



# Using best practices can ease the way for keeping youth engaged in Wraparound

**By Janet Walker**

Wraparound is intended to be a process that is driven by the ideas and perspectives of family members — including not only parents or other caregivers, but also the youth or child whose needs have brought the family to services. Practice can fall short of this ideal, however, and research has documented that young people are often not meaningfully included as full partners in the Wraparound process. The research literature also provides guidance about “best practices” that Wraparound teams and programs can use to ensure that young people are meaningfully engaged with their teams. Studies that evaluate the use of these best practices are currently underway, and preliminary evidence indicates that use of these best practices does indeed increase youth participation in —and satisfaction with — Wraparound, *while also* increasing satisfaction among caregivers and other team members.

It should not be surprising that Wraparound teams can find it difficult to fully engage and include young people in the planning process. There is a large body of research on adolescent development and experiences in mental health therapy, and this literature describes a series of challenges that may make it difficult for Wraparound teams to engage youth — particularly older adolescents — in a way that promotes trust and unites the young person, parents or caregivers, and the team in support of the plan.

One set of challenges is related to the expectation that young people will be willing to disclose personal information to a group of adults that includes caregivers and other authority figures. During adolescence, young people gradually expand the boundaries of what they consider their private sphere, and become more reluctant to disclose the kind of information that is likely to be important in creating an effective Wraparound plan. Other challenges stem from what is typically a lack of agreement between youth and their parents/caregivers, and between youth and clinicians, about the need for mental health treatment and its purpose or goals. Research has shown that parents and children often disagree regarding whether treatment is needed, and young people typically feel that they are not part of the decision to seek treatment. Young people also tend to disagree with their parents — and with clinicians — about what the target



goal of treatment should be. And they tend to be less satisfied with mental health services than their parents or caregivers.<sup>1</sup>

Given these realities, it makes sense that Wraparound teams often encounter challenges in their efforts to build a team process that fully integrates the perspectives of young people, family members and professionals and other team members.<sup>2</sup> Fortunately, the research on youth engagement, teamwork, and self-determination offers considerable guidance regarding what teams can do to overcome these challenges. A review of this research led the authors to recommend [a series of best practices](#) for ensuring that young people participate meaningfully on their teams.<sup>3</sup> A number of the best practices focus on three types of things that should happen at the team level:

1. having someone work one-on-one with the young person to help him/her clarify his/her ideas and goals for the team meeting, and to prepare him/her to communicate these effectively to the team;
2. ensuring that there is strong facilitation during the meeting so that the young person is supported in his/her participation; and
3. creating mechanisms for accountability, so that the young person—and other team members—know what kind of follow-up occurs once the team has made its decisions.

Additionally, the authors list best practices that are needed at the level of the agency or organization. For example, the organization must be prepared to invest or redirect some resources to make it possible for someone to work one-on-one with young people to prepare them adequately for team participation. The organization may also need to invest in training for team facilitators, so that they will have the skills needed to make sure that team meetings are conducive to young people's participation. The organization also needs to invest resources in

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<sup>1</sup> Research documenting these assertions is described in [Walker, J. S., Pullmann, M. D., Moser, C. L. & Bruns, E.J. \(2012\). Does team-based planning work for emerging adults? Findings from studies of Wraparound. \*Psychiatric Rehabilitation Journal\*, 35, 189-198.](#)

<sup>2</sup> For more information on the research documenting a lack of youth involvement in Wraparound, and in team planning more generally, see [Walker, J. S., & Child, B. \(2008\). \*Involving youth in planning for their education, treatment and services: Research tells us we should be doing better\*. Portland, OR: Research and Training Center on Family Support and Children's Mental Health, Portland State University.](#)

<sup>3</sup> The best practices are summarized in [Walker, J. S., Gaonkar, R., Powers, L., Friesen, B. J., Child, B., & Holman, A. \(2007\). \*Best Practices for Increasing Meaningful Youth Participation in Collaborative Team Planning\*. Portland, OR: Research and Training Center on Family Support and Children's Mental Health, Portland State University.](#)



monitoring its efforts in these areas, to see whether or not young people are actually participating more as a result.<sup>4</sup>

The Research and Training Center for Pathways to Positive Futures (Pathways RTC) has been working for more than eight years to develop and test an intervention that reflects the best practices outlined above, and that effectively increases young people's participation on their teams while also building their empowerment and self-determination. The intervention, called "[Achieve My Plan](#)" and known as AMP for short, was developed in partnership with young people who had experience with team-based treatment planning for a mental condition. Providers and family members also consulted in the development of the AMP intervention.

In the AMP intervention, the young person works with an AMP "coach" through a series of activities consistent with the best practices outlined above. The coach also attends one or more team meetings to support the young person's participation. Results from the initial pilot test of AMP, as well as preliminary findings from the randomized study of AMP (which is just wrapping up) indicate that the AMP intervention has a significant impact on young people's participation and empowerment in Wraparound team planning, and on their satisfaction with team meetings. Preliminary findings also indicated that other team members were also more satisfied with AMP than with meetings as usual, and teams spent their time more efficiently as well. The research team at Pathways RTC is currently partnering with [Youth MOVE Oregon](#) to develop and test a peer-delivered version of the AMP intervention called AMP+. More information about the AMP intervention, as well as resources to help Wraparound organizations and teams implement best practices for youth participation, are available from the [AMP project at Pathways RTC](#).

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<sup>4</sup> [The Research and Training Center for Pathways to Positive Futures](#) at Portland State University has developed and validated some [measures that are useful for assessing youth participation in planning and mental health empowerment](#). They have also developed a post-meeting survey that team members can complete in 2-3 minutes after a team meeting.