operates a Furniture Bank and Thrift Store that can assist those who are ready for independent living. Both offer assistance in providing vouchers for quality used furniture, household items, food and clothing.

State Hospital Outreach: NAMI GC purchases headset radios, puzzle books and hygiene products for individuals at Austin State Hospital, delivered in time for Christmas. For many, this was their only holiday gift.

Advocacy: NAMI GC is dedicated to advocating for individuals to receive services, regularly educating local officials on mental health issues and supporting NAMI Texas and NAMI National efforts to promote awareness on mental health issues affecting everyone.

Resource Manual: NAMI Gulf Coast provides a manual that offers local resources for the two county area NAMI GC offers services to. In addition to local resources, NAMI GC added a crisis portion for family members in Galveston and Brazoria counties who need guidance when a loved one needs a mental health deputy, hospitalization and/or is in jail.

Community Mental Health Conferences: In 2012 NAMI GC engaged the community for family and professional for mental health community education. Participant chose from several education tracks and options. The result is a wiser, knowledgeable and engaged community.

Programs

Emergency Financial Assistance: Individuals and families sometimes need financial assistance for basic necessities like shelter, and electricity. For many, NAMI GC is the last resort. This program is available for individuals and families looking toward stabilization and recovery. Many individuals would be homeless or incarcerated without such assistance.

Individual Holiday Activities: The holidays often affect the stability of many people with mental illness due to isolation and loneliness. NAMI GC hosts events throughout the year to help lighten the burden of the holidays; at no cost to individuals and families. Several of these are offered throughout the year all with activities that include a D.J., games, prizes, food and dancing.

Fill-A-Sack: Families, friends, interested community members and NAMI GC provides hygiene items, nonperishable's, small novelties, costume jewelry, make up, wallets, playing cards, etc. These items are placed in sacks decorated by and delivered to people with mental illness. Over ten years ago, NAMI GC started this event with only 25 sacks. In recent years, has supplied over 600 sacks to consumers in need.

Suicide Prevention and Education: NAMIGC recognizes the need for suicide education and prevention. NAMI remains dedicated to this endeavor with in the two county service area and continues to provide ASK classes as preventative education tools for the community.

Mental Health First Aide: A groundbreaking public education program that helps the public identify, understand, and respond to signs of mental illnesses and substance use disorders. Mental Health First Aid is offered in the form of an interactive 12-hour course that presents an overview of mental illness and substance use disorders in the U.S. and introduces participants to risk factors and warning signs of mental health problems, builds understanding of their impact, and overviews common treatments. Those who take this course certify as Mental Health First Aiders learn a 5-step action plan encompassing the skills, resources and knowledge to help an individual in crisis connect with appropriate professional, peer, social, and self-help care.

Supported Work Program: In May of 2011, NAMI GC opened a Thrift Store as a means to generate additional income as well as provide an opportunity for individuals affected by mental illness to come, work and volunteer in a place where they feel they are doing some thing that has value. The hope is that they will gain confidence and fellowship and move to a greater sense of independence.

NAMI GC 2012 Executive Board

SLATE OF OFFICERS

President: Lodie Massey- UTMB retired

Vice President: Linda Cantu - BristolMyers Squibb

Treasurer: Dean Price - BASF Corporation Senior Operations Engineer

Secretary: Tricia Garza - UTMB

AT LARGE BOARD MEMBERS

Andrea Hazlitt Retired DOW Chemist

Louis Sanchez Eastman Chemicals Inc.

Eddie Karbowski Retired

Carla Sanchez RN Family Practice

Tom Moran Retired Engineer

Irene Stone Retired RN

Mary Ferree Educator

Janice Freeman Brazoria County Juvenile Justice, LCSW

Reathea Alexander Retired Teacher

Walter Dean Retired DOW Chemical Engineer

NAMI GC Staff

Jeanette Taylor, Executive Director

Amanda Benson, Director of Administration

Allison Baker, Director of Development

Jan Melis, Director of Education and Support

Carolyn Karbowski, Emeritus and Family Support

Cindy Lunsford, Accounting

Making Progress

2012 Accomplishments

- NAMI GC continues Westover Cove Board apartment representation.
- NAMI GC in collaboration with local agencies hosted a Developmental Asset Conference with 85 people attending.
- Staff, families, board members and individuals attended the Department of Health and Human Services Stakeholder meeting in Houston.
- NAMI GC participated in the annual HEMIS homeless county for Brazoria and Galveston counties.
- NAMI GC participated in United Way partnerships and events.
- Participated in the Galveston County CRCG (Community Resource Coordination Group) monthly meetings for local resources.
- Created an agenda for Family and Individual Support Group model.
- NAMI GC held bi-monthly board meetings with over 85% attendance from the board.
- NAMI GC participated in the first Brazoria county transportation advisory committee.
- NAMI GC held the annual joint support meeting and volunteer recognition dinner in Alvin with 37 people attending.
- NAMI GC board and staff attended the MHA luncheon.
- Provided mental health information about rural areas to the Ryan White AIDS Foundation in Houston.
- NAMI GC set up E-bay and Pay Pal for website and newsletter donations.
- Started Instagram, Pinterest and Twitter accounts for NAMI GC.
- NAMI GC board finalized and approved “Policies and Procedures”.
- NAMI GC participates in the Galveston County monthly Veteran Task Force Meeting for Galveston County.
- Collaborative efforts with NAMI GC and MHMR and met with the South Texas Behavioral Network to discuss the upcoming Capitol Rally Day.
- NAMI GC staff prepared 20 bags for ASH for the holidays.

More Progress...

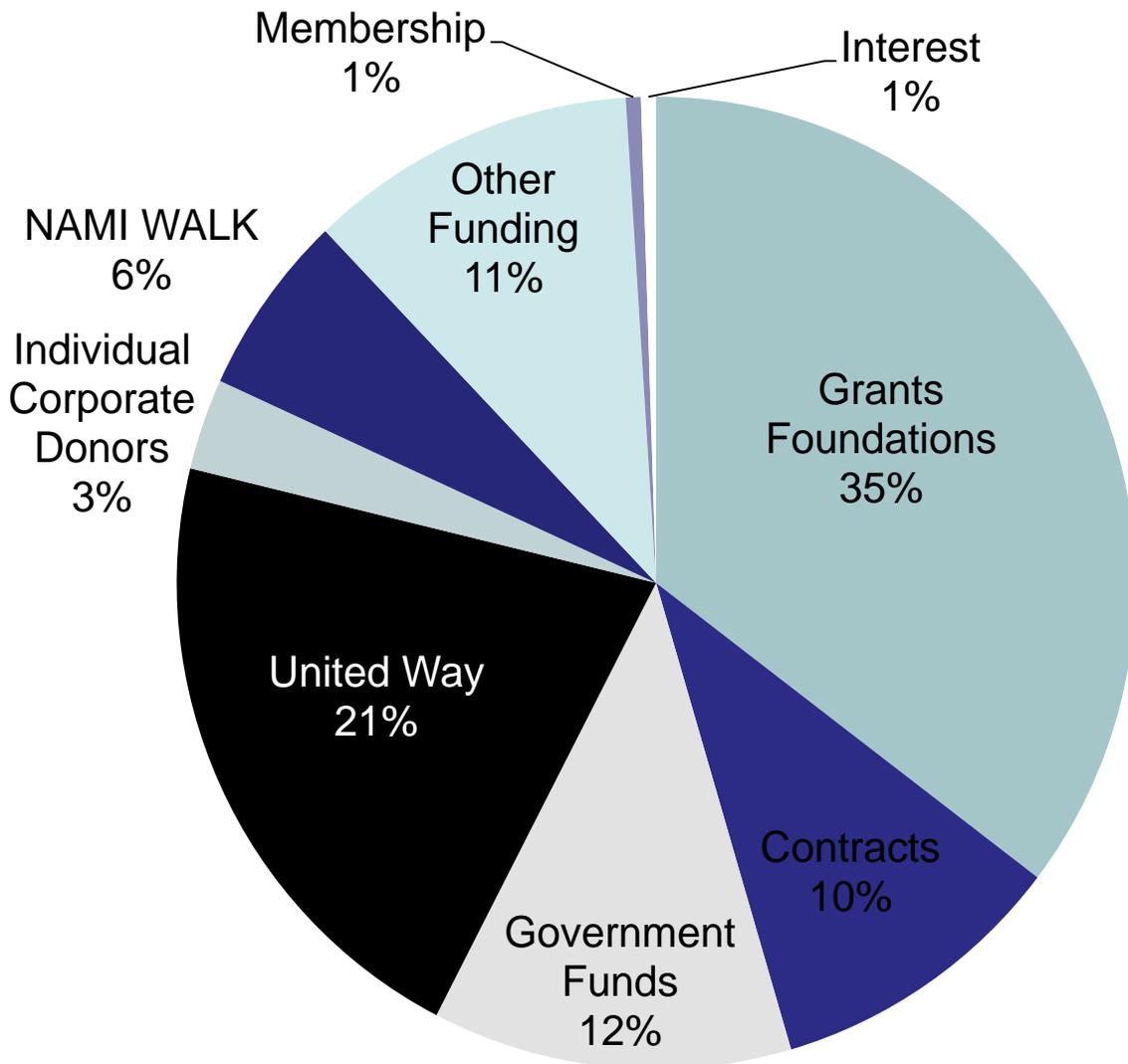
- NAMI GC participated in monthly MHTF/MHPA (Mental Health Professionals Association) meeting.
- The NAMI GC payee program was able to graduate an individual living with mental illness through support to become his own payee.
- NAMI GC staff participated in the monthly NAMI National calls.
- Staff hosted a craft day for the thrift store.
- Hosted the NAMI Kick-Off Luncheon with 68 people attending.
- NAMI GC staff and volunteers hosted the Mainland Center Hospital skills fair for employees with 598 people attending.
- Board and staff finalized an three year strategic plan.
- NAMI GC staff attended numerous trainings on volunteer management.
- Staff participated in the Mainland Medical monthly Senior Breakfast.
- NAMI GC staff and board provided UTMB PA students with the ASK Training for 85 students.
- Collaborated with representatives from One Voice to discuss advocacy initiatives for the next legislative session.
- NAMI GC held the annual NAMI National WALK with over 300 people attending.
- Board members and staff attended the League City council meeting to address transportation needs/contract for people with disabilities.
- NAMI GC staff participated in numerous webinar trainings about grants and donor management.
- Staff and board members attended meetings, trainings and the One Voice conference about Waiver 1115.
- NAMI GC held a Luau event for 97 individuals with mental illness with 10 volunteers.
- NAMI GC staff held a training for local ISD Counselors as part of the Mental Health Collaborative.
- NAMI GC staff attended the WALK manager conference in Chicago.
- Revised the NAMI GC website.
- 113 people attended the Individual Christmas Dance at Rungee Park

More Progress...

- NAMI GC participated in creating and the distribution of the NAMI TX local survey for the upcoming legislative session.
- Board and families attended a stakeholder meeting for the upcoming 2012 Legislative Session.
- NAMI GC staff attended the “Judicial” training for local judges and county representatives hosted by NAMI TX.
- Created a 2012 Walk video published on u-tube.
- NAMI GC staff attended the NAMI Texas State Board meeting and offered a NAMI GC affiliate update.
- NAMI GC established a collaborative grant with a local ISD for emergency assistance and mental health educational programs.
- NAMI GC families in collaboration with Family Service Center prepared Digital Storytelling for on-line viewing.
- NAMI GC started a Resale Shop volunteer day for individuals and families affected by mental illness.
- NAMI Gulf Coast hosted a mini conference “Changing Attitudes! Changing Lives!” with 79 people attending.
- NAMI GC Executive Director attended the NAMI National Executive Director Conference in Phoenix.
- NAMI Gulf Coast staff attended the annual Power Tools for Non-profits conference hosted by University of Houston.
- NAMI GC staff attended the NAMI TX state conference.
- NAMI GC staff participates in the monthly NAMI Texas affiliate call.
- Families, staff and volunteers participated in the annual Fil-a-Sac event filling over 600 sacks with personal hygiene items and goods for individuals.
- NAMI GC staff and volunteers hosted the St. Michael’s Thanksgiving dinner for individuals with 106 people attending.
- Coordinated and attended ASK Bilingual Suicide Prevention training with 33 people attending at Amistad church.
- Awarded “Affiliate of the Year: at the NAMI Texas annual conference.

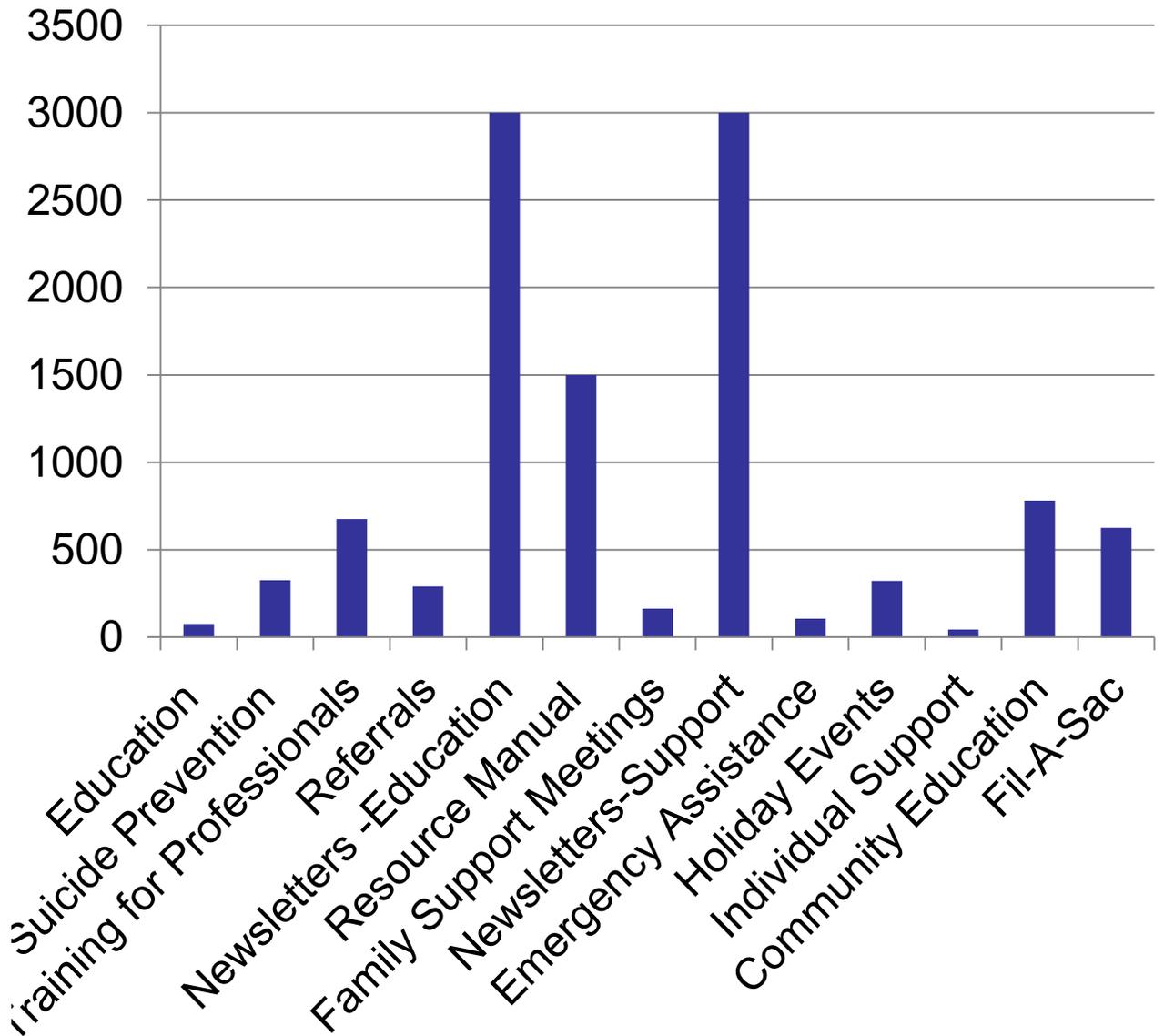
Percentage of Funding

Funding Sources



Who we helped in 2012

Numbers Served (unduplicated)



Special thanks to our supporters!

Bill & Judy Biggs
Boeing Community Employee Fund
Brazosport Regional Healthcare
Brazos Fasteners
Bristol-Myers Squibb
Community Health Choice Foundation
Michael Dupart & Mary Lou Flynn Dupart
Fabric of America Fund
First Presbyterian – Galveston
Gulf Coast Center
Houston Endowment
Janssen Pharmaceuticals, Inc.
David Hughes
Jeanette Smith
Barbara Waugh
Margaret Lindsay
David Gaines
Mathias Doring
Sir Malcolm Sargent Chapter
Kara Tech
Kempner Fund
Lowery Foundation
Mainland Medical Center Hospital
Moody National Bank
Moody Foundation
Moody Methodist Permanent Endowment Fund
Pfizer
Marion Moore
Gulf Coast Combined Federal Campaign
Luis and Carla Sanchez
Louise Talen
Bastop Bayou Church
W. M. Dean
Lonnie and Andrea Hazlitt
Rockwell Fund, Inc.

Simmons Foundation
St. Michaels Episcopal Church LaMarque
Thrivent Financial
United Space Alliance
United Way-Brazoria
United Way-Galveston
United Way-Galveston County Mainland
UTMB
Freeport LNG
Blue Cross Blue Shield
Mainland Medical Center
Alvin Community College
Dr. Michael and Mrs. Irene Stone
Simmons Foundation
Steve Polemenkos
Dr. Dwight Wolf
Mike and Barbara Winburn
Kenneth Coleman
Jerry Leist
Perry and Evelyn Dawson
Marilyn Jewel
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