What constitutes evidence?

- Values-based/obvious; e.g. accessibility is needed
- Systematic practice variation with positive or negative outcomes, when statistically controlling for other factors; e.g. therapeutic alliance

Maryann Davis, PhD., Transitions Research and Training Center Youth in Transition: Building Bridges to a Successful Adulthood Denver, Colorado, February 16, 2012

What constitutes evidence?

- Clinical Trials
 - Detailed description (manual)
 - *Reliable method to confirm practice (fidelity)
 - Comparison groups (with and without practice)
 - Randomization to groups RCT
- Meta analyses analyze multiple RCTs

What constitutes evidence?

- When clinical trials are conducted within the age group (e.g. study of college intervention)
- When clinical trials are conducted across a variety of ages
 - Have enough individuals in the transition age group
 - Conduct analyses to detect age differences

Reported Age Differences

- Different alcohol treatment approaches more effective in younger than older adults (Rice et al., 1993)
- Effective recidivism reduction approach not effective in those under age 27 (Uggen, 2000)
- Treatment of 1st episode psychosis, younger adults benefitted most from supportive counseling, older adults benefitted most from CBT (Haddock et al., 2006)

What's Effective in Schools?

- Relationships support the creation of meaningful relationships as the foundation for students' engagement
- Rigorous/Inclusive/Supportive
 - Offer a challenging curriculum,
 - Well prepared teachers,
 - Inclusive environment, and supports

What's Effective in Schools?

- Relevance learning relevant to students' interests and future plans
- Address the Needs of the Whole Child consider any factors that
 - Interfere with a child's educational experience and
 - Prepare a student for functioning as a person, community member, and citizen
- Involve Students and Families in Transition Planning

Practices with Students with ED

Feature	ED	Other Disability
Get along with students/teachers>pretty		
well**	67%	85%
Partake in organized extracurricular group		
activity**	35%	47%
Attend special/alternative school**	22%	3%
Take all courses in special education settings*	16%	5%
School sponsored work experience*	17%	26%
Present but not participating in transition		
planning*	32%	23%

^{*}p<.05, **p<.001

Wagner, M., & Davis, M. (2006). How are we preparing students with emotional disturbances for the transition to young aMIDavis 2/F6/2012 Transition RTCal Longitudinal Transition Study-2. *Journal of Emotional and Behavioral Disorders*, 14, 86-98.

Models Under Development

MOST IN FEASIBILITY RESEARCH STAGE

Check and Connect

- Pairs students with Mentors
- Mentors cross between mentor, advocate, and service coordinator
- Mentor works with student/family for 2 years wherever student is
- Mentor monitors attendance/grades/problems (checks)

http://checkandconnect.org/

Check and Connect

- Talk
 - Student's school progress
 - * Relationship between school completion and the "check" indicators of engagement
 - Importance of staying in school
 - Problem-solving steps used to resolve conflict and cope with life's challenges
- Close communication with families

http://checkandconnect.org/

Multisystemic Therapy for Emerging Adults

MST-EA

Adaptation of Multisystemic Therapy – 17-20 year olds with serious mental health conditions and justice system involvement



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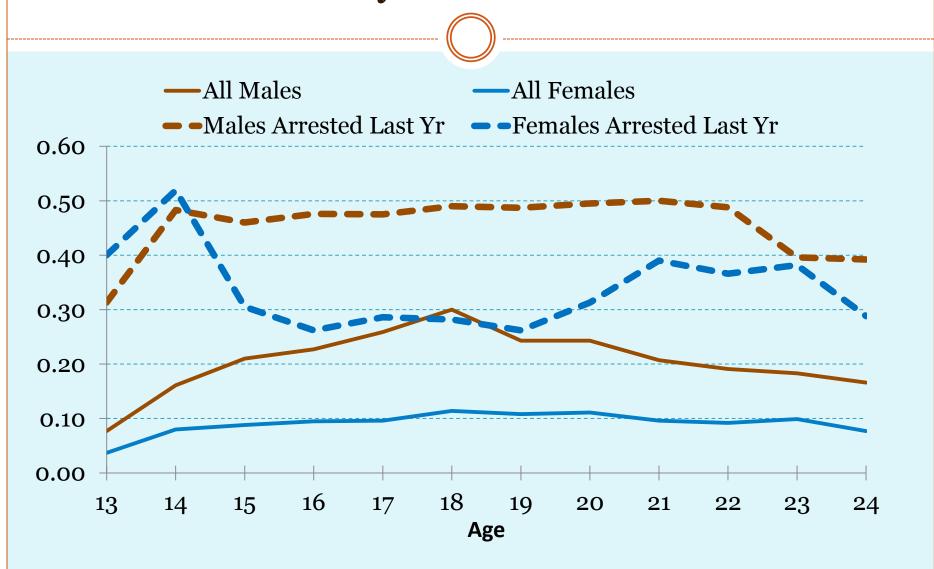
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Thanks to the emerging adult participants and their social network members

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Arrest Rate in Adolescent Public Mental Health System Users



Davis, M. Banks, S. Fisher, W. Gershenson, B., & Grudzinskas, A. (2007). Arrests of adolescent clients of a public mental health system during adolescence and young adulthood. *Psychiatric Services*, *58*, 1454-1460.

Malleable Causes of Offending and Desistance

Juveniles

- Antisocial peers
- Parental supervision/monitoring
- Unstructured time (school & afterschool)
- Substance Use
- Rational choice/distorted cognitions
- Attachment to school, prosocial peers, family

Adults

- Peers influence less
- Parental influence lessened/indirect
- Unstructured time (work)
- Substance Use
- Rational Choice/distorted cognitions
- Attachment to work, spouse

MST-EA



- 17-20 year olds with a diagnosed serious or chronic mental health condition
- Recent arrest or release from incarceration
- Living in stable community residence (i.e., not homeless)
- Having involvement from family members is neither an inclusion nor exclusion criteria
- Individuals who have children or are pregnant are not excluded

Standard MST

(with juveniles, no SMHC)

- Intensive (daily contact) home-based treatment delivered by therapists; one therapist/family caseload=4-5
- Promote behavioral change by empowering caregivers/parents
- Individualized interventions target a comprehensive set of identified risk factors across *individual*, *family*, *peer*, *school*, *and neighborhood* domains
- integrate empirically-based clinical techniques from the cognitive behavioral and behavioral therapies
- Duration; 4-6 months

MST for Emerging Adults

• MST-EA

- Treatment of antisocial behavior & serious mental health conditions
- Social Network
- Life Coach & Psychiatrist on MST Team
- Mental Health, Substance Use, and Trauma Interventions
- Housing & Independent Living
- Career Goals
- Relationship Skills
- Parenting Curriculum

MST-EA

MST-EA Life Coaches

- Young adult who can relate
- 2, 2hr visits/week, 1 hour curriculum, 3 hours fun
- Reinforces relationship skills in natural environment
- Curriculum topic chosen by client and therapist
- Supervised by clinical supervisor
- Vocational component being compared to VR services

Individualized Placement and Support for Transition Age Youth (IPS-TAY)

Rochelle Frounfelker, Marc Fagan, Marsha Ellison (Thresholds; Transitions RTC)

- Supported Employment/Supported Education for 1st episode psychosis
- Place then train approach
- Peer mentors inspire hope, discuss aspirations, barriers to aspirations, shares own experience, has fun
- Single Case Series design

Achieve My Plan (AMP)

Janet Walker & Laurie Powers (Pathways RTC)

- To increase participation in meetings
- 3 meetings with a "prep person" before initial meeting
- 1 prep meeting include support person of choice
- Youth communicates AMP process to family
- Prep person communicates with team in preparation and orientation
- Training for staff (i.e. school, program etc.)

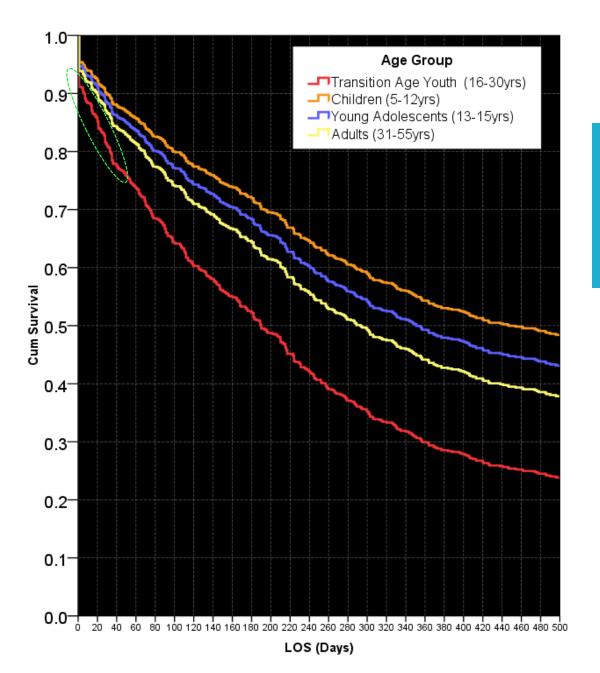
http://www.rtc.pdx.edu/AMP/pgVideo_AMP_ImportanceOfYPP.shtml

Motivational Enhancement Therapy for Emerging Adults (MET-EA)

- Outpatient psychotherapy most common intervention
- ≈760,000 17-25 year olds in outpatient psychotherapy yearly

Olfson, Marcus, Druss, & Pinkus, (2002)

Treatment ineffective if "dose" insufficient



Transition Age Youth Quickly Lost from Treatment

MET-EA

Definition Spirit

- **Autonomy** -responsibility for change is the client's
- Collaboration -working in partnership
- Evocation drawing out client's own thoughts/perceptions – no assumptions

MET-EA



- **♦**Resist the Righting Reflex
- **\Delta** Understand Your Client's Motivation
- Listen to Your Client
- **Empower Your Client**

Appealing and Unappealing Features of Employment Support Programs

Torres-Stone, Delman, Lidz (Transitions RTC)

- Want careers, not just jobs
- See working as a way to contribute to and belong to society
- Relationships are important
- Latinos prefer freedom to speak naturally

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"So I feel working for me is very important to me and also the world cause I'm part of the society and helping them do things."
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Other Research

Research on use of internet to support transition age youth with SMHC (N=207)

Most Enjoyable Features of Social Networking Sites

Feature	% MH	% No MH
Making new friends	39.8	19.0***
Having shared interests	38.3	19.0 **
Planning social activities	32.0	45.6*
Blogging	31.3	1.3 ***

• #1 purpose; Ability to connect and socialize (87%)

Internet

Topics for Social Networking Site			
Feature %			
Independent living skills	87.5(1)		
Strategies to overcome social isolation	83.6(2)		
Relationships	81.3(3)		
Peer support and services	78.9(4)		
College-based services	75.0(5/6)		
Employment	75.0(5/6)		
How to support a friend or family member	74.2(7		
Information on diagnosing/treating MI	72.7(8)		
Advocacy	71.1(9)		
Connection to community activities	67.1(10)		
Housing	57.8(11)		
Social Security	47.7(12)		
M Davis 2/16/2012 Transitions RTC			

Common Themes

- Youth Voice; all developing models put youth front and center, and provide tools to support that position
- Involvement of Peers supports; several interventions try to build on the strength of peer influence

Common Themes

- Struggle to balance youth/family; delicate dance with families, no clear guidelines
- Emphasize in-betweeness; simultaneous working&schooling, living w family& striving for independence, finishing schooling&parenting etc.

