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An innovative model for career counselling
services to mental health NEETs



IO3 Unit Descriptor: Informal Careers

POLAND XXX

Partner Organizations



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1. AIMS

1.1. Whom is this unit for?

This unit is directed to family members (parents, children, siblings, spouses or partners, extended families) as well as close friends and others who care about the MH person like neighbours, co-workers, coaches and teachers. In other words, to people who can be described as informal carers.

1.2. What pressing needs does it respond to?

Involving families and informal carers in the educational setting in the career building and career decision-making of the MH person is valuable. It is a task that requires dedication, sacrifice and a lot of effort. However, informal carers often do not have the knowledge and skills to support MH persons in reintegration into education and work [see: Toolkit Part B].

1.3. How does it empower MH NEETs to better achieve their goals?

Accordingly, this unit will cover the following topics: the healing process, the role of the family, empowerment and self-stigma. The effect will be to increase cognitive, pragmatic, affective and social competencies – useful competencies for informal carers in the process of supporting MH persons in reintegration into education and work.

2. SCIENTIFIC BACKGROUND

2.1. What are the empirically identified needs of the target group this unit responds to in terms of career skills?

According to our literature review, it seems that the involvement of informal carers (which most of the time are family members) in the healing and reintegrating process of MH NEETs is often neglected. It is extremely important to address the needs of this group, as its' members experience significant anxiety and burdens even during the recovery stage of their relative's illness, especially when recovery involves employment. Research also shows that family-dominated networks can be supportive and have valuable resources to offer for the success of rehabilitation programs, despite their limitations. So, the main challenge for professionals is to acknowledge that families and informal carers are not always completely effective and have issues of stress, carer burden and lack of resources to provide support, but at the same time are indispensable components and need to be involved in the work integration process of the person with mental health problems.

2.2. What are the specific learning needs of the target group?

A summary of the needs of informal carers and proposals for their involvement and support, as suggested in the literature, are the following:

- Acknowledge issues of overprotective and critical and intrusive behaviours by informal carers and work on them
- Provide education about important issues, such as:
 - The person's capacity to work
 - The benefits if the person works
 - What to say to employers, if needed, when the person is sick
 - Recognize signs of stress and relapse and contact the professional early to prevent job loss
- Provide support to alleviate anxieties about:
 - Relapse and loss of income
 - Periodic respite from the burden of care

Empirical insights from our research conducted among the informal carers group pointed out some of the most urgent needs, among which can be distinguished:

1. support for themselves to be more helpful for MH NEETs - the need for a professional to guide them through the system, efficiency in services, remuneration, time for counselling, specialized staff in public agencies,
2. career counselling and guidance - special guidance from the end of adolescence and school, a better process of counselling that matches work to competencies and possibilities and focuses on discovering talents, continuous support and early interventions and career counselling with a view to needs of MH NEETs,
3. paradigm shift - suitable facilities where young people could experience autonomy, support in the workplace, especially at the beginning, motivating, establishing workplaces only for the disabled, calling on people with mental health conditions as experts of their condition and life, employers being more attentive to MH NEETs, support for employers to allow young people try things and generally more mental health awareness.

3.1. What is the empirical and theoretical grounding for the choice of didactical methods applied in this unit?

Empirical and theoretical justification and grounding for the choice of teaching methods used in this unit are presented and discussed in Toolkit Part B and Toolkit Part C.

3. INTENDED LEARNING OUTCOMES

3.1. Healing Process sub-unit. Cognitive competencies

- Students are able to describe stages of the MH persons' healing process and the factors influencing it.
- Students are able to identify different factors which are positively and negatively correlated with the successful course of the healing process.

3.2. Healing Process sub-unit. Pragmatic competencies

- Students are able to identify and recognize the universal and individual factors influencing positively particular MH persons' healing process.
- Students are able to provide informational support to MH persons during their healing process.
- Students know where to seek information on how to support the recovery and healing process of an MH person.

3.3. Healing Process sub-unit. Affective competencies.

- Students are able to provide emotional support to MH persons during their healing process.

3.4. Healing Process sub-unit. Social Competencies.

- Students are able to propose activities aimed at empowering and supporting a positive course of the MH persons' healing process.
- Students know where to seek professional help aimed at supporting a positive course of the MH persons' healing process.

3.5. Empowerment sub-unit. Cognitive competencies.

- Students are able to describe the specific role of empowerment.
- Students are able to describe the role of informal carers in empowering MH NEETs.

3.6. Empowerment sub-unit. Pragmatic competencies.

- Students are able to help MH people identify their talents and skills or limitations.
- Students are able to listen carefully to the MH person about his/her concerns about education and work.
- Students are able to give some tips on how to develop his/her strengths.

3.7. Empowerment sub-unit. Affective competencies.

- Students are able to demonstrate that they understand MH NEETs' hopes and concerns related to education and work.

3.8. Empowerment sub-unit. Social competencies.

- Students are able to indicate places (institutions and organizations) where MH persons can obtain support related to the development of educational and professional competencies.

3.9. Role of the family sub-unit. Cognitive competencies.

- Students are able to describe the role of the family in the healing process of MH NEETs.
- Students are able to describe the role of the family in the reintegration into education and work.
- Students are able to describe the definition of career, as the sum total of paid and unpaid work, learning and life roles are undertaken throughout life.

3.10. Role of the family sub-unit. Pragmatic competencies.

- Students are able to engage in MH NEETs' reintegration into education and work.
- Students are able to explore the MH persons' interests and how these could connect to different careers.
- Students are able to support an MH person to develop their own aspirations and make their own career choices.

3.11. Role of the family sub-unit. Affective competencies.

- Students are able to demonstrate their active involvement in the MH persons' education and professional career.

3.12. Role of the family sub-unit. Social competencies.

- Students are familiar with the range of careers and support available to MH people.
- Students know who to talk to about support services for MH people and where they're able to find information about available help for MH people.

3.13. Self-stigma sub-unit. Cognitive competencies.

- Students are able to describe the meaning and the negative impact of stigmatization and self-stigma on MH NEETs.
- Students are able to describe the role of informal carers in fighting the stigma.

3.14. Self-stigma sub-unit. Pragmatic competencies.

- Students are able to propose activities aimed at changing the attitudes of society towards MH people.
- Students are able to propose some actions aimed at reducing self-stigma.
- Students are able to choose and suggest appropriate exercises from the Toolkit Part C.

3.15. Self-stigma sub-unit. Affective competencies.

- Students are able to demonstrate that they understand MH NEETs' concerns related to social attitudes towards MH people and self-stigma.

3.16. Self-stigma sub-unit. Social competencies.

- Students are able to propose activities aimed at changing the attitudes of society.
- Students are able to convince people who discriminate against MH people to stop doing so.

4. OVERVIEW OF THE STRUCTURE

The course consists of 18 teaching hours (18x45 minutes) divided into eight 90-minute lessons and a 45-minute introduction and conclusion.

Duration	Topic	Exercise Name/Method
45 min	Welcome/introductions	Welcome
90 min	Stages of the MH persons' healing process and the factors positively and negatively influencing it.	Mini-lecture, PowerPoint Presentation - PPP, discussion, brainstorming.
90 min	Healing Process: Activities and Role Play Exercises	Discussion, PPP, testing the tools and activities, group/pairs role-playing.
90 min	The specific role of empowerment and the role of informal careers in empowering MH NEETs.	Mini-lecture, PowerPoint Presentation - PPP, discussion, brainstorming.
90 min	Empowerment: Activities and Role Play Exercises.	Discussion, PPP, testing the tools and activities, group/pairs role-playing.
90 min	Role of the family in the healing process of MH NEETs and reintegration into education and work.	Mini-lecture, PowerPoint Presentation - PPP, discussion, brainstorming.
90 min	Role of the family: Activities and Role Play Exercises.	Discussion, PPP, testing the tools and activities, group/pairs role-playing.
90 min	Meaning and the negative impact of stigmatisation and self-stigma on MH NEETs. The role of the family in fighting stigma.	Mini-lecture, PowerPoint Presentation - PPP, discussion, brainstorming.
90 min	Fighting stigma: Activities and Role Play Exercises.	Discussion, PPP, testing the tools and activities, group/pairs role-playing.
45 min	Reflection on role-plays, recapitulation of content, closing.	Discussion

5. REQUIRED RESOURCES AND MATERIAL

A comprehensive list of materials and resources needed for the course.

- PowerPoint Presentation (suitable for the unit)
- Laptop and multimedia projector
- Optional printed PPPs for participants
- Pens and paper for participants
- Necessary materials for the activities (necessary materials are described in Toolkit C).