



**RENEW**  
Rehabilitation for  
Empowerment,  
Natural Supports,  
Education, and Work



# Mentoring RENEWed: Using Peer to Peer Supports to Engage Youth who are at Risk for Disengagement from and Dropping out of School

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Kathleen Abate, Granite State Federation of Families & Youth Move NH  
Justin Tilbe, RENEW Graduate, Peer to Peer Mentor, & Youth Move NH

# Agenda

- Overview of RENEW & Youth Move
- Overview of Peer to Peer Supports
- Peer to Peer Supports & PBIS
- Peer to Peer Development
- NHH & Exeter Pilots
- Data & Outcomes
- Questions

# RENEW in a nutshell..

- RENEW is a structured school-to-career transition planning and individualized wraparound process for youth with emotional and behavioral challenges.
- The model focuses on supporting each youth to design and pursue a plan for the transition from school to adult life.

# RENEW continued..

- Developed in 1996 by staff at the Institute on Disability (IOD), RENEW is being provided by schools, community mental health centers, community-based providers, and IOD staff members to youth.
- Nearly 20 years of research has shown that RENEW has substantially increased high school completion, employment, and post-secondary education participation rates among our most vulnerable youth.

# Early Contributors and Co-Developers

- Doug Cheney, Professor of Special Education, University of Washington
- Gail Cormier, Executive Director, North Carolina Families United
- Patty Cotton, Person-Centered Planning Consultant
- David Hagner, Research Assistant Professor, UNH
- Lucille Eber, Director, Midwest PBIS Network
- Kathleen Abate, Granite State Federation of Families for Children's Mental Health

# Youth with EBD....

- Disengaged from school/family/community
- Most likely disability group to be in a segregated academic setting
- Highest rates of disciplinary infractions
- Perceived by teachers as having significantly lower levels of social competence and school adjustment

(Lane, Carter, Pierson, & Glaeser, 2006)

# Poor Functioning

- High rates of school dropout (with associated low income and employment)
- High rates of anti-social behavior including incarceration, arrests, behavior problems in school
- High rates of trauma
- Poor access to or utilization of mental health services
- Lack of community and social supports

# What is needed..

Wagner & Davis (2006) recommend that programs for youth with EBD emphasize:

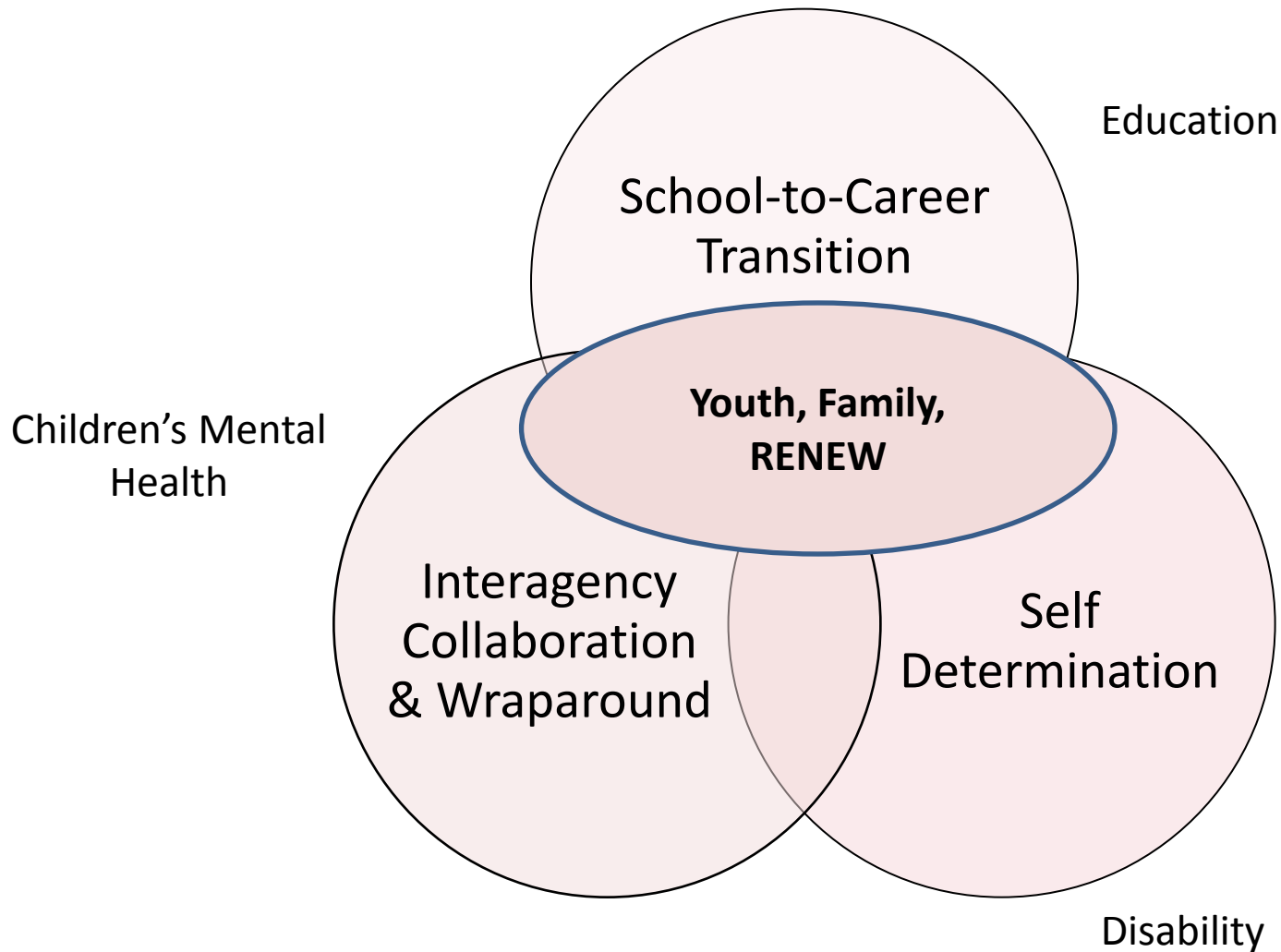
- **Relationships**
- Rigor
- Relevance
- Address the needs of the whole child
- Involve students and families in transition planning

Youth with EBD need:

- positive meaningful relationships**
- basic needs
- coping strategies
- consistency
- need social supports



# RENEW Conceptual Framework



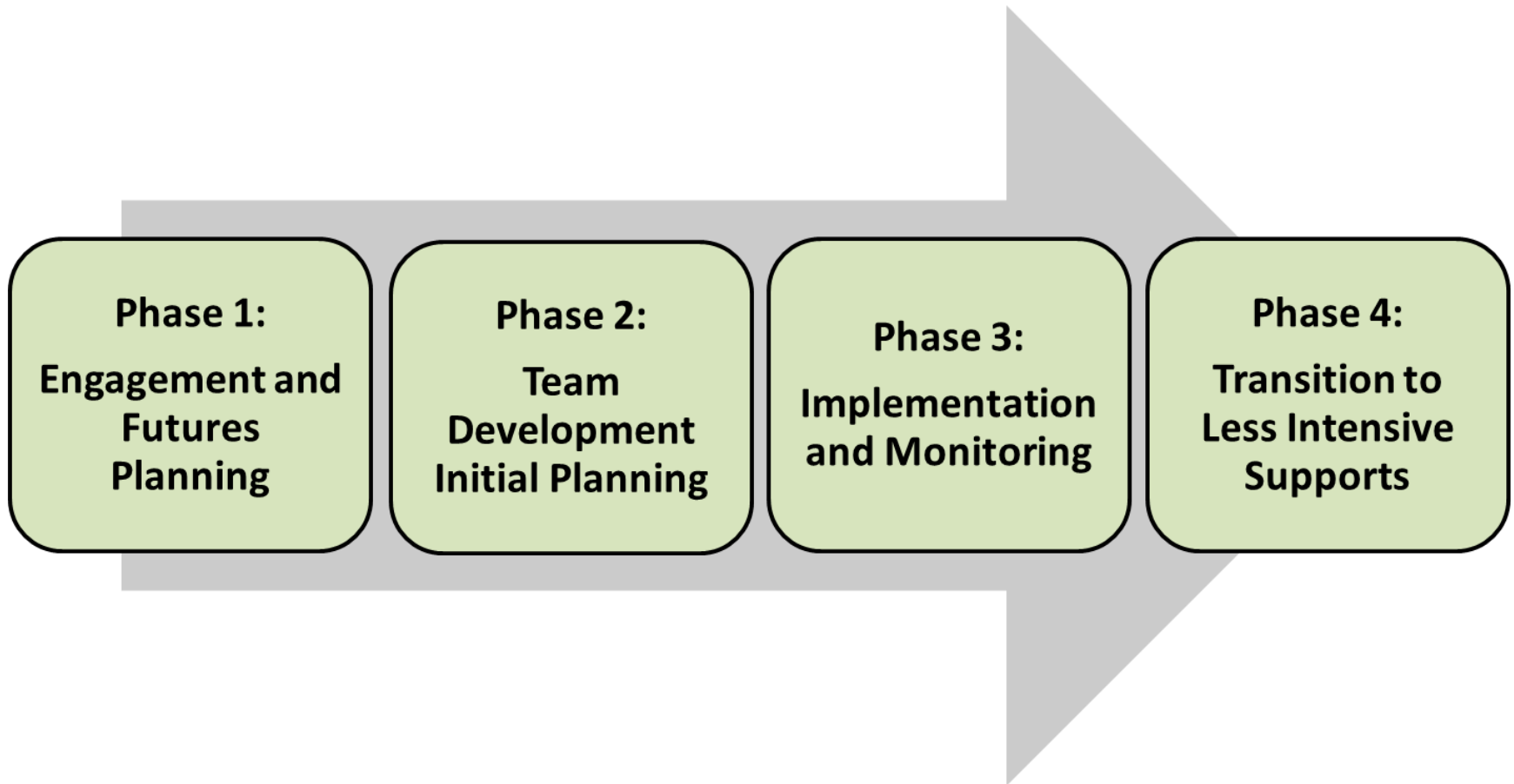
# RENEW Goals & Systems of Care Principles

- RENEW Goals
  - High School Completion
  - Employment
  - Post-Secondary Education
  - **Community Inclusion**
- RENEW Principles
  - Self-Determination
  - Unconditional Care
  - Strengths-Based Supports
  - Flexible Resources
  - **Natural Supports**

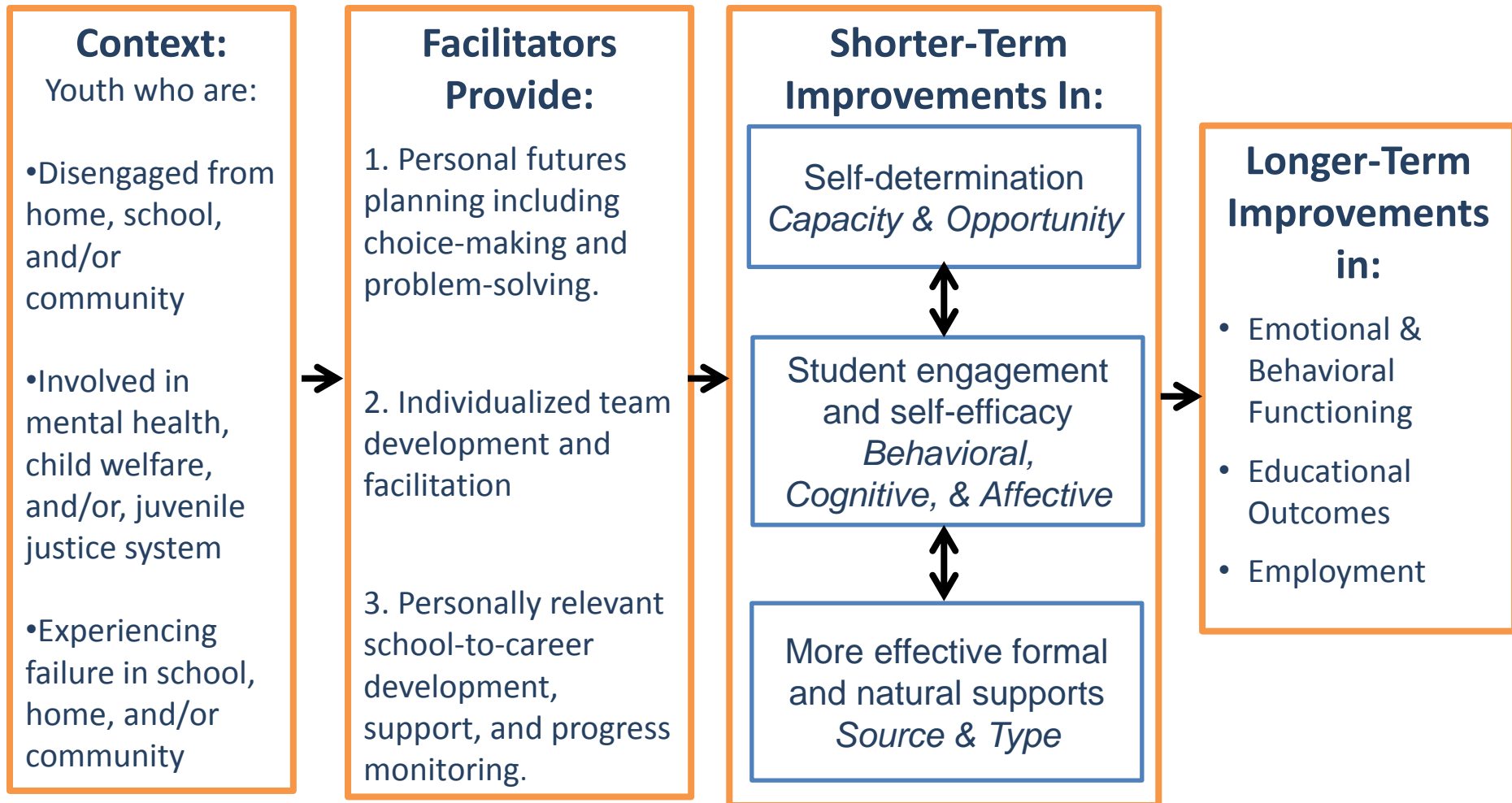
# RENEW Strategies

1. Personal Futures Planning
2. Individualized Team Development & Facilitation
3. Implementation and monitoring of individualized school and vocational supports
  - Braided (individualized) Resource Development
  - Flexible, or Alternative Education Programming
  - Individualized School-to-Career Planning
  - Naturally Supported Employment
  - Mentoring
  - Sustainable Community Connections

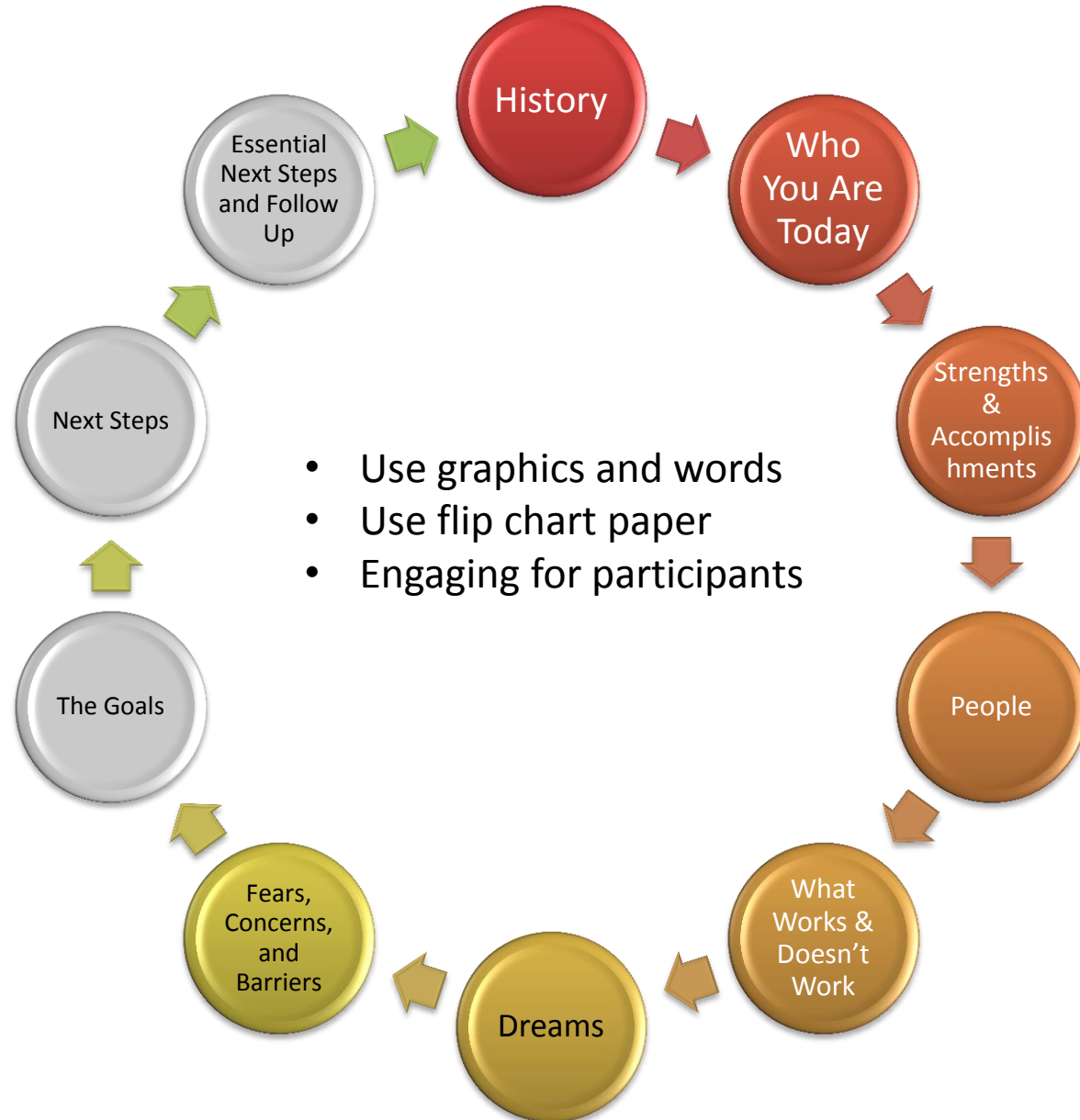
# RENEW 4-Phase Process



# RENEW Theory of Change



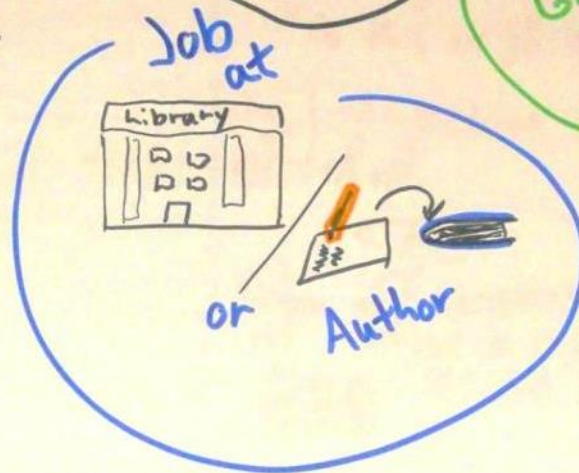
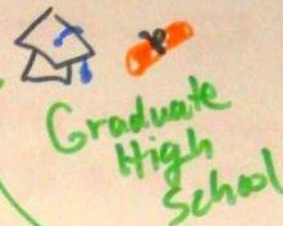
# RENEW Maps



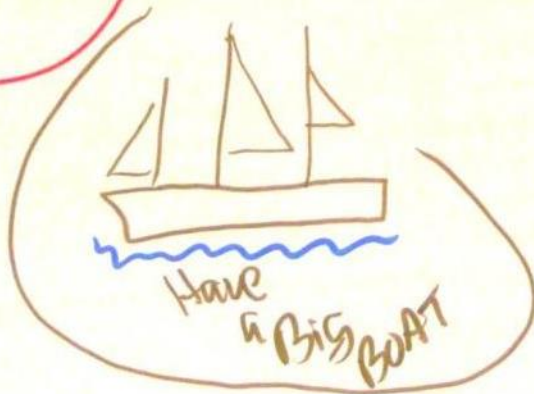
T's

DREAMS

MAP



Big House

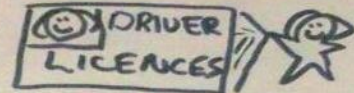




# Goals This Year



Probation



Get My...



Get a Job...



Get Good Grades



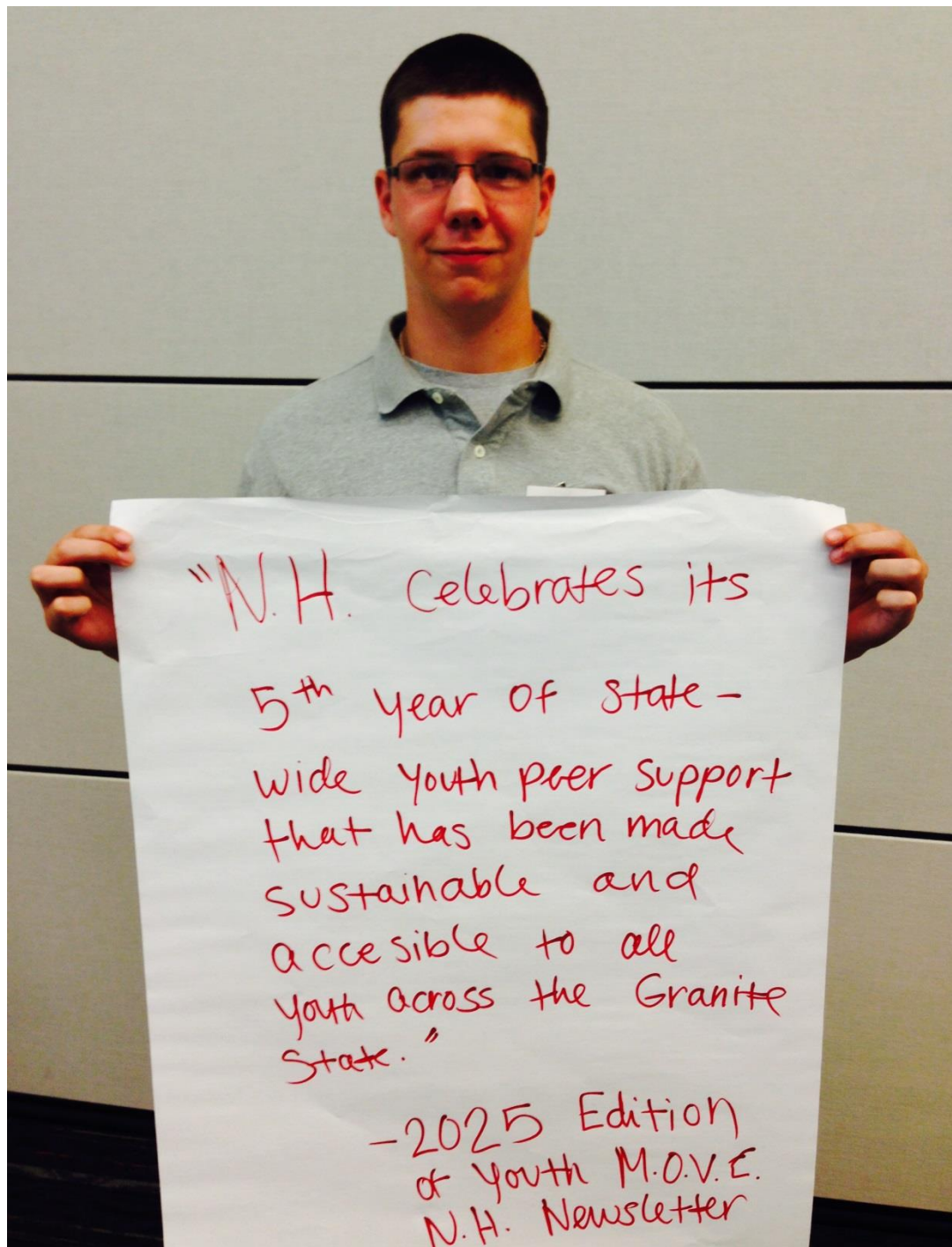
To Stay out of Trouble



# Youth MOVE NH- Youth Motivating Others Through Voices of Experience

Youth M.O.V.E New Hampshire works as a diverse collective to advocate for youth rights and voice in public systems and in communities for the purpose of empowering youth to be equal partners in the process of systems transformation, while also coaching others in the area of authentic youth involvement.

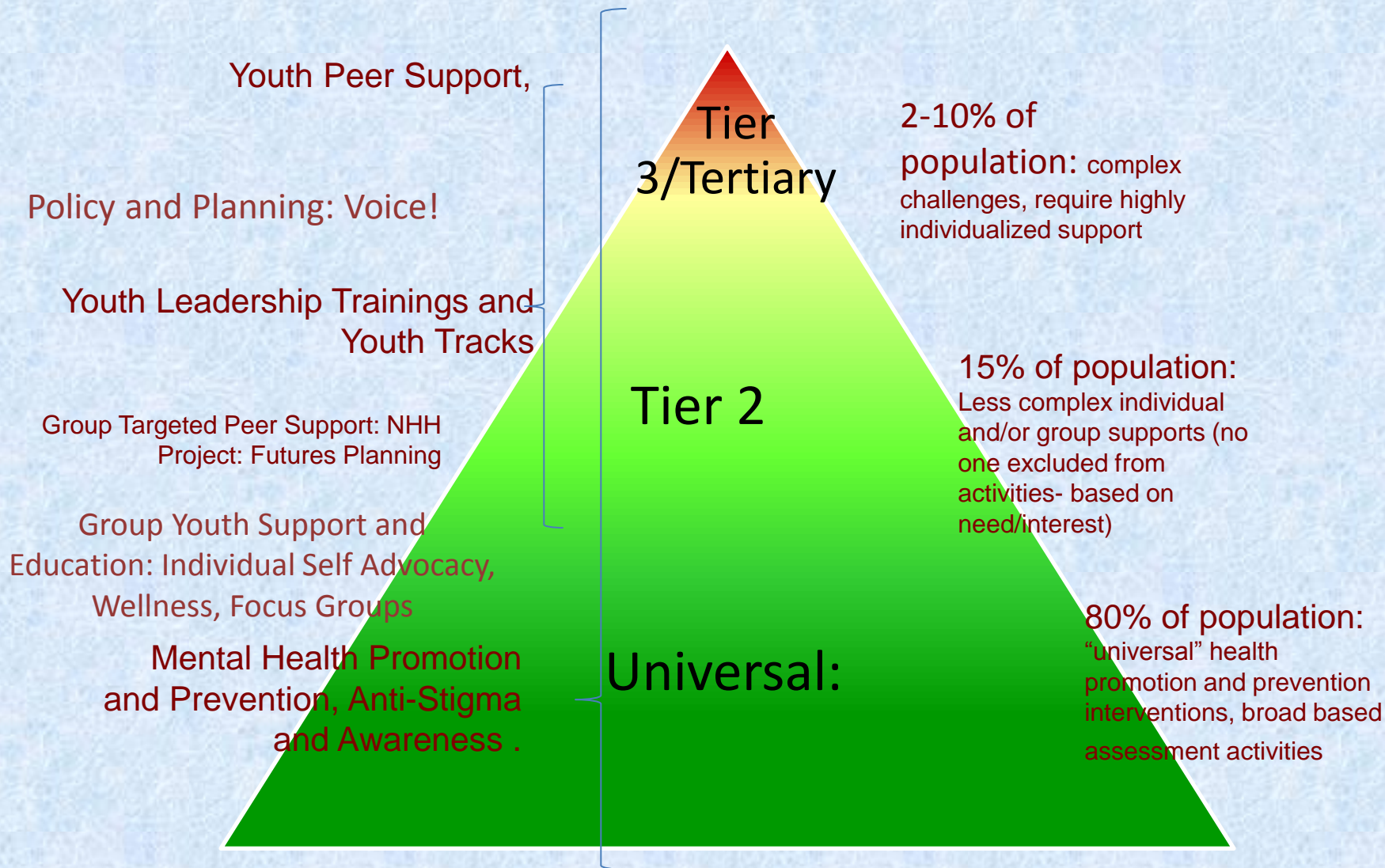
## Youth Move NH Vision:



# Youth Engagement and Leadership: New Hampshire Moving Toward Youth Driven Systems and Supports

**Youth Driven** means that young people have the right to be empowered, educated, and given a decision making role in their own lives as well as the policies and procedures governing care for all youth in the community, state and nation. This includes giving young people a sustainable voice in **policy, planning,** and **evaluation** efforts and then listening to that voice.

# YouthMOVE NH: Tiers of Activity



# YouthMOVE NH: A Brief History

- State chapter of YM National (2013)
- Focus group work to inform NH Children's Behavioral Health Plan (Summer 2012)
- Funded by SAMHSA SoC Grant for Youth Coordinator and Youth Rep policy and leadership positions (1.33 fte)
- Funded by SAMHSA Statewide Family Network Grant to perform "universal" tasks, participate in NH Safe Schools grant leadership (.125 fte)
- Will pilot YPSS this year (.5 fte, increase)

# NH Peer to Peer Support Model

- Why Peer to Peer Supports? *Evidence!*
- What does it look like?
  - ✓ 1:1 and mutual growth opportunities (reflection)
  - ✓ Non-biased and non-judgmental: Cultural & Linguistic Competence
  - ✓ Peer Support Specialist works for and with youth
  - ✓ Focus on wellness and prevention, self awareness and self advocacy
  - ✓ Trauma informed in approach- not “what’s wrong with you?” but “what has happened to you? What is your story? Your journey?”
  - ✓ Value placed on shared journey, experiential learning
- **NOT** Mentoring!! No power over, not about knowing better but about understanding shared experience or perspective
- **NOT** a medical or clinical service; not a crisis response or intervention

# Peer to Peer Development in NH

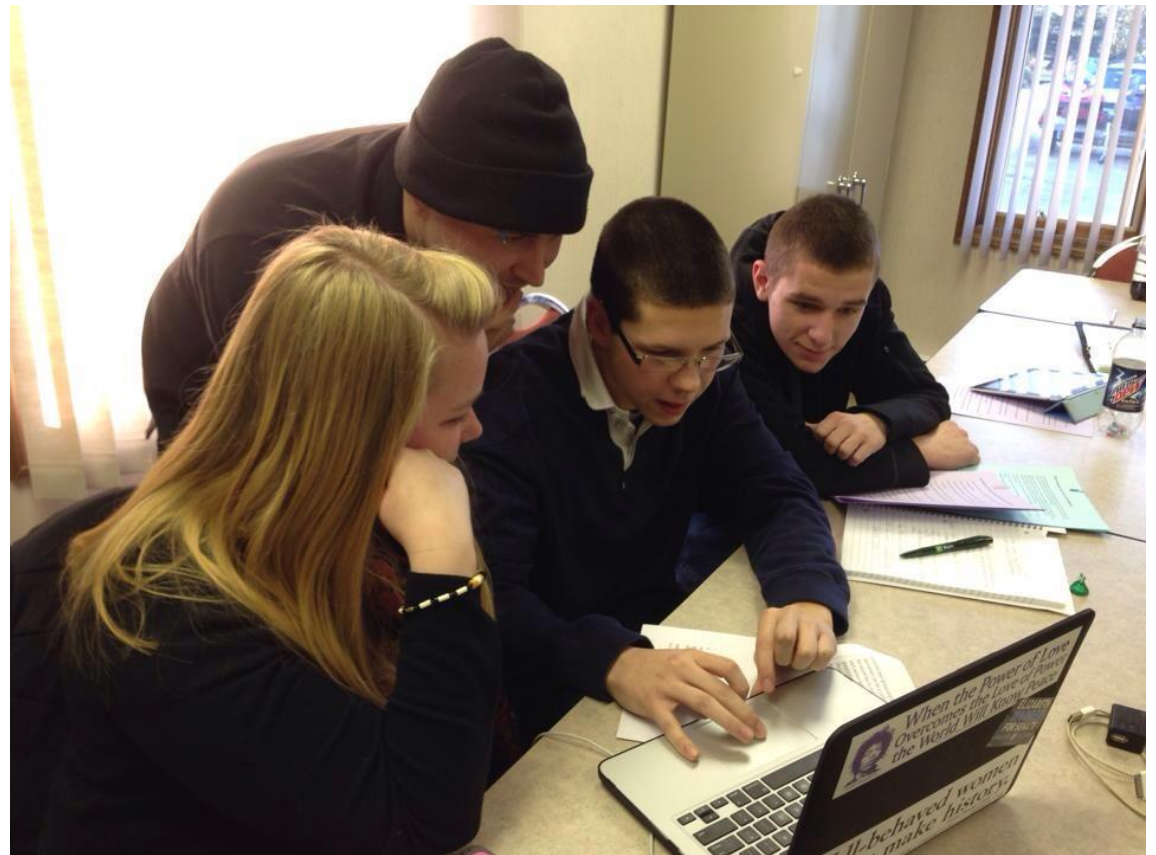
## Section Agenda:

- Peer to Peer Timeline
- Show Practice Profile
- Job Description
- Training Curriculum
- Coaching System
- Fidelity Instrument



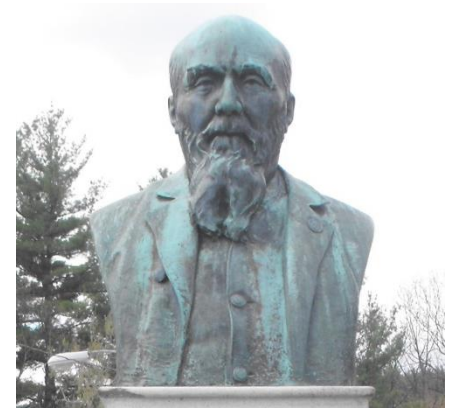
# Peer to Peer Implementation Activities/Timeline

- Peer to Peer Supports Workgroup established-  
YM NH plus RENEW staff (some crossover)



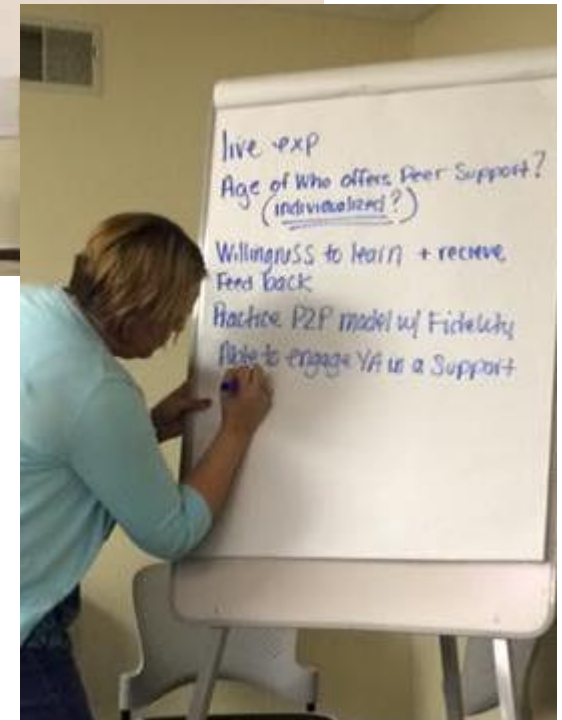
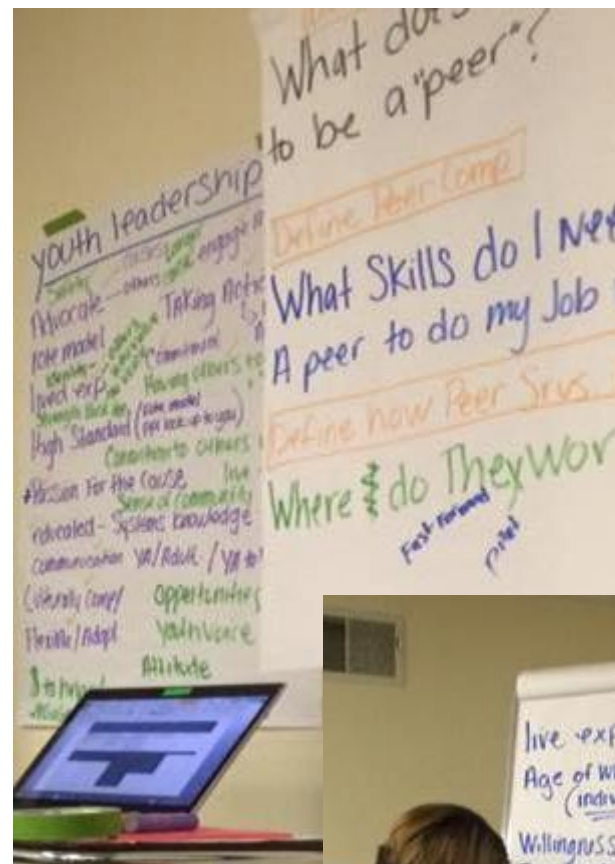


- Peer to Peer Supports RENEW Pilot Program  
Exeter: School-based, locally- funded RENEW project



**THE FULLER  
FOUNDATION, INC.**

- Consultation with YM National – Intro Trauma Training for all YMN staff and RENEW allies
- Contract with YMN (Brie Masselli)
- Research, Consultation, Planning Retreat
  - Narrowing/Elimination of Models- “essential elements”




- NH Youth Coordinator (Hannah)
  - Attended national Youth Move meeting to draft model for Youth Peer Support in Wraparound
    - University of Maryland TA providers for System of Care



# System of Care Fast 4Ward Support

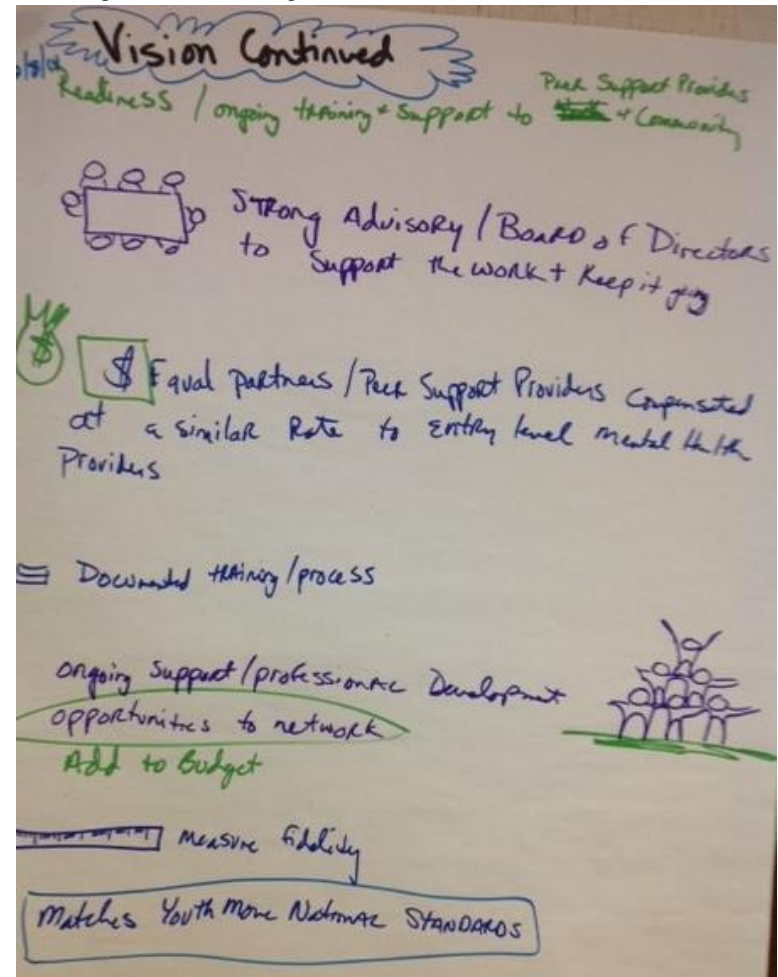
Peer to Peer Supports  
2 year pilot budget:

12/18/14 Proposed Budget DRAFT For Youth Move Peer Support

What	Unit	Rate	Total
2  FT FTE	2	27,040	54,080
Range 25% FTE		14,000	
Travel per staff	2	5,000	10,000
HR consultations liability, etc.			
IPS Training	2 days	\$6,000	
Manual + tools	20 year x 15	\$15 manual	\$300
IPS Consultation/Technical Support from National			
Conference Planning + Registration IOD		11,000	
Technical Assistance from Brice	200 hr		
2 hr/week 6 months			2400
<del>Training</del>			
Supervisor/mentor to Peer Support providers			
Attending/presenting @ conferences	4 pp	1000 PP	4,000
Curriculum Development			
Fidelity measures			
Hire a writer/editor to help w/ manual			
Printing/copying		\$500	



# Summer Peer Learning Meeting hosted by YMN with: MA, NC, Guam, NY, NH, SC



# Practice Profile Development (Fixsen, Implementation Science)

NH Youth Peer to Peer Supports Model Practice Profile will inform development of:

- Competencies
- Organizational policies and processes
- Job descriptions and qualifications
- Medicaid service definition

# Practice Profile 1 of 14 Critical Components

Critical Component (non-negotiable)	Define how does this Critical Component contribute to the Outcome?	Ideal “Gold Standard” of the Critical Component	Emerging Practice (Acceptable Variation) of the Critical Component	Unacceptable Variation of the Critical Component	Learning Outcomes
<b>Must be willing to self-identify lived experience</b>	Builds connections, trust, and relationships with peers	<p>Able to use lived experience to build connections to peers.</p> <p>Able to distinguish times when sharing elements of personal story is of functional use</p>	Peer supporter is filtering at a high level as they become competent/ confident	<p>Sharing experience for personal gain.</p> <p>Leaning on peer being supported when in crisis yourself</p>	<ul style="list-style-type: none"> <li>• Ability to share story- Strategic Sharing Training</li> <li>• Utilizing story with discretion</li> </ul>

# Training Curriculum Outline

## Core Training:

- System of Care
- Youth Move
- Peer to Peer Organization and Roles
- Navigating Systems
- Strategic Sharing
- Strategic Inquiry
- Creating Mutual Space
- Active Listening/Motivational Interviewing
- Conflict Resolution
- De-Escalation Strategies

## Supplemental:

- Person Centered Planning
- Trauma Informed Practices
- Cultural Insight Training
- Youth mental Health First Aid
- Special Education System
- Substance Abuse
- Healthy Relationships
- Adolescent Development
- Wellness Training
- Other...



# Job Description



## Ethics and Boundaries

# Peer Supporter Coaching Protocol

Supervision Type	Frequency (at minimum)	Provider
<b>Assist in Preparing for First Peer Support Experience</b>	First meeting and as needed	Lead Peer Support Specialist
<b>Group</b>	Monthly	Lead of Peer Support Specialist (acquired all training and has experience)
<b>Direct 1 on 1 Supervision</b>	Twice a month (every other week)	Director of Host Agency (Granite State Federation of Families) or Local Agency Supervisor (i.e. School director of counseling or Mental Health Supervisor or RENEW Trainer)
<b>Observation or Recording (used with fidelity instrument)</b>	1x/month first three months  2x/year thereafter	Lead Peer Support Specialist and/or Director of Host Agency
<b>Administration of Fidelity Instrument (Not Developed)</b>	2x/year	Lead Peer Support Specialist and/or Director of Host Agency

# Sustainability & Funding

- 1915i Medicaid State Plan Amendment:
  - Writing group participation
  - Service Description
  - Provider Qualifications
  - Rate Setting in Process
  - Must be ready to go upon approval



# Coming Soon...

- Competencies/Professional Development Planning
- Fidelity Instrument- In draft development via our partners at Antioch NE University
- Participant Empowerment Instrument- considering Walker, J. S. & Powers, L. E. (2007). Youth Self-Efficacy Scale/Mental Health and the Youth Participation in Planning Scale. Portland State, OR Research and Training Center

# RENEW Youth Mentor Role

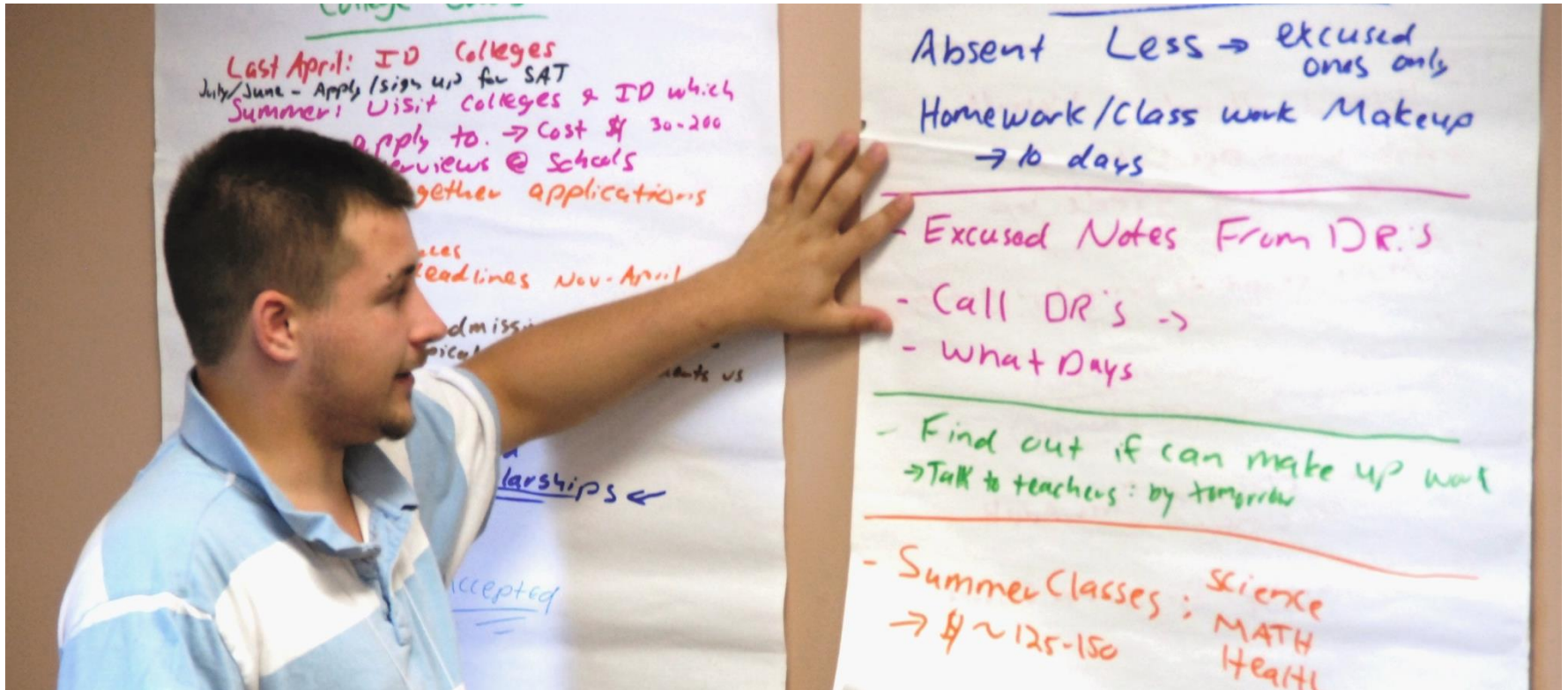
Justin Tilbe

IOD

University of New Hampshire

RENEW Graduate

# New Hampshire Hospital Pilot



# RENEW At New Hampshire Hospital

- Heidi Cloutier, Justin Tilbe , Julie Brown & Meredith Foote
- Weekly group; Thursday mornings – 10 am -12 noon; older youth (14-18); voluntary
- 36 different youth participated in FP Group over 8 weeks ( total youth participating in all groups =57), 21 youth attended more than 1 group.
- Average group size = 7

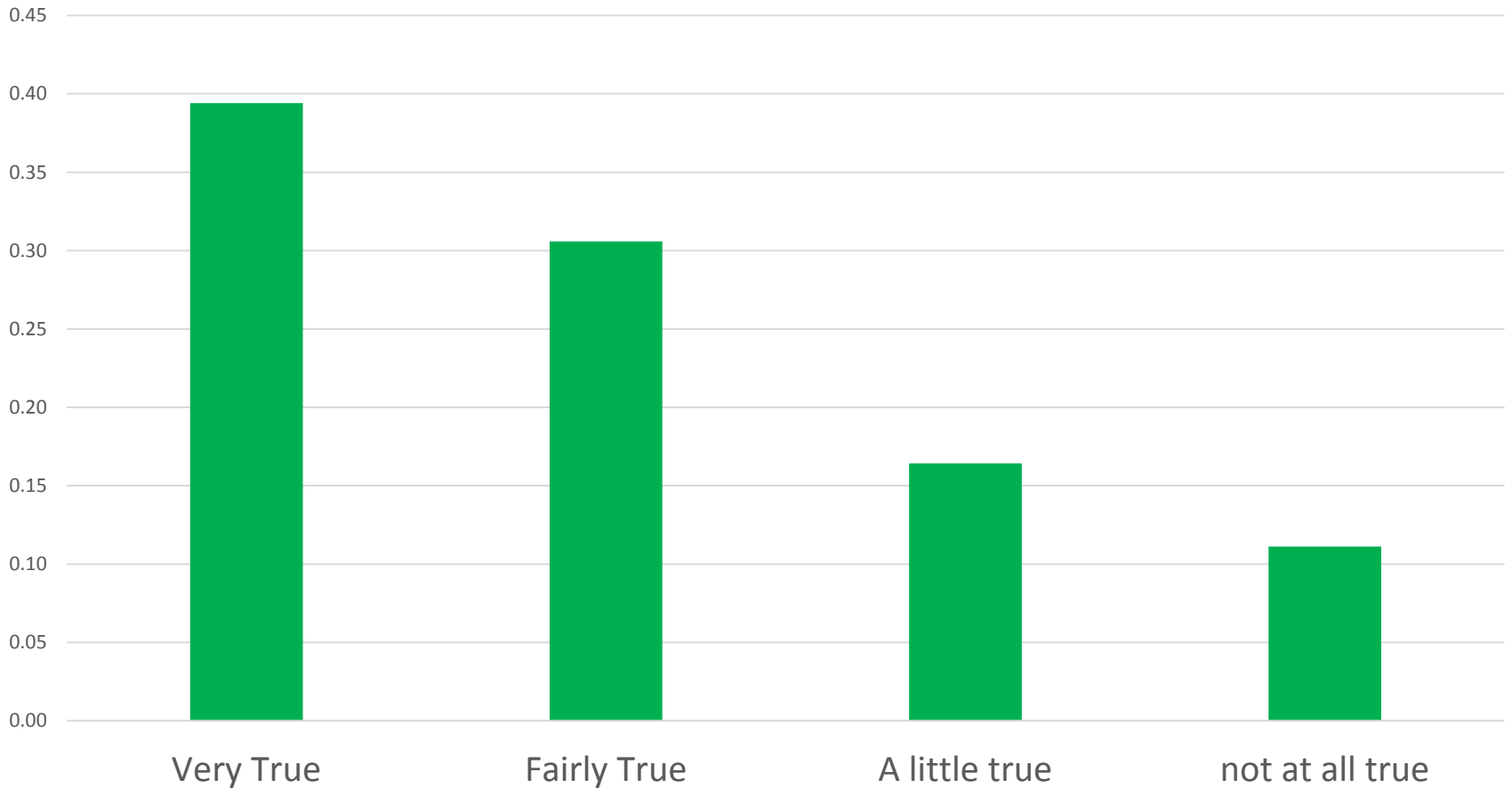
# Group Design

- Introductions, Norms, Justin shared his maps, & introduced RENEW, youth mapped on flip chart paper Dreams, Goals, & Action Plan with adult support
- 1 staff worked with new youth and 1 staff worked with youth who had attended more than 1 group
- By week 7 separated the group into 2 -50 minute groups

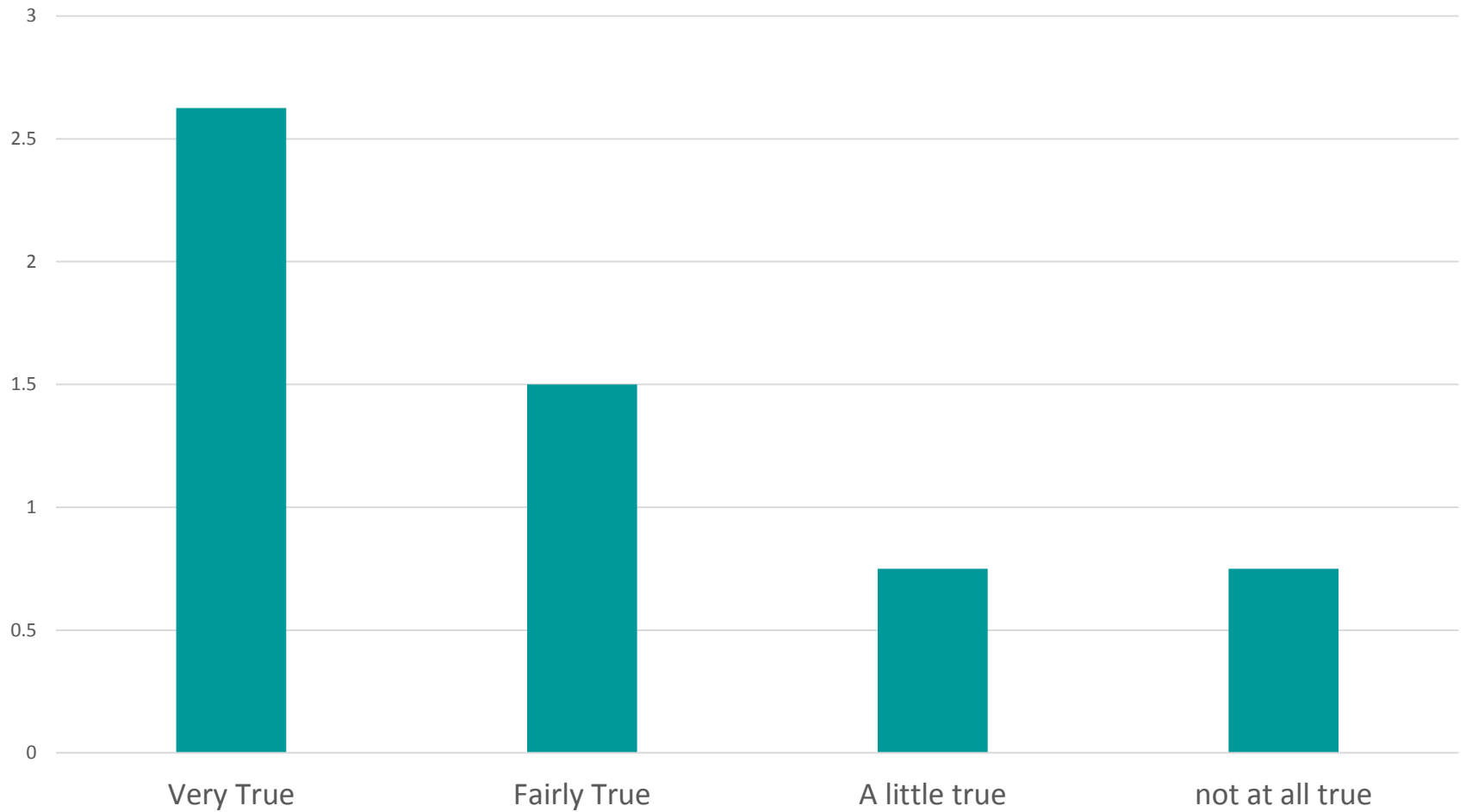


# Exit Evaluations

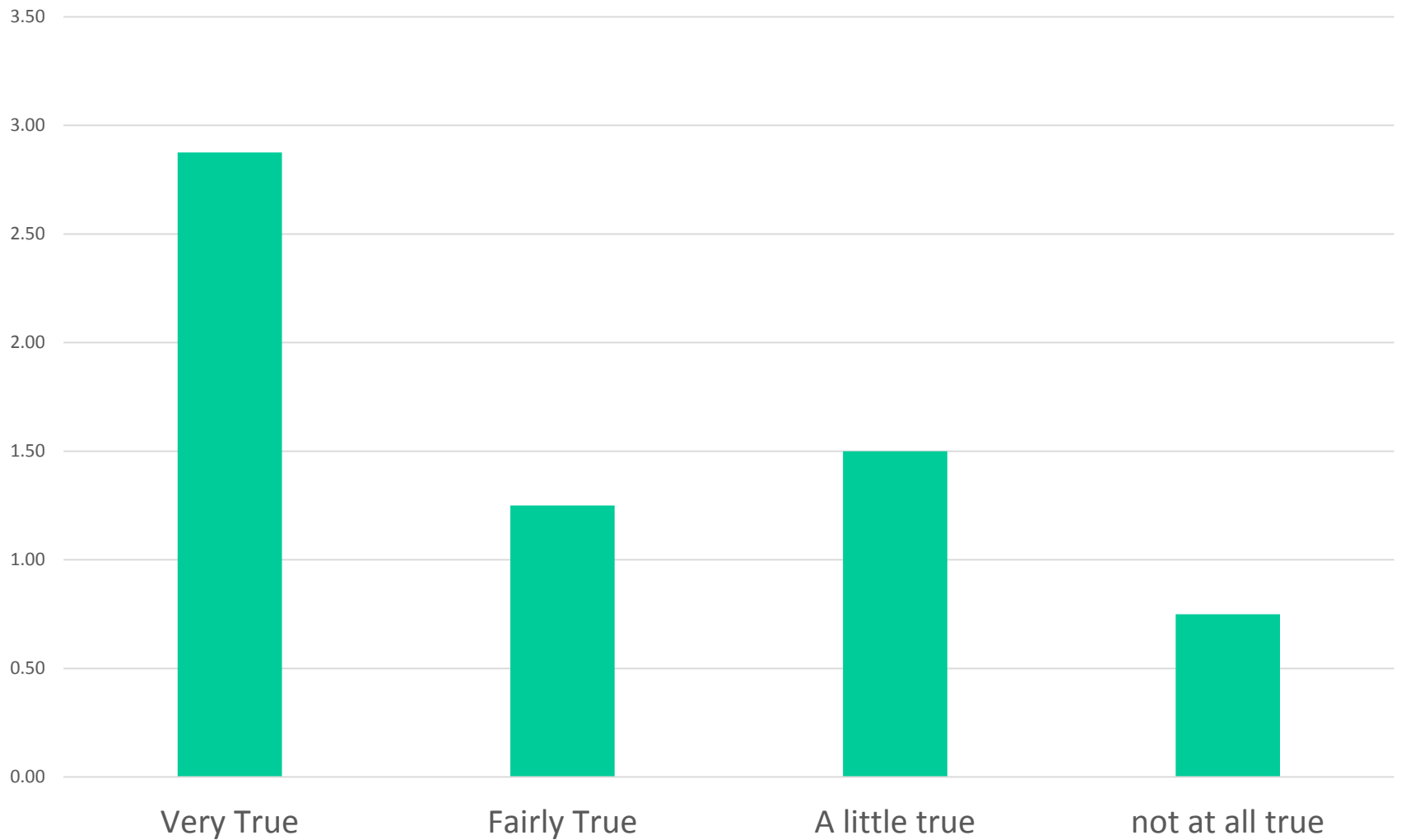
I feel more hopeful now than I did before today's meeting



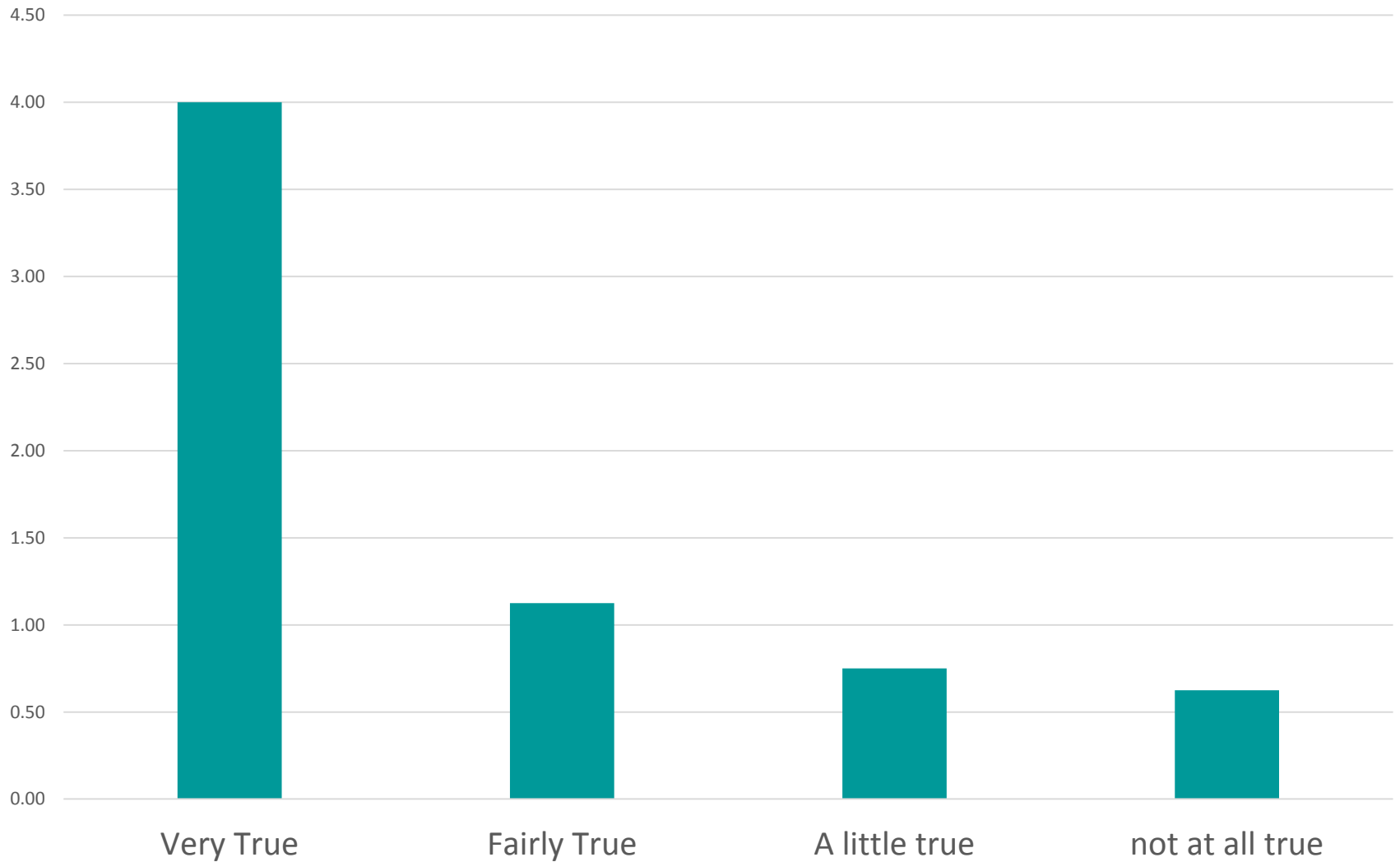
I have a better idea of what my goals are and what I want to do



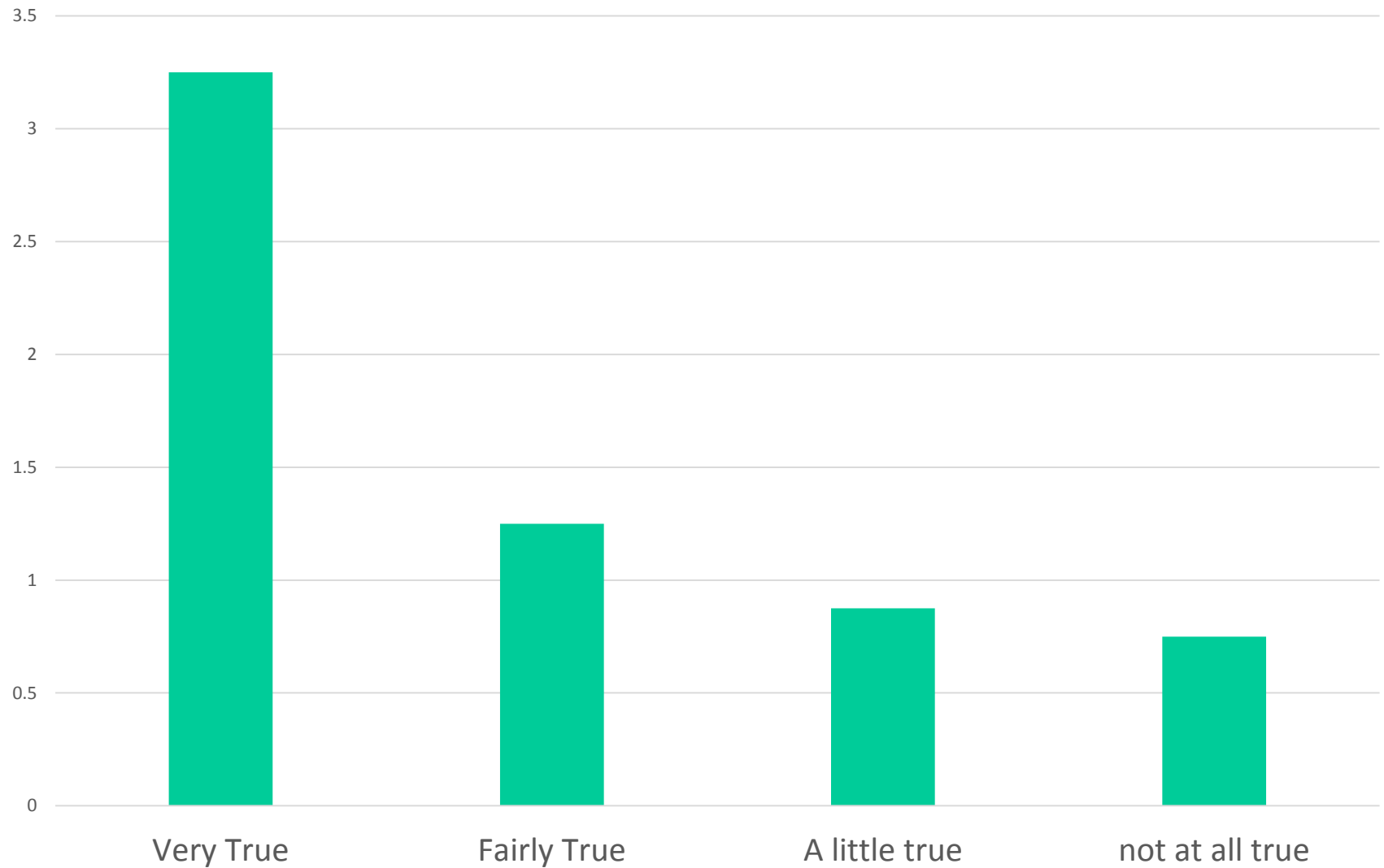
## I feel more in control of my choices than I did before



## I felt people listened to me today



## This was a good use of my time



# Plan for Sustaining Futures Planning Group at NHH

- Julie & Meredith or other nursing staff members facilitate 2 groups: one group is for youth who have participated before and one is for new participants.
- Justen Tilbe continued to assist
- Discharge Plans include referral to Community Mental Health Centers & schools with RENEW Facilitators &/or Wraparound Facilitators

# Exeter Youth Mentor RENEW Pilot



# Demographics

- Students that participated in RENEW fit the following profile:
- Average GPA 1.326 (17 students that participated)
- 64% living in single family homes
- 29% involved in the Juvenile Justice System
- 23% involved in Child Welfare



# Youth Mentor's Role

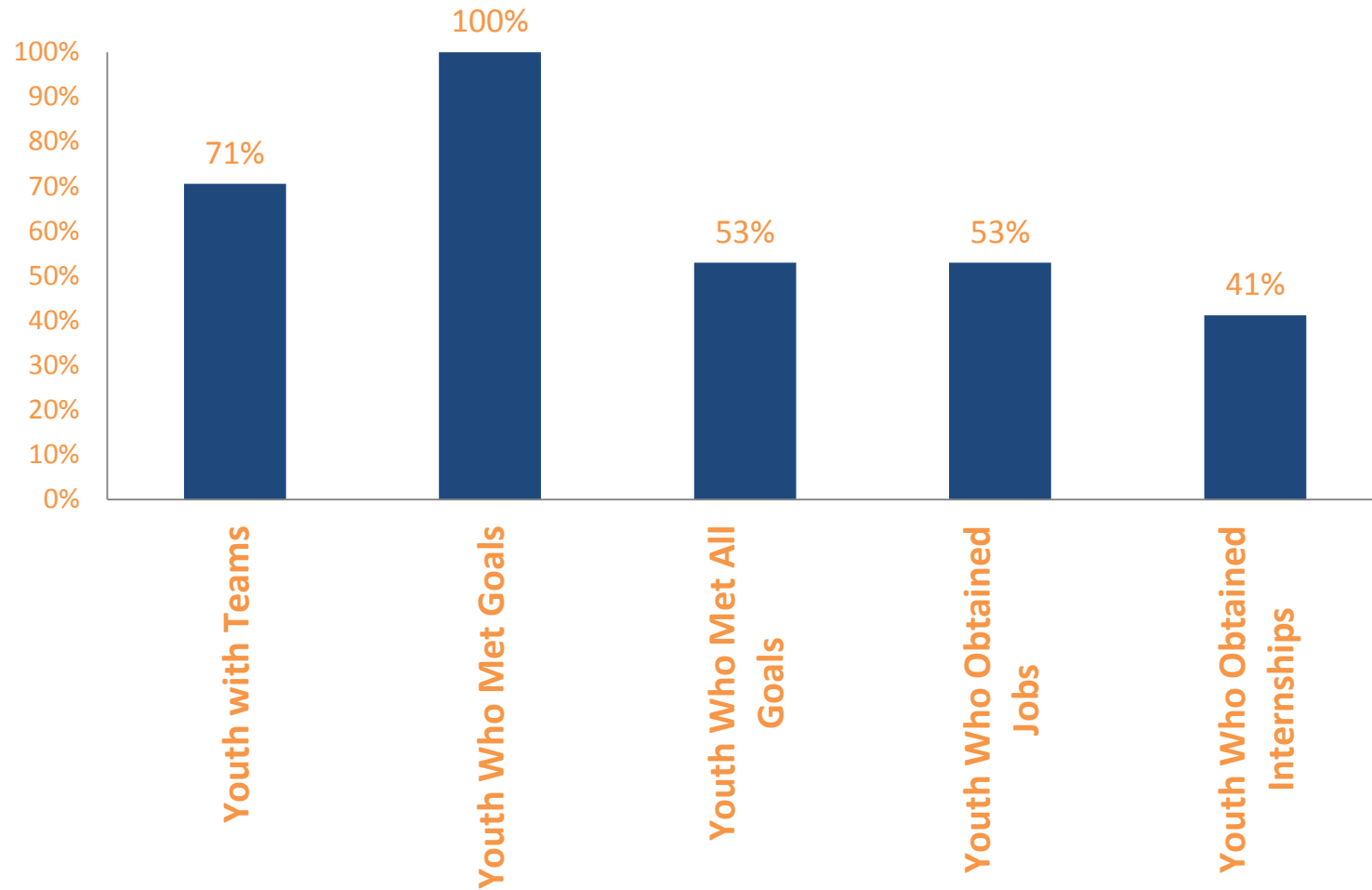
- To give a perspective to youth and facilitators on the RENEW process
- To check with youth to see if the needs are being met
- Provide feedback to the youth from own personal experience
- Talk with youth on how they feel about their facilitator & the process

# Why is this Important?

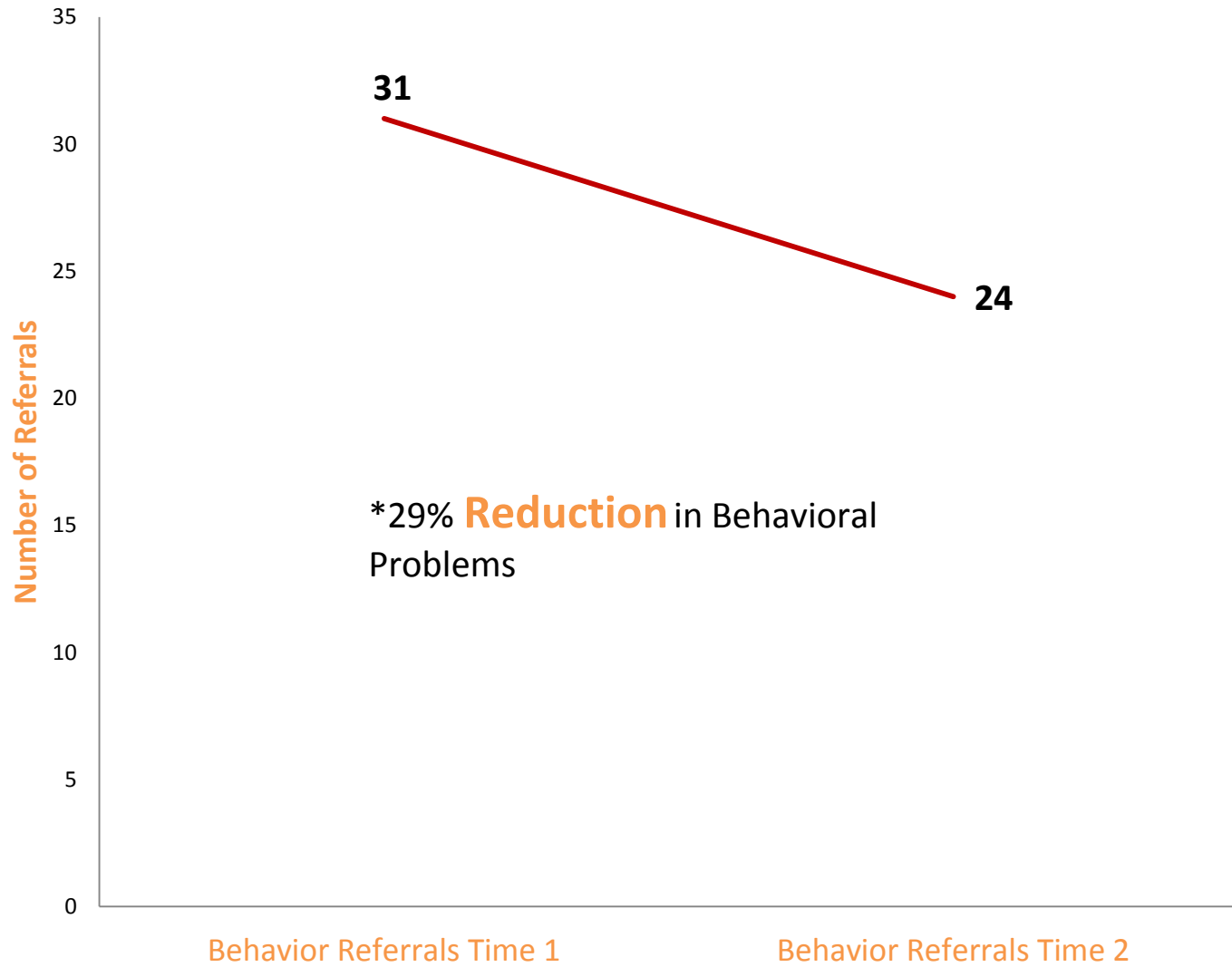
- Help youth speak freely to the youth mentor
- Not a significant age difference
- Providing opportunities to relate based on shared experiences.



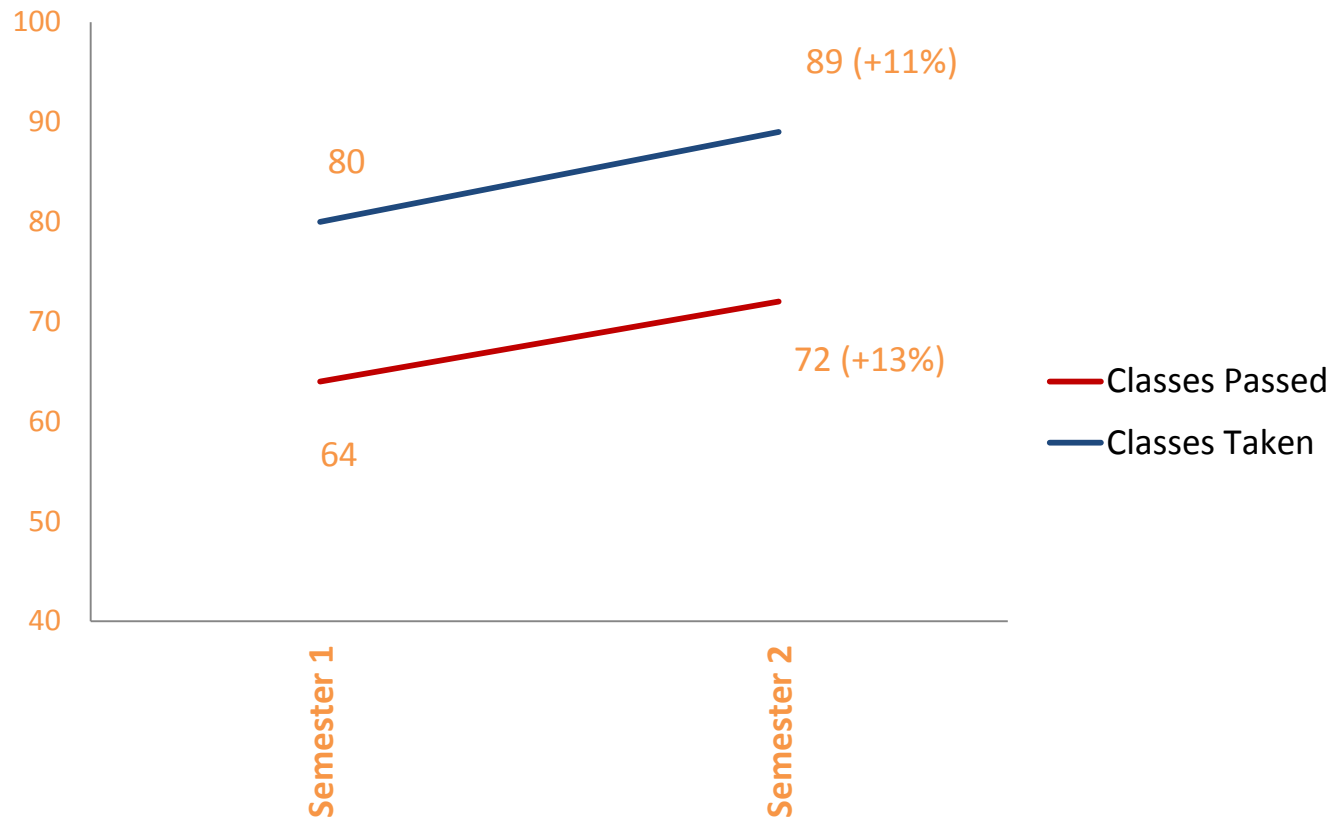
## Exeter Outcomes for Percent of Youth Enrolled (n= 17)



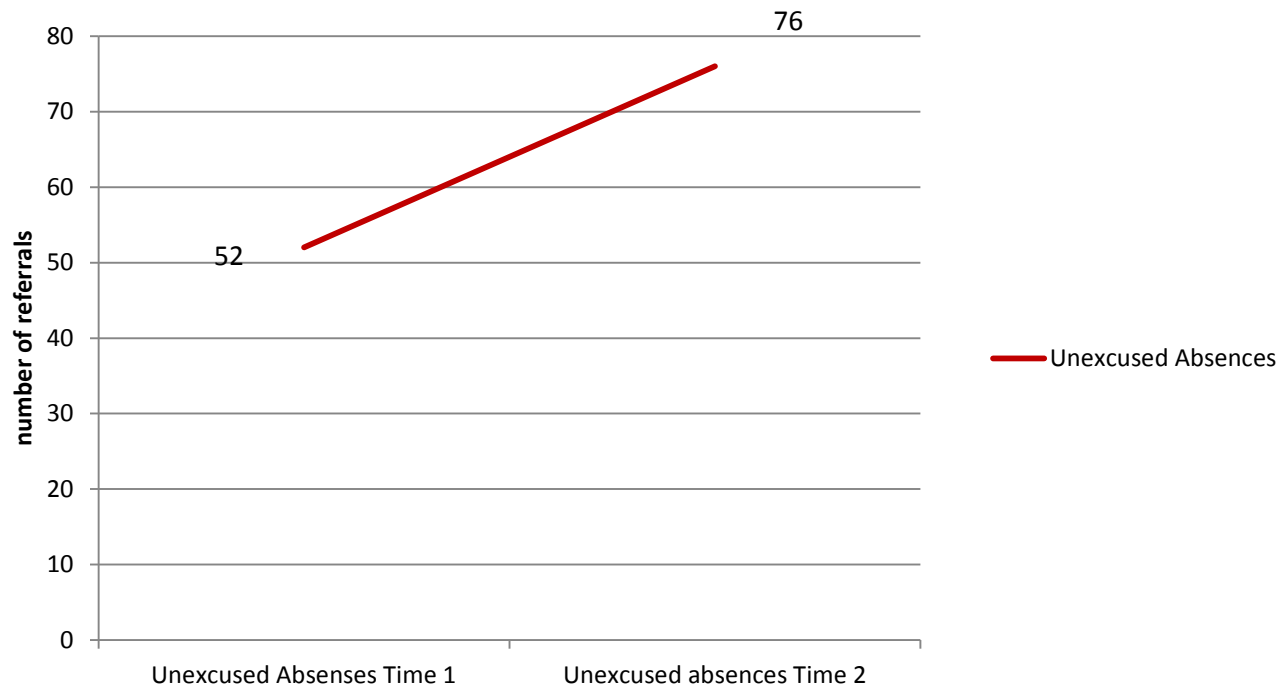
## Number of Discipline Referrals (n=17)



## Exeter High RENEW Academic Outcomes (n=17)



## Number of Unexcused Abseneces (n =17)



# Reflections, Questions, Comments

# Thanks!

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<https://www.facebook.com/YOUTHMOVENH>
- Follow us on Twitter: [https://twitter.com/RENEW\\_IOD](https://twitter.com/RENEW_IOD)
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