

Supporting the Education Goals of Young Adults with Psychiatric Disabilities

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Acknowledgements

The Transitions RTC aims to improve the supports for youth and young adults, ages 14-30, with serious mental health conditions who are trying 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, Center for Mental Health Services Research. Visit us at:

http://labs.umassmed.edu/transitionsRTC/index.htm

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Overview of Presentation

- Scope of the Challenge
- School-based Supports and Interventions
- Supported Education
- Lessons Learned
- Next Steps for Research



Higher education leads to better income and careers¹



Impairments associated with psychiatric disabilities impact educational performance and attainment²



Students with psychiatric disabilities (PD) struggle at every level of education

- Over 50% of students with a mental disorder drop out of high school ³
- Special education serves a smaller proportion of the total number of high school students with mental disorders ⁴
- Only 11% of special education students with PD go to a four- year college ⁵



There are increasing numbers of students with PD at college:

- 9 18% of all college students have mild to significant mental health issues 6
- Increasing numbers of students seek help for mental health issues on campus 7
- Higher rates of suicide ideation, attempts, and completion among college student with PD ⁸



Those that do go on to college tend to:

Have delayed enrollment after high school

Enroll as part-time students 9

✤Have high drop-out rates ¹⁰



Students with PD report difficulties in or unwillingness to seek help at college:

- 21% do not report their disability the highest of any disability group¹¹
- Perceptions that student disability offices don't know how to help¹²
- A fear of being stigmatized
- Uncooperative responses to requests for



accommodations¹³

Secondary Education Intervention

Individuals with Disabilities Education Act (1997) specifies Transition Planning

High school completion among *special education students* increased from 47.4% (1990) to 78.1% (2005).

This 2005 rate is similar to that of general education peers.¹⁴





Vocational Rehabilitation

State Agencies of Vocational Rehabilitation (VR) are an important resource for improving education outcomes

- > Youth ages 16- 24 account for one third of all VR clients¹⁵
- VR can support education and training in the service of a vocational goal¹⁶
- States are innovating to improve transition of high school students to VR services and employment¹⁷
- Ten percent of young adults clients with PD received educational support. Nearly half completed their VR goal. ¹⁸





Individualized Plan for Employment (JPE): This is the map for achieving your vecational goal, which when reached, will help you work and here as independently as possible. The IPE includes: work goals, steps and services to reach your goal, time frames, cost of services and who will pay, and your responsibilities for carrying out those plans.

Funding for Other Needed Services to Help You Work: The VR agency may be able to provide financia ussistance for the services in your IPE such as training and post-secondary education, transportation, supplies, ob search assistance, and assistive technology.

Vectional Counseling: VR can also help you decide what kinds of jobs or careers make the most sense for ou. This could happen by talking it through with the counselor or taking tests to help you figure out how your necrosts and skills fit into different types of jobs.

Job Dwitopment: This includes job searching, skills training, resumd preparation, and placement into a desined position. Your VR counselor may refer you to job developers who work for the VR agency when you ar ready to begin a job search.

Post-Employment Services: One or more short term VR services that help you to maintain, regain, or advance in employment.

Other Services: To see information about more services offered by your state, contact your state Vocational Rehabilization office or search for your state VR agoncy outline, You can find a lusting of state agoncies at: [ob Accommodiations Network (UAN): <u>http://abin.org/cci.winf/TypeChery.cci090</u>]

Environmental Supports 19

- Improve communication
- Educate the college community
- De-stigmatize mental illness







Changes in Policies 20

- Leave of absence protocols
- Individualized re-entry requirements
- Policies for self-harm other than

zero tolerance

MOUs with local hospitals



Tools for School - Tip S		ealth Rig	hts on Campus
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"Codes of conduct may also be called "Expectations of Students" or "Conduct Requirements:

Educational Accommodations 21

- Students are unaware of rights or fear disclosure
- Disability staff don't know how to accommodate PD





Campus Mental Health Counseling

Peer Support

Suicide Prevention





Supported Education-Definitions

- Services that enable a person to choose an educational goal, pursue activities needed to achieve that goal, then maintain those activities until goal achievement (Choose, Get, Keep)
- Interventions that support and assist to access, enroll, retain and succeed in postsecondary education
- Interventions that provides assistance, preparation, and support for enrollment in, and completion of, postsecondary educational programs.
- Interventions designed to assist individuals in making choices about education and training and to assist them in maintaining their "student status" until their educational goal is achieved ^{22,23}



Key Components²⁴

- Coordination with mental health services
- Use of specialized SEd staff
- Career/vocational counseling
- Help with financial aid
- Help to develop skills to cope in academic settings

- On campus information about rights/resources
- Off campus mentorship and support
- Access to academic supports
- Access to general supports



Supported Education-Models

Classroom model -classes on campus for information and support

Onsite model -individual support provided by educational institution

Mobile support -support and services through a MH agency

Free-standing model -support through other organizations such as clubhouses



Values of Supported Education

Similar to the values of supported employment and rehabilitation in general

Integrated educational settings

Choice and self-determination

Provision of supports as needed and wanted

Focus on skill development rather than on symptoms/diagnosis/pathology alone



SEd—State of the Field

- SEd developed/tested mostly with adults who have serious mental illness through MH agencies
- Some models involve Offices of Disability Services on campuses
- Models not tested with young adults and may need to be adapted
- While values of SEd may be same across lifespan, the issues confronting young adults may vary
- Means of communicating information and supporting young adults may also be different



Effectiveness of Supported Education-Systematic review–1990-2010; updated in 2013²⁵

- Writings on the principles and processes of providing supported education
- Found 41 articles; 21 reviewed for research quality
- Very limited number of rigorous studies
- Simple pre post studies; descriptions of models
- >One large RCT in the literature
- Two new fidelity measures are available^{26,27}, but could not locate research studies utilizing fidelity assessments



Outcomes Generally Examined in SEd

- Educational engagement
- Enrollment in educational setting
- Educational attainment (components completed, acquisition of degree)
- Employment outcomes
- Subjective measures such as self esteem/mastery

>Quality of life



Effectiveness of SEd

No evidence from a randomized trial or well controlled quasi experimental trial that participation in a supported education intervention results in significantly greater educational engagement or enrollment

No significant difference in the employment rates at follow-up of individuals participating in a supported education intervention versus those not participating



Effectiveness of SEd

Suggestive evidence of improvements in employment and educational status as a result of participation in a supported education intervention

Self esteem/quality of life may improve

Individuals who remain engaged in SEd may complete courses and achieve satisfactory GPA

Evidence is weak



Conclusions

Several studies suggest that SEd is a viable model

Improvements in educational status and attainment suggestive, but studies weak and older

Therefore: not enough evidence to say that there is robust effectiveness data for SEd models



Promise on Horizon

- Nuechterlein-recent onset schizophrenia-career development intervention based on SE-IPS model²⁸
- RAISE study—multisite NIMH study focusing on young adults
- Salzer/Gill/Mullen -2013 RCT underway but effectiveness data not yet available
- Center for Psychiatric Rehabilitation has an exploratory study combining supported education component with supported employment-no preliminary data
- Two preliminary studies done in OT field—Australia and NYC--BRIDGE



Lessons Learned-Landscape of Supports

Policy innovation in special education has been beneficial—but we don't know why it is effective

Young adults with SMHC lag behind general population in educational attainment

College campuses seem unprepared to assist with challenges of SMHC population

Literature includes support strategies but few are tested



Lessons Learned

Adaptations of existing models for young adults is needed

Further adaptation and innovation is needed for special populations such as those involved in foster care or the criminal justice system

No data currently exist that speak to long term outcomes of SEd



Next steps for research—we need:

- Additional data about barriers and facilitators to educational attainment—from perspective of young adults with SHMC
- Innovation, adaptation, refinement of models of SEd
- Specification and rigorous testing of SEd models
- Rigorous evaluation of models that focus on young adults with SMHC on campus



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