



Transition-Age Youth A parent perspective

When my children were young it was clear. My role was defined. I provided safety, shelter, food and loving guidance for them to grow. Later, our lives were complicated by unanticipated mental health and substance abuse needs. So, how does one prepare to successfully assist youth to gain the tools and support necessary to move to another stage of life when faced with such challenges? What supports, services, policies and/ or programs need to be put in place in order to be successful and promote recovery?

I am sharing my experience and thoughts here to help contribute some possible answers to those questions.

So, let's talk about support. I want to start with support for self. We, too often, leave this conversation until the end. Yet it is the foundation to all other conversations about support. If you have a transition-age youth, regardless of circumstance, it can be a challenging time. If you add the extra needs of your child(ren) with mental health and substance abuse issues, you need co-navigators. Connecting to other caregivers who have experienced and/ or are experiencing similar conditions can be immensely helpful and expose you to avenues of assistance that you might not know about when transitioning to new service systems.

When your child nears legal adulthood, what once worked in the past regarding accessing services, qualifications for receiving services, and levels and degrees of allowed family involvement, all drastically change. When our child was younger, we might have been

active members in our child's treatment and recovery process, and information was freely shared. We now find that those rules have changed and another layer of permissions is necessary. We may still have financial liability without the ability to participate in treatment decisions. Family supports and family inclusion may not be available. Payment options can shift, as can the direction of treatment. While you may have been an expert in the child serving systems, your child and you are entering into a "new to you" cadre of services – adult services. When we needed to access services within an adult system for my youngest son it was the guidance of another seasoned parent that was most helpful. She was able to tell me what to expect. She was able to assist me in finding ways to learn about the treatment model being used so that I could support my son in his recovery. Those avenues were not made available through the service system itself. Take care of yourself and enlist others to help you do that.

As for supports for young emerging adults, finding ways to connect them with healthy groups that allow them to have social outlets and shared experiences, and to develop skills is equally important. It is best that the support be provided by other young adults in recovery that can and do "talk the talk" and "walk the walk" of recovery. There are a number of youth-in-recovery groups and with a little work you can find them through schools, faith-based organizations, online, or in resource directories. Your older child's choice for a group that works for him or her may be different than yours. It is more important that the group is providing a place for your emerging adult to find support for her

or his ongoing recovery and helping to link her or him to resources than it is for the group to make sense to you as the caregiver. My youngest son, who is just passing out of the transition-age realm and is in long-term recovery from a dual diagnosis, uses one set of supports; meanwhile, my oldest son uses a totally different set of supports. Support what works for the individual.

What about services? Services for transition-age youth need to have a recovery orientation. Often times people assume that because children have received services in the past, they are automatically going to require the same or similar services as an adult. Youth in transition need to be provided with thorough and ongoing assessment to see where they are at on the continuum of need. This has to start early enough to prepare for the eventual “launching” of the young adult. Those services need to include a youth-informed plan that includes education and skill building; employment support; and independent living options. They also need to be coordinated. If your social worker/ clinical worker/ housing authority/ business rep/ natural supports are not all on the same page with you and your child, success is difficult. One essential service is having someone to ensure coordination happens. In an ideal situation, every family that needs it should have a designated person to fulfill that role based on the youth and family plan. If the plan is to transition to independent living with no needed systems support then working toward that plan all through the transition-age years starts at adolescence. If the plan is to make sure all the systems-level supports and services are in place as the young person enters adulthood, then that is reflected in the plan and supported as well.

That really leads us to policy change. Policies that prevent us from playing an informed, active participatory role need revision. Policies that are in place with the Affordable Health Care Act need to be understood and utilized so that services can be obtained. The parity law states that to the degree certain services and supports are allowed for a physical health issue, the same has to be allowed for a behavioral health issue. So, for example, if you have a broken leg and you get treatment and then get physical therapy in the recovery stage, you should be able to get treatment and then recovery supports for a mental health and/ or substance abuse issue. Every child- and adult-serving system should have a transition-age specific set of policies and procedures to ensure that their needs are being met. Those policies should include comprehensive assessment of all the domains to determine what the young adult needs to be able to live in the community; have gainful employment; and obtain needed education and affordable, safe housing. Those policies and their effectiveness

should be measured on a regular basis and adjusted and changed as needs arise.

Effective programs need to be available so that whether you live in an urban-based community or a remote, rural setting you can easily access them. The delivery method might be different but the core components can remain. Those supportive programs have to include whole-person thinking by addressing those issues that support ongoing recovery, housing, employment, nutrition, etc. Protocols vary with cultures, and responding to the needs of these differing groups in ways that are most effective, respectful and helpful is important. I come from a tribal community and we have specific ceremonies that define entry into stages of life with roles and responsibilities that accompany those stages. So if you have a transition plan that is not informed you could be working at cross purposes. For example, there is an expectation that a young person will spend some of the transition-age period serving and learning from an elder. If you know that, you can work to make that a part of the plan and perhaps link it to specific skills that may aid in ongoing recovery efforts.

We want to do what works. We want to have some degree of assurance that what we are doing will work and will get us closer to meeting our goals. We need to learn what practices have some degree of success so that we can, together, with the young adult, make informed decisions about the best course of action. There are those practices that have “evidence” and have been proven to be effective. There are also practices that communities and families have found to be helpful. They may not have the body of “proof” but nonetheless can be helpful or a good fit for your young person. My oldest son participates in our traditional ceremonies. He obtained and maintained a long-term recovery through these practices. Those practices are not currently supported or considered evidence-based but they work for him and that is what matters to us.

Ultimately, for me, emerging adults need safety, housing, food, and loving guidance along with opportunities to learn and practice providing for themselves.

AUTHOR

Shannon CrossBear is a beautiful, powerful, spiritual Ojibwe/ Irish woman whose purpose is to demonstrate and promote gentle healing. Health issues within Ms. CrossBear’s family of origin and community cement her commitment to improving conditions for children. She expresses her commitment to healing through her work in the world.