Adapting the Individual Placement & Support (IPS) Model of Supported Employment for Early Emerging Adults with Serious Mental Health Conditions
presenters

• Marsha Langer Ellison, PhD
University of Mass. Medical School, Transitions RTC, Worcester, MA

• Marc Fagan, PsyD
Thresholds Youth Programs, Chicago, IL

• Vanessa Vorhies Klodnick, LCSW, PhD Candidate
Thresholds Research, Chicago, IL
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 Systems and Psycho-social Advances Research Center.
Visit us at:

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

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overview

1) Why adapt IPS for early emerging adults with SMHC (ages 18-22)?

2) What adaptations were made to IPS & what lessons were learned?

3) Was the adapted model feasible?

4) What implications does this study have for future service development & research?
Why adapt IPS for early emerging adults with SMHC*?

*SMHC = serious mental health condition
the transition to adulthood

• Characteristics of emerging adulthood
• Rates of SMHC
• Vocational outcomes of at-risk young people
• Design of EBP vocational service models in adult system
what is emerging adulthood?

- taking responsibility for yourself
- making independent decisions
- becoming financially independent

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characteristics in EA

- Identity exploration
- Instability
- Self-focused
- Feeling in-between
- Age of possibilities
- Relationship renegotiation
- Peers & romantic partners

May 7, 2014

“I’m terrified of growing up. Once you become an adult, how do you step back from that? It’s something that wakes me up at night.”

- Lorde, 17-year-old phenom singer, at a concert in New York’s Roseland Ballroom, according to Billboard, March 14, 2014
Principles of EA with SMHC

- Identity exploration
  - Cut short and delayed
  - Lack of opportunities to explore
  - Lack of social capital

- Instability
  - Riskier, Dangerous
  - Housing/basic need instability
  - Pressure for $, yet less vocational experiences
  - High correlation of trauma

- Self-focused
  - Cannot often see how concerns may affect others
  - Depressive process—centered around self

- Feeling in-between
  - Exacerbated in-betweenness
  - Needing to reach adult markers earlier in order to survive
  - Transition Cliff of services

- Age of possibilities
  - Less capital to explore possibilities
  - Symptom interference

- Relationship re-negotiation
  - Overinvolved or under-involved families
  - Alienation
  - Low family resources

- Peers & romantic partners
  - Tumultuous
  - Having children earlier
2011 Prevalence Rates

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Any MH Condition</th>
<th>Only SMHC</th>
</tr>
</thead>
<tbody>
<tr>
<td>18 to 25</td>
<td>29.8</td>
<td>7.6</td>
</tr>
<tr>
<td>26 to 49</td>
<td>21.4</td>
<td>6.0</td>
</tr>
<tr>
<td>50 or Older</td>
<td>14.3</td>
<td>3.0</td>
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http://www.samhsa.gov/data/NSDUH/2k11MH_FindingsandDetTables/2K11MHFR/NSDUHmhfr2011.htm#Ch2
Young People with SMHC (NLTS-2)
Youth Aging out of Care (Midwest)
General Population (Add Health)

- % Graduate from high school
- % Enrolled in post-secondary edu
- % completed post-secondary by age 23
employment

- General Population (Add Health):
  - % Ever Employed by Age 23: 97
  - % Currently Employed at Age 23: 76

- Youth Aging out of Care (Midwest):
  - % Ever Employed by Age 23: 95
  - % Currently Employed at Age 23: 48

- Young People with SMHC (NLTS-2):
  - % Ever Employed by Age 23: 91
  - % Currently Employed at Age 23: 47

Legend:
- Red: % Ever Employed by Age 23
- Blue: % Currently Employed at Age 23
Individual Placement & Support (IPS)

TIP Informed Substitute Care Program

TAY choice
Community-based
Futures focus

Place & Train Coaching

match.com®
tensions

• Generalists vs. Specialists

• Focus on education

• Job starts vs. job tenure (the nature of discovery)
the REAL match

• IPS + SE (Nuechterlein, 2009)
• Umass Transitions RTC
• Career focus
• Peer mentors
part 2

• What was the adaptation process?

• What lessons were learned?
working closely with implementation site: thresholds young adult program (YAP)

- 16-21 y/o with trauma histories & SMHC
- Residential & transitional living
- Community-based
- Founded in TIP principles
- Bridging the Transition Cliff
adaptations to IPS

• Supported education

• Peer mentors

• Career development focus
adapted IPS principles

**Same**
- Attention to consumer preferences
- Time unlimited supports
- Rapid search
- Integration with mental health treatment
- Systematic job development

**Modified**
- Zero exclusion *is the goal*
- Competitive employment, **paid internships, and mainstream educational activities** are the goal
- Benefits and **financial aid** planning is important
- Systematic education development

**Added**
- Exposure to the worlds of work, career and education
- Youth voice and advocacy
division of employment & education specialist roles

SE + IPS specialist

Education specialist

Employment specialist

career focus & vocational discovery

lesson learned
these 2 roles must work together closely
vocational peer mentoring

Qualifications:
- Self-identified as having a SMHC
- Experience in YAP or other service systems
- HS grad with employment or post-secondary enrollment

40 hours of training:
- Increase knowledge of IPS model
- Learn how to share story
- Build active-listening skills

- 1-6 mentees per mentor
- Weekly meetings in the community
peer mentor characteristics

- Peer Mentors: 13 total
- Age Range: 20-30 yrs old
- Race/Ethnicity: 9/13 African American
- Supplemental Security Income: 10/13
- HS Diploma or Equivalent: 11/13
- Post-Secondary Education: 9/13
peer mentoring role

• Work closely with education and employment specialists

• Provide emotional support & validation

• Engage young people in vocational services

• Support young people in exploring worlds of work & school

• Teach, role-model, and coach professionalism, maintaining hygiene, and having appropriate boundaries

lessons learned

Clarify the Peer Mentors’ Role on the Vocational Team.

The Vocational Team must believe the Peer Mentors are valuable.
team structure

Team Leader

Vocational Team

Employment Specialist

Education Specialist

Peer Mentor
part 3

• Was the adapted IPS model feasible?
  – Fidelity assessment & scores
  – Feasibility study design & findings
fidelity scale administration protocol

• 1 day site visit
• 2 trained fidelity assessors
• Detailed protocol:
  – Interviews: vocational program leader, employment specialists, & clients
  – Observation: team meeting, employer contact, & peer mentoring
  – Chart review
YAP fidelity scores

<table>
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<tr>
<th>IPS Score</th>
<th>SE Score</th>
<th>Combined Score</th>
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<tbody>
<tr>
<td>4.2</td>
<td>3.8</td>
<td>4</td>
</tr>
<tr>
<td>4.7</td>
<td>4.6</td>
<td>4.65</td>
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Total Fidelity Score | Level of Fidelity
---------------------|-------------------
>4                   | High Fidelity
3.0 – 4.0           | Moderate Fidelity
< 3.0                | Low Fidelity
study design & goal

- Single group mixed method pre-post
- Baseline and 12 month follow-up
- Assessment of:
  - Study retention & service engagement
  - Peer mentoring experience
  - Vocational and educational outcomes
study participants

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<thead>
<tr>
<th></th>
<th>n</th>
<th>%</th>
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<tbody>
<tr>
<td><strong>N=35</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>17</td>
<td>48.6</td>
</tr>
<tr>
<td>Female</td>
<td>18</td>
<td>51.4</td>
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<tr>
<td>Race/Ethnicity</td>
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<td></td>
</tr>
<tr>
<td>Black/African American</td>
<td>26</td>
<td>74.3</td>
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<tr>
<td>White/Caucasian American</td>
<td>6</td>
<td>17.1</td>
</tr>
<tr>
<td>Hispanic</td>
<td>3</td>
<td>8.6</td>
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<tr>
<td>Residential status at enrollment</td>
<td></td>
<td></td>
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<tr>
<td>Supervised agency setting</td>
<td>26</td>
<td>74.3</td>
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<tr>
<td>Independent setting</td>
<td>9</td>
<td>25.7</td>
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<tr>
<td>Primary Axis 1 Diagnosis</td>
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</tr>
<tr>
<td>Mood Disorder</td>
<td>28</td>
<td>80</td>
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<tr>
<td>Psychotic Disorder</td>
<td>5</td>
<td>14.3</td>
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<tr>
<td>Behavioral Disorder</td>
<td>2</td>
<td>5.7</td>
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<tr>
<td>Receiving SSI at enrollment</td>
<td>24</td>
<td>68.6</td>
</tr>
<tr>
<td>Under the custody of the State</td>
<td>29</td>
<td>82.9</td>
</tr>
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At enrollment:
- 13 previously employed
- 8 had a high school diploma or GED
- No post-secondary degree attainment
study retention & service engagement

- Of the 35 participants, 80% participated for 12 months – 4 were incarcerated in Q1 & discharged

- 100% (31 of 31) met with a vocational specialist at least 1x – On average, 1x per month (Range = 1-3) for 40 minutes (Range = 21-63 min)

- 97% (30 of 31) met with a peer mentor at least 1x – On average, 1x per month (n=30; Range = 1-3) for 38 minutes (Range = 15-60 min)

- Most started & stopped services due to psychiatric hospitalization, incarceration, & being absent without leave from YAP
perceived benefit of peer mentors

• 16 cited benefits
  – Vocational goal achievement
  – Increased self-awareness and agency
  – Job search and interview support
  – Assistance in connecting with vocational team

• Breakdown of Overall Perceptions (n=21)

  - Positive: 13
  - Negative: 2
  - Mixed: 2
  - No comments/limited exposure: 4
in young people’s own words

“[My peer mentor is]...trustworthy. I could talk to him about everything.”

“She [peer mentor] didn’t look at me differently...she didn’t put on a phony act.”

“Someone who was one of us... they can talk about their life, how they get through it and show us how to do it.”

“[We] talked about my job and how important it was that I keep it...but it was also a bond.”
important peer mentor characteristics

- Have work or school experience
- Be a graduate of YAP
- Be similar in age to a mentee
- Be the same gender as mentee
- Have a mental health condition

Disagree/Strongly Disagree, Neither Agree nor Disagree, Agree/Strongly Agree
employment outcomes

• Job starts: 24% (8 of 33 participants open to emp. services)
  – Total Job starts: 13
  – Total Job endings: 10

• Average job tenure: 11 weeks

• Job characteristics: typically PT & min. wage

• Job endings: 60% (6 of 10) due to termination

• 3 maintained employment post-study
education outcomes

• Education starts: 68% (15 of 22) participants open to edu services
  – total # of edu starts: 18

• Education completions: 40% (6 of 15 participants)
  – Certificate program: 2
  – High school diploma: 2
  – College courses: 2

• Education stops: 50% (9 of 18 starts)
overall vocational outcomes

• Of all participants (N=35):
  – 49% (n=17) worked or enrolled in an education program
  – 51% (n=19) neither worked nor enrolled in an education program
• What implications does this study have for future service development & research?
primary conclusions

• 1st first adaptation of IPS for early emerging adults with SMHC with intensive adolescent mental health service utilization

• Feasibility of the adapted model

• Adaptation process
  – Separation of education & employment specialist
  – Integration of peer mentors
primary conclusions cont.

• More education starts than employment starts

• Challenge of integrating work & school progress

• Value of peer mentoring

• Design/Structure of YAP & unique characteristics of young people accessing YAP services
next steps

• Study adapted model in an outpatient community mental health setting

• Further develop career development elements

• Explore the experience of being a peer mentor on an adapted IPS-team

• Learn how technology can support vocational team’s efforts
If you have additional questions, please contact any of us:

- Marsha Langer Ellison, UMASS RTC: Marsha.Ellison@umassmed.edu
- Marc Fagan, Thresholds: marc.fagan@thresholds.org
- Vanessa Vorhies Klodnick, Thresholds: vanessa.vorhies@thresholds.org

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