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CAREER-RELATED OUTCOMES OF A MODEL TRANSITION DEMONSTRATION FOR YOUNG ADULTS WITH EMOTIONAL DISTURBANCE

This article reports the results of a model demonstration project for adolescents and young adults with chronic mental illness or emotional disturbance. Career and education specialists tailored a comprehensive support package consisting of personal futures planning, flexible educational programming, employment support, interagency collaboration, mentorship, social skill building, and flexible funding to the needs of each participant. Of 18 participants with the project 2 years or more, 83% found employment, 67% completed high school, and 50% participated in postsecondary education. Involvement with law enforcement and corrections was substantially lower than at the start of the project; and participants reported statistically significant increases in their satisfaction with school, employment, handling of life problems, and progress toward personal goals. Implications of these findings for effective transition and career development services are discussed.

The transition from school to adult life is extremely difficult for many youths and young adults with chronic mental illness or emotional disturbance (Carson, Sitlington, & Frank, 1995). As many as 64% of these individuals fail to complete high school (Rusch & Chadsey, 1998). After high school, these youths are less likely to be employed, less able to participate in adult learning or continuing education, and less able to make a successful transition to adult roles, positive social relationships, and self-sufficiency (Levine & Edgar, 1995; Zigmond & Miller, 1992). Wagner, D'Amico, Marder, Newman, and Blackorby (1992) found that 2 years after leaving school, only 29% of students who had been labeled as emotionally disturbed were either in a postsecondary academic program or in a job.

As adults, individuals with mental illness face high rates of unemployment and involvement with law enforcement and corrections (Bullis, NishokaEvans, Fredericks, & Davis, 1993). Individuals with mental illness have the lowest rate of successful closure about 33%--of

any group served by the state-federal vocational rehabilitation system (Hagner, Fesko, Cadigan, Kiernan, & Butterworth, 1996; Noble, Honberg, Hall, & Flynn, 1997). The National Alliance for the Mentally Ill has termed these outcomes dismal (Noble et al., 1997, p. 14). They recommend, among other reforms, increased attention to the validation and replication of successful approaches with this population.

A previous transition demonstration project for individuals with emotional disabilities (Bullis et al., 1994) found that through systematic job development, job training and support, and service management, 79% of adolescents and young adults with severe emotional disturbance achieved competitive employment within 2 years, with an average job duration of 2.9 months. Most jobs ended appropriately, with only about 17% ending through termination by the employer. Bullis et al. noted that transition services for this group must be intensive and long term, and they speculated that even greater success might be achieved through (a) increased attention to developing jobs that are well matched to an individual's interests and abilities and (b) social skill training opportunities provided outside the workplace. The purpose of this article is to present the career-related outcomes of a demonstration project designed to include these and other components in a comprehensive service package to assist youths with chronic mental illness or emotional disturbance with the transition to adulthood.

METHOD

Setting

Project RENEW (Rehabilitation, Empowerment, Natural Supports, Education, and Work) began in Manchester, New Hampshire, in October 1995. The project is based at the New Hampshire Community and Technical College (CTC), a valued, normative setting for young adults that reinforces the importance of education. Project staff include a director, two career and education specialists, a clerical assistant, and a graduate assistant. Each participant is assigned to one of the career and education specialists (CES), who serves as the primary service coordinator. The CES works closely with the individual to develop and accomplish personal goals in the areas of high school completion, employment, participation in postsecondary education, and community adjustment (see Cheney, Malloy, Hagner, Cormier, & Bernstein, 1998).

Participants

Participants in RENEW were referred from the Manchester School District, the local Division of Vocational Rehabilitation office, and the Manchester Mental Health Clinic. All youths with a special education label of emotional disturbance or a diagnosis of chronic mental illness between the ages of 16 and 22 years who were referred and agreed to participate were accepted into the program. Eighteen participants, 11

men and 7 women, have been enrolled for 2 years or more. At the time of project entry, their mean age was 18 years 11 months. In addition to their psychiatric disability, 3 participants had secondary diagnoses of mental retardation (2) or cerebral palsy (1). Seven (39%) had already completed high school or obtained a general equivalency diploma (GED), and 2 participants (11%) were engaged in paid employment. Thirteen participants (72%) had had police or court involvement in the past 3 months.

Data Collection

Participants complete a questionnaire upon entering the program and at 6-month intervals thereafter, reporting their level of satisfaction with housing, education, employment, physical health, ability to handle problems, and progress toward life goals. In addition, CESs complete data forms each time a participant experiences a change in employment status (e.g., a raise in salary), education status (e.g., beginning tutoring), or other significant event (e.g., periods of hospitalization). Any involvement with the police or court system is also noted. An external evaluator sits in on weekly staff meetings and conducts in-depth interviews with a sample of project participants and with each CES to obtain additional qualitative data on project implementation and impact.

Service Components

To provide a comprehensive approach to transition, Project RENEW uses seven components identified in the literature as showing promise for adolescents and young adults with severe disabilities. These include (a) personal futures planning, (b) flexible high school programming, (c) employment support, (d) interagency collaboration, (e) mentoring, (f) social skill building, and (g) individualized and flexible resources.

Personal futures planning. Personal futures planning is a problem-solving approach by which individuals with disabilities are assisted to review their past experiences, identify their capacities and assets, and involve family members, friends, or service providers as the participants wish to help develop personally meaningful life goals and plans (Butterworth, Steere, & Whitney-Thomas, 1997; Marrone, Hoff, & Helm, 1997). The personal futures plan elicits information about personal dreams, goals, fears, and the system of resources and natural network of family, friends, and others on which an individual may depend. Each participant completed a personal futures plan within the first 2 months of participation. Planning meetings averaged about 90 min in length and typically covered the following topics: Personal Attributes and Interests, School and Work History, Social Network, Life Goals, Fears and Obstacles, and Next Steps.

Goals identified through personal futures planning tended to be

realistic, yet challenging. For example, the goals of one of the participants, Margaret, were to enroll in college, obtain her driver's license, and get along better with her parents. Another participant, Jeremy, stated his goal as follows: "A year from now, I want a car, a good job, and my own apartment."

To accomplish such goals, short-term objectives are set and explicit activities to meet the goal are identified. The personal futures plan is continually monitored, and when objectives are met, circumstances change, or the individual feels a need to rethink personal goals, the plan is revised. Personal futures planning, directed by the participant himself or herself, sets a tone and direction for the partnership between the young person and project staff.

Flexible educational programming. None of the 11 project participants who had not completed high school at the time they entered the project were meaningfully engaged in school nor were they interested in further participation in a traditional high school classroom or vocational education program. Yet it became clear that these individuals were not disinterested in education itself, only in the formats in which it was being offered. Project staff worked with the Manchester schools to develop additional pathways for these participants to finish high school (Cheney; Malloy, & Hagner, 1998). Nontraditional pathways included studying for the GED test with a tutor and earning final high school credits through (a) self-paced computer-assisted instruction at the CTC's learning and career center, (b) participation in postsecondary courses for high school credit, and (c) learning academic content in the context of community-based work and other experiences. Individual plans were designed in collaboration with the school and approved upon verification that the academic content met school standards for completion of the requested credits.

Once high school was completed, the project provided assistance to those wishing to access postsecondary education. Margaret, for example, received assistance from the project to apply to and enroll in the child care and early education program of the CTC. The combination of project assistance and an accommodation plan developed by the college disability services coordinator allowed Margaret to successfully progress through the program.

After 2 years, 5 additional participants have completed high school with a diploma or GED, totaling 12 participants (67%) in all who have completed high school. Nine of the 12 high school graduates (75%) currently participate in a postsecondary education program. Of the 6 individuals who have not completed high school, 4 are preparing for the GED exam and 1 is engaged in a registered youth apprenticeship that incorporates academic instruction leading to a school diploma.

Employment support. Employment assistance included helping individuals

develop occupational objectives that match their interests and strengths, assisting with the job search, and working to ensure that each employee has adequate workplace supports. Workplace supports include supports to the employer and coworkers (Cook, Razzano, Straiton, & Ross, 1994) as well as the employee. Project RENEW emphasizes the use of natural employment supports (Hagner, Rogan, & Murphy, 1992; Storey & Certo, 1996) by (a) targeting employers who provide good supervision and support to all their employees (Akabas, 1994), (b) assisting participants to use their own natural social networks to find jobs, (c) identifying and supporting on-the-job mentors for participants, and (d) providing ongoing consultation and support to the employer on accommodation strategies. Employment outcomes are described in the next section.

Interagency collaboration. Numerous authors have recommended that schools, mental health providers, child welfare agencies, and families work collaboratively to ensure that youths with emotional disabilities receive sufficient and appropriate care (e.g., Eber, Nelson, & Miles, 1997; Knitzer, Steinberg, & Fleisch, 1990), and collaborative efforts have demonstrated improved educational and employment outcomes (Bullis & Paris, 1996; Clark, Schaefer, Burchard, & Welkowitz, 1996). Collaborative interagency planning, sometimes called "wraparound planning", results in services that are more individualized and flexible in meeting the needs of youths (VanDenBerg & Grealish, 1996).

At the service level, an interagency team is constructed around each individual on the basis of the goals in the personal futures plan. The service team is developed and coordinated by the CES and typically includes the individual's mental health case manager, vocational rehabilitation counselor, and special education or housing/residential service personnel if applicable. Participants are able to access agency resources through this service team. The team also teaches participants how to use community-based services and self-help groups (e.g., Alcoholics Anonymous).

The second level of interagency collaboration is a team of middle-level agency administrators who meet monthly as an Interagency Coordinating Council (ICC). This group represents the community mental health center, vocational rehabilitation, the Alliance for the Mentally Ill, the school district, the CTC, the child welfare state agency, and other private and public agencies that serve youths and young adults in the city. The ICC identifies systems barriers and works toward solutions that will help project participants achieve their goals. For example, at one point nearly half of the project's participants were living in dangerous or unstable housing (sleeping at a friend's house temporarily, living with parents involved in drug dealing or prostitution, etc.). This issue was brought to the attention of the ICC, and the problem was analyzed, other resources were brought in, and a plan was developed to increase the availability of short-term housing assistance. Malloy, Cheney, and

Cormier (in press) provided a detailed account of the interagency coordination process.

Mentoring. Personal growth and social development often involve the development of new relationships, and mentorship can be a particularly effective form of relationship for at-risk youths (Brooks, 1994). Mentors are able to serve as personal guides to psychosocial development (Haensley & Parsons, 1993), and mentoring seems to be a complementary factor to social skill building in the transition success of youths with disabilities (Powers, Sowers, & Stevens, 1995). Project RENEW identifies and matches mentors to participants on the basis of common career or recreational interests. Some mentors are specifically chosen because of their position as coworkers who can assist the individual in adapting to the workplace or for their interest in acting as tutors to help the individual achieve education goals. Mentors also often introduce the individual to a wider circle of positive social relationships. All 18 participants have mentors who spend time with them at least once a week.

Mentors receive a monthly stipend of \$50 to help defray their travel, phone, food, and any entertainment costs spent while with the participant. Each mentor develops a written statement of the goals of the mentoring relationship with the participant. CESs provide support to the mentor on an individual basis, and an annual group social event recognizes the contributions mentors make in the lives of participants.

Social skill building. Individualized participation in valued job or school settings maximizes opportunities for participants to develop new friendships and acquaintances and to practice positive social skills. Project RENEW also offers a weekly peer support group for participants that focuses on the development and use of positive social skills (Gibbs, Potter, & Goldstein, 1995). Participants discuss and practice more effective social skills to deal with difficult situations they confront at home, in school, or in their work. The group meets for 2 hours one evening per week in a downtown community center. Currently 6 participants attend regularly and 3 others attend occasionally.

Flexible funds. Responsiveness to changing individual circumstances and needs is enhanced through the use of flexible resources (Dollard, Evans, Lubrecht, & Schaeffer, 1994; Eber et al., 1997) that are easily accessible to consumers. The availability of resources tied solely to the implementation of individual plans fosters self-determination and empowerment (Hagner & Marrone, 1995) on the part of participants, both of which are important transition outcomes in themselves for young adults with disabilities (Wehmeyer, 1992). RENEW's participants can obtain access to a pool of flexible funds to respond to a personal emergency (e.g., housing, transportation) or achieve a career or educational goal (e.g., college application fee, supplies, test fees) for which other resources are not available or not available quickly enough. Participants complete a brief request form and discuss the need with

their CES. RENEW staff makes a decision and, if accepted, provides a purchase order or direct cash within 24 hours.

In the first 2 years, 14 participants received funds totaling \$11,112. In most cases this use of funds was critical in meeting immediate needs that could not have been funded elsewhere. The primary uses for flexible funds have been education, transportation, and emergency food and housing expenses.

RESULTS

Quantitative Outcomes

Of the 18 participants served by the project for 2 years or more, 11 are currently employed (61%) and 15 (83%) have been employed during their participation in the project. Hourly wages averaged \$6.19 per hour, and those working averaged 27.7 hours per week of employment. All jobs were paid employment, and all were individual competitive employment positions with the exception of one self-employed participant.

Throughout the project, those employed have held an average of 3.2 jobs per person, some concurrently, with a range of from 1 to 7 jobs per person. Jobs have included sorter, fabricator, telemarketer, car lubrication technician, plumber's assistant, cashier, newspaper deliverer, inventory clerk, actor, stock clerk, day-care intern, pet groomer, and self-employed craftsperson. Jobs were primarily ended appropriately. Seventy-four percent of jobs ended through resignation to accept a new job (11%), through other resignation (37%), or due to a layoff or temporary job ending (26%). Twenty percent were terminated by the employer, and 6% were terminated for other reasons. The average duration of a job was 14.1 weeks.

Seventeen of 18 participants (94%) either have graduated from high school or are actively involved in a secondary education program. Of the 12 participants who are high school graduates, 9 (75%) are in postsecondary education programs: 1 is in a bachelor's degree program in nursing, 4 are in associates degree programs (2 in early childhood education, 1 in graphic arts, and 1 in criminal justice), 1 is taking general college preparation classes at the CTC, 1 is in a certified acting program at a local art institute, 1 is working with a woodworking tutor, and 1 is a registered apprentice.

At the time of their most recent questionnaire, 1 of 18 participants had had police or court involvement in the past 3 months. Upon entering the program and at 6-month intervals, participants are asked about their level of satisfaction with work, school, home, health, progress toward personal goals, and handling life problems. Table 1 shows pre- and postsatisfaction data for the 18 individuals who have been project participants for 2 years. Increases in satisfaction were found in each

area. A Wilcoxon signed-rank test was performed on matched pairs of satisfaction data (n = 13 for school data, n = 12 for job data; n = 18 for all other categories). Increases in satisfaction were statistically significant at the .05 level in satisfaction with work, with school, with progress toward personal goals, and with handling life problems.

Participant Case Examples

Participants used project components in varying ways and to varying degrees, depending on the individual's unique goals and circumstances. The scope and intensity of effort required to achieve positive transition outcomes can be illustrated through representative case examples.

Paul. Paul is an individual with mental illness and an intellectual disability. At the start of the project, Paul attended a special school for individuals with disabilities. His school program consisted of mornings in special classes and afternoons working under school supervision at a grocery store. He also was under indictment for a sexual offense, facing court-ordered placement in a residential treatment center in another part of the state. Paul's goals were to remain in his hometown with his mother and start his own woodworking business.

Paul's CES found a craftsperson willing to serve as Paul's mentor and help him set up a shop in his basement and teach him basic woodworking. During his final year in school, the school district approved an arrangement whereby this mentor was paid for 10 hours a week as a tutor. Paul's vocational rehabilitation counselor assisted him to complete a business plan and purchase a band saw and other woodworking equipment, and Paul began designing and making wooden signs, toys, and similar objects and displaying them at craft shows.

Paul was referred to the state protection and advocacy organization for legal assistance and to the local adult developmental disabilities agency for case management and other services. His CES helped Paul design a weekly schedule of activities after graduation that included continuing woodworking instruction from his mentor and regular attendance at a sexuality awareness group and guaranteed that Paul would have another male adult with him when he left his house. Through these efforts, Paul was able to settle his legal difficulties and remain in his home community. His craft items are beginning to sell, and he is looking for additional sales outlets. When sales reach the level set in his business plan, he will be considered successfully self-employed by the vocational rehabilitation office.

Betsy. At the time Betsy entered the project, she had just been suspended from school for throwing a chair at the teacher. She had been living with her grandmother since being discharged from the state secure

school for youths with behavioral disorders. She had a history of 8--10 suicide attempts and psychiatric hospitalizations per year. Betsy identified working with children, having a family; and purchasing a car as goals in her personal futures plan.

In reviewing her school records, Betsy's CES and a school representative found that she had accumulated enough credits, through the public high school and at several residential treatment schools combined, to qualify for her high school diploma, and she graduated with honors. She subsequently worked for a summer as a child-care aide in a Job Training Partnership Act (JTPA)-funded program and then entered the early childhood education program at the CTC, with tuition support from the vocational rehabilitation office where she has received all A's in her courses. She used flex funds for the college application fee and to purchase some of her books. In addition to attending school, Betsy has held part-time jobs as an assembler, telemarketer, and newspaper deliverer.

Betsy established a close relationship with a woman with whom she has shared an apartment for over a year. Betsy regularly attends the peer support group. She has had two suicide attempts in the past year, neither serious enough to warrant hospitalization.

Terry. At the start of the project, Terry was living in a temporary arrangement with his brother, without a clear idea of where to obtain or pay for housing. He had graduated from high school and was unemployed. The beginning of Terry's project participation coincided with a presidential election campaign season, and politics emerged through personal futures planning as one of Terry's major interests, so he was assisted to volunteer at his local political party headquarters. Through this experience, which included meeting the President on one of his campaign visits, Terry became friends with a local congressional candidate, and following the election, when the unsuccessful candidate returned to his auctioneer business, he offered Terry a clerical job with the business. The business provided training to Terry by rehiring a former employee as a part-time trainer, and the vocational rehabilitation office reimbursed the business for this expense through an on-the-job training stipend.

Terry's major goals besides employment were to live in an apartment with a roommate and to pursue college courses. He became friends with another project participant, Michael, who had a HUD Section 8 housing subsidy and who required a live-in aide to assist him to remember appointments, keep the apartment clean, and so on. Terry took on this aide role, which allowed him to room with Michael rent free.

After several months on the job, Terry's untreated mental health needs began interfering with his job performance, and he was eventually let go. Two subsequent job tries were also unsuccessful, and Terry became more and more withdrawn and depressed. He refused for a time to meet

with his mentor, with whom he had shared an active interest in baseball. Because he no longer was providing the live-in assistance Michael needed, Terry was also in danger of losing his residence. As Terry began to realize the seriousness of his difficulties, he finally agreed, reluctantly; to receive services from the local mental health center. With treatment, his symptoms diminished, and at the time of his most recent survey and interview Terry was again beginning the process of applying for jobs.

Margaret. Margaret has had one of the more stable housing arrangements, having lived in her mother's apartment for the duration of the project. At the start of the project, she had completed high school and enrolled in a college course, but the curriculum was too demanding and she failed. She was unemployed. Her goals were to earn money through a job, go to college, obtain her driver's license, and get along better with her mother.

The project initially assisted Margaret to obtain a JTPA-funded summer job. After summer, the project helped her explore more permanent employment through her personal network, and she obtained two part-time jobs, assisting her brother in his bicycle shop and doing bookkeeping for her landlord. In both cases, the CES assisted the employer by analyzing job tasks and creating task checklists for Margaret, and both jobs have continued successfully.

Along with work, and with financial assistance from the vocational rehabilitation office, Margaret began studies at the CTC--first taking a study skills course, then enrolling in the child-care certificate program. Margaret was paired with a mentor, a 2nd-year student at the college, and with the combination of mentor tutoring and an accommodation plan developed by the college with project input, Margaret progressed satisfactorily through the program. She also became involved in extracurricular activities and was elected president of the college Community Service Club in her 2nd year.

Margaret did not request project flex funds, but when interviewed she reported that she was always aware that these funds were available if the need arose; this awareness was a source of support to her. Margaret attended the social skills group regularly. After an evaluation by a disability specialist determined that it was feasible for Margaret to learn to drive (she has mild cerebral palsy in addition to a psychiatric disability), the local vocational rehabilitation office funded driving lessons and Margaret obtained her license. She reports that her relationship with her mother has improved.

Jeremy. At the start of the project, Jeremy had dropped out of school and was unemployed, heavily abusing drugs and alcohol. His primary goals were to finish high school, obtain a job, and buy a car. With assistance, Jeremy canvassed his social network and obtained employment

at a local auto oil change shop through his uncle. The vocational rehabilitation counselor assisted Jeremy to purchase suitable Work clothes, and the CES consulted with the employer on training strategies so that the employer was able to teach Jeremy the entire job.

Jeremy needed two credits to graduate from high school. He originally planned to take two courses at the CTC. He enrolled but withdrew from the first course, primarily because of continuing drug and alcohol consumption (but throughout this time he continued to show up on time at his job). An alternative educational plan was then developed whereby Jeremy could earn high school credit through working on the self-paced academic tutorial programs at the college learning and career center for a specified number of hours and submit a printout of his work.

Jeremy purchased lab time at the learning and career center with flex funds and worked on the academic tutorials regularly for a couple of weeks and then discontinued. His drug and alcohol abuse escalated over several months, and eventually he admitted himself to a residential detoxification program, followed by day treatment, taking a leave of absence from his job during this time. During the last 2 weeks of classes before the end of his final school year, Jeremy recovered enough to go back to the learning and career center lab and complete the rest of his hours. His grandparents had promised to throw him a graduation party if he graduated, and with their encouragement he did finish and receive his diploma. Jeremy subsequently looked for and found a better paying job in a department store, but after a few weeks he found the new job unsatisfactory and for the time being went back to his old job at the oil change shop. He is paying his legal fines and saving to buy a car when his driver's license is reinstated.

DISCUSSION

Using a comprehensive package of intensive supports, Project RENEW participants have achieved graduation and employment outcomes far surpassing those reported in national surveys of this population. After 24 months, all but 1 participant has either completed high school or is actively engaged in a secondary education program. The overall employment rate of 83% is slightly higher than that reported by Bullis et al. (1994) with higher wages per hour, hours worked per week, and job duration. Recent involvement with police or corrections fell from 72% to 17%. Participants reported statistically significant increases in their satisfaction with school, employment, handling of life problems, and progress toward personal goals. Because this transition demonstration lacked experimental controls, other variables may have affected these outcomes, and therefore these findings should be considered tentative and subject to validation through future research.

Because of its importance to lifelong earnings and career success, high school completion was an important goal of the project. Table 1 shows

the high initial level of dissatisfaction with traditional schooling. Yet participants were aware of the connection between finishing high school and achieving their life goals. The individualized options required to allow most participants to complete high school were readily and inexpensively available in the community, and those who completed high school considered this as one of their proudest accomplishments.

As is the case with many adolescents (Lichtenstein, 1998), project participants treated employment during and immediately after high school as a form of exploration as well as a source of income. Few were ready to commit to a long-range career path or to any one job. As Bullis et al. (1994) noted, services should plan for multiple jobs as young adults learn, make mistakes, and grow. One key to the success of the project was in treating employment as an immediate need for participants, and thus as a vehicle for rehabilitation, not as a long-term goal to be considered only as a final stage in rehabilitation. Sometimes, as with Terry, losing a job seemed to motivate a participant to accept mental health treatment more effectively than any amount of persuasion or counseling. Other times, as with Jeremy, a steady job became the one positive factor keeping an otherwise chaotic life on course.

Participants viewed the project's willingness to take their ideas and choices seriously as critical to their success. Establishing Paul's crafts as a viable business, assisting Betsy to pursue a career in child care, and arranging acting lessons for another participant required the project to support and advocate for personally meaningful choices that many people might regard as impractical. Yet the motivating force of these goals and choices gave participants the strength to give up drug and alcohol abuse, stay away from situations that could involve them in criminal activity, and focus on what they needed to do to get through each day. Thus, in an important sense, these choices were eminently practical.

This project has three important implications for the practice of rehabilitation counseling. First, it documents the viability of a person-centered career planning process based almost entirely on identifying subjective aspirations of consumers and the support resources relevant to those aspirations, making virtually no use of traditional assessments. Second, it reinforces the value of collaborative interagency transition planning as a mechanism for combining vocational rehabilitation resources with those of schools and other adult service agencies toward the achievement of a level of service comprehensiveness and consumer outcomes that no single agency could provide or afford.

Third, Project RENEW highlights the value of the seven project components described earlier as practices to be sought and nurtured as vocational rehabilitation counselors select and collaborate with community rehabilitation programs and other service providers. These

components can be used in a flexible manner, with varying levels of intensity, to support a variety of career paths and options. At a ratio of 1 CES to about 12 participants (several individuals participating for less than 2 years were not included in the reported data), the required coordination is a fairly labor-intensive activity. However, it must be remembered that some of this effort was expended in grant-related data collection and reporting that service providers are not ordinarily responsible for. Also, the process is able to draw on a variety of natural sources of support, such as mentors, peers, and coworkers, so that coordination time decreased with time in the program. Longitudinal follow-along studies will be required to evaluate the long-term impact of this transition model and the maintenance of career gains made during this initial transition. Currently, available information points to the possibility that a dramatic reduction in costs associated with repeated hospitalization and with criminal activity and corrections more than compensates for the cost of the initial transition service and that this service model may be effective in achieving quality rehabilitation outcomes for young adults with chronic mental illness or emotional disturbance.

TABLE 1 Level of Participant Satisfaction <#toc>

Legend for Chart:

- A - Measure
- B - Number of Participants at Project Entry Very Dissatisfied or Satisfied
- C - Number of Participants at Project Entry Neither
- D - Number of Participants at Project Entry Satisfied or Very Satisfied
- E - Number of Participants After 24 Months Very Dissatisfied or Satisfied
- F - Number of Participants After 24 Months Neither
- G - Number of Participants After 24 Months Satisfied or Very Satisfied

	A	B	C	D	E	F	G			
With living situation			4	2	12	3	6	9		
With school			13	1	4	0	4	9[*]		
With job			7	5	5	1	2	9[*]		
With physical health			7	3	8	2	6	10		
With progress toward personal goals					8	7	3	3	4	11[*]
With handling of problems					9	5	4	2	4	12[*]

[*] Statistically significant increase at Alpha = .05.

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Career-related outcomes of a model transition demonstration for young adults with emotional disturbance. This article reports the results of a model demonstration project for adolescents and young adults with chronic mental illness or emotional disturbance. Career and education specialists tailored a comprehensive support package consisting of personal futures planning, flexible educational programming, employment support, interagency collaboration, mentorship, social skill building, and flexible funding to the needs of each participant.

adulthood of youth with serious emotional disturbance in terms of epidemiology, effective interventions, and program models. The first section is introductory and provides definitions and characteristics of transitional youth noting special developmental tasks, outcomes for young adults, challenges to positive outcomes, and the special needs of homeless youth with serious emotional disturbance. The second section reports on ways in which the existing service systems (the child/adolescent system and the adult system) fail to meet the needs of these youth and the resulting poor outcomes. It urges The literature demonstrates that their plight in young adulthood is grave. Youth with SED enter the transition phase delayed in their developmental maturation and face additional challenges relative to their nondisabled peers. As a group, they are undereducated, underemployed, and have limited social supports. Homelessness, criminal activity, and drug use are prevalent. Reasons for Accepting Young Adults with EBD in Job Placements Bullis and Cheney (1999)

- n They want to offer assistance to someone in need, providing a service to the community (Empathy)
- n They are impressed with the staff person who made the job development contact, or (Respect, Trust and Relationship)
- n They had positive experience with other such programs in the past (Success).

Â Rationale for Service-Learning and Students with Emotional Disturbance Muscott (2006) 5. There is the emerging research base in the area of Service.Â n. A national demonstration SL program supported by CIC n. A collaborative Youth Transition Demonstration. For youths with disabilities, the transition to adulthood can be especially difficult. Besides the host of issues facing all individuals at that age, young people with disabilities have additional challenges related to health, social isolation, service needs, the potential loss of program benefits, and lack of access to supports (Osgood, Foster, and Courtney 2010). These challenges complicate their planning, often leading to poor education and employment outcomes, dependence on public programs, and a possible lifetime of poverty (Davies, Rupp, and Wittenburg 200