

Supporting Careers in Youth and Young Adults with Serious Mental Health Conditions

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Acknowledgements

The Learning & Working Center at Transitions RTC is a national effort that aims to improve the supports for youth and young adults, ages 14-30, with serious mental health conditions to successfully complete their schooling and training and move into rewarding work lives. We are located at the University of Massachusetts Medical School, Worcester, MA, Department of Psychiatry, Systems & Psychosocial Advances Research Center. Visit us at:

<http://www.umassmed.edu/TransitionsRTC>

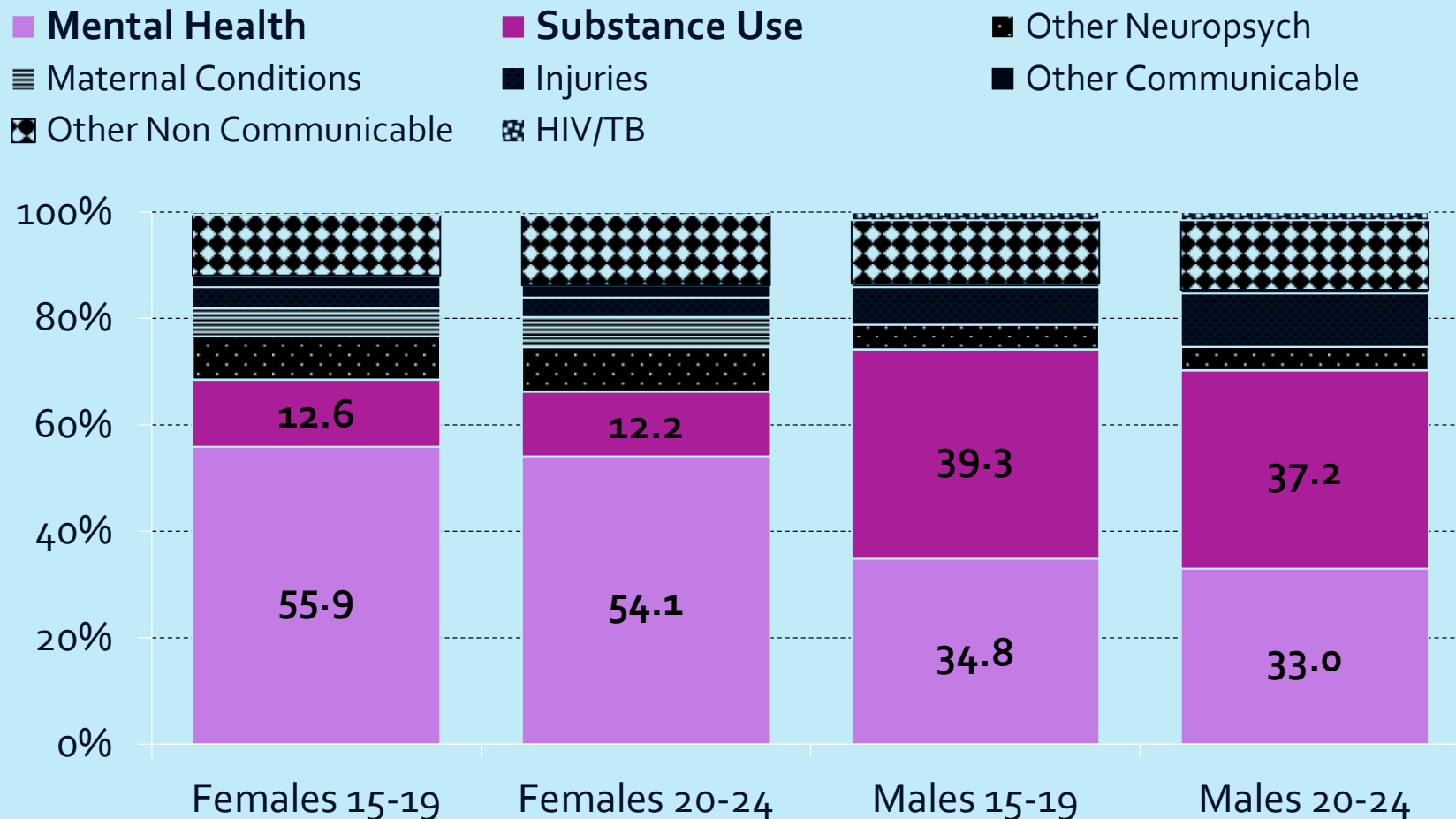
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Major Causes of Burden Due to Disability U.S. 15-24 Yr. Olds

Data from *WHO Global Burden of Disease: 2004 Update*, retrieved 5/2/13



Gore, FM., Bloem, PJN, Patton, GC, Ferguson, J, Joseph, V, Coffey, C, Sawyer, SM, & Mathers, CD (2011). *Global burden of disease in young people aged 10–24 years: a systematic analysis*. *Lancet*, DOI:10.1016/S0140-6736(11)60512-6





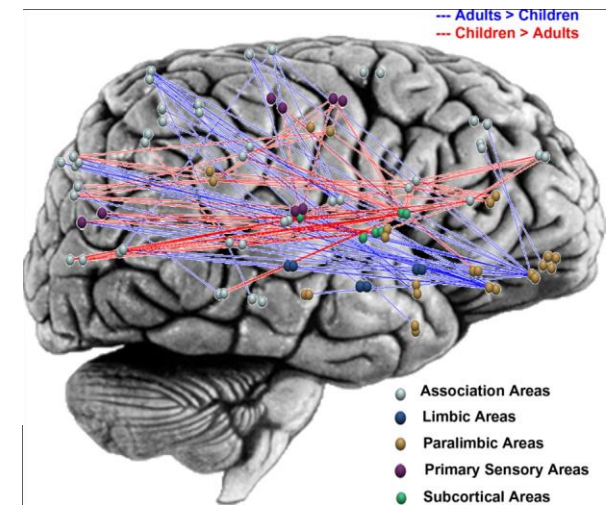
Important Characteristics of TRANSITION-AGE YOUTH



Psychosocial Developmental Changes

Cognitive development (how we think)

- Anticipating consequences of choices and actions
- Complex strategic planning
- Behavior & cognitive control towards emotional or distracting stimuli



Identity formation (who am I)

- Distrusting authority
- Experimentation
- Self-determination



Psychosocial Developmental Changes

Social development

- Peer influence (positive and negative)
- Mixed ages can be unappealing



Psychosexual development

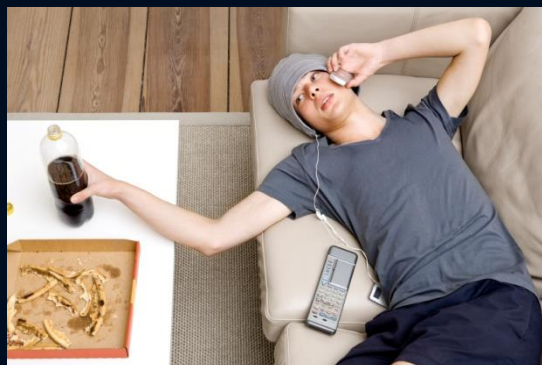
- Sexuality and sexual relationships
- Resolving gender identity and sexual orientation
- Common age to have children



Developmental Changes Underlie Abilities to Function Maturely



Complete schooling & training



Head a household



Obtain/maintain rewarding work



Develop a social network



Become financially self-supporting



Be a good citizen





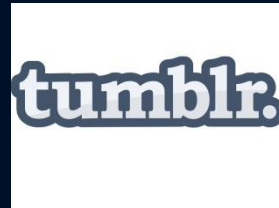
**The world has
changed in ways
that place greater
demands on
young adults**

Economic restructuring, advances in information and communication technologies, and changes in the labor market have radically altered the landscape of risk and opportunity in young adulthood

(Institute of Medicine, 2014)



Youth Culture





Balance of self-determination and family support

- **More family involvement than older adults**
- **Less family involvement than younger youths**
- **Crucial resource for success in young adults**





FOR YOUTH WITH SMHC



Psychosocial Development Delayed

- ◆ Cognitive, moral, social, and identity formation development delayed in youth with SED (Davis & Vander Stoep, 1997)
- ◆ Developmental tasks of transition are the same as for all young people
- ◆ Just as desirous as peers for adult freedoms



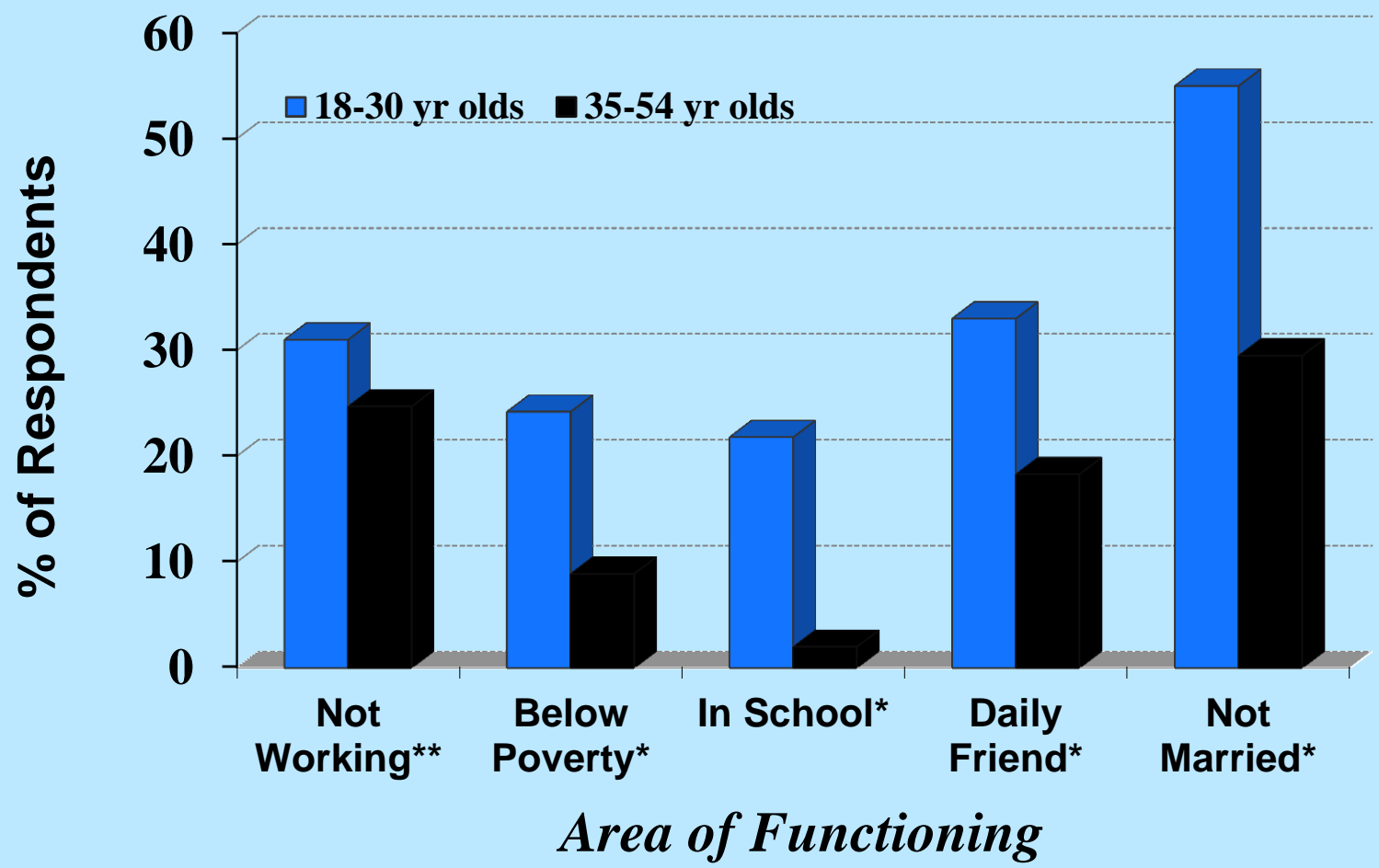
Role Functioning - Compromised

Functioning among 18-21 yr olds	SMHC in Public Services	General Population/ without SMHC
Homeless	30%	7%
Pregnancy (in girls)	38-50%	14-17%
Multiple Arrests by 25yrs	44%	21%

Valdes et al., 1990; Wagner et al., 1991; Wagner et al., 1992; Wagner et al., 1993; Kutash et al., 1995; Silver et al., 1992; Embry et al., 2000; Vander Stoep, 1992; Vander Stoep and Taub, 1994; Vander Stoep et al., 1994; Vander Stoep et al., 2000; Davis & Vander Stoep, 1997; Newman et al., 2009



Role Functioning Different from "Mature" Adults



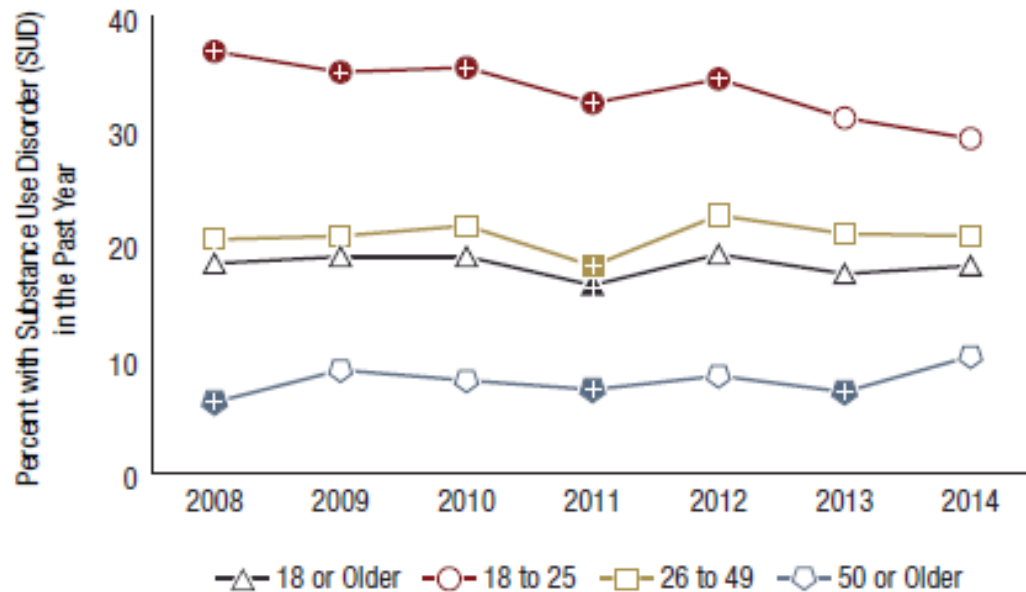
* χ^2 (df=1)=31.4-105.4, p<.001

** χ^2 (df=1)=5.5, p<.02



Substance Use Disorders in Young Adults with SMHC

Figure 49. Past Year Substance Use Disorder among Adults Aged 18 or Older with Any Mental Illness in the Past Year, by Age Group: Percentages, 2008-2014



+ Difference between this estimate and the 2014 estimate is statistically significant at the .05 level.

(SAMHSA 2014, pg. 32)



Family Involvement - Complicated



- Delicate dance;
- Histories of separation
- Sometimes none is available
- Are often the linchpin for success



Other Distinguishing Features of SMHC vs. Other Disabilities

- Disability typically impairs **social participation**
- **Blaming**; parents and youth themselves blamed for the disability
- **Stigma/Discrimination**
- **Contextual Factors**; Living in poverty, single head of household, unemployed head of household (Wagner et al., 2005)



Other Distinguishing Features of SMHC vs. Other Disabilities cont'd

- “Hidden” disability
- **Ignorance**; disability identified late and treatment delayed, behavioral nature of disability leads to confusion about treatment versus “socialization”
- Conditions are treatable and disability often ends; **Recovery** is possible over time



Career-related Outcomes



What are Careers?



- Sustained periods of employment in one or a series of related positions
- Progressive development of knowledge, skills, and useful expertise
- Increasing remuneration consistent with growing expertise.



Schooling & Working in Youth – General Population (Institute of Medicine, 2014)

- Earnings prospects of those without any postsecondary education or training credential, and especially for high school dropouts are now very limited (Autor et al., 2008; Card & Dinardo, 2006)
- The additional obstacles posed by the Great Recession (2007-2009) and slow recovery for youth entry into the labor force is of national concern (IOM, 2013)
- Concern is greatest for disadvantaged or vulnerable young people (Edelman & Holzer, 2013)



Importance of Education

- The findings of the IOM point to the importance of education for all youth and young adults in terms of income & employment
- Education benefits young people & society in various other ways
 - Better informed citizenry (for voting & policy-making)
 - ↑ Physical health (Ross & Van Willigen, 1997; Cutler and Lleras-Muney, 2006)
 - ↓ Emotional distress (e.g. depression, anger)(Ross & Van Willigen, 1997)
 - ↓ Crime (Lochner & Moretti, 2004)



Compromised Secondary Education - SMHC



- Special Education students with ED have the highest rate of High School incompleteness; 44% vs. 14-29% (NLTS-2; http://www.nlts2.org/data_tables/tables/25/ntaDiplomafrm.html)
- Lowest school performance; attendance, grades, grade retention (NLTS2)
- Only small fraction (roughly 8%) of students with the most serious EBD receive special education services (Forness et al., 2012)



High School Experiences of Students with ED in Special Education

Feature	ED	Other Disability
Get along with students/teachers ≥ pretty well**	67%	85%
Partake in organized extracurricular group activity**	35%	47%
Attend special/alternative school**	22%	3%
Take all courses in special education settings*	16%	5%
School sponsored work experience*	17%	26%
Present but not participating in transition planning*	32%	23%

*p<.05, **p<.001

Wagner, M., & Davis, M. (2006). How are we preparing students with emotional disturbances for the transition to young adulthood? Findings from the National Longitudinal Transition Study-2. *Journal of Emotional and Behavioral Disorders*, 14(3), 65-80. Presentation, DMH/MRC Conference on Young Adults; 3/24/17



Compromised Secondary Ed – Regardless of Special Education status

- Youth with SMHC have over 6 times the risk of school dropout of those without SMHC
- 46% - Proportion of failure to complete secondary education attributable to MH conditions (Vander Stoep et al., 2003)
- **Lower dropout rates in young adults with early psychosis (36%; Rinaldi et al., 2012)**



Students with SMHC Struggle in College

- Those with SMHC that do go on to college (compared to typical students):
 - Have higher rates of part-time student status (Newman, 2011)
 - Higher dropout rates (86%)
 - Lower graduation rates (Kessler, Foster, Saunders, & Stang, 1995; Salzer, Wick, & Rogers, 2008)
 - Accrue student debt (Sabella et al., 2017)



Compromised Employment

- Young adults with anxiety or depression less employed than mature adults (Waghorn, Chant, & Harris, 2009)
- Young adults that have psychiatric disabilities in adolescence have lower employment rates compared to same age peers in other disability groups or in the general population (Frank, 1991; Neel, 1988; Newman et al., 2011; Vander Stoep et al., 2000)
- No U.S. studies of employment rates of young adults in adult mental health systems



What does Success Look Like?

One example

Josh, age 27, is currently living with roommates in a Boston suburb.

Diagnosed with ADHD and depression in elementary school.

Educated in a separate classroom environment in public school for kids with “behavioral” problems.

Tried college courses but nothing “stuck”, felt bored with pre-requisites and didn’t know what goals were.

Worked in multiple jobs, service industry, construction, retail...

Moved to Florida for a bit to explore, worked bunch of different jobs there. All part-time, low benefits.

Came back to MA and pursued EMT training while living at home. Worked as an EMT for about a year but didn’t like the “grind” of it.

Found what he liked the most was counseling/talking to people as they were going through something physical or watching a loved one go through something physical.

Realized he wanted to be helping people emotionally, not physically. Now a Peer Mentor.



What Can You Do?

HOW DOES THIS APPLY TO MY WORK/LIFE?



Workforce Innovation & Opportunity Act

JOSEPH MARRONE – SUMMARY AT

[HTTP://WWW.UMASSMED.EDU/TRANSITIONSRTC/PUBLICATION/](http://www.umassmed.edu/transitionsrtc/publication/)

Maryann Davis, Ph.D. Plenary presentation, DMH/MRC Conference on Young Adults; 3/24/17



Workforce Innovation & Opportunity Act (WIOA)

- Sets requirements for
 - Vocational Rehabilitation Agencies
 - “Regular Workforce System” (One Stop Career Centers/American Career Centers)
- Became law July 2014, final regulations August 2016



WIOA – who's covered?

- Students with disabilities (eligible for or has IEP or 504 eligible)
- Youth with disabilities (ages 14-24)
- Out of school youth with disability (age 16-24)
- Different regulations depending on which group



WIOA – VR requirements

- VR systems expected to help students with disabilities who are (or potentially) VR eligible with transition related activities – pre-employment transition services (Pre-ETS)
- Requirements for VR agencies to commit % Federal funds to Pre-ETS or supported employment services for youth with “the most significant disabilities”



WIOA – VR implications

Supported Employment for Youth with the most significant disabilities

- Funds can be used to provide EXTENDED services (up to 4yrs)

Pre-ETS includes

- Job exploration counseling
- Work-based learning experiences
- Counseling re: enrolling in comprehensive transition services or post secondary education
- Workplace readiness training (social skills & independent living)
- Instruction in self-advocacy



WIOA – Workforce System

Workforce systems – (One Stop Career Shop/American Career Centers)

- Required to spend $\geq 75\%$ of youth funding for services for out of school youth who meet financial necessity requirements unless high risk;
 - School dropout
 - School age but not attending for a quarter or the most recent school year
 - In juvenile or criminal justice systems
 - Homeless/runaway
 - Current/former foster care or out-of-home placement
 - Living in poverty area
 - Pregnant/parenting
- Must make their services accessible to youth with SMHC



WIOA - advocacy

- Services for youth with disabilities in the law
 - VR and Workforce systems should have these services available to support employment in youth with SMHC
- Students with SMHC (disability) should have access to work based learning experiences





Models/Strategies



Transitions RTC Resources

- *What is a 504 Plan and How Can it Help My Teen?*
- *Teens on IEPs: Making my Transitions Services Work for Me*
- *My Mental Health Rights on Campus*
- *Tools for School: Accommodations for College Students with Mental Health Challenges*

<http://www.umassmed.edu/TransitionsRTC/publication/#tipsheetEducation>



Transitions RTC – Webinars

<http://www.umassmed.edu/TransitionsRTC/publication/webinars/>

Transitions RTC Bank of America Ho... Netflix REDCap Worcester Academy Hampshire College Home

Employment/Education

Adapting IPS for Young Adults: The Thresholds Study
Aug 13, 2015
A webinar by Marsha Ellison, Gary Bond, and Vanessa Vorhies-Klodnick
[Transcript](#)

Helping Youth on the Path to Employment (HYPE)
March 2015
Marsha Ellison, Sloan Huckabee, Rachel Stone, and Michelle Mullen

Education

Supporting the Education of Young Adults with Serious Mental Health Conditions: State of the Practice – part 2
January 26, 2016
Michelle Mullen, Kathleen Biebel, Marsha Ellison
[Webinar Slides](#)

Supporting the Education of Young Adults with Serious Mental Health Conditions: State of the Science – part 1
January 7, 2016
Marsha Ellison, Michelle Mullen, and Kathleen Biebel
[Webinar Slides](#)

Needs and Supports for Pursuing Postsecondary Education and Training for Youth with Psychiatric Disabilities
October 1, 2015
Webcasts with VCU Center on Transition Innovations
Maryann Davis

Other

Maryann Davis, Ph.D. Plenary presentation, DMH/MRC Conference on Young Adults; 3/24/17



Transitions RTC Resources – ComeBack TV



The video player shows a man with glasses and a pink shirt sitting at a round wooden table. He is pointing towards the camera. On the table are a pink cup, a blue pen, a white notepad, and a smartphone. Behind him is a banner for 'Transitions RTC' with the text 'The Learning & Working Duration of Adulthood Rehabilitation Research Center'. The banner also features logos for 'JED 4 HPS', 'NIORR', and 'ESAMUSA'. The YouTube interface includes a search bar at the top, a play button, a progress bar at 0:02 / 4:08, and various control icons at the bottom.

CBTV // Choosing a School: The JedCampus Seal

<https://www.youtube.com/user/TransitionsRTC>

Maryann Davis, Ph.D. Plenary presentation, DMH/MRC Conference on Young Adults; 3/24/17



Strategies that Increase High School Completion

Check and Connect

- Pairs students with mentors
- Mentors - cross between mentor, advocate, and service coordinator
- Mentor works with student/family for 2 years wherever student is
- Mentor monitors attendance/grades/problems (checks)
- Talk; student's school progress, relationship between school completion and the "check" indicators of engagement, importance of staying in school, and the problem-solving steps used to resolve conflict and cope with life's challenges
- Close communication with families

<http://checkandconnect.org/>



Christenson, Sinclair & Thurlow, 2005; Maynard, Kjellstrand & Thompson, 2014

Maryann Davis, Ph.D. Plenary presentation, DMH/MRC Conference on Young Adults; 3/24/17

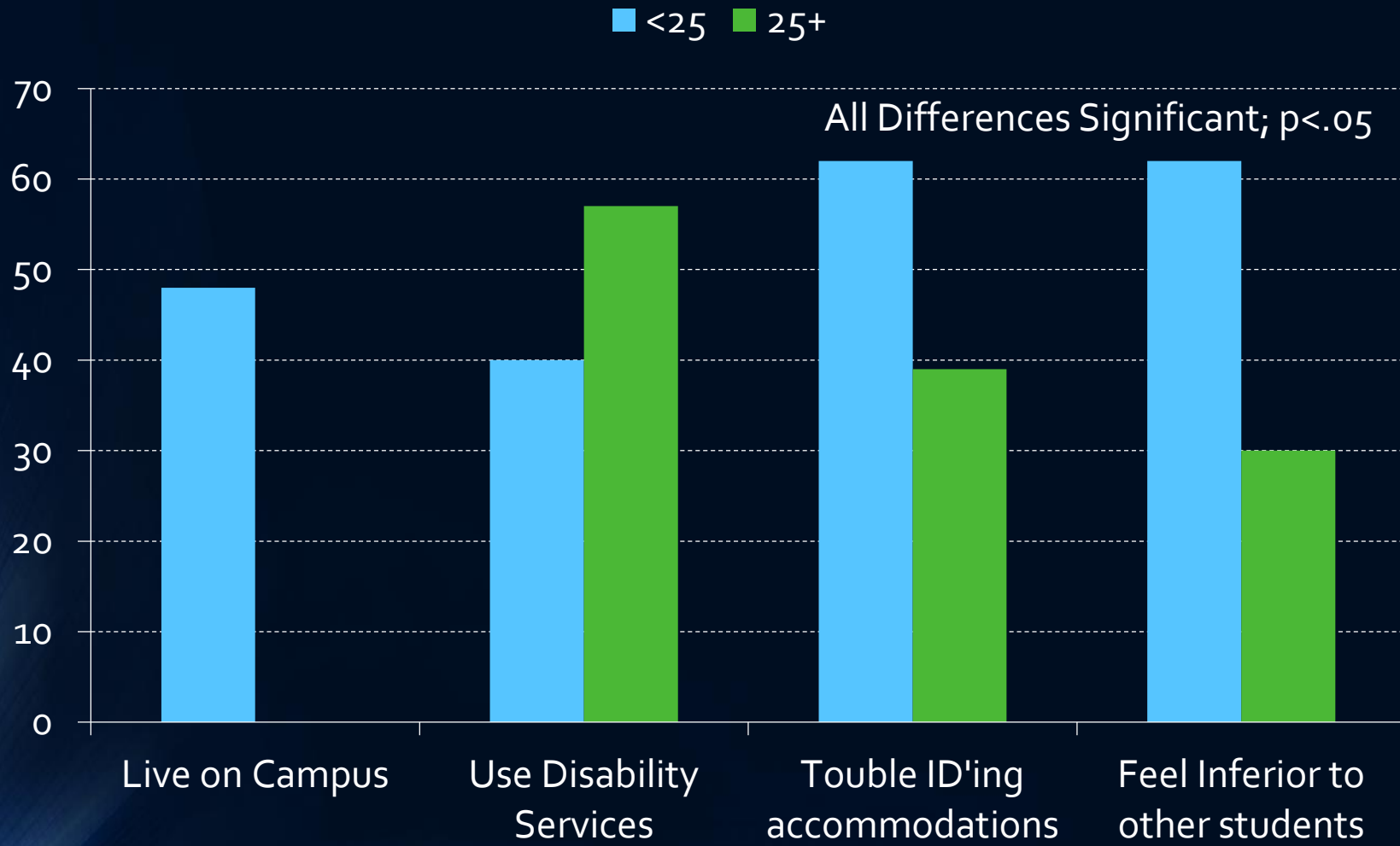
Strategies to Increase College Success

Students with SMHC Don't Seek Help

- Within former special education students, those with SMHC least likely to report disability to college disability services (21% vs. 3-15%; Newman et al., 2011)
- Perceptions that student disability offices don't know how to help (Eisenberg, Golberstein, & Gollust, 2007) – sometimes justified



Younger vs. Older College Students with SMHC



Helpful Strategies

- Help youth understand their rights at college
- Help youth connect with disability services offices and develop their academic plan/accommodations
- Check in to be sure they've approached professors for accommodation/help self-advocate
- Help them connect socially/ help with negative self-perceptions



Post Secondary Education Supports with Supportive Evidence

- Currently no single approach with strong evidence of success (Rogers et al., 2006; Rogers, Kash-Macdonald, & Maru, 2010; Ellison, Rogers &)



Better Futures (Geenen et al., 2014)

<https://www.pathwaysrtc.pdx.edu/p2c-better-futures>

Foster care youth with SMHC in High School Summer Institute:

- 10 to 15 youth
- 3 nights/4 Days in Dorms
- Daily Panels, Tours, Activities and Workshops
- Evening Activities and Dinner

Mentoring Workshops:

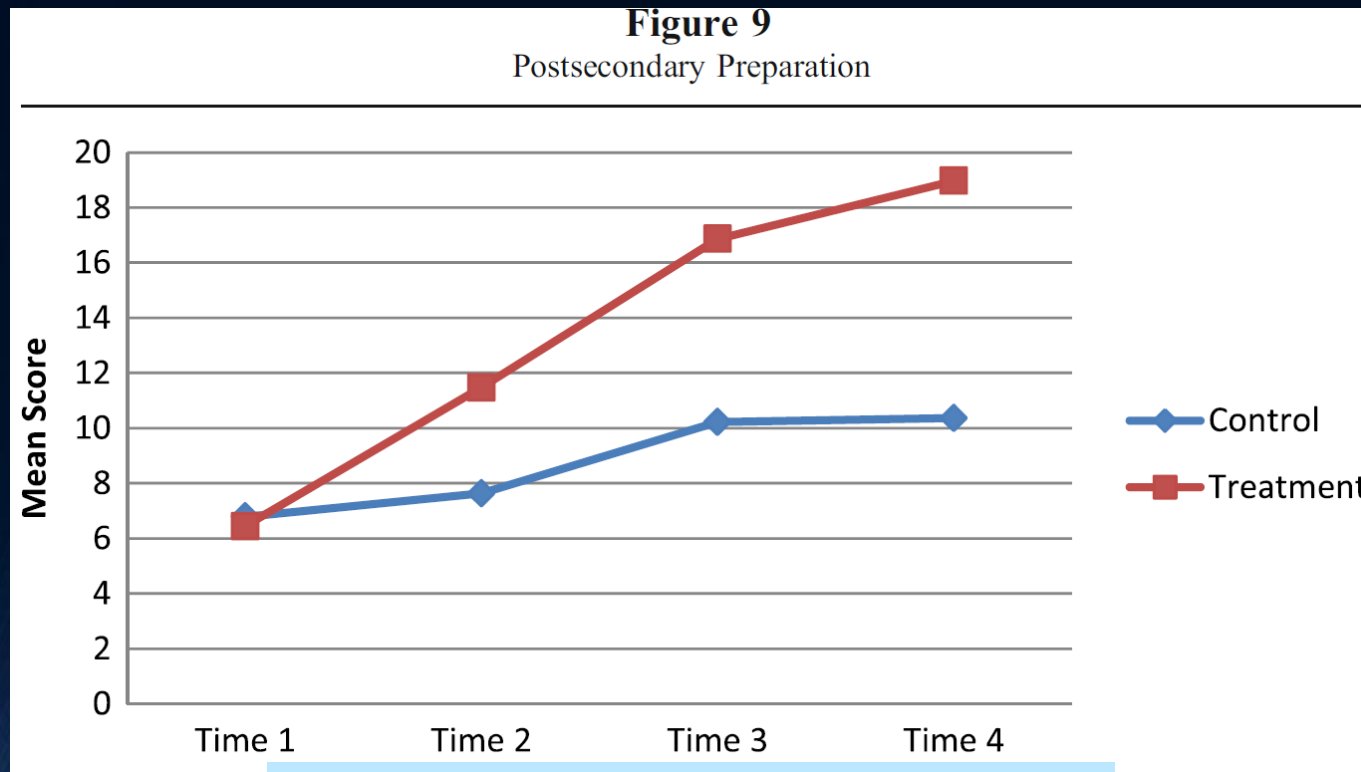
- Bi monthly/4 total
- Various panels of college students and transition agencies
- Potential topics include essay writing, wellness tools, field trips, allies, college supports, strategic disclosure and graduation timelines

Peer Coaching:

- Minimum 2x per month for 9 months
- Peer support and collaborative problem solving
- Self determination and empowerment lens
- Build relationships, offer resources and support
- Youth directed on their personally valued goals
- Skill building and experiential activities “



Encouraging Outcomes



Geenen et al., (2015) pg. 167

Geenen, S., Powers, L., & Phillips, L., (2015). Better Futures: a Randomized Field Test of a Model for Supporting Young People in Foster Care with Mental Health Challenges to Participate in Higher Education. *The Journal of Behavioral Health Services & Research*, 42 (2), 150-171.



Approaches in Development

- **HYPE** – Michelle Mullen & Marsha Ellison
 - Combined supported education/supported employment model – emphasizing support of postsecondary education/training
- **Project FUTURES** (Sarah Geenen)
 - Extending Better Futures to college students
 - Peer Coaches – upper classmen helping underclassmen
 - Students in/past foster care with SMHC
- **PASS** (Davis, Costa, Hutchinson & Huber)
 - Peer Coaches (upper classmen with or without lived experience)
 - Helping underclassmen with academic success

<http://www.umassmed.edu/TransitionsRTC/research/projects-by-grant/hype/>

<https://www.pathwaysrtc.pdx.edu/p1-project-futures>

<http://www.umassmed.edu/TransitionsRTC/research/projects-by-grant/rtc/>



Models Being Developed & Researched (cont'd)

- **RENEW** -Rehabilitation, Empowerment, Natural Supports, Education, and Work- (Hagner, Cheney, & Malloy, 1999) – positive employment change from baselin
- Achieve My Plan (Walker et al., 2015)
 - <http://www.pathwaysrtc.pdx.edu>
 - <http://www.pathwaysrtc.pdx.edu/JBHSR-special-issue>
- Cornerstone: Boundary Spanning Case Management and Peer Support for Transition Age Youth (Munson – PI)





Employment Supports



Transitions RTC - Resources

<http://www.umassmed.edu/TransitionsRTC/publication/webinars/>

Webinars & Multimedia

Employment

Research-based Employment Supports for Youth with Chronic Mental Health Disabilities

October 8, 2015

Webcasts with VCU Center on Transition Innovations

Maryann Davis

Depressive Symptoms in Adolescence as a Predictor of Young Adult Employment Outcomes

August 5, 2015

Kathryn Sabella and Maryann Davis

The Employment Market for Young Adults with Serious Mental Health Conditions: Barriers and Solutions

February 10, 2015

Lisa M. Smith and Charles Lidz

Webinar Slides Only

Transitions RTC Research Webinar Series: IPS Supported Employment for Young Adults with Serious Mental Illness: Four RCTs

May 7, 2013

Gary Bond, Dartmouth Psychiatric Research Center

Employment/Education

Adapting IPS for Young Adults: The Thresholds Study

Aug 13, 2015

A webinar by Marsha Ellison, Gary Bond, and Vanessa Vorhies-Klodnick

[Transcript](#)



Limited Research in Employment Supports Specifically in Young Adults

- No clinical trials research focused on young adults in VR services or Clubhouses
- Strongest research in young adults to date – IPS
- Guideposts – random assignment, no fidelity measure, better outcomes than usual services for youth with disabilities
- Some evidence that outcomes in young adults better than mature adults, but broad age groups, no detailed understanding of why



Established Vocational Models

- Standard VR services
- ICCD Clubhouses
- Assertive Community Treatment
- No specific evidence of efficacy in YA's
- IPS tested more favorably against each of the above w adults



Individual Placement & Support: IPS

Systemic approach based on 8 supported employment principles

1. A focus on competitive employment
2. Open to any person with a psychiatric disability who wants to work
3. Utilizes a rapid job search approach (job search occurs within 1 month, but according to client preference)
4. Is integrated with mental health treatment team
5. Potential jobs are chosen based on people's preferences
6. Service is provided for an unlimited time
7. Supports are individualized
8. Benefits counseling is provided to help address SSI's disincentivizing effect (G. R. Bond, 2004; Drake et al., 1999).



Individualized Placement and Support Young Adults (cont'd)

- Standard IPS, with young adults in RCT's (Bond, Drake & Campbell, 2014)
 - Supported employment only
 - 82% in IPS had some employment vs. 42% in control groups



Individualized Placement and Support; Young Adults

- Two versions for young adults with early stages of psychosis have growing supportive research findings for improved employment
 - Combine supported employment with supported education (Systematic Review: Bond, Drake, & Luciano, 2014:)
 - Curriculum on working, substance abuse information, family education (Nuechterlein et al., 2008)



Individualized Placement and Support – Young Adults

- Transitions RTC – young adults with psychiatric disabilities (Ellison et al., 2015)
 - Supported employment/supported education
 - Peer mentors
 - Open Trial (N=33); 42% with school or employment starts
- IPS for High School Age Youth (Ellison PI)
 - Help high school students who want to work
 - Maintain emphasis on HS completion while working



Internships, Volunteering, Entrepreneurs

- Social Enterprise Intervention for Homeless Young Adults (Ferguson, 2012/2013) – 20 month model with encouraging employment & hrs in small RCT
 - 1) vocational skill acquisition; in 4-month course with technical training/education on specific vocational skills
 - 2) small-business skill acquisition; 4-month course focused on business-related skills to start a social enterprise, such as accounting, budgeting, marketing and management;
 - 3) social enterprise formation and distribution; 12-month phase participating youth establish a social enterprise
 - 4) mental health component provided by the SEI clinician and/or case manager, which is woven throughout all stages over 20 months
- No research on internships or other work experiences in this population



Models Under Development – Shared Features

- Emphasis on career exploration, assessment and planning while supporting employment
- Support of concurrent employment and education or training
- Support of young adults leading and improving their capacities for career planning and implementation
- Include family members as potential supports



