LEARNING AND WORKING DURING THE TRANSITION TO ADULTHOOD

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THE NEED

- Developmentally appropriate and appealing services and interventions for Transition Age Youth and Young Adults (TAYYA) are rare (Davis, Geller, & Hunt, 2006)
- < 67% of TAYYA with Serious Mental Health Conditions (SMHC) from MH or Special Education Systems complete high school
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FEW INTERVENTIONS IN THE EVIDENCE BASED PRACTICE PIPELINE



- "Check and Connect" program with inner city students with EBD
- Individualized Placement and Supports (IPS) model for YA with 1st Episode Psychosis
- No other work and education supports have undergone systematic development and testing with this age and disability group

LEARNING AND WORKING DURING THE TRANSITION TO ADULTHOOD RRTC



Research and dissemination activities are singularly focused on developing knowledge for and about developmentally appropriate services that help Transition Age Youth and Young Adults with Serious Mental Health Conditions successfully complete their schooling and training and launch their adult working careers.

APPROACHES TO WORK SUPPORT INTERVENTIONS





EXAMPLE; IPS FOR TAY IN RESIDENTIAL TREATMENT

PI – S. Wilkniss (Thresholds)

IPS-TAY is being pilot tested at Thresholds in Chicago

For 17-21year olds in residential treatment preparing for independent living

- IPS used for adults with SMI
- Adapted for those with 1st episode psychosis (young adults)
- Place-then-train
- Work closely with clinical staff
- Adaptation: **SUPPORTED EDUCATION**

DIFFERENCES BETWEEN TARGET POPULATION AND 1ST EPISODE

TAY IN RESIDENTIAL TREATMENT

- Developmentally delayed
- ↓ Parental supports
- Less school achievement
- Less access to positive social development settings
- Discouraged/hopeless
- Multiple conditions and life complexities

1ST EPISODE

- Developmentally typical
- Active parental support
- HS completion, some college common
- History of social inclusion
- May not have accepted condition
- Likely to have singular condition impacting functioning

IPS FOR TAY IN RESIDENTIAL TREATMENT

Primary adaptation: **PEER MENTOR**

- "Graduate" of residential treatment with success
- Encourage hope
- Provide sounding board
- Share experience

Peer Mentors work closely w/ employment specialist and clinical team

Goal: provide hope and concrete support while providing work experience to develop work skills and confidence

EXAMPLE; MULSTISYSTEMIC THERAPY LIFE COACH FOR YA IN JUSTICE SYSTEMS

<u>Co-l's</u> M. Davis (UMass), A. Sheidow (Medical University of SC)

MST-TAY is being pilot tested in New Haven, CT through Department of Children and Families

For 17-20 year olds recently arrested/released from incarceration

- MST for Juvenile Delinquents; Work with parents to change youth behavior
- MST-TAY works with young adults directly, offers MH and Substance Abuse treatment, integrated with recidivism reduction intervention
- **LIFE-COACHES**; Peer mentor on team

LIFE COACH Vocational Support



- Field based occurring in the homes and communities of MST-EA clients
- Cross-age peer mentoring slightly older emerging adults (without disabilities)
- Instrumental mentoring relationship and transition skill-focused on newly developing skills in young adulthood

Qualitative interviews with MST-TAY clients will help shape specific modifications to Life Coach roles to enhance vocational support

Life Coach+VS vs. Life Coach-VS + DVR

RESEARCH TO INFORM FUTURE INTERVENTIONS



- Malleable characteristics of high school students predicting school completion and post secondary vocational success
- Features of common vocational support models that attract/deter TAYYA and Latino TAYYA
- Adult supported education model; comparison of TAYYA to mature adults
- Behaviors and perceptions of TAYYA job seekers and employers employer perceptions of youth, MH, arrest history
- Analysis of Federal Programs that support education/employment in TAYYA