

# 2020/21 BUCKS COUNTY TRANSITION AGE YOUTH RECOVERY SURVEY Community Report

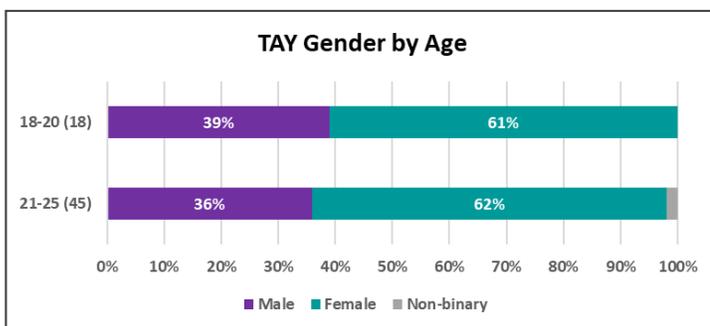
During February through April 2021, Voice & Vision, Inc. interviewed by phone 63 randomly selected Transition Age Youth (TAY) HealthChoices members who had received at least one behavioral health (BH) treatment in the previous year. People reported on services received during the pandemic shutdown which may have impacted certain data outcomes.

This study and follow-up recommendations were developed in collaboration with the Bucks County Department of Behavioral Health & Developmental Programs, Magellan Behavioral Health of PA, and the Bucks County Drug & Alcohol Commission, Inc.

The purpose of this project is to explore experiences regarding the key issues (Access, Service Delivery/Treatment, Recovery, Outcomes and Satisfaction) from a broad spectrum of 18 to 25 year old TAY members receiving publicly funded behavioral health services and to track the progress toward change over time as a result of Bucks County Behavioral Health initiatives.

This brief summary of the data is provided to assist Bucks County agencies and Magellan Behavioral Health of PA in incorporating recovery principles more fully into all aspects of behavioral health treatment services for young adults. We thank all who made this project possible, especially the young people who took time to share their experiences with us.

## Demographics:



## RECOMMENDATIONS

The following recommendations were identified from the data and/or C/FST observations:

### Access

- **Explore** reasons that TAY find services “ineffective.” Ensure TAY treatment plans are individualized to meet their needs to improve effectiveness of services received. (see Recovery below)

### Service Delivery/Treatment

- **Provide** family and friends of transition age youth (when appropriate) with educational materials to help counter negative stereotypes about mental illness and SUD to reduce or prevent stigma that keeps young people from getting the treatment they need.
- **Educate** behavioral healthcare providers and physical healthcare providers on the value of effective care coordination.
- **Help** young people understand the importance of signing releases to allow their healthcare providers to share vital health information with one another.
- **Encourage** providers to speak to TAY about substance use and provide preventive psychoeducation about its risks, effects, and treatment.

### Recovery

- **Consider** the importance of individualizing TAY treatment plans to provide support with short-term treatment goals that support their personal hopes and dreams.

### Outcomes

- **Share** with providers the positive outcome of more than 85% of TAY reporting the quality of their life was better since receiving treatment, especially in the areas of symptoms being reduced, better management of daily life, and maintaining a more positive outlook.

### Telehealth

- **Encourage** providers to assist people with challenges they are encountering when using telehealth services. Share strategies for finding/creating privacy for appointments, for making sessions feel more personal, and for handling technology issues that arise.
- **Share** with providers that individuals receiving services through telehealth liked the convenience. TAY found it especially helpful for cutting down on transportation costs and other transportation issues and made it easier to meet more often with their therapists.

## Outcomes and Satisfaction

Outcomes and satisfaction are two measures used to indicate the effectiveness of Behavioral Health services. **Fifty-four TAY (87%) indicated the quality of their life was “much better” (34) or “a little better” (20) since receiving treatment.**

Of the 54 TAY who indicated their life was better, **15% or more reported the following areas that were “better”:**

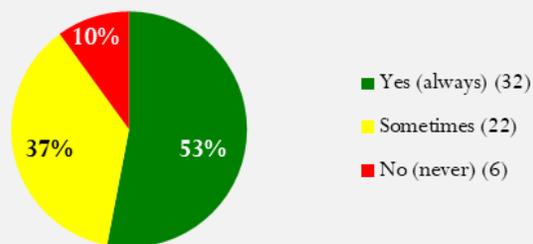
- ❖ Symptoms reduced (25)
- ❖ Better able to manage life (18)
- ❖ More positive outlook (12)
- ❖ Relationships improved (9)
- ❖ Doing better in school/job (8)

**Four TAY experienced dissatisfaction** with services including: dissatisfied with prescribed medication (2), sudden termination of services, and lack of communication from provider.

**Overall, 82% of TAY reported satisfaction with the mental health and/or SUD services they received in Bucks County.**

## Access

In the last 12 months, were you able to get the help you needed? (60 respondents)



Twenty-eight TAY (47%) reported they were “sometimes” or “not always” able to get the help they needed. The **top four problems** experienced by TAY were:

- ❖ Limited/no availability of services (7)
- ❖ Ineffective services (7) (*didn't meet TAY needs*)
- ❖ Insurance issues (4)
- ❖ Delays in getting appointments (3)

## TELEHEALTH

Of special interest to the County and Magellan Behavioral Health was the increase in utilization of Telehealth Services during the COVID-19 pandemic. Fifty-respondents (79%) indicated they used telehealth to access their services in the 12 months prior to the interview. TAY shared many ways telehealth improved their access to services. **More than 20% of TAY receiving services via telehealth reported the following top three benefits:**

- ❖ Saves travel time/cost (15)
- ❖ Reduces transportation problems (14)
- ❖ Able to meet more often with therapist (11)



When TAY were asked what they disliked about receiving their services through Telehealth, nearly half reported it was too impersonal, with many sharing that they preferred face-to-face, in person appointments. Several also indicated that finding quiet or private space in their home was a challenge.

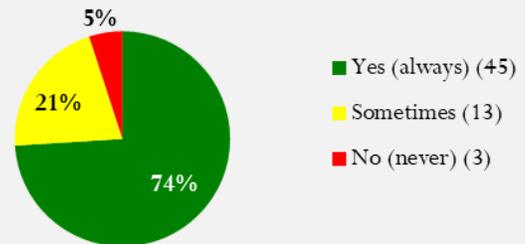
## Service Delivery and Treatment

Young adults were asked about **several areas impacting their service and treatment experience** including: choice, coordination of care, trauma-informed care, substance use, and stigma.

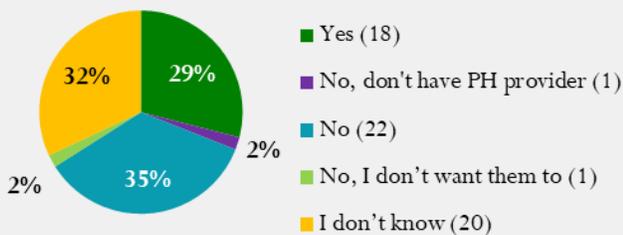
### CHOICE

When treatment plans are individualized and designed with their input, TAY may feel more valued by providers and be more likely to take ownership of their recovery goals. Forty-five TAY (74%) indicated they were always given the chance to make treatment decisions.

Were you given the chance to make treatment decisions?  
(61 respondents)



Have your BH providers and your PH providers spoken together?  
(62 respondents)



### CARE COORDINATION

Behavioral and physical healthcare providers communicating together to coordinate care can improve health outcomes. Of the 18 TAY who said their providers communicated together, 11 (72%) shared that it was helpful.

### TRAUMA-INFORMED CARE

Trauma can impact a person's life and affect treatment outcomes. Forty-four TAY (70%) reported their provider had talked with them about trauma. Twenty-one TAY (33%) interviewed indicated a concern with the impact of trauma on their emotional or mental health; 15 of those individuals were receiving help to address their concerns. One didn't want help, one didn't know where to go to get help, and 4 indicated they had not received help for other reasons.

### SUBSTANCE USE

TAY were asked if providers had talked with them about substance use and whether they were getting help for any SUD concerns. **Nearly 1/3 of respondents (32%) reported their provider (s) had not talked with them about substance use.**

Most (85%) did not have any concerns about substance use. Of the 8 (13%) who had a concern, 4 were getting help for those concerns. They indicated the following ways providers connected them to SUD treatment or resources

- ❖ Gave phone number for treatment provider
- ❖ Therapist helped work through [their concerns]
- ❖ Gave them a brochure
- ❖ Children & Youth helped them connect

## Service Delivery and Treatment (continued)

### STIGMA

Of the 30 TAY who experienced stigma, 18 (60%) reported it had prevented them from getting the treatment they needed. More than 25% indicated the stigma they experienced had come from the following:

- ❖ Immediate family (15)
- ❖ Friends (9)
- ❖ MH professionals, including psychiatrist (8)

**30 TAY (48%) reported experiencing stigma related to their mental health and/or substance use concerns.**

**Top 5 things TAY would tell others to reduce stigma ...**

- ❖ People are people
- ❖ Be open and willing to share
- ❖ Don't judge
- ❖ Mental illness is not a choice
- ❖ Mental illness is biological and more common than people think

### Recovery

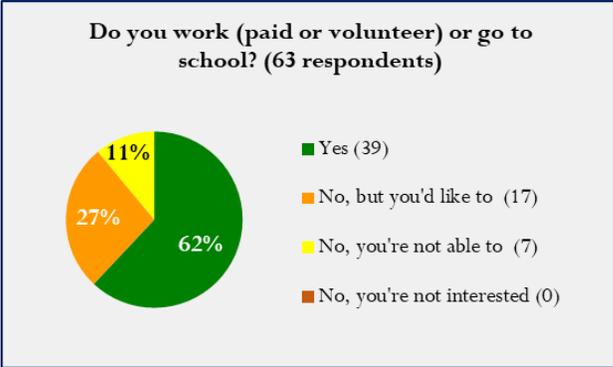
SAHMSA defines recovery as "...a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential." Learning to cope with stress and avoid crisis situations, engaging in work and school, and holding fast to hopes, goals, and dreams for the future can be indicators of recovery in the life of a young person.

### COPING SKILLS

TAY shared a wide variety of strategies they use to help regain a sense of calm, prevent relapse, crisis situations, or the need for hospitalization. Music or art (30/49%), physical exercise (21/34%), and contact with family or friends (19/31%) were the top three responses.

### WORK & EDUCATION

Thirty-one TAY indicated that their provider could help them with their work, school or volunteer goals. Twenty-five of these (81%) said support with their education would be helpful.



### HOPES, GOALS, & DREAMS

TAY shared a broad variety of goals, with more than 40% of TAY indicating going to college (30), getting one's own place (28), or finding a job (27) as the top long-term goals, hopes, or dreams they wanted to achieve. Their top short-term goals included getting a job/volunteering (21), education (19), and personal growth (11). When asked what skills they still needed to achieve their short-term goals, 15% or more of TAY indicated the following top needs:

- ❖ Time management (13)
- ❖ Money management (8)
- ❖ Coping skills (12)
- ❖ Motivation (8)