TENDING THE FIRE: Engaging and Supporting Transition-Age Youth in AB2034 Programs



Community Activators
Stanislaus County Behavioral Health and Recovery Services



"What am I afraid of? That we will fail young people. We think we know how to work with children and adults—we have always had a confidence that we knew what we were doing. But there is not an established expertise in Mental Health systems for working with transition-age youth. They have always been lumped into children's service or treated as adults. This is important work, and we'd better be paying attention. Young people deserve it. Our first instinct will be to turn back to what we know—or to get timid. We're going to fail if we do either. We have an obligation to learn." —Jim Hurley

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Welcome

would like to thank you for your interest in learning more about how the AB2034 programs throughout California are helping to reduce homelessness in our local communities.

Stanislaus County was one of the first three counties to pilot the concepts of Assembly Bill 34, and we are proud of the outcomes we have achieved related to reducing homelessness, hospitalization, and incarceration, and dramatically increasing opportunities for housing and employment. AB 34/2034/334 allowed us to develop innovations in service delivery that were not possible with other kinds of funding, and we are using what we have learned to improve our entire system of care.

We know one thing for certain: when our homeless citizens are offered easily accessible, adequate, and relevant services, most will respond with an effort to change their lives. Being homeless is being in a crisis, and we intend to do everything we can to eliminate the suffering on our streets.

Dan Souza, LCSW, Director, Stanislaus County Behavioral Health and Recovery Services

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Introduction

Framing the Issues

What are the themes that re-occur when talking with program staff serving youth in transition? Beyond budgets, staffing, and all the details it takes to operate on a daily basis, what are the primary issues facing the young person walking through the door?

An interesting thing happened on the road to publication of this booklet. The original idea was to survey existing mental health programs in California and record the innovative program practices for serving youth in transition who have a psychiatric disability and are homeless or at serious risk of homelessness. Early on, we began to notice local mental health staff repeating the same thing: "We do a few things we're proud of, but we're just in the beginning stages of figuring out what works with these young people. Be sure to tell us about anything you find that's really working."

We discovered that, across the state, most mental health programs are in the formative stages of designing and testing program practices for youth in this age bracket. Traditional mental health services in California have been divided between "adult" and "children's" services. It has long been recognized by both policymakers and mental health programs that in between these two categories reside another group: youth in transition. No longer appropriately labeled as children, but not yet old enough or capable enough to be considered adults, these youth have been offered adult or children's services which often don't exactly fit their needs, or have silently fallen through the cracks and gotten no help.

This booklet, more than anything, shows that AB#34/2034 funding has created the opportunity for mental health centers to develop specific program strategies for helping youth in this age bracket. The comments from working professionals highlight the innovation necessary to be successful, confirm the existence of a set of shared principles for designing effective programs, and reveal a committed group of capable individuals across a diverse span of professions within mental health centers. This is a true "what we are learning" booklet.

UNDERLYING ISSUES HIGHLIGHTED

Although our search uncovered many indicators for what works, there are five themes that kept reappearing as underlying issues affecting program design. Each of them has the ability to dramatically affect the types of services an organization chooses to offer and the way those services are delivered. These themes, like the youth they are about, are interwoven and have multiple layers of understanding. We heard about them in almost every interview we did. They are captured by the following quotes from program staff:

"There are two kinds of crisis being brought to us by a young person."

The young person, by the time they come through the door of the mental health center, has multiple difficulties in his/her life that have often reached crisis proportions. There are two basic categories for crisis. The first kind can be defined as "daily life" issues—examples include lack of shelter, food, or money, in need of medication, abusing substances, incarceration, or severe isolation. These kinds of crisis are often tied together and, if they go on long enough, become the focus for both the person and the service provider. The second kind of crisis, often unspoken, is the lack of meaningful direction—having a life purpose and identity that is about more than the difficulties being faced. This crisis, which all youth face as a normal developmental phase, most often gets lost amidst the seemingly more pressing issues of daily life.

Service systems are designed to respond to the "daily life" crisis first. It's what gets noticed first, is easiest

to fix, and forms the basis for the State's data collection measuring program success. Many employees told us that, in spite of the draw towards focusing on "daily life" crisis, they believe that the young

"It's hard to believe you have a purpose when you don't have anyone to help you find it. The fact that I don't know what it is makes me skeptical. I like to think that there is something I'm supposed to be doing, a purpose, but it's like it's too good to be true."

Chris, Youth program participant

person's life doesn't really change for the long term until the second crisis gets the attention it deserves. Oftentimes that never happens. The young person gets out of immediate discomfort and wanders away, or employees get bogged down in the multiple demands of their workday and never have time to attend to second-level crisis. We heard, from everyone we spoke to, that providing good services requires balancing and strategizing for both kinds of crisis.

"Accurate diagnosis and treatment of the young person's illness is not enough."

Although the psychiatric disability is what has qualified the young person for services, the help provided most often must extend far beyond medical diagnosis and treatment of the illness. By the time the young person reaches the mental health center, they are often having trouble with school or employment, isolated from friends and family, aren't sure what they want to do next, and have a limited imagination about how to resolve their problems. If help does not extend into these areas, the person will most likely remain a high user of services, or drift away unsatisfied and untreated—eventually appearing on the doorstep of other social service offices or, worse yet, jails.

"A lot of times the young person is not having a pathological crisis, they are having an ageappropriate crisis."

Increasingly, there is an acknowledgement that the difficulties a young person faces are primarily a typi-

cal age-appropriate crisis that has been made more intense because of the effects of disability. This is an important and new distinction for many mental health programs because it has the potential to demystify and de-pathologize many behaviors that

may have been previously attributed to the person's illness. It reminds us of the old saying, "When you have a hammer, every problem looks like a nail." Oftentimes, when a person receives a diag-

nosis of mental illness, many of their behaviors get lumped—by themselves, family, and service systems—into the "it's because of their illness" category. We heard many programs making courageous efforts to say, in defense of the young people being served, that at least part of their difficulties are the result of normal and predictable patterns in this life stage. The effects of these distinctions are critically important to young people, who often feel a resurgence of hope when learning that many young people experience similar hopes, fears, and difficulties.

"When we do the right things, young people will respond."

Because many of the programs are innovating and developing strategies specifically designed to attract youth in this age bracket, they are discovering what works and what does not work. While there may have been a tendency in the past to believe a young person was non-responsive due to severity of disability or a lack of motivation, many programs are now saying that, when they use different approaches, these same youth become engaged and make substantial progress. There is, across the board, a growing recognition that programs will have to significantly alter their usual services in order to attract and sustain the engagement of young people over the long haul. This booklet contains many kernels of ideas and strategies that work.

"The problem is not just with the young person. We've got to start working more in the community."

Often, what is broken inside a young person is the same thing that is broken in the community—the belief

that all of us are worthy of love and all of us have a contribution to make. Programs are discovering that there are many places in their community which are not welcoming to young people who are struggling to find a place where they can belong. Staff are increasingly recognizing the critical necessity of spending time in schools, workplaces, local community hangouts, and churches helping them learn how to be more inclusive. The skill of community-building is not part of traditional mental health training, and many staff are having to rapidly learn

"I know there is no one on earth who has been more terrified than me. I can help people find a way out of that."

Mindy, Youth program participant

these skills in order to do what is necessary to help young people belong. Program staff are in agreement that when a young person believes they have something valuable to contribute, and the community provides opportunity for that contribution to be made, hope is restored, desire comes to life, and both youth and communities become more whole.



FINDING PURPOSE IN DIFFICULT TIMES: A Discussion With Youth

Editor's Note: The "second crisis" referred to earlier—finding meaningful direction and purpose—was a hot topic for all of the youth we spoke with. In one community, we found three youth who wanted to contribute their ideas and feelings about how they are getting through difficult times and how they see their future. Their courage, wisdom, and optimism speak directly to the resilience of youth and the hopefulness we found over and over again as we talked with people around the State. Within their individual and collective words reside clues for what, if expanded more fully into strategies for support, will attract and engage youth.

Bruce: In some ways, your life got "interrupted" by the onset of your illness. You have had to change some of your original plans about what you would be doing at this point in your life. Do you think your life has a purpose, and did that purpose get interrupted?

Mindy: Yes, I have thought a lot about that. I went to college for a couple of quarters and then had to drop out because of my illness. I've been to the hospital several times now and I feel like I'm in my twenties and I haven't done what I am supposed to be doing. I definitely got stopped on the path. I said to my therapist, "I feel like such a failure."

Bruce: Do you have an idea about what your purpose is, or what you should be doing?

Mindy: I write music and play the guitar, and I believe that is what I'm supposed to be doing. I know it's hard to make a living doing it, but there are ways if you try hard enough. I have written thirty songs and even in the worst times of my illness, that desire for music does not disappear. What I love most about music is the unique type of language it uses and the way you can send messages...people get invited into the message. It's a way to gather and reach people and change them. What we need to do, what all of us need to do, is get our emotions out, calm down, and see what our common experience is. Do we feel this way or that? If I can do that with people when I am playing my music, then maybe they will say, "Well, perhaps," and they will be willing to consider changing their lives. Isn't that worth doing?

Chris: I don't go out very much, and usually I come here for activities (mental health center). I don't go many places because I know people are going to walk up and ask me what I do. That's the standard question everybody always asks. What am I supposed to tell them? That I don't do anything? I go to a mental health center? That I've got no plans? No way. I don't go to places because I know people will ask me what I do.

Brian: I haven't found my purpose yet. I do have one thing I'm good at but it's worthless...I am a really good

swordsman. It's not particularly useful nowadays. But the part I love the most is how you can take the energy from their attack and bring it around to them. You block and you use their force to come back at them. It feels right. It's not just about winning. It's about the movement and the feel of it.

Bruce: Well, one of the old ideas of life purpose is that there is always a part of something you are doing that you are way more drawn to than all the other parts. That smaller part is your purpose, and the larger thing you are doing is the way you find to be able to do that smaller part. For you, it sounds like swordsmanship is the larger thing, and the part of it you really like is how you bring the energy back around to them—the movement back to the source. That's the talent that lots of mediators use, it's the basis for the Tai Chi form of martial arts, and it's the basic skill used in many healing methods. Could you take what you love about swordsmanship and do it in another way?

Brian: Maybe. I'll have to think about that.

Chris: It's hard to believe you have a purpose when you don't have anyone to help you find it. The fact that I don't know what it is makes me skeptical. I like to think that there is something I'm supposed to be doing, a purpose, but it's like it's too good to be true. My dad is a scientist so I usually don't believe things until I see proof. But I know there is merit in it. It's useful to put people in a position where they have to consider what's important in their life. At some point, you've got to get your head clear and figure out what you are supposed to be doing. At some point, even if you are scared, you've got to do something.

Bruce: How have your beliefs helped you through the tough times you have faced?

Mindy: I know now that having strong beliefs can help you survive even the worst circumstances. Even if you have threatening things coming your way, the direst straits of hell, in the gutter, faith is important. I'm religious, and I know that it's true for me that when I don't feel strong in my faith everything else curtails around me. You've got to use that faith to get centered, whether it's God, a mentor, or some tried and true belief, to help you get through things. The biggest part of this life is free will, and you've got to decide you can go on. That's the trick of life, trying not to let the snakes and the lions—all the things that can pull you down—get to you. You have to find the thing that will get you through.

Chris: The biggest thing is to realize that you are never really alone. There is always someone else there.

Brian: Sometimes moral support is more important than having someone actually help you do something. We can handle a lot more than we think we can. It's just a matter of believing.

Bruce: What did you expect to get when you showed up on the doorstep of the mental health center?

Chris: I showed up about a year ago... I had been hiding for a number of years, I guess. I had a lot of worst-case scenarios I had developed about what it would be like going to a mental health center. My best-case scenario was that I would find people who were similar to me that I would be able to communicate with to help me get myself outside the situation I was in. My phobias were preventing me from doing anything. Anything. I was hoping for more out of the peers than the professionals that work there. I didn't really want help from the professionals—I wanted them to stay away. I wanted to set it up on my own terms.

Mindy: Well, I wanted to not be in a Petrie dish and analyzed under a microscope. That's what the doctors like to do...get out a q-tip, add an agent, put you on a slide under a microscope and see how you will react. I have a lot of fear about that. To this day, the thing that I want so badly is just to be accepted by other people. Going into a mental health arena meant that I would be even more stigmatized. I had heard all the terms like schizo, wacko, and I already felt like a failure. I was looking for any chance to feel like I did when I was in the hospital when the nurse would just grunt when I asked her a question.

Brian: It had been six months that I hadn't gone outside. I had to get out.

Bruce: What have you gained by having this illness be a part of your life?

Brian: I understand myself a lot better than most other people understand themselves. I'm much more aware of who I am. I know exactly why I do things. Most people don't have that level of awareness. That's not to say I always do what I should be doing, but at least I understand it. **Chris:** I've learned to have a lot more tolerance and acceptance of others. I'm not proud of it, but I used to stereotype people all the time. I've found that the stereotypes I had about other people weren't really true. I'm definitely a lot more open to different people and different ways of doing things. I've also learned that the more you go through the experience of being in situations and making it even when you are afraid, it makes you gain confidence in yourself. It counteracts the feeling that everyone else is better than I am.

Mindy: I think I've gained a lot of resiliency to bounce back from a very low day. If someone talks about breaking a nail and they say how bummed they are, I know there is more to life, and more serious things to get through. I've gotten clearer about my values from the experience. I know what my priorities are.

Bruce: What would you like to be doing five years from now?

Brian: Relaxing poolside in the Caribbean. Short of that, I want to finish my education. I'd like to go to college and learn more. But, basically, that goes hand in hand with what we've been talking about. Who's going to help me figure out what direction to go in? I don't know what to do. I also need to go back and learn some practical stuff...how to keep a household and all that.

Mindy: I'd like to be working and maintaining my life. I'd like to work in a coffee shop and play guitar. I also want to go back to school and pursue an English course, some philosophy, biology, and psychology and I would use that to get in a profession where I can help people because of my experiences. I know there is no one on earth who has been more terrified than me. I can help people find a way out of that.

Chris: Being in a situation like I have, in which you need help from people, puts you in a situation where you want to help others. When you have been there yourself, you understand that people need other people. I don't have a specific goal right now. I think I might want to help other people. But really, I just want to do something. Something that makes me feel like I'm actually doing something with my life. What may stop me is the problem I have doubting myself. Life has taught me that I can't always pull off what I want to. At the same time, I believe that I have come a long way. I've got to do something.

Part Two

Program Design Elements and Approaches

> What does it take to design a program that attracts youth? Should we offer employment and housing services, and what are the challenges? Do we directly engage with school systems? What are the underlying things to think about when designing a program?

This may sound obvious, but most adult services are not like this: It's got to be their turf and their agenda. You've got to go to them. When they are in our space, they censor what they say—as much as they can—so it sounds appropriate. When they are in their own space, it's really different. Usually, you have to start with the lighter stuff and get to what really matters. Sometimes you never get to the deeper stuff. Sometimes, they just want somebody to listen—it's not always about solving a problem.

Danielle Moffett

There's an old saying in social services, "womb to tomb," that reflects what happens to many people who enter the mental health system. There is an assumption, both in the person and in us, that the person is entering a life"This may sound obvious, but most adult services are not like this: It's got to be their turf and their agenda. You've got to go to them."

Danielle Moffett

reers and a real life. Almost none of the jobs resulted in them not needing us, or getting more friends, or being able to live on their own. We're way past just saying people can and should work. They can have jobs of substance. I feel like I am going up against some big forces here...there is so much focus on work. But is it work at the expense of no dream and no life? People are capable of more than that. We are trying to break the cycles of poverty and ignorance. School is the primary way to do that. We are

> pushing members to go to school and get a certificate or degree—something that is about a future where they can really be somebody.

Guyton Colantuono

We operate some housing, and there are grey areas for us. Some of the

time of services. There are people in our system today who expect to be served by us for life. We've got to break that cycle. So, how do you design services that assume a person may need some kind of ongoing help, but not need our mental health services forever? That's the question we've got to begin answering. I think part of the answer is in our community, using peer and natural supports.

Jim Hurley

The employment thing hasn't worked for us or our members very well. We saw a lot of young people get jobs, but almost none of them were about cayouth see us as the landlord, and also as the person responsible for their treatment. It's hard to be in the middle. I find myself looking out for unsafe conditions in their houses—telling them they have to clean some things up, or quit doing drugs, or quit having so many people over to the house—but then they come to see me as a mental health worker. It's very confusing for me, and I'm sure for them. We haven't yet figured out another way to do this that works better.

Kerri Dewein

"I don't consider receiving 'medication only' support to be an adequate strategy for a lifetime of client care."

Jim Hurley

I am serving a young person who just turned 21 and grew up in foster care and group homes. His last foster family took him to downtown Stockton, dropped him off, and just drove away. I know that I want him to bypass the mental health system—he'll just pick up more bad behaviors. I think more young people should be directed away from the mental health system and mental health social events. I know providing social clubs works sometimes, but it's often just an invitation to not grow and not move forward. It takes more courage to go outside the system. The longer you keep someone in the system, the harder it is to get out. What he needs is peers who aren't mentally ill and delayed so he can learn what adult behavior is. It's like: "Do you want to climb the mountain, or do you just want to camp out?"

Peggy Gordon

We have a special site that does not look like a traditional mental health clinic. Two staff—one clinical therapist and one behavioral health specialist—provide support to transition-age youth. We've noticed two things that work—hiring youthful staff who are excellent role models with lots of positive energy, and who can identify with youth as well as confront them when necessary. We also set up transitional housing where these young people can exercise some authority in a safe environment.

Maria Marquez

We are using housing subsidies to encourage youth to go to school. We've got a few different formulas, but basically we pay a higher subsidy to those who are in school than we do to those who are not working and not in school. If you aren't on SSI and you aren't working, you get the smallest subsidy. In reality, it's really hard to pay that level of rent without working. Basically, we are promoting a program that says you should be either going to school or working.

Guyton Colantuono

Statewide there is a huge gap between children and adult services. Most of the time when an adult, maybe age 25-30, arrives at our doorstep desperate for services, I look back in our records and find the person has received services at age 13. It will be a child that I followed with IEP meetings with the schools. This service gap is huge—young people don't get better when they are left to themselves.

Steve Steinberg

We have designed into our program a peer support network with some paid peer staff. It's independent from the rest of the mental health service delivery system. This is a critical distinction, and one that we struggle with. The peer staff do not chart, and they don't go to treatment team meetings. We wanted to have a way for young adults to support each other outside of professional services. This sends a subtle message: "Mental health services are part, but not all, of the kinds of help you can have in your life." Isn't it nice that a young adult can go to a meeting and have it not be written down...to have it be "just us"? One of the benefits you get from that is it acknowledges the limited nature of mental health care. Otherwise, if everything is part of the system, the person assumes that all the help they will get comes from the system. With a peer support network, a person can leave the system and still come back to the peer support network to get help without signing up again for more services.

Jim Hurley

One of the problems we have in designing youth services is that it is often older people designing the programs. We're often not very tolerant of "youthfulness," and can be very moralistic and judgmental. What is it with all the security guards and glass partitions in mental health centers and youth programs? The successful programs don't seem to have either one of those. We've got to start getting more creative and including younger people in figuring out what to do.

Guyton Colantuono

My position, employment/education developer, really was a good thing to create. For us, school is most important, and then work. When you have a person who is always promoting that, it stays at the forefront of the team. When it's just case managers, those things can get lost with-

out the daily advocacy. A team without a focus is a misguided team. You want to help members' recovery? What does that mean? You want to help people "get better." What does that mean? You've got to have a clear focus and keep coming back to it. It permeates to every part of our team.

Joe Verrone



Guyton Colantuono

"One of the problems we have in designing youth services is that it is often older people designing the programs. We're not very tolerant of 'youthfulness,' and we can be very moralistic and judgmental."

Guyton Colantuono

Part Three

Differences Between Adult and Transition Services

What are the differences between serving young and old people? Does the difference in age fundamentally change the approach?

This isn't the standard work. You actually have to learn some things. You've got to get some new tricks in the bag. For instance: Young people solve problems by asking for information in bits and pieces. They ask for one part of it from one person, and they ask another part from another person. Sometimes you have to ask everyone they know what kinds of questions they have been asking in order to fig-

ure out what they are actually struggling with at the moment. Another thing: The young person wants to provoke you. They want you to stand up and defend what you did when you were younger, so they can think through what they are trying to decide in this moment. They are paying close

"A lot of times the young person is not having a pathological crisis. They are having an age-appropriate crisis. We've got to remember that. We can't see everything as part of their illness."

Tiffany Farley

A big part of a young person wanting to come and spend time with us is that we say, "I wish you well." It sounds simple, but when you say that from a genuine place inside yourself, it really means something to the young person. There is a young man in the office now as you and I are speaking. He has no place to go and has serious problems. As I was walking by a few minutes ago, I heard a staff person

> saying to him "I wish you well." The staff feels the conflict and pain of the young person who is trying to figure out who he or she really is. It's important to understand that we want people to be more than just happy—we want them to know who they are and be satisfied with

their direction. We wish them well in that endeavor.

Danielle Moffett

We make a lot of effort to understand street life. Many of us who work here have been in the same kinds of trouble as the people we serve. We use some of that language when we are talking with them. Young people throw words at us as a challenge. They want to know if we will still work with them. For example, we are willing to talk with them about wiccans, which is a witchcraft practice. We aren't promoting witchcraft, but our willingness to talk about it with young people is a sign of respect.

Kelly Mraz

Most humans don't get through adolescence for ten years or so—and most of us don't have a mental illness making that period more difficult. This is going to take a long time. We are just trying to start a conversation that we hope they will carry on after they leave us. They've got to do it at their own pace.

attention to you. They have observed a lot more

about you than you probably realize. Young people tell me things about myself all the time that I didn't

You have to think of the conversation as long term.

Kelly Mraz

realize.

Sandra Weeks

We do things that are small acts of reestablishing community...like going with a mom to take their first baby pictures. We make it a point to be around when they do well—it's not just about when they aren't doing well. It's important to be available. We had a young man come in a few weeks back who had exited our program. He came back just to tell us he decided to get married. He just came in to share that. The idea is that we are around to hear about whatever is going on. The value in that has to do with the availability. We want to seem like folks who can be talked with anytime, anyplace. If it's too rigid and structured, it will never work.

Danielle Moffett

Young people want your insight and your experience, but not to feel like you are holding them down. Young people fight things. Within their life with us, they fight about whether or not they have a mental illness, whether or not substance abuse is a problem, whether medications are good for them or not. It's all a fight. You have to engage with the person and help them get a bigger experience than their current life.

Kerri Dewein

With young people, their woundedness comes out some, but to a large degree is closeted. You just have to listen, especially when there is abuse in the person's life. A mental illness, sitting on top of abuse, coupled with developmental delays—how can a young person get through that?

Tami Brugman



Ernie Guomas and Drew Milus

"Another thing that helps is simply a person aging a few years at 23, things can look very different than 21!"

Ernie Guomas

"Young people give us an opportunity to remember what the potential in people really is. As adults, we have a chance to be optimistic. This is part of what young people give back to us."

Jim Hurley

In older times, there would have been rituals to help them through the adolescent time period. Many of my clients don't even get the high school graduation ritual. They begin to think they are adults and have to have it all figured out right now. They ask me if I think they will make it. This is where I can step in and remind them they don't have to have it all figured out right now, and it's normal to be afraid. You will make mistakes. You will bounce checks. The world will not end.

Tiffany Farley

Interestingly, though a number of young people tell me they want something, like housing—I get it for them and they completely blow it off. I think maybe this happens for two reasons. First, they really want to stay independent from the mental health system, and will sacrifice the taking care of themselves rather than become part of the system. Second, sometimes the mental illness is acute and if they haven't had it for long they are still not accepting their need for help. Making that transition in their own mind is really hard for them.

Drew Milus

The biggest thing we have learned with youth is their need not to identify as mental health clients—we need to find ways to bend and be flexible and provide services that are mental health, yet don't look or feel like mental health services. We do whatever it takes—as much as possible away from our office. There is a lot of resistance. What works is we approach each person as an individual, get to know each person on their turf in the community, and make an individual plan—being as flexible as we can with what we have. We don't go away—if a person relapses or leaves, we are still there. Another thing that helps is simply a person aging a few years—at 23, things can look very different than 21!

Ernie Guomas

We have tried to serve some transition-age youth—and even with resources, it is tough. They often are trying to escape the stigma of mental illness and separation they have experienced so painfully in adolescence and in the schools. No teenager wants to join our club. They see an older adult in our system who has support needs that are way beyond theirs, and they don't fit.

Steve Steinberg

One kid I know, he had the biggest chip on his shoulder—just shut down emotionally. The guy is now working full-time, living on his own, plus he is volunteering for us. He's like a different person. That transformation is possible for a 50-year-old also, but I wonder if we would have given up on him somewhere along the line. Young people give us an opportunity to remember what the potential in people really is. As adults, we have a chance to be optimistic. This is part of what young people give back to us.

Part Four What Engages Youth?

What can we do to make a genuine connection with the young person? What will keep them coming back to us for help?

One thing is that we are very welcoming. Our tolerance level is a lot higher than other places in the community. That's a blessing and a curse. It's important to be tolerant, but we can hinder people's growth by being the "ultimate best friend." It's hard to strike the balance. We don't want to disregard them and throw them away, but we also don't want to teach them it's ok to do weird stuff in the wrong places. What's appropriate at a punk rock concert isn't appropriate in a social security office. I don't think we have even come close to figuring this one out. We are driven by the fear we will lose people.

Guyton Colantuono

The biggest thing is you being there and being there and being there. Not giving up. I can try and be into their movies or be into rap, and that might get some of them for a little while. But the bigger thing is to be there all the time. They've had a life of people who have let them down.

Joe Verrone

Young people want to be part of a "system," whether it's a family, a community, or a mental health center. No one wants to be truly independent. At our office, I think the biggest thing we create is a structure with rituals that allow them to be who they are without judgments. In our groups, we have an opening and closing ritual, and a candle is lit. The young people asked for this. They want to have the structure they don't have in other parts of their life.

Tiffany Farley

"It's very difficult to manage your time when you have 15 hours awake each day, you are hearing voices, and you have nothing to do. Engagement with something meaningful is the primary goal."

Kerri Dewein

Doing the core gift interview with a young person really starts something. A connection gets going that never goes away. A young man came into my office last week, and said he went to his therapist and wanted to "talk about that gift stuff...you know, what's my gift?" It starts opening something up in them. They have to keep coming back to it. They don't want to say it's spiritual, but it is. The same young man, when we took him out on a hike in the woods, said he liked being in nature because it is "big and it's free." He was feeling the spirit—he just didn't use those words. Young people want to

be connected to what is bigger than they are.

Kerri Dewein

What gets young people engaged? The network of peer support works really well. They go to meetings with one another. They see there is something possible for themselves when they see it actualized in someone else who is young. There is a hook in that

that doesn't go away. I think another engagement strategy is that we expect that they will be responsible for their life. We try to send that message clearly. We expect them to get better and to move on and have a life. This is often a very different message than they have ever received in their life. That message alone, when it sinks in, can cause a young person to see themselves differently. One of our volunteers said, "It wasn't just that someone believed in me, it's that they actually expected something from me. They expected me to get well, to do something, for myself, and that really made a difference."

"Youth without family and without community come and join us to get that sense of being a part of something. It's not ideal, but it's all they can get ahold of at that point in their life. They are asking, 'Who is going to love me?'"

Tiffany Farley

We see families as a part of the community, and we utilize the parts of community that don't cost a lot of money. Recently, we met with a group of families who wanted to do stargazing with big telescopes. One of our clients knew a lot about it, so we all went—learning in the community together.

Tiffany Farley

You look at a young person and you get red flags. All the risk factors are there, and they are right in your face. The scariest part is that they think they are bulletproof. I have to help them understand they aren't bulletproof, and they can't go around being dangerous. I have so little control—they can walk away at any time. This is all happening at such a big level in their life, and I worry I will do something that will set off an explosion. Staff people do a lot of talking around here—none of us wants to be the only one responsible for a person.

Kelly Mraz

Youth are drawn towards staff who are educated and intelligent. I think it's because they help the kids make decisions based on values rather than just jumping on a crisis. Young people are looking for me to help them think in the long term—for stability. In the short term, they may be attracted to somebody who is cool, but in the end they can really tell who is being helpful and who isn't. They are really smart about who is good to hang with.

Joe Verrone

It is important to really hear what young people are saying about what is going on in their life. They don't need so much to be told, as they do to be listened to. I go to the park and play Frisbee—cut up with them for a while. They know I am there as a guide, not a friend, but they are able to be themselves as they build trust with me.

Peggy Gordon

Some of this has to do with a person's gifts, too. There is this one young man; he and I play music together. He shows me things, and I show him things. It's just one part of what he gets from us, in addition to good medical care, good case management, and good peer support. But playing the guitar is another part. I asked him the first time I met him what he liked to do. He said, "Play the guitar." The next time he came in, he lugged his guitar and his amplifier on the bus all the way over to our office. He's like a different kid when he's playing his guitar in our office. We have to engage with him at that level.

One of the things that helps me is longevity. I grew up here, and I know what it's like to live here. When you are from a place, the young people know how to get ahold of you. I am a constant, and I'm a part of the community. Because of my age, I am not seen as a parent figure. I go to their homes and we go for walks. The work is therapeutic and professional, but it is not sterile.

Tiffany Farley

I hear comments from adults about the "unrealistic goals" of youth. For the most part, we don't have young people who have unrealistic expectations. They want what all of us want—a relationship, a place to live, and a job. The most important thing is for me not to judge whether they will succeed or not—my job is to get the person started down the road. No matter what their goal is and how unrealistic I may think it is. When they run into trouble, we have to always be in a balance between what part of the trouble is due to their disability, what part is from being young, and what part is just about learning.

Jim Hurley

Social service staff can be so undependable...people are always showing up late or forgetting. I don't want to hear excuses from staff people about why they can't show up on time. Look, you've got to be dependable if you want a young person to trust you. Is it that hard to use a planner? It seems to me like we have the same issues about time as the young people we serve. If you can't plan for your own life, how are you going to help a member plan their life?

Joe Verrone



Danielle Moffett, Sandra Weeks, and Kelly Mraz

"When they run into trouble, we have to always be in a balance between what part of the trouble is due to their disability, what part is from being young, and what part is just about learning."

Part Five

Youth and the Vision of Recovery

> How does the emerging recovery movement relate to youth services? Are the recovery principles of hope, finding meaning, and personal authority relevant to youth?

I've heard people say that these young people "suck you dry." It is true that they need a lot from us, but you've got to believe in them or you will get sucked dry. I think there is hope for everyone. It may not be my definition of hope, so we have to find out what the person's definition of hope really is. Also, you've got to remember they might not see anything until they are 31, but that doesn't mean it's not theirs to find. The fact that we don't give up on them gives them the idea that they shouldn't give up on themselves.

Sandra Weeks

When you blend the recovery philosophy, which includes sharing stories, into mental health work, the boundaries get real different. Young people are very interested in your own life as a way for them to figure out theirs.

Danielle Moffett

"Resilience" is a term that works with youth. Resilience has to do with finding and sustaining strength in the face of adversity and life challenges, and trauma. It involves the ability to make meaning out of your suffering and use it as a source of strength. Resilience involves some connectedness to other people or something greater than you. For us, that's why we have a network of peers. The sharing of the stories helps to build resilience because you begin to see that you are not alone, a better life is possible, and there is meaning in your story beyond the suffering.

Jim Hurley

"... they might not see anything until they are 31, but that doesn't mean it's not theirs to find. The fact that we don't give up on them gives them the idea that they shouldn't give up on themselves."

Sandra Weeks

I don't think we can practice recovery to the letter of the law with this group. Younger people, because things are so new, need to be directed more. We need to instill values rather than guiding people towards values. Our values need to be transparent, in order to model how we do it. We have to drive the car with them. We both have the steering wheel here, and what are you going to do? It's not so much recovery as it is discovery. Youth don't have things they are returning to, they are figuring out

what they are going towards. They need a strong sense of values and pushes in certain directions. Our best example of this is how we approach school. Most people go to college because it's their family's expectation for them to go to school. We push school for the same reason. We believe in it.

Guyton Colantuono

Sometimes you have to jar them directly, and sometimes you have to go at it from the side. How do you find the right question—the one that will help them turn the corner? I met a guy years ago, when I was a substance abuse counselor. I only saw him once. He confided in me that he was an alcoholic, but didn't want to stop drinking. I asked him "if you don't stop drinking, do you think your life will work out?" Then he cussed me out and stormed out of my office. I saw him a year later when I went with a friend to an AA birthday speakers meeting. He approached me, and asked if I remembered him. I didn't. He reminded me of him cussing me out...

"oh yea, I remember you." He was there to get his one-year sobriety chip, and had stopped drinking the day after he saw me. He said, "What you asked me saved my life." I replied, "I don't remember saying that to you, and of course, I'm glad it helped." I often wonder: maybe making a difference is not about trying to say the right thing, or coming up with an answer. In that moment, I remember feeling respect for him and not feeling like he had to accept what I said. I didn't say it or approach it like it was some kind of breakthrough comment. I just said what I needed to say. I'm not trying to be humble; I just think that you can't really know what the effect of what you are saying will be. In a recovery context, it's just a matter of when you are going to be ready to hear what you need to hear. Each person has a capacity to know. My responsibility is to keep going, not to wait around to say the one thing they need to hear. I don't have that much power. When you design a peer component to your services, you up the chances of someone hearing what they need to hear because there are more people saying it to you.

Jim Hurley

What is the young person "recovering" from? I don't really like the word. It's just living, that's all. Do you have a dream? What supports do you need? Most of us don't have to go through the steps with social service systems' help. The word doesn't make any sense.

Joe Verrone



Kerri Dewein

"We are rooted in storytelling because it provides hope. It goes back and forth. The teller needs to tell it and the listener needs to hear it."

Part Six Closing

In 2003, the Commission on Children at Risk, a widely respected panel composed of children's doctors, neuroscientists, mental health professionals, youth social service experts, and representatives from faith communities assembled to answer a question which all youth-serving organizations ought to be interested in: "What is it, more than anything else, that contributes to youth being successful?" These experts, in unanimous agreement across all disciplines and endorsed by the Surgeon General of the United States, declared that the two most critical and fundamental components to youth development are: the existence of enduring, emotionally connected relationships and the ability to find meaning and purpose in his/her life. The report¹ noted that this is the first time that both neuroscientists and social scientists have agreed on these two indicators.

For young people who experience psychiatric disability, these two indicators for success may be the most elusive of all. Recent research about the isolation resulting from disability is overwhelming, but it pales when hearing, firsthand, the heart-wrenching stories of loneliness from young people receiving services from AB#34/2034 programs. The second indicator, the ability to find meaning and life purpose, is equally as elusive. The interview with three young people in this booklet is an example of both the desire and the struggle they have had in finding purpose in the midst of the onset of a disability. Young people have the desire to make contributions which help them to believe they have a purpose and a place in their community.

This work is not easy, but it is not as hard as walking away after looking in the eyes of a lonely young person who has no hope for their future. AB#34/2034 programs talk a lot about hope. It is said there are two components to having hope: a clear vision of a future that is desirable, and a belief that you may get there. Using this definition, our sources of hope are clear: That young people will find the love and acceptance they desire and, in return, find a meaningful purpose which they will give back to their community.

For our communities, for young people, and for ourselves, this is work worth doing.

¹From: "Hardwired to Connect: The New Scientific Case for Authoritative Communities"

"They've had so many people tell them they are so broken they will never get fixed. They are really fighting to believe there is something inside them that is worth them going forward for. We have to help them remember they have a gift—they have something to contribute and they can access it. We have to help them know this is a worthy fight and it's worth being in this struggle."

Kelly Mraz

