Multisystemic Therapy for Emerging Adults with Mental Illness

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Thank You!

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- Collaborators:
 - Sara Lourie & Anne McIntyre-Lahner, Connecticut Dept. of Children and Families
 - Charles Lidz, Edward Mulvey, Mary Evans, & Scott Henggeler
- MST-EA/TAY Team North American Family Institute
- The emerging adult participants and their social network members
- Davis, M., Sheidow, A.J., & McCart, M.R (2015). Reducing recidivism and symptoms in emerging adults with serious mental health conditions and justice system involvement. *Journal of Behavioral Health Services and Research*, 42(2), 172-190. DOI: 10.1007/s11414-014-9425-8

Sheidow, A.J., McCart, M.R., & Davis, M. (2016). Multisystemic therapy for emerging adults



(MST-EA) with serious mental health conditions and criminal justice involvement. *Cognitive and Behavioral Practice*, *23* (*3*) 356–367. DOI: 10.1016/j.cbpra.2015.09.003.

Malleable Causes of Offending & Desistance – General Population

JUVENILES

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ADULTS

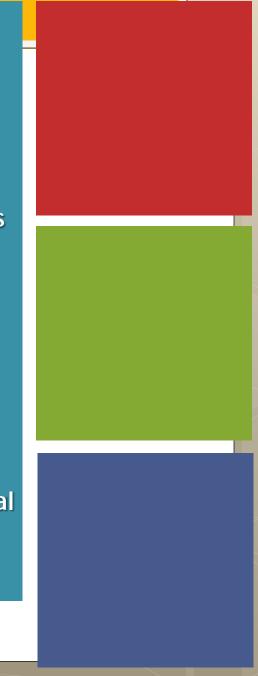
- Target Peer Influence
- Target Parental Support for Positive Changes Reduce Negative Parental Influence
 - Target School and/or Work
 - Target Substance Use
 - Target cognitions
 - Target Strengthening Support and Attachment to Positive Social Network Members



Standard MST (with juveniles 12-17y/o, no SMHC)

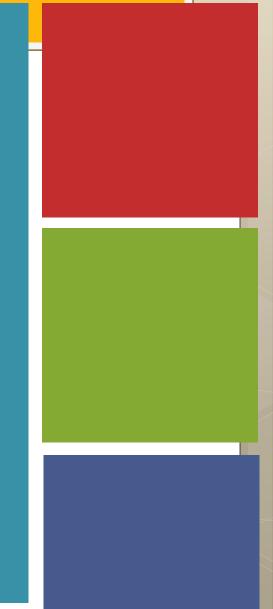
- 1. Intensive home-based treatment
- 2. Team of 3-4 therapists; 1 therapist = 4-6 families
- 3. Promote behavioral change by empowering caregivers/parents
- 4. Individualized interventions target comprehensive set of identified risk factors across individual, family, peer, school, and neighborhood domains
- Interventions integrate empirically-based clinical techniques from the CBT and behavioral therapies
- 6. Duration: 3-5 months





MST-EA Treatment Focus (17-21 yr olds w MI)

- Antisocial behavior, mental illness, & substance abuse
- Leveraging, developing & strengthening the social network
- Targeting housing & independent living skills, career goals, & parenting (as needed)
- Integrating a Life Coach & Psychiatrist/PNP for EA's into the MST Team





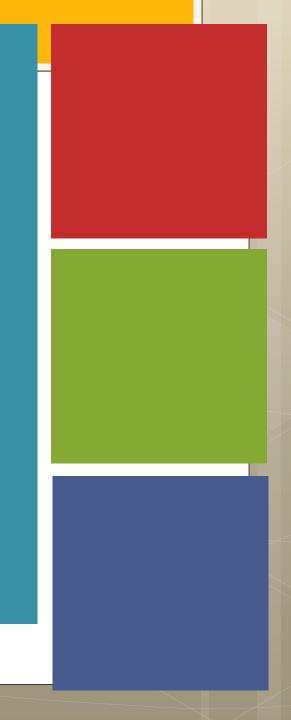


- Intensive home-based treatment
 Team of 3 therapists: 1 Therapist=4 clients
 4 coaches, one psychiatrist/nurse practitioner
- 3. Promote behavioral change by empowering emerging adults
- 4. Individualized interventions target comprehensive set of identified risk factors across individual, family, peer, school, and neighborhood and work domains
- 5. Interventions integrate empirically-based clinical techniques from the CBT and behavioral therapies that have evidence /likely effective in emerging adults
- 6. Duration: 4-12 months w Therapist, +2 months w Coach



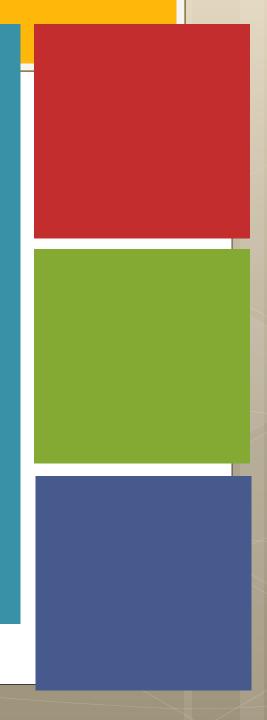
+ MST-EA Team

4 Therapists
On-Site Supervisor
Off-Site Consultant
0.2 Psychiatrist/Nurse Practitioner
Coaches (4, totaling 1.0FTE)
Full Team Caseload = 16





Treatment Elements Individualized assessment of "drivers" Social Network Assessment Intensive Focus on Safety Cognitive Behavioral Therapies Motivational Interviewing for Engagement MI & Contingency Management for SA Schooling and Vocational Focus Prosocial & Recreational Activities





Focus on Substance Use

- Ecological approach to assessing drivers;
 - Neighborhood, community, family
 - Target as many as possible
 - Individual
 - Motivational Interviewing Strategies & MET from the CYT study
 - Fishbowl version of Contingency Management (Petri) if needed
- Intensive Safety

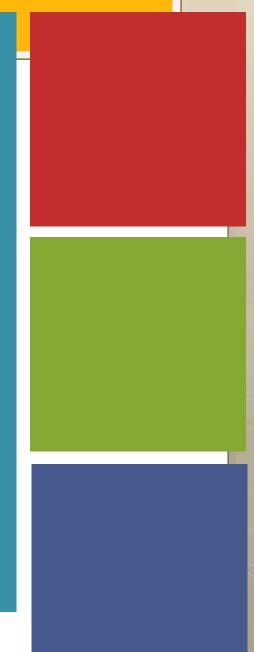




Focus on Substance Use cont'd

- Intensive Safety Focus
 - Urine Tox Screen assessed baseline & randomly every 4-6 weeks for all
 - Urines used in CM and MET
 - Functional analysis: triggers, time, context of abuse
 - Heightened monitoring for substances with lethality
 - For opioid use; EA's ecology has NARCAN
 - Highly protected treatment confidentiality so client can disclose







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