The BUILD HEALTH Challenge®

Addressing Mental Health Through Community Connection

SAN ANTONIO, TEXAS

Bridges to Care San Antonio (BTCSA) is a community-rooted mental health initiative led by the National Alliance on Mental Illness of Greater San Antonio in partnership with University Health and the San Antonio Metro Health Department, and supported by The BUILD Health Challenge®. Working across the city's historically underserved East and Westside communities, the collaboration trains faith leaders, congregants, and teens to recognize mental health needs early, reduce stigma, and connect neighbors to care. Through culturally responsive programming with Black and Hispanic congregations and a peer-to-peer ecosystem of Wellness Champions, BTCSA is building a community of mental health support across San Antonio.

COMMUNITY IMPACT

- Built a movement of Wellness Champions — growing by nearly 30% to more than 1,500 during the award period — who offer mental health support in 19 congregations.
- Trained 215 Teen Mental Health Champions since 2025, with programming active in schools under formal MOUs with school districts.
- Developed a citywide "bridging map" where mental health connections are tracked across San Antonio, building a data feedback loop to drive ongoing program improvements.
- Launched San Antonio's first Spanish-language mental health Wellness Champions program, breaking cultural and linguistic barriers for Hispanic congregations to more easily access resources.

IN PARTNERSHIP WITH

NAMI Greater San Antonio — National Alliance on Mental Illness
City of San Antonio Department of Human Services
H. E. Butt Foundation
WestCare Foundation
University Health System
City of San Antonio Metropolitan Health District

Faith Leaders are First Responders

In San Antonio, as in many communities, the church is where many people turn first when they are facing a problem or need help. Church pastors earn trust by showing up for their congregation, their neighbors, and anyone who walks through the door.

"Faith leaders operate as first responders," said Genesis Williamson, San Antonio Cohort Lead at National Alliance on Mental Illness (NAMI). "When people are unsure about going to professional help — or it's not something they've ever even known or thought of or considered or even cared to consider — they're going to faith leaders, they're going to their fellow congregants."

NAMI of Greater San Antonio leans into those relationships through Bridges To Care San Antonio (BTCSA), an initiative that empowers everyday people to become mental health Wellness Champions for themselves and their communities. In San Antonio, there are distinct racial, religious, and cultural communities on the Eastside and Westside. "When we say 'Westside,' what we really mean is our Hispanic Latinx populations," said Williamson. On the Eastside, the congregations are predominantly Black and African American. This project was intentional about being led from within. Pastor Carolyn Bailey-White is a lifelong Eastside resident; Pastor Norma Fuentes Quintero has been pastoring on the Westside for 19 years.

In faith-based communities, the stigma around mental health can be theological. Both Pastor Fuentes Quintero and Pastor Bailey-White grew up in faith traditions that equated mental illness with a failure of faith. "My upbringing and my denomination taught me that all things mental health were demonic and spiritual warfare," recalled Pastor Fuentes Quintero. She describes San Antonio as a place where mental health was often not allowed to exist as a concept: "Growing up, we were told, 'just get over yourself. You're being overdramatic.'" She estimates that 90% of the people in her own congregation have experienced multiple traumas in their lifetime, a reflection of the realities of everyday life on the Westside of San Antonio.

Change starts with people who already care about each other. In San Antonio, people have always been there — in the pews, on the steps, in the neighborhoods surrounding their churches. BTCSA saw the support residents were already providing each other and sought to strengthen it. "We want congregant-to-congregant collaboration," said Williamson. "Leaders who can identify people in their congregations who want to be trained, want more knowledge, and have the compassion to do the work." In San Antonio, compassion was never the question; the tools were.

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— GENESIS WILLIAMSON
National Alliance on Mental Illness (NAMI) of Greater San Antonio

Willing and Ready Mental Health Leaders

For generations, faith leaders have been helping congregants navigate mental health issues, but feeling confident about doing that work was another question. Pastor Bailey-White recalled sitting in on a class of pastors who were asked how prepared they felt to handle mental health issues, and 80% said they did not feel comfortable. Yet people kept coming with mental health needs after the COVID-19 pandemic — more than ever before.

The dedication to the community was steadfast, but the churches needed tools, training, and a system to make it sustainable. And for Spanish-speaking communities on the Westside, there was a particular need for a culturally and linguistically appropriate entry point to mental health support.

The BTCSA program started in 2021 and initially trained a cohort of congregations as Wellness Champions to build a mental health program in their church, including learning strategies for trauma-informed practices and companionship for people with mental health concerns. While the training was successful, congregations were expected to take over the work without much ongoing support. People completed certifications and then were left without direction, a next step, or anyone checking back in. Some congregations felt the bottom drop out. Some stopped picking up the phone.

"This work takes more than what could be expended in a volunteer type of capacity," said Williamson. "You need individuals who can really dedicate their time to connect and maintain consistency in engaging the congregations. You need the space and time to walk alongside them in order for this to be effective."

To walk alongside congregations, the BTCSA team realized they needed to make some changes to ensure congregations would feel supported in their mental health journeys.

A Pivot for Sustainability

BTCSA brought together two key partners: University Health, whose expertise in data and evaluation would help measure what was working, and the San Antonio Metro Health Department, whose citywide health data could be used to guide and evaluate the work. That partnership became the foundation of a collaborative recognized and funded by The BUILD Health Challenge® (BUILD) in 2023.

Pastor Bailey-White was there from nearly the beginning — not only as staff, but as someone who needed what the program offered. "What I did not realize is that, at that time, I had someone in my household really suffering from a mental illness," said Pastor Bailey-White. "I felt isolated. Then I started going to the programs with NAMI and Bridges to Care, and I started doing the training, and it helped me figure out what I could do with my own family member."

Pastor Fuentes Quintero came to this work when a friend encouraged her to attend the annual NAMI conference. She heard a priest tell the room that when five o'clock came, he closed the door, went home, and dealt with his chronic depression. Pastor Fuentes Quintero went back to ask a respected leader for his thoughts on mental health. "Oh, I believe in mental health," she recalled him saying. From that day forward, she wanted to promote mental health.

When Genesis Williamson joined the team at NAMI in 2024, she quickly identified strategic opportunities to improve the program. So the team stopped, listened, and rebuilt. "We did listening sessions with some of the congregations that had been a part of the program from the very beginning," said Williamson. "From there, we revamped the whole program, which is where the sustainability plan was developed. It was developed from the voices and the feedback of the community."

Williamson developed a four-phase sustainability model — Repair, Foundational, Collaboration, and Partnership — grounded in what congregations said they needed. Before any training begins, every congregation now goes through a needs-based assessment that identifies challenges, strengths, and community needs: the answers shape everything that follows. Once the needs assessment is complete, congregations are grouped into cohorts for training and peer support. This is a strategic method to forge connections between congregations that wouldn't otherwise have opportunities to work together. The congregations build a vision for their own mental health programs, often including support groups or training.

Going back to re-engage congregations who previously participated in the program required honesty from organizing partners. Pastor Bailey-White doesn't soften it: "I had to let them know that things had changed, that we did have a sustainability plan, that we were going to empower them to bring their own vision to fruition. And so once I did that, a lot of people were willing to re-engage because they still knew their congregation needed the help. That hadn't gone away."

Today, Bridges to Care is working with 19 congregations with the new plan in place.

The partnership between BTCSA and University Health has led to the use of real-time data to make improvements. "Dr. Carey [Suehs] has created a mapping visual where we can see connections and people utilizing their training on the map of San Antonio," said Williamson. This internal "heat map" allows the team to see what's working, where their community strengths are, and what changes they need to make. In addition, their partners have helped them develop questionnaires and surveys that provide feedback on courses. As Williamson described: "With our pre- and post-training surveys, we're able to share the impact of the trainings and how they're helping individuals to feel more confident in helping others out and connecting them to resources."

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— PASTOR CAROLYN BAILEY-WHITE

Building a Culture of Mental Health Awareness

BTCSA is helping congregations implement trauma-informed approaches to their work and equipping them to help congregants and the larger community address mental health issues. Williamson, a licensed professional counselor, explained that, "You can have a wealth of licensed professional counselors in your congregation. But if your culture is not communicating that it's safe to be honest here, that it's safe not to be okay here, people will still not engage with those who are trained. We specialize in building culture."

Culture spreads outward through a layered model — congregant to congregant, congregation to congregation, and faith community to faith community — so that churches can rely on each other and weave a supportive network of mental health resources for the entire community. The BTCSA cohort model helps build connections between congregations, which benefits congregants. For example, if you don't want to attend a recovery group at your own church because your family is there, there's one available across town in a different church.

Representation and shared identity are also baked into the strategy. As Williamson said, "If you don't have people in your organization who look like those you're trying to reach, they look at your organization and say, 'this isn't for me.'"

The rebuilt program. The expanded curriculum. The hundreds of graduates. All of it came from going back, listening to congregations, and building what the community asked for.

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Expanding To Youth And Forging New Relationships

The reach of BTCSA now extends beyond the pews. After seeing success in congregational settings, the partners expanded their work by developing a program to cultivate teen Wellness Champions by establishing memoranda of understanding (MOUs) with local school districts.

This initiative now trains students ages 12-18 and gives them the language and tools to talk openly about mental wellness with peers. Since January 2025, 215 teens have graduated from the training, with more schools signing on. University Health is currently studying the impact of the program through before-and-after surveys.

The team is also seeing positive impacts at the church level. Pastor Bailey-White witnessed one a few months ago — a pastor standing at his pulpit, telling his congregation he was calling his therapist because he was grieving and struggling. The congregation cheered him on. She was amazed: "That let me know that not only was he trauma-informed, but the transparency that he had to be able to share that — this was something that was not commonplace in a congregation. I know that we are making headway as far as stigma is concerned in the religious community."

The BTCSA team sometimes describes this work as "the cavalry" arriving. "When people didn't think that the cavalry was coming for them, Bridges to Care has become the cavalry for our communities," said Pastor Bailey-White. "Now they know that not only are we coming for them, but we're preparing and training people to be the cavalry for them."

The vision for the next two years is about visibility and increasing awareness of the work congregations are doing beyond their immediate neighborhoods. BTCSA is preparing to integrate its mental health training and resources into clinical settings at University Health Clinics. Partners plan to expand their work into the Southside and Northside areas of San Antonio next. With a train-the-trainer model already in motion, they'll be equipping congregations to carry the work forward on their own and in partnership with other congregations.

The refined model is yielding results: the first two Spanish-language cohorts of Wellness Champions launched in 2026. In addition, denominations that never spoke to each other are now collaborating across the city because of the cohort model. For example, Crossroads, a predominantly white congregation, and the New Creation Christian Fellowship, a predominantly Black church, are now volunteering for events and supporting each other's congregations. Williamson described the budding relationship between the two congregations as an example of what's possible: "Collaborations — that wouldn't have happened if we had not brought them together in this cohort — are happening."

BTCSA is continuing to find new ways of bringing mental health awareness and training across San Antonio. "The wealth is spreading both geographically and in responsibility," said Williamson. By listening when something wasn't working, committing to their community members, and responding to the needs of San Antonio, BTCSA is there to support its community in reducing the stigma around mental health and training peers and faith leaders to have honest conversations about it every day.

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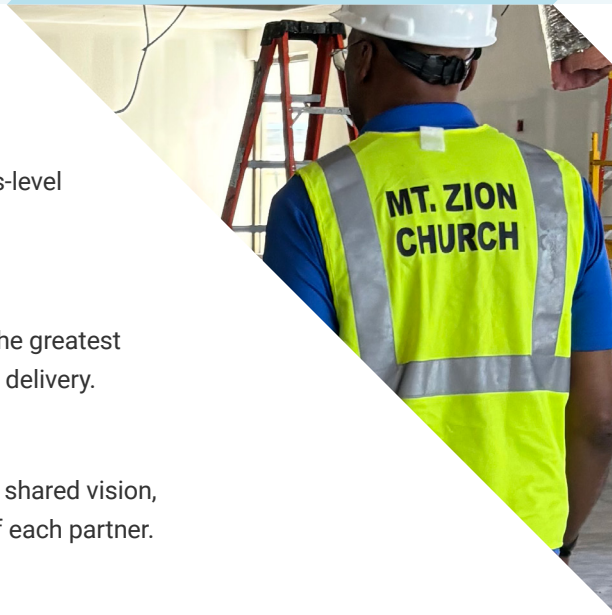
The BUILD HEALTH Challenge®

The BUILD Health Challenge® (BUILD) invests in multi-sector, community-centered partnerships that transform systems and elevate community power to advance health and racial justice.

Through learning, connecting, and amplifying these local initiatives, BUILD champions the national movement for health equity and moves attention, resources, and action upstream to support vital community conditions for health and well-being across the United States.



The BUILD Model for Transforming Community Health

Bold
Drive fundamental shifts in policy and sustainability, creating systems-level changes through a lens of justice, equity, diversity, and inclusivity.

Upstream
Focus on the social, environmental, and economic factors that have the greatest influence on the health of a community, rather than on access or care delivery.

Integrated
Align the practices and perspectives of cross-sector partners under a shared vision, establishing new roles while continuing to draw upon the strengths of each partner.

Local
Prioritize the diverse lived experiences, voices, and leadership of neighborhood residents and community members throughout all stages of planning, implementation, and evaluation.

Data-Driven
Use varied forms of data from both clinical and community sources as tools to identify key needs, measure meaningful change, and facilitate transparency amongst stakeholders in order to generate actionable insights.

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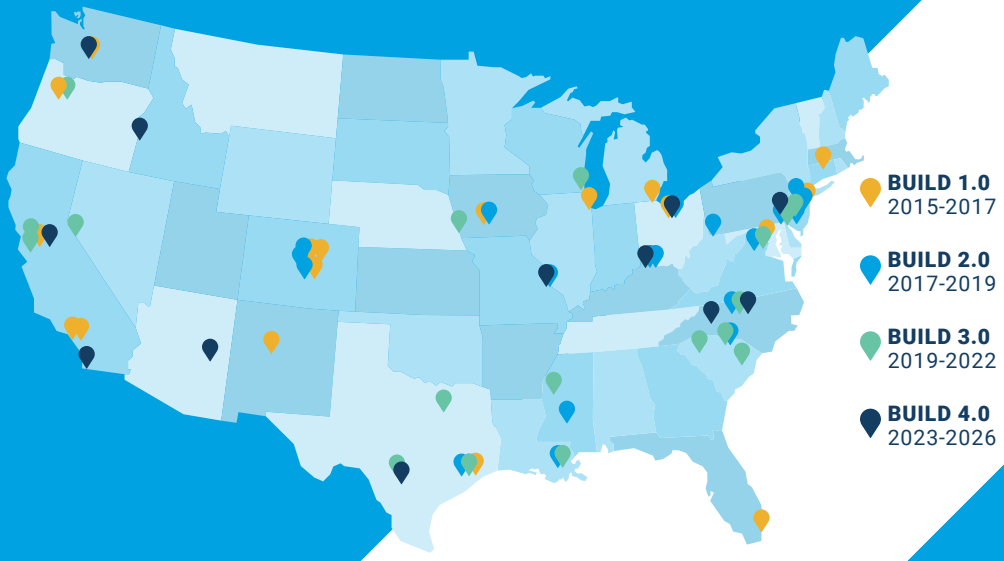

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