

Pathways to Positive Futures



In 2009, researchers at the Regional Research Institute at Portland State University applied for and received a grant from the National Institute for Disability Rehabilitation Research (NIDRR, US Department of Education) and the Center for Mental Health Services (CMHS, US Department of Health and Human Services) to create the Research and Training Center for Pathways to Positive Futures. This Center, known as “Pathways RTC” or, simply, “Pathways,” included eight research projects and related training, dissemination and technical assistance activities, all focused on improving outcomes for older adolescents and young adults who experienced serious mental health conditions (SMHCs).

As part of the grant application, the researchers at Portland State were required to describe the “overall approach” that would guide Pathways’ research and related activities. Based on a review of the existing literature—particularly the research literature describing intervention approaches that had been demonstrated to be successful with this population of “emerging adults”—the researchers started to zero in on an overall approach that was consistent with shared elements that appeared most frequently as key ingredients in empirically-supported interventions for the population. Young people and family members collaborated on the development of the proposal, and they also believed that these shared elements were central to achieving results. This set of shared ingredients became the basis for the first iteration of a theory that

described how to work effectively with emerging adults with SMHCs.

The shared elements that appeared in empirically supported programs, and that were endorsed by young people and families, clearly reflected an overall focus on positive development. Positive development was also a key theme in our researchers' prior work, and so it was quite natural positive development became a key feature of the Pathways "overall approach."

Theories of positive development stress the idea that the best way to promote thriving is to provide people with opportunities to guide their own lives toward goals and outcomes they find personally meaningful. In turn, this motivates them to further promote their own positive development as they build skills and knowledge, expand their capabilities, and gain competence in their chosen roles in family, community and society.

According to a positive development perspective, promoting thriving is particularly important for people who are struggling or at risk. For providers who work young people with SMHCs, this means maintaining a central focus on supporting young people to work toward goals and outcomes they find personally compelling. Young people are encouraged and supported as they take steps toward building the future that they aspire to, and providers do not operate under the assumption that working on important and meaningful goals should wait until the young people are symptom-free or abstinent or housed or medication compliant. The idea is that young people's motivation to seek out wellness strategies, to address substance use issues, to develop skills and further their education, and to build healthy relationships is progressively strengthened as they experience competence and learn more about what they want for their own futures. This is the set of ideas that is referenced in the Center's name and the description of our overall approach: Pathways to Positive Futures.

In the four years since the original description of the Pathways approach was written up, new information has informed the creation of several successive iterations of the Pathways to Positive Futures "model." The research literature has expanded, providing more information on interventions that are effective with emerging adults. Additionally, as evidence-based practices in human services have proliferated, and as both their strengths and shortcomings have become better understood, researchers and practitioners in different specialty areas have intensified their exploration of "common factors and common elements."^{1,2} Research on common factors and common elements holds great promise as a method for capitalizing on the fact that despite having different names, evidence-based, empirically-supported and promising practices designed for a particular population tend to have many features in common. This has given rise to the possibility of effective practice that builds on these commonalities through a better understanding of exactly what the shared features are, and how the various practice elements can be intentionally and flexibly employed by providers in response to the specific strengths, needs and life context of the particular person with whom they are working. Used in conjunction with process and outcome monitoring, this approach has the potential to be structured without being rigid, and to provide the kind of "flexibility within fidelity,"³ that allows for individualization without sacrificing rigorousness. The Pathways model is closely aligned with this kind of common factors and common elements approach.

Further development of the Pathways model has also been deeply influenced by what we have learned as we carry out the activities we proposed in the grant. Among Pathways' eight research projects are three randomized controlled trials of interventions to improve outcomes for young people with SMHCs. For each of these research studies, Pathways staff—including young adult

mentors who have themselves experienced SMHCs—have been the intervention providers, working directly with young people and learning from that experience. Project staff have also developed fidelity and quality assurance tools, including tools that involve intensive review of video recordings of staff working with young people. Other projects have looked at aspects of positive development among diverse populations, or have examined what kinds of organization and policy are needed to implement programs and interventions that promote positive development. As a group, we have thus been continually engaged in thinking in specific and concrete ways about what providers do to activate change and promote positive outcomes, and about what organizations and systems need to do to make this work possible.

Towards the end of the third year of the grant, we began planning for our State-of-the-Science Conference, which was to take place the following year. We decided to focus on strengthening and refining the Pathways model, with the goal of providing practical, useful guidance to providers working with young people with SMHCs. In the

year leading up to the conference, we carried out a series of activities with this goal in mind. First, we updated the model based on a literature review, combined with what we were learning from our own work. This version of the Pathways model was then circulated to a set of nationally recognized experts who specialized in developmental theory and/or research on interventions or programs for emerging adults with SMHCs. We also conducted a series of interviews with providers, young people who had received services from mental health and related programs, family members, and administrators connected with well-regarded programs serving emerging adults with SMHCs.

When we had completed all of this work, we produced yet another version of the Pathways to Positive Futures model. This version incorporated the feedback we had received as well as information gleaned from the interviews. In the next pages, we provide an overview of the model. This overview was sent out before the State-of-the-Science Conference to all attendees so that they could be prepared to participate actively throughout the conference.