



TRANSITIONAL AGE YOUTH (TAY) - Ages 16—25

The first onset of mental illness and/or addiction often occurs in the TAY age group. This is a time when biological, psychological and cognitive changes accompany major life transitions in areas of education, employment, housing and adult relationships. Guided by the TAY voice, it is important to assist and engage TAY through outreach, education and a robust continuum of behavioral health programs, addressing both mental health and substance use.



ISSUE BRIEF: Transitional Age Youth

STATISTICS

Access ¹

- 1 in 3 California youth lack reliable access to mental health resources
- 48% of TAY (13–24) “do not know where to go” for mental health needs
- 8 out of 10 young people surveyed are looking to learn coping skills to help them deal with the stresses of everyday life.

Cost ¹

- 36% of TAY (13-24) “can’t afford the cost” of mental health resources

The Need

- 50% of all lifetime mental illnesses develop by age 14, and 75% of all mental health needs emerge before the age of 24. ³
- 42% of young adults with mental illness went untreated (U.S. 2018) ²
- Nearly 90% of TAY with substance use disorders went untreated (U.S. 2018) ²
- Suicide is the second leading cause of death for youth. ⁴

KEY COMPONENTS ⁵

Culturally Relevant: Providers that represent and relate to ethnicity, race, religion, and culture, including LGBTQ

Early Intervention: It is very important to implement solutions that eliminate gaps and delays in access to care.

Employment Services: Integrated behavioral health / employment (vocational) services for TAY youth. Work is a major therapeutic tool. See calbhbc.org/employment

Membership to include youth voice and leadership on:

- Children & Youth Committees
- Mental/behavioral health boards and commissions

Outreach to inform youth about resources and how to access them, with information intentionally directed at TAY. Youth also want adults in their community to reach out to them about their mental health.

Peer Support groups and services. Youth do not always trust adults or feel adults can relate to their experiences.

Schools: Integrate behavioral health programs within schools to include:

- Mental health and substance use education in K-12
- Workforce to include: School psychologists, counselors, social workers and nurses.
- Mental Health First Aid training for staff.
- College-Based Mental Health—see page 2.

Trauma-Informed practices, including training for: staff, families and youth.

Youth-informed resources that engage youth.

Programs

Allcove (Stanford Department of Psychiatry and Behavioral Services)

Integrated Youth Mental Health Centers

- Stand-alone sites designed by & for youth
- Focus on mild to moderate
- Integrated Care Services (mental health, physical health, substance use, peer support, family support and supported education and employment.)
- Reduce stigma in mental health

Psychosis Early Intervention Treatment Program (PREP)

- Rigorous early diagnosis using the [SIPS](#) and [SCID](#)
- Individual Cognitive Behavioral Therapy for Psychosis ([CBTp](#))
- Psychoeducational Multi-Family Groups
- Algorithm-guided Medication Management
- Vocational & Educational Support ([IPS](#))
- Peer Support / Family Support
- Support and Skills Groups
- Computer-based Cognitive Rehabilitation

Supportive Outreach & Access to Resources (SOAR)

- Psychiatric medication management
- Individualized clinical case management
- Weekly psychoeducation and support groups
- Weekly multi-family support groups (Napa)
- Bi-monthly family and multi-family support groups (Solano County Only)
- Peer advocate support
- Education and employment support

Integrated School-Based Behavioral Health ⁶

Project Cal-Well

Unconditional Education Model (Seneca) Hathaway-Sycamores School Based MH

Peer Support

TAY Peer Support (Humboldt County)

MHSA Update, pages 87, 88

Program includes of:

- Shared Supervising Mental Health Clinician
- Five full-time peer coaches are an integral part of the multidisciplinary team at TAY Division Programs: HCTAYC, Behavioral Health, Independent Living Skills, and the Drop-in Center
- Peer coaches operate from the lens of empowerment and recovery and integrate into the division through:
 1. Relationship Building and Mentoring
 2. Outreach and Engagement
 3. Linkage to Resources
 4. Activity Coordination.

Psychiatric Medication **Video Mini-Series ⁷**



TAY are often prescribed psychiatric medication following a formal diagnosis by a healthcare provider. Yet, many young people are under-informed about the benefits, risks, and side-effects of the medications they're provided.

In short, young people often do not understand their rights in regard to psychiatric medications.

College Based Behavioral Health—Key Components ⁸

- With leadership of students, mental health information and resources should be tailored to and embedded in different communities on campus to best meet their needs.
- Students demand and create formal peer support programs, even with push back from universities.
- To make support accessible, resources need to be available 24/7 in-person, via phone, and across campus, including in living spaces.
- Disability cultural centers create spaces where students with disabilities can connect with one another and celebrate disability culture and identity, as opposed to emphasizing disability as an impairment.

See CALBHBC website for more information: [Transitional Age Youth](#) & [Foster Youth](#)

End Notes:

1. [2019 California Youth Mental Health Wellness Survey Results Dashboard](#), Mental Health Services Oversight & Accountability Commission and Lady Gaga Born This Way Foundation
2. [Entering Adulthood: Getting Help for Mental and Substance Use Disorders](#), SAMHSA TAY Infographic
3. [National Alliance on Mental Illness: Teens & Young Adults](#)
4. National Institute for Mental Health: <https://www.nimh.nih.gov/health/statistics/suicide>
5. [2020 State of the Community Report, CA Youth Empowerment Network](#), page 22 (a project of Mental Health America, CA)
6. “[Every Young Heart and Mind: Schools as Centers of Wellness](#)”, MHSOAC, Pages 74-75
7. [Medication Options: Young People and mental Health \(A PEERS Video Mini-Series\)](#)
8. [Collegiate Mental Health Innovation Council 2018-19 Report Highlights](#)