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Multi-Component Engagement Program: Considerations for Service Provision to Young Adults Early in Their Recovery

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May 22, 2019



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Acknowledgements



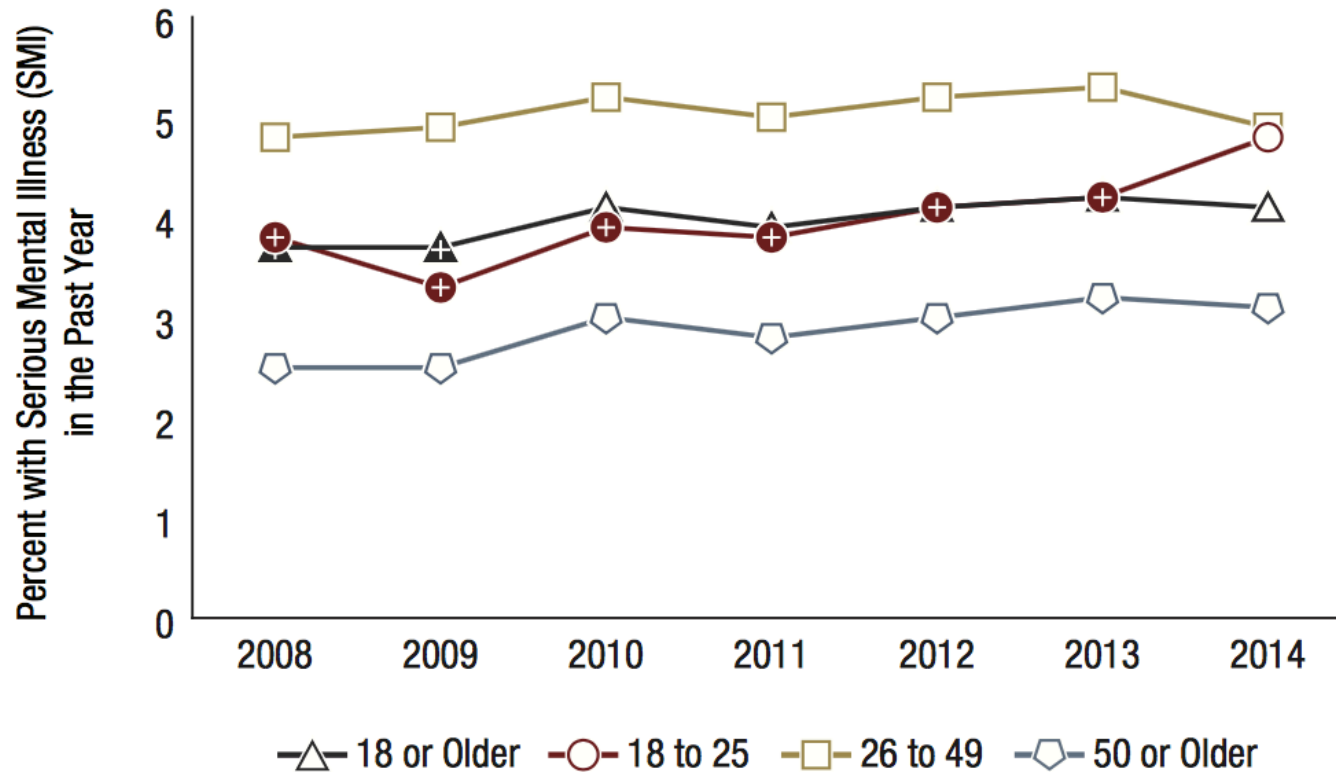
The mission of the Transitions to Adulthood Center for Research is to promote the full participation in socially valued roles of transition-age youth and young adults (ages 14-30) with serious mental health conditions. We use the tools of research and knowledge translation in partnership with this at risk population to achieve this mission. Visit us at: <http://www.umassmed.edu/TransitionsACR>

The contents of this presentation were developed with funding from the National Institute on Disability, Independent Living, and Rehabilitation Research, and the Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, United States' Department of Health and Human Services (NIDILRR grant number 90RT5031). NIDILRR is a Center within the Administration for Community Living (ACL), Department of Health and Human Services (HHS). The content of this presentation does not necessarily represent the policy of NIDILRR, ACL, HHS, and/or SAMHSA you should not assume endorsement by the Federal Government.



1. Young Adult Engagement (Need / Use Puzzle)
2. Mental Health Recovery and Resilience
3. Engagement program “Just Do You”
4. Current Trial of Just Do You in New York City
5. Take Home Points for assisting young adults in Recovery and Resilience

Figure 41. Serious Mental Illness in the Past Year among Adults Aged 18 or Older, by Age Group: Percentages, 2008-2014



+ Difference between this estimate and the 2014 estimate is statistically significant at the .05 level.



Received Mental Health Services in Past Year among Persons 18 or older with SMI

Demographic Characteristic	2014	2015	2016	2017
TOTAL	68.5	65.3	64.8	66.7
AGE GROUP				
18-25	53.9	50.7 ^a	51.5 ^a	57.4
26 or Older	71.5	68.4	68.1	69.5
26-49	66.2	66.1	66.1	66.2
50 or Older	79.2	72.2	71.5	75.6

Center for Behavioral Health Statistics and Quality, 2018



Mental Health Recovery

‘Mental health recovery **is a journey of healing and transformation** enabling a person with a mental health problem to live a meaningful life in a community of the person’s choice while striving to achieve his or her full potential’

(SAMHSA, 2006; As cited in Ellison et al., 2016)



Adm Policy Ment Health
DOI 10.1007/s10488-016-0767-9

ORIGINAL ARTICLE

Explication and Definition of Mental Health Recovery: A Systematic Review

**Marsha Langer Ellison^{1,4} · Lindsay K. Belanger² · Barbara L. Niles³ ·
Leigh C. Evans^{2,5} · Mark S. Bauer^{2,6}**

1. Individualized / person-centered treatment and services
2. Empowerment-focus
3. Purpose
4. Hope



Help-seeking is a learning process:

- 1) An important 1st step in improving mental health
- 2) The process of seeking out and utilizing social relationships, either formal or informal, to help with emerging problems,
- 3) A complex process involving awareness and appraisal of the problem, the ability to express the problem and need for support, relying on accessible and available sources of help, and a willingness to disclose relevant information.





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Young adult development and designing your intervention

Who am I?



Who am I with a mental health condition?





Connection



College



Employment



Brain Development

Reasoning

Planning and problem-solving

Self-control

Self-regulation

Thoughtful decisions

Delay gratification





Mental Health Interventions Must ...

- 1) Provide perceived rewards
- 2) Help youth become who they want
- 3) Enhance relationships
- 4) Be relevant for young adults



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History of Just Do You Program



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Making the Transition: Young Adults Mental Health Service Experiences



'got moods'

1. To *explore* service use experiences over the transition to adulthood
2. To *examine* if and *how* relationships influence service use? If so, how?
3. To *explore* how young adults understand their mental health and intervention experiences



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“got moods” methods



Study Recruitment:

- **Institutions and community locations**
- **Screened for study by trained research staff:**
 - 18-25
 - Community-dwelling
 - During childhood/adolescence:
 1. Documented mental health need
 2. Use of Medicaid-funded mental health care
 3. Use of public systems of care
 - Currently struggling with mood/emotional difficulties



Open-ended questions (also structured scales):

1. Service use experiences
2. Treatment experiences and preferences
3. Understanding of mental health experiences
4. Social support
5. Emerging Adulthood

Sample questions:

1. How has your life changed as far as dealing with your [_____] since turning 18?
2. Can you share an example of a service provider that was helpful to you? How about not helpful?

➤ **Extensive probes used to elicit additional information**

Age: 20.97 (2.09); **Gender:** 68% Female; **Race/Ethnicity:** 32% White, 68% YOC

Prior System Involvement: (Average # of SOC - 3 systems)

Public Mental Health	100%
Child Welfare	71%
Juvenile Justice	47%
Public Welfare	75%
Special Education	46%

Childhood history of mood disorder:

Depression 44%; Bipolar 32%; Both 23%

Currently struggling with mood/emotional difficulties - 100%

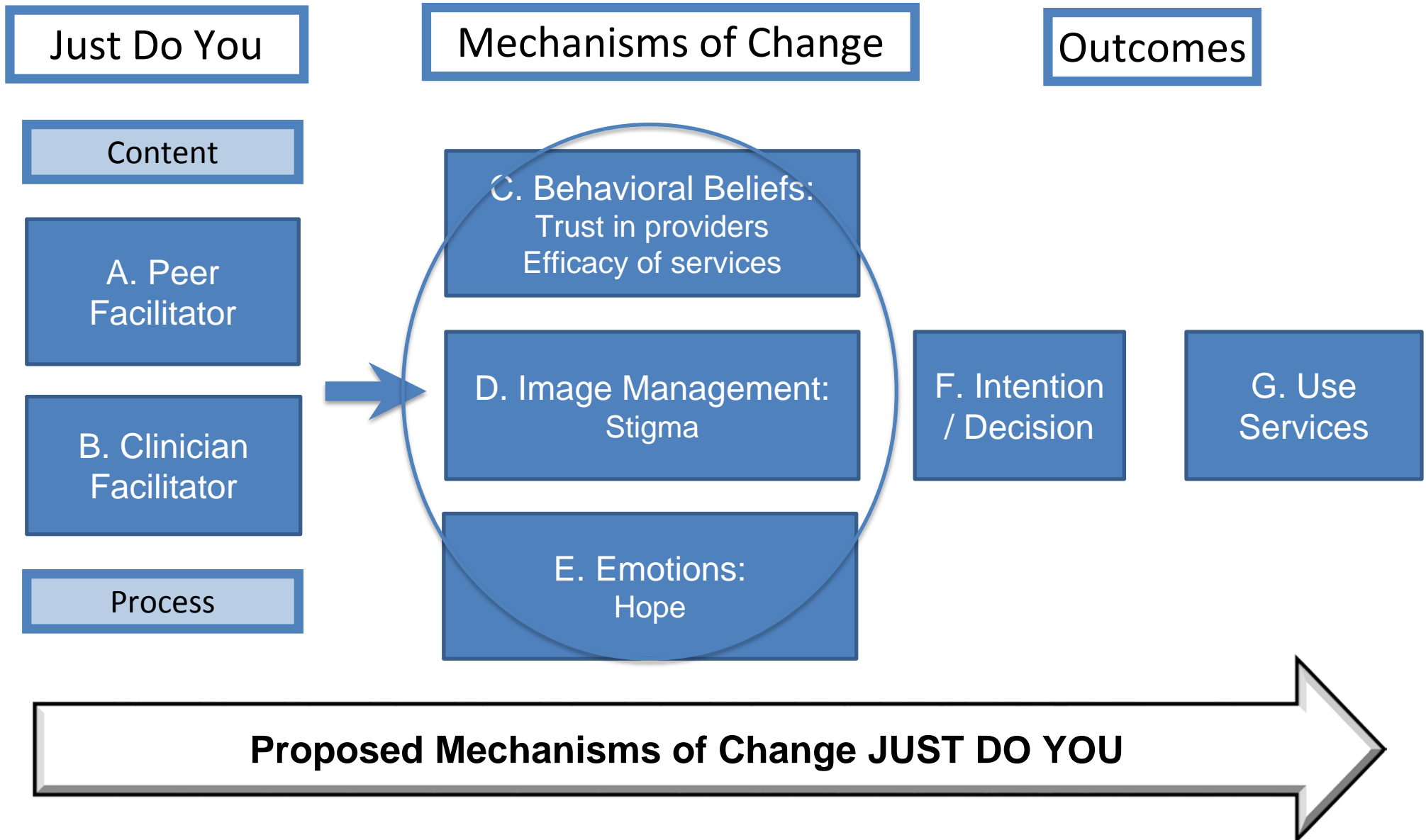
Currently depressed - 75% (n=45) (> or = 16, CES-D)

Back Door / Children's Services



Front Door of Adult Services





“Mental Health Conversations”

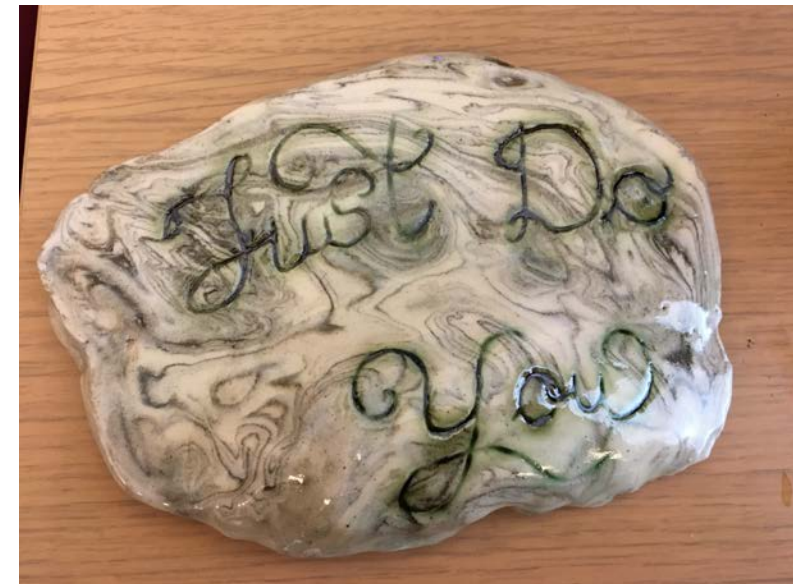
Narrative Communication (Stories)



Technology (Video-Clips)

Creative Arts

Music





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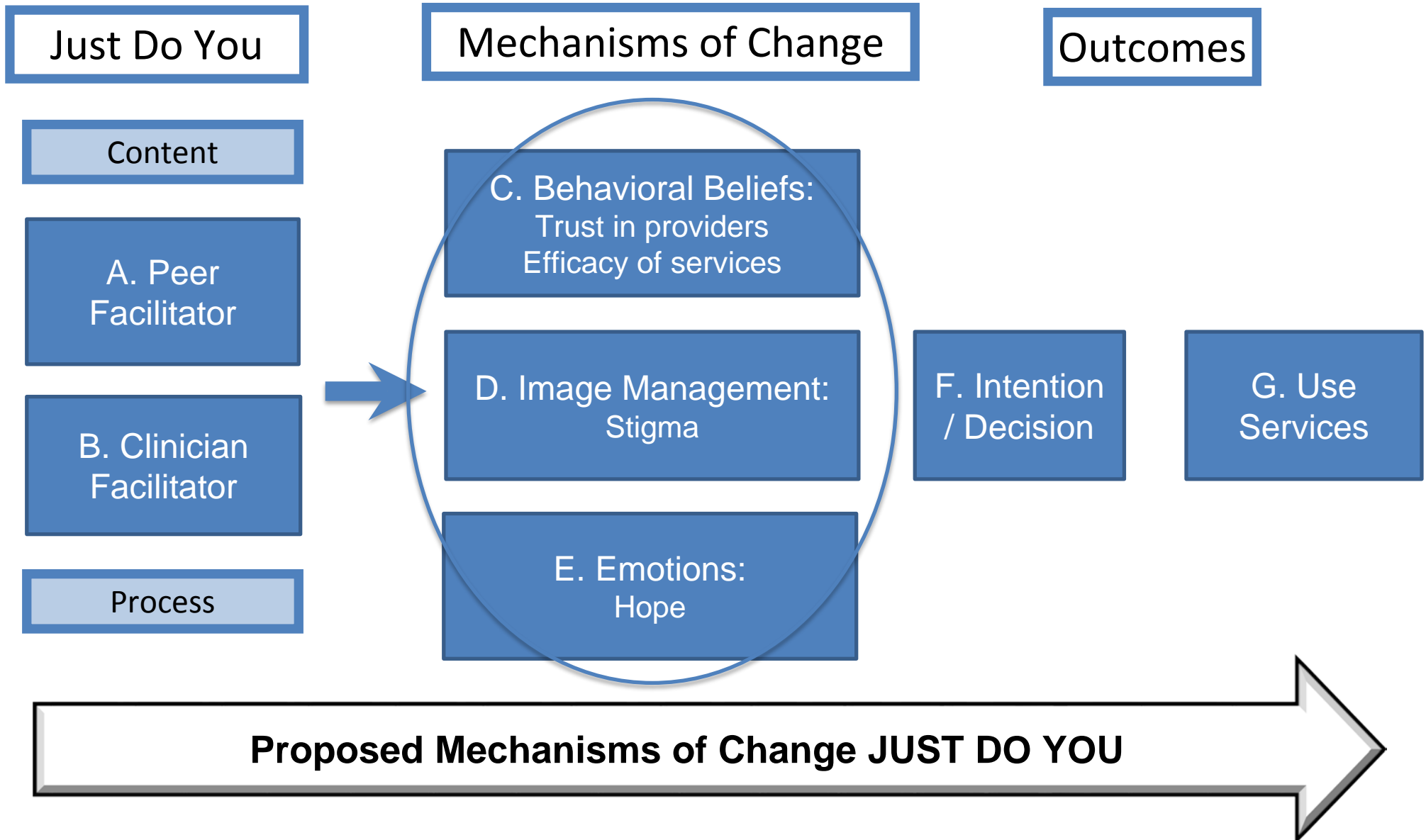
JUST DO YOU

An Orientation to Recovery from Mental Illness



1. Engagement Program delivered *during intake*
2. Aim: Formulate Belief that Services Can Help them Heal
3. Co-Facilitation Model (Clinician, Peer)
4. Use young adult modalities to communicate:
 - » Narrative communication in person
 - » Technology
 - » Creative arts
 - » Music







We focus on four critical areas: 1. Recovery, 2. Managing Stigma—or what others think, 3. Trust / Understanding Clinic Services, and 4. Hope.

1. **RECOVERY:** Recovering from mental health challenges is about ‘feeling better’. It includes what is important to you and most of the time it includes receiving counseling and sometimes medication.
2. **MANAGING STIGMA:** Mental health struggles can cause both other people in the community, and even ourselves sometimes, to think less of who we are. We want to talk about this, talk about ways to feel better about ourselves, and also develop strategies to manage this reality in the real world.
3. **TRUST / UNDERSTANDING CLINIC SERVICES:** Young adults need to understand clinic services. Sometimes services being offered do not feel helpful. We want to provide a time to recognize past experiences with services (both + and -), talk about how to build strong relationships with providers, and how to advocate for yourself when you feel things are not working. Beyond, trust, it is critical that you know how mental health services are intended to help you. We want to talk about services offered at the clinic and **how** they can be helpful to you so that you can feel better.
4. **HOPE:** A common difficulty in dealing with mental health challenges, especially as young adults, is the experience can feel like all your dreams are gone. Young people can **lose hope** and sometimes it feels like they may not be able to do what they thought they could do before they began having mental health challenges. Hope is so important, and we want you to know that you can feel better. We talk about this in the **Just Do You** group.



12 GUIDING PRINCIPLES OF RECOVERY

1. There are **many pathways** to recovery.
2. Recovery is **self-directed** and **empowering**.
3. Recovery involves a **personal recognition** of the need for change and transformation.
4. Recovery is **holistic**.
5. Recovery has **cultural dimensions**.
6. Recovery exists on a continuum of **improved health and wellness**.
7. Recovery emerges from **hope** and **gratitude**.
8. Recovery involves a process of **healing** and **self-redefinition**.
9. Recovery involves addressing **discrimination** and transcending **shame** and **stigma**.
10. Recovery is supported by **peers** and **allies**.
11. Recovery involves **(re)joining** and **(re)building** a life in the community.
12. Recovery is a **reality**.



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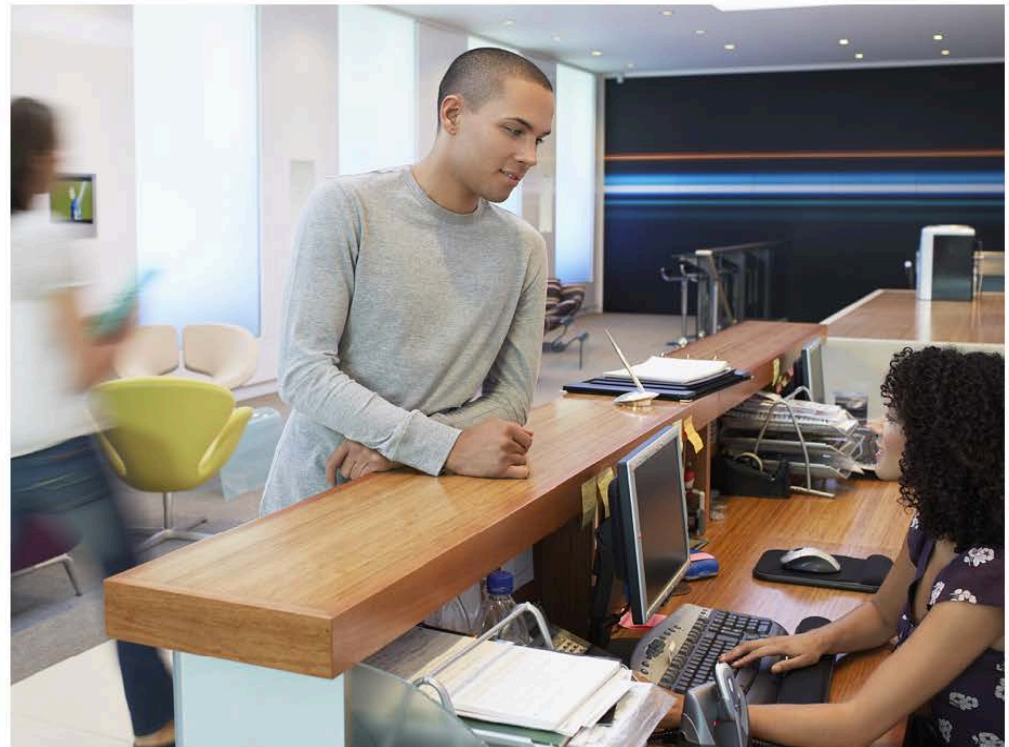


M1

TRUST, ACCESS, AND UNDERSTANDING YOUR CLINIC

We want to continue today by talking about two important concepts that are part of feeling better:

1. **TRUSTING** our mental health providers, and
2. **UNDERSTANDING** the services offered here at the clinic and what they can do for us.





“I do not trust that professionals want to help me”

“It was kind of rough at the beginning just because I don't really trust people”

“Yeah, but then she switched my case because she had overload... “So you're about to switch my case to somebody?” and I'm like, “But I don't trust everybody”



ACTIVITY 1: RECOVERY ROLE MODEL JOURNEY II

Today our **Recovery Role Model** (mentor)_____ will share some of his/her own experience(s) with developing trust, any process s/he went through in moving from mistrust to trust with a provider, what realizations s/he came to about working with a trustworthy provider. Our Recovery Role Model will also discuss times s/he had to advocate for him/herself to get the services s/he needed and how that occurred.

DISCUSSION:

Do any of these experiences sound familiar to you? In what ways do you trust or not trust your case workers, therapists, or psychiatrists? What would help you to trust them more? How important do you think trust is when getting these services?

LET'S GO OVER CHARACTERISTICS OF A TRUSTWORTHY PERSON:

1. They are consistent
2. They are reliable
3. They tell it like it is... **Group Additions and Discussion**



“Sometimes I feel like I’m the only one that really has these type of problems and issues, but in reality I know I’m not. It’s normal for some people to go through things like this, but I just feel just so less of myself if anyone was to know or to find out or just have any type of knowledge of what I’m going through.”

“It’s a bad label. People look at me ... They see what I’ve been through and they, they think of you a different way. They judge you.”

“Yeah, trying to avoid that minefield <services> at all costs ‘cause I don’t want nobody seeing me struggle”



For many, treatment, or receiving professional help, is an important part of recovery. Today our **Recovery Role Model**, who is a mentor who also lives with mental health challenges, and has received treatment to assist with his/her recovery, is going to share part of his/her **‘Recovery Journey’**.

RECOVERY ROLE MODEL – Discuss how you got to the point of attending your services and/or taking your medication(s), overcoming stigma, and hope.

We also have found that it can be helpful to know that ‘you are not alone’ in your recovery. Many folks, including celebrities, struggle with similar challenges. In the *Just Do You* group we will listen and watch others talk about their journey, and learn how they manage their emotions.

Narrative of Ron Artest <i>aka</i> Metta World Peace	Narrative of Clinician Choice of Video
<p>DISCUSS:</p> <ol style="list-style-type: none"> 1. General Reactions 2. Help-Seeking Attitudes 3. Stigma 4. Goals 	



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“Services are pointless”

“I can get help on the streets”



To get started, we are going to talk about ‘connections’ connections between what goes on outside, how you think about it, how you feel about it and what you do about it ... Again, there are five parts:

(Use Flip-Chart, Erase Board, Note Pad)

1. What goes on outside in the world (What is a situation going on in your life that is challenging for you to deal with day to day?)
2. Immediate thoughts you have about the situation, or when you are in the situation
3. How do those thoughts make you feel (about yourself, others, the world)?
4. What do you do when you think and feel that way...?
5. Are those thoughts based in what is real/truth?

What is interesting...is that folks have found there are important connections between these parts of our lives...

So let's look a bit closer!



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Half of Us - Mary J. Blige

Mary J Blige



M1

Another celebrity who struggles with mood and emotional challenges is **Mary J. Blige**.

In this clip, let's focus on the **connections** she makes between her situations, thought, feelings, and actions.

Narrative of Mary J. Blige

(Focusing on thoughts she has about herself)

In this case – we hear Mary talking about...

- **Situation:** Successful artist, touring, busy
- **Thoughts:** I hate myself, people find me unlovable
- **Feelings:** Depressed, sadness
- **Actions:** Substance use, staying in unhealthy relationships
- **Check the Evidence:** Learns her thoughts not based in reality

Narrative of Clinician Choice of Video



**“The hopelessness part, I guess. The
‘What’s the point?’ (in getting services)**

“I feel hopeless”



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M2

PROCESSING PAST, HOPE, AND RECOVERY

Good afternoon. We are so glad to see you back at the *Just Do You* group.

Today we are going to take some time to talk about the frustrations and injustices that have happened to us (or important people in our lives). Many injustices make it harder to live with mental health challenges, such as poverty, violence and discrimination. ~~Poverty, violence and discrimination are hard for everyone to deal with in life.~~

Today we are going to work together to recognize some of the barriers we may have to feeling hopeful about the future and also recognize that we have (or can) moved beyond some of these difficulties, even if it is a 'work in progress'. We are each '**doing ourselves**' the best way we can.



3. **Choose one of the songs we watched that particularly spoke to you and your feelings of hope about your future. Review and respond to the lyrics, images, and symbols from that song.**

Use your note/sketchpad to create an image, write down some reflections about this, a response poem or lyrics, or even some specific ideas for how to move forward from some of the challenges the songs describe. You can also tell us about a song that inspires you and gives you strength when you are struggling.

1. **Andra Day – “Rise Up”** https://www.youtube.com/watch?v=lwgr_IMeEgA
2. **Demi Lovato – “Warrior”** <https://www.youtube.com/watch?v=74aOxH4R5Ow>
3. **Logic & Alissia Cara – “1-800”** <https://www.youtube.com/watch?v=Kb24RrHlbFk>
4. **Professor Green & Tori Kelly – “Lullaby”** <https://www.youtube.com/watch?v=9rHiLAdMmss>
5. **Kendrick Lamar – “I”** <https://www.youtube.com/watch?v=8aShfolR6w8>
6. **Kesha – “Praying”** <https://www.youtube.com/watch?v=v-Dur3uXXCQ>
7. **Nas (featuring Tupac) – “Thugz Mansion”**



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I've been on the low
I been taking my time
I feel like I'm out of my mind
It feel like my life ain't mine
Who can relate?

~~I've been on the low~~
I been taking my time
I feel like I'm out of my mind
It feel like my life ain't mine

I want you to be alive
I want you to be alive
You don't gotta die today
You don't gotta die
I want you to be alive
I want you to be alive
You don't gotta die
Now lemme tell you why



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[Demi Lovato - Warrior \(Official Video\) - YouTube](#)



'Cause all the pain and the truth

I wear like a battle wound

So ashamed, so confused

I'm not broken or bruised

'Cause now I'm a warrior

Now I've got thicker skin

I'm a warrior

I'm stronger than I've ever been

And my armor, is made of steel, you can't get in

I'm a warrior

And you can never hurt me

There's a part of me I can't get back

A little girl grew up too fast

All it took was once, I'll never be the same

Now I'm taking back my life today

Nothing left that you can say

'Cause you were never gonna take the blame anyway



Art is a powerful tool that can be used to harness your imagination and picture something that does not yet exist, and start to make it possible.

Being able to visualize our goals can help us get closer to them, by allowing us to anticipate the steps needed to get from point A to point B.

Images can also be found in music and poetry. So if art is not your thing, we will offer you a different way to help you imagine where you would like your story to go. The creative activities we will do today were developed with the help of a **Creative Arts Therapist.** Creative arts therapists specialize in

using creativity in your therapy to help make therapy more effective and more enjoyable. Sometimes the beauty of art can give inspiration and make the painful feelings that come up in therapy easier to manage. So if you feel that art or music may be helpful tools for you, please make sure to discuss this with your therapist here at PROS.





Using your art toolkit, create an image of something or someone that inspires you and helps you keep going when times are tough.

This image can be literal, which means it can represent actual people, places or things; or it can be abstract, which means you can use shapes and colors, or symbols to express your idea. As you create your image, try to notice how you are feeling. If you get stuck somewhere, or frustrated, just take notice and then keep going and see where it goes. And remember, there is no wrong way to do this. If it feels hard, think of it as one small challenge you are brave enough to take, so you can learn to face bigger ones in your future. You can also write poetry, lyrics to a rap or song, or sit quietly and reflect.

You will have about 20-30 minutes to complete your 'image.' When you are done, you will have the opportunity to share your image with others, and receive questions or comments from the group. **Sharing, however, is not required!** While you are working, try to notice what you are thinking and feeling. Notice if you start to relax, or feel tense, or get bored, or get really into a zone.



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**Pass on to
Others What
You've Learned
and 'Do You'!**



Aim 1: To develop and preliminarily test the efficacy of a novel, 2-session engagement meta-intervention aimed at engagement and functioning outcomes for marginalized young adults with serious mental illness.

Aim 2: To preliminarily identify the underlying *mechanisms of change* for disengagement in mental health care, i.e., mediators and moderators of intervention effectiveness. We will advance theory as well as strengthen the proposed intervention.

1. Randomized Control Trial

2. Two-Arms:

- » Just Do You
- » Intake as Usual

3. Recruitment: 195 young adults with SMI

4. Main outcomes:

- » Adherence to overall program; therapy appointments and medications
- » Level of engagement in program
- » Mental health symptoms and functioning outcomes
- » Mediators: Trust, belief that services can help; stigma; hope

Mean Age – 26.19

67% male (33% female)

How do you describe yourself in terms of your race/ethnicity:

- 43% African-American / Black
- 30% Latino or Hispanic
- 18% Bi- or Multi-racial
- 6% White
- 2% Asian



Primary diagnoses

- 65% schizophrenia-spectrum,
- 31% bipolar disorder
- 3% depression
- 2% anxiety

Receiving services from public systems of care:

- Social security insurance (61%)
- Medicaid (85%)

Have you even been hospitalized for mental health? 91%

Have you ever been homeless? 34%



1. Increased *level* of engagement in PROS ($t=2.03$, $p<.05$)

Sample question: “I am fully invested in making use of the services the PROS program is providing me.”

2. Increased *adherence to treatment* ($t=2.77$, $p<.01$)

Sample question: “In the past week, how often have you gone to Personalized Recovery-Oriented Services?”

3. Increased *trust* trending toward significance ($p<.15$)

Sample question: “I trust that the mental health care staff here are sincerely working to improve my mental health.”



1. Young adults entering adult programs need opportunities to talk (and listen) to others about how they are feeling in adult settings, especially early on ...
2. Waitlists can lead to disengagement
3. Common thoughts and emotions impact (dis)engagement and need to be addressed through conversations
4. Must keep young adults interested w/ intervention strategies and communication tools that are relevant

Comments & Questions



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