



## **The Availability and Accessibility of Transition-to-Adulthood Services for Youth with Serious Mental Health Conditions**

**Source:** Davis, M., Geller, J. L., Hunt, B. (2006). Within-state availability of transition-to-adulthood services for youths with serious mental health conditions. *Psychiatric Services*, 57, 1594-99.

This article is an assessment of the availability and nature of transition-to-adulthood service programs in child and adult state mental health systems across the United States.

### **Methods**

Interviews were conducted with members of the National Association of the State Mental Health Program Directors (NASMHPD). Each state's Adult Services member and Child, Youth, and Families Division member or a designee participated in an interview that focused on the transition services that were offered. Data were collected from 41 states and the District of Columbia. Transition programs were defined as offering support in at least one of the following areas: (1) completing a high school diploma or graduate-equivalent diploma (GED); (2) entering and completing postsecondary education or training; (3) obtaining and maintaining employment; (4) preparing for and achieving independent living; (5) developing and maintaining adult social support networks; (6) obtaining age-appropriate mental health services and supports, and; (7) participating in transition planning and coordination of transition services and supports. During the interview, it was determined whether each service type was available in the state, and at how many geographic locations. Interviews of child services were conducted in 2001 and interviews of adult services were conducted in 2003.

### **Results**

Half of the administrators of adult services (21 of 41) and more than one-fourth (11 of 41) of the child service administrators reported no transition services anywhere in their state. With very few exceptions, each type of transition service was available in fewer than ten states.

The most common services available at any state site through adult mental health systems were special comprehensive services (defined as services that offer or coordinate an extended array of specialized services, such as wraparound services or assertive community treatment), supported or supervised housing, vocational support, and specialized case management (available in 19%, 24%, 12%, and 12% of the states, respectively). Similarly, the most common services available at any state site through child mental health systems were special comprehensive services, supported or supervised housing, and vocational support (available in 38%, 31%, and 19% of the states, respectively). Less than 10% of the states (i.e., fewer than 4) offered any services in the areas of independent living preparation, mental health treatment, psychosocial rehabilitation, residential treatment, social skills, dual diagnosis treatment, and homeless with mental illness in either the adult or child systems.

Even if services were available within a state, access to those services was limited geographically. Less than 8 percent of adult systems and 22 percent of child systems offered any single type of transition service in more than one geographic location. Statewide comprehensive services were offered only within the child system of two states.

### **Discussion**

Transition systems for persons with serious mental health conditions should start in adolescence and continue as long as services are needed. The array of services available to this population should include vocational, educational, independent living, and housing support. They should also include mental health and substance abuse treatment. The authors emphasize that the findings of this study demonstrate that transition-to-adulthood programs in state mental health services are sorely lacking in both their availability and accessibility. Even the most common supports, such as housing and vocational support, were available in fewer than half of the states surveyed. These results signal a need for increased awareness and funding in order to help create the services needed to help persons with mental illness as they make the transition from youth to adulthood.



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