

Improving Education and Employment Outcomes for Transition Age Youth (TAY) With Serious Mental Health Conditions (SMHC)



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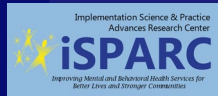


February 21, 2024

Acknowledgements

The Learning & Working Rehabilitation Research & Training Center at the Transitions to Adulthood Center for Research 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 UMass Chan Medical School, Worcester, MA, Department of Psychiatry, Implementation Science and Practice Advances Research Center.

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National Findings on Education and Employment in Young Adulthood

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Director of Transitions to Adulthood Center for Research, Co-
Investigator*

Background – Young Adults with Serious Mental Health Conditions (SMHC)

- Young adults = transition-age youth= emerging adults (ages 14-29)
- SMHC = the presence of a serious mental illness (SMI) OR serious emotional disturbance (SED) at ages 14-29
- The majority of mental health conditions begin prior to age 25; most onset is during secondary school (middle and high school).
- Young adults, ages 18-25, have the highest rates of serious mental health conditions yet the lowest rates of mental health service use compared to older adults.
- Young adulthood is a unique developmental stage of life marked by rapid cognitive maturation and social, moral, and psychosocial development.
- Familial dynamics are changing, legal adulthood at age 18.
- Divided child- and adult-serving systems
- Unique youth subculture

Background – Secondary and post-secondary education

- Among high school students receiving special education for emotional disturbance:
 - Worst attendance, grades, and grade progression compared to other disability groups;
 - A third dropout
 - A third of those who graduated did not receive regular diploma
- In post-secondary settings:
 - When they do attend college, young adults with SMHC are much more likely to attend part-time and drop out compared to their peers
- Post-secondary education costs are rising and student debt is crippling

Background – Employment

- Young adults with SMHC are less likely to be employed than older adults with SMHC and their peers without SMHC
- Being unemployed or underemployed leads many young adults with SMHC to dependence on Social Security benefits
 - 24% of young adults receiving SSI had mental health conditions
- Non-linear patterns of work
- First 10 years in the labor market likely shape your lifetime earning potential
- Lifetime earnings also tied to years of education
- Increased rates of substance use, justice system involvement, child welfare involvement, and parenting at early ages complicate these pictures

National Findings on Education and Employment in Young Adulthood - Qualitative

Barriers to continuous pursuit of school and work:

- Stress induced anxiety and panic
- Periods of increased mental illness symptomatology
 - Hospitalizations and medication changes
- Interpersonal challenges with peers, coworkers, supervisors

Facilitators to continuous pursuit of school and work:

- Flexible school and work environments (e.g., flex scheduling, hybrid learning)
- Supportive peers, supervisors, and instructors with high levels of mental health literacy

National Findings on Education and Employment in Young Adulthood - Quantitative

Research Questions:

1. What are the longitudinal patterns of school, training, and work activities of Y&YA with SMHC?
2. Do various social and psychosocial factors associated with employment and education change over time?
3. Are various social and psychosocial factors influence or influenced by school, training, or work, or other demographic factors?

Study methods:

- Young adults ages 16-25 with SMHC
- Longitudinal quantitative web-based survey every 4 months, national sample
- Between 12-24 months of data collection, 2018-2022
- Investigation of school, training, and work activities, general demographics, life events, and theoretically informed psychosocial covariates

National Findings on Education and Employment in Young Adulthood – Quantitative (cont.)

Findings:

- Young adult's school, training, and work activities are frequently fluctuating and non-linear, making it difficult to quantify.
- Lots of “shades of grey” that can only be uncovered qualitatively or with more frequent reporting
- Psychosocial covariates hypothesized to influence or be influenced by school, training, or work experiences do change over time (e.g., self-stigma, vocational outcome expectations, psychological distress, functioning).
- Those who were NEET (Not Engaged in Employment, Education, or Training) had significantly poorer functioning than those who were working or going to school
- Young adults with certain experiences and/or from certain backgrounds may experience additional disadvantages including those who:
 - Are NEET or struggling to engage consistently in school, training, or work
 - Are hospitalized for a mental illness
 - Have failed a class in post-secondary setting
 - Have had no place to call home
 - Have a diagnosis of bipolar disorder or schizophrenia

National Findings on Education and Employment in Young Adulthood – Secondary Analysis

Research Questions:

1. How are young adults faring in employment and education.
 - How do the education and employment pursuits of YA with SMHC compare to YA with no MHC (0MHC) or mild/moderate MHC (MMHC)?
 - Are there employment and education disparities experienced by vulnerable subgroups and/or other risk factors?
2. Are there trends, post-Great Recession, in employment or education that indicate a pattern of recovery post-Great Recession for YA with SMHC?

Study methods:

- Collaboration with data analysts at RTI International
- Using data from National Survey of Drug Use and Health (NSDUH) Public Use Files, years 2008-2019
- Preliminary analyses for Research Question #1 underway

National Findings on Education and Employment in Young Adulthood – Secondary Analysis of NSDUH data – Preliminary Findings

Weighted percentages, 18-25 year olds, 2008-2019

	No MI	Mild MI	Moderate MI	Serious MI
Currently employed full- or part-time*	67.07%	67.36%	65.63%	64.71%
Currently enrolled in school full- or part-time	46.37	47.26	46.17	46.00
<i>Not</i> engaged in school or work*	14.91	15.52	17.11	17.89
Three or more employers in last year*	13.70	18.32	20.54	22.46
College graduate*	14.45	16.14	14.66	11.66

* chi-square comparing No MI to Any MI is statistically significant at p<.05 level

ENHANCING VOCATIONAL FUNCTIONING OF SECONDARY STUDENTS WITH CAREER AND TECHNICAL EDUCATION: Policy And Practice

Marsha Langer Ellison, PhD., *Professor, Department of Psychiatry, Co-PI Learning & Working RRTC*

Colleen E. McKay, MA, CAGS

Emma L. Narkewicz, MPA

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The What and Why of Career and Technical Education



Provides secondary students with:

- Technical knowledge
- Academic and employability skills
- Real-world experience

That can lead to careers that are:

- High-skill
- High-wage
- In-demand

Activities Included in Secondary CTE Programs

Integrated academic and vocational courses

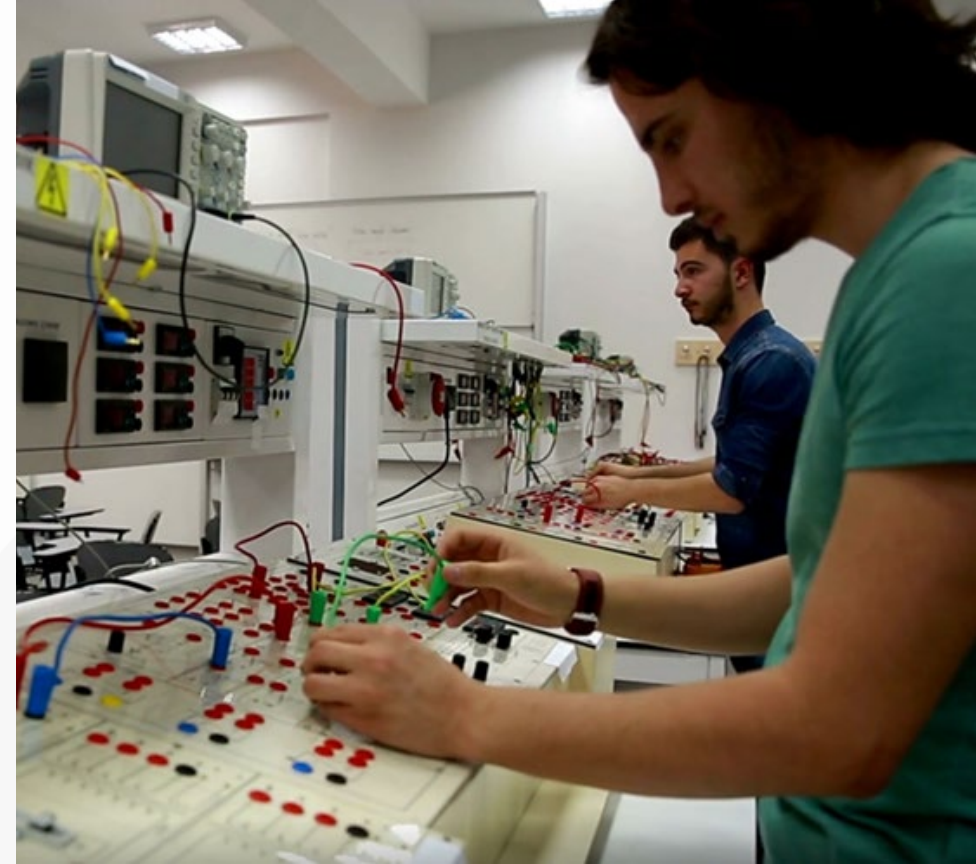
In-school and community work-based learning experiences

- volunteer work,
- job shadowing,
- work-study,
- apprenticeships, or
- internships

Linkages to postsecondary education and/or employment

Opportunities to earn certificates in specific career areas

Partnerships with local businesses



Strengthening Career and Technical Education for the 21st Century Act (Perkins V)

- ~\$1.3 billion annually in funding for provision of CTE in secondary and post-secondary schools.

Perkins V requires or encourages state CTE programs to:

- **Partner with business** and industry
- Structure courses to meet **concentrator status**.
- **Recruit special populations including students with disabilities.**
- **Conduct a needs assessment** to align with high-wage, high-skill, or in-demand career fields.
- **Analyze equity gaps in enrollment** for special populations.
- **Report performance data** disaggregated by special population status.
- Submit plans **to promote accessibility** for disability groups.
- **Identify achievement gaps and address racial inequities** in access and participation of groups.

Structure of CTE Administration

- State CTE Directors
 - Responsible for developing and implementing the Perkins V plan
 - Allocates Perkins V funds to higher and secondary education
 - Interfaces with state agency directors
- Local or district CTE administrators
- CTE programs in high schools and community colleges
- Sometimes “separate” vocational high schools
- Special education and guidance may have limited knowledge of CTE

Survey of State CTE Directors: Key Takeaways

- State CTE Directors aim to leverage Perkins V to improve equitable access, success and outcomes for learners with disabilities in CTE.
- State CTE Directors are partnering with other state leaders to support learners with disabilities in CTE; however, engagement does not always translate to direct action.
- State level commitments to learners with disabilities may not be brought to practice on the local level.
- Many states do not disaggregate CTE data by disability type, even though this information is available through state departments of special education.
- Learners with disabilities can access opportunities to earn credentials in high-skill, in-demand industries; however, few states offer interventions, accommodations or programs that address their specific needs.

<https://www.umassmed.edu/TransitionsACR/publication/education/tip-sheets/2022/05/cte-brief/>



Advancing Employment for Secondary Learners with Disabilities through CTE Policy and Practice

Date issue

The Strengthening Career and Technical Education (CTE) for the 21st Century Act (Perkins V, P.L. 115-224) provides new opportunities for states to serve learners with disabilities in CTE. Perkins V specifies that learners with special population status, including learners with disabilities, need to be prepared for high-wage, high-skill, in-demand employment opportunities or post-secondary education. Perkins V requires state and local leaders to describe how CTE will be made available to learners with special population status and provides flexible funding and policy levers to achieve that goal.

To understand how states are leveraging Perkins V to support learners with disabilities in CTE, researchers at the University of Massachusetts Chan Medical School partnered with Advance CTE to conduct an online survey of State CTE Directors. While the survey was intended to lay the



Why CTE is important for learners with disabilities.

The secondary school experience and post-high school outcomes are poor for youth with disabilities compared to youth without disabilities¹. Despite federal programs promoting their work experiences², youth with disabilities engage in paid and unpaid work experiences at lower rates during high school and have lower

without disabilities)³. Children who receive supplemental security income as a result of a disability have lower employment rates than peers without disabilities⁴, and dependency on Social Security disability benefits as adults is a common outcome⁵. Poor outcomes for students with emotional disturbance include higher drop-

Effects of Taking Any General CTE and Concentration of CTE on Full-time Employment among Student with Emotional Disturbance

Odds Ratios		
Full-time employment, by time period	Any general education CTE	Concentration* of general education CTE
Up to 2 years post high school	1.95	4.07**
2 up to 8 years post high school	2.04	1.80
Any time since leaving high school	2.49*	4.04*

Concentration = earning 4 or more credits in an occupationally specific CTE subject * $p < .05$

Encouraging CTE for Students with Emotional Disturbance

<https://www.umassmed.edu/TransitionsACR/models/test/>



Tip Sheet 16

Transitions to Adulthood Center for Research

September 2020

Career and Technical Education (or CTE) classes are a great way to learn skills for your future career. CTE is the practice of teaching career skills to students. A concentration of CTE courses is 4 classes that add up to prepare you for a particular career. If you take a concentration of CTE courses, you can graduate with special certifications that make you eligible to work in certain jobs, for example as a Certified Nursing Assistant or Auto Repair Technician. These certifications can help you get a head start on your college or career.



Which CTE focus is right for me?



Choosing a focus that matches your interests is important. Your school guidance counselor or transition planner can do activities with you to help you choose a concentration:

- Tell you about all of the different career paths and what types of classes you would take
- Complete a "career interest inventory" or other survey to think about careers that are a good fit for you
<https://www.rcsdki2.org/cms/lib/NY01001156/Centricity/Domain/4459/Career%20Interest%20Survey.pdf>
- Be sure that your career goal and the courses you will need get listed in your Graduation Plan, Individualized Learning Plan (ILP) or Individualized Education Program (IEP)

It's okay if you change your mind!

It's okay if you learn that the first concentration you try is not the direction you want to go with your career. For example, you may have thought you wanted to go into fashion design; but, during the first course of sewing realize this concentration is not for you. That's okay. You have learned something about yourself and can check that career off your list.

Case Studies of Model States

Methods:

- Interviews with CTE directors or designees
- State data
- Perkins V plan review



Arkansas



Delaware



Wisconsin

Strategies to Support Students with Mental Health Conditions in CTE

- Focus on students at risk of drop-out
- Communicate about CTE to families/students to reduce stigma
- Address career planning early in education and link to CTE coursework
- Provide flexible attendance policies in CTE
- Offer guidance for higher ed to provide credits for prior learning e.g., apprenticeships
- Add soft skills training to CTE programming



State Level Strategies to Support Students with Mental Health Conditions in CTE

Inter-agency Collaboration: CTE with Special Education/Secondary and Post-secondary Education/Vocational Rehabilitation/Welfare/Commerce

Topics and Strategies for Inter-agency collaboration

- Professional development regarding students with MHC
- Accommodations, how to apply them to CTE
- Leverage Pre-ETS dollars for CTE work-based learning opportunities, job-shadowing, internships
- Identify gaps in access and outcomes by disability type at the local level
- Mutual learning of each other's opportunities at the local level, peer-to-peer discussion opportunities
- Braid funding and develop MOUs on local level for specified outcomes
- Career conferences with business, workforce development, education

Feedback from CTE Instructors

Accommodation issues:

- Accommodations were given to the entire class to prevent “singling out”
- Accommodations were used in the classroom but not for “hands-on” work
- Some instructors perceived accommodations as a “crutch” that sets students up for failure in the workplace
- Students and instructors needed info about accommodations for credentialing and licensing
- Instructors reported that some student’s IEPs/504 plans were outdated or unrealistic

Other CTE instructor feedback:

- Students with MHC were steered away from STEM classes and into unrelated classes perceived as less rigorous, which could become frustrating for students and instructors
- Instructors felt it was important emphasize rules, accountability, and self-advocacy in their classes to prepare their students for real life
- Internships/externships were seen as a vital way to engage students & allow students to test out if they enjoyed a career pathway/job

CTE Takeaways

- CTE is an effective way to promote employment after high school for students with MHC and other disabilities
- There are numerous ways that CTE can be improved to better support students:
 - Address student and family stigma about CTE
 - Disaggregate data by disability type to better understand the involvement and impact of CTE for students with disabilities
 - Inter-agency coordination with VR, Special Education, Secondary Education, local businesses, and other Workforce Partners to promote access and success
 - Develop accommodations for lab-based work and credentialing
 - Train and engage CTE instructors to better understand and provide accommodations
 - Maintain high expectations, provide flexibility when possible, and support students to access STEM courses
 - Provide students with earlier access to internship, externship, and apprenticeship opportunities to test out career pathways

Enhancing Persistence in School & Work: The Role of Executive Functioning Skills

Michelle G. Mullen, PhD, CRC, CPRP, *Assistant Professor of Psychiatry,*
Co-Investigator



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Because I always forget...

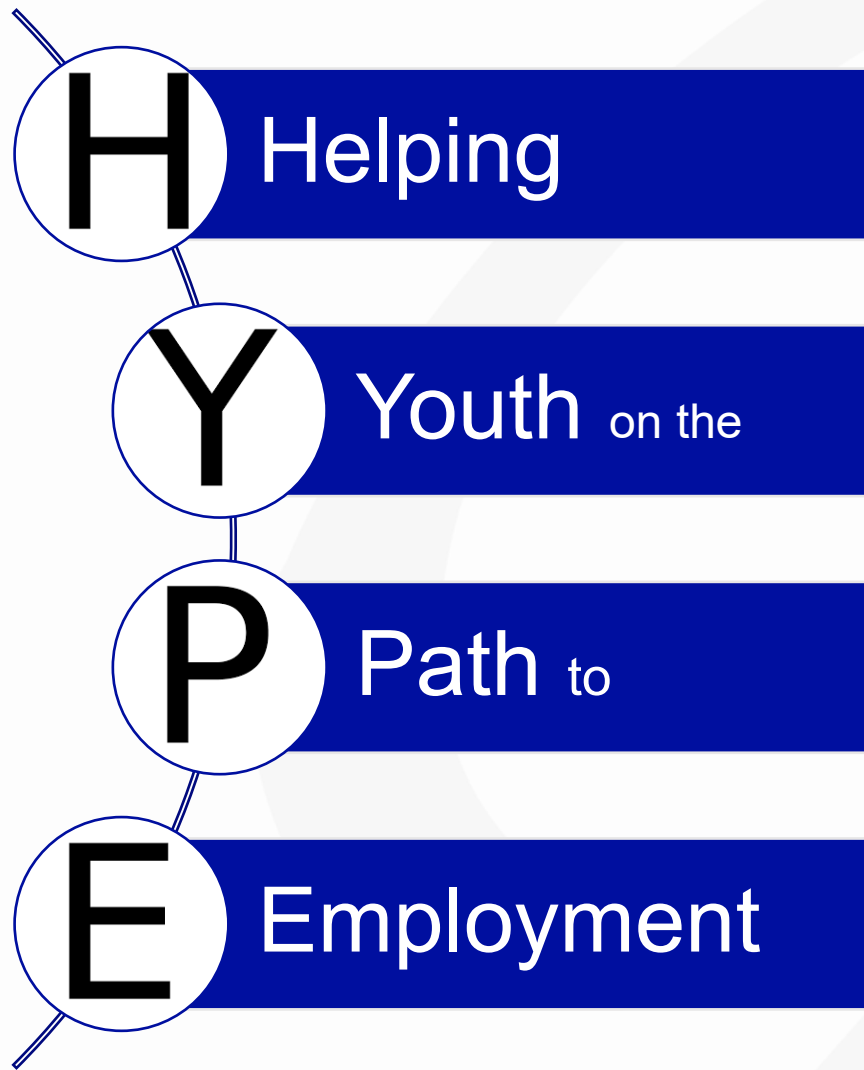
20+ years practicing, developing, overseeing, and researching SE & SEd

Clinical developer of Helping Youth on the Path to Employment (HYPE) & Focused Skills & Strategies Training



Areas of interest:

- Young adult career development
- Preventing disability among young adults with mental health conditions
- Vocational Persistence
- Executive functioning development and use
- Implementation Science
 - translating research to practice (and practice to research)
- Facilitating the rewriting of damaging narratives related to vocational achievement and identity for those with mental health conditions



- **Young adult career services** focused on ***prioritizing education early*** to enhance school and work outcomes
- **Fluid career development approach- both** education and employment supports:
 - Support movement between school and work
 - Consistent & adequate skills & supports
- Developed to **prevent** poverty and disability-identity
- Focuses on **increasing persistence & reducing disruptions**

Modernizing Employment Services

- HYPE is a manualized intervention for both educational and employment supports
 - Focuses on building *careers*
- Built on psychiatric rehabilitation principles & goals
- Blending evidence-based models with innovation
 - IPS, BU's Choose- Get- Keep- Leave, Cognitive Remediation
- Built on TTM/ Stages of Change & Motivational Interviewing
- *Intentional* services to leverage strengths and interests, while targeting the barriers to successful goal achievement
- Focused on vocational persistence; prevention of drop-out of both school & work

Pillars of HYPE Services

- Intentional Services
- Goal Development & Refinement
- Skill Development
- Resource Development
- Accommodations & Assistive Technology Education



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Helping Youth on the Path to
Employment
HYPE



HOME ABOUT US HYPE PRINCIPLES & VALUES TRAINING & CONSULTATION PRESENTATIONS & RESOURCES HYPE COURSE HYPE-ON-CAMPUS CONNECT WITH US



<https://www.umassmed.edu/HYPE/>

Suite of Services: Together or Separate

HYPE (1 hr, weekly)

Career Development

Employment/Education Support

Skill Development to promote goal development and attainment



FSST (1 hr/wk) 12 weeks)

Executive Functioning Skill Development

-Time/Task Management

- Memory

-Attention

-Problem Solving



Focused Skills & Strategies Training (FSST)

- 12 session, 1 session per week, manualized coaching intervention
- Grounds all support strategies in current environment (school or work)
- Explores what's getting in the way of achieving goals
- Individualizes skills and strategies
- Uses distributed learning & gamification
- Focuses on executive functioning skills to:
 - manage competing demands
 - reduce cognitive burden
 - enhance self-regulation/management

Executive Functioning Skills for Students & Employees

Introduction to Cognitive Skills and Agenda



Welcome to Focused Skill & Strategy Training (FSST) for Work!

This course was designed to provide you with skills, strategies, and tools to improve your cognitive skills, such as attention, concentration, learning, memory, organization, planning, and problem-solving.

Some of these skills, strategies, and tools may be familiar to you, and some may be new.

Give these approaches a try in session and in your everyday life and try to make these strategies into habits so you can use them automatically when you need to.

These habits will be the nuts and bolts of your success!

◀ 2 / 10 ▶



Session 1	Introduction to FSST and Time Management <ul style="list-style-type: none">➤ Goal Setting, Time Management, Introduction to Calendaring
Session 2	Prospective Memory (Remembering to Remember) <ul style="list-style-type: none">➤ Calendaring, Lists, Linking Tasks and Prioritizing
Session 3	Short-Term Prospective Memory <ul style="list-style-type: none">➤ Weekly Calendar Planning, Short-Term Memory Strategies
Session 4	Task and Conversational Attention <ul style="list-style-type: none">➤ Strategies for Improving Focus and Attention
Session 5	Attention Skill Practice <ul style="list-style-type: none">➤ Attention Strategies and Skill Practice, Sequence Ordering
Session 6	Verbal Learning and Memory/Name Learning <ul style="list-style-type: none">➤ Memory Process and Encoding Strategies, Name Learning
Session 7	Verbal Learning and Memory/Retrieval <ul style="list-style-type: none">➤ List Learning, Study Skills, Retrieval Strategies
Session 8	Verbal Learning and Memory/Note-taking <ul style="list-style-type: none">➤ Note Taking
Session 9	Cognitive Flexibility and Problem-Solving/Method <ul style="list-style-type: none">➤ Brainstorming, Problem-Solving Method
Session 10	Cognitive Flexibility and Problem-Solving/Practice <ul style="list-style-type: none">➤ Categorizing, Hypothesis Testing, Strategy Verbalization
Session 11	Cognitive Flexibility, Problem-Solving, and Planning/Strategies <ul style="list-style-type: none">➤ Self-Monitoring, Set-Shifting, Managing Distractions
Session 12	Skills Integration, Review, and Next Steps <ul style="list-style-type: none">➤ Review of all Skills and Strategies, Connecting to Goals

FSST's Impact on Academic Persistence

FSST RCT

- FSST significantly impacted academic persistence ($p = .045$)
- FSST participants were **6 times more likely** to finish one academic year (2 semesters) than those in the control group ($\beta = 1.895$)
- FSST had **very large** estimated effect on academic persistence ($d = 1.025$)

HYPE on Campus RCT

- Participants who completed FSST as a part of HYPE were significantly more likely to complete a greater number of courses ($p = .02$) and credits ($p = .007$) than those who did not complete FSST.

FSST at Work- New!!

- Given these results, we have adapted FSST for young adults at work.
 - Completed open trial (Davis, PI; Mullen, Co-PI)
 - Currently in RCT; first person finished!!!

Is HYPE and FSST available??

- Yesssssss!!
- Organizations/ teams can be trained and supported to do either, HYPE or FSST, or both
- HYPE Courses: facilitated by a young adult, for young adults
 - Career Decisions (6 weeks)
 - Work Prep (7 weeks)
 - School Prep (6 weeks)
 - HYPE Course Facilitator training
- Colleges and universities can offer specialized HYPE/FSST services



If interested, contact us! HYPE@umassmed.edu

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Thank you!

Please contact

HYPE@umassmed.edu to learn more!



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Pre-Employment Transition Services

A Prismatic Study on Implementation in Massachusetts

Marsha Langer Ellison, PhD
Emma L. Narkewicz, MPA
Hannah Seward, Ph.D

We acknowledge our collaborators who lent their expertise and made this study possible:
Dr. Kathleen Biebel, Deputy Commissioner, and Jessica Cimini, Director of Operations,
Massachusetts Rehabilitation Commission
Dr. Susan Foley and Joseph Marrone, UMass Boston, and
The stakeholder advisory board



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Presented to SAMHSA Feb. 21, 2024

What are Pre-ETS?

- ❖ Mandated by the Workforce Innovation and Opportunity Act (WIOA) P.L. 113-128
- ❖ State agencies of vocational rehabilitation (VR) provide five “Pre-Employment Transition Services” (Pre-ETS)

The five services in Pre-ETS are:

- 1) job exploration counseling
- 2) work-based learning experiences
- 3) counseling on opportunities for post-secondary education programs or training
- 4) workplace readiness training to develop social and independent living skills
- 5) instruction in self-advocacy

Pre-ETS and Students with Mental Health Conditions

- ❖ Pre-ETS are provided to students with disabilities ages 14-21 who are:
 - eligible for and receiving VR services; and
 - who are *potentially* eligible for VR services by virtue of having a qualifying disability.
- ❖ The “potentially eligible (PE)” inclusion criteria for Pre-ETS:
 - Makes Pre-ETS available to students who are in services or settings not typically intersected with VR
 - May serve as a pathway for some students with SMHC to become aware of, and to consider applying for VR services, when they would not have done so otherwise.

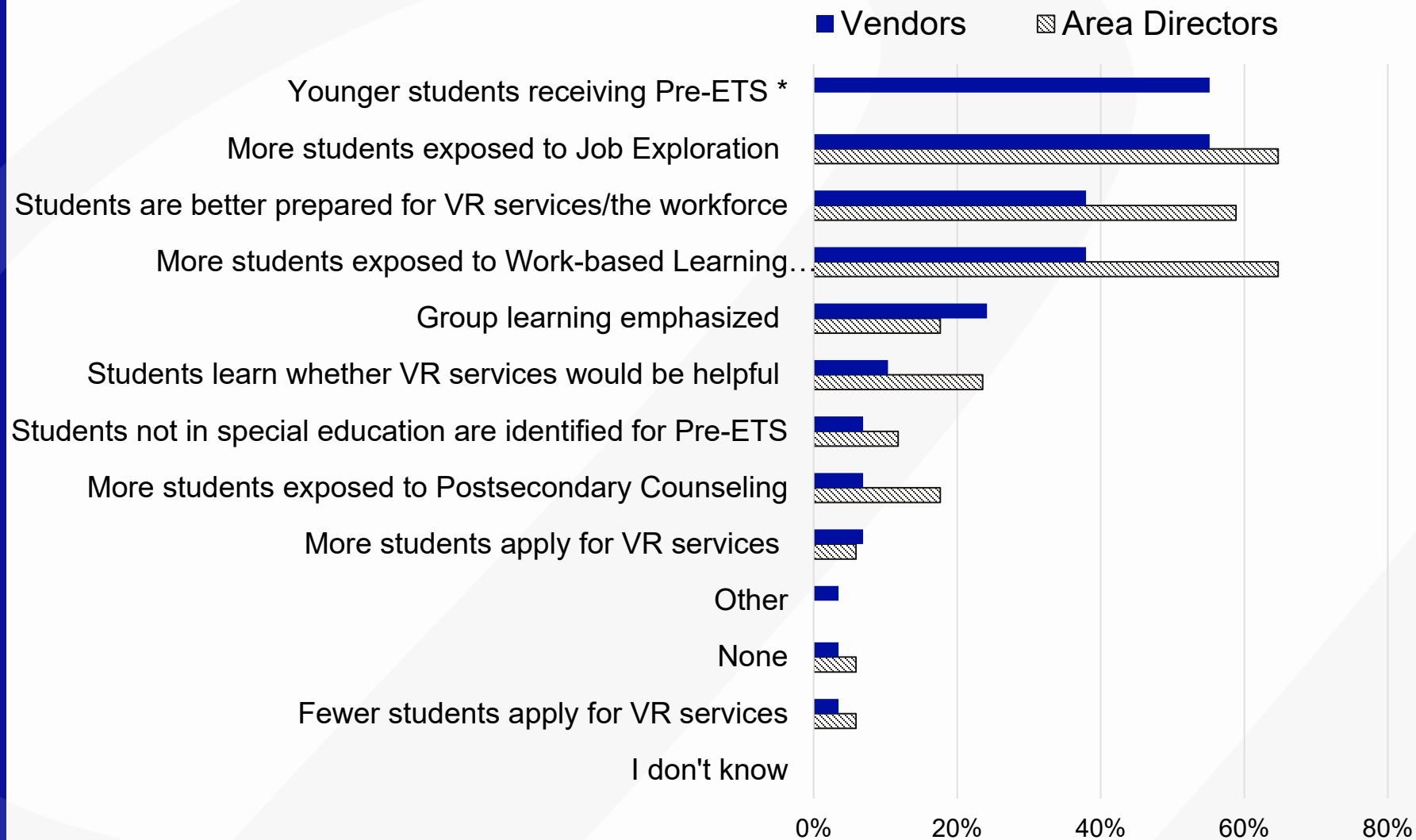
The
Massachusetts
Implementation
Study



Prismatic, Stakeholder Informed Research Approach

Perceived Main Benefits of Pre-ETS

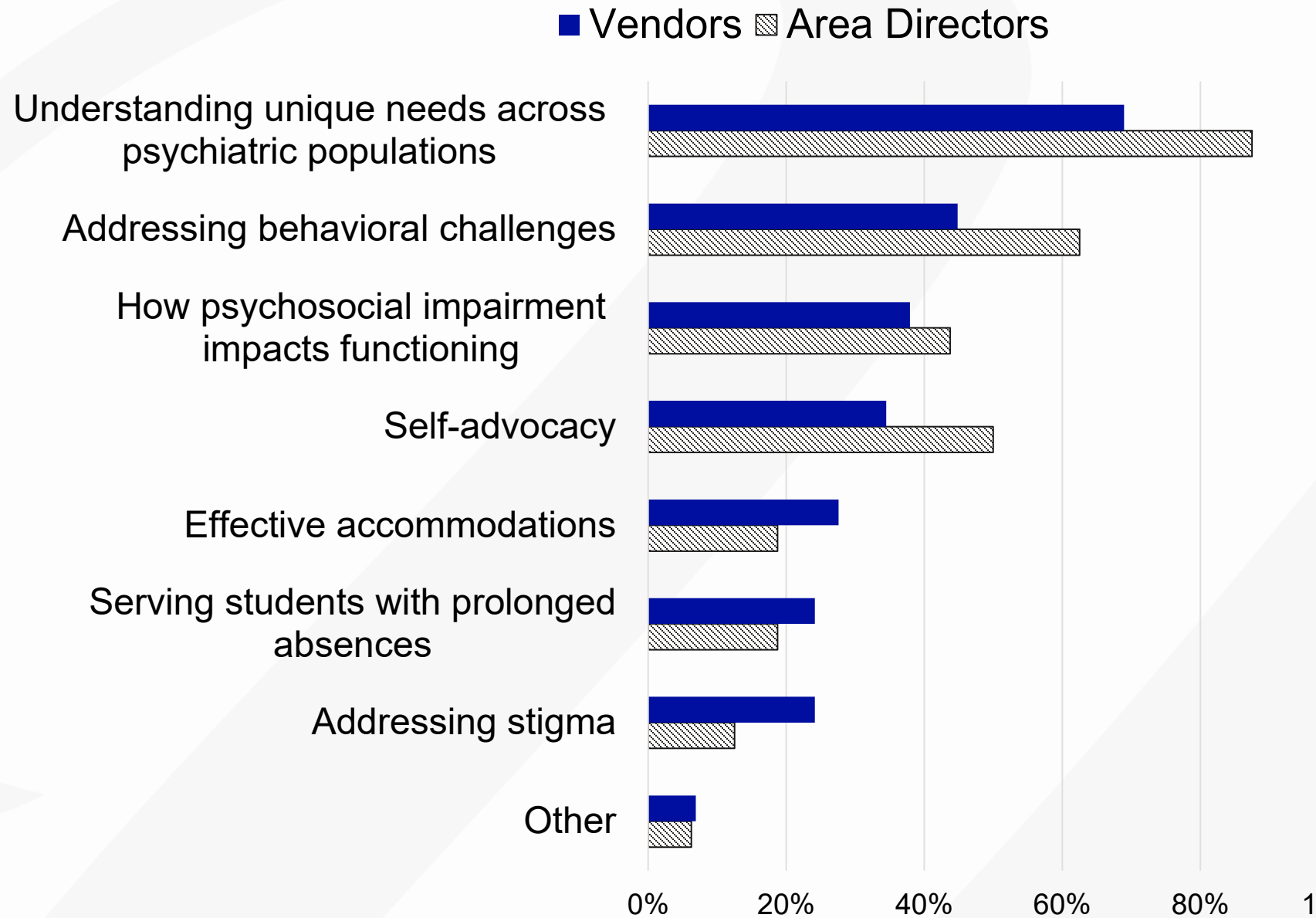
(Area Directors n=17, Vendors n=29)



Note. * = Option only available to vendors

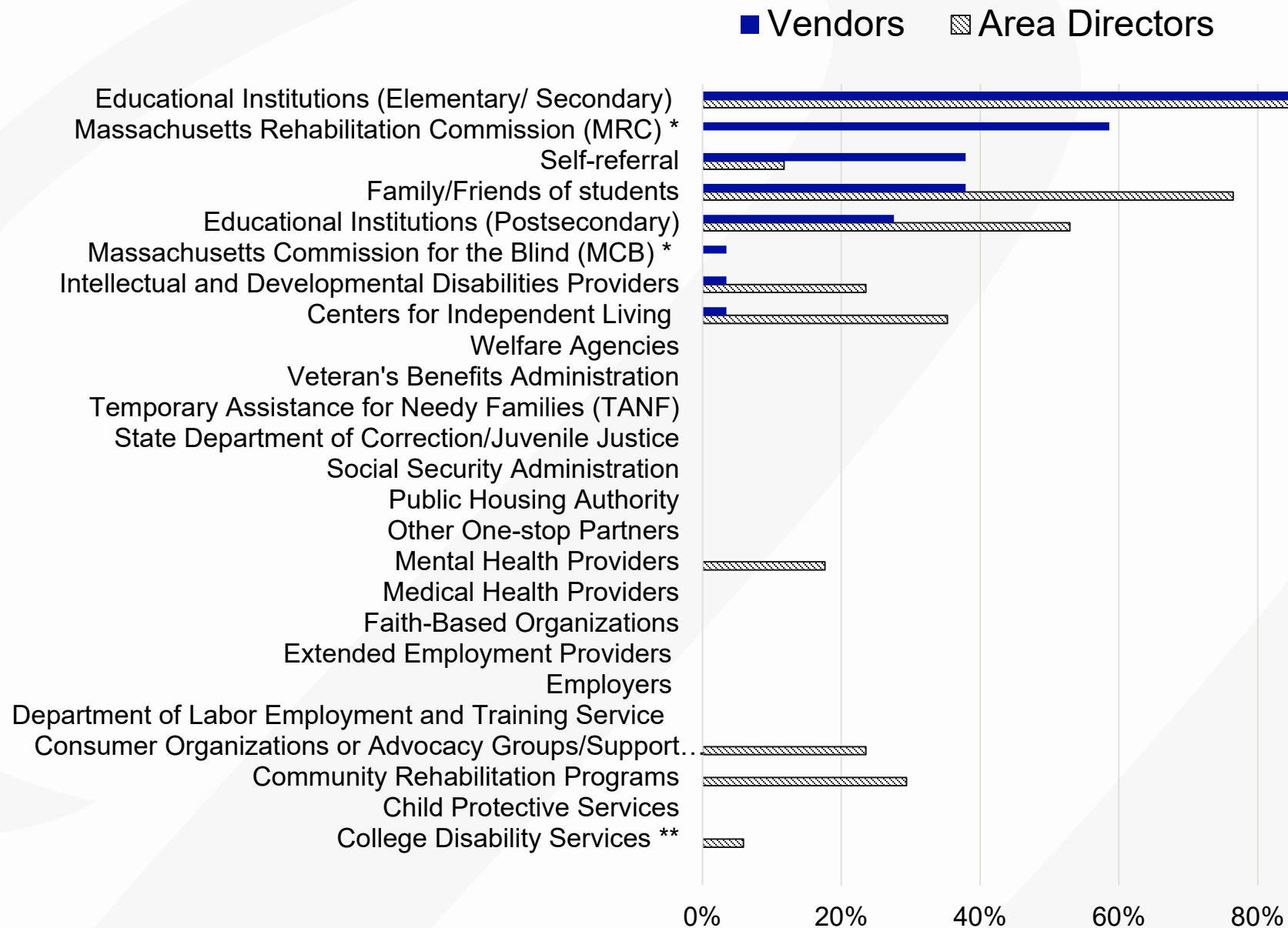
Staff Training Needed to Support Students with Psychosocial Impairments

(Area Directors n=16, Vendors n=29)



Top Referral Agencies for Potentially Eligible Students

(Area Directors n=17, Vendors n=29)



Note. * = Option only available to vendors ** = Option only available to area directors

Perspectives of Families (N=5)

- Parents face fear, confusion, and frustration when planning the transition for their high school aged youth.
- Parents would like to see more hands-on experiences or internships for their students.
- Parents would like to see opportunities for their student to learn other life skills such as driving.
- Parents are requesting communication about Pre-ETS at an earlier age.
- There is great variability across the state about how parents learn about Pre-ETS availability; parents would like to have a reliable source of information about Pre-ETS availability and array of services.
- Parent are requesting better coordination between schools, MRC, and Pre-ETS.

Pre-ETS Takeaways for Mental Health Service Providers



- Pre-ETS can provide valuable help to prepare students for employment.
- Youth with mental health conditions who are students are eligible for Pre-ETS.
- Students do not have to be VR clients or applicants to get Pre-ETS (“potentially eligible”).
- VR agencies do not commonly seek referrals for Pre-ETS from mental health providers or state agencies.
- Pre-ETS implementation is enhanced by inter-agency collaboration among student support team members, including Pre-ETS providers, VR counselors, and schools.
- More direct workforce experience such as paid internships and work-based learning experiences would improve Pre-ETS.
- Pre-ETS providers need training in serving students with MHC.
- Better orientation and communication with families and students about Pre-ETS availability, values, and services is needed.

Peer Academic Supports (PASS) for College Students with Mental Illness

- Intervention Development and Implementation Leaders: Dori Hutchinson and Paul Cherchia, Psychiatric Rehabilitation Center, Boston University
- Research Leader: Maryann Davis, Professor Emeritus, Co-PI L&W RRTC, UMass Chan Medical School

PASS Peer Coaching Manual

Hard Copy and Online Access

- Peer support approach
- Supported education
- Mental health
- Resiliency and wellness framework
- Responding with empathy
- Motivational Interviewing
- Crisis response and suicide prevention
- Reasonable Accommodations
- Peer coach self-care
- Units to work on for each competency

Peer Coaching



Peer coach training & supervision

- 12 hours of training through webinars & in-person sessions
- 1 –hour group peer coach supervision meeting weekly
- Individual supervision as needed



In-person/virtual coaching sessions

- 1-2x/week
- Up to 4 hours per week



Coaching Session =

1. Rapport building
2. Housekeeping
3. Discussion
4. Action / Activity
5. Review of tasks for week
6. Final thoughts

Coaching Is Doing!

- ❖ Exploring time management techniques
- ❖ Planning or attending social outings
- ❖ Exploring wellness apps
- ❖ Sharing coping techniques
- ❖ Discussing and connecting with campus resources
- ❖ Creating support maps
- ❖ Reframing negative experiences
- ❖ Encouraging self-care
- ❖ Going to the gym
- ❖ Studying
- ❖ Keeping accountability
- ❖ Exploring healthy lifestyle
- ❖ Helping with class registration, housing, etc.
- ❖ Formulating SMART goals
- ❖ Journaling
- ❖ Supporting careers goals

Student Skills

- ## Skill Areas
1. Executive Function Skills
 2. Resiliency
 - a. Emotional agility
 - b. Stress-coping abilities
 3. Social support
 4. Academic self-efficacy
 5. Self-Determination
 - a. Self-empowerment
 - b. Help-seeking behaviors-mental health
 - c. Help-seeking behaviors-academic

PASS Coach Activities

1. Build peer rapport with student (3)
2. Teach calendaring method (1&5)
3. Identify apps that fit student;
 - a. Academic apps (1,4)
 - b. Wellness apps (2)
 - c. Emotional agility apps (2)
4. Reframe experiences student perceives as negative (2)
5. Acknowledge students' feelings (2)
6. Evaluate pros and cons with student (2)
7. Identify solutions to challenges with student (2)
8. Connect student strengths to their academic and wellness goals (2)
9. Role plays self-advocacy with professors regarding student's learning needs/ accommodations (5)
10. Conveys knowledge about campus;
 - a. Disability resources (4,5)
 - b. Health resources (2,5)
 - c. Academic resources (1,4,5)
11. Develops semester academic goals (1 & 5)
12. Identify student values, interests, and strengths (4)
13. Explore student identity (3)
14. Supports student development of self-care routines & wellness (2)
15. Student practice with Coach;
 - a. effective communication of personal difficulties (5)
 - b. asking for help when needed (2,5)
16. Coach shares personal;
 - a. self-advocacy skills with student (5)
 - b. stress coping skills with student (2)
17. Connect and accompany students to social opportunities on campus (3)

Availability

- Implementation Package will be available Summer '24
- Must be implemented by a college
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- Or Request Technical Assistance:
- <https://www.umassmed.edu/TransitionsACR/need-help/technical-assistance/>