

Curriculum for Career Counsellors

Unit D: Difficulties in Accessing the Labour Market



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Co-funded by the
Erasmus+ Programme
of the European Union





Content:



Group work: Thoughts and experiences – what's the problem?



Lecture: What do we know from research?



Classroom discussion



To begin with – what are your thoughts and experiences?

- Think about one issue which could make it difficult for a young person with mental health condition to find and maintain vocational training and employment
- Write it on the card provided
- Pin it on the board and explain in a few words

...

We will revisit the board later on: have our estimates changed?

Are there patterns emerging? How could we cluster our suggestions?





Difficulties

- 1) **Relating to mental health condition as disability**
- 2) **Relating to discrimination and stigma**



Disabled individual or disabling society?

Consider the two framings:

- **People with mood disorders cannot work in media and advertising because they cannot keep up with what is a highly demanding and stressful work environment**
- **Media and advertising business is organised and run in a way that puts high pressure on employees which excludes otherwise very able creative people who have a mood disorder**



1 – mental health conditions as disability impacting on labour market access

The skills that nowadays are expected to identify the right career and successfully present oneself to potential employers are at odds with the symptoms for many mental health conditions. Often the necessary psycho-social support necessary for a successful transition from school into vocational training and work is not available or difficult to access

In the workplace itself, stress levels, fast-changing demands and time regimes in many jobs can be detrimental to mental health – which limits the number of options open to people with mental health conditions and increases the likelihood of job loss and unemployment

Unemployment itself is a contributing factor to mental illness and can lead into a vicious circle in which a worsening condition makes labour market access ever more unlikely

Many mental health conditions involve sporadic or frequent crises. Others can impose atypical day structures. If workplace arrangements do not accommodate for these, job loss can be the consequence

Although training and employment have been shown to be important in recovery, there are too few opportunities to enter employment while medical treatment and therapy are still ongoing



Reminder: things that can become difficult with a mental health condition include:

maintaining structured routines

managing sudden crises

reacting adequately in social interaction

dealing with emotional exhaustion

keeping up motivation

keeping calm

negotiating demands from therapy, social life and work

developing a realistic self image

regulating affect

overcoming anxieties

etc. etc.

Reflect: How can these make work difficult?

Reflect: How is the world of work making it difficult for people with mental health conditions?

Isn't this exhausting? And so is work – how many spoons can you use?

Christine Miserandino's "spoon theory" is a good way to understand the difficulties of coping with the multiple demands of managing a chronic illness or a disability and additionally all the other tasks and challenges of everyday life: Imagine you have a limited number of spoons and each activity you do uses up a certain amount of spoons. How do you organise your life if there are fewer spoons than you need to fully participate – how do you economise on your spoons? What do you do, if you run out of spoons half-way through your day? Read about it here: <https://cdn.totalcomputersusa.com/butyoudontlooksick.com/uploads/2010/02/BYDLS-TheSpoonTheory.pdf>

TheSpoonTheory.pdf

2 – stigmatisation and discrimination impacting on labour market access


There are still many misconceptions and much prejudice about mental health issues. Many people associate them with violent crime and anti-social behaviour, many mis-interpret them as moral failings, laziness, many under-estimate the abilities of people with mental health conditions.

Stigmatisation can mean that sites of education, training and work are highly uncomfortable for people with mental health conditions, which can cause dropping out or avoidance behaviour

Stigmatisation can lead to direct discrimination – some employers reject people with mental health conditions out of fear or misconceptions about their abilities. Sometimes they may infer from a single negative experience and make general judgements on all.

Stigmatisation can lead to self-stigma. Being seen as “deficient”, “lacking”, “unruly”, “dangerous” etc. often rubs off and becomes part of one’s self-conception. This in turn leads to low self-efficacy and gets in the way with accessing support and entering training or employment





Check out the
Work4Psy Toolkit
on stigma and
discrimination
(part B, chapter
3)



Thank you for
your attention.
Any questions?

work4psy@hdba.de