

The Transitions RTC
Transition to Employment
Theoretical Framework

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This theoretical framework was developed through a collaborative process that included all members of the Transitions RTC

Young Adults with SMHC and the Changing Context of Employment

Moving into employment is among the most critical tasks for young adults with, or without, a serious mental health condition. Decades ago, Jahoda^{1,2} developed the latent deprivation model of distress among unemployed people. Jahoda's model focuses on five features:

- the time structure that work provides (albeit via imposition);
- the extension of social activities into areas that are less emotionally charged than family life;
- the sense of participation in a collective purpose and effort;
- the assignment of status and identity by virtue of employment, *per se*; and
- the contribution to psychological well-being by virtue of being a required, regular activity.³

Conversely, the lack of employment leads to distress^{4 5} that potentiates mental health symptoms.^{6,7} These problems beset people of any age but for young adults failure to enter the labor market successfully may begin a lifetime of employment related problems.

Facing this serious life issue, young people with SMHC find that the stigma of having a SMHC is a substantial barrier both to employment^{8,9} and to the necessary education or training. However the employment market is not only biased against young people with SMHC but the socioeconomic context in which young people seek employment has evolved since the inception of supported employment interventions two decades ago. This changed context is critical to understanding the needs of young adults with serious mental health conditions and the design and adaptation of interventions that promote fulfilling vocational experiences. In the past several decades, the basic structure of the economy has changed so much that the employment market for young adults has become significantly transformed¹⁰ and is particularly hard for young adults in general. "Today's young Americans face the worst employment prospects in recent

history. What's more, trends in employment and unemployment rates since World War II indicate that the labor market is becoming even less friendly to young workers. Even prior to the Great Recession, young people had a hard time in the labor market, and their employment situation has worsened since. Over the past several decades, employment and labor-force participation among Americans ages 16–24 have declined, while the unemployment rate for this group has risen⁷ any of these changes require greater technical expertise and thus more training and education:

Except in the case of those preparing for manual trades by attending a vocational technical high school, high school degrees alone are no longer very helpful for employment in anything except minimal wage jobs. The number of jobs and the pay for manual rather than intellectual and interpersonal skills has declined ¹¹.

- Extended periods of education or training are required for most financially and personally satisfying employment.¹² Even in manual trades, extended periods of apprenticeships and training are often required.
- Most post-high school education or training is significantly different than high school in ways that may make it more stressful for young adults with serious mental health conditions¹³;
 - Some training involves moving away from home – reducing the emotional support that family members can provide, and increasing the demands for independent living skills
 - In many instances, developing new social networks will be necessary
 - Most students in formal education programs need to work at the same time,¹⁴ a source of additional stresses.
 - Post secondary education is often less structured creating more room for exploration but also potentially stressful decisions.
 - Obtaining accommodations and making “individualized education plans” that were facilitated by school personnel during high school becomes the student’s responsibility.

- The diversity of employment options available in the increasingly differentiated employment market also makes choices much more stressful since specialization is also a significant risk.

Y&YA Expectations

In the interviews in the first round of the RRTC, youth and young adults (Y&YA) repeatedly discussed desire to work. Moreover, they saw work as critical to their recovery and their status in the community. However we frequently heard Y&YA express the desire for more than a minimum wage job. This reflects the reality in our society that the nature and quality of employment is critical to self-respect.¹⁵

Most supported employment programs for people with SMHC have been developed for older people. These programs have allowed many people to work who were thought not to be able to do so. For many Y&YAs, any employment may be a step in the right direction but these programs have several shortcomings for meeting the expectations of Y&YAs for meaningful employment career. First, most of the jobs are low-wage, part time jobs. The long term outcomes, though better than outcomes without supported employment services, are also quite limited, with less than half of individuals sustaining employment for at least half of the time.¹⁶ To the degree that community inclusion and self-respect are important to recovery, these programs do not do enough to facilitate recovery. Because of the early stage of their vocational lives, Y&YA need different types of employment and education supports. The RRTC is committed to facilitating and developing such interventions and services.

Theoretical Approach

The basic approach of the Transitions RTC is based on 3 interrelated premises:

1. Meaningful employment is a basic feature of a satisfying existence for most members of our society.^{1,2,17,18} We refer to this sort of meaningful employment as a career, understanding that we are not only speaking of

white collar jobs but of any course of employment, from plumber to web-designer that involves:

- a. Sustained periods of employment in one or a series of related positions,
 - b. Progressive development of knowledge, skills, and useful expertise,
 - c. Increasing remuneration consistent with that growing expertise.¹
2. In spite of considerable advances, mental health employment services have largely failed to assist people with mental illness to develop such patterns of employment. Most supported employment has resulted in part-time entry-level jobs that typically last less than 6 months.
 3. Emerging adults with serious mental health conditions have a significant chance to develop careers if the appropriate services and supports are developed and if these services take into consideration their life context and circumstances.

Our theoretical approach takes into account these three facts as premises and builds on three different theories to explain emerging adults' career success or failure. The dominant relevant theory is Lent, Brown & Hackett's Social Cognitive Career Theory.¹⁹ Their model has many virtues for understanding career development in transition age youth and young adults with serious mental health conditions. It accounts significantly for how careers develop over time, and incorporates both employment-related experiences (e.g. internships, volunteer work, paid employment), as well as educational experiences. Their theory emphasizes the importance of two factors in particular, feelings of *vocational self-efficacy* and *vocational outcome expectations*. The term "vocational" refers to both work and schooling or training environments. *Vocational self-efficacy* is

¹ The concept of career is somewhat more complex for people who maintain a home or care for children (e.g., housewife, househusband) but the concept of progressive development of expertise is consistent.

one's confidence in performing vocational tasks. *Vocational outcome expectations* are one's beliefs regarding future benefits of current vocational behaviors or activities. In situations where individuals perceive that their potential success is only partially based on their performance, outcome expectations play a significant role in decisions about employment and educational goals and activities.¹⁹⁻²² Given the social stigma on mental illness, Y&YA with SMHC might expect that their vocational outcomes may be affected by other factors than their performance, and thus, these outcome expectations may stifle vocational goals and activities.

There is an extensive literature showing the importance of these variables to vocational attainment in many different populations, and a smaller literature in those with disabilities.^{23,24} Social cognitive career theory is based on Bandura's social cognitive theory,²⁵ which further proposes that there are three important sources of self-efficacy; personal experiences of mastery of the task for which one feels self-efficacy, vicarious experiences of mastery, and emotions experienced while having these experiences. Experiencing mastery, either personally or vicariously, increases self-efficacy. However, experience negative feelings (e.g. high anxiety, negative mood) while having the experience lowers self-efficacy. There is an extensive medical literature with encouraging findings of interventions that target experiences and emotions to increase self-efficacy for behaviors that improve health outcomes (e.g.,²⁶⁻²⁸).

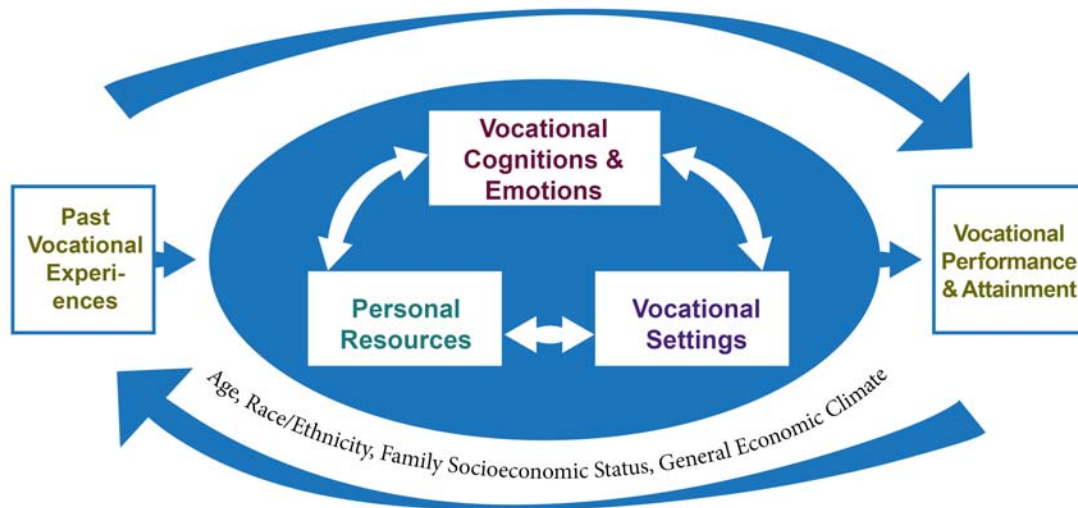
However, particularly in getting one's foot in the door of satisfying employment or postsecondary education, differences in *social capital* are also important. *Social capital*, is the benefit derived from one's connections to social networks, and in the current focus, it is the benefit for vocational attainment derived from these sources. In positions that are likely to lead to successful careers, social capital plays a significant role.^{29,30} Various mental health crises, or symptoms can directly reduce the available social capital by alienating potential supporters.²⁴ Young adults with SMHC may also fail to develop the adult social networks that facilitate vocational attainment. The social capital of

many Y&YAs with SMHC is quite limited, particularly those involved in public systems, such as foster care, where they may have little familial social capital.³¹

Cultural capital is also critical in understanding the career achievements of TAYYA.^{32,33} Cultural capital theory is focused on non-financial social assets that promote social mobility beyond economic resources and social connections. Cultural capital³¹ is comprised of the knowledge, skills, and education that an individual has. Examples can include education, intellect, manual skills, style of speech, dress, or physical appearance. Cultural capital theory has often focused on explaining social inequality and has been particularly important in understanding the progress of young people in educational contexts³⁴ but it is equally important in understanding employment success. Many Y&YA with SMHC coming from disrupted social backgrounds have limited cultural capital.

A Vocational Model

Figure 1 describes how these theories combine to form our theoretical framework, and captures theoretical constructs that are important to both initiating vocational endeavors and growing careers over time. In this model three groups of factors are key; vocational cognitions and emotions, personal resources, and vocational settings. These three groups of factors interact to produce the vocational performance and attainment at a given time. The experience during each vocational “event” that produces the vocational performance/attainment at the time serves as the platform for the next “event” in which these three factors interact, thus building vocational experience, performance, and attainment over time (a career). We will review the application of these theoretical constructs to employment first, and then to educational/training experiences.



<p>Past Vocational Experiences</p> <ul style="list-style-type: none"> • Mastery • Emotions • Attainment • Satisfaction 	<p>Vocational Cognitions & Emotions</p> <ul style="list-style-type: none"> • Vocational Goals • Vocational Self-Efficacy • Outcome Expectations • Stress 	<p>Vocational Performance & Attainment</p> <ul style="list-style-type: none"> • Mastery • Remuneration
<p>Personal Resources</p> <ul style="list-style-type: none"> • Mental Health • Social Capital • Vocational Cultural Capital • Financial Resources • Self Determination Skills 	<p>Vocational Settings</p> <ul style="list-style-type: none"> • Stigma • Setting Goals • Efficacy-relevant Supports & Obstacles 	

*These factors interact in different ways to influence initiation of employment or educational endeavors and growing those activities into a course of education or career over time.*¹⁷

Obtaining Employment: The first stage of any career begins with finding a job, so we will begin by discussing the factors that contribute to obtaining employment. Referring to Figure 1, seven factors have important effects on obtaining employment for Y&YAs with serious mental health conditions:

Vocational Cognitions & Emotions

- Occupational self-efficacy
- Outcome expectations

Personal Resources:

- Social capital
- Cultural capital
- Mental health
- Fiscal resources

Vocational Setting

- Stigma
- Goal and efficacy relevant supports and obstacles

Vocational cognitions and emotions, specifically *vocational self-efficacy* and *vocational outcome expectations*, have been described above and refer to cognitions and emotions one might have toward any vocational pursuit, including education, training, and employment. Vocational self-efficacy and outcome expectations impact vocational goals and vocational activities.¹⁹ Lower self-efficacy or outcome expectations dampen the goal of work and the activity of job seeking.

Personal resources are the resources that each individual may possess or lack. *Social capital* and *cultural capital* have been briefly described above. Obtaining a job is facilitated by seeking work, benefitting from social capital, and having cultural capital for the job. Social capital significantly affects one's ability

to obtain employment.³⁵ Many jobs are obtained, either directly or indirectly, through connections. The reduced familial capital among foster care youth can impede finding employment³⁶ and similar deficiencies may exist for youth with SMHC. Of course, employment services available to people with SMHC may, to some extent, replace familial and community based social capital. Evidence based employment services seem to be fairly effective in doing so for entry-level positions but appear less so for more advanced positions.¹⁷

There are two types of cultural capital relevant to obtaining a job, task specific knowledge and skills, and “soft skills”. Electricians require specific knowledge about electrical circuits and college mathematics majors require a background in calculus. Both of these can be thought of as task specific cultural capital. “Soft skills”, are the skills needed to interact well with others at school or work, such as other students, co-workers, customers, faculty, or supervisors, and to manage those interactions well. The cultural capital required for different jobs vary. Some jobs have greater task specific skill demands (e.g. grocery bagger vs. physical therapist). Similarly, some jobs have greater soft skill demands (e.g. retail vs. accountant). One’s acquired task specific and soft skills impact the number, array and quality of jobs that an individual is qualified for, and will impact obtaining employment.

Fiscal resources refers to an individual’s economic standing (may be related to family socioeconomic status) and also the financial assistance he/she may receive (e.g., SSI, SSDI, food stamps, etc.). Fiscal resources affect one’s ability to obtain formal postsecondary schooling or training, and thus the acquisition of some cultural capital that can open doors of employment, and will be described in the section on education. Fiscal resources also serve as motivators or disincentives to seek work. For individuals with SMHC, the financial relationship between benefits and wages is a calculus that can impede job seeking. Currently in the US, minimum wage jobs that are usually the entry level employment for Y&YA provide little economic benefit (i.e. wages and benefits) compared to the benefits that are available to individuals with SMHCs who are not employed (i.e. SSI/SSDI, Medicaid). The risks of losing health

insurance, while somewhat mitigated by the Affordable Care Act, continues to be seen as a significant barrier for people who need significant medical care, as most people with SMHC do. The risk of losing SSI income because of working/earning too much has repeatedly been found to be a disincentive to work one's full potential.³⁷⁻³⁹

Mental health refers to one's specific SMHC, the symptoms associated with it, and one's ability to manage those symptoms (or struggles trying to manage those symptoms). Having a SMHC also impact other factors that contribute to obtaining work. Individuals' self-efficacy beliefs may be directly affected by their symptoms (e.g. depression can lower self-efficacy beliefs) or through self-stigmatization. Having a SMHC also directly affects one's fiscal resources by providing eligibility for SSI and Medicaid, which can have the disincentive to work described above. Finally, as noted above, the symptoms of SMHC may directly affect social capital.

Characteristics of the **vocational setting** an individual is hoping to obtain employment in are also important, especially the level of real or perceived *stigma* towards individuals with SMHC in that setting. Outcome expectations can be lowered by perceptions of the impact of stigma. Further, one of the most serious barriers to obtaining employment for Y&YA, and indeed to anyone with SMHC, is the real stigma against people with a SMHC in workplace settings. Many employers, like most of the rest of the society, are hesitant to associate with people with SMHC and this affects their willingness to hire.³⁵

Sustaining Employment, Building a Career

The struggle to sustain employment has been the most critical problem for adults with SMHC. Many are employed for short periods of time but few sustain employment to create careers for themselves.⁴⁰ Indeed previous studies have suggested that, overall, people with SMHC average between 70 days of employment before job termination.⁴¹ Youth and young adults with SMHCs also struggle with sustaining employment. Y&YAs receiving the employment support with the strongest evidence of efficacy are still, on average employed only half of

the days they could be. And some evidence suggests that in many employment programs their employment stints are even briefer than in mature adults. ⁴²⁻⁴⁴

Referring to Figure 1, because obtaining employment is a prerequisite, all of the factors that affect obtaining work contribute to sustained employment and building careers, and several additional factors play a more critical role:

Past Vocational Experiences:

- mastery
- emotions
- attainment
- satisfaction

Personal Resources:

- social capital
- cultural capital
- self-determination skills

Vocational Setting:

- stigma
- goal and efficacy-relevant supports and obstacles

Our general model of building a career is one of a feedback process: previous school or work experiences shape future resources, cognitions & emotions, and choice of vocational settings, which then influences *vocational attainment*. Indeed, as Muser, Cook ⁴⁵ note, successful fulfillment of educational and employment goals can support self-efficacy, and the strongest predictor of future employment is past employment. Thus, once employment is obtained, those factors shape future vocational endeavors, which provide the opportunity to influence these factors (positively or negatively) in a continual feedback process that forms sustained vocational effort.

Past vocational experiences, then, begins to build its impact on sustained employment and career building. The past experiences of *mastery* of tasks and the *emotions* experienced in doing those tasks contributes to the self-

efficacy and outcome expectations that affect vocational goals and direct the choice and pursuit of subsequent employment.

Satisfaction plays an important role in sustaining a given job. Xie and colleagues⁴⁶ presented data suggesting that tenure on a job for people with SMHC was significantly predicted by satisfaction with the quality of the work environment. This deserves some comment given the limited study of this issue and its importance to developing careers. It is hardly surprising that satisfaction with the job environment produces subsequent job retention. People tend to do well in jobs that they like and, of course, are more likely to want to stay in jobs that they like.⁴⁷ This fits in our model as having positive emotions associated with the task, rather than negative emotions associated with dissatisfaction. According to social cognitive career theory, and supportive evidence e.g.,⁴⁸ satisfaction is also an outcome of a given work experience and shapes future goals and the platform of experience from which future activities are launched.

Personal resources contribute to the ability to sustain a job, including the successful execution of one's *cultural capital* as defined earlier. The accumulation of technical skills that individuals develop over their employment careers is so critical to the progressive development of careers. *Self-determination skills* refer to an individual's ability to act as the primary causal agent in his/her life free from undue external influence or interference.⁴⁹ The more self-determined one is in choosing his/her career path, the more satisfied he/she is likely to be in their vocational activities, which could lead to increased vocational attainment. In fact, among students with intellectual and learning disabilities, those with higher self-determination tend to have better post-high school employment outcomes.⁵⁰⁻⁵²

Once employment is obtained, the relevant *social capital* shifts from the familial or friendship capital that was relevant to obtaining the job to social capital internal to the institution (i.e., personal relationships) that is critical to accomplishing the work or preparing for future work.

A critical behavior for sustained employment and career building is seeking subsequent employment when a job has ended. Self-efficacy and outcome expectations, through their impact on vocational goals (e.g. to pursue a better job, or one that better fits their skills) and vocational activities (i.e. taking the steps to obtain such a job) are critically important to the sustained pursuit of employment.

We have treated the **vocational setting** as consisting of two parts: *stigma*, and *goal and efficacy-relevant supports and obstacles*. The impact of workplace stigma on obtaining employment is described above. Fear of stigma is one of the primary reasons that individuals with SMHC don't ask for workplace accommodations, thus hindering their potential success. Co-workers' or supervisors' expressions of stigma (e.g. jokes or derogatory comments about "crazy" people) can have the same effects as expressed racism or sexism. Finally, particular workplace features, such as encouragement, provision of modeling, and performance feedback, inform self-efficacy and outcome expectations^{19,25} which, in turn, facilitate or hinder goal pursuit.

A variety of contextual supports and constraints are also important, those that are specifically relevant to pursuit of one's personal goals or to fostering self-efficacy percepts. Goal-specific environmental supports and resources (e.g., social and material support for one's central goals) are likely to promote satisfaction. Particular environmental features, such as encouragement, provision of modeling, and performance feedback, also help to inform self-efficacy and outcome expectations which, in turn, facilitate goal pursuit.⁴⁸

Educational Endeavors. As described earlier, we apply our theoretical model to vocational pursuits, including not only employment but also education and training. Bandura's social cognitive theory²², Lent and colleagues',¹⁹ social cognitive career theory, and social capital theories also have strong evidence in educational attainment.⁵³⁻⁵⁸ Thus, our vocational model poses parallel processes for the initiation, maintenance, and accumulation of educational attainment. The essential features in the model are simply translatable into educational settings.

The essential difference is that a high school education is a legal entitlement, whereas accessing postsecondary educational and training opportunities are not, and are thus more parallel to accessing employment.

Having a SMHC can impact educational attainment through similar avenues as occupational attainment; it can directly affect educational self-efficacy and outcome expectations, and it can impact the social capital that facilitates student success and access to postsecondary educational opportunities. Social capital may also provide the emotional supports necessary to minimize the isolation that often attends the transition from secondary education environments.²³ Another important personal resource factor in education is financial resources. Specifically, the cost/benefit of attending postsecondary school is an important factor in pursuing that avenue to vocational attainment. Stigma can adversely affect college students' experiences, hindering their willingness to ask for accommodations⁵⁹ or needed mental health treatment.^{3,60} Educational settings will also vary in important dimensions of expressed stigma, and in educational goal and efficacy-relevant supports and obstacles.

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