“It’s scary out there”: Families and youth with mental health needs speak about transitioning to adulthood

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Who We Are

- State Chapter of the Federation of Families for Children’s Mental Health
- Funded by the Maryland Department of Health and Mental Hygiene and Baltimore Mental Health Systems

www.mdcoalition.org

Our Mission

- To Build a family-driven network of information and support
- To improve services in all systems of care for children, youth and families

Listening and Learning From Transition-Age Youth and Their Families

Developmental Priorities for TAY

- Independence
- Friends
- Romantic relationships
- Fitting in with peers
- Risk-taking behaviors

TAY with mental health needs

- Age 16-24 is especially difficult for youth with mental health needs
  - Emotional/behavioral difficulties impair abilities for successful transition to adulthood

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Parents’ Transitioning Roles

- Parents’ roles change as youth transition into adulthood
  - Protection vs. letting go
- Transition is especially difficult for parents of children with mental health needs
  - Greater vulnerability - need for more extensive support
- Parents are no longer automatically included in treatment planning

Recruiting and Sample

- Recruitment
  - Coalition email distribution list: 900 individuals, organizations, providers, state and county agencies
- Compensation
  - Snacks and beverages were provided
  - A $20 stipend was paid to each family and youth participating
- Sample
  - 33 youth, 40 family members
  - Racial and socioeconomic diversity

Geographic Distribution

- Focus groups held in 6 central locations across the state
- Participants represented 11 of 23 counties and Baltimore city

Focus groups asked about seven life domains

- Housing
- Employment
- Education
- Life skills
- Health care
- Finances/benefits
- Social Life

Themes: 6 Identified Needs

1. Transition preparation
2. Life skills and social life
3. Employment
4. Housing
5. Education
6. Mental health treatment

1. Transition Preparation

- No identified place for families and youth to receive coordinated information
  - Applying for benefits
  - Housing
  - Education
  - Employment
2. Life Skills and Social Life
- Often a gap between cognitive development and social and emotional development
  - Establish friends
  - Interact socially
  - Perform daily living tasks

3. Employment
- Barriers to obtaining employment
  - Employment services are not tailored to mental health population
  - Transportation difficulties
- Low-paying jobs
  - No benefits or sufficient income
- Barriers to maintaining employment
  - Transportation difficulties
  - Frequent absences
  - Poor performance

DREAMS
"I want to finish high school and go to college for child development to open my own day care center."
"I want to be a cartoonist or video game designer."
"I want to be an Emergency Medical Technician."
"I want to start a career in nursing."
"I want to be a barber."
"I want to go to college."

Where are the Young Adults Working?
- Fast Food
- Summer camp
- Shoveling snow
- Bank teller
- Auto detailing
- Pharmacy Tech
- Bussing Tables
- Construction
- Landscaping

4. Housing
- 65% of youth were still living with their families
- Many parents feel hopeless about the possibility of independent living
- Independent living options are limited by:
  - Finances
  - Psychosocial concerns
  - Availability of programs
  - Lack of other options

5. Education
- High school and post high school education services are not tailored to mental health population
  - High school transition plans not geared to further education
  - Need for flexibility in transition plans
  - Greater support from Community Colleges
6. Mental Health Treatment

- TAY with mental health needs fail to continue treatment and stop taking medications
  - Termination of health care coverage
  - Differing ages of transition from agencies
  - Desire to stop treatment
  - At age 18 parents are not legally permitted to be involved in treatment

Policy Recommendations

1. Ensure health care coverage
2. Align the definition of TAY across state agencies
3. Build a system of care for TAY
   - Youth-driven and family-guided
   - Individualized approach
   - Funding for vocational, educational and residential services
   - Interagency coordination
4. Reevaluate organizational structure within the Mental Hygiene Administration

“I told my mom, I’m never going to leave. I’m going to live under my bed until I die because, I’m not kidding, it’s scary out there.”