

## WHAT AN HONOR . . . ONE YOUTH IN TRANSITION

It seems that the biggest challenge in doing this thing called "wraparound" with youth and their families is this: how to facilitate a transition from a reliance on formal supports, such as paid mentoring and therapeutic services, to more informal or natural supports, such as a family friend that enjoys spending time with a youth on a consistent basis. It takes teamwork and flexible, out-ofthe-box thinking to address the multifaceted needs of youth so as to make this transition successful.

The Clackamas Partnership Program has the honor of working with youth with serious emotional disorders who have received help from traditional systems and who require customized services to support transition to an independent young adult life. The following story, about a young woman named "Megan," describes one such situation.

When Megan was 16, she had just completed an acute hospital stay and was in the process of returning to a foster family. The foster family was committed to her, but Megan was uncertain whether she would be able to remain in their home. There was a significant need to support her and the family in maintaining this placement. The wraparound care coordinator organized a child and family team, which consisted of Megan, the foster family, a child welfare caseworker, Megan's therapist, the care coordinator, and a contracted behavioral skills specialist (a mentor).

The child welfare caseworker and the mentor began with the stabilization phase. They arrived in the home every morning at 7:00 a.m. to help Megan get ready for school. In the process, they served as role models for the family, demonstrating how successful results would occur when Megan's needs and strengths were supported. The mentor provided additional support in the home every afternoon for the first two weeks, but the visits soon decreased to three times a week. Within three weeks, Megan was back into a routine, and the intensive services were decreased. The plan had proven successful. The behavioral skills specialist provided home and community-based services for approximately 5–8 hours per week for one year. During this time, Megan transferred to a more therapeutically-based school, and she continued to show great progress. In the past year, Megan has been involved in Tae Kwon Do classes and a church youth group. She is currently part of the Youth Leadership Council, which is becoming very active in our local community. The transition to these more natural supports occurred easily because of Megan's strengths and because of the commitment from the foster family to support and build on those strengths.

As Megan's care coordinator, it has been an honor for me to be part of her team and to see both her progress and her potential. Through a grant from the Center for Mental Health Services and local contributions from Clackamas County Mental Health and community partner agencies, a System of Care is being built in Clackamas County, Oregon that will sustain this approach to supporting youth with mental health challenges and their families. By using a strength-based, youth-focused, and family-focused approach, and by incorporating more natural and informal activities into this young woman's life, both she and the family have benefited. By the end of 2001, Megan had fully transitioned back into public high school. She will continue to be an active participant in the Youth Leadership Council, and she hopes to be able to run track this spring. The formal supports will continue to decrease as times goes on, with the eventual goal that natural supports will outnumber formal ones. There is still work to be done, but if the last year is any indication of what is to come, we are truly on the road to success.

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