Promoting Positive Pathways to Adulthood:

Online Training to Support Young People with Mental Health Needs
Presenters

Eileen Brennan
Pathways RTC, Portland State University

Claudia Sellmaier
Pathways RTC, Portland State University

Pauline Jivanjee
Pathways RTC, Portland State University

Corinne Spiegel
Jewish Family and Child Services, Family Member
Presentation Objectives

1. Establish the need for training programs for direct service providers working with young people with mental health difficulties.
2. Report on the research based development of an online training program.
3. Describe the content of the online modules.
4. Discuss the potential of online training programs to improve services for emerging adults.
Preparing Service Providers for Work with Emerging Adults

- New services tailored to serve emerging adults (ages 14-30) who experience mental health difficulties and life challenges:
  - Frequently “transition aged” young people dropped out of adult mental health services.
  - Lower school completion and employment rates, and higher juvenile and criminal injustice involvement (Wagner & Newman, 2012).

- Service providers often lack specific training to work with diverse emerging adults who experience mental health difficulties (Arnett, 2003; Clark & Unruh, 2009; Jivanjee, Kruzich, & Gordon, 2007; Vander Stoep, Davis, & Collins, 2000).
The Promise of Online Training

• Asynchronous online training experiences have proven to be successful:
  – in increasing student competencies (Swan, 2005),
  – in preparing prospective foster/adoptive parents with foundational knowledge and skills (Delaney et al., 2012), and
  – for instructing counselors to use CBT in mental health practice (Bennett-Levy et al. 2012).
The Pathways Transition Training Collaborative (PTTC) is a national advisory committee of young people with mental health service experience, family members, and service providers and researchers from human service professions.

In consultation with PTTC, we are developing a research-based online training program using core competencies and a tested core curriculum.
Methodology

Promoting Positive Pathways to Adulthood training program developed in four phases:

1. specification of core competencies,
2. core curriculum design and evaluation,
3. webinar content development and evaluation, and
4. online module development and testing.
Specification of Core Competencies

• Core competences identified through an extensive search and analysis of competency education literature and reports on practice with young adults with mental health disorders.

• Following Hoge, et al. (2005), competency defined: “a human capability composed of knowledge, a skill or ability, and personal characteristics such as attitudes and values.” (Brennan, Jivanjee, & Roser, 2010, p. 1).

• The PTTC reviewed and refined successive drafts of the core competencies, providing: the definition of each competency; descriptors of knowledge, attitudes, and values involved; and applications.
Core Curriculum Design

• Next the team developed and offered *Improving Youth Transitions*, a graduate course for direct service providers, delivered by a faculty member, a young person with experience in the mental health system, and a family member.

• Effectiveness in improving service provider competencies was evaluated prior to, and after instruction.
Core Curriculum Evaluation

• Used the **Transition Provider Competency Scale** (TPCS; Jivanjee et al., 2011),
  - an instrument consisting of 15 items related to transition service provider activities.
  - designed using Bandura’s (2006) self efficacy scale construction process,
  - The TPCS asked students to rate their confidence level about successfully performing each task from 0 = “very little confidence” to 100 = “quite a lot of confidence.”

• Students also completed open-ended questions regarding effectiveness and possible improvements for the course.
• Competency-based material developed for the course was incorporated into discrete webinar presentations that used an online synchronous platform for delivery.

• Webinars focused on such areas as:
  – the core competencies,
  – brain development during emerging adulthood,
  – family involvement in transitions to adulthood,
  – medication as a part of wellness, and
  – employment supports
Webinar Evaluation

- Webinars were advertised nationally and attended by service providers, young people, family members, educators, and administrators.
- Evaluation was conducted through online surveys administered to attendees three weeks after the webinar.
- Between 65 and 590 attendees per session.
Online Training Development

• Eight one-hour modules focus on different topics being developed from tested core content.
• Platform is Adobe® Captivate®, designed for asynchronous delivery through narrated slides and video clips of young people, service providers, and family members discussing core content.
• Each focuses on one or two core competencies, emphasizing knowledge, attitudes and skills
<table>
<thead>
<tr>
<th>Theme</th>
<th>Competencies</th>
<th>Content</th>
</tr>
</thead>
</table>
| **1. Partnering with youth and young adults** | 1. Partnering with youth and young adults  
3. Supporting empowerment                                      | Reviews core competencies and gives an overview of the whole training series.  
Teaches tools to develop and sustain collaborative relationships with youth and young adults using positive development and empowerment approaches. |
| **2. Promoting recovery**                | 2. Promoting recovery                                                        | Provides information on mental illness and resources on treatment and wellness. Recovery resources include diet, exercise, medication, peer support, self-advocacy and more. This module also covers stigmatization and obtaining accommodations |
| **3. Meeting the needs of diverse young people** | 9. Meeting the needs of diverse young people.                                | Teaches skills to provide culturally responsive supports and strategies for young people from diverse ethnic, racial, and linguistic backgrounds |
| **4. Providing individualized and developmentally appropriate services** | 5. Providing individualized, developmentally appropriate services.  
9. Meeting the needs of diverse young people.                          | Features scientifically-informed findings about brain development and trauma specific to young adults and the implications for interventions. |
<table>
<thead>
<tr>
<th>Theme</th>
<th>Competencies</th>
<th>Content</th>
</tr>
</thead>
<tbody>
<tr>
<td>5. Developing healthy relationships</td>
<td>6. Meeting needs in key areas of living</td>
<td>Focuses on strategies to develop and maintain healthy relationships in key areas of living. The specific needs of LGTBQIA2-S will be considered.</td>
</tr>
<tr>
<td></td>
<td>9. Meeting the needs of diverse young people.</td>
<td></td>
</tr>
<tr>
<td>6. Planning partnerships with providers of other services and collaborating to bridge service gaps</td>
<td>4. Engaging in partnerships with providers of other services and collaborating to bridge service gaps.</td>
<td>Addresses attitudes and skills for interdisciplinary and inter-systems collaboration and highlights strategies to overcome service gaps.</td>
</tr>
<tr>
<td></td>
<td>6. Meeting needs in key areas of living</td>
<td></td>
</tr>
<tr>
<td>7. Promoting support from family, peers, and mentors</td>
<td>8. Promoting support from family, peers, and mentors.</td>
<td>Offers strategies to support and maintain family involvement, and ways to obtain and strengthen support from adult allies and peers.</td>
</tr>
<tr>
<td>8. Using evidence-supported practices and individualizing interventions</td>
<td>7. Using evidence-supported practice and individualizing interventions</td>
<td>Considers the distinctive and common features of best practices in interventions with young people based on positive youth development</td>
</tr>
</tbody>
</table>

*Note*. Competencies based on Jivanjee, Brennan, & Sellmaier (2012).
Online Training Evaluation

• Interactive by design, each module features:
  – internal knowledge check questions, and
  – a multiple choice assessment at its conclusion.

• We are pilot testing each module with groups of direct service providers who complete:
  – TPCS at baseline and completion,
  – qualitative post-training evaluation instrument,
  – the concluding assessment.
Findings—Graduate Course

• Students in both offerings of the graduate course \((n = 28)\) improved significantly in their confidence in providing core elements of transition services (t-test of dependent means), as measured by the highly reliable TPCS \((\alpha = .96)\).
Paired T-test Contrasts of Student Pretest and Post-test Confidence Scores on the Transition Provider Competency Scale

<table>
<thead>
<tr>
<th>Competency Item</th>
<th>Pre-test</th>
<th>Post-test</th>
<th>t(27)</th>
<th>Cohen’s $d$</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
<td>M</td>
<td>SD</td>
</tr>
<tr>
<td>Engage youth as collaborator</td>
<td>61.71</td>
<td>18.39</td>
<td>84.79</td>
<td>11.62</td>
</tr>
<tr>
<td>Participate in advocacy</td>
<td>49.29</td>
<td>22.80</td>
<td>79.11</td>
<td>12.69</td>
</tr>
<tr>
<td>Identify and challenge stigma</td>
<td>58.93</td>
<td>17.12</td>
<td>83.79</td>
<td>12.48</td>
</tr>
<tr>
<td>Advocate for policies that respect rights and dignity</td>
<td>54.82</td>
<td>21.75</td>
<td>81.61</td>
<td>13.06</td>
</tr>
<tr>
<td>Work with youth to challenge oppressive structure</td>
<td>48.21</td>
<td>21.65</td>
<td>81.00</td>
<td>12.62</td>
</tr>
<tr>
<td>Form partnerships with families and providers</td>
<td>59.64</td>
<td>22.36</td>
<td>83.11</td>
<td>12.94</td>
</tr>
</tbody>
</table>

Note. $N = 28$ students in the Improving Youth Transition graduate course. *$p < .05$, **$p < .01$, ***$p < .001$. 

18
### Paired T-test Contrasts of Student Pretest and Post-test Confidence Scores on the Transition Provider Competency Scale

<table>
<thead>
<tr>
<th>Competency Item</th>
<th>Pre-test</th>
<th>Post-test</th>
<th>t(27)</th>
<th>Cohen’s d</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facilitate development and implementation of service plan</td>
<td>57.14 23.70</td>
<td>86.11 10.43</td>
<td>-6.62***</td>
<td>-1.58</td>
</tr>
<tr>
<td>Collaborate with young people to meet their needs</td>
<td>65.12 24.78</td>
<td>85.36 10.36</td>
<td>-4.96***</td>
<td>-1.07</td>
</tr>
<tr>
<td>Apply knowledge about mental health</td>
<td>49.11 24.61</td>
<td>79.46 11.41</td>
<td>-7.11***</td>
<td>-1.58</td>
</tr>
<tr>
<td>Build working relationships across systems</td>
<td>60.71 23.04</td>
<td>80.18 12.66</td>
<td>-4.75***</td>
<td>-1.05</td>
</tr>
<tr>
<td>Build on capacity of family members, peers and mentors</td>
<td>65.71 21.20</td>
<td>83.04 13.69</td>
<td>-5.58***</td>
<td>-0.97</td>
</tr>
</tbody>
</table>
### Paired T-test Contrasts of Student Pretest and Post-test Confidence Scores on the Transition Provider Competency Scale

<table>
<thead>
<tr>
<th>Competency Item</th>
<th>Pre-test</th>
<th>Post-test</th>
<th>t(27)</th>
<th>Cohen’s d</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communicate with diverse youth and families</td>
<td>73.04</td>
<td>84.64</td>
<td>-3.74**</td>
<td>-.71</td>
</tr>
<tr>
<td>Sensitivity to preferences of diverse groups</td>
<td>71.25</td>
<td>86.61</td>
<td>-3.98***</td>
<td>-.90</td>
</tr>
<tr>
<td>Evaluation of transition services</td>
<td>59.82</td>
<td>83.21</td>
<td>-6.65***</td>
<td>-1.40</td>
</tr>
<tr>
<td>Participate in program evaluation and research</td>
<td>61.61</td>
<td>81.25</td>
<td>-5.46***</td>
<td>-1.05</td>
</tr>
<tr>
<td>Total</td>
<td>896.18</td>
<td>1243.2</td>
<td>-8.65***</td>
<td>-1.67</td>
</tr>
</tbody>
</table>

*Note. N = 28 students in the Improving Youth Transition graduate course. *p < .05, **p < .01, ***p < .001.*
Findings—Graduate Course

• Four questions on post-class evaluation
  – What areas of knowledge and/or practice skills should be added or strengthened in the course?
  – What could be left out?
  – Please suggest any resources, web-sites, or contacts that would be useful
  – Any additional suggestions for changes and improvements?
Findings—Graduate Course

• Co-teaching approach including professor, family member and young adult was highly appreciated
• Additionally, guest speakers provided a variety of perspectives
• Importance of practical knowledge, ‘how-to’-approaches
• Relevance of resources
Findings - Webinar Evaluations

• Four webinars were attended by 964 participants. Respondents to the webinar evaluation primarily consisted of service providers (39%), administrators/managers (22%), and family members or caregivers (9%).
The webinar was...

- Very useful
- Somewhat useful
- Not at all useful
## About the webinar, did you... (Check ALL that apply)

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>Response</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>...learn something new from the presentation content or materials?</td>
<td>168</td>
<td>45%</td>
</tr>
<tr>
<td>2</td>
<td>...share the information or materials from the presentation with colleagues or others?</td>
<td>121</td>
<td>33%</td>
</tr>
<tr>
<td>3</td>
<td>...use the information or materials from the presentation to help produce something at work? (e.g., by incorporating information into a report, presentation, grant proposal, or program brochure)?</td>
<td>44</td>
<td>12%</td>
</tr>
<tr>
<td>4</td>
<td>...use the information or materials as part of making a change in what you or colleagues do at work (e.g., adopt new assessments or measures; change work procedures, practices, or interactions)?</td>
<td>37</td>
<td>10%</td>
</tr>
</tbody>
</table>
Did the materials or information from the webinar help you make a change or have another kind of impact at work?

Change or impact

- Large change or impact
- Small change or impact
- No change or impact
Findings-Webinar Evaluations

• Changes in interactions with young adults
  – “Will impact my thinking on how to engage young adults in our services (mental health) approach through social connections first, rather than treatment”
  – “Gave me a different point of view from which to communicate with my clients and family members.”
  – “In the way that I help parents understand their teenagers and developing more effective strategies for parenting.”
Findings – Webinar Evaluations

- Changes in trainings and policies
  - “Provided resources for presentation materials used in training staff.”
  - “the training helped inform our written policies and procedures “
  - “incorporate the information that I learned in training for the adoptive families “

- Young adult voice
  - “I found that having a person who has experienced mental health treatment and care was very helpful. It is important to understand things from the client's perspective.”
Next Steps

• First two online modules will be pilot tested with service providers who work with young people with mental health difficulties.

• More than 20 service providers who work with young adults with mental health difficulties in educational settings signed-up to participate in the pilot-tests.
• With increased emphasis on providing specialized services to emerging adults (Clark & Unruh, 2009), and modest funding for service provider preparation, online training has the potential to provide accessible, cost-effective, and convenient training opportunities.

• Production standards for online education have risen, and the cost of producing even modest online training experiences is rising accordingly.
Conclusions

- Future research studies should test the effectiveness of online training for the preparation of transition service providers using carefully controlled designs.
- Subsequent online training opportunities could be targeted to specific service providers (e.g. family support specialists, peer support workers).
Thank you!

Portland Oregon, Home of Pathways RTC

Eileen Brennan, Co-Principal Investigator: brennane@pdx.edu
Pauline Jivanjee, Co-Principal Investigator: jivanjee@pdx.edu
Claudia Sellmaier, Graduate Research Assistant: csellmaier@pdx.edu

Slides are available at our project website:
www.pathwaysrtc.pdx.edu/proj-trainingcollaborative.shtm
References


References


Acknowledgment

Thank you to all the members of the Pathways Transition Training Collaborative for their advice and input, and to Nicole Aue and Goutam Saha for their technical support. We are grateful for assistance from Martin Rafferty of Oregon Youth MOVE.

Travel funding: Portland State University Academically-Controlled Auxiliary Activities (AAA) fund, Dean’s Award, and Pathways RTC funds.
Acknowledgments/Funders

The development of the contents of this presentation were supported by funding from the National Institute of Disability and Rehabilitation Research, United States Department of Education, and the Center for Mental Health Services Substance Abuse and Mental Health Services Administration, United States Department of Health and Human Services (NIDRR grant H133B090019). The content does not represent the views or policies of the funding agencies. In addition, you should not assume endorsement by the Federal Government.