



Evaluation of Vermont's Young Adult in Transition Grant

Thank You

- Legislators, State officials, and members of the press for taking the time to attend today and learn about the Youth in Transition work.
- Young adult leaders and the many service providers and program directors for all the work they do every day.

Disclaimer

This presentation is based on the work of the Young Adult in Transition program evaluators: Jody Kamon, Jesse Suter and Tom Delaney.

The evaluators are employed by the University of Vermont, but this presentation does not express any positions of UVM.

Collaborators:



8 Broad Outcomes



Corrections involvement



Mental health symptoms & Substance use



Employment



Access to & use of medical home



Number of young adults' strengths



Education completion & continued engagement



Number of young adults in safe & stable housing



Number of young adults caring & supportive relationships

**Evaluation: Report on how we are
doing on 6 outcome domains**

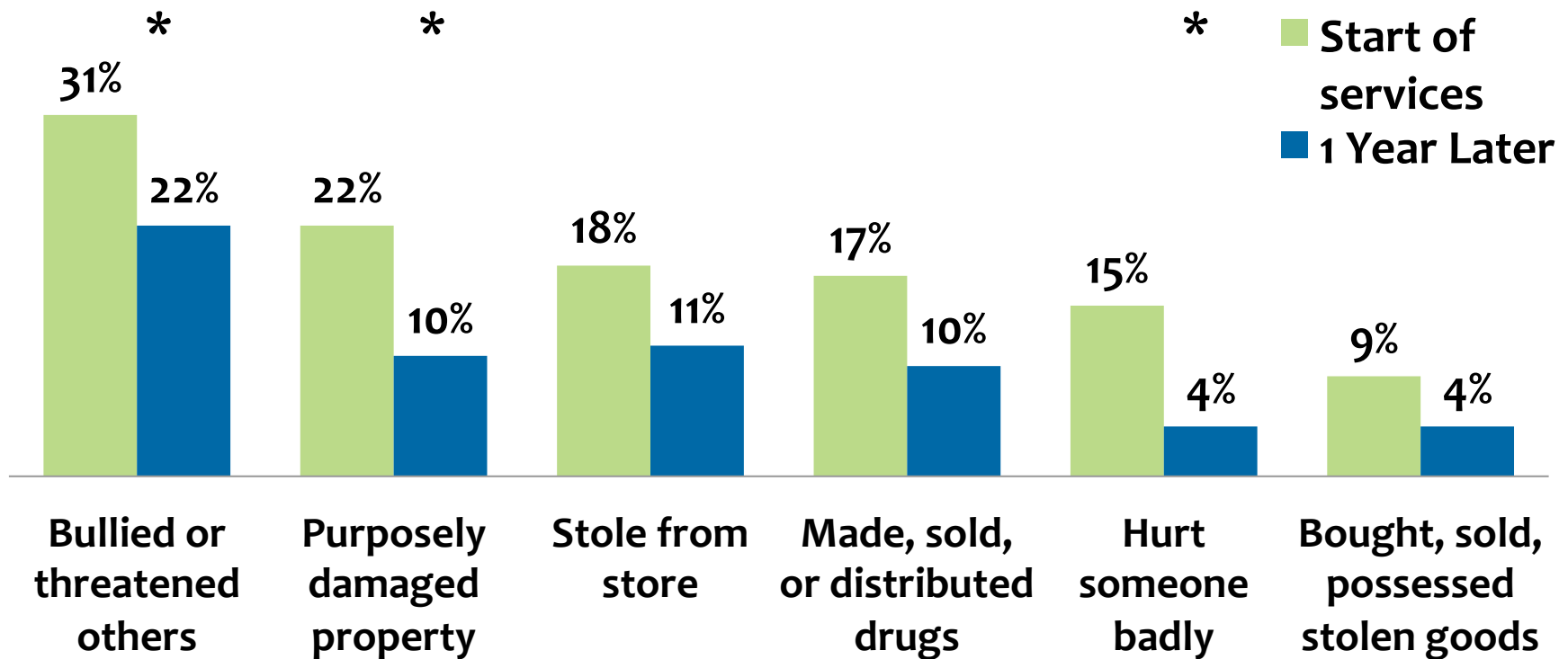
Evaluation

- 2 Studies
 - 1 Nationally driven
 - Data collected at 6 month intervals over 2 years by UVM staff
 - 1 Vermont based
 - Measures developed by consumers, caregivers, and state input and collected at 6 month intervals over 1 year by UVM staff

Sample

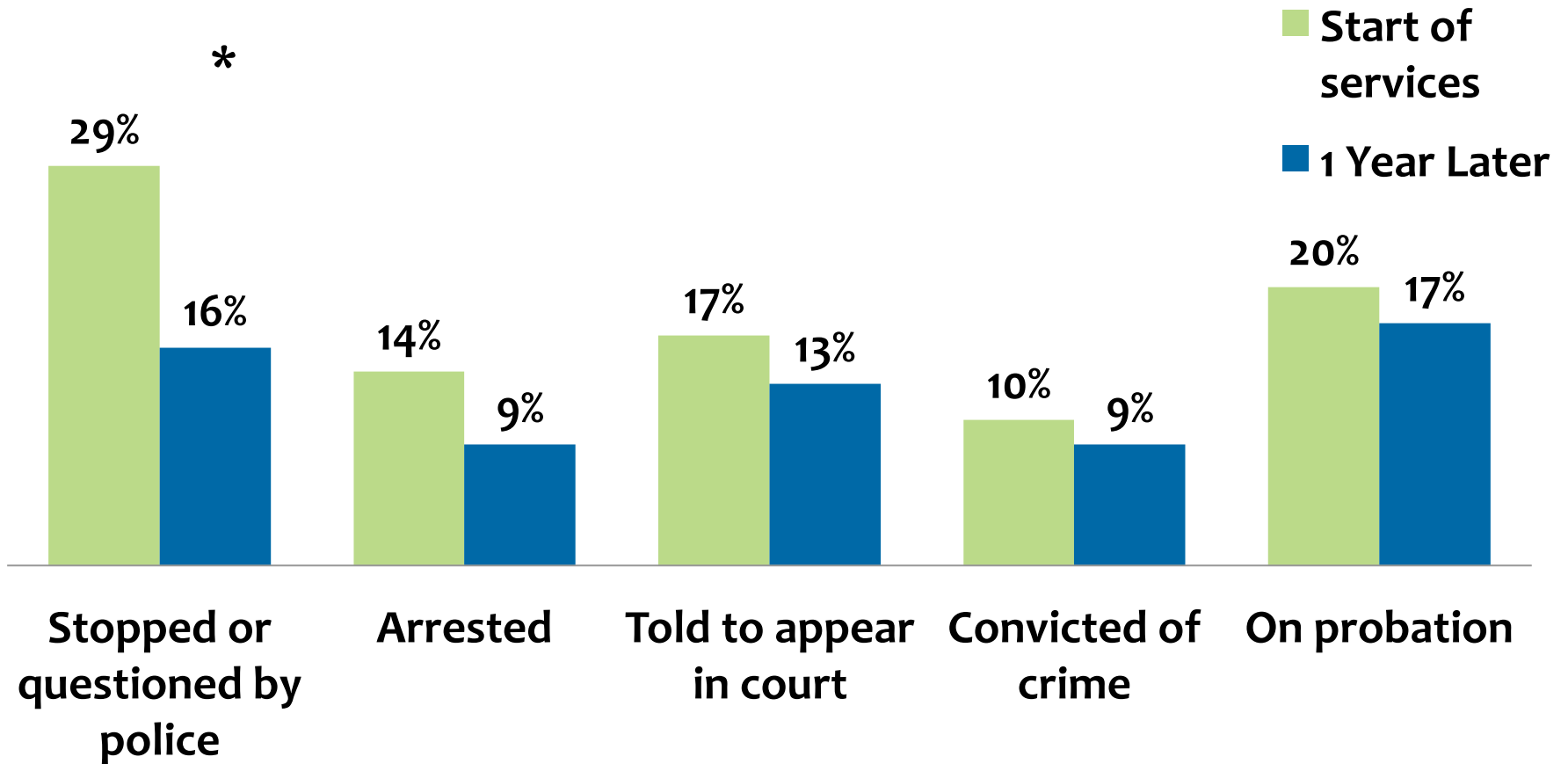
- National study
 - 115 young adults with both baseline and 12 month follow up data
- Vermont study
 - 63 young adults with both baseline and 12 month follow up data
- “Baseline” or “Start of Services” defined as when they began receiving a new YIT-funded service.
- Follow-up interviews were done regardless of whether young adult still receiving services.

Engaging in Criminal Behavior



*p < .05

Criminal Justice Involvement



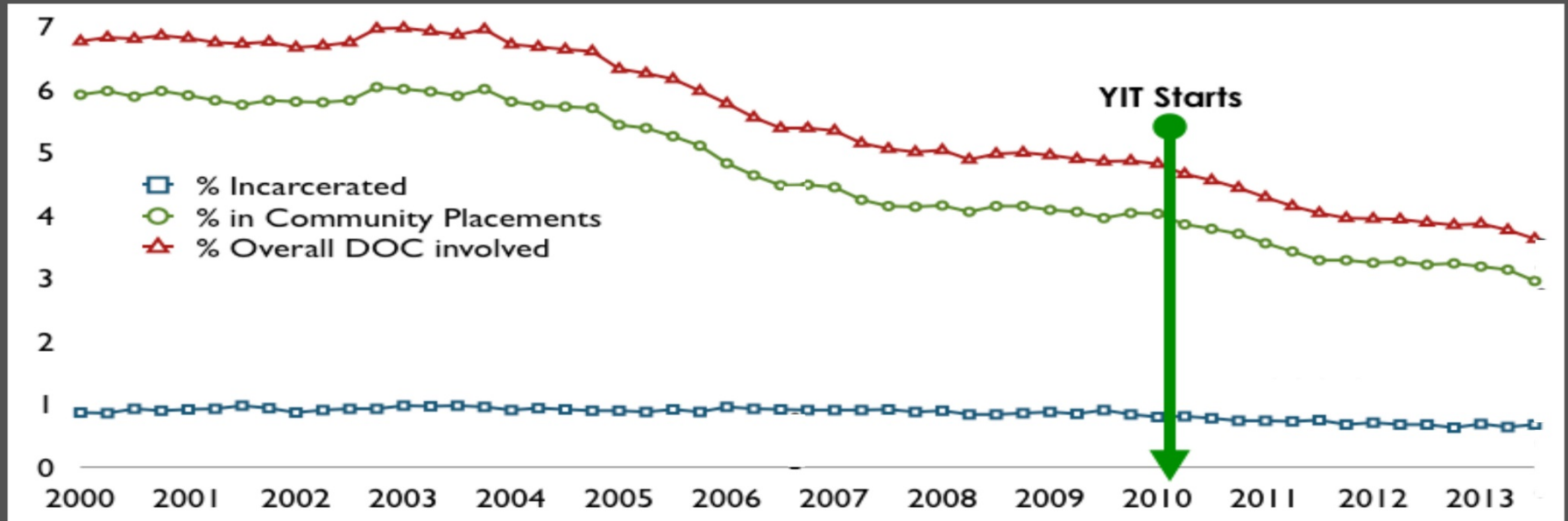
*p < .05

Department of Corrections Involvement

Young adults (18-24) involved with corrections decreased significantly from 2000 to 2013



This happened during a time when the young adult population in Vermont grew.



Data provided by Vermont DOC quarterly census of placement on the last day of each quarter, including young adults (18-24 years) incarcerated and in community settings. % from U.S. Census population estimates.

Comparing the 10+ years before YIT and 3.5 years since shows DOC involvement was:

significantly lower

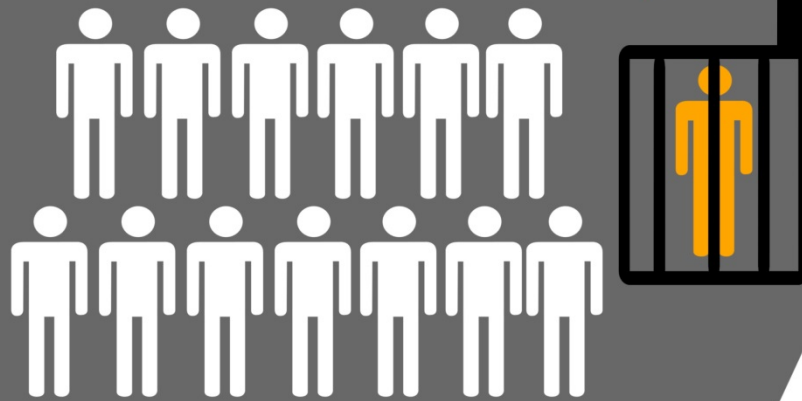
dropped more rapidly



YIT was not the sole reason for this decrease, but we believe it contributed along with other Vermont efforts.

YIT Involved Young Adults' DOC involvement

1 in 14



YIT involved young adults report being incarcerated

Of those incarcerated, the average days spent incarcerated decreased along with estimated costs

Start of YIT



1 year later



25% decrease in the amount of time incarcerated!

Mental Health: Depression

LEVELS OF DEPRESSION DECREASE OVER TIME



71%

The percent of young adults with clinical levels of depression whose symptoms improved!



Start of
Services

FROM:

Moderate
depression

At the start of services, the average score was in the moderate clinical depression range. 1 year later, the average score was in the non-clinical range. This change was statistically significant.

1 Year
Later

TO:

Non-clinical

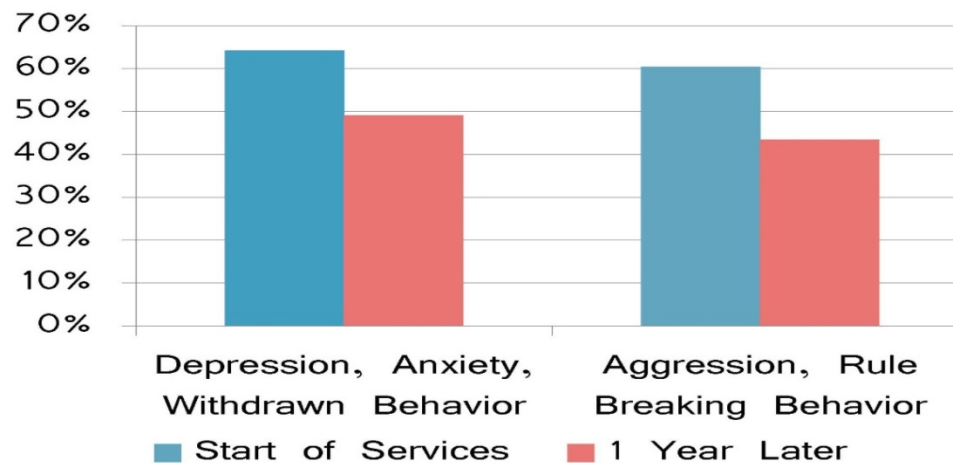
Mental Health

WE SEE DECREASES IN OTHER MENTAL HEALTH PROBLEMS TOO!



A 24% improvement among youth with clinical levels of these problems.

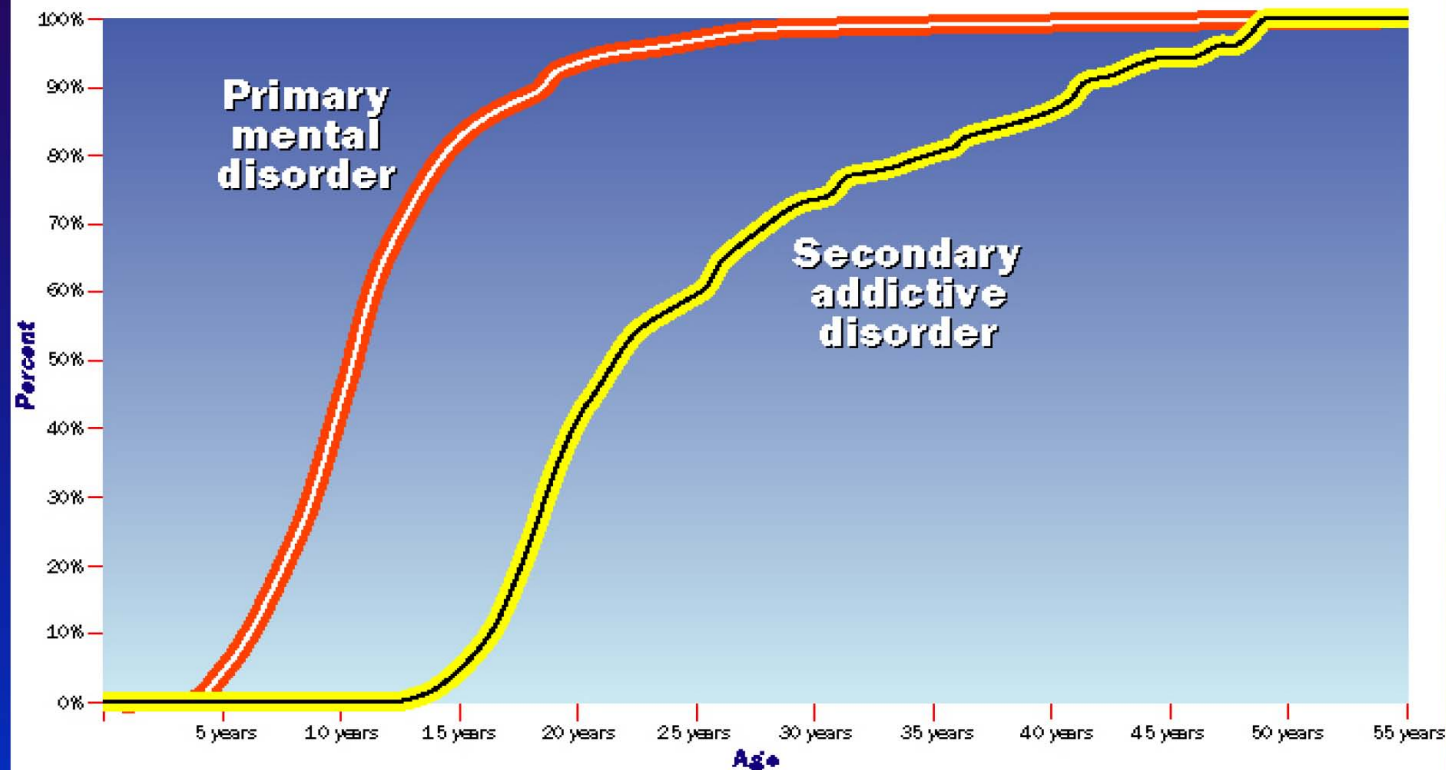
A 28% improvement among youth with clinical levels of these problems.



Mental Health

Opportunity for preventing comorbid disorder

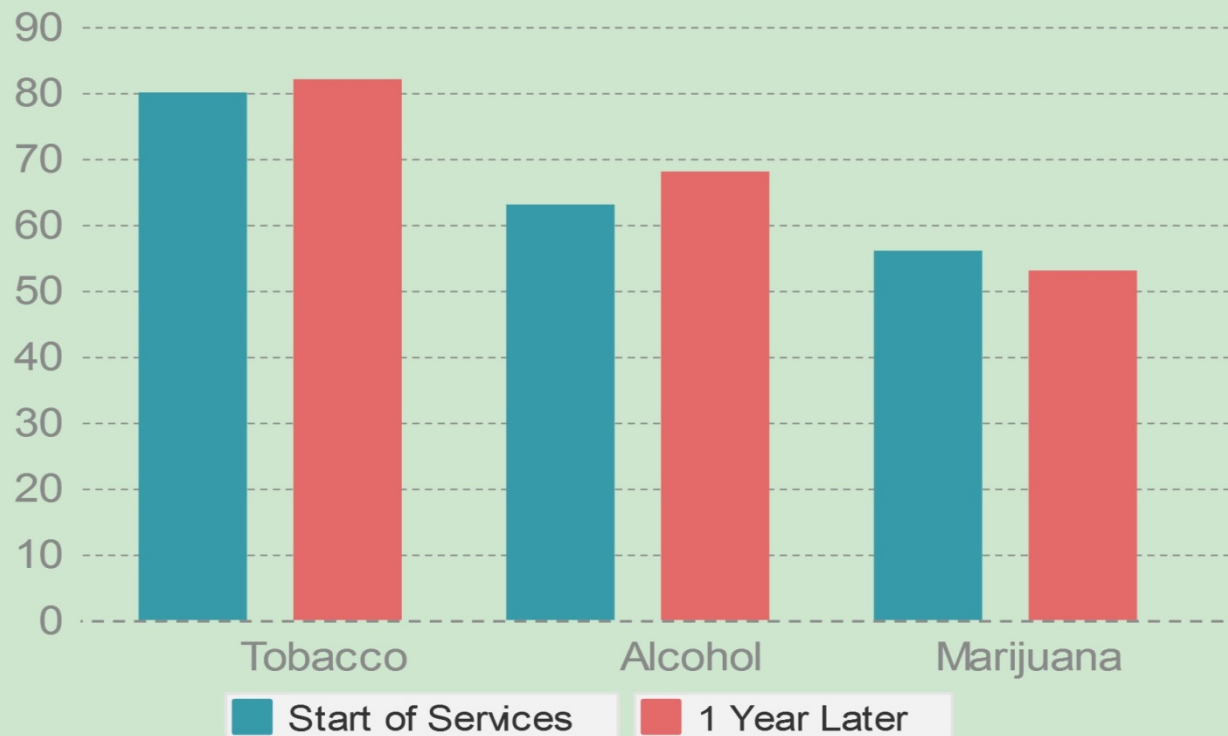
Cumulative age of onset distributions of first lifetime mental disorder and first lifetime addictive disorder in the subsample of respondents with lifetime co-concurrence of a primary mental disorder and a secondary addictive disorder



Source: Kessler, Nelson, McGonagle, et al. (in press)

Substance Use

Of young adults who reported trying tobacco, alcohol or marijuana, the graph below lists the % who reported using each drug in the past 6 months over time.



No change
in rates of:

- Tobacco
- Alcohol
- Marijuana

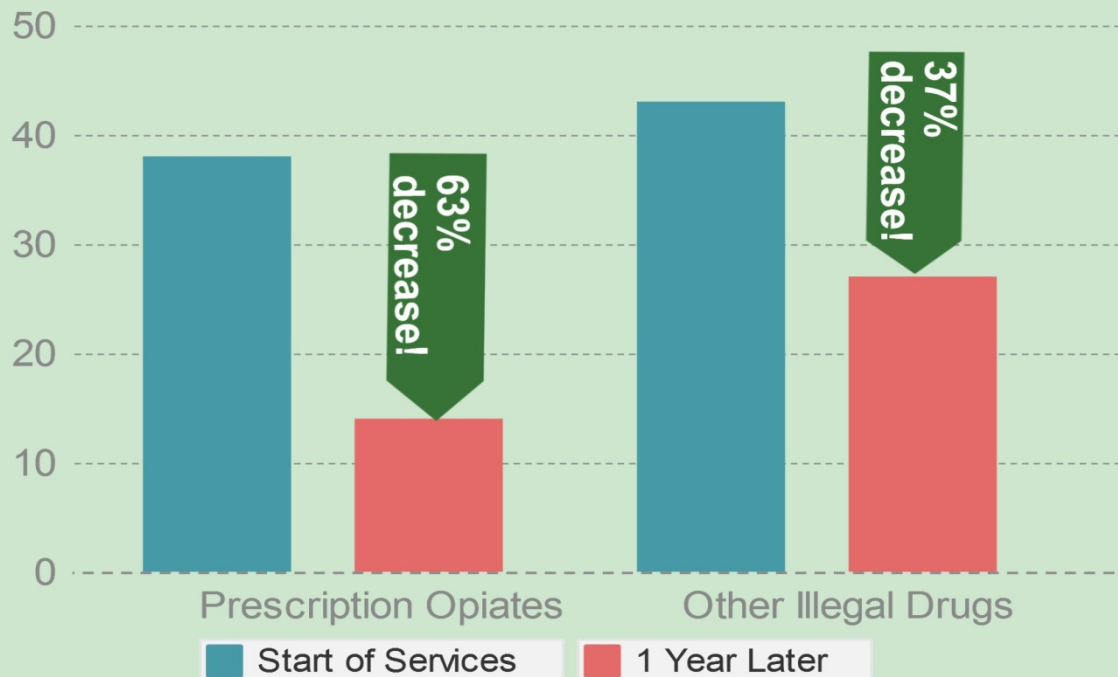
use among
young
adults 16 to
22.

Substance Use

1/3 of young adults had used prescription opiates at least once.

1/2 of young adults had used other illegal drugs (excluding marijuana) at least once.

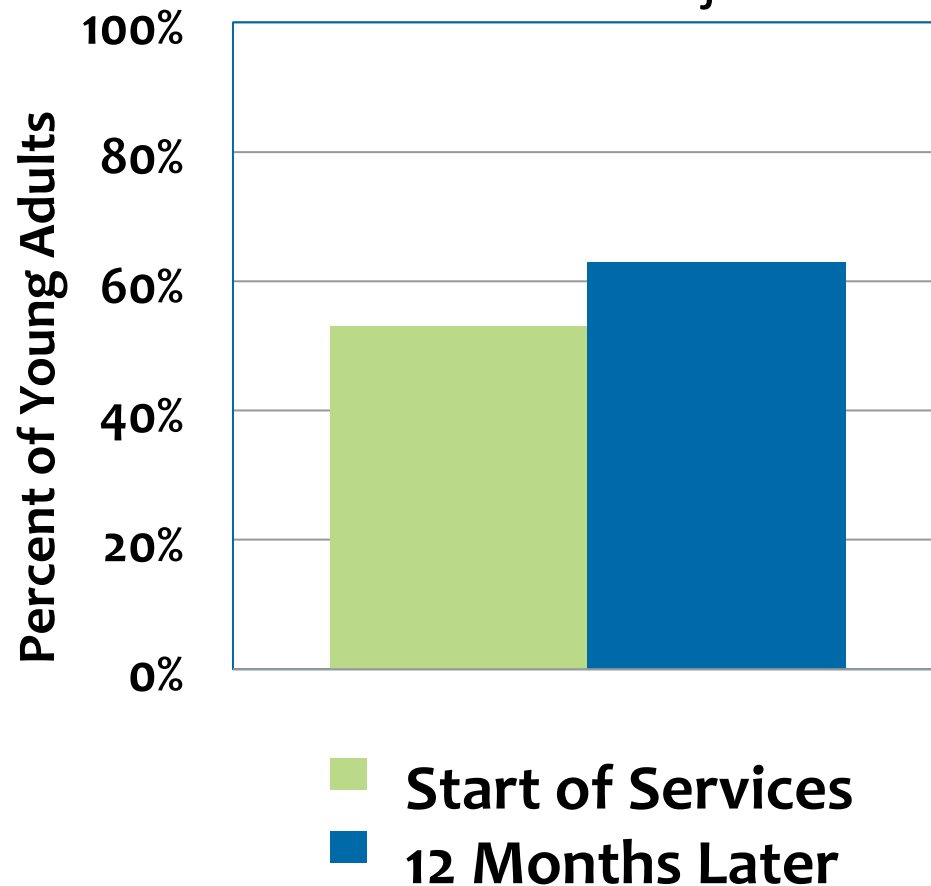
This graph shows the percent of these young adults who reported use in the past 6 months.



Significant decreases in prescription opiate & other illegal drug misuse.

YIT and Employment

Percent of Young Adults who have a job



What are young adults saying about getting a job?

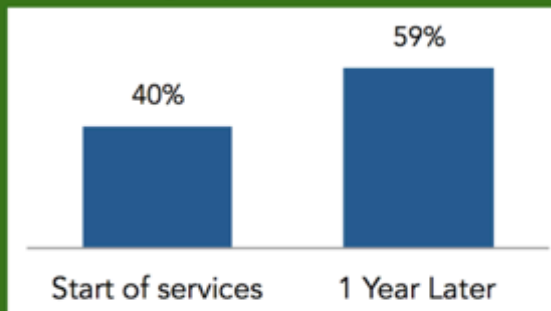
- *“I just wanted money. Didn’t want to live off of mom and dad.”*
- *“Having a job is important to me.”*

Across both studies, there was a 10% increase in employment ($p < .06$)

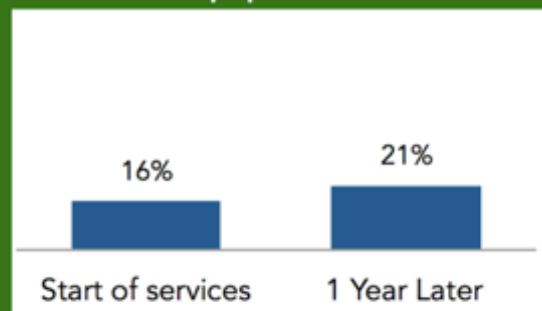
High School Graduation



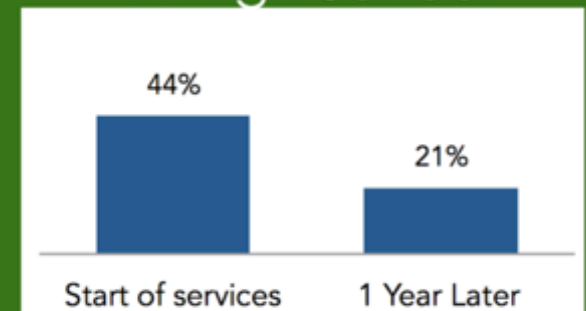
Graduated *



Dropped Out



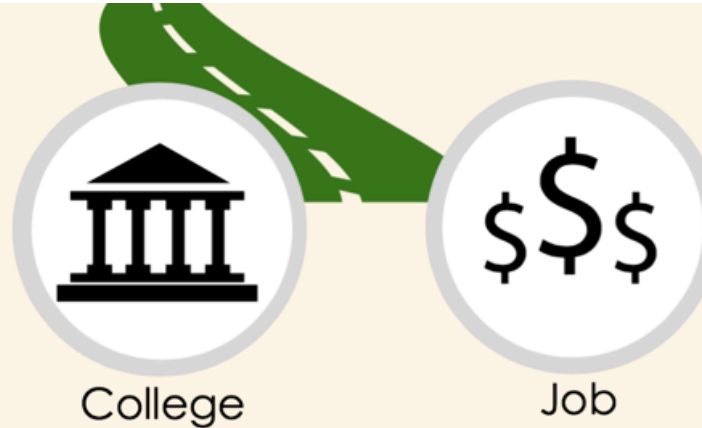
In High School *



*statistically significant change

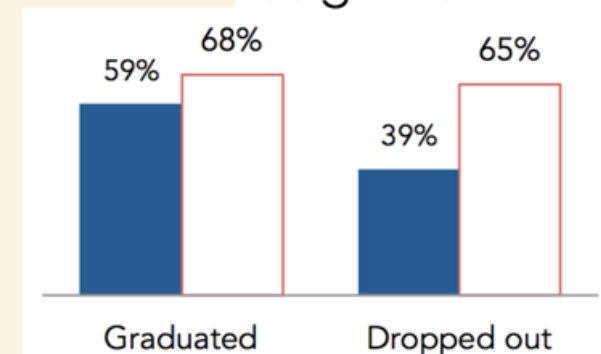
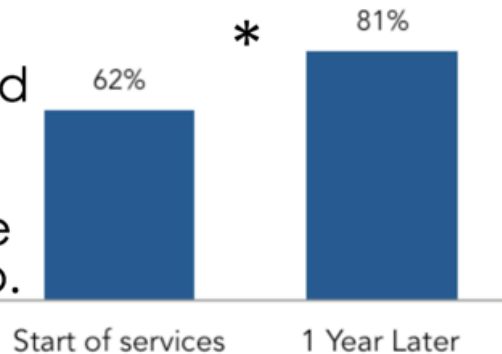
Post-Secondary Ed & Jobs

How are YIT young adults doing after high school?



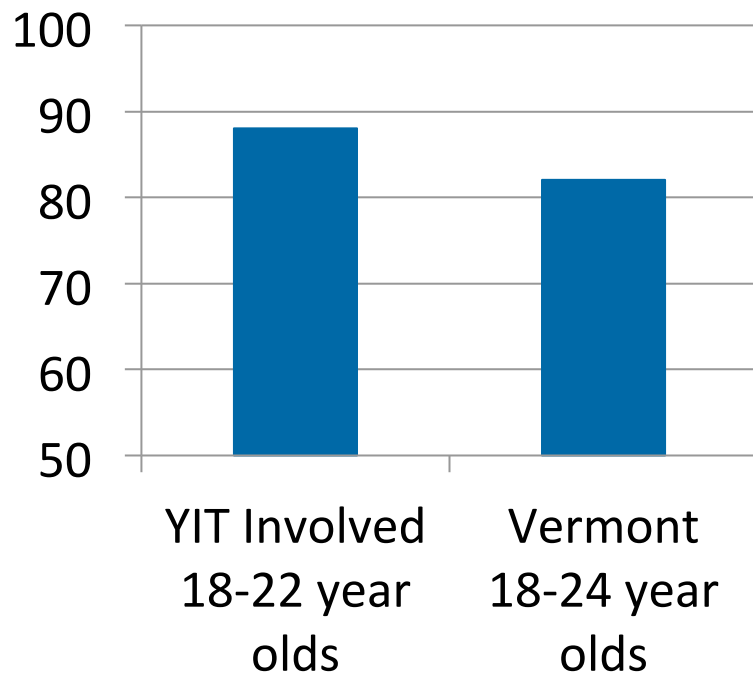
One year after starting YIT, high school dropouts were almost as likely to have a job as graduates.

High school graduates showed a significant increase in attending college or obtaining a job.

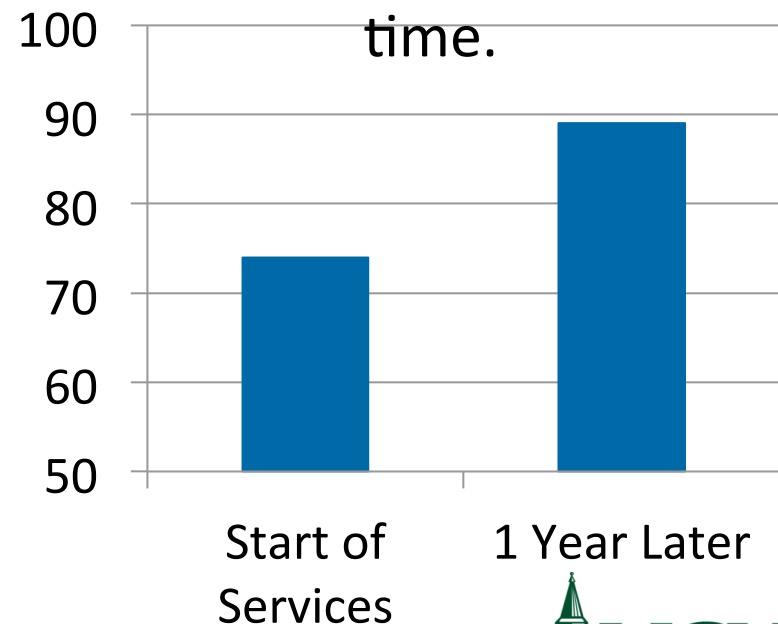


Health Care Access

More YIT Involved Young Adults have health coverage compared to young adults across Vermont.

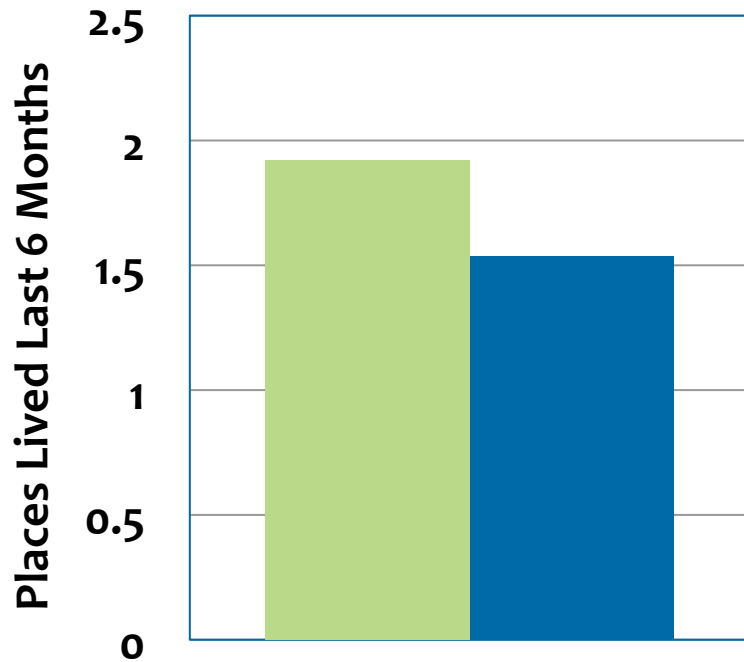


More YIT Involved Young Adults with mental health & substance use problems reported seeing a doctor over time.



Housing Stability

Among all young adults in the National Study, overall there was a decrease in the average number of different places young adults lived in the previous 6 months, from 1.9 to 1.5 different places they lived.



■ Start of Services ■ 12 Months Later

Feedback from Consumers: 5 General Themes

Met basic
needs

Felt heard &
supported

Learned
healthy
coping skills

Made
connections

Gave young
adults
direction

Evaluation: Cultural & Linguistic Competency (CALC) Development

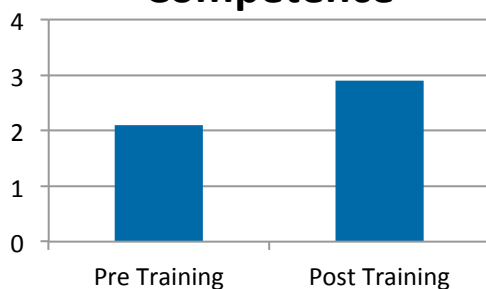
Cultural & Linguistic Competency Emphasis (CALC)

- Critical to end health disparities
- Improve health providers' knowledge & their attitudes and skills
- Identified under Strategy I.C of the HHS Action Plan to Reduce Racial and Ethnic Health Disparities (2011) as one of the actions to improve the quality of care; and “the ability of the healthcare workforce to address disparities will depend on its future cultural competence and diversity” (p.17, IC.1).

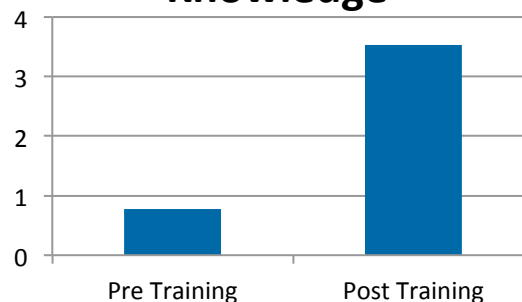
CALC Trainings in Vermont

- 34 trainings from October 2010 to August 2013 in 10 AHS regions; 639 participants
- Pre and Post-Test collected at every training (n=569)

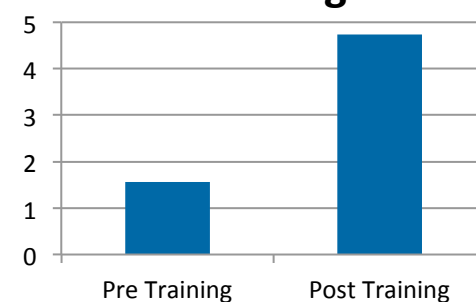
Provider Cultural Competence



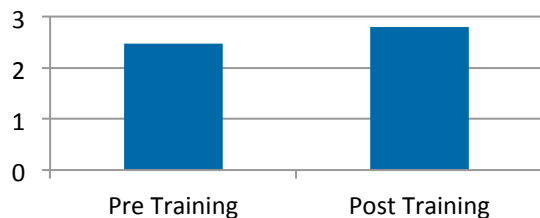
Racial Disparity Knowledge



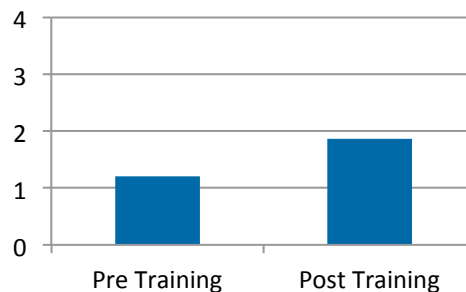
Health Disparity Knowledge



Organizational Cultural Competence



Comfort Level



All of these increases were statistically significant.

Summary

Among our most vulnerable young adults we are seeing...

- Decreases in:
 - Criminal behaviors and involvement
 - Mental health symptoms
 - Prescription opiate and other illicit drug use
- Increases in:
 - Employment
 - Educational attainment
 - Health care access
 - Stability of housing situation

Take Home Message

- Data show that YIT related efforts have:
 - Helped to improve young Vermonter's functioning, helping them to find and stay on pathways to being prosocial, contributing members of their communities.
 - Decreased their involvement with costly programs such as criminal justice programs and services.
 - Such changes have the potential to impact long-term hidden costs.

Thank You



Questions & Comments

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