



Northwest (HHS Region 10)

MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

Advanced Topics in Strengthening Youth/ Young Adult Peer Support *Working with Parents and Caregivers* *June 24, 2021*

In collaboration with Pathways Research and Training Center

SAMHSA
Substance Abuse and Mental Health
Services Administration



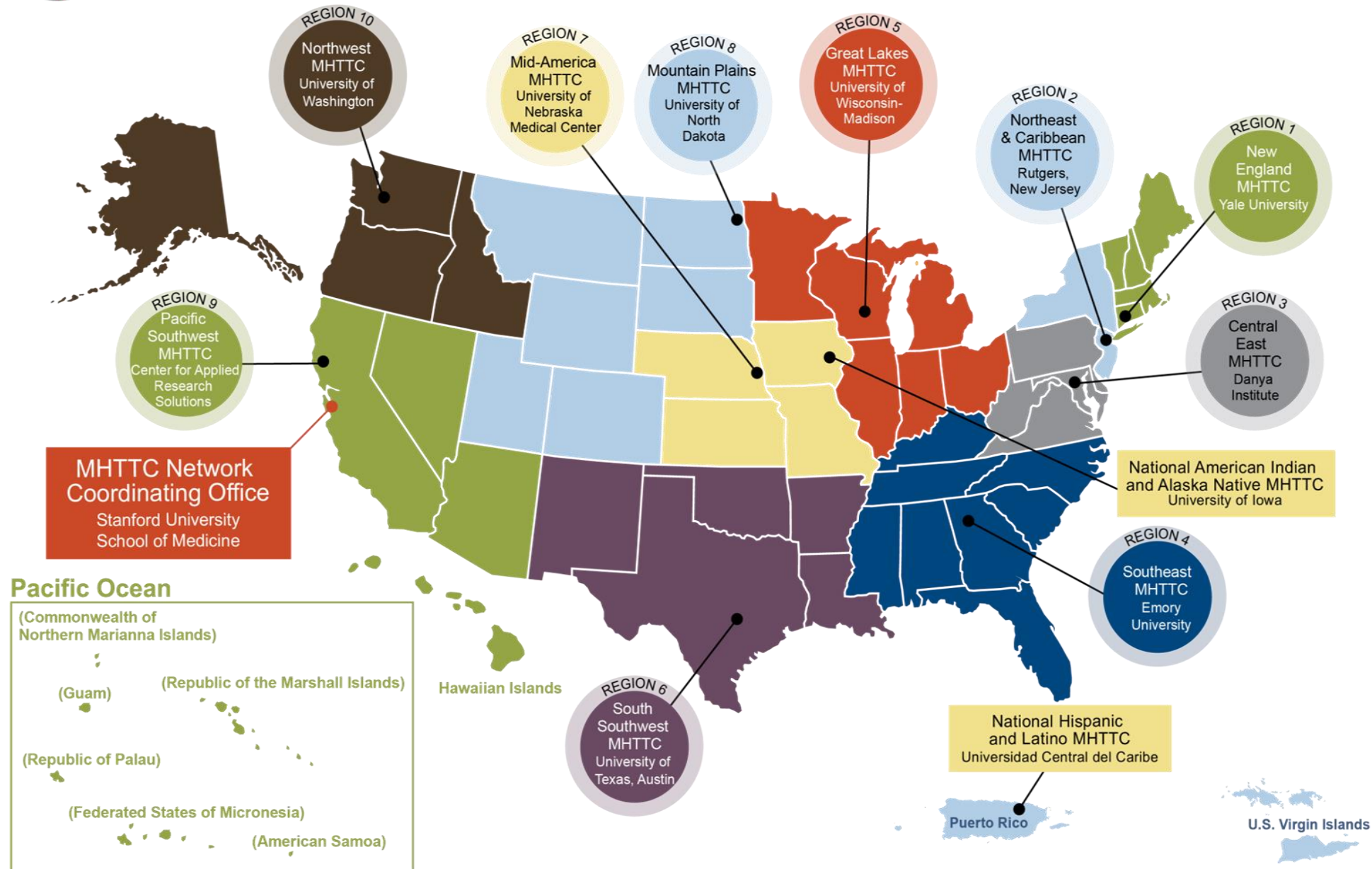


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MHTTC Network



About the Northwest MHTTC



Lydia Chwastiak, MD, MPH
PI and Co-Director



Christina Clayton, LICSW, CDP
Co-Director

The Mental Health Technology Transfer Center (MHTTC) Network is about technology transfer.

We disseminate and implement evidence-based practices for mental disorders into our field.

Our target workforce includes:

behavioral health and primary care providers, school and social service staff, and others whose work has the potential to improve behavioral health outcomes for individuals with or at risk of developing serious mental illnesses.

PROUDLY SERVING
ALASKA, IDAHO, OREGON & WASHINGTON



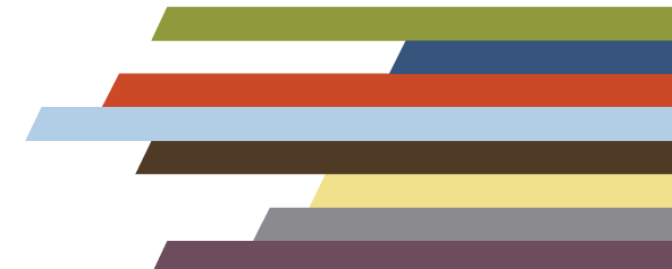
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W UNIVERSITY of WASHINGTON
PSYCHIATRY & BEHAVIORAL SCIENCES
School of Medicine

SAMHSA
Substance Abuse and Mental Health
Services Administration



Northwest Mental Health Technology Transfer Center

Our Role:

Provide training and technical assistance (TA) in evidence-based practices (EBPs) to behavioral health and primary care providers, and school and social service staff whose work has the potential to improve behavioral health outcomes for individuals with or at risk of developing serious mental illness in SAMHSA's Region 10 (Alaska, Idaho, Oregon, and Washington).

Our Goals:

- Accelerate the adoption and implementation of mental health related evidence-based practices including area of focus (EBPs for serious mental health issues) across Region 10
- Heighten the awareness, knowledge, and skills of the workforce that addresses the needs of individuals with serious mental health issues in Region 10
- Foster alliances among culturally diverse practitioners, researchers, policy makers, family members, and consumers of mental health services
- Ensure the availability and delivery of publicly available, free of charge, training and technical assistance to the mental health workforce in Region 10



About the Northwest MHTTC

Online Courses

Northwest (HHS Region 10) MHTTC Mental Health Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

YOUR MHTTC TRAINING AND EVENTS RESOURCES PROJECTS COMMUNICATION ABOUT

NORTHWEST MHTTC NAVIGATION (select to expand / collapse menu) Go to Center

Free online courses by the Northwest MHTTC

Cognitive Behavioral Therapy for Psychosis (CBTp) ePrimer
This 3-hour self-paced course, led by Dr. Sarah Kopelowich, is open to all types of providers and is designed to serve as a primer in foundational concepts related to Cognitive Behavioral Therapy (CBT) and its application to psychotic symptoms and experiences. [Learn more about the course.](#)

The Psychiatrist's Guide to Population Management of Diabetes
This 3-hour self-paced course is designed for psychiatric prescribers who treat patients with serious mental illness and aims to increase prescriber knowledge of and confidence in the identification and management of diabetes and other cardiovascular risk factors. [Learn more about the course.](#)

Violence Risk Assessment & Management in Community Mental Health Settings
This 3-hour self-paced course provides the necessary tools for clinicians to assess, manage, and stabilize threats of violence. [Learn more about the course.](#)

Registration
Our online courses are hosted on the HealthKnowledge.org platform. Register for any of these courses by visiting the links above or at HealthKnowledge.org.
• [How to register for a course at HealthKnowledge.org](#) and [how to get technical support](#)

Website with Events, Products & News

NEWS

Recovery LIVE! Supporting the Resilience of Black Men: Culturally Affirming and...

UPCOMING EVENTS

JUN 09 DBT STEPS-A Online Lesson 10: Distress Tolerance - Radical Acceptance
Click here to tune into the DBT STEPS-A YouTube Channel every Tuesday and Thursday morning at 10am

JUN 11 DBT STEPS-A: Summary Q&A for Students - Putting It All Together & Preparing for Summer
Click here to tune into the DBT STEPS-A YouTube Channel every Tuesday and Thursday morning at 10am

JUN 11 Resources for Supporting the Mental Health and Well-being of Children and Families During COVID-19
Resources for Supporting the Mental Health and Well-being of Children and Families During COVID-19

View All

PRODUCTS

Educator Wellness Webinar #4: Cultivating a Practice of Gratitude and Appreciation in Your School Community
The Northwest Mental Health Technology Transfer Center and the Northwest PBIS Network are collaborating to bring you a FREE, 4-part webinar

Ambiguous Loss: Grieving in the Time of COVID-19, Followed by Live Q&A Session
About this Resource: Life, as we knew it just a few weeks ago, has been completely turned upside down. That feeling you are feeling but can't...

SMART Center 2020 Virtual Speaker Series - Dan Losen, JD, MEd
The school mental health supplement to the Northwest MHTTC is excited to co-sponsor the UW SMART Center's 2020 Virtual Speaker Series.

View All

Live Training

Psychological First Aid for Service Providers

1:00pm - May 19, 2020 | Timezone: US/Pacific
Hosted By: Northwest MHTTC

Registration Deadline: May 18, 2020

REGISTER Need more information? Contact us at mhmttc@uw.edu

Archived Webinars

Our Archived Webinars

First Practice Crisis Response: Comprehensive System Getting Help

Series Collections

- Integrated Care Webinar Series 2019-2020
- Supporting Wa State Behavioral Health Providers to Optimize Telehealth in Response to COVID-19
- Behavioral Health Crisis Response Systems Webinar Series
- Psychological First Aid Webinar Series

Behavioral Therapy/Evidence Based Treatments

- Clinical Innovations National Series: Telehealth and Cognitive Behavioral Therapy for Psychosis (CBTp)
- Involving Natural Supports in Cognitive Behavioral Therapy for Psychosis
- Basic Behavioral Skills
- Behavioral Activation
- CBT for Anxiety (CBT-A)
- DBT Distress Tolerance Skills

Cultural Considerations and Equity Topics

- Culturally and Linguistically Responsive Care for Early Psychosis

Integrated Medicine

- Psychosis in Primary Care (PACC-ECHO)
- Assessment of Psychosis and Behavioral Interventions
- Medication Management

Clinical Care

- Trauma and Post-Traumatic Stress Disorder with Serious Mental Illness
- Overview of Clinical Sociology Theories, Assessment, Interventions, and Treatments

Peer Services

- Peer Delivered Services: A Broad Exploration
- Decision Making in Your Agency: What is Considered When Working with Youth Peers
- The Parallel Process: Trauma Informed Considerations for Individuals and Organizations
- Retaining and Growing the Youth Peer Support Workforce
- Recruitment and Hiring for Youth Peer Support Specialists
- Supervision and Self-care for Youth Peer Support Specialists

Research/Practice Briefs

Integrated Care for Older Adults with Serious Mental Illness and Medical Comorbidity: Evidence-Based Models and Future Research Directions

Collaborating TTC: Northwest MHTTC
Publication Date: May 29, 2019
Developed By: Northwest MHTTC

DOWNLOAD

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PSYCHIATRY & BEHAVIORAL SCIENCES
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The MHTTC Network uses affirming, respectful and recovery-oriented language in all activities. That language is:

STRENGTHS-BASED
AND HOPEFUL

INCLUSIVE AND
ACCEPTING OF
DIVERSE CULTURES,
GENDERS,
PERSPECTIVES,
AND EXPERIENCES

HEALING-CENTERED/
TRAUMA-RESPONSIVE

INVITING TO INDIVIDUALS
PARTICIPATING IN THEIR
OWN JOURNEYS

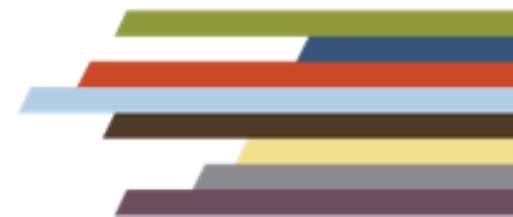
PERSON-FIRST AND
FREE OF LABELS

NON-JUDGMENTAL AND
AVOIDING ASSUMPTIONS

RESPECTFUL, CLEAR
AND UNDERSTANDABLE

CONSISTENT WITH
OUR ACTIONS,
POLICIES, AND PRODUCTS

Adapted from: https://mhcc.org.au/wp-content/uploads/2019/08/Recovery-Oriented-Language-Guide_2019ed_v1_20190809-Web.pdf



Introductions





Pathways Research and Training Center



PORTLAND, OREGON

Research, training and dissemination focused on improving outcomes for youth and young adults who experience serious mental health conditions

www.pathwaysrtc.pdx.edu

Agenda

Poll

- What is your role?

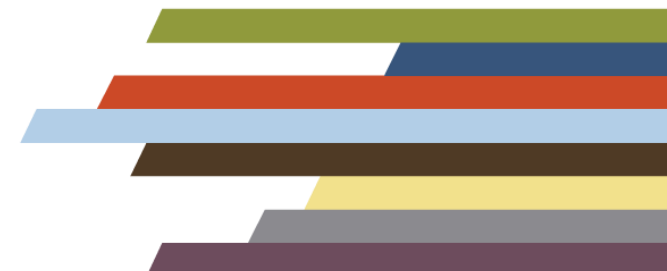


Discussion

- What are some common challenges youth peer support specialists face when working with parents or caregivers?

Common Challenges

- Misconceptions about the role of the youth peer support specialists
- Worries about youth having more power in their mental health treatment plans
- Concerns about the youth peer support specialist's lived experience



Common Misconceptions

...Tell them what to do

YPSSs are charged with helping youth make decisions for themselves by helping them identify their goals and strategies for achieving them. The YPSS should not make suggestions or be discouraging regarding a young person's goals or ideas. It is also not the YPSS's job to persuade the young person to do what the adults in their life want them to do; rather they should assist the young person in talking to the people in their social network about the goals that are important to them.



...Police them

YPSSs are agents of hope who help youth build skills by affirming their voice, helping them identify goals, and working with them to come up with plans to achieve their goals. None of this is accomplished through disciplinary, coercive, or shaming strategies. Sometimes, adults involved in a young person's life will want the YPSS to change the youth's behavior or report on what the youth is doing, which is not the YPSSs' role.



Common Misconceptions

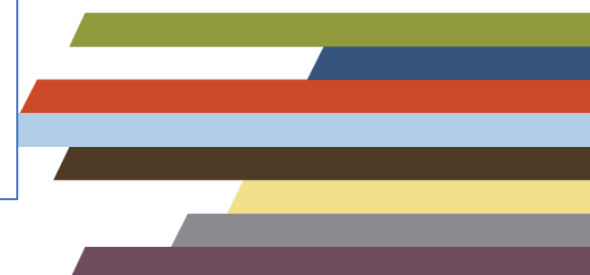
...Be their chauffeur

YPSSs work in the community with young people, and often are present when a young person has a meeting or an important event. While there may be times when YPSSs drive young people, they should not be expected to be their primary source of transportation to meetings, groups, one-on-one visits, etc. Instead, the YPSS should explore transportation options with the youth and make sure they have plans to get to places they need to go.



...Be their babysitter

Often times adults involved in a young person's life will want their YPSS to "watch" them during unsupervised time. It is important for the YPSS to clarify that while they spend one-on-one time with youth, it is not within their role to monitor or discipline them. Other providers would not be asked to babysit youth, and neither should YPSSs.



Tips for Working with Parents and Caregivers

- Explain your role from the start
 - It is helpful to bring a tool that explains your role and have an elevator speech prepared
- Clarify confidentiality
 - Explain that you will not share everything you and the youth talk about, but that you are a mandatory reporter
- Engage!
 - It's okay to have a working relationship with parents – just maintain boundaries

Scenarios

- You are working with a youth who enjoys reading Manga, and you two check out some Manga books at the local library. When you drop the youth off at home, her foster parent tells you that she is not allowed to read Manga and that you should not have let her check the books out at the library. How would you address this situation?

Scenarios

- You are a youth peer support specialist who works at a youth drop in center. One afternoon, a parent shows up and is looking for their child. You explain that the youth is not there, and they insist on waiting in the center. This is clearly making the other youth uncomfortable. How do you address this situation?

Scenarios

- A mother of a youth you are working with calls you frequently to complain about the youth's behavior. They also often request that you share what you and the youth discuss during your one-on-one meetings. How do you address this situation?

Resources

What Is Peer Support and What Is NOT Peer Support?



What's a Youth Peer Support Specialist?

A youth peer support specialist (YPSS) works with young people transitioning to adulthood, who are usually involved in a child-serving system (e.g., foster care, mental health) or experiencing a unique challenge. YPSSs are typically close in age with the young people they work with. YPSSs use their own lived experience with mental health and child-serving systems to relate and engage with the youth they serve. In their work together, YPSSs help youth to identify goals and advocate for themselves. YPSSs achieve this through the following strategies:



Building Hope

YPSSs use their lived experience to relate to the young people they are working with and show them that there is hope for a brighter future, even if things seem bleak in the present. Lived experience refers to a person's journey through a system, trauma, or unique challenge that a young person might relate to. The purpose of sharing one's lived experience is to empathize, relate, and inspire hope. When talking about their lived experience, YPSSs are very intentional about how and what they share (see strategic sharing definition on the next page) so as to not discourage, overshadow, or mislead a young person. It is also important for the YPSS to remember that they are not a superhero, and are not expected to be a perfect role model or example of "what to do" for a young person. Rather, the YPSS can normalize feelings, thoughts, or situations that the young person might be experiencing, so the young person feels less alone or alienated by what they might be going through or experiencing.



Peer Practice Brief: How Youth Partners Can Collaborate with Family Partners in Wraparound

Youth partners and family partners each have key roles on Wraparound teams, and they work with each other as well as with care coordinators, other team members, and, of course, family members and young people. Their roles are similar in function but separate in practice, as the family partner is a designated peer support specialist for the family member and the youth partner is a designated peer support specialist for the youth participating in the Wraparound process. It is crucial that these supports work with each other — as well as with the other members of the team, the youth, and the family — to achieve successful

outcomes. In this Peer Practice Brief, we will describe how family partners and youth partners can collaborate in a synergistic way, some common challenges they might face, and how these challenges can be addressed. We will also provide scenarios along with discussion questions to help you consider how these collaborations and challenges might play out with real youth and family, and their unique strengths and needs. The accompanying Study Guide provides answers to these questions that you can use to guide individual or group supervision, coaching, or training.

KEYS TO SUCCESSFUL COLLABORATION:

1. Clarify the Role

To successfully collaborate with other providers, youth, and family members, it is important that youth partners (and family partners) clearly explain their role at the start of the Wraparound process, and that they clarify their role as challenges arise. Youth partners should emphasize from the beginning that they are tasked with helping the youth advocate for themselves and bring their voice into the planning process, even when the youth's perspectives and ideas may clash with those of their parent(s) and/or other team members. The youth partner also should be clear about what they will and will not be sharing with the youth's parent and the team — for example, most conversations concerning personal subjects and goals would remain confidential between the young person and their youth partner, but issues of safety likely would need to be brought to the attention of the team. It also is important that the youth partner explain to the young person and their parent that they are mandatory reporters and have received specific training and certification for their role.

2. Keep It Confidential:

Sometimes, it may be valuable for the youth partner to share the youth's perspective on particular goals, circumstances, crisis events, etc., with the family partner on

their Wraparound team. While this kind of collaboration can lead to solutions — like the discovery of natural supports, ideas for crisis plans, and common ground the youth and parent may share — it is crucial that at no point is the youth partner sharing confidential information about the youth with the family partner. If the youth partner feels that it would be beneficial to share information with the family partner, they should explain to the youth exactly what they want to share and why they want to share it, and make sure that the youth is comfortable with this plan before moving forward.

“To successfully collaborate with other providers, youth, and family members, it is important that youth partners (and family partners) clearly explain their role at the start of the Wraparound process, and that they clarify their role as challenges arise.”

3. Promote Positive/Proactive Communication:

Sometimes, a young person might do, or plan to do, something that is contrary to their parent's wishes. When this happens, the youth partner can help pre-empt conflict by exploring consequences with the young person and

Questions?



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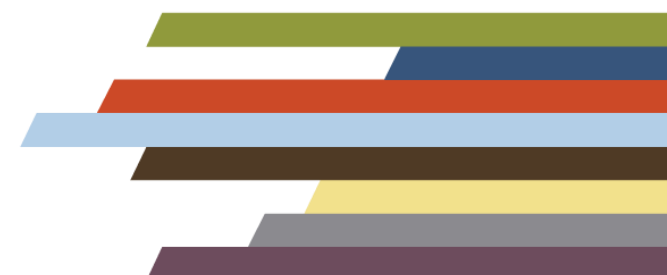
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After today's session, please complete the evaluation survey

- Will be shared in the chat box
- Helps our team plan future sessions as well as evaluate today's session

➤ *There will NOT be certificates or CEUs offered for today's session*

www.mhttcnetwork.org/northwest



Your Feedback is Important:

Post-event surveys are *critical* to our work!

- Please complete the confidential evaluation by following the link that will be emailed to you.
- Evaluation data is necessary for continued funding to offer programs

Your feedback helps us to improve and develop future programming.

We greatly appreciate your feedback!

Please complete the survey below.

Thank you!

Page 1 of 3

Participants - Please Write Your Unique Personal Code Here as Follows:

1) First Letter of Mother's First Name
2) First Letter of Mother's Maiden Name
3) First Digit of Social Security Number
4) Last Digit of Social Security Number
** must provide value*

Please select the date of the meeting you attended.

** must provide value*

What U.S. state or territory do you live in?

** must provide value*

Burden Statement: This information is being collected to assist the Substance Abuse and Mental Health Services Administration (SAMHSA) for the purpose of program monitoring of the Technology Transfer Centers (TTC) Network Program. This voluntary information collected will be used at an aggregate level to determine the reach, consistency, and quality of the TTC Program. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid Office of Management and Budget (OMB) control number. The OMB control number for this project is 0930-0383. Public reporting burden for this collection of information is estimated to average less than 10 minutes per encounter, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to SAMHSA Reports Clearance Officer, 5600 Fishers Ln, Room 15 E57B, Rockville, MD 20857.

What is your gender?

Female
 Male
 Transgender
 None of these

reset

What is your race? (Select one or more):

American Indian or Alaska Native
 Asian
 Black or African American
 Hispanic or Latino
 Native Hawaiian or Other Pacific Islander
 White

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Upcoming training

New online training

Resources & Research Updates



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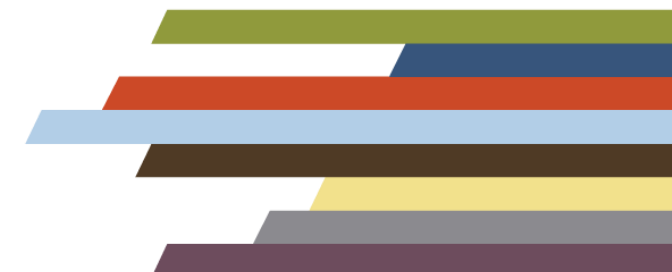
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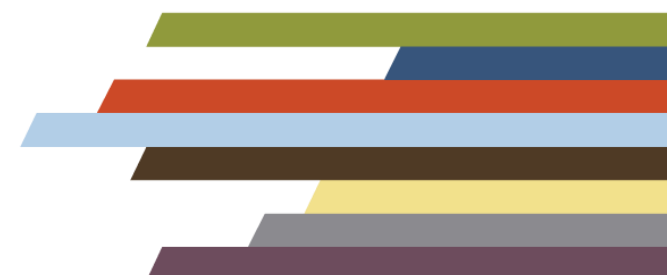
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Support and Disclaimer

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Thank You!



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