Tunnels and Cliffs: A Guide for Workforce Development Practitioners and Policymakers Serving Youth with Mental Health Needs

The Challenge

Youth with mental health needs (MHN) often face unemployment, underemployment, and discrimination when they enter the workforce. Employment data show that individuals with serious mental illness have the lowest level of employment of any group of people with disabilities. As a result, large numbers of youth with both diagnosed and undiagnosed mental health needs who are transitioning into young adulthood, to the world of work, and to postsecondary education are likely to experience significant difficulties.

By the time youth are in their teens, it is important that they learn about career options and opportunities. Yet for many youth who need mental health services during this time period, this is not likely to occur. One reason for this is that many youth with mental health needs end up falling through the cracks of an uncoordinated and inadequate network of service delivery systems. These youth frequently do not receive the types of coordinated comprehensive individualized services and supports they need to be successful in the workplace or productively participate in their communities. Rather, because most agency staff think primarily of the set of solutions available within their own system of service delivery, youth with mental health needs are frequently shunted down inappropriate service tunnels dictated by their point of entry.

In addition to service tunnels, youth encounter a "transition cliff" when they age out of youth systems and attempt to access adult services. Many youth systems end at age 18 and others when the youth reaches age 22, which means a youth could simultaneously be a youth in one system and an adult in another. The adult systems of education, mental health, Social Security, vocational rehabilitation, and workforce development often have different terminology, eligibility requirements, and service options than those of the corresponding youth systems. This disconnect can result in dire consequences such as termination of services and lost progress in career planning.

Youth service practitioners in the workforce development system are responsible for supporting vulnerable youth; several of these targeted groups include many youth with mental health needs. Fortunately, there are a growing number of strategies and resources to support youth with mental health needs in achieving independence, self-sufficiency, and success in employment and postsecondary education. For an in-depth discussion of this topic area see *Tunnels and Cliffs: A Guide for Workforce Development Practitioners and Policymakers serving Youth with Mental Health Needs* at http://www.ncwd-youth.info/resources_&_Publications/mental_health.html

The following serve as examples of emerging promising practices relating to career preparation and employment for youth with mental health needs:

- **Bay Cove Academy, Boston, MA**
  http://www.baycove.org/academy/index.cfm
   Bay Cove Academy (BCA) is a psychoeducational program that serves an urban adolescent population (ages 13 to 21) from the greater Boston area with severe emotional, behavioral, and learning disabilities. The career development program (CDP) provides students with classroom and real-world employment skills training and community job placement, supported by employment training specialists. CDP also provides age-appropriate life skills training, academic remediation, and the development of problem solving and reasoning skills. Students enroll in workforce entry skills courses and independent living skills courses to learn interviewing, résumé writing, and other transition skills. Skills learned in the classroom are transferable to the job and skills learned on the job are reinforced in the classroom

- **The Pennsylvania Community on Transition (PACT) Mental Health Practice Group**
  http://www.ideapartnership.org
  The purpose of the Mental Health Practice Group is to promote the academic achievement and well-being of all Pennsylvania youth and young adults through the development of a comprehensive, cross-community, behavioral health support system. The effort emphasizes the utilization of evidence-based school mental health services in conjunction with existing school-wide and community mental health programs. The group also explores mechanisms to effectively assist youth in the smooth transition into needed adult services and supports.

- **Tucson Job Corps Center, Tucson, AZ**
  http://fredgacosta.jobcorps.gov/html/home/
  The Fred G. Acosta Job Corps Center teaches marketable skills to youth ages 16 to 24 in a safe, residential setting. The Center emphasizes early identification of disabilities and the development of a comprehensive accommodation plan that meets each youth's needs. A variety of course offerings, including basic education leading to a GED or high school diploma, vocational training in eight skill areas, basic computer skills, basic employment skills, health and wellness education, and training in cultural diversity, are available. During the first 60 days following enrollment, each student completes a career preparation program that includes leadership training. Through this program, each student develops a career plan. Students complete their training at their own pace. Students participate in work-based learning internships with area employers to get real-world experience in their area of vocational study.

What You Can Do to Help: An Action Plan

Policymakers, workforce development staff, administrators, youth service providers, educators, advocates, the medical community, mental health professionals, community members, families, caregivers, youth, and others invested in improving outcomes for youth with mental health needs must make the coordination of services a cross-systems priority if the individual needs of youth with mental health concerns are to be met. Here are some ways to make this happen:

- Engage state, regional, and local mental health stakeholders in resource mapping and strategic planning so existing resources can be identified and gaps in service can be addressed.

- Develop Memoranda of Understanding (MOUs) among state, regional, and local agencies that include cost sharing for mental health service centers throughout the state and provide for comprehensive career preparation and work-based experiences.
- Work with states to issue mental health policy guidelines that help regional and local entities effectively implement them.
- Collaborate with states to promote comprehensive technical assistance and training for regional and local staff on global issues such as data-sharing and confidentiality, and on service delivery strategies such as accessing appropriate screening tools.
- Bring regional agencies together to offer leadership in coordinating services between partners, identifying qualified personnel to conduct screens, and making referrals when in-depth evaluations are necessary.
- Assist local agencies with developing partnerships with agencies not covered by state or regional/local MOUs so certain assessment services can be provided, even if not offered by state service centers or local providers.
- Work with local agencies to select unique screening instruments and formulate policies for screening referrals to in-depth evaluations not covered by state or local policy.
- Collaborate with local agencies to offer training to parents and other caregivers on the various identification and eligibility criteria between youth and adult systems, accessing appropriate screens and evaluations, and navigating the cross-agency mental health service network.
- Engage employers to promote competitive employment for youth with mental health needs and to provide opportunities for work-based experiences and career exploration.

General Resources on Effective Practices for Serving Youth with Mental Health Needs

Tunnels and Cliffs: A Guide for Workforce Development Practitioners and Policymakers serving Youth with Mental Health Needs
http://www.ncwd-youth.info/resources_&_Publications/mental_health.html

Center for Mental Health Services Research
http://www.umassmed.edu/cmhsr/

Matrix of Children's Evidence-Based Interventions
http://www.systemsofcare.samhsa.gov/headermenus/docsHM/MatrixFinal1.pdf

National Association of State Mental Health Program Directors
http://www.nasmhpd.org/publications.cfm

National Collaborative on Workforce and Disability for Youth Pro-Bank
http://www.ncwd-youth.info/promising_Practices/index.html

National Youth Development Board for Mental Health Transformation
http://www.tapartnership.org/youth/default.asp

NO. 5 • May 2008

Navigating Tunnels and Cliffs: Empowering Families and Caregivers to Assist Youth with Mental Health Needs in Preparing for Work

Challenges Facing Families and Caregivers:

Research shows that good mental health intervention strategies emphasize work as part of recovery. Unfortunately, however, for families and caregivers of many youth with mental health needs, career preparation and exploration are not top priorities. Rather their time is frequently spent as "case managers," struggling with navigating a fragmented mental health service delivery system, while trying to manage day to day pressures. In addition, families and caregivers often have to fight for service coordination amidst inconsistent methods of disability identification that have the potential of leaving the youth without access to services because the youth may be considered as having mental health needs in school settings, but not qualified to receive services under the eligibility criteria used in the adult system.

Youth, families and caregivers should know that they don't have to go at it alone when it comes to helping a young person with a disability prepare for the workforce. The following resources are available to youth with mental health needs and their families and caregivers to help the young person prepare for a career and community life.

Promising Practices

- **PACER Center's Project C3 (Connecting Youth to Communities and Careers), Minneapolis, MN**
  http://www.c3online.org
  Project C3 is an innovative partnership between PACER Center and Minnesota state agencies serving youth. The goal of the project is to improve employment and postsecondary outcomes for youth, including youth with disabilities. Project C3 facilitates communication and collaboration between key partners so service coordination can be improved. The project utilizes an interactive cutting edge web-based resource mapping system that allows parents, youth, and professionals to find local services, and helps communities with strategic planning around youth activities.

- **Wraparound Milwaukee**
  http://www.co.milwaukee.wi.us/WraparoundMilwaukee7851.htm
  Wraparound Milwaukee is a unique type of managed care program operated by the Milwaukee County Behavioral Health Division that is designed to provide comprehensive, individualized and cost effective care to children with complex mental health and emotional needs. The project contracts with approximately 200 community service vendors to provide care coordination, crisis intervention, family advocacy, and employment programming. Wraparound Milwaukee is one of only four projects nationwide identified by the President's New Freedom Commission (2004) as being exemplary.

- **Statewide Family Networks**
  http://mentalhealth.samhsa.gov/cmhs/childrenscampaign/statewide.asp
  The purpose of the Family Network and Support Program is to provide families of children and adolescents with serious emotional disturbances (SED) the support and assistance needed to contribute to the development of effective Statewide Family Networks. Several of the projects sites in the Statewide Family Network Program specifically focus on the needs of ethnic minorities and rural families' issues.

What You Can Do: An Action Plan

Youth, parents, family members, caregivers, and other professionals providing support to youth with mental health needs (including but not limited to educators, professionals in the faith-based community, social workers, mentors, peer advocates, and medical professionals), must make coordination and collaboration of mental health services and career preparation a priority. Here are some things that parents and caretakers can do to jump start this process:

- Ensure that your youth's Individualized Education Program (IEP) includes goals that help the student understand his/her mental health disability and activities that help develop self-management and awareness of accommodations needed in the job setting.
- Familiarize yourself with your state's mental health service structure. Each state has its own mental health policies and programming.
- Know how to access funding for assessments, evaluations, and programming. Sources of this funding may include private or public insurance, workforce development agencies (such as Vocational Rehabilitation) or county level programs. Remember knowledge is power.
- Advocate for Individualized Mental Health Plans that include medication management, behavioral regulation strategies, cross-agency collaboration, work readiness training and on-the-job supports.
- Share your knowledge, experience and expertise. Youth, their families, and caregivers are valuable partners who have the capacity to inform and influence federal, state, and local mental health system policies, including the creation of workforce programs that address the unique issues of youth with mental health needs.
- Stress employment for youth with mental health needs as an important value, and ensure that the youth has multiple opportunities for career exploration and work-based experiences. Keep in mind that employment is an important aspect of mental health recovery and positive mental health maintenance, as well as a key component of life-long self-sufficiency.
- Create opportunities for your youth with mental health needs to develop leadership skills that allow him or her to direct programming decisions and inform mental health policy.

More Information on Best Practices

Federation of Families for Children's Mental Health
http://www.ffcmh.org

Judge David L. Bazelon Center for Mental Health Law
http://www.bazelon.org

Center for Effective Collaboration and Practice
http://cecp.air.org/default.asp

PACER Center
http://www.pacer.org/

Tunnels and Cliffs: A Guide for Workforce Development Practitioners and Policymakers serving Youth with Mental Health Needs
http://www.ncwd-youth.info/resources_&_Publications/mental_health.html

Disability **E**mployment **I**nitiative

MINNESOTA

PARTNERS for Youth

Minnesota's Disability Employment Initiative (MN DEI) is an innovative partnership among key youth-serving stakeholders focused on increasing the number of youth with disabilities, ages 14-24, served though Minnesota's youth workforce system.

Disability Resource Coordinators

identify and facilitate resources so youth with multiple barriers to employment can be better served by publically-funded workforce programs.

Integrated Resource Teams can be gathered

so resources from various public and private organizations are leveraged on behalf of an individual youth.

Expanded Partnership and

Collaboration is established on the local and state level so youth can experience success as a result of improved communication and coordination between youth serving agencies.

The Guideposts for Success are utilized as a

research-based framework that identifies what all youth, including youth with disabilities, need to make the move from school to employment, postsecondary education, and living independently in their communities.

For more information on MN DEI and how youth can become involved, please contact:

Workforce DEVELOPMENT, INC.

Rural Minnesota CEP concentrated employment program, inc.

Minnesota Valley Action Council Opportunities for people and communities

Natalie Amy,
Disability Resource Coordinator:
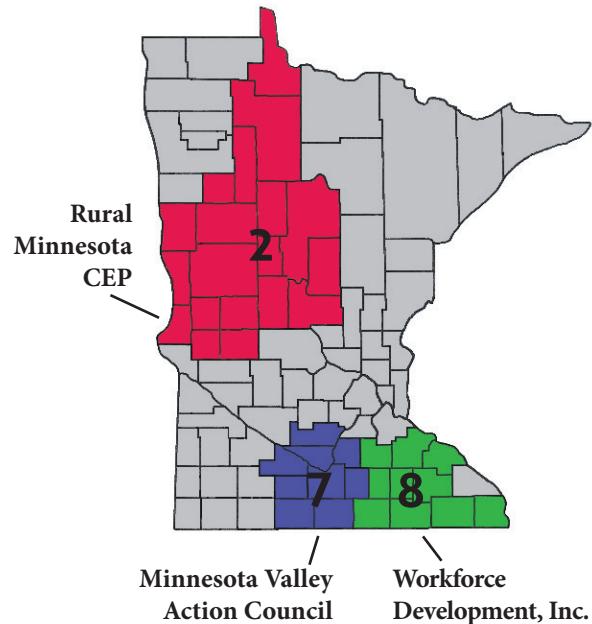NatalieAmy@workforcedevelopmentinc.org,
507-456-3830

Greg Kaiser,
Disability Resource Coordinator:
gregk@rmcep.com, 218-846-7400

Deb Long,
Disability Resource Coordinator:
dlong@mnvac.org, 507-345-0454

Areas Served by MN DEI

Rural Minnesota CEP

2

7   8

Minnesota Valley
Action Council

Workforce
Development, Inc.

Rural Minnesota CEP
Becker
Beltrami
Cass
Clay
Clearwater
Crow Wing
Douglas
Grant
Hubbard
Lake of the Woods
Mahnomen
Morrison
Otter Tail
Pope
Stevens
Todd
Traverse
Wadena
Wilkin

**Minnesota Valley Action
Council**
Blue Earth
Brown
Faribault
Le Sueur
Martin
Nicollet
Sibley
Waseca
Watonwan

Workforce Development, Inc.
Dodge
Fillmore
Freeborn
Goodhue
Houston
Mower
Olmsted
Rice
Steele
Wabasha

MINNESOTA
WORKFORCE
CENTER

Individualized Planning

MN DEI will help youth with disabilities make successful transitions to college and careers by using the *Guideposts for Success* as a framework to guide service delivery.

Collaboration

MN DEI will promote productive collaborations between education, workforce, and disability organizations which will lead to improved opportunities and outcomes for youth with disabilities. Project partners include Minnesota's Department of Employment and Economic Development, Minnesota Department of Education, PACER, and local workforce agencies in 3 areas of the state.

Increasing Staff Capacity

MN DEI will increase the capacity of Minnesota's youth workforce system to serve youth with disabilities, including those from culturally diverse communities, and those experiencing additional risk factors such as poverty, homelessness, teen parents, and involvement in juvenile justice.

Expanding the Use of Benefits Counseling

MN DEI will expand and promote benefits counseling so youth with disabilities and their families understand the impact of employment on Social Security benefits (such as SSI). The project also seeks to expand the number of Minnesota Workforce Centers becoming active Ticket to Work Employment Networks.

Informing Families

MN DEI will provide families of youth with disabilities with parent training on benefits planning, as well as general information, advocacy, and referral through its partnership with PACER.

Based on decades of research, **The Guideposts for Success** help identify what all youth, including youth with disabilities, need to make the move from school to adulthood successfully. They are rooted in high expectations and the understanding that a youth with a disability is a youth first, and a youth with a disability second. The five *Guideposts for Success* are as follows:

1. School-Based Preparatory Experiences: What are youth getting from educational settings and programs that help build skills for adulthood?

2. Career Preparation and Work-Based Learning Experiences: How are youth being given opportunities to learn about and try different career options so they can make an informed choice about their future?

3. Youth Development and Leadership: How are youth being given opportunities to be mentored, to learn about themselves, and given chances to lead so they can direct their own futures?

4. Connecting Activities: How are young people and their families being connected to programs, services, and activities that help them get the supports needed to live in the community?

5. Family Involvement and Supports: How are families being given information that empowers them to help their youth make the move to employment, postsecondary education, and community living?

For more information on a wide variety of topics related to The Guideposts for Success, please visit the National Collaborative on Workforce and Disability for Youth web site at www.ncwd-youth.info.

Mental Health Needs

Youth with mental health needs often face unemployment, underemployment, and discrimination when they enter the workforce. Employment data show that individuals with serious mental illness have the lowest level of employment of any group of people with disabilities. The following provides practical information and resources for youth service practitioners. In addition, it provides policymakers, from the program to the state level, with information to help them address system and policy obstacles in order to improve service delivery systems for youth with mental health needs.

About Youth with Mental Health Needs (/youth-with-mental-health-needs)

Youth with mental health needs (MHN) often face unemployment, underemployment, and discrimination when they enter the workforce. Employment data show that individuals with serious mental illness have the lowest level of employment of any group of people with disabilities. As a result, large numbers of youth with both diagnosed and undiagnosed mental health needs who are transitioning into young adulthood, to the world of work, and to postsecondary education are likely to experience significant difficulties. Learn more about Facts & Statistics (#MHfacts) , Common Challenges (#MHchallenges) , Guideposts for Success (#MHGuide) , NCWD/Youth Resources (#NCWDResources) and Related Resources (#RelatedResources) pertaining to youth with mental health needs.

Guideposts for Success for Youth with Mental Health Needs (/guideposts/mental-health)

The Guideposts for Success for Youth with Mental Health Needs are particularly helpful for youth service practitioners serving youth with MHN. Youth with mental health needs may not be properly diagnosed, if they are diagnosed at all, especially during the teenage years when it is sometimes difficult to distinguish between (1) a mental health issue; (2) typical anxiety experienced by youth, particularly if those feelings are not behaviorally expressed; and (3) substance abuse, which may be a secondary issue that many youth with mental health needs may experience.

Helping Youth with Mental Health Needs Avoid Transition Cliffs: Lessons from Pioneering Transition Programs (/information-brief-24)

This InfoBrief discusses challenges faced by youth and young adults with mental health needs during their transition to adulthood and describes strategies used by youth service professionals to avoid age-related transition cliffs and prevent service interruptions during this critical stage of development. This InfoBrief is based on a rich body of research about transition-age youth with mental health needs published in four separate reports in the last two years, including two produced by the National Collaborative on Workforce and Disability for Youth.

Navigating Tunnels and Cliffs: Empowering Families and Caregivers to Assist Youth with Mental Health Needs in Preparing for Work (/short-cut/navigating-tunnels-and-cliffs)

For many families and caregivers of youth with mental health needs, career preparation and exploration are not top priorities. This short cut provides families, caregivers, and youth with mental health needs the information needed to prepare for a career including promising practices from the field and an action plan for success.

Successful Transition Models for Youth with Mental Health Needs: A Guide for Workforce Professionals (/information-brief-23)

This InfoBrief describes the systems' service barriers faced by youth with mental health needs as they reach adulthood, while highlighting new models and strategies designed to break down those barriers and help them to transition successfully into the workplace.

Supporting Transition to Adulthood Among Youth with Mental Health Needs: Action Steps for Policymakers (/policy-brief-02)

This Policy Brief calls attention to the challenges faced by youth and young adults with mental health needs during their transition to adulthood and provides information to help policymakers at the state and local level develop and improve service delivery systems for this population.

Transitioning Youth with Mental Health Needs to Meaningful Employment and Independent Living (/white-paper/transitioning-youth-with-mental-health-needs)

This study focuses on the role of skills development, work, and career exploration. It presents the findings from case studies of five promising program sites and identifies program design features and system-level policies that appear to help youth and young adults with mental health needs better transition into adulthood and life-long success.

Tunnels and Cliffs: A Guide for Workforce Development Professionals and Policymakers serving Youth with Mental Health Needs (/tunnels-and-cliffs)

This guide is designed to help workforce development professionals, administrators, and policymakers increase their understanding of youth with mental health needs and the supports necessary to help them transition into the workforce successfully. it provides practical information and resources for youth service professionals on how to support these youth and information for policy makers on how to address system and policy obstacles in order to improve service delivery systems for youth with mental health needs.

[Tunnels and Cliffs: A Guide for Workforce Development Professionals and Policymakers Serving Youth with Mental Health Needs (Short Cut)](/short-cut/tunnels-and-cliffs) (/short-cut/tunnels-and-cliffs)

This brief document summarizes the challenges faced by youth with mental health needs when they enter inappropriate service tunnels dictated by their point of entry and when they encounter transition cliffs as they age out of youth systems and attempt to access adult services. It offers examples of emerging promising practices related to career preparation and employment for youth and offers an action plan to make the coordination of services a cross-systems priority.

[Youth Development and Leadership Opportunities to Develop Thriving Competencies](/innovative-strategies/practice-briefs/ydl-opportunities-to-develop-thriving-competencies) (/innovative-strategies/practice-briefs /ydl-opportunities-to-develop-thriving-competencies)

This Innovative Strategies Practice Brief provides practical examples from promising and exemplary youth programs for implementing youth development and leadership opportunities that help youth develop Thriving competencies. Thriving is the youth development competency area that involves developing attitudes, skills, and behaviors that youth need to maintain their optimal physical and emotional well-being.

Need help viewing a document? [View our document help page](http://www.ncwd-youth.info/document-help) (http://www.ncwd-youth.info/document-help) .

Have a comment or suggestion in regard to our site? [Please send us your feedback](http://www.ncwd-youth.info/contact/feedback) (http://www.ncwd-youth.info/contact/feedback) .

Helping Youth with Mental Health Needs Avoid Transition Cliffs: Lessons from Pioneering Transition Programs

The transition from adolescence to adulthood is a challenging time. It is a time in which the young person is called upon to make complex decisions about schooling, work, finances, and personal relationships. For the more than three million young adults (ages 18-26) diagnosed with serious mental health conditions, this phase of life poses even greater challenges.

While the transition from adolescence to adulthood is challenging for all young people, it can be especially difficult for youth with mental health needs who often face unemployment, underemployment, and discrimination when they enter the workforce. Adding to these challenges, youth with mental health needs often find it difficult to find or maintain services they need to successfully transition to adulthood including mental health treatment, employment and vocational rehabilitation, and housing.

According to the U.S. Government Accountability Office (2008), approximately 2.4 million young adults ages 18 to 26, 6.5 percent of non-institutionalized individuals in this age range, had a serious mental illness in 2006. The number of young people with mental health needs is expected to be much higher if those who are homeless, institutionalized, incarcerated or undiagnosed were also accounted for in researchers' estimates.

*This **InfoBrief** discusses challenges faced by youth and young adults with mental health needs during their transition to adulthood and describes strategies used by youth service professionals to avoid age-related transition cliffs and prevent service interruptions during this critical stage of development. This **InfoBrief** is based on a rich body of research about transition-age youth with mental health needs published in four separate reports in the last two years, including two produced by the National Collaborative on Workforce & Disability for Youth (NCWD-Youth).*

This group has significantly lower rates of high school completion and postsecondary education compared to other individuals their age without serious mental illness.

Youth service professionals who encounter youth with mental health needs, whether in the education, vocational rehabilitation, workforce development, mental health, or another public system, are often the ones to identify the

unique transition needs of youth and young adults during the transition to adulthood. Youth service professionals have a critical role to play in helping young people during this stage of development because no coordinated system currently exists to guide young people with and without mental health needs through the challenging task of entering adulthood. They can help young people navigate their way through the various uncoordinated service tunnels and avoid transition cliffs, and connect them to people and needed supports even if local programs do not yet formally offer transition programs. In some cases, their efforts will ultimately lead to the creation of transition programs.

To be effective in their role as navigators and supporters, it is imperative that youth service professionals know what youth need in order to succeed in the transition process. NCWD/Youth, a national technical assistance center, in collaboration with the U.S. Department of Labor's Office of Disability Employment Policy (ODEP), created the *Guideposts for Success,* a comprehensive framework that identifies what all youth, including youth with disabilities, need to succeed during the critical transition years.

GUIDEPOSTS FOR SUCCESS FOR YOUTH WITH MENTAL HEALTH NEEDS

GENERAL NEEDS	SPECIFIC NEEDS
1 **School-Based Preparatory Experiences**	In order to perform at optimal levels in all education settings, all youth need to participate in educational programs grounded in standards, clear performance expectations and graduation exit options based upon meaningful, accurate, and relevant indicators of student learning and skills. These should include • academic programs that are based on clear state standards; • career and technical education programs that are based on professional and industry standards; • curricular and program options based on universal design of school, work and community-based learning experiences; • learning environments that are small and safe, including extra supports such as tutoring, as necessary; • supports from and by highly qualified staff; • access to an assessment system that includes multiple measures; and • graduation standards that include options. In addition, youth with disabilities need to • use their individual transition plans to drive their personal instruction, and strategies to continue the transition process post-schooling; • access specific and individual learning accommodations while they are in school; • develop knowledge of reasonable accommodations that they can request and control in educational settings, including assessment accommodations; and • be supported by highly qualified transitional support staff that may or may not be school staff. *Because of the episodic nature of mental health disabilities, youth with mental health needs require educational environments that are flexible and stable and that provide opportunities to learn responsibilities and become engaged and empowered. These youth may need additional educational supports and services such as* • comprehensive transition plans (including school-based behavior plans) linked across systems, without stigmatizing language, that identify goals, objectives, strategies, supports, and outcomes that address individual mental health needs in the context of education; • appropriate, culturally sensitive, behavioral and medical health interventions and supports; • academically challenging educational programs and general education supports that engage and re-engage youth in learning; • opportunities to develop self-awareness of behavioral triggers and reasonable accommodations for use in educational and workplace settings; and • coordinated support to address social-emotional transition needs from a highly qualified, cross-agency support team (e.g., "wraparound" team), which includes health, mental health, child welfare, parole/probation professionals, relevant case managers, and natural supports from family, friends, mentors, and others.

GUIDEPOSTS FOR SUCCESS FOR YOUTH WITH MENTAL HEALTH NEEDS

GENERAL NEEDS	SPECIFIC NEEDS
2 **Career Preparation & Work-Based Learning Experiences**	Career preparation and work-based learning experiences are essential in order for youth to form and develop aspirations and to make informed choices about careers. These experiences can be provided during the school day or through after-school programs and will require collaboration with other organizations. All youth need information on career options, including • career assessments to help identify students' school and post-school preferences and interests; • structured exposure to postsecondary education and other life-long learning opportunities; • exposure to career opportunities that ultimately lead to a living wage, including information about educational requirements, entry requirements, income and benefits potential, and asset accumulation; and • training designed to improve job-seeking skills and work-place basic skills (sometimes called soft skills). In order to identify and attain career goals, youth need to be exposed to a range of experiences, including • opportunities to engage in a range of work-based exploration activities such as site visits and job shadowing; • multiple on-the-job training experiences, including community service (paid or unpaid), that is specifically linked to the content of a program of study and school credit; • opportunities to learn and practice their work skills ("soft skills"); and • opportunities to learn first-hand about specific occupational skills related to a career pathway. In addition, youth with disabilities need to • understand the relationships between benefits planning and career choices; • learn to communicate their disability-related work support and accommodation needs; and • learn to find, formally request, and secure appropriate supports and reasonable accommodations in education, training, and employment settings. *Because some youth with mental health needs may feel their employment choices are limited or may not understand the value of work in recovery, they need connections to a full range of youth employment programs and services such as* • graduated (preparatory, emerging awareness, proficient) opportunities to gain and practice their work skills ("soft skills") in workplace settings; • positive behavioral supports in work settings; • connections to successfully employed peers and role models with mental health needs; • knowledge of effective methods of stress management to cope with the pressures of the workplace; • knowledge of and access to a full range of workplace supports and accommodations such as supported employment, customized employment, job carving, and job coaches; and • connections as early as possible to programs and services (e.g., One-Stop Career Centers, Vocational Rehabilitation, Community Rehabilitation Programs) for career exploration provided in a non-stigmatizing environment.

GUIDEPOSTS FOR SUCCESS FOR YOUTH WITH MENTAL HEALTH NEEDS

GENERAL NEEDS	SPECIFIC NEEDS
3 **Youth Development & Leadership**	Youth development is a process that prepares young people to meet the challenges of adolescence and adulthood through a coordinated, progressive series of activities and experiences which help them gain skills and competencies. Youth leadership is part of that process. In order to control and direct their own lives based on informed decisions, all youth need the following: • mentoring activities designed to establish strong relationships with adults through formal and informal settings; • peer-to-peer mentoring opportunities; • exposure to role models in a variety of contexts; • training in skills such as self-advocacy and conflict resolution; • exposure to personal leadership and youth development activities, including community service; and • opportunities that allow youth to exercise leadership and build self-esteem. Youth with disabilities also need • mentors and role models including persons with and without disabilities; and • an understanding of disability history, culture, and disability public policy issues as well as their rights and responsibilities. *Some youth with mental health needs may be susceptible to peer pressure, experiment with antisocial behaviors or illegal substances, and/or attempt suicide as a manifestation of their disability and/or expression of independence. To facilitate positive youth development and leadership, these youth need* • meaningful opportunities to develop, monitor, and self-direct their own treatment, recovery plans, and services; • opportunities to learn healthy behaviors regarding substance use and avoidance, suicide prevention, and safe sexual practices; • exposure to factors of positive youth development such as nutrition, exercise, recreation and spirituality; • an understanding of how disability disclosure can be used pro-actively; • an understanding of the dimensions of mental health treatment including medication maintenance, outpatient and community-based services and supports; • an understanding of how mental health stigma can compromise individual health maintenance and appropriate engagement in treatment and recovery; • continuity of access to and an understanding of the requirements and procedures involved in obtaining mental health services and supports as an independent young adult; • strategies for addressing the negative stigma and discrimination associated with mental health needs including cultural, racial, social, and gender factors; • opportunities to develop meaningful relationships with peers, mentors, and role models with similar mental health needs; • exposure to peer networks and adult consumers of mental health services with positive treatment and recovery outcomes; • social skills training and exposure to programs that will help them learn to manage their disability/ies; and • opportunities to give back and improve the lives of others, such as community service and civic engagement.

GUIDEPOSTS FOR SUCCESS FOR YOUTH WITH MENTAL HEALTH NEEDS

GENERAL NEEDS	SPECIFIC NEEDS
4 **Connecting Activities**	Young people need to be connected to programs, services, activities, and supports that help them gain access to chosen post-school options. All youth may need one or more of the following • mental and physical health services; • transportation; • tutoring; • financial planning and management; • post-program supports thorough structured arrangements in postsecondary institutions and adult service agencies; and • connection to other services and opportunities (e.g., recreation, sports, faith-based organizations). In addition, youth with disabilities may need • acquisition of appropriate assistive technologies; • community orientation and mobility training (e.g., accessible transportation, bus routes, housing, health clinics); • exposure to post-program supports such as independent living centers and other consumer-driven community-based support service agencies; • personal assistance services, including attendants, readers, interpreters, or other such services; and • benefits-planning counseling including information regarding the myriad of benefits available and their interrelationships so that they may maximize those benefits in transitioning from public assistance to self-sufficiency. *Some youth with mental health needs may require a safety net accepting of the boundary pushing that is part of identity development and may include additional and more intense connections to information, programs, services, and activities that are critical to a successful transition. These youth may need* • an understanding of how to locate and maintain appropriate mental health care services, including counseling and medications; • an understanding of how to create and maintain informal personal support networks; • access to safe, affordable, permanent housing, including options such as transitional and supported housing; • access to flexible financial aid options for postsecondary education not tied to full-time enrollment; • policies and service practices that provide a safety net for fluctuations in a youth's mental health status; • case managers (e.g., health care, juvenile justice, child welfare) who connect and collaborate across systems; and • service providers who are well-trained, empathetic, and take a holistic approach to service delivery.

GUIDEPOSTS FOR SUCCESS FOR YOUTH WITH MENTAL HEALTH NEEDS

GENERAL NEEDS	SPECIFIC NEEDS
5 **Family Involvement & Supports**	Participation and involvement of parents, family members, and/or other caring adults promote the social, emotional, physical, academic, and occupational growth of youth, leading to better post-school outcomes. All youth need parents, families, and other caring adults who have • high expectations that build upon the young person's strengths, interests, and needs and fosters their ability to achieve independence and self-sufficiency; • been involved in their lives and assisting them toward adulthood; • access to information about employment, further education and community resources; • taken an active role in transition planning with schools and community partners; and • access to medical, professional, and peer support networks. In addition, youth with disabilities need parents, families, and other caring adults who have • an understanding of their youth's disability and how it affects his or her education, employment, and/or daily living options; • knowledge of rights and responsibilities under various disability-related legislation; • knowledge of and access to programs, services, supports, and accommodations available for young people with disabilities; and • an understanding of how individualized planning tools can assist youth in achieving transition goals and objectives. *Youth with mental health needs also need parents, families, and/or other caring adults who* • understand the cyclical and episodic nature of mental illness; • offer emotional support; • know how to recognize and address key warning signs of suicide, the co-occurring relationship between substance abuse and mental health needs, and other risky behaviors; • monitor youth behavior and anticipate crises without becoming intrusive; • understand how the individualized plans across systems can support the achievement of educational and employment goals; • access supports and professionals to help navigate the interwoven systems such as mental health, juvenile justice, and child welfare; • access supports and resources for youth with mental health needs, including emergency contacts and options for insurance coverage; • extend guardianship past the age of majority when appropriate; and • have access to respite care.

The *"Guideposts for Success for Youth with Mental Health Needs,"* which incorporate all of the elements of the original *Guideposts* as well as additional specific needs relating to youth with mental health need, is a valuable resource for youth service professionals who seek to provide young people with an intentional, integrated, well-coordinated, and comprehensive set of services and supports.

Service discontinuity is a significant challenge for youth and young adults with mental health needs. While various public systems offer services for individuals with mental health needs, it is common practice to divide service systems into those for children and those for adults. As a result, a young person being served by the child mental health system will eventually "age out" when they surpass the upper limit of the system's age defined eligibility criteria, which may range from age 18 to 21. The child agency typically discontinues services to a young person who has aged out and refers him/her to the adult system. While services offered by the child agency may no longer match the young person's needs related to transitioning to adulthood, the adult system may also be poorly suited to the needs of individuals entering young adulthood.

A 2007 study, conducted by Maryann Davis for the Substance Abuse and Mental Health Services Administration Center for Mental Health Services, examined the problem of service discontinuity experienced by youth with mental health needs. As Davis explains, "for some youth, their condition does not qualify them for access to adult mental health services, resulting in loss of services. For others, continuing on in adult services means a change of case manager (child to adult case manager), a change of therapist

> ◆
>
> **Service discontinuity is a significant challenge for youth and young adults with mental health needs.**
>
> ◆

(their therapist is at a child community mental health center, not at the adult community mental health center), a change of residence (from an adolescent residential setting to an adult group home), a change of treatment culture (from more family and child focused to more independent adult focused), a change of daily contact with peers (from hanging out with other adolescents in a day treatment program to being surrounded by mostly 35-50 year olds in an employment program), and other types of changes. These types of discontinuities interrupt service and program content, social environments, and attachments. It is likely that this kind of discontinuity leads eligible youth to reject services, or to struggle to adjust to them."

Davis identified seven

programs, one state grant initiative, and one federal grant initiative that have successfully reduced service discontinuity and established age-appropriate transition services for youth with mental health needs. These "pioneering transition programs" and grants include:

- Community Connections in Canton, Ohio

- Community Outreach through Resources and Education (CORE) in Westmoreland County, Pennsylvania

- Jump on Board for Success (JOBS) in Burlington, Vermont

- Program in Assertive Community Treatment (PACT) in Madison, Wisconsin

- Successful Employment Program in Quincy, Massachusetts

- Transition Community Treatment Team in Columbus, Ohio

- Westchester Youth Forum in Westchester, New York

- Transition Age Youth Initiative, a grant program of Maryland's Department of Health and Mental Hygiene

- Partnerships for Youth Transition grant, a program of the U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration in partnership with the U.S. Department of Education

Through creativity and cooperation, youth service professionals and organizations created "pioneering transition programs" offering a range of

transition services, from education and employment to independent living and housing for youth and young adults continuously during the transition years, preventing service disruptions and benefit loss at a critical stage of development. Davis' case studies of pioneering transition programs offer the following guidance to other youth service professionals interested in developing similar programs in their area:

1) Recognize the problem and take action.

In Columbus, OH, the county Alcohol, Drug, and Mental Health Board and the county cluster (an interagency group) of child services agencies both saw a need to implement transition services for adolescents with severe mental health needs who were aging out of child services. A careful review of youth cases indicated many were bouncing from one system and placement to another during adolescence and eventually being admitted to a psychiatric hospital. At the same time, the adult system was struggling to meet the needs of young adults. Once the problem was identified, the county child and adult mental health system agreed to each contribute some funds to establish a transition community treatment team to serve young people ages 16 to 22.

2) Become a leader.

The Community Connections program in Canton, OH, was established when staff of one community service agency sought and received a combination of private and state grants to continue serving transition-age youth after a federal transition grant had ended. Although prior efforts to secure funding from county mental health agencies were unsuccessful, two youth service professionals persisted in their appeals to agency leaders and searched

> **Once the problem was identified, the county child and adult mental health system agreed to each contribute some funds to establish a transition community treatment team to serve young people ages 16 to 22.**

for other funding opportunities until a solution was found.

3) Involve other stakeholders.

The Successful Employment Program (SEP) in Quincy, MA, initially started with funding from the local Department of Mental Health to provide vocational and social support services to 16- to 18-year-olds with mental health needs. When the SEP coordinators heard that the vocational rehabilitation system was struggling to meet the needs of some young adults over age 18, they proposed to the local VR agency that they pay for slots for their 19- to 22-year-old clients to participate in SEP's work

related services and supports. As a result of the successful collaboration between the mental health and VR agencies, SEP eventually received approval from the Department of Mental Health to extend services funded by the mental health system to young people up to age 22.

4) Extend local expertise and experience to design the program.

The Community Outreach through Resources and Education (CORE) program in Westmoreland County, PA, was designed collaboratively by an interagency taskforce convened by the county mental health system. Because it was a collaborative effort, the program design was informed by the collective expertise of professionals working in mental health, education, juvenile probation, child welfare, vocational rehabilitation, mental retardation, child and family services, drug and alcohol services, and advocacy groups. Together, the taskforce members wrote the funding proposal that the county mental health agency submitted for a state mental health agency grant. Once the grant was awarded, the taskforce selected one of its members, Family Services of Westmoreland County, to provide the services because the organization already had expertise in vocational and case management services for child and adults and was well connected to other resources in the target community.

5) Seek funding through trusting relationships.

The youth service professionals who started Jump on Board for Success (JOBS) program in Burlington, VT, leveraged their already positive

relationship with the state vocational rehabilitation office to obtain an initial grant for a combination of supported employment and wrap-around services for 16 to 22 year olds with serious mental health needs. The two service agencies that made the funding request had strong track records in the eyes of VR—Green Mountain Work Force did great work with adults with serious mental illness and Washington County Mental Health Services already had a successful wrap-around program for youth under age 18. Together, staff of both organizations developed a proposal to merge the wrap-around approach with supported employment services for transition-age youth. Letters of support from the local child welfare agency and other providers helped to convince VR officials that the proposal would meet critical local needs.

6) Start small and build funding over time.

The Westchester Youth Forum started out with a meager $10,000 grant from the regional child Office of Mental Health by arguing that the youth-led program corresponded with family support programming, thus making it a suitable use of family support funds. Over time, the Forum became recognized as an integral part of the system of care, and subsequently received additional funding through the Youth Bureau and from the county mental health agency's federal system of care grant.

7) Seek mental health funding primarily from either the child or the adult system, not both.

While the pioneering transition programs studied typically relied on a combination of funding sources, funding they received from the mental health system was either from the adult mental health service system or the

---

Seek mental health funding primarily from either the child or the adult system, not both.

---

child mental health service system, not both.

Engage Youth and Families as Leaders, Decision Makers, and Designers

One of the case studies provides an exemplary model of active youth involvement. The Westchester Youth Forum (WYF), Westchester, NY, stands apart as a youth-led initiative. WYF was developed through the collaborative effort of young people from a family mental health advocacy group and staff of the advocacy group and the county child mental health agency. With support from social workers, several youth wrote a report detailing their experiences as consumers and recommendations for improving services and opportunities for youth. The organizations hosted a forum in which the youth presented their report to leaders from each county agency (social services, developmental disabilities, substance abuse, probation), the schools, and other local decision makers. Following this meeting, the advocacy organization agreed to provide some funding for staff to support the youth leaders in forming peer support groups and

organizing recreational and social activities for youth ages 16 to 23. Initially, the county child mental health agency provided in-kind support to the staff and the youth held fundraisers to support their activities. Eventually, the youth-led program became a part of a local mental health service provider agency and the county obtained a small grant to support the program's staff and activities. The regional Office of Mental Health agreed to provide the grant using family support funds from its child mental health budget.

Build Upon Knowledge of What Works for Youth with Mental Health Needs

While many of the "pioneering" transition programs reported lacking information on best practices in serving transition-age youth when they were starting up, many resources are now available to youth service professionals to guide program design and implementation. In addition to the *Guideposts for Success for Youth with Mental Health Needs,* NCWD/Youth in collaboration with ODEP developed the following guidance for youth service professionals:

Successful Transition Models for Youth with Mental Health Needs: A Guide for Workforce Professionals, an InfoBrief issued in May of 2009 available at http://www.ncwd-youth.info/ resources_&_Publications/ information_Briefs/issue23.html

Navigating Tunnels & Cliffs: Empowering Families and Caregivers to Assist Youth with Mental Health Needs in Preparing for Work, a May 2008 publication available at http://www.ncwd-youth.info/ resources_&_Publica-tions/short_Cuts/005.html

Tunnels & Cliffs: A Guide for Workforce Development Practitioners and Policymakers Serving Youth with Mental Health Needs, a May 2008 publication available at http://www.ncwd-youth.info/ resources_&_ Publications/short_ Cuts/004.html

Tunnels & Cliffs: A Guide for Workforce Development Practitioners and Policymakers Serving Youth with Mental Health Needs, a 2007 comprehensive guide available online at http://www.ncwd-youth. info/resources_&_Publications/ mental_health.html

Transitioning Youth with Mental Health Needs to Meaningful Employment & Independent Living, a 2008 publication available online at http://www.ncwd-youth.info/ resources_&_Publications/ background.php

For more information on issues related to youth with mental health needs and/or professional development for youth service professionals, please contact the National Collaborative on Workforce and Disability for Youth at http://www.ncwd-youth.info.

References

Davis, M. (2007). *Pioneering Transition Programs: The Establishment of Programs that Span the Ages Served by Child and Adult Mental Health.* Rockville, MD: Substance Abuse and Mental Health Services Administration, Center for Mental Health Services.

Podmostko, M. (2007). *Tunnels & Cliffs: A Guide for Workforce Development Practitioners and Policymakers Serving Youth with Mental Health Needs.* Washington, D.C.: National Collaborative on Workforce and Disability for Youth, Institute for Educational Leadership.

U.S. Government Accountability Office, Report 08-678 (2008). *Young Adults with Serious Mental Illness: Some States and Federal Agencies are Taking Steps to Address Their Transition Challenges.* Washington, D.C.

Woolsey, L., & Katz-Leavy, J. (2008). *Transitioning Youth With Mental Health Needs to Meaningful Employment & Independent Living,* Washington, DC: National Collaborative on Workforce and Disability for Youth, Institute for Educational Leadership.

Info*Brief*

Successful Transition Models for Youth with Mental Health Needs: A Guide for Workforce Professionals

The transition from adolescence to adulthood is a challenging time. It is a time in which the young person is called upon to make complex decisions about schooling, work, finances, and personal relationships. For the more than three million young adults (ages 18-26) diagnosed with serious mental health conditions, this phase of life poses even greater challenges.

Youth with mental health needs often face unemployment, underemployment, and discrimination when they enter the workforce. Statistics show that youth with mental health needs, diagnosed or undiagnosed, are over-represented in foster care, the juvenile justice system, and among school disciplinary cases and high school dropouts.

The absence of a coordinated system of service delivery also presents significant challenges for youth and young adults with mental health needs as they age out of youth services. They may be either shunted down an inappropriate service tunnel that does not address their specific needs, or they may "fall off a cliff" as they age out of youth services and have to navigate the complexities associated with the adult service system.

Through partnerships with service agencies and organizations in their communities youth service professionals can assist youth in

This InfoBrief describes the systems' service barriers faced by youth with mental health needs as they reach adulthood, while highlighting new models and strategies designed to break down those barriers and help them to transition successfully into the workplace.

preparing for the adult world by making a concerted effort to:

• Learn what other systems may provide

• Make contacts within those systems

• Coordinate services.

This InfoBrief presents model programs and successful strategies to help youth and young adults with mental health needs successfully transition to employment and to lead independent, productive lives.

Service Tunnels
The service systems that may serve youth and young adults with mental health needs may include community-based organizations, foster care, juvenile justice, mental health, Social Security, special education, vocational rehabilitation, youth services funded by the Workforce

Investment Act, and others. Staff working within each system often consider only those service options available within their system, despite the fact that another system may offer services that may better address the youth's needs. Understanding other service tunnels and how to access their services is often overwhelming for practitioners, which means youth may not gain the help they need to successfully transition to adult life. Fortunately, professionals and researchers increasingly recognize the importance of partnering to connect these multiple systems so that youth and young adults with mental health needs have access to the full array of services needed to maximize their potential.

Transition Cliffs
In addition to service tunnels, youth encounter a transition cliff when they age-out of youth systems and attempt to access adult services. Many youth services end at age 18 and others at age 22, which means a youth, simultaneously, could be a youth in one system and an adult in another. In addition, many young people lose health insurance under their parents' plan when they reach
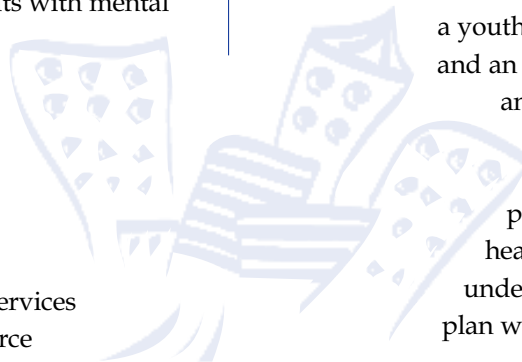
age 19 or graduate from high school or college.

The adult systems of education, mental health, Social Security, vocational rehabilitation, and workforce development all have different terminology, eligibility requirements, and service options than those of corresponding youth systems. The lack of a seamless youth-to-adult system can cause young adults to lose services and fall behind in career planning.

The adult mental health care system also presents challenges. Millions of young adults face going without services or paying for expensive private mental health care for several reasons: public adult mental health systems vary widely; provide services only to adults with severe and persistent mental illness; and frequently have long waiting lists.

Avoiding Tunnels and Cliffs with Mental Health Recovery Models

The following mental health recovery service delivery models offer promising ways to overcome the challenges of tunnels and cliffs and to provide an effective, integrated, self-directed system of care for young adults with mental health needs:

Transition to Independence Process (TIP) —

The TIP approach is an evidence-based program model that stresses the importance of providing access to appropriate services, engaging young adults in their own future planning process, and utilizing services that focus on each individual's strengths. The TIP system operates through the following seven guidelines that provide a framework for the program and a community system that supports that framework:

- Engaging young people through relationship development, person-centered planning, and a focus on their futures; providing tailored supports that are accessible, coordinated, and developmentally appropriate;

- Ensuring a safety net of support by involving a young person's parents, family members, and other informal and formal key players; focusing on acknowledging and developing personal choice and social responsibility with young people;

- Enhancing a person's competencies;

- Maintaining an outcome focus; and,

- Involving young people, parents, and other community partners in the TIP system at the practice, program, and community levels.

Assertive Community Treatment (ACT) —

This community-based, multi-disciplinary approach was developed in the 1980s to provide treatment, rehabilitation, and support services to persons with severe and persistent mental illness. Using the ACT approach, cases are managed by a multi-disciplinary team, providing services directly to an individual that are tailored to meet his or her specific needs. A team may include members from the field of psychiatry, nursing, psychology, social work, substance abuse, vocational rehabilitation, and community-based organizations. Team members collaborate to deliver integrated services to individuals in their "natural living" settings instead of hospitals and clinics.

Systems of Care (SOC) —

The SOC approach is characterized by multi-agency sharing of resources and responsibilities and by the full participation of professionals, families, and youth as active partners in planning, funding, implementing, and evaluating services and systems outcomes. The SOC approach facilitates cross-agency coordination of services, regardless of where or how children and families enter the system. Families and youth work in partnership with public and private organizations to design mental health services and supports that are effective, that build on the strengths of individuals, and that address each person's cultural and linguistic needs. SOC is characterized by multi-agency sharing of resources and responsibilities and by the full participation of professionals, families, and youth as active partners in planning, funding, implementing, and evaluating services.

Case Studies of Integrated Care Focused on Career Preparation

In 2007, the Office of Disability Employment Policy at the United States Department of Labor, through its technical assistance center, the National Collaborative on Workforce and Disability for Youth (NCWD/Youth), conducted a study to examine successful strategies to help youth with mental health needs successfully transition to employment and lead independent, productive lives. The study, which included a national review of programs with a dual focus on youth and young adults with mental health needs and on career preparation, work-based experiences, employment, and related services, identified the following five youth service delivery programs as exemplary:

- The Village Integrated Service Agency's Transitional Age Youth Program in Long Beach, California

- Options in Vancouver, Washington (Clark County Department of Community Services)

- Our Town Integrated Service Agency in Indianapolis, Indiana (Marion County Mental Health Association, in partnership with the Community Health Network's Gallahue Mental Health Services)

- The Transitional Community Treatment Team in Columbus, Ohio (North Central Mental Health Service)

- YouthSource, King County Work Training Program in Renton, Washington (Work Training Program/King County Department of Community and Human Services, contracted by the Workforce Development Council of Seattle-King County)

Design Features of Successful Programs

The 2007 study, conducted by Lindsey Woolsey and Judith Katz-Leavy, determined that the following six design features were critical to the success of these programs:

➔ **A Place to Call Their Own —** A distinct program identity, including a separate physical location away from adult mental health services, helps to promote attachment and engagement of youth.

➔ **Staffing Choices that Maximize Engagement —** Professional development of all staff is essential and should include gaining knowledge of community resources that youth need to become successful adults. Staffing choices should reflect:

  - a blend of knowledge of mental health and work development strategies that are appropriate to different ages and developmental stages;

  - a balance between the expertise

and guidance that adults can provide with the peer support and sense of youth ownership that youth can provide.

➔ **Mental Health Intervention Without the Stigma —** On-site mental health services which utilize non-traditional treatment approaches as well as outreach and follow-up to keep the youth engaged or to re-engage them are important to success. These approaches should incorporate the building of a trusting relationship between the professional and the client, and "anywhere, anytime" treatment that allows counseling to be integrated into daily activities, such as talking over coffee or lunch, at the grocery store, or while playing pool.

➔ **Assessment and Service Planning Processes that Build on Individual Strengths —** Utilization of a specific assessment and service planning process assists clients in addressing their current status and may be used to develop individualized person-centered service plans that are rooted in the individual's strengths and interests.

➔ **Employment: Preparing for it, Finding it, Keeping it —** Individualized exposure to work and employment pathways is critical for all youth, regardless of the severity of their condition. A "place and train" as opposed to "train and place" philosophy is imperative. All individuals must set career goals, design a plan to get there, and have opportunities for work-based learning. Meeting youth "where they are at" increases the likelihood of success. Supporting employers by providing a "win-win" situation for their participation by offering incentives such as subsidized wages dur-

ing the youth's training is also important.

➔ **Housing is a Critical Part of the Service Mix for Older Youth —** Housing is an important part of the service mix for older youth. Given the shortage of suitable and affordable transitional housing for this population, three of the programs preferred to operate their own transitional housing units. Other options include establishing partnerships in the community for the use of transitional housing units and to use Federal or other grants to subsidize the expense.

Systems Factors that Affect a Program's Success

A program's — and its client's — success are affected by several system-wide factors. All five programs emphasized cross-systems collaboration and used multiple mechanisms to achieve it, including advisory boards, memoranda of understanding, and use of unique funding sources. Three dimensions of cross-system collaboration are highlighted below:

➔ **Local Collaboration and Service Alignment Creates Networks of Care —** The five programs used several approaches to create networks of care through cross-systems alignment including advisory boards, formal agreements, and resource-mapping of programs, state policies, and regulations.

➔ **Identifying, Accessing, and Leveraging Funding Streams —** Programs do best if they strategically leverage multiple funding streams at the same time. Four of the five programs rely heavily on Medicaid, and all rely on in-kind services through community partnerships. Some use

the Chafee Independence Program, HUD's Shelter-Plus-Care grants, or maximize Medicaid options by using waivers, which are a powerful tool for overcoming "eligibility cliffs."

➜ **State Capacity for Systems Change** — States have the authority to improve services to transition-age youth with mental health needs through a variety of mechanisms including: state legislation; Medicaid waivers; amendments to state Medicaid plans; and State Incentive Grants (SIGS).

Summary

Youth and young adults with mental health needs face major barriers as they attempt to make their way in the adult world. Those barriers include a confusing maze of services that often fail to meet their needs, inappropriate service tunnels, transition cliffs, and ineffective, uncoordinated service delivery. Through thoughtful systems change at the local and state levels, and the adoption of promising new program models promoting collaborative networks of care, more youth and young adults with mental health needs can become self-sufficient adults who experience personal and employment success.

References

Hewitt B. 'Rusty' Clark & Nicole Deschenes; *TIP Model Overview,* TIP WEBSITE http://tip.fmhi.usf.edu/tip.cfm?page_ID=18

National Association of Social Workers; *NASW Practice Snapshot: The Mental Health Recovery Model* (Feb. 2006)

Podmostko, M. (2007) *Tunnels & Cliffs, A Guide to Workforce Development Practitioners and Policymakers Serving Youth with Mental Health Needs.* Washington, D.C.: National Collaborative on Workforce and Disability for Youth, Institute for Educational Leadership.

United States Government Accountability Office, Report 08-678 (2008) *Young Adults with Serious Mental Illness: Some States and Federal Agencies are Taking Steps to Address Their Transition Challenges.* Washington, D.C.

Woolsey, L., & Katz-Leavy, J., (2008) *Transitioning Youth With Mental Health Needs to Meaningful Employment & Independent Living,* Washington, D.C.: National Collaborative on Workforce and Disability for Youth, Institute for Educational Leadership.