



THE EDUCATION, TRAINING AND EMPLOYMENT EXPERIENCES OF YOUNG ADULTS WITH SERIOUS MENTAL HEALTH CONDITIONS

Kathryn Sabella, M.A., Ph.D. cand.*

Laura Golden, B.A.

Emma Pici-D'Ottavio, B.A.

Kathleen Biebel, Ph.D.

Transitions Research and Training Center

Systems and Psychosocial Advances Research Center (SPARC)

Department of Psychiatry

University of Massachusetts Medical School

*Department of Sociology, University of Massachusetts - Boston



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.

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BACKGROUND



Young adults with SMHC

Young adulthood = critical time for establishing a foundation for adult working life and exploring career interests.

Early employment and education opportunities predict long term economic progress

- Young adults with serious mental health conditions (SMHC) often struggle with school and work:
 - Lower rates of high school graduation
 - Lower rates of enrollment in post-secondary education, low graduation rates
 - Less likely to be employed, and when employed, often in “secondary labor market”



Young Adults with SMHC: Challenges

- Young adults managing SMHCs experience higher than average rates of:
 - Involvement in the justice system
 - Substance abuse
 - Co-occurring disabilities
 - Complicated or challenging familial relationships
 - Interaction with multiple service systems
 - Parenting at an early age



Why this research?

- Little is still known about *how* individuals with SMHC navigate employment, education, and training activities during young adulthood
- More knowledge to inform the development of future interventions to improve outcomes



Objectives: Descriptive & Exploratory

- **Describe** the education, training and work experiences of YA with SMHC, including their successes and challenges
- **Explore** the impact of contextual circumstances (familial background characteristics, behavioral health patterns) and pivotal life events (involvement in justice system, hospitalizations) on education and employment activities
 - Personal and environmental factors influence a young person's trajectory - cumulative and causal chains



METHODS

The Collecting Histories of Education and Employment
during Recovery (CHEER) Study



Eligibility Criteria

- 25-30 years old (22-30 if a young parent)
- Have been diagnosed with at least one of the following:
 - Major Depression
 - Anxiety Disorder
 - Post-Traumatic Stress Disorder
 - Bipolar Disorder
 - Schizophrenia or Schizoaffective Disorder
 - Eating Disorder
 - Borderline Personality Disorder
- Reported significant treatment or disruption due to SMHC
 - Inpatient hospitalization
 - Partial hospitalization
 - Client of MA DMH
 - Received Special Educ Services
 - Formal Leave of Absence
- Some school and work history



Methods

- One-time, 90 minute semi-structured qualitative interviews
- Instrument was developed through an iterative process with input from young adults with SMHC

Participants are asked:

- to describe their education, training, and employment experiences from age 14 to present
- how decisions were made regarding education, training, and employment activities and how goals shift over time
- the influence of their SMHC, other contextual life circumstances (e.g. family history) and pivotal life events (e.g. parenting, health issues) on these activities



Recruitment Methods

- Recruitment Sources:
 - clubhouses, outpatient mental health providers, drop-in resource centers, and referrals from contacts within the MA Department of Mental Health
- Interviews conducted in the community
- Interviews and recruitment conducted by young adult staff members
- \$30 gift card incentive
- To date, 55 young adults have participated



Coding and Analysis

- Most interviews recorded, all transcribed
- Dedoose software
- Inductive, grounded theory approach
- Codebook development based on initial descriptive coding and discussions of ~30 interviews
- 7 transcripts thoroughly coded to date
 - Moving from descriptive and holistic coding to eventual code-mapping and axial coding
 - Eventual quantification of school, training and work activities
 - Collaborative coding process



PRELIMINARY FINDINGS



Demographics (N=55)

Gender

Female	60%
Male	38%
Transgender	2%

Age

Range	22-30
Average	27
Mode	27

Race

White	78%
Black or African American	11%
Other	11%

Ethnicity

Non-Hispanic, Latino/a, or Spanish	89%
Hispanic, Latino/a, or Spanish	11%



Demographics (Cont'd) (N=55)

Diagnoses Reported

Major Depression	69%
Anxiety Disorder	64%
PTSD	42%
Bipolar Disorder	38%
Schizophrenia or Schizoaffective Disorder	27%
Eating Disorder	16%
Borderline Personality Disorder	11%
Other	22%

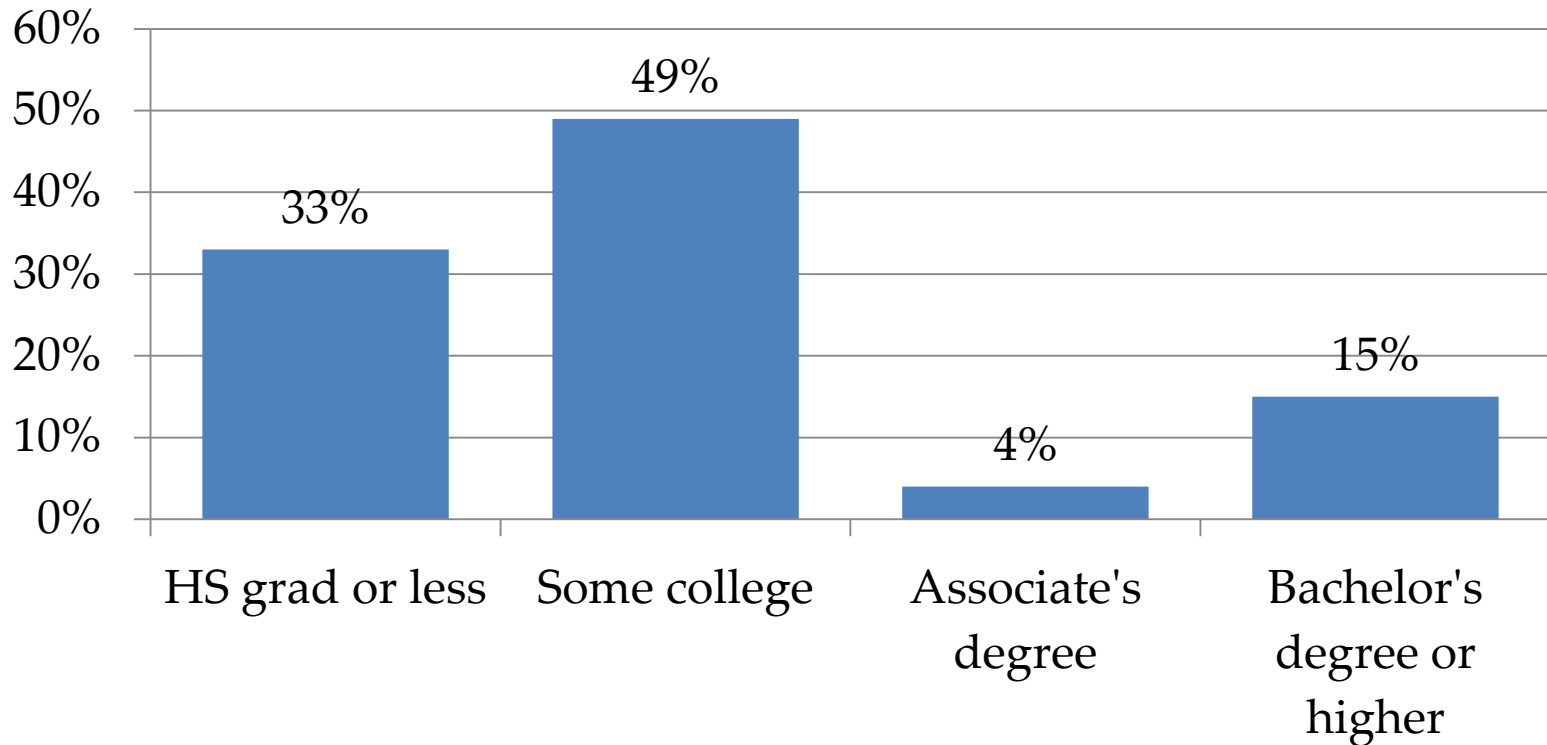
Age of 1st Diagnosis

Under age 16	55%
Between 16-21	38%
Between 22-30	7%

Average number of diagnoses reported = 3

Demographics (Cont'd) (N=55)

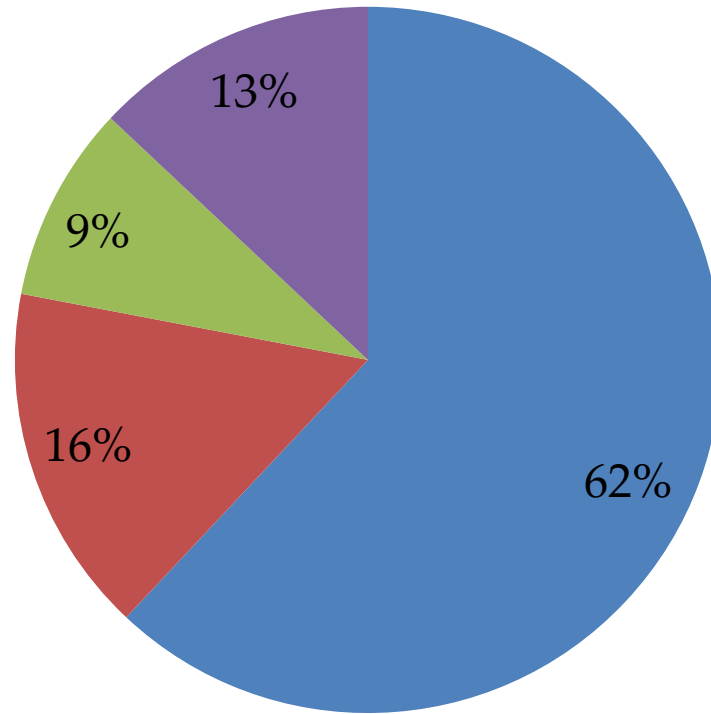
Highest Education Level Completed



Demographics (Cont'd) (N=55)

Annual Income

■ <\$10,000 ■ \$10K-\$20K ■ \$20-\$30K ■ >\$30K





Overview of Qualitative findings

1. Navigating school, training, and work
 - Description
 - Challenges
 - Successes
 - Gaps in school, training, and work
2. The role of services and supports
3. Life course trajectories
 - Influential and complicated personal and family backgrounds
4. Stigma, disclosure, and perceptions of mental illness



Navigating School, Training, and Work

- Back and forth between school and work
- Many starts and stops
- Short-term employment, most jobs < 1 year
 - Retail
 - Restaurant/Service industry
 - Some volunteer positions
- “piecemeal” education
- Social connections = jobs



Challenge:

Pace or workload

- Jobs too stressful

I worked at a grocery store as a bag boy. And I did that for a couple of weeks. And again my anxiety just kind of got the best of me. And so I left that after a couple of weeks. And then I got another job as a bag boy a few months later. And my anxiety got the best of me again, and I just always struggled with working and doing that type of stuff from my anxiety. And just some from my depression and stuff like that.....

I worked a lot of the busy shifts so it was kind of hectic. So that made it a little more harder to keep the job because I was not used to so much—so many people, so much busy-ness I guess. -Charlie, 26

- Coursework too difficult or overwhelming
 - Unmet need for help or accommodations
 - Lack of purpose in school



Challenge: social interaction

- Social interaction on the job
- Peer or roommate interactions in college
- Strongly tied to likes and dislikes

It was really good because it was my first pizza delivery job. So like I had never done a delivery job before. And at the time I made more money. So I was kind of nervous a little bit, but I liked it because 1) you make really good money 2) Because you don't have to deal with people as much. Because you take food and run out the door. And then you drop it off to someone and then run back. So it was like you don't have to talk to people a lot. –Sonia, 28



Challenge:

Attendance or scheduling

- Impact of medications and symptoms

- Inconsistency

- Insomnia

- Transportation

- Too many absences

Or

- Stop showing up

I would have like mood swings. There would be like times where I'm like really happy and really excited to go to work. And then there'd be other times where I'm just like really depressed and I really didn't want to go. And that would be the time where I just didn't show up for work. And then I would try to save my job and call them and just tell them I was sick or something. And that didn't really work most of the time. So I'd have to go out and find a new job, and it was just stressful and depressing at the same time because I didn't know if I would get hired or what would happen. -Charlie, 26 yr old



Challenges related to SMHC

- Symptom management
- Impact of medication
- Suicide attempts, suicide ideation

My mental health has always been at the forefront of my career goals, because I need to think about what I can reasonably do and what's not going to stress me out. And what I can excel at while giving myself the self-care I need and everything, so it's always very much affected my career goals. -Ashley, 27

Gaps in school and/or work

- “too sick”
 - Impact of medications
 - Needed intensive treatment

- Can't afford school
 - Accrued student loan debt
 - Big commitment,
lacking a clear goal





Successes in school or work

- Promotions
- Good grades
- Praise from others
- Especially when they involve overcoming obstacles or adversities

But yeah, especially considering that I had dropped out of school anything that I could latch onto to give my family an ability to brag was important so you know being promoted quickly and holding a position that you know if you haven't worked in retail you might not realize how difficult it is. Because basically I was doing all the work of a manager without being on salary. That's basically what a frontend supervisor does. But yeah, I was proud of that. –Ashley, 27



2. The role of services and supports

- Finding the right fit, navigating services
- Helpful
 - DMH Caseworkers
 - Job placement programs
 - Clubhouses, social interaction, volunteering
- Not Helpful
 - Lack of knowledge (diagnosis-based or SSI/SSDI)
- Varying levels of parental support



3. Life course trajectories

- Diagnosis at an early age
- Complicated family backgrounds
 - Trauma/abuse
 - Family history of substance use and/or mental illness
- A motivator to “do better”



4. Stigma, disclosure, and self-perceptions

- Most unlikely to disclose
 - Many don't see any benefit in disclosing
- Familial experience with MI is helpful
- Labeling of mental illness, misdiagnoses and multiple diagnoses

Honestly sometimes like I get diagnosed, and I don't feel that I'm that category. You know. Like sometimes I felt like they were just labeling me, and I'm not sure how I feel about that one. But I know the bipolar is one of them, and I don't really feel like I have that really because I don't think I've ever had symptoms. I don't know.....I thought they were just labeling me, like whatever. I mean they're the head honchos. They know all about that stuff, so I guess maybe I am, but I've never really felt the symptoms of that before. –Nicole, 30



LIMITATIONS AND CONCLUSIONS



Limitations

- Retrospective recall
 - Accuracy of recall
 - Retrospective lens





Helping YA in “career exploration”

- Aspects of the job that seem to be most influential
 - Level of social interaction
 - Pace, stressfulness
 - Schedule demands and flexibility
- Aspects of post-secondary schooling that seem to be influential
 - Paying for school
 - Setting clear goals
 - Planning ahead to manage workload (formal or informal supports)



A work in progress.....

- Exploring the influences of early childhood/adolescent experiences on school and work experiences in young adulthood
 - Stress process theory, coping skills
- Exploring the experience of managing a SMHC, stigma, labeling and self-perceptions
 - Modified labeling theory
 - Medications...it's complicated
- Exploring subsample of parents



Next steps

- Continue refining the codebook
- Thorough coding of all transcripts
- Quantification of school and work activities
- Clarification of themes





THANK YOU!!!

- Kathryn.Sabella@umassmed.edu
- Laura.Golden@umassmed.edu
- Emma.PiciDottavio@umassmed.edu



Navigating school and work as a young adult with a SMHC

I'd say that it's made it more challenging, but that it's made the accomplishment that much more something to be proud of. Because you know other people that don't have mental health challenges don't have to sort of jump over the hurdles that are as big as mine.

-XXX age X