



Supporting Employment for Young Adults Living with Mental Health Conditions



Work is Especially Important for Young Adults

Having a job as a youth or young adult is a predictor of long-term work success. Having a job has also been related to improved self-esteem, self-efficacy, and life satisfaction.¹⁻² However, there is a significant gap in work experience for many young adults living with mental health conditions. The lack of experience can become too large to ameliorate later in life.³⁻⁷ Despite this, young adults with mental health conditions are capable of working and they want to work. It is important to encourage and support young adult work efforts as early as possible. Early work efforts can also help foster an identity as a worker and provide experiences that ready young adults for better jobs and more success. Employment builds human capital (skills and experience) that can lead to career paths into the primary labor market, one that provide benefits, informal accommodations, and potential for future financial self-sufficiency. Without human capital, many young adults wind up stuck in dead end, minimum wage and non-benefitted jobs (sometimes called the four F's of food, flowers, filth and filing). Most young adults with mental health conditions are not “too sick to work” and neither is work too stressful for them. Work can contribute to their self-esteem and their long-term success.



The Impact of Receiving Disability Benefits Rather Than Employment Early in Life

Keeping as many young adults as possible off disability rolls and benefits is good for young adults as well as the community. Some clinical providers will encourage young adults to obtain benefits because it provides a safety net. However, in time disability benefits will only support a young adult in poverty. For example, a person receiving Supplemental Security Income would have to pay 133% of their monthly income to pay for a one bedroom rent in Massachusetts. Further, receiving social security benefits can be a disincentive to employment. Less than one percent of Social Security Disability Income and Supplemental Security Income beneficiaries leave the rolls and return to work. There may also be family pressure to remain unemployed if a young adult is receiving disability benefits that the family counts on for income. In these situations, it is best to access benefits counseling for young adults and their families or allies at programs like [Work Without Limits](#) or [Project Impact](#) to allay fears. Help the family understand that while immediate income may be helpful, there are long-term strategies that will provide better income. Educate young adults and families that Medicaid can be continued even when the cash benefit ends; help young adults enroll for Medicaid only and avoid using Social Security benefits as the mechanism for Medicaid (or MassHealth).

Cultivate Motivation Toward Employment Goals

If the young adult is reluctant to seek employment, try these approaches:

- Explore what/where the young adult would like to be at 30 years old; this can help clarify values and preferences in job choices for the present and future and motivate current job search.
- Ask the young adult what they are good at and interested in, because these skills and interests can help identify jobs to try. Identifying good times of day may also be helpful.
- Exposing young adults to peers who are working or have employment goals is critical!
- Discuss the difference between a job and a vocation/career as well as the importance of education and training in starting a career path.
- Explain that college is not the only way to develop job skills. Apprenticeships (usually via trade unions)

- or other skill development courses via job training are also ways to get good jobs with good pay.
- Normalize that work can be challenging and that if one job does not work out, that doesn't mean none of them will. Reference the experience of your own first job or the number of jobs you have held on your own employment journey.
- Use motivational interviewing to help a young person articulate the pros/cons of getting a job.
- Use all opportunities to convey that you believe the young adult can succeed at work and have a career.

Promote Work Experiences

Having an income helps reinforce the value of work, fosters a reliance on work, develops skills (e.g. budgeting), and most importantly, forms an identity that transcends disability. Find ways to promote work:

- Encourage and assist young adults to get work-based learning experiences while in high school (e.g., internship, job shadowing, volunteering, etc.); collaborate with high schools to get related goals onto their learning or special education plan. Find out if they are eligible for Pre-employment Transition Services at school and make the connection.
- Encourage summer employment and other youth-typical jobs like waiting tables, retail, babysitting and landscaping. Every little bit helps to build a resume!
- Encourage consistent work experience; explain that it is a foundation for real career development.
- Provide exposure to and experience with the demands of holding down a competitive job; working through difficult times builds resilience and confidence.
- Encourage attachment to work; not job tenure. It is developmentally normative for young adults to change jobs frequently. With each experience ask: "What did you like about that job? What did you dislike? What are we not going to look for again? Did we learn anything?"
- Over time begin to focus on jobs that will lead to the young adult's intended career goal.
- Don't be afraid to start small. A few hours a week can be a good way to build tolerance and confidence!

Helping Young Adults Get a Job

Sometimes the hardest part is landing those first jobs, these strategies may help:

- Provide concrete direction on how to apply for a job; be familiar with online job boards and application procedures.
- Make sure young adults are taught the basic soft-skills all employers expect them to come in with, such as how to dress, appropriate communication (internal and external), problem-solving, how to ask for help, and time or task management.
- Discuss the pros and cons of disclosing a mental health condition, and what accommodations to ask for.
- Refer the young adult to services and agencies that can provide job coaching and placement, career exploration, and supported employment (e.g., [Clubhouses](#), [One-Stop Career Centers](#)).
- Keeping young adults motivated throughout the process is essential so make sure expectations are reasonable (e.g. Job applicants won't get a call back right away!)
- Check-in regularly and pay attention to any part of the process where it looks like a person might be getting stuck.
- Stay positive and offer encouragement! Getting a job is tough for everyone.

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RESOURCES

For more resources for young adults in this area, go to the ReachHIRE website at <http://reachhirema.org/>.

Find these helpful resources at the Transitions to Adulthood Center for Research website for publications:

<https://www.umassmed.edu/TransitionsACR/publication/#tipsheetEmployment>

- **Do I Tell My Boss? Disclosing My Mental Health Condition at Work**
- **There's More to Young Adult Unemployment Than Mental Health: What to Look For**
- **Workforce Innovation and Opportunity Act and its Application to Youth and Young Adults with Serious Mental Health Conditions**
- **Making it Work: Vocational Peer Mentors for Emerging Adults with Serious Mental Health Conditions**
- **Vocational Rehabilitation: A Young Adults Guide**
- **Supported Employment Adapted for Young Adults with Peer Mentors: A Feasibility Study**
- **Appealing Features of Vocational Supports for Latino and non-Latino Transition Age Youth & Young Adult Consumers: Study Goals & Methods**
- **Entering the World of Work: What Youth with Mental Health Needs Should Know About Accommodations**
- **TAC Priced Out in the United States**

REFERENCES

- ¹ National Alliance on Mental Illness (NAMI). (2014). Road to Recovery, Employment and Mental Illness. Arlington, VA: National Alliance on Mental Illness (NAMI)
- ² Wagner, M., & Newman, L. (2012). Longitudinal transition outcomes of youth with emotional disturbances. *Psychiatric Rehabilitation Journal*, 35(3), 199–208. doi:10.2975/35.3.2012.199.208
- ³ Ramsay, C., Stewart, T., & Compton, M. (2012). Unemployment among patients with newly diagnosed first-episode psychosis: prevalence and clinical correlates in a US sample. *Social Psychiatry and Psychiatric Epidemiology*, 47, (5), 797–803
- ⁴ Rinaldi, M., Killackey, E., Smith, J., Shepherd, G., Singh, S. P., & Craig, T. (2010). First episode psychosis and employment: A review. *International Review of Psychiatry*, 22(2), 148–162. doi: [10.3109/09540261003661825](https://doi.org/10.3109/09540261003661825)
- ⁵ Tandberg, M., Ueland, T., Andreassen, O. A., Sundet, K., & Melle, I. (2012). Factors associated with occupational and academic status in patients with first-episode psychosis with a particular focus on neurocognition. *Social Psychiatry and Psychiatric Epidemiology*, 47(11), 1763-1773. doi: 10.1007/s00127-012-0477-x.