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

From Wagner & Davis, 2006
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

From Wagner & Davis, 2006
Practices with Students with ED

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

*p<.05, **p<.001

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/

M. Davis 2/16/2012 Transitions RTC
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
Maryann Davis, Ph.D., William Fisher, Ph.D., Charles Lidz, Ph.D., Alexis Henry, Ph.D.
University of MA Medical School, Center for Mental Health Services Research, Department of Psychiatry

Ashli J. Sheidow, Ph.D., Michael McCart, Ph.D., Scott Henggeler, Ph.D.
Medical University of SC, Family Services Research Center, Department of Psychiatry and Behavioral Sciences

Sara Lourie, MSW., Anne McIntyre-Lahner, MS.
Connecticut Department of Children and Families

MST-TAY Team - North American Family Institute

Thanks to the emerging adult participants and their social network members

Funding for this research comes from the National Institute of Mental Health (R34 MH081374-01) and the National Institute of Disability and Rehabilitation Research (H133B090018) to PI Davis
Arrest Rate in Adolescent Public Mental Health System Users

## Malleable Causes of Offending and Desistance

<table>
<thead>
<tr>
<th>Juveniles</th>
<th>Adults</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Antisocial peers</td>
<td>- Peers influence less</td>
</tr>
<tr>
<td>- ↓ Parental supervision/monitoring</td>
<td>- Parental influence lessened/indirect</td>
</tr>
<tr>
<td>- Unstructured time (school &amp; afterschool)</td>
<td>- Unstructured time (work)</td>
</tr>
<tr>
<td>- Substance Use</td>
<td>- Substance Use</td>
</tr>
<tr>
<td>- Rational choice/distorted cognitions</td>
<td>- Rational Choice/distorted cognitions</td>
</tr>
<tr>
<td>- Attachment to school, prosocial peers, family</td>
<td>- Attachment to work, spouse</td>
</tr>
</tbody>
</table>

M. Davis 2/16/2012 Transitions RTC
Inclusion and Exclusion Criteria

- 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 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

M. Davis 2/16/2012 Transitions RTC
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
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

Principles

- Resist the Righting Reflex
- 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

“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.”
Other Research

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

Most Enjoyable Features of Social Networking Sites

<table>
<thead>
<tr>
<th>Feature</th>
<th>% MH</th>
<th>% No MH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Making new friends</td>
<td>39.8</td>
<td>19.0***</td>
</tr>
<tr>
<td>Having shared interests</td>
<td>38.3</td>
<td>19.0 **</td>
</tr>
<tr>
<td>Planning social activities</td>
<td>32.0</td>
<td>45.6*</td>
</tr>
<tr>
<td>Blogging</td>
<td>31.3</td>
<td>1.3 ***</td>
</tr>
</tbody>
</table>

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

Gowen & Gruttadaro 2012
### Topics for Social Networking Site

<table>
<thead>
<tr>
<th>Feature</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Independent living skills</td>
<td>87.5(1)</td>
</tr>
<tr>
<td>Strategies to overcome social isolation</td>
<td>83.6(2)</td>
</tr>
<tr>
<td>Relationships</td>
<td>81.3(3)</td>
</tr>
<tr>
<td>Peer support and services</td>
<td>78.9(4)</td>
</tr>
<tr>
<td>College-based services</td>
<td>75.0(5/6)</td>
</tr>
<tr>
<td>Employment</td>
<td>75.0(5/6)</td>
</tr>
<tr>
<td>How to support a friend or family member</td>
<td>74.2(7)</td>
</tr>
<tr>
<td>Information on diagnosing/treating MI</td>
<td>72.7(8)</td>
</tr>
<tr>
<td>Advocacy</td>
<td>71.1(9)</td>
</tr>
<tr>
<td>Connection to community activities</td>
<td>67.1(10)</td>
</tr>
<tr>
<td>Housing</td>
<td>57.8(11)</td>
</tr>
<tr>
<td>Social Security</td>
<td>47.7(12)</td>
</tr>
</tbody>
</table>
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.