THRIVE EMERGE

BEYOND HIGH SCHOOL:
CLARIFYING LIFE CHOICES
FOR THE NEURODIVERGENT TEEN AND YOUNG ADULT

THE CHALLENGE OF THE POST-SECONDARY WORLD

- “I don't know what I want to do with my life.”
- “I don’t like school and school doesn't like me.”
- “I don't feel ready to be an adult.”

If you are a parent with a neurodivergent teen or young adult just starting to make that transition to life beyond post-secondary education, you are most likely quite familiar with the dilemmas presented by this developmental stage.

Throughout their lives, our kids – because of their unique brains and ways of experiencing the world – have struggled to manage the challenges of the neurotypical world – social, academic, employment, even family life. For two decades, their brains have wrestled with regulating sensory, emotional and cognitive data and have missed key developmental opportunities that are easier to come by for the kids whose brains deal with life’s demands with more ease.

Ask your neuroatypical kid about their readiness for the next life phase. You will likely get a sense of the trepidation and even confusion that accompanies their transition into the “real world.” That’s because readiness for adult life requires resilience, and these kids recognize intuitively that they don't have the resilience to successfully master the increasingly complex demands of adult life.

Resilience – which we also refer to as “creative adaptability” – is itself rooted in several key psychological capabilities, including:

- The ability to organize one’s time and life tasks
- The ability to plan projects and complete tasks
- Managing overwhelming emotions – and even just daily stress
- The mental flexibility to “go with the flow” as expectations change and events go differently than planned
- Having a strong sense of confidence and identity
- Being able to create and draw on a network of peers for support and advice
- Having clarity about one’s interests and strengths

For neurotypical kids, these skills and assets have been honed over two decades of practice at home, school and work. Adult life, though requiring patience and hard work, presents itself as an exciting opportunity of discovery and exploration, in which dreams take shape and hopes are fulfilled. In a sense, the next level of the house is being built on a foundation that is strong and sure.

But neurodivergence robs our children of this ease and joy of transition, providing instead a shaky underpinning and an incomplete mastery of psychological and life skills on which to create a more complex and rich life.

In light of this slower and more complicated developmental course, parents must adjust their expectations for next steps beyond high school. Success at a four year college is often a difficult goal to attain, and the family needs to think creatively in formulating the next level of training that will lead to that unique young adult's version of independent life.

Flexibility, patience and a realistic assessment of the young adult's strengths and limitations need to inform what will hopefully be a mutually respectful conversation. Parents and kids must remind themselves repeatedly that there is no one right path through life, and that life is a series of experiments in which we try on a particular experience – a school, a job, a relationship, a place to live – to get a better sense of what we like and do well – and what we might want to do differently in the future.

ASSESSING YOUR CHILD'S READINESS TO TRANSITION TO COLLEGE

For any young adult headed off to college, the goal is to prepare them for as successful an experience as possible. With the neuroatypical child, carefully building the academic, social, emotional and life skills scaffolding is particularly important.

Many of these young adults have been in tightly structured situations before they leave that have helped them compensate for a range of cognitive and emotional challenges, such as ADHD, ASD, depression, social anxiety, slow processing speed, learning disabilities and so on. When they move away from home, parental, professional and academic supports may fall by the wayside or not be as well organized or as consistently applied, thus dramatically multiplying the likelihood of failure.

Parents often underestimate the amount and nature of the support that will still be needed for these young adults to successfully manage the greatly accelerated demands of living independently in the college setting. This following checklist provides some guidance regarding the key factors to consider in structuring the young adult's support system.

It is most advisable to put these supports in place well in advance of the young adult's departure from home, so ample opportunity is afforded for practicing skills, setting up routines and establishing clear channels of communication. This will require multiple – and perhaps difficult -- conversations needed BEFORE they leave for school.

One very important challenge that will not be easily resolved is the inherent conflict between the young adult's desire for independence and their need for closer monitoring and support compared with their peers. This type of conversation might best be undertaken with a trusted advisor or counselor, in which the emotional conflicts that exist between parent and child are not

activated, and in which the young adult can feel more receptive to clear feedback about their condition and unique needs.

Families who follow through on establishing a strong foundation for performance – as well as getting buy-in from the young adult -- will do themselves and their child a great favor by significantly increasing the chances for success. Planning helps the young adult overcome their cognitive and emotional limitations, creating instead capabilities that grow from their strengths – and is well worth the effort.

FOUNDATIONAL EXPECTATIONS

1. If the young adult is to be successful, they must demonstrate BEFORE they leave for school a proven willingness to use support – academic, emotional, professional, social, physical health. Failure to establish this foundational capability greatly increases the risk of withdrawal from the college

2. Believable communications from the young adult as evidenced in frequent, honest reports:
    a. Subjective information from the young adult
    b. Reports from the treatment team
    c. Access to the grading system

3. Buy in from the young adult that s/he agrees to this system of monitoring and treatment

4. Realistic expectation set for the young adult and the parents about possibility of failure, as well as what is needed to increase success

5. Clear academic performance goals set, as well as an agreement as to when it might be appropriate to withdraw from school

6. Normalization of the possible course of collegiate academics for neurotypical kids = different from peers and not shameful

7. Skin in the game: young adult may need to work part-time in order to fund part of the education (even if a small amount)

TREATMENT TEAM

1. Multidisciplinary mental health team, including:
    a. Medication manager – psychiatrist, psychiatric nurse practitioner

   b. Executive Function Coach -- for improving performance in academics, social realm
   c. Individual therapist – for learning emotional self-regulation strategies

2. Practitioners should be experienced in working with the young adult population, particularly those that have struggled with the impact of neuroatypical brains on academic, social and emotional development

3. One member of the team should serve as a CASE MANAGER to coordinate the treatment team and the parents, which is necessary for the complexities that attend the neuroatypical young adult

TREATMENT APPROACHES

- Good assessment and management of risk (depression/ suicidality)

- All clinical conditions adequately assessed and treated BEFORE going to school – mood disorders, anxiety disorders including social anxiety, ADHD, ASD, processing speed issues, learning disabilities.

- Close, frequent monitoring (minimally weekly) of the young adult's academic and emotional status to detect correct "spinout"

- Family/ parent involvement, including frequent communications between the parents and the case manager. This should include regular progress/ problems reports

- "Real time" therapy for setbacks and crises = treatment on the same day that a crisis is detected

- Young adult agrees that parents may have full access to all practitioners

OTHER IMPORTANT SUPPORTS

- Regular use of support from college disability services for ADHD, test anxiety, processing speed issues, learning disabilities

- Possible visits from parents to observe the young adult's condition, the condition of their living quarters. This can help detect any backsliding of serious mental health problems

- Scaffolding for medication – the young adult may need support in:

  - renewing prescriptions
  - picking up meds
  - making and going to doctor's appointments
  - taking meds on a daily basis

- Life Skills scaffolding – attention should be given to these practices and routines:
  - Tools/ conversation about how managing sexual health: access to condoms, birth control, gyn appointments and how to protect oneself from date rape/ unsafe situations.
  - Discussion about navigating/ being safe with access to drugs and alcohol.
  - Self-care -- grooming, eating, exercise
  - Sleep hygiene/ sleep patterns
  - Proven system for academic performance – getting assignments, planning projects, studying for tests, getting in homework
  - System for how to handle spinout/ mental health crises
  - Proven system for getting places on time – getting up in AM, getting to school on time, maintaining attendance
  - Room/ apartment maintenance
  - System for managing money