

COMPREHENSIVE COMMUNITY MENTAL HEALTH SERVICES
FOR CHILDREN AND THEIR FAMILIES PROGRAM
Child, Adolescent and Family Branch
Center for Mental Health Services
Substance Abuse and Mental Health Services Administration
U.S. Department of Health and Human Services

GRANTEE PROGRESS REPORT – SUGGESTED FORMAT

Project Number: **5 SM058485**

Project Name: ***Vermont Mental Health Services for Transition-Aged Youth***

Reporting Period: ***February 1 – September 30, 2012***

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I. Goals of the Project

Have there been any changes in the goals of the project? If so, please describe and provide a rationale for the changes in goals. *No change.*

Describe progress toward achievement of the goals as articulated in your application or based on any changes that have been made. Information about progress includes identifying milestones or critical events and any performance targets that were achieved.

Cumulative record of progress prior to this reporting period:

The Vermont State Joint Fiscal Office agreed to allow the Vermont Department of Mental Health (DMH) to accept the federal funds for this grant program on December 19, 2008. By February 1, 2009, an Invitation for regional planning was issued to the Act 264 Local Interagency Teams (LITs); sub-grants of \$10,000 each were subsequently awarded to all twelve Agency of Human Services (AHS) regions to conduct strategic planning. (The “Invitation to Communities” can be found on the Regions and Communities page of the official YIT website, <http://www.youth-in-transition-grant.com>.) Regional planning by a broad group of interagency stakeholders, youth and families is the foundation of the State Team’s approach to sustainability planning.

The State Youth in Transition (YIT) Outreach and Operations Team made site visits to each region and provided on-site and distance learning opportunities for the Steering Committees doing the planning to share the State Team’s vision, mission, goals, and overall logic for accomplishing the desired outcome that young adults be productive and valued in their communities and free from incarceration.

The State YIT Outreach and Operations Team delivered a statewide training event on July 9, 2009 in collaboration with the State Court Administrator’s Office to highlight the Sequential Intercept Model (SIM). The State Team also sponsored a series of conference calls about topics like allowable use of grant funds and evaluation. It hosted a webinar for the regions about Cultural and Linguistic Competence (CLC) on August 13, 2009.

*The regions submitted their plans, which were reviewed and – sometimes after negotiations – approved by the State YIT Outreach and Operations Team. (The regional plans can be found on the corresponding regional pages of the YIT website <http://www.youth-in-transition-grant.com>.) Sub-grants for regional service implementation were then awarded by the Department of Mental Health (DMH) to the fiscal agents chosen by the regions to handle the funds and administrative duties. Regional YIT staff - including part-time peer outreach workers - were hired and are doing outreach and service delivery as planned. Progress reports from each of the 12 regions are posted on the YIT website (<http://www.youth-in-transition-grant.com>). ***This document reports the activities of the YIT State Operations and Outreach Team in support of the regions.****

On March 15, 2010 the University of Vermont (UVM) Independent Review Board (IRB) announced approval of the YIT evaluation design. Amid intensive training by the YIT Evaluation

Team with the regional evaluation liaisons, the evaluation began on April 1, 2010. From then through September 30, 2012, 529 youth and young adults met the Study Inclusion Checklist Criteria (SICC). This figure is certainly an under-count of the young people contacted by YIT staff in their outreach efforts. Of the 529, 431 or 81% of the youth and young adults agreed to be enrolled in the Common Study that provides NOMS data through the TRAC system. (For more enrollment information, see Attachment A. For more information about the evaluation, see the YIT website evaluation pages at <http://www.youth-in-transition-grant.com>.)

To carry out the evaluation as specified in the original federal grant application, the Vermont Child Health Improvement Program (VCHIP) of the UVM Medical School was awarded a sub-grant by the DMH. Also as originally planned, the Howard Center was awarded a sub-grant to oversee the Cultural and Linguistic Competence (CLC) work, and the Vermont Federation of Families for Children's Mental Health (VFFCMH) was awarded a sub-grant to deliver family and youth leadership activities.

All key state-level staff were hired in State FY 2009 (including the Project Director, the Youth Coordinator, the Social Marketing Coordinator, the Training/Technical Assistance (T/TA) Coordinator, the Cultural and Linguistic Competence Coordinator, and the 2 FTE evaluation staff). Permission was given by federal project officer Bethanie Parrish to split the Youth Coordinator position in half, giving one half to someone who also serves as the Social Marketing Coordinator and the other half to someone who also served as the Training/Technical Assistance Coordinator. The sub-grant to the VFFCMH was revised to reflect these additional responsibilities.

In July, 2010 the Youth Coordinator-T/TA Coordinator left the VFFCMH to take a different job. Before leaving, she helped produce several training events in May, 2010.

- On May 7, 2010 the VFFCMH celebrated Children's Mental Health Day/Week with the first Young Adult Voice Movement (YAVM) Conference. Over 150 young adults attended the event; nearly half of them were from the English as a Second Language (ESL) classes of the Chittenden (Burlington and Winooski) High Schools. Buses and approximately 40 older adults provided transportation or other support for the young adults to attend. All the young people were able to participate in a ropes course during the day. The Conference also included workshops about CLC issues (LGBTQ; "Speak Up" about oppression), youth suicide prevention, social marketing messages, youth advocacy and community organizing, expressive arts like theater and painting, even a presentation by police about internet safety. Two members of Vermont's UVM "Active Minds" chapter gave excellent opening and closing keynote speeches. One of the Active Minds speakers was Cameron Mack. The State YIT Outreach and Operations Team later sponsored him and 4 other young adults who participated in the YAVM Conference to attend the Georgetown Training Institutes in the greater Washington, D.C. area in July, 2010.*
- The Youth Coordinator-T/TA Coordinator and the YIT Project Director organized with the Vermont Coalition of Runaway and Homeless Youth Programs (VCRHYP) a three-day training series for new regional YIT staff. On May 19 the regional YIT staff and VCRHYP staff learned about Street Outreach from James Bolas, and on May 20-21 YIT staff and supervisors learned about the Transition to Independence Process (TIP) from Dr. Rusty Clark. The evaluations from the TIP workshops indicated a general desire for*

more hands-on training about TIP so the Project Director, the YIT Evaluation Team, and the statewide Vocational Rehabilitation (VR) Director of the JOBS Programs then began exploring with Dr. Clark how to move the regions toward TIP fidelity.

On September 23, 2010, the State YIT Outreach and Operations Team provided nearly 100 regional YIT staff and Steering Committee members, including young adult and family leaders, a Learning and Sharing Day about Building the Young Adult System of Care (SOC). Children's Mental Health Directors, State YIT Leadership Team members, and other key partners attended the day, which was organized to discuss the YIT Logic Model, its basis in SOC strategies, and the goals to strengthen each regional SOC and produce the desired outcomes for individual youth and young adults and their families. Each region left the day with agreement to undertake 1 or 2 action steps to improve their existing SOC. (A brief write-up of the above training events and lots of pictures can be found on the Training and Technical Assistance page of the YIT website at <http://www.youth-in-transition-grant.com>.)

On September 30, 2010, the YIT CLC Coordinator unveiled a 3-hour curriculum entitled "Towards Cultural Competency in Mental Health" to teach mental health clinicians and other front-line providers and administrators about the social construction of race and the harmful effects of racism, including health disparities. The curriculum was very well received, with evaluation results showing a gain in participant's knowledge. Go to section V of this report, below, to learn more about the curriculum and its use.

During the first week in October, 2010, the YIT Outreach and Operations Team received SAMHSA Federal Project Officer Bethanie Parrish and her consultation team (Marty Hydaker, Nadia Cayce, and Beth Picora) for the formal Year 2 site visit to Vermont. As officially reported, they appreciated much about the visit; they also made recommendations for the coming years of the grant. They were satisfied enough with YIT progress that the SAMHSA Center for Mental Health Services' Child, Adolescent and Family Branch subsequently decided to not conduct its usual Year 4 site visit.

After the Youth Coordinator-T/TA Coordinator resigned to take a different job, the VFFCMH considered how to make best use of the experience, skills, and talents of the Youth Coordinator-Social Marketing Coordinator. A re-configuration of tasks led to revised job descriptions for the Social Marketing Coordinator and for a new Young Adult Coordinator as well as to a contract for clinical technical assistance from Dr. Jody Kamon, who is also a part-time evaluator for the YIT grant. The new Young Adult Coordinator, Matt Wolf, began work on January 26, 2011.

The key statewide accomplishments from February 1- September 30, 2011 included:

- Presentation of YIT findings by the YIT Evaluation Team at the annual SOC Research Conference at the University of South Florida in Tampa.*
- Production and dissemination of over 200 posters and 2,400 bookmarks to educate the public about children's mental health, saying "As a village, we can build resiliency", especially for weathering trauma. The posters and bookmarks were sent to public service agencies and advocacy organizations. In addition, the YIT Social Marketing Coordinator produced 200 postcards, one for each of Vermont's Legislators. The postcards carried messages that "Children's Mental Health Matters" and to "Celebrate Children's Mental Health Week".*

- *Advocacy by the YIT Family Lead Contact through testimony to the Legislature's Joint Appropriations Committees and participation in a statewide rally held by multiple organizations to protest planned cuts to State mental health and developmental services budgets. The advocacy was effective; the planned cuts were reduced by half.*
- *Delivery of youth-driven workshops at the Sixth Annual Youth Workers' Conference in Killington, VT in May. One of the workshops was by the Franklin-Grand Isle YIT Young Adult Group about their process for discovering and developing their own leadership. Matt Wolf helped Franklin-Grand Isle YIT Coordinator Ebony Nyoni organize this workshop and has since encouraged and supported the Young Adult Group to bring the content of the workshop to young people in the Hartford, Burlington & Morrisville regions.*
- *Production of the second annual Young Adult Voice Movement (YAVM) Conference with multiple workshops, this time as an overnight event on the UVM campus over Memorial Day weekend. On Friday evening 114 young people attended the event; on Saturday morning 75 attended the workshops; and on Saturday afternoon 60 attended the team-building activities. 52% identified themselves as either Asian or Black/African American.*
- *Creation of the Young Adult Leadership Award, with the first presentation of it at the YAVM Conference, followed by solicitation of nominations for other leaders for future awards.*
- *Two days of advanced TIP training for 82 participants from 16 organizations from throughout Vermont, on June 8 and 9, 2011 in Burlington;*
- *The State YIT Team brought 3 young adults and their families or other adult allies to the national SOC Grantees' meeting in Chicago. There the young adults - with Courtney Bridges, YIT Social Marketing Coordinator - presented a workshop entitled "If YOUth Build It, They Will Come" about designing and promoting the YAVM Conference.*
- *The CLC Coordinator brought young adult Jeetan Khadka and a second community organizer-interpreter to a CLC training event in Atlanta, GA sponsored by the National Technical Assistance Partnership in early September.*
- *An on-site TA visit to VT in September by the National Technical Assistance Partnership and Vanguard, with Leah Holmes-Bonilla and Brittany Smith as part of the Caring for Every Child's Mental Health Campaign - helping Courtney Bridges of YIT deliver a "Social Marketing 101" training event. Though Tropical Storm Irene had very recently destroyed roads, offices and homes (especially in Southern Vermont), 40 people (9 young adults) from 7 of the 12 regions attended to learn about the "who, what, when, why, and where's" of social marketing and social media.*
- *On September 30, 2011, the annual YIT Fall Learning and Sharing Day was held with the dual foci of strengthening systems of care (SOC) and family- and young adult-driven partnerships. 110 people attended from all 12 regions. Most of the regional YIT Steering Committees brought young adult leaders, and 4 brought 6 family leaders. YIT Social Marketing Coordinator Courtney Bridges contributed to the planning for the Day by thinking of the theme of a road map and creating materials (pre-printed maps, road signs, street-light-colored stickers, etc.) for each region to use to illustrate the partnerships and relationships (including with family and young adult leaders) constituting their SOC's.*

The key statewide accomplishments from October 1, 2011 – January 31, 2012 included:

- *Because Tropical Storm Irene ruined the VFFCMH office in Waterbury at the end of August, 2011, YIT Social Marketing Coordinator Courtney launched a "We've Moved!" temporary marketing campaign to help families, young people, and SOC partners find the new space in*

Williston (same building as the Vermont Family Network, VFN). Through social media, new business cards, and other hard materials, VFFCMH was able to start over in strength.

- The VFFCMH partnered with the VFN and the Vermont Center for Independent Living (VCIL) to deliver a training event in Bennington for families and care-givers with young adults of transition age. The YIT Lead Family Contact, Cindy Marshall, explained the differences between the child and adult mental health systems. The VFN staff talked about services available through Developmental Disabilities, and VCIL staff discussed guardianship, Medicaid, and employment. This training is now available for other regions.
- On October 27, 2011 at the annual conference for the Vermont Association for Mental Health & Recovery (VAMHAR), YIT Young Adult Coordinator Matt Wolf co-presented a workshop with Jennie Schoerke, Project Director for the DMH Adult Division's Transformation Grant. The workshop consisted of an overview of both projects, how they are similar in philosophy – emphasizing the importance of strengths-based and peer-delivered support – but different in the populations served and in the available services.
- In November, 2011, to honor the 20th year of the national Federation of Families for Children's Mental Health and having been the first chapter of the Federation, the VFFCMH handled registration for the Federation's 5-day annual conference in Washington D.C. To do so, the VFFCMH sent 11 people: 5 VFF staff, 3 VFF Board members, 1 family leader, 1 young adult peer outreach worker, and the YIT Grant Project Director - 6 of whom are directly involved with the YIT Grant.
 - In preparation for this event, YIT Social Marketing Coordinator Courtney Bridges created a postcard and a bumper sticker for the bags for each of the 800 registered participants at the conference. She also designed a T-shirt worn by the VFFCMH team and delivered to Vermont's Representative and Senators on Capitol Hill.
 - At the conference, Mercedes Avila presented a poster illustrating the pre-post test results from participation in her CLC training.
- The WEST campaign and another VFFCMH youth leadership initiative were combined with a mini-grant opportunity from the Vermont Department of Health's (VDH's) Office of Minority Health to produce one new Request for Proposals (RFP) for up to \$2,000 per region. The RFP was announced for projects to be completed by September 30, 2012, with applications due anytime between December, 2011 and June, 2012. The goal of the projects is to assist and empower youth and young adults in transition to use their voice of experience to positively impact the system of care and their communities while strengthening their self-advocacy skills and mutual support. The activities can range from positive social opportunities and community organizing to mental health awareness campaigns.
- The VFFCMH staff collaborated with the VDH Office of Minority Health to plan the 2012 YAVM Conference with the help of a more formal Executive Committee of young adults selected by their YIT groups as regional representatives. Executive Committee members met in person and/or through the use of OoVoo video-conferencing. They decided to hold another overnight conference, this time in southwestern Vermont. (The prior two conferences were held in northwestern Vermont.)

Key statewide accomplishments during this reporting period (January 1- September 30, 2012):

- ***In February at the Pediatric Grand Rounds of the UVM College of Medicine (COM), the YIT Evaluation Team presented data about young adults' utilization of health care.***

- *The YIT Evaluation Team presented a poster at the University of South Florida’s annual research conference in March in Tampa, Florida. The poster was about YIT involvement viewed through the perspective of the Sequential Intercept Model (SIM).*
- *In the spring of 2012, the YIT State Operations Team made its annual site visit to each of the twelve regional YIT programs, meeting with their Local Interagency Teams or Steering Committees. Evaluation findings were shared, which led to increased enrollment in the evaluation. The strengths and challenges of each program were discussed, along with upcoming State training and technical assistance opportunities.*
- *The YIT State Operations Team delivered two workshops at the 7th Annual Youth Workers’ Conference held on May 17, 2012 at the Sheraton in Burlington. Mercedes Avila offered her 3-hour CLC curriculum as one track over two workshop periods. It was so well received that the Youth Workers’ Conference Planning Committee has already asked her to deliver it again at the May 24, 2013 Conference (to be held at the Killington Grand Hotel in the Rutland region). The other YIT workshop was delivered collaboratively by the YIT Evaluation Team and young adults from the Franklin-Grand Isle region. It was entitled “Straight Talk: What young adults have to say about trying to access Vermont’s Mental Health System of Care and the quality of services offered”. In this workshop Dr. Jody Kamon presented highlights from a focus group study conducted by Drs. Tom Delaney and Nancy Pandina with 86 young adults from around the state. The New Generation Youth Group from Franklin-Grand Isle added their personal experiences relevant to the findings and responded to questions from the audience. (See Attachment C.)*
- *The third annual Young Adult Voice Movement Conference was held as planned with about a dozen workshops on June 1 and 2 at Castleton State College. Over 100 youth and young adults attended, with close to half of them being from minority groups. (See Attachments D, E, and F for a detailed description of the event, including participant evaluations.)*
- *On July 10-12 NNYT Trainers Nicole Deschenes and Coral Huntsman returned to Vermont to conduct further TIP training. On July 10 they offered Part II to the people who completed Part I in the summer of 2011, including the 7 Vermont Apprentice Trainers. Then on July 11 and 12 the NNYT Trainers supervised delivery of the Part I training by the VT Apprentice Trainers to a new cohort of over 50 front-line workers and administrators. (See Attachment G for the NNYT training agenda and Attachment H for the VT-TIP trainers’ agenda.)*
- *During the week of July 22, the YIT State Operations Team attended the Georgetown System of Care Training Institutes, bringing the 4 young people who received YIT Young Adult Leadership Awards during the prior year: Katrina Hollis, a YIT Peer Outreach Worker from Bennington; Jeetan Khadka, a young adult Bhutanese refugee and AmeriCorps Worker who has helped deliver CLC training and formed a Diversity Rocks youth group in Burlington; Mikah Hughes, a consumer of YIT services who became a YIT Peer Outreach Worker in the Orange/No. Windsor region; and Cheyenne Knuth, a YIT consumer who is a leader in the Franklin-Grand Isle New Generation youth advisory group. Mikah’s mother and Cheyenne’s aunt also attended as their adult allies. Mercedes Avila helped the national TA Partnership plan and deliver the CLC Community of Practice activities at the Institutes, where she presented about her training curriculum. Also, Courtney Bridges helped to deliver some of the Social Marketing workshops as well as*

finalize the ECCO awards, for which she had again served as a national judge. The Vermont Evaluation Team won a Silver ECCO Award for its graphic presentation of results (for a sample, see Attachment B.)

Describe efforts to complete Strategic Planning requirements, including Logic Model, Cultural and Linguistic Competence Plan, Social Marketing Plan, Sustainability Plan. Identify the status of these plans (e.g., in process, completed, revised) and time lines for completion or updates.

With the help of research and facilitation by the Lead Family Contact, in the fall of 2009 the State YIT Operations and Outreach Team drafted and disseminated to the regions for feedback a vision and mission statement. Incorporating the feedback, the statement reads:

Vision:

Young adults in Vermont are empowered, healthy, valued, and engaged in their communities.

Mission:

Young adults, families/adult allies and community partners collaborate to develop a system of care to support transition to adulthood. The system builds upon the strengths of young adults and creates an array of specialized mental health and related services to meet their unique and changing needs. The system also fosters young adult leadership.

The YIT Evaluators helped the Operations and Outreach Team complete its working version of a logic model and disseminated it to the regions for feedback. The logic model was later refined in preparation for the September 23, 2010 Learning and Sharing Day to more clearly mention goals for strengthening regional SOCs. One of the goals is for SOC partners to gain CLC. Another is for local communities (including young adults) to change their perceptions of young adults and of mental health issues, reducing stigma. A third (of seven) is for the State to support and sustain regional services for young adults. The logic model builds on SOC strategies like interagency planning as the foundation for achieving these goals and the desired outcomes for individual youth, young adults, and their families (like productivity in their communities and freedom from incarceration). The logic model is the basis for ongoing action planning.

The logic model and action plans are all considered working drafts so are changed as needed and posted on the website, <http://www.youth-in-transition-grant.com>. The “Legos” – for the “building” theme of the Sept. 23, 2010 Learning and Sharing Day – version of the summary of the logic model is on the home page. The logic model overview and details, also the sustainability action plan, are on the State Team page, while the action plan for CLC is on the Cultural Competence page and the action plan for Social Marketing on a Social Marketing page.

Services for Children who have Serious Emotional Disturbance

Please check if you are primarily delivering services to youth who meet the following criteria or who are involved in the following systems:

<input type="checkbox"/> Young Children (Birth-5)	<input type="checkbox"/> Juvenile Justice	<input type="checkbox"/> Primary Care
X Transition Age Youth	<input type="checkbox"/> School Based	<input type="checkbox"/> Developmental Disability
<input type="checkbox"/> Child Welfare	<input type="checkbox"/> Substance Abuse	<input type="checkbox"/> GLBTQI
<input type="checkbox"/> Other _____		

Indicate the number of children newly enrolled in services **this period** (Note: Include children who have been enrolled even if they are no longer receiving services): *The consistent method of collecting this information is through enrollment in the YIT Evaluation Team’s Common Study, which gathers the required NOMS data for young adults enrolled in services and reports that data through the TRAC system. This method excludes the youth and young adults who receive only outreach services or who are enrolled in case management services but not in the Common Study. **61–56% Males; 48– 44% Females; 109 -100% Total** in Evaluation “Common Study” from January 1 – September 30, 2012.*

Indicate the total number of children served **to date** (Note: Include both currently enrolled children and children who are no longer receiving services): **250 – 58% Males; 181 – 42% Females; 431 -100% Total** in Evaluation “Common Study” from April 1, 2010 – September 30, 2012. (See Attachment A for a more complete picture of the demographics.)

How does your enrollment effort reflect the ethnic/racial diversity of the entire geographic area defined in your application? Describe activities/strategies you are implementing to address this issue.

*Though approximately 5% of Vermont’s population is **non-White, 65 or 15%** of the youth and young adults aged 16-21 and enrolled in the Common Study statewide from April 1, 2010 – September 30, 2012 reported being a member of a minority population.*

The Invitation to Communities instructed regions to reach out to and involve in their strategic planning and ongoing program implementation youth and families including those of diverse backgrounds, also to reach out to and involve representatives of cultural organizations. The YIT CLC Coordinator has been very active with this outreach in the Chittenden area. She introduced representatives from other regions to CLC concepts through a webinar, on-site meetings, materials on the YIT website, and her 3-hour training curriculum. Regions responded by hiring YIT staff of greater diversity than the general population in Vermont, which is 95% White. For YIT, with approximately 15 FTEs working in the regions, at least three (or 20%) of the people originally hired are Non-White: a black woman in Franklin-Grand Isle, a Native American man in Orange-No. Windsor, and a woman from Pakistan in Chittenden. Subsequent hiring continued the pattern. When the part-time YIT worker from Pakistan left to take full-time work elsewhere, she was replaced by a woman of Asian descent. A supervisor hired for the Orange-No. Windsor region is a Latina. In addition, several current or former staff (in Franklin-Grand Isle, Chittenden, and So. Windham) have experience as international educators. The perspectives and experiences of these YIT staff help multi-cultural youth and young adults engage with them.

These YIT staff and young adults whom they are mentoring formed with the CLC Coordinator a “Hands of Friendship” CLC Workgroup to increase awareness of CLC issues and opportunities throughout the Vermont SOC. The Workgroup held several meetings in different regions,

inviting regional YIT staff, Steering Committee members, and family and young adult leaders to attend. In this way, the Workgroup built a base of knowledge and support across the regions for more effective outreach to and interactions with youth, young adults, and families of diverse backgrounds. In addition to educating the regions, members of the Hands of Friendship Workgroup gave the CLC Coordinator feedback about the curriculum she was developing, also delivered training at the statewide level, including at the Youth Workers' Conferences and the YAVM Conferences.

Have barriers to enrollment been identified and if so how are they being addressed?

Some YIT staff feel that the process of enrolling youth/young adults in the Evaluation Common Study (with the NOMS and TRAC data) must be handled delicately to avoid any possibility that the paperwork will detract from their engagement with the young people and damage the likelihood of establishing ongoing relationships. The YIT Evaluators and Project Director have addressed this issue by suggesting that staff not attempt to enroll young adults in the Common Study until they feel a firm enough connection has been made. Staff turnover naturally exacerbates this problem. In the meantime, contact with the young adults is considered a continuation of outreach that may (or may not) be counted according to the Study Inclusion Criteria Checklist (SICC).

Another barrier has been that when regional YIT case managers have full caseloads, they are unable to enroll other young people into either service or evaluation. The YIT State Outreach Team has responded to this challenge by reminding the regions that the SOC includes other mental health case managers (e.g., JOBS workers, at least) who, while enrolling young people in case management, could also enroll them in the YIT Evaluation.

II. Child and Family Services/Supports

Are there any mandated services, as identified in the Guidance for Applicants (GFA) that have not been implemented? Please identify the service(s), describe and explain the barriers, and provide information about what is being done to address.

All mandated services are being implemented. Case management and individualized services planning are provided by YIT staff in all regions through either the community mental health center (in 8 regions) and/or through runaway and homeless youth programs (in 4 regions). All twelve regions have long been served by community mental health centers which provide the full range of services mandated in the GFA for children's mental health. The community mental health centers and runaway and homeless youth programs have years of experience collaborating with each other to provide services for adolescents in each region. In some regions, the runaway and homeless youth programs were started by and/or are part of the community mental health centers.

Describe any needs assessments (i.e., systematic approach to gathering data on the needs of a population to be served) that have been done. What was learned from the needs assessment(s)? How does the service system address basic needs, recreational services, respite care, mentoring and crisis services in addition to traditional mental health services? Describe any access barriers

and how they are being addressed.

Various statewide needs assessments were reviewed for and cited in Vermont's original federal CMHI grant application for this Youth in Transition (YIT) project. During the subsequent regional planning process, each region identified the gap between its vision and the existing situation and resources for young adults of transition age. One common theme which emerged from the regional plans was that youth/young adults experience many barriers to accessing services to meet their basic or mental health or other needs: from knowing they have a need for service; to knowing the service exists; to transportation, eligibility, hours of service, legal ability to consent for service, lack of insurance, finding the service welcoming and appealing, etc. As a result, two-thirds of the regions decided to hire part-time Peer Navigators or Outreach Workers to engage young adults and then help them connect with the services they need through case management and individualized services planning.

III. System Level Coordination/Infrastructure and Management Structure

Identify management team members, listing participants by name, agency or constituency being represented, and their role on the team. Identify any changes in the composition of the team since the previous report.

The Vermont Youth in Transition (YIT) grant is most closely managed by a YIT Operations and Outreach Team that consists of key personnel as required by the federal Center for Mental Health Services (CMHS):

- *Principle Investigator (Charlie Biss)*
- *Project Director (Brenda Bean)*
- *State-Local Liaison (originally Scott Johnson, former Director of the AHS Field Services Division. When Scott left for other work and his duties were reassigned, this function was assumed by Charlie Biss as Director of the State Department of Mental Health's Child, Adolescent, and Family Division, which delivers services through local community mental health centers and specialized agencies)*
- *Lead Family Contact (Cindy Marshall)*
- *Lead Evaluator (Dr. Thomas Delaney)*
- *Evaluators (part-time: Drs. Jody Kamon and Jesse Suter)*
- *Social Marketing Coordinator (Courtney Bridges)*
- *Young Adult Coordinator (originally Vanessa Lang and Courtney Bridges - each half-time; now Matt Wolf)*
- *Cultural and Linguistic Competence Coordinator ([Maria] Mercedes Avila)*
- *Training and Technical Assistance Coordinator (originally Vanessa Lang half-time. Now the function is shared by Courtney Bridges and Matt Wolf, with help as needed from Jody Kamon, Cindy Marshall, and Brenda Bean).*

The Operations and Outreach Team also includes representatives from State departments interested in outreach to youth in transition and to the regions; these representatives participate in the YIT business (meetings, site visits, training events, match) as they are able to do so. The Outreach members include managers from the Departments of Vocational Rehabilitation [VR], Corrections [DOC], Children and Families [DCF], and Labor [DOL].

What authority does the Governance Council have? Does the Governance Council approve budget and strategic plans? Are families and youth represented on the Governance Council? Do family members and youth have authority to vote on budget issues?

The body most akin to a Governance Council is the YIT Leadership Team, an interagency group formed by the Agency of Human Services (AHS) to respond to former Governor Jim Douglas' interest in better supporting youth of transition age. Scott Johnson, the former State-Local Liaison for the YIT grant, chaired the YIT Leadership Team until he resigned from State service in June, 2010. His AHS position was then assigned to other purposes, so Charlie Biss (YIT Principal Investigator) took over chairmanship of the YIT Leadership Team.

The YIT Leadership Team members are very knowledgeable; some have joined the Operations and Outreach Team and offer State outreach to the regions about planning and implementation of this project. The VFFCMH is represented on the YIT Leadership Team along with the Vermont Family Network (VFN, a merger of the former Vermont Parent Information Resource Center [VPIC, a PIRC] and Parent-to-Parent of Vermont) and the Vermont Coalition of Runaway and Homeless Youth Programs (VCRHYP). All representatives have equal opportunity for voice and vote on all business. Though they influence policy and budgets, they do not have authority to set policy or the budget for the AHS or any of the participating departments or organizations.

Flooding from Tropical Storm Irene caused the State offices to be moved out of Waterbury and dispersed in the fall of 2011; this weakened even long-standing collaborations. Since then, the YIT Leadership Team has met only once (in March, 2012) even though it then affirmed the importance of having an ongoing, interagency Working Group like itself to continue to advocate for youth and young adults of transition age. The YIT State Operations Team continues to partner with individual agencies for outreach, match, and other functions as possible.

Identify and include any new or additional public policy, including memoranda of understanding and/or legislation, developed since the last report.

Perhaps the most significant change to public policy since the original grant application was submitted is the State's response to a multi-year Medicaid deficit and to the world-wide recession of State FY2009. Even with Vermont's receipt of federal economic stimulus funds, hundreds of State employees and community service workers were laid off or had their jobs cut back in time (voluntary "furloughs"). The remaining workers are hard-pressed to handle all the tasks. Further cutting of budgets continued through FY2012. At both the State and regional levels, workers and funds became less available for partnership.

During the fall, 2010, the Vermont DMH accepted a five-year federal SAMHSA Mental Health Transformation Grant in order to attract young adults aged 18-34 who are in need of early intervention to adult mental health services via the use of credentialed Peer Specialist and other recovery-oriented services. The Adult Mental Health and Children's Mental Health Divisions collaborated about how to reach out to young people. The YIT Young Adult Coordinator Matt

Wolf chaired the Adult Mental Health Transformation Grant's Committee on Peer Workforce Development and served on the interview team to hire its Project Director. Then the DMH received word from SAMHSA that the Transformation Grant would be substantially cut, reducing its potential impact.

Another major budget and public policy development is the law approved by Vermont's Governor Peter Shumlin and the Legislature in 2011 for health care reform that is above and beyond the 2010 federal Patient Protection and Affordable Care Act. Over the next several years, the law is intended to produce: universal coverage for all Vermonters with an Essential Benefit Package (including mental health care); integrated delivery of care by medical homes and Accountable Care Organizations; use of a single administrative "pipe" or channel for billing, claims processing, and payment of uniform (capitated) rates; and a payroll (or other) tax for generating the budgeted revenues. This set of reforms may help YIT accomplish its desired outcomes for young people of improved access to medical homes/care and, possibly, employment since a benefit of the reform is said to be job creation.

The 2011 Legislature appropriated \$75,000 for new housing for homeless youth in the Chittenden region through Spectrum (a YIT sub-contractor with the HowardCenter).

The 2011 Legislature also expanded the Vermont Medicaid program to pay for services for income-eligible legal immigrant children and pregnant women regardless of how long they have been in the United States. Federal Medicaid requires service for this population only after they have been in the United States for five years. Linda Li, now the YIT Case Manager for minority populations in the Chittenden region, initially brought the need for this policy to the attention of State Senator Ann Pugh, who was also her Master's Program instructor.

The 2012 Legislature approved another expansion to Medicaid so that pregnant and post-partum women of any age can receive full dental care; this will benefit many transition-aged women.

The 2012 Legislature extended juvenile/family court jurisdiction to 6 months past a youth's 18th birthday. This improves the odds that a State's Attorney will decide to prosecute a 16 or 17 year-old in juvenile rather than criminal court. The advocacy organization "Voices for Vermont's Children supported this bill because research and evidence show that young people prosecuted as juveniles are much more likely to receive the services necessary for their rehabilitation and are much less likely to reoffend."

On August 29, 2011 flooding from Tropical Storm Irene destroyed huge sections of the Vermont landscape – e.g., re-routing rivers; washing out roads, bridges, and homes; and causing the Vermont State Office Complex, including the Vermont State Hospital, in Waterbury to be abandoned. Governor Shumlin's Administration responded to this catastrophe on many fronts. For months following the storm, the Field Services Directors and other AHS staff spent much of their time helping residents and/or the 1,500 State employees who had been displaced find new offices and homes. This prompted promulgation of the first telecommuting "TeleWork" policy by the State Agency of Administration in February, 2012.

Also, since homelessness and the need for affordable housing were already at critical levels before the storm, the added dislocation led the AHS to, on August 22, 2012, promulgate a new policy to “promote greater housing stability for all persons served by the” AHS and its contractors. The policy addresses homelessness prevention and rapid re-housing, outreach, emergency shelter, supportive services (case management/housing case management), transitional and supportive housing, and affordable housing. It allows “unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless” to be eligible for homeless services under specific conditions.

The destruction of the State Hospital offered opportunity for – as Governor Shumlin wrote in his “Legislative Checklist: a Record of Results” – “strengthening Vermont’s mental health system, shifting care from an obsolete institution-based system to a more individual-focused, community-based system.” Operating funds and positions from the State Hospital were directed toward operating the community mental health system. The 2012 Legislature passed Act 79 “relating to reforming Vermont’s mental health system...by offering a continuum of community and peer services, as well as a range of acute inpatient beds throughout the state. This system of care shall be designed to provide flexible and recovery-oriented treatment opportunities....It is also the intent of the general assembly that the AHS services fully integrate all mental health services with all substance abuse, public health, and health care reform initiatives, consistent with the goals of parity.” According to the Governor, “Under the new law, acute in-patient care will be provided at the Brattleboro Retreat, the Rutland Regional Medical Center and Fletcher Allen Health Care in Burlington, as well as a new 25 bed secure facility to be located near the Central Vermont Medical Center in Berlin. In addition, services that enable individuals to remain in their communities will be increased, local emergency services expanded, and support for effective programs helping those with mental health conditions strengthened.” Montpelier Legislative Representative Mary Hooper, who serves on the Mental Health Oversight Committee, said about this change to the entire system of care: “After years of cutting mental health care services, some funding has been restored”(for State FY2013). However, 80 State Hospital employees lost their jobs.

List any optional services (as suggested but not mandated in the GFA) being provided. How are these services being funded, managed and supervised?

The original grant application explained that in the process of strategic planning, each region would decide what evidence-based practice it intends to pursue. As a result of the needs assessment done for the strategic planning, all regions felt that improving the access of young adults to services/supports was the most important priority. Half the regions identified TIP (Transition to Independence Process) as the evidence-supported practice that could best help them do this. Subsequently, in May, 2010, all regions were offered – and at least one person from each region attended – an introductory TIP training. And in June, 2011, 82 people from 16 organizations or programs throughout Vermont participated in a 2-day advanced TIP training with Dr. Rusty Clark, Joseph Solomita, and Nichole Deschenes from the National Network on Youth Transition (NNYT). 12 of those organizations committed to becoming certified by NNYT as TIP-informed, and they have done the necessary action planning. Following additional Part I training offered in July, 2012 for another 73 people, two more organizations are considering certification. Also, 7 people applied and were accepted as Apprentices for

becoming certified as locally (e.g., VT) -based TIP trainers. The Apprentice Trainers include members of the YIT State Outreach and Operations Team as well as regional mental health (JOBS and other) workers.

Describe linkages with universities, research projects, media, or other entities not directly involved in providing services to the enrolled population.

The YIT evaluation was planned and is being conducted by VCHIP, part of the UVM College of Medicine (COM).

Describe any other linkages that have been instituted that address the development of infrastructure in your community. Infrastructure includes governance, workforce development, youth and family involvement and financing strategies.

Members of the YIT Leadership Team sponsor an annual Youth Workers' Conference for workforce development. The Conference has been held the past seven years under direction of the VCRHYP. The May 15, 2009 Conference highlighted the YIT grant by using young adult Ross Szabo of the National Mental Health Speaker's Bureau as the lunch-time speaker and by offering two workshops about the regional YIT planning. On May 21, 2010, the Youth Workers' Conference featured the YIT work by hosting three workshops by Dr. Hewitt (Rusty) Clark about the TIP System.

For the May 20, 2011 Youth Workers' Conference, YIT offered a workshop entitled "Recruiting Young Adults as Leaders" about developing youth leadership by helping young people recognize and build upon their already existing leadership skills. The workshop was designed and delivered by Hands of Friendship members from the Franklin-Grand Isle region, with help from Matt Wolf, the YIT Young Adult Coordinator. Also, YIT Social Marketing Coordinator Courtney Bridges helped to deliver a workshop about substance abuse. That workshop featured a video created by the Young Adult Advisory Team (YAAT) for the VT SPF-SIG Grant, with young adults telling their own stories about substance abuse, its treatment, and the importance of prevention.

The YIT State Operations Team delivered two workshops at the 7th Annual Youth Workers' Conference held on May 17, 2012 at the Sheraton in Burlington. Mercedes Avila offered her 3-hour CLC curriculum as one track over two workshop periods. It was so well received that the Youth Workers' Conference Planning Committee has already asked her to deliver it again at the May 24, 2013 conference (to be held at the Killington Grand Hotel in the Rutland region). The other YIT workshop was delivered collaboratively by the YIT Evaluation Team and young adults from the Franklin-Grand Isle region. It was entitled "Straight Talk: What young adults have to say about trying to access Vermont's Mental Health System of Care and the quality of services offered". In this workshop Dr. Jody Kamon presented highlights from a focus group study conducted by Drs. Tom Delaney and Nancy Pandina with 86 young adults from around the state. The New Generation Youth Group from Franklin-Grand Isle added their personal experiences relevant to the findings and responded to questions from the audience (see Attachment C.) In addition, the Orange-No. Windsor regional YIT program delivered a workshop about resiliency; one of the presenters was Mikah Hughes, whom the YIT State Operations Team selected to receive its third Young Adult Leadership Award.

YIT Young Adult Coordinator Matt Wolf has made a unique contribution to Vermont's development of a peer outreach workforce for mental health by meeting with the YIT peer workers and finding out from them what works(or not) for orientation, supervision, and ongoing training. He summarized and shared this knowledge not only with YIT but also with the DMH Adult Mental Health Transformation Grant Committee on Peer Workforce Development, which then asked him to serve as Chair. As Chair, Matt helped the Committee – composed of providers, peers, and stakeholders from around the state - agree on a peer support model to be used by the Mental Health Transformation Grant. Matt made reference to the TIP Model several times throughout this process and agreed with the group when they settled on a model that combines Wellness Recovery Action Planning (WRAP) and Intentional Peer Support (IPS) as the evidence-based practice(s) to move the Transformation Grant forward. This combination of models is very similar to the evidence-supported TIP Model that the YIT grant uses. WRAP, IPS, and TIP are all strength-based, client/consumer-directed, goal (not deficit) oriented, and work with consumers on planning their personal futures based on their own stated goals, interests & needs.

V. Cultural and Linguistic Competence

Describe the composition of your population with regard to gender, cultural/ethnic diversity, sexual orientation, etc... Is this description different from that which you identified in your application? How are you addressing the needs of the population being served?

Approximately 5% of Vermont's population is non-White; one percent may have Limited English Proficiency (LEP, primarily refugees). Transition-aged youth have their own culture, especially related to use of technology, media, and music. Most youth who receive public services are of low income, so poverty is an important cultural variable to address. Lesbian, gay, bisexual, trans-gendered, and questioning (LGBTQ) youth are especially vulnerable to suicide.

This description is not different from the original grant application; what is different is the collaboration which occurred between Vermont's SAMHSA grants for YIT and for suicide prevention. Like the YIT Lead Evaluator Dr. Tom Delaney, the half-time CLC Coordinator for YIT also worked as an evaluator for the Suicide Prevention grant which ended on September 30, 2011, and they are doing so again for the new one awarded in September, 2012. The YIT Social Marketing Coordinator served on the advisory board for the earlier Suicide Prevention grant. These over-lapping roles resulted in enhanced awareness among state-level YIT staff about the urgency for reducing the stigma of mental illness so young adults and their families can/will participate in mental health treatment if needed. This urgency has informed their training and social marketing efforts. The CLC Coordinator developed and is delivering a training curriculum which highlights the oppression and stigma caused by racism, while the Social Marketing Coordinator developed a campaign called WEST (We Eliminate Stigma Together). Following a pilot test of WEST in the high schools in the Washington County region, it was reformatted to focus on the stigma related to just being a young person (beyond having mental health issues) and is now being administered through the YIT young adult groups statewide.

The goals of CLC Coordinator Mercedes Avila's curriculum "Towards Cultural Competency in Mental Health" are to train mental health and other service providers to:

- *Increase self-awareness of racial, ethnic and class biases.*
- *Define cultural and linguistic competency and become familiar with the stages (or continuum) of cultural competency.*
- *Explain how cultural beliefs shape clinical encounters.*
- *Understand the impact culturally competent services can have in the clinical outcomes of refugees and/or immigrant consumers.*
- *Discuss the implications of demographic trends for health disparities.*

Mercedes' 3-hour CLC training includes small and large group discussions in response to a Power-point and video presentation. With help from the YIT Evaluation Team, Mercedes has measured statistically significant ($p < .01$) increases in knowledge from pre- to post-training in a number of areas including participants' ability to eliminate their own prejudices or assumptions about clients. Other areas in which participants demonstrate substantial increases in knowledge include about income disparities of racially diverse families, race identification, genetic variation, and genetic similarity of groups.

Analysis of the data from the first 200 people who participated in the CLC training and who completed pre- and post-training surveys, shows that prior to attending the training, almost 34% had had no to little exposure to any type of Diversity, Cultural Competency or Multicultural Training. Additionally, prior to attending the training, 76.1% of the participants believed that race identification was based on blood, skin, ancestry, genes, or all of these characteristics together. After attending the training, 93.7% of the participants understood that none of these characteristics are the basis for racial identification and consequently

"Race has no genetic basis. Not one characteristic, trait or even gene distinguishes all the members of one so-called race from all the members of another so-called race."

"Skin color really is only skin deep. The genes for skin color have nothing to do with genes for hair form, eye shape, blood type, musical talent, athletic ability or forms of intelligence. Knowing someone's skin color doesn't necessarily tell you anything else about them." (Ten Things You Should Know About Race: Race and the Power of Illusion).

Mercedes presented this research as a poster at the 20th national Federation of Families for Children's Mental Health conference in November, 2011.

From January 1 – September 30, 2012, the CLC Coordinator delivered her training to at least 110 people (including 27 young adults) and in 3 more regions (Addison, Lamoille, and Washington). Thus, by the end of September, 2012, from the start of the YIT Grant, Mercedes had trained over 483 people (446 providers and 37 youth/young adults) in 8 of the 12 regions. Because of the effectiveness of her training and word-of-mouth referrals, Mercedes Avila is now conducting one or two training events per month in Vermont and has even been asked to deliver it to SOC sites outside Vermont. (See the list of CLC training events held during this reporting period on page 37.)

One mental health agency (United Counseling Services [UCS] in Bennington) has relied upon Mercedes to train 84 employees through 6 different events so far. UCS has conducted a CLC

organizational self-assessment and appointed a Cultural Diversity Coordinator for the agency. Another mental health agency is considering incorporating CLC as part of the required professional development training for newly-hired staff as well as for current employees.

Mercedes' CLC training has been turned into an ongoing 3-credit "Racism and Health Disparities" graduate class at UVM - # CSD311 - for the College of Nursing and Health Sciences (CNHS).

As part of the CLC trainings and at other events - participants, agencies, and communities receive from Mercedes a CD which she compiled with over 100 evidence-based CLC-related resources/materials about the following topics:

- *Child Welfare*
- *Culture, Race and Ethnicity*
- *Faith and Race*
- *Health Care*
- *Immigrants*
- *Interpreters and Cultural Brokers*
- *Juvenile Justice System*
- *LGBTQI-2S*
- *Mental Health Providers*
- *Migrant Farm Workers*
- *Native Americans*
- *Policy and Community Building Strategies*
- *Poverty*
- *Refugees*
- *Rural Populations*
- *Schools*
- *Screenings*
- *Self-Assessments*
- *Supporting Families*
- *Youth Development and Empowerment*

In addition, a second resource with local, state, and national CLC- related websites is distributed at the CLC trainings. Both resources, the CLC CD index and the CLC- related websites document, are available on the Vermont Youth In Transition website through:

http://youth-in-transition-grant.com/uploads/CLC_Related_Websites.pdf

http://youth-in-transition-grant.com/uploads/CLC_Resources_CD_Index.pdf

The following Lambda Legal materials are also distributed at the trainings:

- *Toolkit: Getting Down to Basics: Lesbian, gay, bisexual, transgender and questioning ("LGBTQ") young people are in America's child welfare and juvenile justice systems in disproportionate numbers. Like all young people in care, they have the right to be safe and*

protected. All too often, however, they are misunderstood and mistreated, leading to an increased risk of negative outcomes. This tool kit offers practical tips and information to ensure that LGBTQ young people in care receive the support and services they deserve. Developed in partnership by the Child Welfare League of America (CWLA) and Lambda Legal, the tool kit gives guidance on an array of issues affecting LGBTQ youth and the adults and organizations who provide them with out-of-home care.

- *Toolkit: Out of the margins: A Report on Regional Listening Forums Highlighting the Experiences of Lesbian, Gay, Bisexual, Transgender, and Questioning Youth in Care 06/29/2006*
- *Toolkit: Out, Safe, and Respected: Your rights at school 10/11/2008*
This kit is designed to help you know your rights at school and make sure they're respected, and to give you concrete ideas about how you can make a difference in your school and community. You have the right to be who you are. You have the right to be out, safe and respected at school.
- *Toolkit: Bending the Mold: An Action Kit for Transgender Students 06/11/2009*

All Lambda Legal publications can be accessed or ordered free-of-charge from their website: <http://www.lambdalegal.org/publications/toolkits>

Mercedes learned about all of these resources by attending national trainings such as:

- *The Connecting Circles of Care Historical Trauma and Native Americans Training of Trainers in July 2011; she is now a trainer for this curriculum.*
- *The Georgetown University Leadership Academy to Address Disparities in Mental Health Care in New Mexico in August 2011.*
- *The TA Partnership sponsored CLC training in September 2011 which featured the evidence-based California Brief Multicultural Competencies Scale (CBMCS) and was presented by Dr. Gloria Morrow in Atlanta (<http://www.gloriamorrow.com/>). The YIT CLC Coordinator attended this introductory training with Jeetan Khadka (the second YIT Young Adult Leadership Award recipient) and Guylaine Daoust (a community trainer and interpreter). Mercedes had already trained Jeetan to deliver a modified version of her 3-hour curriculum at the 2011 Young Adult Voice Movement (YAVM) Conference. In January, 2012 she attended the training for trainers of the CBMCS curriculum.*

The CLC Coordinator has also conducted a literature review/research about resources available to work with English Language Learners (ELL) with Autism Spectrum Disorders (ASD) or other Developmental Disabilities (DD). The results of her study will be shared as a poster at a national conference of the Association of University Centers on Disability (AUCD) in December, 2012 in Washington, D.C. and will then be made available to service providers electronically and/or via CD. Mercedes has already compiled the CD with resources for "Considering Culture in the Screening and Assessment of Young Children with Developmental Concerns." She is collaborating with the Massachusetts Early Act Team to add refugee-specific stories to their educational materials about this topic.

Mercedes will be presenting a second poster to the AUCD in December, 2012 – this one about CLC organizational self-assessment in leadership training programs. And her application to the

International Conference on Science in Society was accepted to present a paper about “Addressing Health Disparities through Cultural and Linguistic Competency Training” in November, 2012 in Berkeley, California.

The CLC Coordinator uses what she has learned in part to provide consultation, including for the design and implementation of grade-appropriate cultural and linguistic competency modules relevant to Vermont’s Health Careers Opportunities Pipeline (HCOP) grant. This Maternal Child Health (MCH) grant seeks to achieve the following goals:

- *Goal #1: Increase the numbers of students from rural or underserved communities, who are economically or educationally disadvantaged, exploring a career in health care.*
- *Goal #2: Increase the opportunities for economically or educationally disadvantaged Vermont students to follow a pathway to the successful completion of a post-secondary certification or degree in a health career.*
- *Goal #3: Improve quality of care by helping to ensure a culturally competent and diverse health care workforce for Vermont.*

Mercedes encouraged 11th graders served through YIT and other programs to apply for the available education – a summer residential experience called College Quest - to begin a health-care career. She researched and developed a 12-hour CLC training delivered over 3 days to the 27 summer students about “disparities in the U.S. and what young people can do to prevent and stop reproducing inequalities.”

The CLC coordinator provided support and consultation to the Champlain Valley Area Health Education Center (CVAHEC) to update its “Cultural Competency for Health Care Providers Manual”. The revised manual is on the home page of the CVAHEC website: www.cvahec.org; it was used for the training held in October, 2011 for a second class of Medical Interpreters (the first class was trained in the spring, 2011). Some of the trained interpreters are YIT workers Mercedes Avila and Linda Li. Interpreter Guylaine Daoust became the instructor after accompanying Mercedes to the CBMCS training in Atlanta.

During this reporting period the CLC coordinator provided support and consultation to the VCRHYP as it prepared a grant application for continuation of its Street Outreach Programs (not awarded), also to Community Health and Learning (CHL) as it prepared its application for another Youth Suicide Prevention Grant (awarded). For CHL, she helped prepare a webinar about “Cultural Considerations in Suicide Prevention” which was delivered to providers statewide.

Mercedes collaborated with the VDH Office of Minority Health to address youth suicide and youth leadership within the refugee community. She also partnered with Dr. Andrea Green, Director of the Fletcher Allen Hospital’s Immigrant Clinic and professor at UVM’s College of Medicine (COM), to support 2 medical students in their CLC research for the COM.

Describe efforts being made for staff of the site to reflect the diversity of the site community and any staff changes since the last period’s report due to these efforts.

Please refer back to page 9 for the information about enrolling young adults with diverse backgrounds in services and the hiring of diverse staff in the regions. When the Chittenden region experienced staff turn-over in its part-time YIT-JOBS position devoted to cultural outreach, a woman of Asian descent (Linda Li) was hired. This is helping to address an important disparity in health care access. According to Dr. John Pandiani's Vermont Mental Health Performance Indicator Project, in State FY2010 "The representation of Asian/Pacific Islander youth in Vermont's Children's Mental Health caseload... was 60% lower than their representation in the general population (0.6% of service recipients vs. 1.6% of the general population". Subsequent to Linda Li's hiring, more Asians are being referred to YIT services. The most recent Evaluation Team dashboard of indicators (see Appendix B) shows that at least 3% of the young people now enrolled in the YIT Common Study (which includes the TRAC data) are Asian.

Also, like the young adults served through this grant, all state-level YIT staff with Young Adult Coordination functions have had personal and/or family experience of one kind or another with behavioral health treatment/needs. And, like the small number of Vermont immigrants and refugees, our CLC Coordinator, Mercedes Avila, a Latina from Argentina, has personal experience of living where her culture and language are not evident or shared.

Share examples of efforts being made to include diverse populations in site activities (i.e.: appropriate translation of material, etc...)

Before regional YIT staff were hired, the state-level Young Adult Coordinators for YIT reached out to young adult consumers in the regions who may be interested in assuming leadership roles. To stimulate collaborative efforts, the Young Adult Coordinators and/or the CLC Coordinator met with representatives from the Abenaki Self-Help Association, Outright Vermont, the Association of Africans Living in Vermont, the Bosnia and Herzegovina Family and Youth Association, the Young Adult Advisory Team (YAAT) for the SPF-SIG grant from the federal Center for Substance Abuse Prevention (CSAP), Vermont Psychiatric Survivors, Another Way (self-help recovery center), the Youth Development Council for the DCF, the Association of Teen Centers, the VCRHYP, and others.

These efforts resulted in a strong turn-out (about 200 people) for the 2010 first YAVM Conference and in ongoing relationships. To illustrate, the YIT Social Marketing Coordinator and later the Young Adult Coordinator joined the YAAT. The DCF director of the Youth Development Program (YDP) and the Youth Development Council's Coordinator led a youth-involvement discussion group at the YIT September 23, 2010 Learning and Sharing Day, then invited all interested YIT regional staff and young adult leaders to attend a November 10, 2010 training for the leaders of regional foster care groups. Thus, about half of the YIT regions participated in training led by the National Resource Center for Youth Services, a contractor for the foster care system.

The State YIT Operations and Outreach Team took 5 young adults who were leaders at the 1st YAVM Conference to the Georgetown Training Institutes in the greater Washington, D.C. area in July, 2010. These young adults advised their regional YIT Steering Committees and/or spoke at statewide or regional YIT events. One is transgender, two (including Katrina Hollis) are

single mothers of transition-age who are beneficiaries of social services, one is Asian with a physical disability, and one is part of an extended family that suffered trauma from the war in Bosnia. (The last is a leader in the Bosnia and Herzegovina Family and Youth Association.)

As mentioned on page 10, the CLC Coordinator established a CLC Advisory or Workgroup called “Hands of Friendship”. It evolved to include all the YIT workers with culturally diverse backgrounds plus young adult leaders whom they brought to the meetings.

One of the young adults (Jeetan Khadka) is a Bhutanese male refugee who attended the 2010 YAVM Conference, then decided to become a social worker. Toward that end, he began working for AmeriCorps, placed first in the Burlington school district from which he graduated, then in the City of Burlington. He and other YIT staff and young adults gave input to the design of the May, 2011 YAVM Conference. They also joined Social Marketing Coordinator Courtney Bridges in presenting a workshop entitled “If YOUth Build It, They Will Come” at the SOC Grantees’ meeting in Chicago, Illinois in July, 2011 about how to put on a youth-driven conference. In December, 2011 the YIT State Operations Team honored Jeetan with a Young Adult Leadership Award.

*While in Chicago, the YIT State Operations Team learned from Jeetan about a group he helped start through the Vermont Refugee Resettlement Project (VRRP) for youth and young adults. The group – which named itself Diversity Rocks! after the theme of the 2011 YIT YAVM Conference – includes about 50 young people who meet together twice a month to support each other and address broader issues related to the entire refugee/immigrant population in Burlington. Many of the group members have attended the YAVM Conferences. **Jeetan explained that the young people would like more say in running Diversity Rocks!, and they need resources. As a result, Mercedes Avila and Matt Wolf worked with the regional Chittenden YIT case manager Linda Li to increase support for the group, including applying for funds from the Vermont Department of Health’s Minority Health Office. Though that application was not funded, the HowardCenter staff are continuing to work with the VRRP and with Diversity Rocks! to empower its youth leadership. If they succeed, the YIT State Operations and Outreach Team will increase Chittenden County’s YIT allocation to further support Diversity Rocks!***

Share examples of how services and supports are culturally and linguistically appropriate for your population.

The use of peers to promote positive behavior change is an evidence-supported practice appropriate for youth and young adults. Nine of the 12 regions planned (either originally or subsequently) to hire peer navigators or outreach workers to engage young adults and help them connect with needed services and supports. One region intended to do this through a funding partnership between the community mental health center and the runaway and homeless youth program. Though that partnership faltered over administrative details related to the use of Medicaid, the community mental health center itself later hired 2 part-time peer outreach workers to serve transition-aged youth via fee-for-service Medicaid. Eight other regions used the YIT grant funding to hire peer outreach workers.

Starting in State FY2012, the VFFCMH contracted with the Bennington region (through UCS) to add hours to its peer outreach worker position so Katrina Hollis – who received the first YIT Young Adult Leadership Award - can assist the YIT Young Adult Coordinator Matt Wolf in delivering technical assistance statewide. With Matt, Katrina visits the YIT young adult advisory groups throughout Vermont and shares her experience of organizing Teens for Change (T4C). (This is described in a document which compiled the progress reports of the 12 regions for the time period from January to June, 2011. See the main regional page on the YIT website: <http://www.youth-in-transition-grant.com> .)

What barriers have been identified in this effort and how are they being addressed?

The Invitation to Communities for regional planning required the involvement of families, youth, and community-based cultural organizations. While most regions sought input from youth for the YIT planning, few sought input from cultural organizations or groups. During the process of approving the regional plans, the State YIT Operations and Outreach Team instructed each region to further expand its outreach to diverse populations. The two most populous regions were specifically asked to consider hiring minority staff into their YIT positions; one did so, along with two other regions.

One of the barriers in hiring peer outreach workers is that the funds for the regional plans are not sufficient to support multiple full-time positions. Full-time YIT case managers were hired in each region, but the peer outreach worker positions are part-time. The pool of young people interested in part-time positions is limited, especially since they must provide private means of transportation to do the outreach work. Some may also have personal (and/or family) prejudice about mental illness and treatment so avoid applying for peer outreach work. Those who do apply and are hired tend to leave after a short while to go to college or full-time employment, so turn-over is high.

Another barrier to the hiring of peer outreach workers may be organizational. One region which planned to hire YIT peer outreach workers delayed doing so because of problems associated with the performance and supervision of a peer worker in another program there. A couple of other agencies later experienced problems with the performance and supervision of peer workers. In December, 2010 the YIT Project Director held a meeting of the supervisors of peer outreach workers for reflective conversation about the challenges involved with their supervision. Dr. Jody Kamon provided clinical TA by preparing for and facilitating the conversation. The supervisors appreciated the opportunity to share their experiences and requested ongoing regular meetings, some with the peer outreach workers and some with just each other. They also asked for feedback from the peer outreach workers about what is most important to their success. This led YIT Young Adult Coordinator Matt Wolf to meet with the peer outreach workers to seek their wisdom about hiring, orienting, and training peer outreach workers. Matt summarized and shared this knowledge not only with YIT but also with the DMH Adult Mental Health Transformation Grant Committee on Peer Workforce Development, which then asked him to serve as Chair. Since then, the regions have hired more YIT peer workers.

V. Family Involvement

Describe how family members are driving the implementation of the cooperative agreement activities (i.e., governance body, systems planning, budget development, policy development, service planning, education and training, national and local evaluation, social marketing and planning for sustainability).

The VFFCMH is deeply involved with the YIT grant. Through a sub-grant from the DMH to the VFFCMH, the Federation is charged with hiring and supervising the Lead Family Contact and the Young Adult Coordinator(s) as well as with encouraging family and youth involvement in the YIT regional planning and implementation. The Federation's regional staff (peer navigators for parents with disabilities) participated in the YIT planning; however, those positions were terminated on June 30, 2010 with the ending of another federal grant (a 360 grant from the federal Administration on Disabilities). Therefore, VFFCMH has not had regional staff to contribute to regional YIT implementation except in the Washington region, which contracted with the VFFCMH to hire the former parent peer navigator to lead that region's SOC work for this grant. The VFFCMH Assistant Director supervises the Washington County SOC Team Leader.

The VFFCMH sub-grant for YIT from DMH includes the contract with the Project Director for the statewide grant, also the Social Marketing Coordinator and the training and technical assistance functions. The Lead Family Contact supervises the Young Adult Coordinator and the Social Marketing Coordinator. All of these staff are members of the State YIT Operations and Outreach Team and the YIT Leadership Team.

Some Act 264 Local Interagency Team (LIT) parent representatives serve on their region's YIT Steering Committee.

Have barriers to family involvement been identified? If so, how are they being addressed?

The focus of this grant on transition-aged youth highlights developmental tension about who is "driving" the system of care: families or youth/young adults or both. The YIT Operations and Outreach Team decided to aim for a "youth-driven" rather than a "youth-guided" system of care. The VFFCMH believes that "family-driven" cannot be minimized within the "youth – driven" movement. It is developmentally appropriate to support and build up both family and youth at the same time. The goal and challenge is to support families and young adults to work together in partnership with each other to achieve a "Family and Young Adult-Driven" SOC.

The VFFCMH organized a day of family and individual leadership training on September 16, 2010. Planning for the day was done with a collaborative team convened by the UVM Center for Disability and Community Inclusion. This partnership with other family leadership organizations (including the VFN) and self-advocacy organizations fostered respect for each others' points of view. Specifically, self-advocates saw that families want the skills and knowledge to support and empower their young adults to do self-advocacy. About 80 people attended and heard Sandra Spencer, Executive Director of the national Federation of Families for Children's Mental Health, give the keynote speech. The VFFCMH presented a panel of three

families; the panel was well received and provoked many questions.

The VFFCMH teamed up again with the VFN a week later for the September 23, 2010 YIT Learning and Sharing Day to facilitate discussion groups about family support for young adults. The sharing by regions touched on both concerns and what works.

For the September 30, 2011 Learning and Sharing Day, YIT again focused on helping regions move down the road toward having a family and young adult-driven SOC. This time the VFFCMH Lead Family Contact organized a panel of YIT staff and family and young adult representatives from Bennington, Caledonia/South Essex, Chittenden, and Orange/North Windsor to present what they have been doing to:

- 1. Help young adults identify adult allies within and beyond their families.*
- 2. Develop relationships with the families/adult allies in addition to relationships with the young adults.*
- 3. Help the families/adult allies support their young adults, and*
- 4. Engage the families/adult allies in developing the regional SOC.*

This panel, too, was well received and stimulated much thinking, including about how close the regional SOCs are to being family- and young adult-driven. One of the presenters on this panel, Kat Rose, had accompanied her young adult daughter (who later became a YIT peer outreach worker) and the YIT State Operations Team to the national SOC Grantees' meeting in Chicago in July 2011. Kat also directs the Bradford Teen Association.

The VFFCMH has learned that young adults need a lot of structure and supervision to tackle the ambiguities and handle the frustrations of SOC work; several regional YIT supervisors have noticed a similar dynamic. The VFFCMH dealt with this challenge by hiring an Administrative Assistant to divert some work from the Lead Family Contact so she could give more attention to supervision and to the design and delivery of family support and leadership training. This helped until Tropical Storm Irene and the wide-spread flooding of August 28, 2011. Following that event and the September re-location of the VFFCMH offices to Williston from Waterbury, the VFFCMH had to hire a different Administrative Assistant plus re-structure its relationship from employee to contractor for the staff person focused on family support and leadership training.

With the help of the YIT Social Marketing Coordinator and as part of one ["Your Voice Matters"] of the 4 YIT social marketing sets of activities, the VFFCMH logo and brochure were updated. The VFFCMH website (see <http://www.vffcmh.org>) was revised to let families know about the wide range of leadership opportunities available to them. And due to the move of the VFFCMH office caused by Tropical Storm Irene, other social marketing was done in September, 2011 to tell families, young people, and community partners where to find the new location. The VFFCMH is now in the same building in Blair Park, Williston as the Vermont Family Network (VFN), which has facilitated collaboration between the two family advocacy organizations.

For example, in late 2011, the VFFCMH and VFN partnered with the Vermont Center for Independent Living (VCIL) to deliver a 2 hour training event in Bennington for families and care-givers with young adults of transition age. The YIT Lead Family Contact, Cindy Marshall, explained the differences between the child and adult mental health systems. The VFN staff talked about services available through Developmental Disabilities, and VCIL staff discussed

guardianship, Medicaid, and employment. This training is now available for other regions, including through Webinar.

In November, 2011, to honor the 20th year of the national Federation of Families for Children's Mental Health and having been the first chapter of the Federation, the VFFCMH handled registration for the Federation's 5-day annual conference in Washington D.C. To do so, the VFFCMH sent 11 people: 5 VFF staff, 3 VFF Board members, 1 family leader, 1 young adult peer outreach worker, and the YIT Grant Project Director - 6 of whom were directly involved with the YIT Grant. In preparation for this VFFCMH presence, YIT Social Marketing Coordinator Courtney Bridges created a postcard and a bumper sticker for the conference bags for each of the 800 registered participants at the conference. She also designed a T-shirt worn by the VFFCMH registration team and delivered to Vermont's Representative and Senators on Capitol Hill.

During this reporting period – February 1 – September 30, 2012 – barriers to family involvement were addressed as follows:

To recognize the effectiveness of one region in involving and empowering YIT parents – 2 of whom have attended national SOC meetings with the YIT State Outreach Team - the VFFCMH Lead Family Contact created an award for Excellence in Youth & Family Empowerment. In April, 2012, during the YIT State Outreach Team's on-site visit to the Orange-No. Windsor region, the award was presented to YIT case manager Mark Mitchell of the Clara Martin Center.

On September 12, 2012 the VFFCMH hosted a family leadership conference featuring the Terrasi sisters (Gina and Patricia) who authored the book "Shut Up About Your Perfect Kids." The 80 people who attended participated in 2 of the 3 workshops:

- 1. Family Driven, Family Centered, Family Voice and Choice: What's the difference?***
- 2. Who's taking care of you? Caring for the Caregiver***
- 3. The many paths to a Career in Peer Support***

In addition, the VFFCMH Executive Director and Assistant Director remain strong advocates for family and young-adult driven care through participation in a wide range of non-YIT activities and meetings related to the children's mental health SOC, including the AHS Integrated Family Services (IFS) initiative.

VI. Youth Involvement

Describe how youth are involved in the implementation of the grant activities (i.e., governance body, systems planning, budget development, policy development, service planning, education and training, national and local evaluation, social marketing and planning for sustainability).

A workshop delivered by Ross Szabo (young adult from the National Mental Health Speakers Bureau) at the May 15, 2009 Youth Workers Conference gathered input from transition-aged youth to advise representatives from the regional teams and from the YIT Leadership and Operations and Outreach Teams about what might be most helpful for their peers with serious

emotional disturbance (SED). Subsequently, hundreds of youth were involved in giving input to the regional strategic planning. Some regions had young adults co-facilitate the planning meetings and/or focus groups and help to write the plan. In one region (Bennington), young adults were paid through DOL Summer Youth Employment and other funds to be the primary researchers and writers for the plan.

The then Young Adult Coordinator/Training and Technical Assistance Coordinator Vanessa Lang summarized what was learned about youth involvement through the regional planning efforts in an article written for – and published in - the February, 2010 issue of the Common Ground newsletter of the New England Commissioners of Child Welfare. Also, at the Evaluation Team’s invitation, the Young Adult Coordinators gave a presentation to VCHIP about tokenism and youth. They later gave a similar presentation about meaningful youth involvement in Individualized Education Planning (IEP) to the statewide VR Transition Coordinators.

The Social Marketing Coordinator created a YIT Facebook page for young adults interested in networking around mental health issues. The Young Adult Coordinators produced a brochure to encourage youth and young adults to contact them. They supplemented the regional planning in Chittenden by interviewing youth in the State’s Woodside Juvenile Detention and Treatment Facility there. They also consulted with peer outreach workers about statewide social marketing and T/TA for YIT.

The 2010 YAVM Conference was planned by the Young Adult Coordinators, the CLC Coordinator, and the young adults involved with creation of the Bennington regional plan. Other young adults were also invited to help design that statewide Conference held on May 7 in Bolton in celebration of Children’s Mental Health Week/Day. The YIT case managers from each region transported young adults to the Conference, which was attended by about 150 youth and young adults, half with multi-cultural backgrounds. The Conference was such a success that the Franklin-Grand Isle region held a similar event for its youth in November, 2010 using the same speaker (Cameron Mack). Some of the youth/young adults (including Cameron Mack) who attended the May conference later joined the State YIT Operations Team at the Training Institutes in Washington D.C. and/or in the CLC Workgroup.

The 2011 YAVM Conference was planned by young adults associated with the “Hands of Friendship” CLC Work Group and their family members or other adult allies, supplemented with ideas shared by other young people through Facebook, and coordinated by the YIT VFFCMH staff with help from Mercedes Avila. Because this Conference was structured as an overnight event on the UVM campus over Memorial Day weekend, attendance (114 youth and young adults) was somewhat lower than in 2010. However, the Friday evening events, Saturday morning workshops, and Saturday afternoon team-building exercises generated a lot of enthusiasm and learning.

*One of the Friday evening events was a performance by the “Mic Criminals” band put together by Cadoux Dzingou, a refugee from Africa living in Burlington. With the YIT State Operations Team, in July, 2011 he attended the SOC Grantees’ meeting in Chicago where he performed a solo rap for the SOC talent show. This inspired him to organize a talent show for young adults in Vermont. **With support from Matt Wolf, Courtney Bridges, Linda Li, and many others, the***

talent show was held a couple of times during this reporting period to help Diversity Rocks! raise funds to take its New American members to Washington, D.C. to see this nation's government in action. In early October, 2012 over 40 young adults and adult allies made that long-awaited trip.

In 2011, with Bennington peer outreach worker and statewide YIT consultant Katrina Hollis, Matt Wolf attended young adult advisory board meetings in the Chittenden, Lamoille, and Orange-North Windsor regions to inspire them to affect change in their communities and assist with their identification of goals and planning to achieve them. He also supported the Lamoille and Orange-No. Windsor regions in bringing their young adult advisory board members to the annual Franklin-Grand Isle Youth Summit in November, 2011 for sharing of ideas and approaches. In May, 2012 the Orange-No. Windsor region's YIT New Horizons group reciprocated by holding a youth summit and inviting the Franklin-Grand Isle youth (in particular) to attend. In all, 75 young people attended this regional summit, at which Matt Wolf gave the keynote speech.

Very soon afterwards, on the weekend of June 1 and 2, the third annual statewide YIT Young Adult Voice Movement (YAVM) Conference was held at Castleton State College in Southern Vermont. Over 100 young people (7 from the Orange-No. Windsor region) attended all or part of this event, which was planned by an Executive Committee of young adult leaders from across the state. Guest speaker and comedian Colin Ryan spoke about his personal struggles as a young adult. The 10 workshops were substantive and delivered by young adults or youth groups. Attendees felt they learned useful information, including how to be leaders (see Attachments D-F).

As staff of the VFFCMH, the Young Adult Coordinator(s) have represented the voices of youth in transition and their families on the following State-level advisory groups: YIT Leadership Team, Suicide Prevention, Child Trauma Grant, Justice Jurisdiction for 16-17 year-olds, Working with Youth Conference Planning, the Diversion Enhancement Advisory Project (DEAP), and the YAAT. As a statewide TA provider as well as a Bennington regional peer outreach worker, Katrina Hollis attended a monthly State YIT Operations Team meeting. As other young adults from the regions become active YIT leaders, they may be invited to join these or other State-level advisory groups.

Matt Wolf has encouraged youth from across the state to apply to become members of the statewide Children and Family Council for Prevention Programs (CFCPP), on which he represents non-profit organizations serving youth and families. The CFCPP is Vermont's Juvenile Justice and Delinquency Prevention (JJDP) Advisory Group for overseeing implementation of the federal JJDP Act, and it must have youth with certain types of experience as Governor-appointed members. Though Matt assisted three youth in talking with the CFCPP's JJDP Specialist, none of those conversations resulted in an application to join the CFCPP. Matt will continue to support this effort and has joined a sub-committee of the CFCPP to create new avenues (like a youth sub-committee) for getting youth to participate in this (very adult) council.

Matt is also a member of the Governor-appointed ACT 264 Advisory Board, where he made a presentation highlighting the leadership development aspects of YIT programming, from peer

outreach workers to young adult advisory boards, including their collaboration with local teen centers. Matt emphasized that supporting young adult leadership helps youth work towards their independence and recognition as productive members of their communities. He modeled this by having Jeetan (with Linda Li) present to the Board about the status and needs of youth immigrants/refugees in VT. The Board later discussed its willingness to (at a minimum) write letters of support for program development proposals associated with this population.

Have barriers to youth involvement been identified? If so, how are they being addressed?

It took more time than expected to identify and connect with young adult leadership organizations and groups in Vermont and to find youth interested in partnering with adults to lead the SOC. Adults experienced with such partnerships say it is important to nurture a cadre of youth and young adults so someone is always being prepared to take over for those who have been the role models and then “graduated” to other things. Nurturing a cadre of future leaders was not a consistent priority of the SOC before this YIT grant.

The YIT Leadership Team has discussed more effective ways of engaging young adults in sharing their wisdom and energy with a broad spectrum of decision-makers about multiple issues than by asking them to join several groups. The regional YIT staff and young adult leaders joined the DCF Youth Development Specialists and Councils on November 10, 2010 in training about how to build youth voice. This collaboration was later strengthened by hiring Matt Wolf to be the YIT Young Adult Coordinator; he was previously a DCF Youth Development Specialist from the South Windsor-North Windham region.

By the time Matt Wolf joined the State YIT Team, most of the regions had hired their peer outreach workers and were beginning to establish young adult advisory boards or otherwise develop youth leadership. He was able to provide immediate on-site, hands-on technical assistance in response to their requests for leadership and self-knowledge (not career or religious oriented) curricula and activities.

*To further stimulate interest in young adult leadership, the VFFCMH YIT staff created Young Adult Leadership Awards. They and the State YIT Operations Team agreed that yearly, four young adults leaders will be given awards and will be asked to join the YIT Operations Team at the next national SOC conference. At the 2011 YAVM Conference, the YIT State Operations Team gave its first Young Adult Leadership Award to Katrina Hollis, the first YIT peer outreach worker. Katrina was also highlighted at the September 30, 2011 Learning and Sharing Day where she spoke at length about the Bennington region’s Teens For Change (T4C) youth group and its community activities (like ‘giving back’ to businesses and police). In August 2011, the YIT Young Adult Coordinator sent out statewide via email the first of ongoing quarterly solicitations of nominations of other young adults who exhibit exemplary leadership and initiative in their own lives and who positively affect the lives of others around them. **Since then, the State YIT Operations Team has chosen three other people (Jeetan Khadka, Mikah Hughes, and Cheyenne Knuth) to receive Young Adult Leadership Awards. These 4 young adults and their adult allies (2 family members) attended the 2012 Training Institutes in Orlando, Florida with the YIT State Operations Team. They participated in the Youth Track , other workshops of interest, and in YouthMOVE activities.***

Matt has been directly addressing the barriers young adults face in receiving services by encouraging the YIT peer outreach workers and young adult advisory groups to create regional “Living Books” to document the local resources for employment, housing, education, health care, etc. Half of the regions started work on this project, and in 5 of them, young adults led the effort. In Chittenden, the result is an interactive website called – thanks to branding help from the YIT Social Marketing Coordinator – “Impact Vermont” (with a sneaker logo).

VII. Social Marketing/Public Education Campaign

Has your social marketing/public education plan been completed or revised since the last report? Describe any changes.

The YIT Operations and Outreach Team is pursuing a social marketing campaign that takes a public health approach to reducing stigma. This campaign is broadly defined using the Vanguard template for a Social Marketing Plan; the Plan is posted on the Social Marketing page of the YIT website (<http://www.youth-in-transition-grant.com>).

Who were your targeted key audiences this period? What were your key messages and strategies and how did you select them?

Four different sets of activities are envisioned as part of the overall Plan:

- 1. WEST (We Eliminate Stigma Together): modeled after and using materials adapted from the STARS project that was highlighted at the 2010 Georgetown Training Institutes and which the young adults who attended from VT liked very much. WEST encourages young people to apply together for a small sub-grant to design and undertake an activity to reduce stigma. A pilot test of WEST in the Washington County high schools led to re-formatting it to be implemented through the YIT young adult advisory groups.*
- 2. Children’s Mental Health Day/Week/Month celebration: an annual statewide conference for youth and young adults, also production and dissemination of materials promoting mental health.*
- 3. “Your Voice Matters”:* a variety of ways the VFFCMH informs families about the leadership opportunities available to them. The Social Marketing Coordinator updated the VFFCMH logo and brochure to attract more families and youth/young adults to this source of children’s mental health support and advocacy. Then, because Tropical Storm Irene ruined the VFFCMH offices in Waterbury, Courtney launched a “We’ve Moved!” temporary marketing campaign to help families, young people, and SOC partners find the new space in Williston. Through social media, new business cards, and other hard materials like a **new travelling tabletop exhibit**, VFFCMH was able to start over in strength.
- 4. “BringChange2Mind.org”:* an anti-stigma campaign of national partners. Courtney imagined convening the corresponding VT partners (e.g., NAMI-VT, VFFCMH, etc.)

and other interested organizations to work together.

Share some of your campaign successes since the last report.

1. *The WEST campaign and the VFFCMH Statewide Family Network's youth leadership initiative were combined with a new mini-grant opportunity from the Vermont Department of Health's (VDH's) Office of Minority Health. A Request for Proposals (RFP) was issued for up to \$2,000 per region. The intention is to assist and empower youth and young adults in transition to use their voice of experience to positively impact the system of care and their communities while strengthening their self-advocacy skills and mutual support. During this reporting period 7 projects in the Chittenden, Franklin-Grand Isle, Lamoille, Orange-No Windsor, and South Windham regions were funded. One was Cadoux's "U Got Talent" show; another was the New Horizon's Youth Summit. One mini-grant supported 10 "poetry slam" events by the New Generation; still another offered incentives for youth to improve their fitness.*

Matt Wolf spoke on a Franklin-Grand Isle public access TV show about the YIT Grant and the efforts of Vermont's youth to give back to their communities and reduce the stigma associated with youth in general.

Courtney Bridges provided on-site consultation for at least 7 of the 12 regions about use of social media and social networking to help combat stigma. Her consultation included information about branding; event marketing; platform options, research, and development; resources; and policy and procedures related to privacy. On a nearly daily basis she demonstrates use of social media and social networking through use of the YIT Grant Facebook page (with over 300 friends by the end of September, 2012) and Twitter account.

The Governor's Office asked the DMH for help with creating 24 ornaments to represent Vermont at the national Christmas Tree Lighting ceremony. DMH asked the YIT Grant for help, and Courtney suggested inviting the Young Adult Leader Executive Committee to have the honor of designing and crafting them. She agreed to act as the required local artist and to coordinate the efforts.

2. *As in 2011, YIT collaborated with the Vermont Department of Health's (VDH's) Minority Health Office to produce the annual YAVM Conference, this time on June 1 and 2. The Social Marketing Coordinator and Young Adult Coordinator worked with an Executive Committee of young adult leaders from multiple regions to plan and produce the event. Approximately half of the 100 young adults who attended were of minority background, so the Office of Minority Health supplemented the 2012 YAVM Conference budget with a grant of \$9,400.*

Planning for Children's Mental Health Day led to a partnership between the UVM Department of Psychiatry, the Me2Orchestra, and other statewide organizations (including DMH) for producing two public service announcements (PSAs) by May, 2013. Scripts have been written and some filming has been done.

- 4. Courtney is collaborating with the Marketing Manager of the Vermont Association of Mental Health and Recovery (VAMHAR), Dan Osman, who is also President of Camp Daybreak. Camp Daybreak is VAMHAR's one-week summer camp for children with serious emotional disturbance (SED). Since it relies on youth and young adults as counselors for the week, YIT has supported Camp Daybreak in development of a manual about how to solicit and train those volunteers. Courtney and Dan's collaborative activities during this reporting period included Dan's delivery of a workshop about Camp Daybreak at the 2012 YAVM Conference.**

What efforts have you made in planning for the next National Children's Mental Health Awareness Day?

The YAVM Movement Conference is the central YIT celebration of Children's Mental Health Day/Week/Month even though the conference might not occur during Children's Mental Health Week or on Children's Mental Health Day.

*The YIT Social Marketing Coordinator created a Facebook account which now has four sub-groups, one about the YIT Grant in general, another specifically about the YAVM Conference, one for the Young Adult Leaders Executive Committee, and one for production of ornaments. Courtney invites young people to submit ideas for the YAVM Conference and other events via Facebook and Twitter. She actively checks and updates the pages. **By the end of September, 2012 the Facebook account had over 300 "friends" with more being steadily added!***

Planning is underway for the production of 2 PSAs in time for the 2013 Children's Mental Health Day. Scripts have been drafted and some filming has been done.

Have barriers to the implementation of the public social marketing/ public education efforts been identified, and if so, how are they being addressed?

In the past, Vermont's public education about children's mental health primarily consisted of educating legislators about the need for services. With the YIT Social Marketing Plan, this limited focus has been expanded to a much broader campaign to reduce stigma related to needing and receiving mental health services and to just being a young adult. One barrier to carrying out this campaign is lack of information about the messages most likely to make a difference with young adults. The WEST campaign and the related VFFCMH young adult leadership mini-grants (first issued in the summer of 2011) directly address this by encouraging youth to design their own messages and activities. A larger and more diverse group of young adults is now giving input to the design and content of the YAVM Conference, an event intended to build leadership and advocacy among young people about the SOC. And families are being provided information through the VFFCMH website and other materials or events about leadership opportunities and how their "Voice Matters" to improve the SOC....Attracting other organizations to join one or more of the social marketing campaigns has been challenging but seems to be changing one project and relationship at a time.

Has the national campaign team helped you this period and if so, how?

The Vanguard team was helpful to the Social Marketing Coordinator in drafting the YIT Social Marketing Plan. Following the Year 2 Federal site visit, the TA Partnership asked the Social Marketing Coordinator to describe her work in an article for the TA Partnership newsletter. This was uplifting for Courtney Bridges, as was being asked to serve in 2012 (like in 2010 and 2011) on the panel of judges for the national ECCO awards. Undoubtedly, though, the biggest support occurred in September, 2011 when Leah Holmes-Bonilla of Vanguard and Brittany Smith of the National TA Partnership made a site visit to Vermont specifically to offer T/TA about social marketing and social media to an audience of YIT staff and young adults. This day of training occurred less than 2 weeks after Tropical Storm Irene and devastating floods in Vermont, but at least 40 people from 7 of the 12 regions came together at the Three Stallion Inn in Randolph to learn about these topics.

Since then the regional demand for consultation by the YIT Social Marketing Coordinator has increased dramatically. Courtney is helping regions enhance their recruitment and marketing techniques by building social networking sites and branding their young adult advisory groups. The branding experience includes teaching, mentoring, developing, and implementing ideas surrounding, but not limited to, social networking, social media, and promotion of young adult groups. Through this experience, young adults are able to voice their opinions and rally behind a young-adult- driven anti-stigma message.

Courtney twice presented with Leah Holmes-Bonilla at the Georgetown Institutes in July, 2012 a 3 hour Institute focused on “Social Media for Systems of Care”; each time over 100 people attended!

VIII. Evaluation

Describe how the evaluation (both local and national) is being implemented. Are there any areas of concern or difficulty in implementing the evaluation? What steps are being taken to address these areas?

Dr. Thomas Delaney, Lead Evaluator for YIT, and Dr. Jesse Suter, Dr. Jody Kamon, Ellen Talbert, database administrator, plus interviewers Audrey Garfield (who replaced Stasia Savasuk, who took a different job) and Amanda Ellingson comprise the energetic, cohesive 2+ FTE Evaluation Team for this grant. They operate out of the Vermont Child Health Improvement Program (VCHIP) of the University of Vermont (UVM) College of Medicine (COM).

The YIT Evaluation plan has three main components: the Common study, the Vermont study, and the National study that includes a Services and Costs aspect. To design the studies, particularly the Common and Vermont components, the Evaluation Team conducted thorough background research; modified existing and created new data collection tools; consulted with community members and colleagues in design; and conducted extensive pilot testing. The design meets the needs of both the local and national evaluations and involves receipt of data from the

different agencies and institutions providing services for youth with SED (including State programs that focus on supported employment, community mental health centers, runaway and homeless youth programs, corrections, etc.). The design has been adapted to accommodate each of the twelve different regional plans. It received UVM Independent Review Board (IRB) approval in March, 2010, though afterwards - in January 2011- the IRB required some changes to the consent forms. The resulting delay caused loss of 10-15 potential evaluation subjects.

After the initial IRB approval was given, the evaluators trained the regional YIT staff to collect the necessary data and consent forms and – on April 1, 2010- began data collection. Once all regions were familiar with submitting the Study Inclusion Criteria Checklist (SICC) and the Common Study, and as the six-month follow-up interviews began, the Evaluation Team also trained them to collect data for the Services and Costs part of the National Study.

*Staff turnover at the mental health and youth services agencies continues to pose a challenge to increasing the number of young adults in the YIT evaluation studies. There have been challenges for YIT staff in partnering with other SOC workers to increase the recruitment “pools” in their communities. **By the end of September, 2012 about 2/3 of the regions had attained their targets for enrollment in services and in the evaluation studies.** The Evaluation Team has kept the YIT State Operations and Outreach Team and the regions informed about enrollment. (See **Attachment A for enrollment information for this reporting period and for the latest quarter, with a row of data about the cumulative enrollment.**)*

Retention of young people in the YIT studies has also been challenging. To strengthen retention in the National and Common studies, the Evaluation Team began offering participants water bottles or re-usable cups that have the YIT evaluation contact information, also sending out quarterly post card reminders to participants that they are still in a study and encouraging them to update any changed phone numbers, emails or postal addresses. Regional YIT staff help the evaluators re-connect with young people for follow-up interviews.

In July, 2011 during the Chicago SOC Grantees’ Meeting, the YIT Evaluation Team received a silver-level “Honoring Excellence in Evaluation” Award from the MACRO Team for the effectiveness of the VCHIP data collection tools and systems, as well as the VCHIP data management system. The MACRO Team also invited the Vermont YIT Evaluation Team to submit an article describing its work (which Tom Delaney did) in the national Evaluation Update newsletter issued for September, 2011.

How are the results and data being disseminated, with whom, and how is it being used for policy development?

Enrollment is one of several topics discussed with the regions during the annual site visits by the YIT State Operations and Outreach Team. (For FFY2012, the 12 site visits were held mostly during March and April). The Evaluators participate in these visits along with the Principal Investigator (PI), Project Director (PD), Young Adult Coordinator, Social Marketing Coordinator, Lead Family Contact, and other members of the State Team as possible.

Besides the enrollment information, the Evaluation Team produces and shares a continually

evolving dashboard of indicators. The YIT dashboard was first shared with the regions in the evaluation discussion group at the September 23, 2010 Learning and Sharing Day. The statewide version is updated regularly and disseminated broadly via email to YIT staff and stakeholders. The regional versions are prepared once the regions have submitted enough data to ensure confidentiality of the results. **During this reporting period, 7 of the 12 regions qualified and received their own dashboards.** The dashboard is monitored by the State YIT Operations and Outreach Team and by the regional YIT Steering Committees for policy or practice implications. It is also shared with the YIT Leadership Team.

Six-month follow-up data was first shared in the dashboard at the September 30, 2011 YIT Learning and Sharing Day. For that day as for the one a year earlier, Evaluation Team Leader Tom Delaney was very involved with the interagency committee planning the event. He felt the need to help the Evaluation Team (and others) better understand each region's SOC. The YIT Social Marketing Coordinator came up with a driving and road theme for the 2011 Learning and Sharing Day. This enabled a dual focus on both family- and young adult driven-care and on SOC mapping. The planning committee created an extensive exercise to help regional YIT staff and Steering Committee members experientially define the local SOC and their roles within it. In this way, the Evaluation Team turned its research into action to ensure that technical assistance most critical to the success of YIT was delivered.

Other data being shared comes from the Department of Corrections (DOC). For YIT, DOC developed a standard quarterly report about the status of people under its supervision by age and region. The YIT Project Director distributes this via email to the AHS Field Services Directors and the Children's Mental Health Directors and others in each region. It is an important part of evaluating results of the grant. The data shows that, by a conservative estimate, since YIT started delivering services there has been at least a 20% reduction in the number of young people aged 16-21 (inclusive) under DOC supervision. Most of the reduction has been in community supervision rather than incarceration.

The Evaluators delivered at the 24th National SOC Research Conference in Tampa, Florida in March, 2011 a poster and a workshop about some initial YIT research. These presentations summarized: 1) findings from the Access and Barriers data collection tool relating to young adults' reported barriers and facilitators to engaging in important aspects of their lives, and 2) findings from the Young Adult Strengths Questionnaire, specifically the reliability properties of the overall tool and four scaled scores corresponding to four strengths domains.

On February 29, 2012 at the Pediatric Grand Rounds of the UVM College of Medicine (COM), the YIT Evaluation Team presented data about young adults' utilization of health care.

At the 25th National SOC Research Conference in Tampa, Florida in March, 2012, Dr. Jesse Suter presented a poster highlighting the Sequential Intercept Model to illustrate the criminal justice involvement of YIT system of care youth. See Attachment I for the proposal for the poster presentation; the actual poster can be seen at <http://www.uvm.edu/~jsuter/files/presentations/JusticePoster-USF-2012.pdf>. Subsequently, more criminal justice data was added to the YIT evaluation dashboard using population-based

rates instead of the DOC raw numbers.

Also during this reporting period, Courtney Bridges, YIT Social Marketing Coordinator, worked with the Evaluation Team to produce a young-adult-friendly data page to help engage more young adults with the grant as well as share the collected information in a way that is meaningful for this target population (16-21). (See Attachment B)

The Evaluation Team submitted the entire dashboard including the criminal justice data and the young-adult-friendly page for ECCO recognition and in July, 2012 received a Bronze ECCO Award for its Professional Outreach.

Have barriers to the implementation of the evaluation efforts been identified and how are they being addressed? Have you been able to work with your national evaluation liaison to address these barriers?

The Evaluation Team initially held 4 meetings of its advisory group (the “E-Team”) to get input about the evaluation design from young adults and family members who are or have been consumers of services from the Vermont SOC. The first meeting included an encouraging number of youth and young adults, but the subsequent three meetings met with only mixed results and low attendance by young adults, although participation by family members and adult allies continued to be very strong. The Evaluation Team modified how it recruited and tried to retain people for the E-Team, including holding meetings at different locations and different times of the day and holding a phone meeting. The Team explored other means of engaging young adults for the YIT evaluation, like visiting the Spectrum Drop-In Center and using Face-book. These issues and attempts were discussed with MACRO representatives.

*The YIT Evaluation Team took a new approach to hearing from young adults in early summer, 2011. The Team contracted with Dr. Nancy Pandina to conduct focus group interviews with young adults in 10 of the 12 regions to learn their opinions about what does or does not work about the services they have received. (Dr. Pandina was an evaluator for Vermont’s earlier Children’s Mental Health Initiative grants.) She did quantitative analysis of the comments received from 86 young people from around the state and in November, 2011 produced a report entitled “YIT Focus Group Results”. It can be found on the YIT website at <http://www.youth-in-transition-grant.com> under the Evaluation section; look for Evaluation Reports. **The results were summarized and presented by Dr. Jody Kamon at the Youth Workers’ Conference on May 17, 2012 as a workshop entitled Straight Talk: What young adults have to say about trying to access Vermont’s Mental Health System of Care and the quality of services offered”.***

During this reporting period, MACRO conducted its second round of interviews (this time by phone instead of in-person) to assess the “system-ness” of YIT through in-depth conversations with selected local (Lamoille Region) and statewide stakeholders.

How has the evaluation contributed to sustainability efforts within your community?

In September, 2009, with the DMH, the Evaluation Team conducted 2 training events for community mental health center staff around ASEBA data collection and data sharing. The

purpose of the training extended beyond the YIT evaluation to ongoing operations of the State mental health system, which now requires routine use of specific validated and reliable assessment tools with many clients.

The distribution of DOC data has helped to raise awareness about the number of young adults in jail or on probation in the regions, and affected regional design and implementation of the plans. Local design, in turn, influences “ownership” and sustainability.

*With advice from Dr. Rusty Clark, starting in the fall of 2010 the YIT Evaluation Team took on the added task of assessing how well regions are implementing TIP. Dr. Clark approved VCHIP adaptation and use of two TIP self-assessment tools: the Self Study of TIP Implementation—Guidelines, and the Self Study of TIP Implementation—Organization and Structure. These tools were administered (the Guidelines tool as a structured interview, the Organization and Structure tool as self-report) and completed by representatives from a total of 16 Vermont SOC organizations. The YIT Evaluation Team summarized the findings, shared them back with the organizations at the June 2011 TIP training, and is now using them as the baseline for a study of how programs within the organizations may be changing as a result of the TIP training. **Twelve of the 16 organizations/programs did the action planning and are completing the additional training needed to be certified as TIP-informed by the National Network for Youth in Transition (NNYT). Since receiving Part I TIP training in July, 2012, an additional 2 organizations are considering doing so. During this reporting period, the Evaluation Team clarified with Dr. Rusty Clark that it will help the participating organizations/programs in the certification process by administering, summarizing, and disseminating the results of a second application of the TIP self-assessment tools. Certification in use of an evidence-supported practice strengthens organizations and programs in their ongoing operations.***

The evaluation is measuring progress toward achievement of goals for the SOC and changes in functioning and mental health symptoms for transition-aged youth with SED. So far there are positive indicators of progress. The data will be used to support requests for State and community funding to sustain the project after the federal grant funds end.

IX. Technical Assistance and Training

Describe training activities which have occurred in your community since the last report.

The YIT State Operations and Outreach Team provided several technical assistance and training events during this reporting period:

CLC training events: *The following organizations hosted the CLC training for about 110 people:*

- *Counseling Service of Addison County, February, 2012*
- *Area Health Education Center (Chittenden), April, 2012*
- *Working with Youth Conference, May, 2012*
- *Washington County Mental Health Services, June, 2012*
- *Vermont Healthcare Careers Opportunity Program’s “College Quest”, summer, 2012*
- *Community Health Services of Lamoille Valley, August, 2012*

- *United Counseling Services of Bennington, August, 2012*

Other training events:

- *On February 29, 2012 at the Pediatric Grand Rounds of the UVM College of Medicine (COM), the YIT Evaluation Team presented data about young adults' utilization of health care.*
- *At the 25th National SOC Research Conference in Tampa, Florida in March, 2012, Dr. Jesse Suter presented a poster highlighting the Sequential Intercept Model to illustrate the criminal justice involvement of YIT system of care youth.*
- *On May 17, 2012 at the Youth Workers' Conference, in collaboration with Dr. Nancy Pandina and young adults from the Franklin-Grand Isle region, Dr. Jody Kamon presented a workshop entitled "Straight Talk: What young adults have to say about trying to access Vermont's Mental Health System of Care and the quality of services offered".*
- *Third Annual Young Adult Voice Movement (YAVM) Conference, June 1 & 2, 2012*
- *TIP Training, Part II, NNYT Trainers, July 10, 2012*
- *TIP Training, Part I, VT-TIP Apprentice Trainers with NNYT Coaching – July 11 & 12, 2012*

How were these training activities used? Who completed these training activities? Were they effective in meeting community goals?

The CLC training was extensively discussed on pages 17-19. The Evaluators' presentations were discussed on pages 35-36. The 3rd YAVM Conference and its predecessors were discussed on pages 3, 5, 6, 7, 27, 28, 31, and 32. And the TIP training and certification effort was discussed on pages 3, 4, 5, 7, and in most detail on pages 14 and 37. All of these events have been targeted to accomplishing and sustaining the YIT goals, including reporting on results.

X. Sustainability

Has your sustainability plan been developed/revised during this period? If so, please describe and provide rationale.

A draft action plan for sustainability was formulated from the logic model. "State supports and sustains regional services for young adults" is one of the goals and is the basis for the action planning for sustainability. That action plan can be found on the official YIT website (<http://www.youth-in-transition-grant.com> – see the State Operations and Outreach Team page). Furthermore, during this reporting period, the YIT State Operations Team began planning the October 24, 2012 YIT Fall Learning and Sharing Day with a focus on sustainability of youth involvement and empowerment.

Describe how you meet match requirements and how you document the use of match funds. Have you adhered to requirements of the Office of Management and Budget (OMB) Circular A-

133 related to Federal Audits?

Vermont’s grants management adheres to the OMB requirements. DMH obtains certification of match for this grant from the relevant business and program managers; the match is reported annually on the Financial Services Report (FSR) as expected.

List percentages of your match funds which come from the following public or private sources in the table below:

The information presented below is different from the information presented in the annual FSR, where only the required, minimum match is reported. The information below, instead, lists all match certified to the Department of Mental Health as State General Fund expenditures above baseline (average of FY2006 and FY2007) for youth of transition age by other State Departments in State FY2012. The information is here listed as in-kind since the expenditures are for related programs and services, not directly for YIT.

Source	Percentage	Cash Match	In-Kind
Child Welfare	25.33%		\$793,644
Mental Health			
Education			
Juvenile Justice	3.73%		\$116,973
Substance Abuse			
Health			
Foundations			
Other (Please Describe): -Corrections -Diversion -Reach Up -Labor	70.94%		\$2,222,923
TOTAL	100.00%		\$3,133,540

XI. Lessons Learned

Please describe lessons learned or accomplishments your community has experienced this reporting period that you would like to share with others.

Building a high-performing team requires a lot of time together and trust in each other’s good will to proceed through “Forming, Norming, Storming, and Performing” (Irving Shalom). The SOC Grantees’ Meetings and other events (such as attendance at the annual conference of the national Federation of Families for Children’s Mental Health) that count toward accomplishing the training expectation for sites provide stimulating learning opportunities combined with unstructured time for reflection and enjoying one another. This helps build common understanding, expectations, and trust. The training events also bring us face-to-face with national and other sites’ experts and resources – an important way to assess what might be

helpful. Therefore, it is critical that participation in these meetings continue to be required, especially in this economy.

Though this is Vermont's third CMHI grant, it may be the most difficult in part because of the depleted economy and its impact upon State and not-for-profit budgets. It is hard for many key stakeholders to appreciate being asked to plan and implement a new project when they are also being told to cut existing programs and lay off staff. And it is hard for families to participate when they are unemployed, underemployed, and/or losing their homes and accustomed services and supports. These difficulties were further exacerbated on August 28, 2011 by Tropical Storm Irene and the associated flooding throughout Vermont, particularly in Waterbury where the State Office Complex was located. Since then all AHS offices and staff have been re-located, disrupting the patterns and ease of collaboration.

While there is genuine excitement about seeking and hearing the voices of youth and young adults, figuring out how to involve them in an ongoing way in governance is challenging. As each region makes progress toward establishing its own broad-based youth/young adult leadership group, the VFFCMH is taking steps to form a centralized Vermont YouthMOVE chapter. While this depends upon a critical mass of continuing interest among young people, it offers the possibility of a structure upon which advocacy for sustainability could be built.

Are there any other areas that you would like to work on in the future? Is there a plan in place for your community to address this/these area(s)?

Implementing and updating the action plans related to the logic model gives us plenty to do!

ENROLLMENT FROM JANUARY 1 – SEPTEMBER 30, 2012

Region	SICC ¹	Enrolled in Common Study	% reported female enrolled in Common Study	% reported minority enrolled in Common Study	Enrolled in Vermont Study	Enrolled in National Study
Barre	11	11	81%	18%	0	3
Bennington	10	10	20%	20%	2	4
Brattleboro	16	12	50%	25%	0	11
Burlington	25	24	29%	29%	3	11
Hartford	9	8	37%	12%	1	6
Middlebury	4	4	0%	0%	0	1
Morrisville	6	6	50%	33%	3	1
Newport	10	7	57%	0%	3	1
Rutland	1	1	100%	0%	0	1
Springfield	5	5	40%	20%	1	2
St. Albans	8	8	75%	25%	0	7
St. Johnsbury	4	4	25%	25%	3	1
Statewide Enrollment 1.1.12 – 09.30.12	109	100	44%	21%	16	49

¹ SICC=Study Inclusion Criteria Checklist

**ENROLLMENT FOR JULY 1 THROUGH SEPTEMBER 30, 2012
TO SHOW LATEST CUMULATIVE FIGURES**

Region	SICC²	Enrolled in Common Study	% reported female enrolled in Common Study	% reported minority enrolled in Common Study	Enrolled in Vermont Study	Enrolled in National Study
Barre	2	2	100%	0%	0	1
Bennington	3	3	67%	0%	1	1
Brattleboro	1	1	100%	0%	0	1
Burlington	3	3	67%	0%	0	3
Hartford	3	2	0%	0%	0	2
Middlebury	0	0	N/A	N/A	0	0
Morrisville	3	3	67%	0%	1	1
Newport	8	5	60%	0%	1	0
Rutland	0	0	N/A	N/A	0	0
Springfield	1	1	0%	0%	1	0
St. Albans	0	0	N/A	N/A	0	0
St.	1	1	100%	0%	1	0
Overall	25	21	62%	0%	5	9

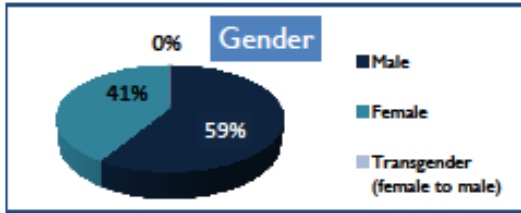
<i>Statewide Enrollment 4.1.10 – 09.30.12</i>	529	431	42%	15%	96	160
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² SICC=Study Inclusion Criteria Checklist

Youth in Transition (YIT) Descriptive Data: Who Are We Serving? - Vermont (4/1/10 - 6/30/12)

Intake sample includes 410 young adults from across Vermont.*

Age	Mean	SD**	Range
	19.0	1.4	16 to 21.9

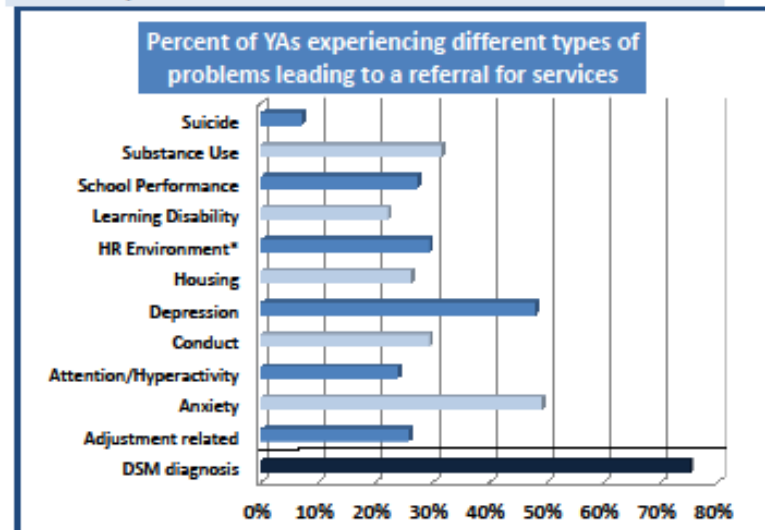


Race/Ethnicity	n	Intake
White	335	82%
African American	18	4%
American Indian/Alaskan Native	5	1%
Asian	13	3%
Belonging to more than 1 race	39	10%
Not of Hispanic, Latino, Spanish origin	352	86%
Hispanic, Latino, or Spanish*	13	3%

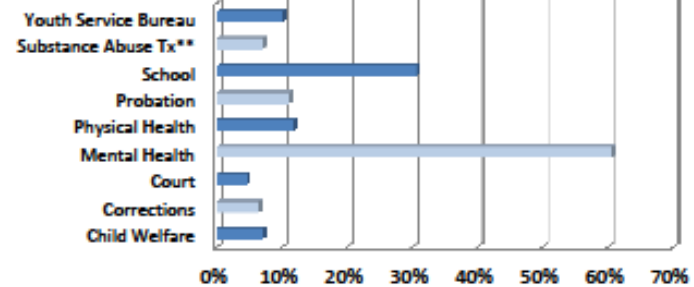
*11% missing data for whether Hispanic, Latino, Spanish

Problems Leading to Referral for Services

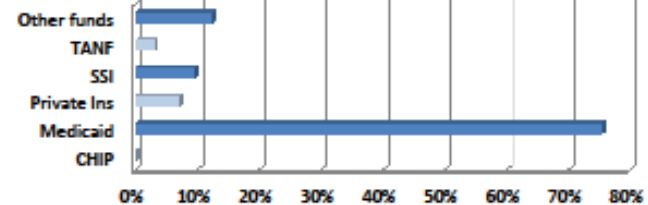
	Mean	SD	Range
Number of problems	3.4	2.6	0 to 16



Percent of YA involvement by agency type at Intake



Percent of YAs receiving specific types of funds



*Sample size in any given category may vary due to missing data.

**SD = standard deviation

*Note: includes any type of high risk environment

**Note: A number of MH agencies also provide substance abuse treatment

Youth in Transition Grant (YIT) Outcome Indicators (4/1/10 to 6/30/12)

Vermont

These findings come from young adults who completed *Common Study* interviews when they started to YIT services in their communities (YIT Start) AND 6 months later (except for Employment which are from Vermont & National Studies). Sample sizes change because not all questions were answered, and samples <10 not reported for confidentiality.

Justice & Corrections	Sample size	YIT Start	6 mos	Progress
Arrested in past 30 days	106	3%	2%	●
Spent at least one night in correctional facility in past 30 days	98	1%	1%	●
Education	Sample size	YIT Start	6 mos	Progress
In school during the past 30 days	125	43%	43%	n/a
18 and older who have completed High School or GED	91	57%	65%	●
18 and older who received post-secondary training (e.g., TECH, College)	91	7%	9%	●
Employment (from Vermont & National Studies)	Sample size	YIT Start	6 mos	Progress
Report having a job in past 6 months.	115	57%	58%	●
Health	Sample size	YIT Start	6 mos	Progress
Report they are currently in excellent or very good health	105	32%	30%	●
Housing	Sample size	YIT Start	6 mos	Progress
Primarily living independently in past 30 days	121	12%	25%	●
Primarily living with others in community in past 30 days	121	65%	59%	n/a
Primarily living in more restrictive settings in past 30 days	121	5%	7%	●
Spent most nights homeless in past 30 days	121	7%	4%	●
Spent at least one night homeless in past 30 days	97	15%	7%	●
Relationships	Sample size	YIT Start	6 mos	Progress
Report agree or strongly agree know people they can rely on in past 30 days	124	91%	98%	●
Strengths	Sample size	YIT Start	6 mos	Progress
Report agree or strongly agree can handle daily life in past 30 days	124	82%	87%	●
Mental Health / Substance Use	Sample size	YIT Start	6 mos	Progress
Report anxious or depressed feelings all or most of the time in past 30 days	100	21%	22%	●
Report at least weekly tobacco use in past 30 days	108	54%	52%	●
Report at least weekly alcohol use in past 30 days	108	15%	10%	●
Report at least weekly illicit drug use in past 30 days	109	25%	20%	●

Symbol Key

- at least 5% improved
- No change
- at least 5% worse
- n/a Not applicable
- Less than 10

Sample Size

YIT Start 411

6 mos 125



Questions: Contact Tom Delaney
thomas.delaney@uvm.edu 802-656-9192

<http://www.youth-in-transition-grant.com>

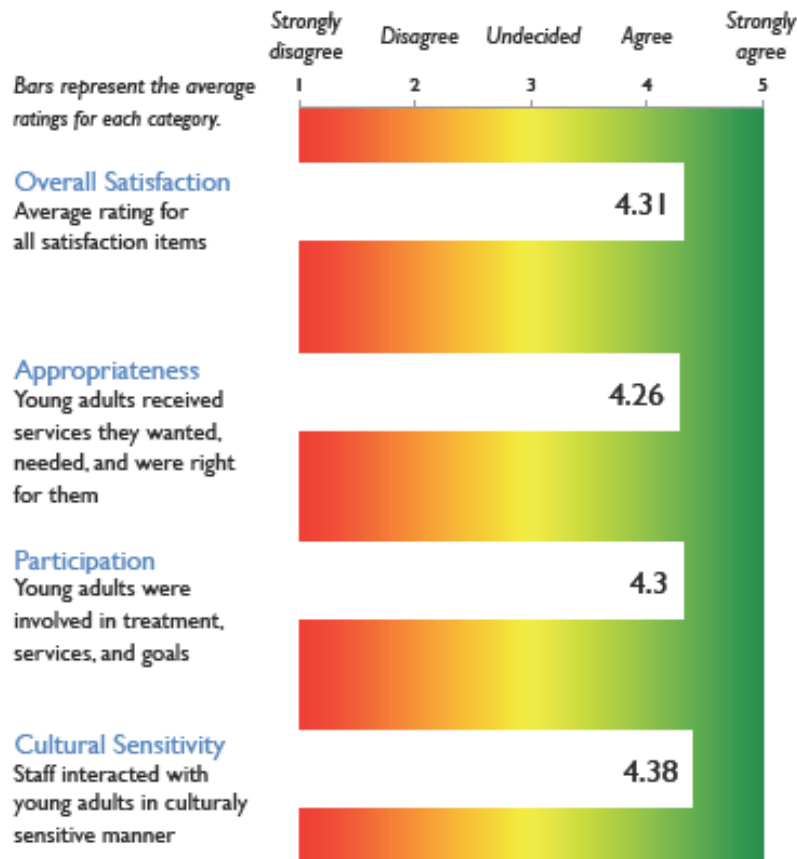
Youth in Transition Grant (YIT) Satisfaction Indicators (4/1/10 to 6/30/12)

Young adults who completed *Common Study* interviews 6 months after starting YIT were asked how much they agreed the services and supports they received were (1) *appropriate*, (2) *included their participation*, and (3) *culturally sensitive*. Note: Questions were asked by the young adults' service providers.



Vermont

Sample Size @
6 months = 125



To provide more detail about what young adults think about their services, the specific items are listed below along with the percentage of young adults who reported they agree or strongly agree with each item.

Appropriateness	% Agree
Overall, I am satisfied with the services I received.	96%
The people helping me stuck with me no matter what.	94%
I felt I had someone to talk to when I was troubled.	94%
The services I received were right for me.	94%
I got the help I wanted.	92%
I got as much help as I needed.	90%

Participation	% Agree
I helped to choose my services.	94%
I helped to choose my treatment goals.	90%
I participated in my treatment.	90%

Cultural Sensitivity	% Agree
Staff here treated me with respect.	98%
Staff respected my family's religious/spiritual beliefs.	90%
Staff spoke with me in a way that I understood.	98%
Staff was sensitive to my cultural / ethnic background.	94%

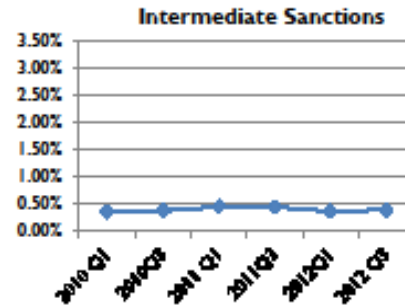
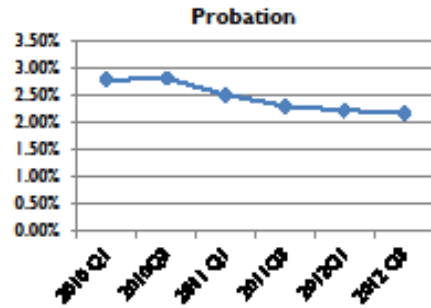


<http://www.youth-in-transition-grant.com>

Questions: Contact Tom Delaney
thomas.delaney@uvm.edu 802-656-9192

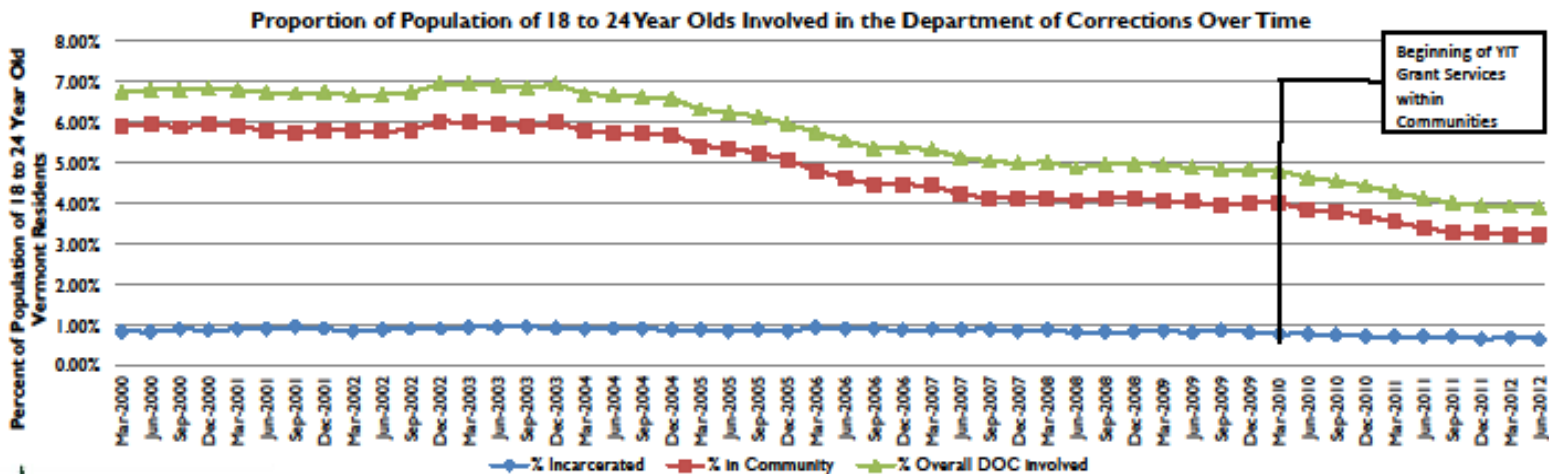
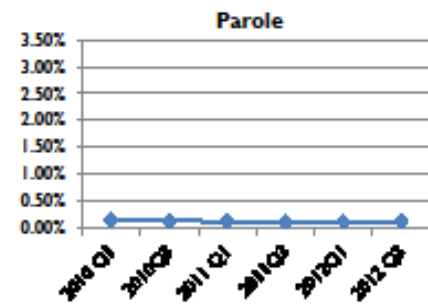
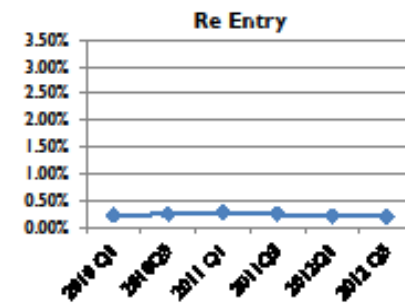
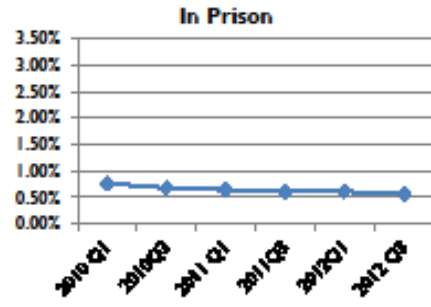


Criminal Justice Involvement (State of Vermont Data)



Summary: Statewide trends suggest there is an overall decrease in the number of young adults involved in the adult criminal justice system. This decrease appears to be primarily represented by a decline in the number of young adults on probation.

Note: The graphs below reflect trends in criminal justice involvement among young adults in Vermont. Data depicted are collected by the Vermont Department of Corrections and include young adults ages 24 and under. Available population estimates include young adults ages 18 to 24. Thus, the percent might actually be a slight overestimate. Also, population estimates by age are not available for 2011 and 2012; we



Check it out!

See what 314 young adults are saying about their lives after getting YIT services in their community for at least 6 months.



Add us on Facebook
"YIT Grant"

Young Adults with HS diploma or GED jumps 1/2 to 2/3!



...but only 1 in 15 get training or education after HS

Most report being able to handle daily life!

9 out of 10!

Nearly all young adults report having someone in their lives they can rely on!

99%



Drop from 1 in 5 to 1 in 20 who spent a night homeless in the past 6 months!

Vermont Youth in Transition



314 Young Adults statewide took our survey



VCHIP
VERMONT COMMUNITY HOUSING INTERVENTION PROGRAM

Login



Only 1 in 10 report good health -- a 10% drop over time

1 out of 2 say they had a job in

Want to know more?!



Visit our website



Vermont Child Health Improvement Program



Straight talk: What young adults have to say about trying to access Vermont's Mental Health System of Care and about the quality of services offered

Authors and Presenters

- Montana Greene
 - Cheyenne Knuth
 - Chris Reynolds
 - Dan Sartwell
 - Katlyn Sweetser
 - Jody Kamon
 - Nancy Pandina
 - Thomas Delaney
 - Jesse Suter
 - Brenda Bean
- A HUGE Thank You to Ebony Nyoni of NCSS!!!



Goal of today: Action



"I kind of feel like we have too many [surveys] as it is... We sit... and talk... but then nothing happens, which isn't any of our faults or your fault... It's just... we shouldn't be talking... we should be doing."



What do we want to talk about today?

What has worked well for you in getting services through your community's system of care?



What things do you think should be different or be changed in your community's system of care?



Who participated?

- 86 young adults age 18 and older
- Receiving services in their community
- 11 groups from 12 counties across the state

*counties' names are highlighted



Young Adult Voice Movement
Executive Planning Committee
Planning Meeting 4/18/12
Montpelier High School

Attendance:

Heather – Washington
Hassan – Chittenden
Jeetan – Chittenden
Bridget - Hartford (OoVoO)
Lana – Addison (OoVoO)
Josh – Addison YIT Staff
Dan Osman – Camp Day Break

Courtney, Matt, Cindy– YAVM Staff

Workshop Finalization:

- 1) Peer Pressure/ Drug & alcohol / Addiction
 - Somebody come tell their story. Be personal. Age doesn't matter.
 - How to do sober activities
 - Help understand what it is like to be an addict
 - Being pushed to do something vs. advice
- 2) Internet safety / relationships / domestic violence
 - How to avoid drama online
 - How to ask for help
 - How to tell what is harassment
 - Online relationships
 - Speaker could be a relationship expert, somebody that knows about domestic violence, somebody from the Center for Health and Learning.
- 3) Teen Suicide
 - Given by U Matter & Bridget
 - Community MH guide
 - Have lots of resources
 - Personal story
 - Warning signs
- 4) Cultural Performance Workshop
 - Given over 2 workshop periods
 - Perform at the end of the day
 - Native American tribe, or an African drumming group
- 5) Single Parents & Parenting Skills
 - How to save money
 - How to find and use resources
 - Prevention
 - How to make the best of your situation
 - Somebody from a parent child center or Vermont Family Network

6) Camp Day Break & Mental Health Awareness

- Dan Osman
- Leadership
- Bonding & personal stories
- Empowerment

7) Self Management & Stress

- Peace making
- Positive outlets
- Personal safety

8) Racism

- Given by Jeetan & Hassan
- History in the United States
- Oppression
- Privilege
- Scenario situations

9) Life Skills – Maybe Finance focused (Given by stand up comedian, friend of Josh)

- Job
- License
- Apartment

10) Small Business

- Chocolates for Change & Heather
- Repeat of 2011 conference

NEXT MEETING:

Theme / Prizes / Incentives / Games

April 25th from 3:30-5:30 at MONTPELIER HIGH SCHOOL

Report to VDH about the Young Adult Voice Movement (YAVM) Conference

The Young Adult Voice Movement (YAVM) Conference was held on June 1 and 2, 2012. The overall goal of the YAVM Conference is to instill leadership and empowerment skills in the young adults involved in the Youth in Transition, YIT, Grant.

This conference is designed for young adults, by young adults. The two day event was planned in a way to allow youth from all over Vermont have one night to get to know each other, and the other to dive into workshops that cover some serious subjects. The workshop topics this year were;

- Life skills: Finances
- Relationships and Domestic Violence
- Racism and Diversity
- Circle of Courage
- OMG, I'm pregnant: Teen Parenting
- Leadership through building a young adult group
- Teen Suicide
- Camp Day Break (Achieving mental health and Becoming a mentor)
- Substance use and abuse
- A fun way to learn how to learn: Teen leadership

Participant information:

142 People attended, over 100 of them were youth.

Of the 77 young adults who completed registration in advance on-line-, 36 of them said that English was not their first language.

Sixty seven young adults answered the question "What ethnicity do you identify best with?" Of those who responded, 31 chose Asian, 5 chose black/.African American, 1 chose Alaskan/Native American and 30 chose Caucasian.

Eighty were female and 62 were male.

Seventy- two youth took part in leadership and/or health related sessions.

We do not have the geographical information by county, but by town and AHS district. For those who answered this question, the information is as follows:

Chittenden- 46
Franklin- 16
Rutland- 4
Barre- 5
White River Junction- 7
Middlebury – 5
Lamoille- 1
North East Kingdom- 6

Respectfully submitted by Courtney Bridges, Matt Wolf, and Kathy Holsopple

YAVM 2012 Evaluation Results

What I liked about the conference...

- “I loved meeting new people and dancer are little hearts out.”
- “The people are always the best (youth)”
- “Relevant workshops”
- “the money management workshop, well facilitated meals, the keynote presenter”
- “Just about all of the staff were incredibly sweet and welcoming, I really enjoyed having a bit of freedom to meet new people and get to know them. It helps give people confidence also (just a little) –Thank you!”
- “Liked the T-shirts and the workshop, but last year it was more interesting conference at UVM.”
- “It was interesting, learned a lot of new things.”
- “Met new youth. Fun at rave and workshops.”
- “Enthusiasm and energy of the young adults and friendliness of the youth workers. The setting, the food, the activities, the planning!”
- “Meeting new people☺”
- “Everything”
- “Food was good. Teen pregnancy workshop was really good. The workshops were good.”
- “Enjoyed the workshop in the morning. Getting down time.”
- “Opening night”
- “The comedian was funny and he helped me on a different out-look on life.”
- “The dance was good and the comedian was kinda funny.”
- “The food. Entertainment and just coming & having something to do. Good experience.”
- “The workshops were really interesting”
- “Everything”
- “Dancing, keynote speaker! Dorm rooms were cool!”
- “Meeting youth from around the state!”
- “Most everything”
- “All the workshops were great topics”
- “The party and the workshop. A fun way to learn how to learn.”
- “The young adults Rock – they did an excellent job.”
- “Meeting people”
- “Friends. People”
- “I liked the workshop “A fun way to learn.” A lot of fun and learned a lot!”
- “Fun, new friends.”

- “I liked the dance”
- “You weren’t judged”
- “I liked everything”
- “Everything☺”
- “I liked that the whole conference wasn’t workshops”
- “the music”
- “The glowstick lazer dance party”
- “I had a really good time listening to them sing and play drums”
- “Constantly well-entertained and fed, good rooms, generally great services.”
- “Get to meet new people”
- “Food”
- “I love the Diversity!”
- “Everything was AWESOME”
- “I liked the workshop”
- “Many people live unity”
- “Meet a lot of different people”
- “Everything”
- “It is good”
- “Everything was done great.”
- “It was fun, it was different from last year.”
- “About the conference I liked that”
- “Workshop. Dance.”
- “Workshop”
- “I liked the conference because it was fun, amazing, interesting”
- “Everything”
- “Everything was awesome!”
- “The hospitality/food, lodging, etc. – was excellent!”
- “Everything were wonderful and awesome.”
- “The workshops”
- “Free food!”
- “Food”
- “I like the workshops, the dorms, the ability to meet new ppl”
- “The food was amazing. All the free stuff. The dance etc.”
- “Meeting new people and eating.”
- “Dance. Food.”
- “Hanging out with”
- “Hanging out with friends and making new friends.”

- “It was fun. I learned a lot of things that I didn’t know before.”
- “It was fun to get to learn new things and make friends.”

What I didn’t like about the conference...

- “I loved it”
- “Needs to be outside (more youth) is needed”
- “Where the snacks at night at? Castleton could be more organized”
- “there weren’t as many youth as I expected, making much of the activities a bit lack-luster”
- “I thought a few other workshops were more important than “Circle of Courage” but that should be for everyone to do (include in day 1) because I wish I could have done more than 1 workshop, these are important topics to be educated about.”
- “Didn’t like the food.”
- “Not much. Sometime boring. Couldn’t find way around to places.”
- “No games”
- “The comedian was preaching to us!”
- “Nothing”
- “The dorm situation. Too much free time.”
- “Dorm was very hot, loud. Lack of sleep.”
- “Stiff beds”
- “The performance”
- “The workshop was boring”
- “The strict rules about being in by 11.”
- “We did not have a lot of activities or know each other.”
- “Food – not very good vegetarian/vegan option.”
- “I would have loved to be able to do more than 2 workshops.”
- “7:30 wake up till 12:00”
- “Not enough A.C.”
- “Nothing”
- “Only 1 whole day, wish it was LONGER!”
- “Nothing”
- “Nothing”
- “Didn’t wanna dance!”
- “Sitting a lot”
- “sitting doing nothing”
- “I liked everything”
- “where we had to sleep”

- “Nothing”
- “Sleeping at 11 and hard to be in by 11”
- “There wasn’t any free time to walk around”
- “Nothing”
- “Other than occasionally (mostly Colin) I didn’t feel as if I learned much in the way of voice.”
- “Nothing”
- “nothing”
- “The LGBT workshop wasn’t here☹”
- “I liked everything”
- “Nothing”
- “Nothing”
- “Sad”
- “Not enough signs to let you know where to go. Should have coffee around for staff.”
- “Could have more people. Can be more organized and should have it in Bennington next year.”
- “That everybody really did not join the music”
- “No thing, all am wonderful.”
- “No things”
- “I like all thing”
- “Nothing”
- “I liked everything”
- “The mattresses”
- “I like very much”
- “The discomfort of the beds”
- “Couldn’t play GTA!! ☹”
- “The fact of not being able to go outside and play GTA.”
- “Nothing”
- “The beds. The close packed time schedule. Not enough “fun” activities.”
- “The lack of some peoples energy.”
- “No co-ed rooms. Only 1 dance. No freedom to wander.”
- “Lunch!”
- “Nothing”
- “Nothing”

We need to hear from you! How can this conference be improved?

- “I don’t think it needed improvement”

- “More youth, yes people busy but more youth, outside under a tent kinda like a fair”
- “Maybe a little more opportunities for initial icebreakers between regions”
- “More youth, a wide array of workshops”
- “This was my first time here. I was observing how only a few people weren’t afraid to stand out and dance and perform for us. I understand we were strangers to each other but if they are afraid to put themselves “out there” do you really think “they” will have the courage to stand up and voice their opinion? Next time you should do something that makes people think “Hey! I can stand up and have fun.” If somebody is getting harassed or anything, people from this workshop should get the confidence so they can be helpful in those types of situations.”
- “If you could invite more people and let people to for Disey for hang time.”
- “Maps”
- “Have fun games. Make it three days.”
- “Little more structure in evening. Seems like lots of people left the gym. Maybe this would be a good time for some team building activities plus free time for dancing and games.”
- “Make the dance longer!”
- “It was perfect!”
- “I think it would better if there were more structured things to do so the young adults are wondering less. If there was a common dorm area that the young adults could hang out in all night. It would reduce the drama of sneaking in and out and other roommates.”
- “More one-on-one time, less free time.”
- “More DJ Dancing”
- “More age acting performances”
- “The 2nd day could use some excitement somehow.”
- “The second day could have more entertainment. And later sleeping times.”
- “By including a lot of youth on the board.”
- “Ask me later”
- “Advance notice about registration – times. Online registration forms.”
- “Wake up at 12:00”
- “If we had a way to get more people to dance. Bonding came easier after workshops. Maybe have some 1st day B4 DJ Dance. Need more bonding time second day. Everyone is closer 2nd day.”
- “Stay up longer and sleep longer, more games in party”
- “Assign workshop before the conference happen. Lock the way to dorms (Lots of them didn’t attend any workshop)”

- “More free time. Longer DJ”
- “I think it went great! It was great to have a lot of activities.”
- “Rooming waivers for boys & girls.”
- “More active stuff”
- “Try going outside”
- “It is as good as it could be”
- “Never hold it at Castleton again!”
- “Nothing... planned very well”
- “Nothing, I liked it”
- “I think there should be more performances and more activities”
- “Broader voice-related presentations. And better”
- “Add more programs”
- “nothing”
- “Parent permission for co-ed rooms!”
- “Talk my more people”
- “Maybe have it better marked”
- “Be in Bennington and needs to be more organized.”
- “More people should be involved. But loved it.”
- “This can improved by communicate to young adult”
- “No BS going on like WTF come on no BS”
- “Nothing is to heard from me.”
- “Really like the format/workshops”
- “Make it 2 days and 2 nights”
- “Allow us to leave in needed. That bugged me a lot!”
- “Being allowed to go outside.”
- “I think we should be able to do more activities”
- “More info, better beds, more time”
- “Better entertainment. More social activities.”
- “At least 2 dances. Co-ed rooms. Always snacks available (midnight snacks)”
- “Well, I guess I don’t have any advices to say.”
- “The conference was good the way it was.”
- “This conference was good the way it was.”

I liked the speaker Colin Ryan

	1	2	3	4	5
3		1	12	18	29

I liked that the first day was about getting to know and hanging out with other young adults

1	2	3	4	5
2	1	9	10	41

Workshop Topics:

Substance Use & Abuse

1	2	3	4
	1	4	5

Relationships & Domestic Violence

1	2	3	4
		1	5

Teen Suicide

1	2	3	4
	2	3	6

Circle of Courage

1	2	3	4
		3	4

Teen Parenting

1	2	3	4
2	2	1	2

Achieving Mental Health (Camp Daybreak)

1	2	3	4
			1

Racism & Diversity

1	2	3	4
	1	3	6

Life Skills: Finances

1	2	3	4
	1	2	8

Teen Leadership

1	2	3	4
1	2	8	3

A Fun Way To Learn How To Learn

1	2	3	4	
			15	

I liked the social activities and entertainment

1	2	3	4	5
	2	16	16	23

I feel like I am leaving the conference with useful information that will help me in my life

1	2	3	4	5
1	2	11	20	24

I am excited to use what I learned at the conference when I get home

1	2	3	4	5
2	2	14	13	25

This event inspired me to be a leader

1	2	3	4	5
5	1	10	11	28

Overall I had a good time

1	2	3	4	5
1	1	4	12	38

I plan to tell other young adults about this conference so they can come next year

1	2	3	4	5
2	1	7	13	34

Welcome!

Vermont Youth in Transition Transition to Independence Process (TIP) System PART II

Tuesday, July 10, 2012

Goals:

1. Enhance competencies of people who have been using TIP practices.
2. Teach concepts and skills for prevention (crisis) planning and mediation.
3. Strengthen Community of Practice among programs becoming TIP-informed.

8:30	9:00	Sign-in & Continental Breakfast
9:00	9:15	Welcome, introductions Proposed agenda, logistics
9:15	10:30	Review and Feedback on TIP Core Practices
10:30	10:45	Break
10:45	12:00	SCORA – Mediation Method
12:00	1:00	Lunch
1:00	3:00	WHAT'S UP? – Prevention Planning (break included)
3:00	3:30	Wrap-up / Q&A
3:30	3:45	What is next and evaluation
3:45		Adjourn



Transition to Independence Process (TIP) World
Helping youth to prepare for their own living lives



VT TIP Training for July 11 and 12 at Holiday Inn, South Burlington
AGENDA FOR TRAINERS

Goals: As a result of attending this training participants will:

- a) Be familiar with evidence supporting the Transition to Independence Process (TIP) model.
- b) Gain understanding of the (TIP) model guidelines.
- c) Gain understanding of how to apply the guidelines via the seven core TIP practices.
- d) Begin using the TIP guidelines and practices.

	Wednesday July 11	Thursday July 12
7:30-8:00 a.m.	Trainers arrive early for Continental Breakfast – Willow Room	Trainers arrive early for Continental Breakfast – Willow Room
8-9:00 a.m.	NNYT consultation w/ VT Trainers	NNYT consultation w/ VT Trainers
9-9:30 a.m.	Sign-in and Continental Breakfast in the Willow Room	Sign-in and Continental Breakfast in the Willow Room
9:30 a.m. to Lunch	TIP training for audience in 2 teams*: 3 modules for this day: <ul style="list-style-type: none"> • Welcome (.25 hr.) • Overview (1 hr.) • Break (.25 hr.) • Strengths Discovery (1 hr.) 	TIP training for audience in 2 teams *: 3 modules for this day: <ul style="list-style-type: none"> • Welcome (.25 hr.) • In-Vivo Teaching (.75 hr.) • Break (.25 hr.) • SODAS (1.5 hr.)
Lunch	Willow Room – 12:00 to 12:45 p.m.	Willow Room - 12:15 to 1:00 p.m.
After lunch to 3:30 p.m.	<ul style="list-style-type: none"> • Futures Planning (1.75 hr.) • Break (.25 hr.) • Rationales (.75 hr) 	<ul style="list-style-type: none"> • .Case-Based Review (1.5 hr.) • Break (.25 hr.) • Wrap-up and Evaluation (.75 hr.)
3:30-3:45 p.m.	VT Trainers collect materials	VT Trainers collect materials
3:45-5:00 p.m.	NNYT consultation w/VT Trainers	NNYT consultation w/VT Trainers

*Two VT TIP Training Teams:

1). *With Coral Huntsman, in Willow Room (larger):* Karen Baker, Renee Kievit-Kylar, Diana Merrick, Matt Wolf.

2). *With Nichole Deschenes, in Maple Room (smaller):* Laura Flint, Jody Kamon, Justin Philie. [*Licensed Psychologists should be in this room for CEUs.*]

Poster Presentation for 25th Annual Children's Mental Health Research and Policy Conference (March, 2012)

Title: Using the Sequential Intercept Model to Examine Justice System Involvement for System of Care Youth

Authors: Jesse C. Suter, Jody Kamon, and Thomas Delaney

Abstract

The current study represents the first empirical examination of justice system involvement of system of care youth (16 to 22 years) using the sequential intercept model. Youth responses were used to determine their involvement at multiple sequential intercept points as well as their highest level of involvement. The most commonly endorsed categories were no involvement with the justice system and probation. Findings are discussed to identify possible predictors and explore the utility of this approach.

Introduction

One of the primary goals of Vermont's system of care for transition age youth (16 to 22 years) with serious emotional disturbance (SED) is to decrease their involvement in the juvenile and criminal justice systems. Most studies that have examined justice system involvement of youth with SED have defined involvement as (a) *any contact* with the police, courts, or correction (Cauffman et al., 2005; Foster et al., 2004) or (b) as *single types* of involvement such as police referral (Stoep et al., 1997), number of charges (Pullmann, 2009), or detention (Scott et al., 2002).

Recently, policy advocates have encouraged the field to consider the level of justice system involvement along a continuum. The *sequential intercept model* outlines several levels of justice involvement with each seen as an opportunity to intercept youth with SED and divert them to more supportive services (Munetz & Griffin, 2006). To our knowledge, the current study represents the first empirical examination of the sequential intercept model with system of care youth.

Method

Participants included 85 youth who completed the baseline interview (43 completed the 6-month follow-up). Mean age of participants at intake was 19.3 years ($SD = 1.4$), and most youth identified as male (49) and White (71).

Variables reflecting six points along a sequential intercept model were created based on whether or not youth reported involvement with the justice system over the previous six months in any of the following areas: (a) police contact, (b) arrested, (c) appeared in court, (d) convicted, (e) on probation, and (f) in detention.

We also created a *highest sequential intercept* (HSI) variable indicating each youth's highest level of justice involvement over the past six months ranging from 0 (*no involvement*) to 6 (*detention*). Finally, to examine movement along the sequential intercept model, we subtracted their 6-month HSI from their intake HSI to create a *sequential intercept change* (SIC) score.

Findings

As shown in Table 1, just over half ($n = 43$) of the youth reported some level of involvement with the justice system at intake. Except for probation, youth membership in the sequential intercept points followed a predictable progression: The most reported level was the first (police contact, $n = 28$), and the least reported was the last (detention, $n = 4$). Probation was the second most endorsed level ($n = 23$). Probation was also the highest level of justice involvement reported by youth (HSI) at intake ($n = 19$), followed by police contact ($n = 12$). Chi-square analyses revealed no age group (16 to 18 years vs. 18 to 22 years) or gender differences on endorsement of the separate intercept points or HSI at intake.

Examining responses from the subgroup with intake and 6-month data ($n = 43$) showed a similar pattern of involvement (Table 1). Despite a small drop in overall justice system involvement and a nearly 50% drop in the number of youth arrested, McNemar's tests revealed no significant differences between intake and 6-month follow-up reports of justice system involvement.

Most ($n = 30$) reported no change in their HSI from intake to 6-month follow-up ($M = 0.05$, $SD = 1.9$). The most common intercept categories to remain stable overtime were no involvement ($n = 20$) and probation ($n = 9$). Only 13 youth reported change on their HSI, and these were equally split between those moving to less (or no) justice system involvement ($n = 7$) and more ($n = 6$, with 4 moving to probation). These groups were too small to examine factors related to change on the sequential intercept points, and given the frequency with which youth reported involvement with probation we examined responses to probation-specific questions. Of the 12 youth receiving probation, 75% reported successfully following their probation agreements and 80% reported preventing additional involvement with the justice system.

Discussion

Despite the preliminary nature of these analyses they raise important considerations for the sequential intercept model. Most youth were at one of the highest sequential intercept points (probation) or lowest (no involvement at all), and did not show much movement. Youth receiving probation report it helped them avoid increased involvement with the justice system. This raises the question of whether probation is a positive strategy that should gain wider use, or if it represents a failure to meet the needs of youth with SED before they progressed through higher sequential intercepts. Next steps include (a) completing data collection to take advantage of the two years of longitudinal follow-up data, (b) linking youth status on the sequential intercept model to specific offenses so pathways can be examined over time, and (c) using established measures of strengths and functioning to predict involvement.

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