A Prismatic, Participatory Approach to Policy Research – Stakeholder Driven Policy Recommendations to Improve the Delivery of Pre-Employment Transition Services (Pre-ETS) to Students with Serious Mental Health Conditions Emma L. Narkewicz, MPA; Marsha L. Ellison, PhD; Hannah E. Seward, PhD

Background

Youth & young adults with serious mental health conditions (SMHC) have extremely poor education & employment outcomes

- 35% of students in special education with SMHC dropped out of high school before receiving a diploma in 2015-2016¹
- 53% of former special education students with SMHC out of school for up to 6 years found competitive employment in 2007²

Results

Family focus group (n =5) key themes:

- 1. Parents have difficult experiences with planning for youth transition after high school
- 2. Parents need more knowledge & greater communication about **Pre-ETS**
- 3. Pre-ETS delivery & content determine engagement & perceived service quality

Results Continued

High school staff survey (n =33) key findings:

- The main challenge was that "potentially eligible" students don't identify as disabled
- High school staff have knowledge about Pre-ETS, but not the difference between special education & WIOA requirements
- Both vendors & high school staff cited obtaining parental signatures as the top barrier in their relationship • High school staff also cited special educators & classroom teachers as the top referral for Pre-ETS

• Only 10% of students with SMHC are served in special education ³

The Workforce Innovation & Opportunity Act (WIOA) of 2019 nationally mandates that state agencies of Vocational **Rehabilitation (VR) provide Pre-Employment Transition** Services (Pre-ETS) for students with disabilities to improve their transition to employment.

The 5 Pre-ETS activities are:

- Job exploration counseling
- Work-based learning experiences
- Counseling on opportunities for post-secondary education Y programs or training
- Workplace readiness training to develop social & independent living skills
- Instruction in self-advocacy

In 2019, the Massachusetts Rehabilitation Commission (MRC) modified its model of Pre-ETS delivery to accord with WIOA:

• Expanded Pre-ETS eligibility to youth ages 14-15 • Added a new category of "potentially eligible" students that includes those not in special education Shifted to more generalized services to a larger population of students

FIt'd be great if they actually asked the kid 'What do you want to do?' And then fill the form out, and then incorporate it in the IEP. If the school doesn't have the services, then they could say 'Hey, sign up for Pre-ETS, and we'll coordinate with them to get you the life skills that you need to prepare yourself for life.' But something's broken, and it never works like that." — Parent Quote

Vendor (n = 29) & area director (n = 17) survey results:

- The top benefit of the new Pre-ETS model was more direct student exposure to & preparation for the workforce
- The top way to improve Pre-ETS was better engagement of students through tiered services & paid internships
- Vendors need more training to better serve students with SMHC
- Special educators & high school staff were the main referral sources for potentially eligible students in Pre-ETS
- Relationships with students & families are key to Pre-ETS

Student interview key findings (n=3):

- Students saw value in Pre-ETS to prepare them for finding a job & living independently
- Students receiving Pre-ETS were able to clearly articulate their employment & post-secondary education goals
- Students had varying preferences about the format of Pre-ETS delivery (e.g., virtual vs. in person, 1-on-1 vs. group services)

Discussion

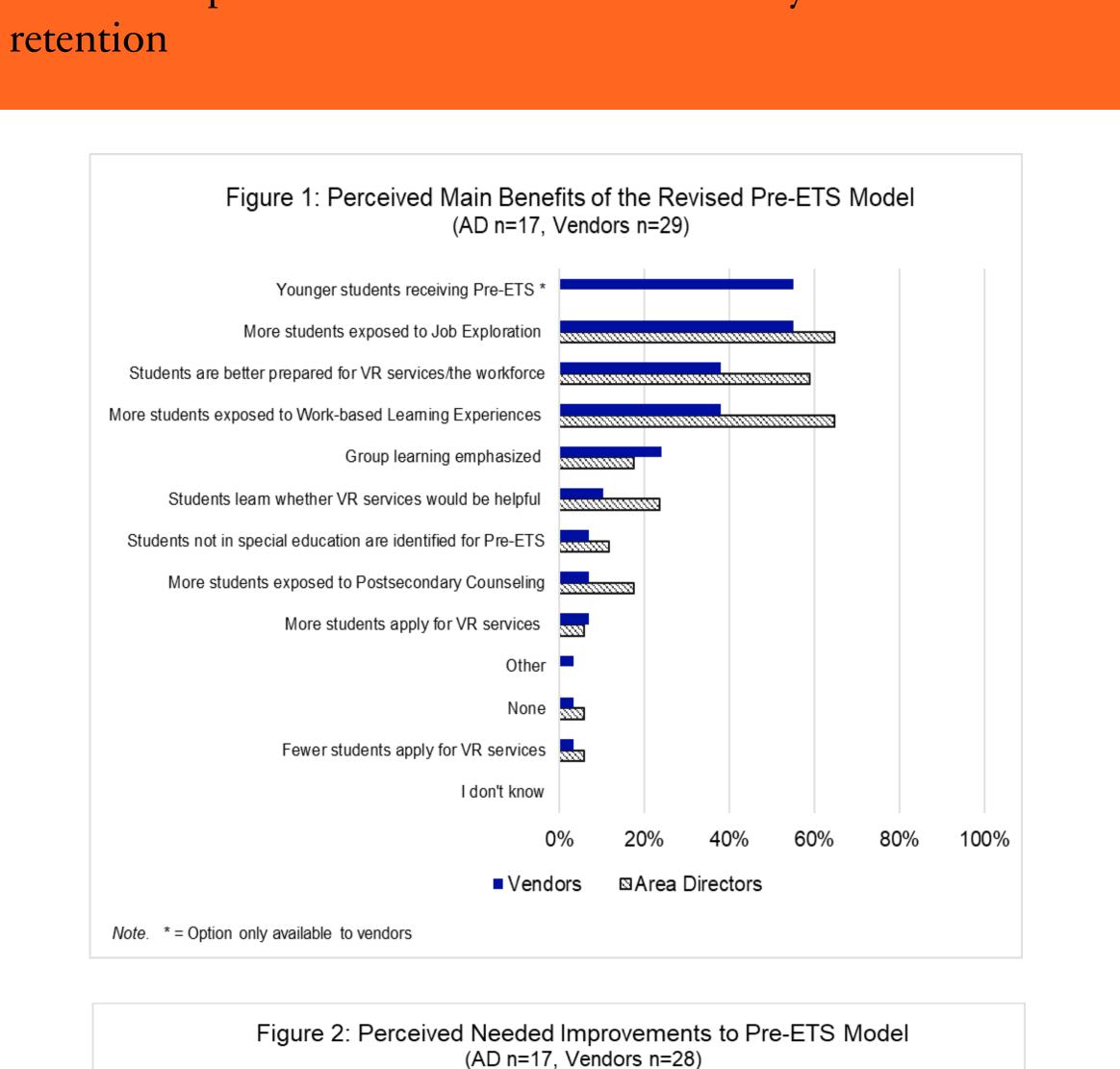
Overall, while the expanded eligibility to Pre-ETS is a positive change, many students & families desire individualized, tiered supports, & internship experiences, which can counter the new model. Despite expanded eligibility, referrals to Pre-ETS still primarily come from special education. Family & students who did receive Pre-ETS wanted earlier access & better communication. More must be done to support the transition of students with SMHC in MA.

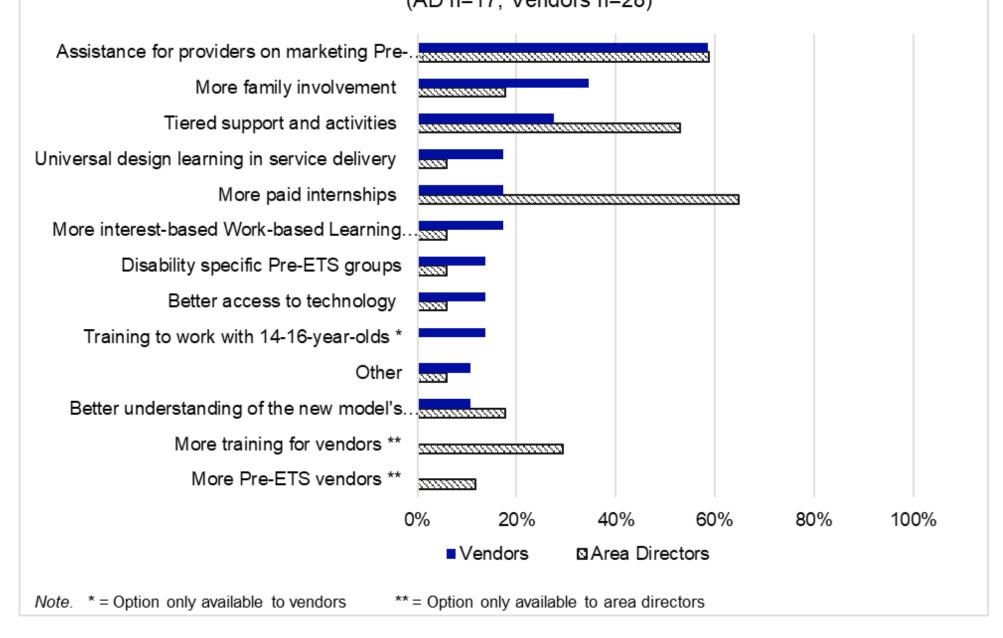
Research Question & Methods

What are the barriers and facilitators to accessing Pre-ETS for students with serious mental health conditions in MA?

• We employed a mixed-methods participatory approach, engaging Pre-ETS stakeholders through surveys, interviews, & focus groups. • We received guidance from a family & student advisory board & from subject matter experts & MRC leadership.







Policy & Practice Recommendations

- Communicate to families & students earlier about Pre-ETS to allow for proactive planning
- Create a "menu" of available services, eligibility information, E & relevant agencies so families & youth are empowered & informed about their options
- Incorporate a discussion of Pre-ETS into IEP meetings & coordinate school-based resources to fill service gaps
- Provide specialized training to contracted Pre-ETS vendors on working with students with SMHC
- Engage community & state mental health & social services agencies to refer more students with SMHC to Pre-ETS
- Clarify the mission & value of Pre-ETS to high school staff & leadership to improve the school-vendor relationship & school buy-in
- Implement virtual signatures on parental forms

Prismatic, Stakeholder Informed Research Approach

References Cited:

- 1. National Center for Education Statistics. Number and Percentage Distribution of 14through 21-year old Students Served under Individuals with Disabilities Education Act (IDEA). 2017; <u>https://nces.ed.gov/programs/digest/d17/tables/dt17_219.90.asp</u>.
- 2. National Center for Education Statistics. Among Special Education Students Out of High School up to 8 Years, Percentage Attending and Completing Postsecondary Education, Living Independently and Working Competitively. 2010; https://nces.ed.gov/programs/digest/d16/tables/dt16_504.30.asp.
- 3. Forness SR, Freeman SF, Paparella T, Kauffman JM, Walker HM. Special education implications of point and cumulative prevalence for children with emotional or behavioral disorders. Journal of Emotional and Behavioral Disorders. 2012;20(1):4-18.

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The contents of this publication were developed under a grant with funding from the National Institute on Disability, Independent Living, and Rehabilitation Research (90RTEM0005). NIDILRR is a Center within the Administration for Community Living (ACL), Department of Health and Human Services (HHS). The contents of this poster do not necessarily represent the policy of NIDILRR, ACL, HHS, and you should not assume endorsement by the Federal Government.

