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An innovative model for career counselling
services to mental health NEETs



CAREER SERVICES FOR MENTAL HEALTH NEETs: THE WORK4PSY TOOLKIT

PART C: TOOLS AND ACTIVITIES

Partner Organizations





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CAREER SERVICES FOR MENTAL HEALTH NEETs: THE WORK4PSY TOOLKIT

PART C: TOOLS AND ACTIVITIES

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IMPRINT

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INTRODUCTION

Mental illness affects around 27% (83m.) of Europeans annually (European Social Work, 2013). Three quarters of mental illness begins by age 24 (WHO), affecting the social inclusion and, due to stigma, the work integration of a big number of young citizens in the EU. While many EU projects have focused in facilitating work integration of European NEETs (young people Not in Employment, Education or Training), little attention has been paid to young people with Mental Health problems that are not in Employment, Education or Training ('MH NEETs').

It seems clear that while European NEETs is a growing social group, asking for special attention, MH NEETs seem to face a lot of extra challenges on their way to education and the labour market. Mental illness is likely to be both a risk factor for becoming NEET as well as a consequence of NEET status. Youth with prior mental illness are likely to terminate school early. Mental disorders are also likely to impede the transition into the labour force due to employment restrictions and stigma. The social exclusion that is associated with the NEET status combined with the social exclusion that is associated with the Mental Health Patient status could cause feelings of hopeless.

An obstacle to Work and Education Integration is still represented by the social stigma: often people with mental disability are considered “dangerous” - “unpredictable” and are marginalized. At the same time, although it is widely recognized that NEETs have different needs than older individuals, Mental Health Professionals, Career Counsellors and Informal Carers of MH NEETs don't have the required education/training and tools, in order to support MH NEETs on their way to work integration.

Work Integration for severely mentally impaired people represents today an advanced strategy of the social inclusion with widespread experiences in different European countries. This is also underlined by the fact that 2017 World Mental Health Day theme focused on mental health and work, while the 2018 World Mental Health Day focused on Young Adults/Youth and mental wellbeing. Studying and improving Work Integration process of MH NEETs is one of the main goals of the project supporting the horizontal priority of Social Inclusion.

At the moment, there is a lack of specialized tools facilitating the work integration of MH NEETs. Furthermore, all the main actors involved in this procedure (MH NEETs themselves, mental health professionals, career counsellors and informal carers) are not sufficiently educated, in order to provide the support needed. The big number of MH NEETs remaining outside the labour market constitutes an urgent call for the development of efficient strategies, as well as, the appropriate educative solutions and methodology to integrate MH NEETs in the labour market.

IDENTIFYING THE NEEDS

Labour market integration plays a key role as it supports all crucial interests by aiming at social and economic goals as well as psychological ones. Becoming part of the domestic workforce in EU countries makes MH NEETs trust in their self-efficacy and capability of being autonomous. Work integration is proven to reduce symptoms and improve functionality of people with mental health problems, thus it reduces the frequency of hospitalization and the need for medical treatment, leading to important economic savings for public health systems. Important economic benefits arise also from the fact that work integration of excluded social groups stimulates EU domestic economies by providing them with

new workforce, while, at the same time, it brings general population in closer contact with young people with mental health problems, reduces stigma and leads to a wider social inclusion.

On the other hand, mental health professionals, career counsellors and informal carers are the main groups involved with the work integration of MH NEETs. It is important to ensure that all these groups are able to empower, motivate and inform MH NEETs, so that they will be aware of all their possibilities in regard to their work and education integration (free and protected labour market, social entrepreneurship, EU opportunities, training programs, career counselling, etc.). The education of MH NEETs but also of informal carers, mental health professionals and career counsellors working, so that they understand the importance of early intervention and have all the required knowledge and skills in order to enhance the integration of MH NEETs in the labour market and education is a real challenge.

ASPIRATIONS – INNOVATION

The greatest aspiration is that the project will have an immense effect on MH NEETs lives. The aim is to enhance their empowerment by being able to get information on their own, regarding their work and education integration, as well as receive the support needed from a well-trained environment (Informal Carers, such as family members) and professionals specialized on their needs. Moreover, the aim is to promote a capability – approach, a higher social inclusion and an improved quality of life for MH NEETs by providing the methodology and tools that will enhance career counselling. As a result educated and trained mental health professionals and career counsellors will help MH NEETs improve their skills, facilitate the development of the awareness of the context characteristics in which they live and foster the development of an active citizenship thus increasing the likelihood of developing an effective future plan and being integrated in the labour market or education.

The project also aims to help mental health professionals and career counsellors develop knowledge and a better understanding of MH NEETs special background and needs, as well as the importance of early intervention in terms of the target group's work and education integration. Practitioners that are better trained, are able to work effectively and provide specialized services to the target group, leading to a wider work and education integration.

The project aspires to provide tools for support to informal carers of young people with mental health problems (such as family members, friends etc). The project aims to the empowerment of informal carers by providing knowledge and developing skills that are extremely important to them, as these are the persons with whom MH NEETs spend most of their time daily. The work and education integration of their protected members depends a lot on their position towards this matter and when achieved, it can lead to a really improved quality of life for all.

ADDRESSING THE CHALLENGES

We aspire to promote inclusion and employability of MH NEETs by creating specialized tools and methodology that can be used by career counselors, mental health professionals, informal carers and MH NEETs. Work4Psy developed specialized methodology and tools for Career Counselling that addresses the specific needs of MH NEETs, with a great emphasis in early intervention during the first stages of the mental health problems. Work4Psy partners systematically mapped the training and counselling needs and deficiencies in regard to the most effective integration of MH NEETs in education and the labour market. Furthermore, they reviewed the existing methodology for Career Counselling

for NEETs and for people with mental health problems and developed a new methodology for Career Counselling that addresses the specific needs of MH NEETs.

All outcomes were produced using the Co-production model, which involved MH NEETs and their family members in the procedure as they are considered experts by experience, having important knowledge of their needs. Furthermore, the transnational cooperation at European level facilitated the exchange of know-how and good practices between experienced partners from different countries of South and Central Europe that was crucial in the development of a material that could have a great impact and improve Career Counselling Services for MH NEETs across Europe.

THE WORK4PSY PROJECT

The Work4Psy project's aim was to address the challenges described above by trying to enhance the work and education integration of MH NEETs through the creation of a specialised career counselling methodology and the education of the four main target groups involved in this procedure:

- (a) MH NEETs themselves,
- (b) Mental Health Professionals,
- (c) Career Counsellors,
- (d) Informal Carers (such as family members).

In order to reinforce the work integration and thus social inclusion of MH NEETs, Work4Psy partnership created a European Career Counselling MH NEETs Toolkit, a European MH NEETs Work and Education Integration Curriculum and an Open Learning Platform, remaining in line with one of the EU priorities for VET (2015-2020) which asks for "further strengthening of key competences in VET curricula and provision of more effective opportunities to acquire or develop those skills through C-VET". More specifically:

The first European Career Counselling MH NEETs Toolkit (ECCpsy-KIT)

The toolkit that was created, provides Mental Health Professionals, Career Counsellors, MH NEETs and their Informal Carers, local agencies and authorities and all other interested parties, with the necessary knowledge and Interactive Career Counselling tools, in order to enhance MH NEETs work and education integration. The ECCpsy-KIT offers information and guidelines in various thematics chosen to assist and support all interested parties and raise awareness. The tools and activities that are included in the toolkit are practical, easy to use and oriented to each target group. The ECC psy-KIT guides all interested parties through the work and education process of MH NEETs from the first stage of self-assessment to the final stage of on-going monitoring, aiming to achieve a higher number of MH NEETs in the labour market and education.

The European Work and Education Integration Curriculum for MH NEETs

The Curriculum provides the didactical framework of the Toolkit, including details in terms of each unit's objectives and learning outcomes, the content to be covered, the unit's structure, teaching and learning methods, didactic methods, the approximate workload, tips and advice on the use of activities of the Toolkit, how to apply resources (e.g. video clips, interactive career counselling tools), etc. The framework was developed on the basis of the outcomes of a comprehensive international literature review and an educational needs survey. The Curriculum consists of four units, one per Target Group, following the structure of the Toolkit.

An Open Learning Platform

An Open Learning Platform was created, based on the didactical framework of the Curriculum. It includes all the information and interactive career counselling tools of the Toolkit, as well as a variety of extra resources and material and it aims to become a digital environment where MH NEETs, Mental Health Professionals, Career Counsellors, Informal Carers and everyone interested will be able to find every information, material and resources needed regarding work and education integration of MH NEETs.

All the partners have been involved in the creation of the aforementioned materials and tools by cooperating, offering each their unique expertise and co-creating materials and tools. Furthermore, the project's partners utilised the Co-production model involving MH NEETs, their family members and MH professionals in every step of the procedure of creating materials and tools as they are considered experts of their own needs.

THE WORK4PSY TOOLKIT'S STRUCTURE

The European Career Counselling MH NEETs Toolkit (ECC psy-KIT) was developed on the basis of a comprehensive international literature review, taking into consideration each partners' expertise as well as the results of the focus groups that were implemented with all target groups. It will be used in accordance with the didactical framework provided by the European Work and Education Integration Curriculum for MH NEETs.

The innovation of the ECC psy-KIT is that it provides MH professionals, career counsellors, MH NEETs and their informal carers, local agencies and authorities with all the necessary Career Counselling tools to enhance MH NEETs work and education integration. All the material is organised in chapters and sub-chapters which include: (a) Introduction & focus; (b) main subject, (c) Bibliography/ References, and (d) links for additional resources & material were applicable. A short description of the chapters is presented below:

PART 1. – Career interventions for mental health service users in Europe

The chapter contains the career interventions concerning mental health users that have been or are still in place in all partners' countries. The chapter is organised in sub chapters and each partner

describes the career interventions for MH users in its country. All partners share and describe the legal reforms, guidelines, acts and laws that their states have in place in order to promote and facilitate work and education integration in MH users and how these are incorporated in the labour market and educational / training systems. The partners discuss the advantages and disadvantages of these reforms and interventions and how they affect work and education integration. Furthermore, each partner describes and discusses state and non-state interventions, career and training centers, clubs, self-help initiatives, workshops and good practices that offer support in each partner country. Beyond the description and discussion of these initiatives, interventions and reforms, the chapter aims to provide information and ideas about good practices that other countries may find useful to incorporate in their own systems.

PART 2. – The WORK4PSY career intervention model

Chapter 1 -Introducing the WORK4PSY model: A holistic approach for career counseling MH NEETs

The Work4Psy model for MH NEETs is based on the theoretical frameworks of social constructionism and narrative perspectives and borrows elements and characteristics from the Supported Employment framework, in particular the IPS model and PEPSAEE's model of work rehabilitation for MH users. The model emphasises early intervention, benefits counselling and collaboration with a multidisciplinary team of psychiatrists, psychologists and social workers. It focuses on meaning making and co – constructing a vocational self though commitment and active involvement both from the MH NEETs part and the career counsellor's part. Networking, collaborations and the active involvement of informal carers as well as their support, are significant elements of the proposed model.

Chapter 2. – Working (and networking) with the labour market

The chapter is addressed mainly to employers and provides a thorough guide about the actions employers and the labour market can undertake to enable young people with mental health conditions to get into vocational training and work. The chapter describes the specificities and significance of networking in the case of mental health young employees and discusses ways of support: support for the young person, support for colleagues and managers and financial support for the employer. The chapter also offers a guide on how to choose partners and groups for networking, how to achieve such partnerships and how to utilize and extend the networks created. It offers ideas on accessing existing networks and how to navigate in them.

Chapter 3. – Discrimination and stigma

The chapter focuses on discrimination and stigma on Mental Health people: what is it, how it affects M.H. people, their families and the society in general, how it can be avoided and what can be done to reverse the ramifications and change attitudes towards M.H. people . The concept of stigmatisation is explained as a phenomenon that uses four components to create this attitude: isolating the difference, attributing undesirable traits to labelled people, separating the group of people labelled, experienced loss of status and discrimination by labelled people. In the chapter these concepts are discussed and explained together with the specific stereotypes that follow M.H. people. The scale of the problem is presented as, according to WHO, one of the biggest challenges in the public space. Various statistics

are offered about the stigmatisation phenomenon that show that the way to fight stigma for M.H. people is still long. The chapter continues by presenting how attitudes can change the way M.H. people see themselves and how others see them by offering ideas and proposals based on building acceptance, understanding and changing the societal paradigm.

Chapter 4. – Empowering Mental Health service users

The chapter discusses the concept of empowerment of Mental Health young people in a socioeconomic and personal point of view. Firstly, it offers some terminology and a framework of the concept of empowerment. It goes on to explore ways M.H. NEETs can follow to acquire more power and control over their lives. The chapter starts by discussing how acquiring insight and information on the vocational world can help in taking informed decisions that are better suited to the person. It continues by exploring the concept of support, discussing ways of finding support and how these can benefit the person and empower it. Planning is then discussed as a way to facilitate the achievement of what is and feels as a big goal. A discussion on the power of networking follows, where a small definition is offered, the benefits of networking are presented and ideas of networking are offered. The chapter finishes by presenting the benefits of caring for the self, ideas on how this can be achieved and the power it offers.

Chapter 5. – Working with family and other informal carers

The chapter discusses the role that family and other informal carers play in M.H. NEETs work re-integration. The chapter starts by discussing the difficult and diverse role family and informal carers play in M.H. NEETs lives. It continues by presenting interventions family and informal carers can utilise to facilitate career development of M.H. NEETs and showing the benefits of these interventions in M.H. NEETs work integration. The challenges of getting families and informal carers committed towards M.H. NEETs work and education reintegration, are explored and ways to overcome them are presented. Ways to empower family members and informal carers in order to be able to offer support are suggested: communication, adapted support, teaching/counselling aids, volunteer and peer support, community work. Finally, a small guide is presented about how to approach family members and informal carers by offering details about three models: information – focused interventions, learning interventions and counselling / therapy.

PART 3. – Tools and activities

The chapter presents experiential activities and tools that can be utilised by all target groups. A set of tools and activities are offered to each of the target groups involved in the project: M.H. NEETs, M.H. professionals, Career counsellors and informal carers. These tools and activities can be utilised by the persons that belong to each target group as a self – help guide or they can be used by professionals in the process of career counselling. Each activity is organised in sub – chapters: (a) Activity refers to, where is it mentioned to whom this activity refers to, (b) Aim of the activity, where a description of the design and purpose of the activity is offered, (c) Theoretical framework, where the rationale and theoretical framework of the activity is presented, (d) Description, where detailed instructions of the activity are given, (e) Tips, where, in some activities, tips are offered as a guide on how to use the activity. All activities and tools are designed to aid in the process of overcoming specific challenges each of the target groups are facing in a creative and experiential manner.

ACTIVITIES AIMING AT: **MH NEETS**

1. WHAT DO YOU WANT TO DO?

The activity refers to MH NEETs

1.2. Aim of the activity

This exercise allows you to become aware of activities you like to undertake and whether they correspond with your predispositions and whether they positively affect your sense of meaning.

1.3. Theoretical framework

The hypothesis behind this activity assumes that the greatest probability of an individual undertaking a given activity (e.g. work) is when it meets three basic criteria, namely:

- it is adequate to the abilities and predispositions of a given person,
- it has similar characteristics to the activities that the individual already undertakes and likes,
- it satisfies a person's sense of meaning, so the individual has a subjective belief that undertaking this activity makes sense and is important.

1.4. Description

Instructions: Write as many answers as possible to the following questions on a piece of paper. Take your time, don't hurry. Also, don't hesitate to add something when you think of it later. You can keep this card, come back to it and add it.

Questions:

1. What makes sense to me? What do I get a sense of meaning and purpose from?
2. What satisfies me? What do I like to do?
3. What are my predispositions? What am I good at?

After writing down the answers to the above questions, find overlapping answers in each of the 3 areas (you can draw it in the form of 3 intersecting circles - set with a common part). The ones that appear in all three areas will give you the best of luck. Thanks to this activity, you will learn what your calling is in life and what activities would give you the most fun. It all starts with what I "want". Doing anything with such motivation helps to overcome all "can't", "should", "must" etc.

2. THE WHEEL OF COMPETENCES (MH NEETs VARIANT)

The activity refers to MH NEETs

2.1. Aim of the activity

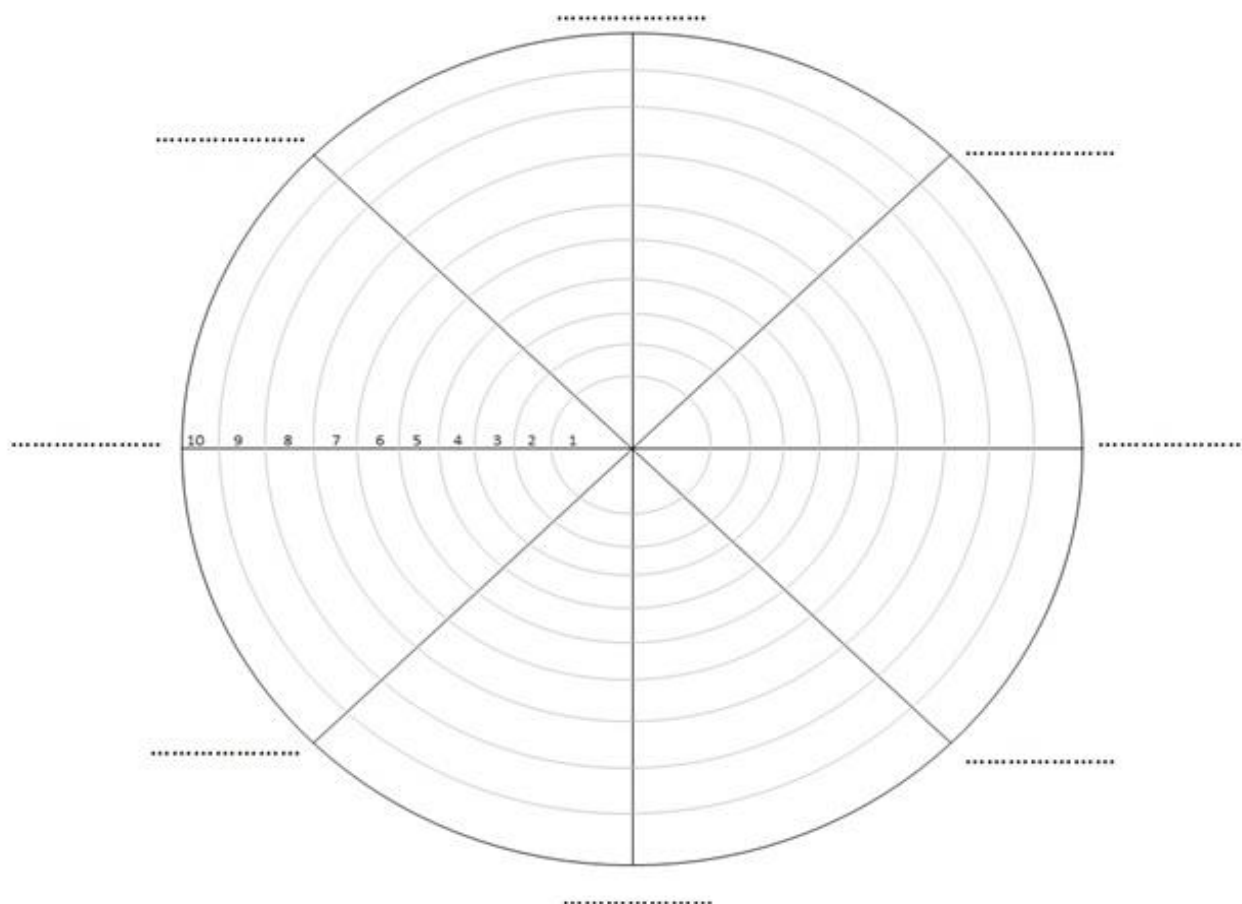
This activity is designed to strengthen your sense of competence by making you aware that you already have many of the subjectively important competencies that an "ideal employee" should have. Besides, you will see that those competencies that are still low in intensity can be trained. For this purpose, you will determine how you will develop them and plan activities aimed at their improvement.

2.2. Theoretical framework

This exercise allows the individual to assess their competencies and abilities and provides an opportunity to present them graphically. Moreover, it assumes that identifying competences subjectively important for a given person, and then realising that some of them this person already has, strengthens the sense of competence and agency of the individual, consequently increasing self-confidence and motivation to undertake a given activity (e.g. work). The second part of the exercise allows you to plan activities aimed at improving those competencies which are low on the intensity scale.

2.3. Description

Instructions: Draw a large circle on a piece of paper. Divide it in half, again in half, and then in two diagonals so that you get eight parts of the cake. Below is an overview drawing that you can use.



Source: smart-coaching.pl

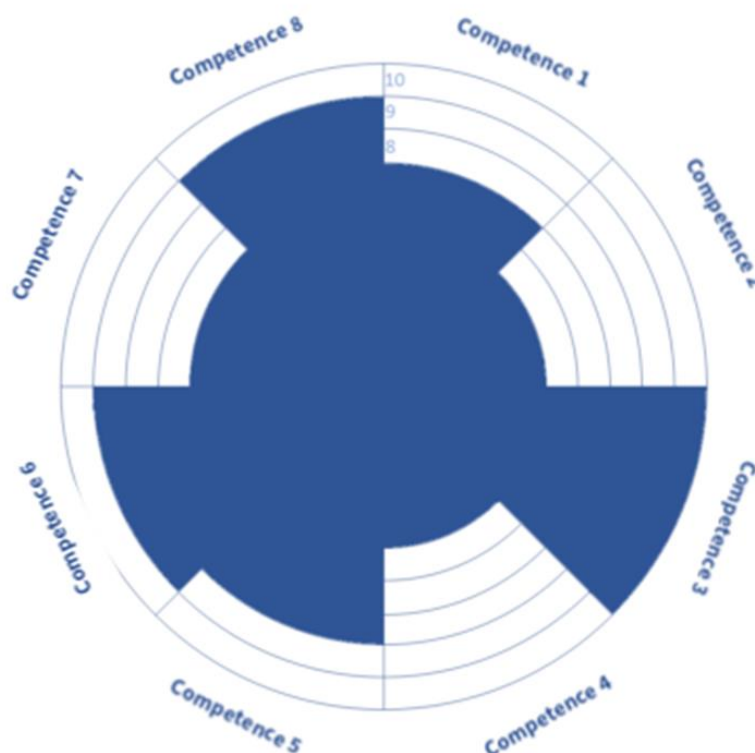
On the outside of the circle, enter the 8 most important characteristics of a competent employee.

Why eight?

These will be the eight pillars of your sense of competence.

In the beginning, it is enough. Then you can add more traits. The point is not to get discouraged. This exercise will show you how to achieve the highest possible result with the least amount of work.

Estimate to what extent the competences you have chosen are with you today (now, already). Then on a scale from 0 to 10 mark in the circle how much this feature already exists in you, how saturated it is. Now, today, for this moment. We assume that 0 is the very centre of the circle where the lines intersect. 10 is the outside circle. You evaluate each feature separately. Take time, think, don't hurry. Your circle, after assessing competences, may look like this:



Source: alezmiana.pl

Which of these eight characteristics could be your touchpoint?

Next, we're going to do something called the lever touchpoint. We will try to raise as many competencies as possible with very little effort. Maybe all of them, or at least a large part. In the past, the lever application point was used in many situations, e.g. for drawing water from a well. Instead of getting tired, people used so-called cranes and with one light push of a long lever, a large bucket full of water was quickly pulled out. We will do the same. Here is our "psychological crane" - the leverage point:

1. Now select the trait that has the lowest estimate

or

1. a trait that, if you work on it, will lift all or most of the others.

2. Highlight this feature.

What will you do to raise this competence?

Then, come up with at least five ways that you will be able to raise this specific competence that you have just selected. It is your ideas that will help you most in this situation. For example, if it is your self-esteem, think about what you can do to increase it. For example, you can:

- write down 50 of your positive features and consider whether you remember about them daily, especially in difficult situations?
- go on the workshop classes,
- start your psychotherapy,
- talk to professionals who do not have this problem. Ask how they do it, that they trust their competences and have professional self-confidence?

Think and write down your ideas. This is a key part of the exercise!

From these five ideas, choose one to apply today. Write it now. If you can't start applying this idea today, then put it in to do for tomorrow. If it turns out that your ideas are so complex that you cannot start implementing them today or tomorrow, please break them down into smaller parts, i.e. into so-called detailed projects. Actions that you can immediately take to implement this competence.

What else will you gain if you feel competent?

Now answer the following questions honestly:

- What else will this competence, which you have just chosen, give you, will it be a springboard for you?
- How will it affect your further career development plans?
- How will it affect your earnings?
- How will it affect your well-being?
- How will it affect those around you? What will they gain from this?
- What will others think of you?
- What will others say about you?
- How will this affect your personal life?
- How will this affect your health?

3. SELF-ESTEEM JOURNAL

The Activity refers to MH NEETs

3.1. Aim of the activity

This exercise aims to improve an individual's self-esteem by diverting attention from failure to success. Keeping a diary of your daily achievements builds up the habit of seeing them and also causes the individual to perceive more experiences and situations in terms of their own successes and achievements.

3.2. Theoretical framework

Research shows that people with lower self-esteem often tend to pay more attention to their failures than to successes they don't seem to notice. The following exercise is designed to develop the opposite habit, and therefore to focus more often on what we have achieved on a given day or week. In this way, our self-esteem, sense of competence and agency will increase and, as a result, our well-being will improve.

3.3. Description

The person is asked to keep a journal of their daily successes for a week. If he feels like it after the first week, he can continue doing so. Below there is a helpful form on which an individual can write down their successes.

Self-Esteem Journal

MON.	Something I did well today...	
	Today I had fun when...	
	I felt proud when...	
TUE.	Today I accomplished...	
	I had a positive experience with...	
	Something I did for someone...	
WED.	I felt good about myself when...	
	I was proud of someone else...	
	Today was interesting because...	
THUR.	I felt proud when...	
	A positive thing I witnessed...	
	Today I accomplished...	
FRI.	Something I did well today...	
	I had a positive experience with (a person, place, or thing)...	
	I was proud of someone when...	
SAT.	Today I had fun when...	
	Something I did for someone...	
	I felt good about myself when...	
SUN.	A positive thing I witnessed...	
	Today was interesting because...	
	I felt proud when...	

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4. A MESSAGE FROM A GUARDIAN ANGEL

The activity refers to: MH NEETs.

4.1. Aim of the activity:

The activity aims to assist the person to identify her/his strong points, skills, competence and qualities. According to Yvonne Dolan (2000) – the author of this exercise, it “(...) is helpful for reclaiming and bolstering your self-confidence and courage”

4.2. Theoretical Framework:

The activity is based on Solution-Focused Brief Therapy – it was developed by Steve de Shazer and Insoo Kim Berg and their colleagues beginning in the late 1970s in Milwaukee. SFBT is future-focused, goal-directed, and focuses on solutions rather than on the problems that brought clients to seek therapy¹. According to Luc Isebaert (2016) SFBT “(...) like much of family therapy, emerged from a climate of theoretical and practical scepticism and intense interest in the mechanisms of therapeutic change. There was a growing disillusionment with psychodynamic therapy, and out of this dissatisfaction emerged a desire to find new ways of doing therapy in a less time-consuming manner”. While Yvonne Dolan (2000) points out that “The questions asked in Solution-Focused Therapy are positively directed and in a goal-oriented stance. The intention is to allow a perspective shift by guiding clients in the direction of hope and optimism to lead them to a path of positive change. Results and progress come from focusing on the changes that need to be made for goal attainment and increased well-being”².

4.3. Description:

“Imagine that wise and compassionate guardian angel has been sitting on your shoulder since you were born. You have not been aware of this presence up until now because angels are

¹ <https://solutionfocused.net/what-is-solution-focused-therapy/>

² <https://positivepsychology.com/solution-focused-therapy-techniques-worksheets/>

weightless. The angel's sole purpose has been to recognize and observe all of your positive personality strengths and virtuous beliefs about the world. This is not an angel in charge of producing self-criticism or blame!"³.

"For the next fifteen minutes, imagine that the angel is now dictating you a list of your positive attributes through you. Writing down whatever comes to mind, make a list of what you think that angel would say"⁴.

The list

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Next, read the list out loud and try to answer the following question:

- How do you feel knowing you have so many positive qualities?
- "Which personality traits do you value most and want to continue to influence your approach to life?"⁵
- Which virtues or positive beliefs do you value most and want to continue to influence your approach to life?"⁶

³ Dolan Y., 2000, One Small Step. Moving Beyond Trauma and Therapy to a Life of Joy, iUniverse,

⁴ Ibid.

⁵ Ibid.

⁶ Ibid.

You can also come back to it from time to time to remind yourself of your good qualities. You can also ask the guardian angel after some time if he noticed any of your new traits and add them to the list.

5. POSITIVE NOTEBOOK

5.1. The activity refers to: MH NEETs

5.2. Aim of the activity: The activity aims to assist the person to identify her/his strong points, skills, competence and qualities. This can be the basis for building a sense of, which may further contribute to better achievement of academic and vocational goals.

5.3. Theoretical Framework: The activity is based on Solution-Focused Brief Therapy and especially on identifying a person's inner strengths and building self-confidence. The activity was developed by two Polish psychologists and psychotherapists – Anna Biskupska and Anna Mackiewicz. Originally, it was used as part of the program of social readaptation of convicts, and then it was used as part of work with young people, including those with mental disorders.

5.4. Description: Positive Notebook is a type of notebook in which you will write down a list of your daily duties (see attachment below). Remember one of your typical days. Analyze it from the morning when you get up until you go to sleep. For convenience, you can write the hours in which you perform these activities. Make a note of the list of responsibilities in the left column of Positive Notebook. Then, to each of the duties you perform, add a positive feature that makes you able to cope with this obligation.

Once you're done writing, read the positive qualities list once or twice carefully.

Now consider what are your feelings? What do you think about yourself now? If you come to any conclusion about you, write it down and remember it, it may be one of the most important and "true" conclusions about you.

If you want, you can also show and discuss the completed list with a friend, family member (informal carers) or your counsellors.

Attachment

List of duties that I perform during the day	What is the positive quality that I can cope with this duty?

6. BASIC CLEARING WITH SYMFOS METHODOLOGY

6.1. *The activity refers to*

MH NEETs (with the assistance of Career counsellors for MH NEETs)

6.2. *Aim of the activity*

Orientation intervention for 1 participant with peer support to find out their professional goal and do agreements for next steps to report efforts to the counsellor or to fulfil with the counsellor in individual sessions.

6.3. *Theoretical framework*

SymFoS is based on the original approach of Wilfried Schneider, therapist, creator of the methodology and Symbol work trainer (www.psychologische-symbolarbeit.de). Symbol work is seen as an additional language for people to express themselves. Traditional methods for education and career counselling often require advanced writing and reading skills of the clients. Therefore, these kinds of interventions can be ineffective with people who, for various reasons, have difficulties expressing in words their situation, their needs and their goals for the future. The SymFoS methodology has been developed and tested as a comprehensive and inclusive method for education and job counselling that overcomes barriers using a set of symbols.

SymfoS assumes a belief in a client's developmental capabilities and aims at reinforcing the client's personal strengths. Development is possible in any situation, and clients are capable of assuming responsibility for their own development.

Systemic-oriented counsellors assume the autonomy of the person seeking help and advice and view this person as a 'self-expert'. The unique experience of the individual is understood to be the subjective processing of his personal history and emotional and cognitive experiences of relationships. In the fields of therapy and counselling, systemic practice is oriented towards the concerns of the client (customer) and dispenses with pathologizing and setting normative goals. Within the framework of care-oriented, social-pedagogical

procedures, systemic practice links into the resources of the individual involved in order to achieve ethically justifiable conditions.

6.4. Description

One person participates as a client – the counsellor will do the counselling and three other participants participate as observers. Whilst the MH person prepares their scenario, the trainer will check with the observers their tasks.

The basic clearing model can be carried out on a one to one basis or in a group setting. The group setting can allow for extra interpretation and feedback from group members for the client. This can be enlightening for some clients and provide additional insight and support. Some clients however may find this uncomfortable and are more suited to the one to one interaction. The counsellor should use their knowledge and training to decide which setting suits a client's needs best.

Directions

Full description available at <https://cesie.org/media/symfos-basic-clearing-en.pdf>

- I. Starting point: Goal setting. The MH person discloses their goal to the counsellor, chooses a symbol for their goal and puts it on the centre of the page. In some cases, the counsellor and the MH person will have to clarify or reframe this aim, if it seems too unclear or implausible.
- II. Choosing symbols for each aspect. As the MH person works through the sheet they select symbols that they feel represent each of the areas on the page relevant to their own lives. In some cases, some areas are left without a symbol, which also gives certain information.
- III. Evaluate the situation in each area. To evaluate each area, the MH person is invited by the counsellor to assess their personal situation in each area. To make this visible, the MH person then chooses to lay pathways between each symbol and their goal; either solid ground, thick ice or thin ice.
- IV. Counselling session.

- 1) Presentation. The MH person presents the heading/topic of their presentation. They talk about what he has displayed. The MH person always states which symbol they are talking about. (e.g. "this hand stands for...").

The counsellor listens carefully to what is being told. They are aware of the client's presence. While the MH person is speaking, the counsellor observes their gestures, mimicry, posture, breathing, the pitch of her voice. Do they show emotions, do they touch a symbol, which one?

- 2) Factual questions. The counsellor asks factual questions. These questions only refer to the symbols, to "what is visible". No "why"- or "how come"- questions are asked. This is not about interpretation but understanding only. The client gives answers to the factual questions.
- 3) Perception. The counsellor addresses the MH person directly. They describe everything they have perceived and everything they have observed while the story was told. If someone detects emotions, they should be able to explain how they were perceived. (Mimicry, gestures, pitch of the voice etc.). The MH person listens attentively.
- 4) Interpretation. The counsellor talks about the MH person. They are thinking aloud, asking questions like *"What is the problem?", "What should be different?", "What would he/she want to solve, understand, do?", "Where could be difficulties? Where would there not be difficulties?"*. The client listens attentively and does not respond for now.
- 5) Agreement on actions. When the counsellor is finished "thinking aloud", the MH person talks about their thoughts regarding the considerations of the counsellor. What is true from their point of view? What is not? Where are their insecurities? Are there doubts? What do they like to hear? What do they not like to hear? What is especially important from the things said? Where would they like to begin? This phase leads into a discussion between MH person and counsellor about the support needed and further steps for the client to reach their goal. At the end, the MH person should be committed to agreed actions.

- V. Filling Action plan. The counsellor can address the action agreement through the action plan. Together, the MH person and counsellor can review what strengths or barriers each area presents in relation to their goal and create a complete action plan based on this.

The action plan allows the MH person and counsellor to correctly identify the level of intervention that is required after the basic clearing assessment. Relying on their professional training, counsellors can review the action plan and establish what category of support is required for the MH person moving forward.

Material required

- Materials for interventions: SymFoS Work pad for Basic Clearing (available at <https://cesie.org/media/symfos-basic-clearing-en.pdf>), symbols (Materials can be bought online via: <http://schneider-therapiekoffer.de/therapiekoffer.htm>)
- A template of the action plan (available at <https://cesie.org/media/symfos-basic-clearing-en.pdf>)
- Cushions, comfortable place on the floor

Tips

For the career counsellor:

- Assure that the counsellor has counselling experience and that is trained in the Symfos method.
- Common feature should unite the group: peer buddy systems allow a range of MH people from a variety of backgrounds and experiences to come together to support one another with their goals. Indeed, the success of many groups relies on this diversity as MH people learn about different experiences from their peers. However, in order for the group to have some sense of coherence there should be a common theme which the peers focus on (e.g. diagnosis, employment prospects). This allows the peers to have a focus while also creating safe boundaries of what areas they are expected to support one another with.

- Group contract: a group contract should be created within the peer buddy group to ensure confidentiality and respect. This also encourages the MH people to take responsibility for their own experience. This process should enable the MH people to engage and express what they want to achieve from the process and also put boundaries and safety structures in place. A practitioner should be on hand to ensure this is appropriate and manageable.

7. PERSONAL MANIFESTO

7.1.1. The activity refers to

MH NEETs (with assistance of Career counsellors for MH NEETs)

7.1.2. Aim of the activity

This Individual Activity will help participants to pin out their own core values and beliefs, the specific ideas and priorities they stand for, and how in general they plan to live their life serving the purposes they value as most important.

Through creating their own Personal Manifesto, participants will get a clear idea and written representation of where they are at the moment and where they would like to be and most importantly why. This acts as both a declaration of personal principles and a call to action.

This Activity aims to enhance participants: self – awareness, self – presentation, critical thinking, decision making.

7.1.3. Theoretical framework

A “manifesto” is a statement of ideas and intentions. A “Personal Manifesto” describes your own core values and beliefs, the specific ideas and priorities you stand for, and how you plan to live your life. A manifesto is a statement that points out where you are, where you would like to be, and why. This acts as both a declaration of personal principles and a call to action.

A Personal Manifesto can be a powerful tool and it can evoke self-awareness and a call for action. It can help a person to address a disconnect between the what and the why and can provoke real change. It helps people focus on their true personal and professional aspirations and break down the steps they need to take in order to achieve success.

7.1.4. Description

Variation 1

Material required

- A4 paper or a Personal Notebook
- Pen / Pencil

Implementation Procedure:

Ask the participants to write down their own Personal Manifesto. To get started you can guide them to ask themselves the following questions:

- *What are your strongest beliefs?*
- *What makes you passionate and what inspires you?*
- *How do you want to live your life?*
- *Which relationships you consider to be important?*

- *How do you want to define yourself?*
- *What words do you want to live by?*

Variation 2

Material required

- Cardboard
- Printed Activity Sheets
- Glue
- Scissors

Implementation Procedure

- I. Give a printed copy of each Activity Sheet to every participant: Traits – Activities – Values - Quotes
- II. Ask them to pick:
 - 10 Traits: that describe them more accurately
 - 7 Activities: they enjoy / are inspired from
 - Values: they want to live their life by
 - 3 Quotes: that mean something to them or it suits them
- III. Ask their participants to cut them out from the Activity Sheets and glue them to the Cardboard with that order.
- IV. At the end they will have a Board of their most important values, beliefs and what inspires them or motivates them. It will be a representation of how they want to live their life by and what are their true dreams and aspirations for the future

List of traits

LOVABLE	FREE-SPIRITED	PERKY	COOPERATIVE	ACTIVE
TOLERANT	POLITE	INTELLIGENT	SERIOUS	FAIR
DETERMINED	PLEASANT	RELIABLE	CONSISTENT	OPTIMISTIC
HUMOROUS	ATTENTIVE	THOUGHTFUL	TIDY	SOCIABLE
CREATIVE	HONEST	ORGANIZED	FORGIVING	HAPPY
ASSERTIVE	PRUDENT	DARING	STABLE	RESPONSIBLE
POPULAR	PRESENTABLE	PATIENT	RIGHTEOUS	
STRONG	CALM	FRIENDLY	HEALTHY	

List of activities

traveling	designing	voice lessons	fishing
walking	woodworking	driving	painting
camping	gardening	scuba diving	talking
reading	crafts	working out	researching
watching tv	landscaping	meditating	golfing
being outdoors	crafts	dancing	remodeling
dining out	debating	learning a new language	programming
racing cars	volunteering	attending seminars	sailing
cooking	decorating	running a business	sky diving
singing	shopping	keeping a journal	knitting
writing	teaching	entertaining guests	cleaning
sports	working on car	horseback riding	shopping
organizing	hiking	learning something new	making a film
seeing a movie	giving	going to spa	photography

List of traits

FREEDOM	WISDOM	SUCCESS	EQUILIBRIUM	POLITENESS
LOVE	PEACE	FUN	RELIABILITY	TEAMWORK
WEALTH	BEAUTY	FAITH	FRIENDSHIP	
RESPECT	HEALTH	CHARITY	EQUALITY	
JUSTICE	HONESTY	RELIGION	PATRIOTISM	

8. WHAT DO YOU BELIEVE ABOUT YOURSELF?

8.1.1. The activity refers to

MH NEETs

8.1.2. Aim of the activity

Many people lose their self-confidence when they forget about their hopes, aspirations, and abilities – or when they let others eclipse them with hurtful comments. There are many ways we can go about building our self-awareness. These tips only scratch the surface of what it means and the effect it can have on our life. Building up our self-awareness also builds our self-confidence. We gain clarity about who we are and what we believe in, and this can only help as we live our life to the fullest.

8.1.3. Theoretical framework

The concept self-confidence as commonly used is self-assurance in one's personal judgment, ability, power, etc. One increases self-confidence from experiences of having mastered particular activities. It is a positive belief that in the future one can generally accomplish what one wishes to do. Self-confidence is not the same as self-esteem, which is an evaluation of one's own worth, whereas self-confidence is more specifically trust in one's ability to achieve some goal, which one meta-analysis suggested is similar to generalization of self-efficacy. Confidence typically refers to general self-confidence. Psychologists have long noted that a person can possess self-confidence that he or she can complete a specific task (self-efficacy) (e.g. cook a good meal or write a good novel) even though they may lack general self-confidence, or conversely be self-confident though they lack the self-efficacy to achieve a particular task (e.g. write a novel). These two types of self-confidence are, however, correlated with each other, and for this reason can be easily conflated.

8.1.4. Description

1. Exercise “*Self-confidence Collage*”: Give the MH person a large piece of poster board and a stack of magazines to go through, make them browse their pages to find pictures that represent themselves, their talents, abilities, and aspirations. This will help them remember who they are, and what they are capable of – not what others say they are capable of.
2. Read “*How Baby Elephants Are Trained*”

HOW BABY ELEPHANTS ARE TRAINED

Elephants in captivity are trained, at an early age, not to roam. One leg of a baby elephant is tied with a rope to a wooden post planted in the ground. The rope confines the baby elephant to an area determined by the length of the rope. Initially the baby elephant tries to break free from the rope, but the rope is too strong. The baby elephant "learns" that it can't break the rope. When the elephant grows up and is strong, it could easily break the same rope. But because it "learned" that it couldn't break the rope when it was young, the adult elephant believes that it still can't break the rope, so it doesn't even try!

3. Discussion and debrief. Humans operate in a similar way. We learned something about ourselves at an early age and still believe it as an adult. Even though it may not be true, we operate as if it is. Fortunately, humans are born with the ability to make conscious choices - an important step in changing how you perceive yourself.
4. Complete the Worksheet “*What I Believe*”. Use the Worksheet “*What I Believe*” to uncover the beliefs MH people learned when they were young that continue to influence their self-esteem. Then ask them if these beliefs support or hinder them in increasing their self-esteem.

WHAT I BELIEVE WORKSHEET

Instructions: Print and Complete the *What I Believe Worksheet* to identify your beliefs. The next time you are feeling low self-esteem, unhappy or are judging yourself harshly read your *What I Believe Worksheet* and identify the beliefs that detract from positive self-esteem and then create a new belief to boost self-confidence. Then notice your attitude change.

1. Write the beliefs you learned about yourself when you were young from your:
 - a. Mother:
 - b. Father:
 - c. Siblings:
 - d. Friends:
 - e. Teachers:
 - f. Others:
 2. Which of these messages continue to dominate your thoughts today?
 3. Which messages support and which messages detract your confidence, happiness and satisfaction?
 4. Are these messages truth or simply a belief (a thought that has been thought so often that you believe it is truth)?
 5. Which messages do you want to change to improve your self-esteem?
 6. Write the new thoughts you choose to believe to support your positive self-esteem, confidence and happiness:
-

9. EMOTIONAL HIJACK

9.1.1. The activity refers to

MH NEETS

9.1.2. Aim of the activity

The emotional hijack has the following components: 1. Trigger – what causes the reaction 2. Reaction (spontaneous) 3. Strong emotion 4. Feeling of regret after that

9.1.3. Theoretical framework

Amygdala hijack is a term coined by Daniel Goleman in his 1996 book “*Emotional Intelligence: Why It Can Matter More Than IQ*”. Drawing on the work of Joseph E. LeDoux, Goleman uses the term to describe emotional responses from people which are immediate and overwhelming, and out of measure with the actual stimulus because it has triggered a much more significant emotional threat.

Emotional hijacking happens when our rational mind is overpowered by our emotions. It is easiest to recognize when we are in a state of fear or anger. Remember a time when you suddenly and uncontrollably felt angry at someone or something and started shouting for example. Why this happens and why it is hard but possible to control is explained by psychologists and neurobiologists. First of all, we must start by saying that this is completely normal and biologically encoded in our brains and bodies. From the times that people were still living in wild nature under constant danger, our bodies developed a mechanism to provide us with speed of action and thus save our lives. For example, when a person is in danger (which is perceived by our sensory organs, ex. eyes) the signal for the danger goes faster to the amygdala (part of our limbic system) than to the neocortex (our rational mind) and triggers the so famous “Fight or Flight” response. In this way it saves time, but also in order to do this it overrides our rational mind. It happens in an instant and our emotions seize power over our actions.

Although this could save our lives in a situation where we are facing a lion for example, in our nowadays lives this brings us more trouble than benefit. This response is triggered any time we feel threatened, which happens very often in social situations. For example, somebody says something offensive about us. We get emotionally hijacked and start shouting back. But does this reaction save our life now or cause us more trouble? Usually aggressive behaviour provokes more aggression on the other side and we go into a downward spiral of fighting. That is why it is worth learning to recognize and control this state.

9.1.4. Description

- Part 1: Individual task. Remember 2 situations when you were emotionally hijacked.

Situation 1, Please describe it:

- What caused the situation (trigger)?
- How did you react? How did other people react?
- What was the result?
- What could you have done in a different way?

Situation 2, Please describe it:

- What caused the situation (trigger)?
- How did you react? How did other people react?
- What was the result?
- What could you have done in a different way?

- Part 2: Group work. In your group, discuss the described situations.
 - What is common between them? What is the resemblance between the triggers (causes for them)?
 - What can you conclude from that?
 - What can be done in a different way in order to manage the situation better?

10. COMPETENCE ASSESSMENT CARDS FOR LOW SKILLED ADULTS

10.1.1. The activity refers to

MH NEETs (with the assistance of Career counsellors for MH NEETs)

10.1.2. Aim of the activity

These cards have been created to help career counsellors identify their clients' competences as a first step for a tailored, more empathic and efficient approach to recruiting and counselling. To meet this objective, two sets of cards have been developed, one for adults and one for guidance professionals. Through pictures, simple descriptions of the competences and realistic scenarios, the adult users will be supported in the self-assessment of their skills. On the other side, the set for guidance professionals, enriched with questions based on the STAR interview technique, will help them to save time and be as close as possible to reality when assessing their clients' competences.

10.1.3. Theoretical framework

This tool includes two different sets of cards. Each of them is composed by 5 different types of cards which are: 1. Personal skills 2. Social skills 3. Digital skills 4. Professional skills 5. Hobbies. These categories have been chosen in order to include the competences which are most often required for low-skilled people looking for a job, considering soft as well as hard skills. In order to help career counsellors discover their clients' hidden skills, cards with hobbies have also been included in order to connect activities that their clients do in their spare time and that may help develop competences that are useful for a job. Therefore, this tool has also been conceived to facilitate the assessment of skills acquired in a non-formal and informal setting. There are 53 competence cards and 12 hobby cards.

In addition to the cards, the Evidence Toolkit (a guide on how to use the Star interview technique) has been developed for career counsellors. This tool is meant to be used to help them use the cards with their clients. On the one side, it will support them in the assessment of the competences and on the other side, it will provide them with an opportunity to prepare

their clients to job interviews using behavioural questions that are more and more often used by employers during the recruitment process. A Skills Portfolio has also been produced for the adults in order to support them in their learning path and help them reinforce their future candidatures.

10.1.4. Description

Full description available at: <https://cesie.org/media/Inclusiveplus-carte-EN.pdf>

After reading the introduction and the Evidence Toolkit about the STAR technique, you should follow these steps:

1. Read carefully your client's CV.
2. Try to identify the most crucial skills for the type of jobs your client could apply for (according to your client's profile).
3. Based on the CV, select the most appropriate cards from the "Professional skills" category (choose up to 3 different competence cards). If you have a hard time identifying relevant "Professional skills" or if you want to discover especially skills developed in an informal setting, you may start with the "Hobbies" as an alternative.
4. Provide the client with the cards and clarify the approach and objectives. Explain how to use the cards.
5. Let the client read the elements of definition and clarify the terms if needed.
6. Ask the client to read the scenario and to tell you what he/she would do in this situation.
7. If the client answers using examples from his/her CV or past experiences, you do not need to use the behavioural questions on the card for Professionals. If not, ask these questions to further assess the client's skills.
8. After completing steps 5 to 7, feel free to skip to another competence card using the suggestion of connections on the cards for Professionals or continue with another competence identified in step 2.

9. At the end of the assessment, complete the *Skills Assessment and Evolution Table* (within the *Skills Portfolio*) together with your client.
10. Help your client complete the *Learning Table* (within the *Skills Portfolio*) in order identify activities that he/she can participate in in order to improve the competences identified as areas for improvement.

Material required (available at <https://cesie.org/media/Inclusiveplus-carte-EN.pdf>)

- CV of the client
- Cards
- Skills Assessment and Evolution Table
- Learning Table

10.1.5. Tips

For the career counsellor:

- Do not forget to take notes in order to complete the Skills Portfolio together with your client at the end of the session.
- Try to limit the number of cards used in one session (i.e. 10 cards, depending on the time available) in order to keep focused on the most important skills.

11. CAREER CIRCLES METHODOLOGY

11.1.1. The activity refers to

MH NEETS (with the assistance of Career counsellors for MH NEETs)

11.1.2. Aim of the activity

Supporting MH people in

- reflecting on their situation and skills,
- acquiring self-awareness and self-confidence,
- developing a positive mind-set for goal achievement,
- setting achievable goals for (short-term and long-term) future development.

11.1.3. Theoretical framework

The Career Circles methodology was created by Inova Consulting in 2001 (www.inovacircles.org). A “Circle” is made by 5 to 8 participants with a common background, situation or goal plus an experienced counsellor/facilitator meeting for 2 to 4 sessions of 3/4 hours each. Methodology is based on coaching through positive psychology ed exercises for self-analysis to focus on positive aspects of a situation. Sharing of experiences is a fundamental part of these sessions.

During the Circle sessions, 4 main activities will be done for people to develop their skills:

- Performance results: help learners to revisit past successes, complete self-assessments and exploration activities.
- Indirect learning: observe and learn from other learners in the group and learn from the facilitator.
- Emotional excitement: using relaxation techniques and adaptive autonomous dialogue, i.e. learning to recognize negative self-talk.
- Verbal persuasion/ encouragement: facilitators/other group members provide positive feedback and encouragement to students.

An important aspect of the Circle methodology is the presence of a group of peers which stimulate motivation and engagement in carrying out their strategies after each session.

11.1.4. Description

Directions

Full description available at: <http://www.inclusiveplus-project.eu/en/>

A Circle Session is made up of 5 phases:

- I. **Check in:** expression of their feelings regarding themselves, their situation or the (previous) session.
- II. **Description of the situations/challenges participants want to focus on in the session** (20 minutes per participant)
- III. **Explore the issue (Questions):** technique for self-analysis relying on making questions rather than on giving advices (because fault for failure would fall on the adviser): questions create thinking and ideas development. The focus of this technique is on taking responsibilities for choices and actions, not following others but being autonomous. (e.g. instead of saying *"Have you tried to...?"* / *"You should.."* / *"I used to.."*, make questions like *"What have you tried to...?"* / *"How can you...?"* / *"What do you do to...?"*).
- IV. **Setting of goals and strategies:** defining goals seems easy but people use to set great goals, thus losing self-confidence. Focusing on having S.M.A.R.T. (Specific – Measurable – Attainable – Relevant – Time-based) goals allows to have small and achievable goals which will foster self-esteem and stimulate participants to fight for their goals).
- V. **Summary of what has been learned and next steps.**

12. BUILDING MY CV

12.1.1. The activity refers to

MH NEETS (with the assistance of Career counsellors for MH NEETs)

12.1.2. Aim of the activity

- To stimulate the ability of self-description and comparison among group members;
- To stimulate the reconstruction of one's own experiences;
- To acquire greater awareness of oneself and one's own abilities;
- To be more reasoned about the functional tools used in the search for work;
- To promote knowledge and cohesion among group members;
- To strengthen self-esteem.

12.1.3. Description

The exercise is divided into two phases. In the first phase we work in groups, then we are divided into two sub-groups (2 participants joined by an operator). The second phase can also be carried out in a second meeting.

First phase: what is the curriculum vitae?

The activity is introduced through a brief explanation of what will be done, we then brainstorm what a curriculum vitae is. The conductor asks questions to verify the participants' knowledge, for example:

- *Do you know what a curriculum vitae is?*
- *Have any of you already written it?*
- *What does it say?*
- *What is the first important information to write on it?*

In case someone in the group already has a resume and has brought it with them, please contact us. The conductor uses their testimony as a support for the activity, stimulating the MH person to tell their experience. In this way it is possible to identify all the items that have to appear on a curriculum, involving all participants through their experiences.

Step two: I build my CV.

Participants copy, if possible, on a computer or on a piece of paper, the entries emerged from the work carried out in groups, which were previously transcribed on a blackboard. During the creation of their curriculum the participants are stimulated and supported by the practitioner through the formulation of exploratory questions or explanations on the rumours are unclear. At the end of the activity when everyone has written the curriculum the group meets and everyone in turn shows up, telling their experiences.

Material required

- Flipchart
- Pens / markers
- Computer or blank sheets

13. SELF-MONITORING CARD

13.1.1. The activity refers to

MH NEETS & Employers

13.1.2. Aim of the activity

This tool is managed autonomously by the MH person, who is periodically required to evaluate some of its behavioural aspects and relationship with the work environment. The form, composed of semi-structured questions, serves to support a self-awareness mechanism that goes through a balance sheet related to some key aspects of the relationship with the workplace.

13.1.3. Description

SELF-MONITORING CARD

First and last name:

Name of the place where I work:

1. Did I get to work on time? ☐ Yes ☐ No
2. Have I respected my working hours? ☐ Yes ☐ No
3. What did I do today?
4. Did I do all the things I had to do? ☐ Yes ☐ No
5. The work I did today was: ☐ easy ☐ difficult ☐ fun ☐ boring ☐ tiring interesting
6. Did I have any difficulties today? (e.g. with colleagues/superiors in carrying out a job) ☐
Yes ☐ No
7. If so, which ones?
8. I have solved these difficulties: ☐ Yes ☐ No
9. What did I like about my work today?
10. What did I not like today about my work?

Date ____ / ____ / ____

14. GOING CAMPING

14.1.1. The activity refers to

MH NEETS & Career counsellors for MH NEETs

14.1.2. Aim of the activity

The activity aims to assist the person to identify her/his strong points, skills and practical tools and how to make use of them while preparing and travelling towards an academic or vocational goal. The narrative structure of the activity helps the person free his /her mind, make associations more easily and offers experiential awareness.

14.1.3. Theoretical framework

The activity is based on Positive Psychology and especially on identifying and developing the person's inner strengths, so he/she can realize their potential and use their strengths to facilitate their growth. Also, it is based on the Adaptability Theory, in the sense that the person learns experientially how to be prepared to respond to an ever changing environment, by exploring and knowing both self and environment.

14.1.4. Description

Imagine you are going camping in a mountain in the summer. You have to prepare your luggage. What will you put inside your backpacks? Choose 5 items of the following list. Additionally choose 8 skills that you believe you possess and they will be useful in your journey. Underline the ones you choose.

Backpack 1:

- Tent and sleeping bag
- Tin cans of food
- Lamp
- Knife

- Small pot
- Plastic glasses and plates
- Plastic forks and spoons
- Mosquito repellent
- Torch

Backpack 2:

- | | |
|---------------------------------|--------------------|
| • Patience | • Persistence |
| • Physical stamina | • Integrity |
| • Happy mood | • Passion |
| • Creativity –
inventiveness | • Kindness |
| • Curiosity | • Leadership |
| • Love for learning | • Endurance |
| • Courage | • Prudence |
| • Resilience | • Self-control |
| • Humour | • Hope |
| | • Choose your own: |

You start your journey, you climb the mountain and spend most of your day walking in the blossomed countryside. A little before the sun starts to set, you decide to stop and set up camp.

Which of the items and skills from your backpacks will you use? Why?

During the night, while you sleep, you hear a strange noise. You wake up. You are afraid but decide to check around.

Which of the items and skills from your backpacks will you use? Why?

It turns out that the noise was nothing more than a small deer. What do you do?

What items of your backpacks do you use? Why?

Next morning you pack up your camp and continue your journey. You walk all day and at nightfall, you reach your destination. What place is it? What does it look like? Are there any people?

What other events could happen to you on your journey? Will they be happy or difficult ones or both? What items and skills from your backpacks will you use to deal with them?

Your decision to go camping looks a lot like your decision to seek a job/start an education. As in your camping journey, also in your new education or job you will need practical tools and personal skills to support you.

What could those practical tools be? How will they help you prepare for the education or job? How will they help you if you run into a difficult situation?

How will the personal skills you chose help you prepare for an education or job? How will they help you if you encounter a difficult situation? How will they help you enjoy your success when you reach your goal?

Are there any other personal skills or strengths you have that will support you in preparing and achieving an education or a job?

14.1.5. Tips

For the MH NEET:

Examples of practical tools that are needed could be: a degree from a University or college, a practical experience in a vocational apprenticeship, networking with family, friends, acquaintances, an on-line course, learning a foreign language etc. The person can think and choose the ones that apply to him/her and are most fitting with the field of work or education that he/she chooses.

For the career counsellor:

The career counsellor may guide the person through the activity in the first part and ask appropriate questions in the second part to assist the awareness and the association. Depending on the person, the professional may decide to provide more happenings and obstacles in the journey for a fuller experience. Also, he/she can assist the MH NEET person, in the association of the camping journey with the education or job, by giving examples of practical tools and personal skills and strengths.

15. EVALUATE CAREER OPTIONS IN PEER COUNSELLING

15.1 Activity refers to

A group of three to four young people with mental health condition who have been assigned to the same programme and thus know each other.

15.2 Aim of the activity

To support decision making in career choice with attention to individual and collective desires and needs.

15.3 Theoretical background

Career guidance for social justice (Hooley/Sultana 2016)⁷ – based on the insight that career choice is not only to be considered from the perspective of personal aims but also has social implications for others. From the perspective of the young people, especially if vulnerable, an approach that emphasises mental health already through group-based decision finding is suggested (to be followed by communitarian interventions, Ribeiro et al. 205: 201ff.). Ideally, in this way, individual choices can be validated by collective recognition.

15.4 Description

The activity is to be carried out at a point in time when the participants (ideally four, three is also possible) have identified a number of desirable and realistic career options. The participants know each other (normally by having been assigned to the same support programme for some time).

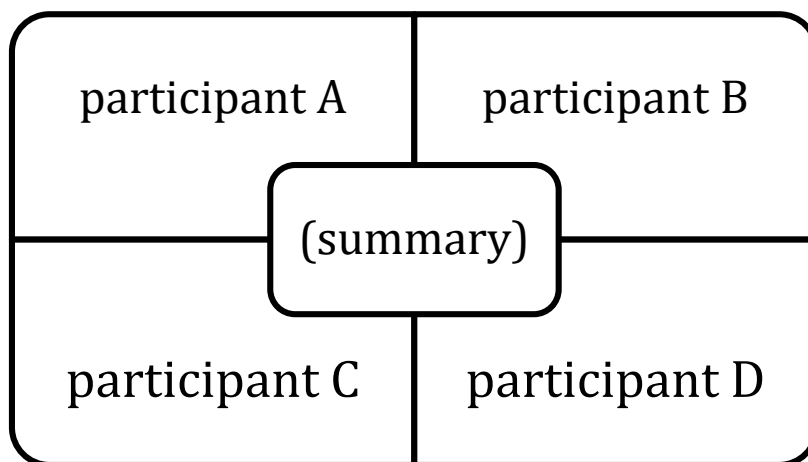
The activity is sequentialised and can be repeated as often as required.

One of the participants is assigned five to ten minutes to tell the group about one of her/his possible career choices. Information should include

⁷ Hooley, Tristram/Sultana, Ronald G. (2016): 'Career Guidance for Social Justice', in: *Journal of the National Institute for Career Education and Counselling*, No.36, pp.2-11.

- What the chosen occupation entails, essential activities of the job
- What the participant has to do in order to get into the chosen occupation
- Reasons why she/he has chosen the occupation as one possible option, with particular attention to the aspects: how will this improve my own life – and how will it help others

The participants then sit down round a square table to fill out a place mat.



Each participant answers the following questions in their assigned area of the mat:

- How does the career choice fit with the person?
- What kind of obstacles can be expected? What can be suggested to overcome them?
- How can the person expect to benefit individually from the chosen path?
- How can the person contribute to the common good by his or her choice?

The idea behind the last question is to discuss career choices as socially valuable and add to strengthen self-worth by counteracting the self-esteem contingency involved in career choice by adding a focus on contribution to others (as suggested by Crocker and Knight 2005: 202)⁸

⁸ 'We think that adopting goals that are good for others as well as for the self may lessen the costs of contingent self-esteem. For example, instead of focusing on achieving success to boost self-esteem, focusing on how success at one's goals can contribute to others may reduce the costs of contingent self-esteem for learning, relationships, autonomy, self-regulation, and mental and physical health.' (Crocker/Knight 2005: 202)

The participants have differently coloured pens so that original contribution and comments are attributable.

After being filled in, the place mat is turned 90 degrees and everyone reads the comments of their neighbour. This is repeated three times so everyone knows each other's comments.

Participants then engage in a fifteen minutes dialogue. The dialogue is supervised to make sure that everyone is heard and rules for respectful and constructive dialogues are followed.

They agree on central points, which they write into the place mat's centre box. The place mat is then left to the participant whose career choice was discussed.

The activity should be repeated at least four times so that each participant had her or his career choice reviewed at least once.

15.5 Sources

Crocker, Jennifer/Knight, Katherine M. (2005): 'Contingencies of Self-Worth', in: *Current Directions of Psychological Research*, Vol.14, no.4, pp.200-204

Freire, Paulo (1993): *Pedagogy of the Oppressed*, London: Penguin

Ribeiro, Marcelo Alfonso/da Coneição Coropos Uvaldo, Maria/Fonseca da Silva, Fabiano (2015): 'Some Contributions from Latin American Career Counselling for Dealing with Situations of Psychosocial Vulnerability', in: *International Journal for Educational and Vocational Guidance*, vol.15, pp.193-204.

ACTIVITIES AIMING AT: **INFORMAL CARERS** **AND/OR MH NEETS**

16. GRATITUDE JOURNAL

The activity refers to family members, Informal Carers and/or MH NEETs

16.1. Aim of the activity

Practising gratitude changes the way you think and perceives yourself and your daily life from lack to abundance. Being grateful makes it easier to thank and appreciate yourself and others for what you have and who you are. Failures and crises are more easily tolerated. By practising gratitude, you can learn to live happier, feel better, and be more optimistic about the future.

16.2. Theoretical framework

Research suggests that practising gratitude (e.g. writing gratitude journal regularly) forces oneself to pay attention to the positive things that happen during lifetime rather than negative ones. It helps especially people who have the natural tendency to direct their attention and memory more to the negative situations and people rather than positive. In consequence, those people experience more negative emotions and more symptoms of depression. Gratitude journal if conducted regularly has been shown to have a positive impact on one's happiness and well-being. It helps to reprogram one's thinking making one aware that positive things in life come and goes and we should be grateful for them rather than take them for granted. This way of thinking makes the person more attuned to the everyday sources of pleasure around us.

16.3. Description

This activity will take you approximately 15 minutes throughout the day. Ideally, you should practice them 3 times a week, but if you do not manage to save that much time, do it at least once a week. Research shows that completing the gratitude journal 3 times a week is most effective for our well-being, but increasing this frequency, such as filling it out daily, has the opposite effect.

There is no wrong way to complete your diary, but there are some general tips and instructions that we ask you to heed. Write down up to five things you feel grateful for. It's important to write them down physically - it's not that you just do it in your head. The things you write down may seem unimportant to you (e.g. a tasty lunch during the day), but they can also be very important (such as the birth of a baby). The purpose of this exercise is to remember those good moments, redirect and focus your attention on them and, consequently, to experience positive emotions more often and intensely. Here are some more tips:

1. Be specific - it is very important. "I am grateful that a friend came to visit me when I was sick" would be better than "I am grateful for my friend."
2. Quality, not quantity - Describing in detail one person or situation for which you are grateful will be better than just briefly listing many different situations.
3. Focusing on the people you are grateful for produces better results than describing situations or random events.
4. Try subtraction, not just addition. Consider what your life would be like without certain people or things, rather than just tallying up all the good stuff. Be grateful for the negative outcomes you avoided, escaped, prevented, or turned into something positive—try not to take that good fortune for granted.
5. Savour surprises. Try to record events that were unexpected or surprising, as these tend to elicit stronger levels of gratitude.
6. Write regularly. Whether you write every other day or once a week, commit to a regular time to journal, then honour that commitment. But...
7. Don't overdo it. Evidence suggests writing occasionally (1-3 times per week) is more beneficial than daily journaling. That might be because we adapt to positive events and can soon become numb to them—that's why it helps to savour surprises.

17. A LETTER FROM THE FUTURE

The activity refers to: MH NEETs and Informal Carers

17.1. Aim of the activity: This activity might lead to some important discoveries about who you were, what you loved most and how you could create more joy for yourself (Dolan 2000). Writing a letter from the future may also allow you to define a goal(s)/change(s) to be achieved. It may also allow you to reflect on the necessary steps to achieve it. The exercise can be carried out alone or with trusted informal carers.

17.2. Theoretical Framework: The activity is based on Solution-Focused Brief Therapy – it was developed by Steve de Shazer and Insoo Kim Berg and their colleagues beginning in the late 1970s in Milwaukee. SFBT is future-focused, goal-directed, and focuses on solutions rather than on the problems that brought clients to seek therapy⁹. According to Luc Isebaert (2016) SFBT “(...) like much of family therapy, emerged from a climate of theoretical and practical scepticism and intense interest in the mechanisms of therapeutic change. There was a growing disillusionment with psychodynamic therapy, and out of this dissatisfaction emerged a desire to find new ways of doing therapy in a less time-consuming manner”. While Yvonne Dolan (2000) points out that “The questions asked in Solution-Focused Therapy are positively directed and in a goal-oriented stance. The intention is to allow a perspective shift by guiding clients in the direction of hope and optimism to lead them to a path of positive change. Results and progress come from focusing on the changes that need to be made for goal attainment and increased well being”¹⁰.

17.3. Description: According to Yvonne Dolan (2000) “When we lose our ability to dream, we lose a lot of our potential for joy”. She also adds that imaginative process should not

⁹ <https://solutionfocused.net/what-is-solution-focused-therapy/>

¹⁰ <https://positivepsychology.com/solution-focused-therapy-techniques-worksheets/>

be relegated to writers, musicians and artists, because it is an inborn human ability that belongs to all of us! Thus...

“Pick a time in the future (five, ten, twenty years from now or any other length of time that is meaningful to you) Record the future date you have chosen at the head of your letter. Imagine that intervening years have passed and you are writing to a friend. Choose someone who you know and with whom you would like to continue to be friends in the future. Use the friend’s name in the salutation, as in Dear (friend’s name)

When writing the letter, imagine that you are living a joyous, healthy, satisfying life by the letter’s date. If there are problems with which you are now struggling, assume that they have either been resolved or that you have found a satisfying way to cope with them by the time of the letter.

Explain how you resolved problems or difficulties that once plagued you. Tell what you found to be most helpful from the vantage point of looking back on your current life from the future.

Describe in details how you spend your time in this imaginary future. What is a typical day? Where are you living? Describe your relationships, beliefs, reflections on the past, and speculations toward the more distant future.

This letter is not meant to be mailed. It is for you only. The purpose of dating the letter and writing it to a real person is to strengthen the psychological realism of the letter for you on both conscious and unconscious levels” [Dolan. However, if you want to show this letter and talk to your informal carer about it. Do it!

My letter from the future

Date:

Dear

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Next, read the letter and try to answer the following question:

- What did you learn about yourself?
- “What did you include in the letter that is not yet happening in your life?
- What do you imagine would be the result of this happening?
- What is the first step you might take toward your desired future?”¹¹

“Keep this letter in some safe and private place where you can refer to it as needed”¹².

18. MY WORLD TRIANGLE

18.1.1. The activity refers to

Families and informal carers of MH NEETS

18.1.2. Aim of the activity

This exercise help families and informal carers of MH persons to identify the support systems they have around them. Very often they feel isolated and cannot see the resources they have close to them. This may include other family members, friends, local organisations, peers or any support system which they can utilise in order to facilitate the return to education or employment of the MH person. Using the world triangle is a useful tool to get families and informal carers of MH persons to visualise who they have in their lives or indeed where they require the most support.

The “*My World Triangle*” also helps to generate conversation between the families and informal carers of MH persons and the Career counsellors for MH person and can be used in conjunction with other activities.

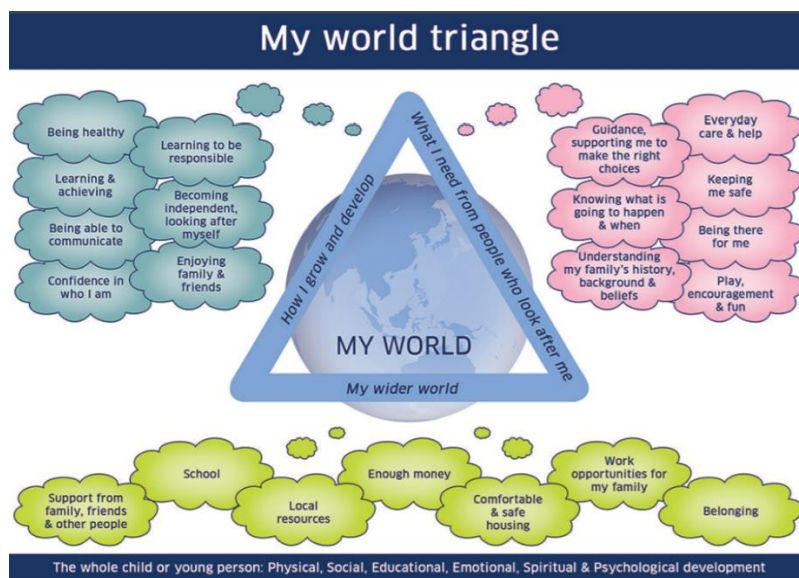
18.1.3. Theoretical framework

“*My World Triangle*” provides Career counsellors for MH person with a framework that considers every aspect of the families’ and informal carers’ lives. It identifies the strengths or wellbeing concerns in their world; this may include information about the specific needs of the MH person, physical/social/emotional/educational background of the members of their families or any issue affecting their everyday lives which affects their ability to provide care and support to the MH person.

“*My World Triangle*” considers the families’ or the informal carers’ needs and risks, as well as the positive features in their lives. In many cases, it may not be necessary to gather detailed information on all sides of the triangle if this is not proportionate to the problem. “*My World Triangle*” is an excellent tool that allows people to explore:

- How they cope with caring for the MH person.

- What they need from the people/organisations who already support them in caring for the MH person.
- What potential support systems are available to them – who they have in terms of friends, community, informal or structural support.



18.1.4. Description

Directions

- Introduce the “My World Triangle” to the family member or informal carer (explain what it is and why you are using it).
- Use the heading indicated on the map, it may not be necessary to cover them all.
 - *How I grow and develop* – it outlines factors in the MH person relating to various aspects of physical, cognitive, social and psychological development.
 - *What I need from the people who look after me* – it accounts for the critical influences of other people in the MH person’s life.
 - *My wider world* – the communities where the MH person lives can have a significant impact on the well-being of MH persons and their families and informal carers.
- Encourage them to use the images as a map to identify what barriers or concerns they may have in various areas indicated on the map.

- Encourage them to look at what immediate support they have around them and how they could utilise them if the MH person is to enter education or employment.
- At the end of the session gather the information they have given, reiterate and confirm that the information is correct.
- Use the information gathered to give them further help and support.

Materials required

- Quiet, clean room well-lit/ventilated room
- My World Triangle handout: <https://www.careandlearningalliance.co.uk/wp-content/uploads/2016/09/my-world-triangle.pdf>
- Table and chairs
- Pen and paper
- Recording devices are a useful tool just in case people have literacy issues. Consent should always be sought from them before recording.

18.1.5. Tips**For the practitioner:**

- Every practitioner should not feel they have to complete information in detail around the whole triangle. What is important is that they bear in mind that what is happening in one area may have a significant impact on another area.
- There may be overlap between the different dimensions. The important thing is that strengths and pressures are recorded. It is less important where they are recorded.

19. BALANCE TOOL

19.1.1. The activity refers to

Families and informal carers of MH NEETS

19.1.2. Aim of the activity

Put simply, the decisional balance tool helps people to weigh up the pros and cons of any decision that they are about to make. Whilst entering education or the labour market can be difficult for any person it may be particularly hard for MH persons. The tool is very much a weighing scale effect, this means that at the end family members or informal carers may be able to see the greater benefit of engaging the MH person with education or employment. Moreover, how it will benefit them in terms of independence and social, economic participation.

19.1.3. Theoretical framework

Decisional balance tools were first developed by the psychologists Irving Janis and Leon Mann in the mid-1970s. It is a method for representing the benefits and costs of different choices and has been used to facilitate decision-making (Foster & Neighbors, 2013). The practitioner can introduce this tool which will help the family members or informal carers to analyse their own thoughts and inner conflicts regarding education and/or employment for the MH person they care.

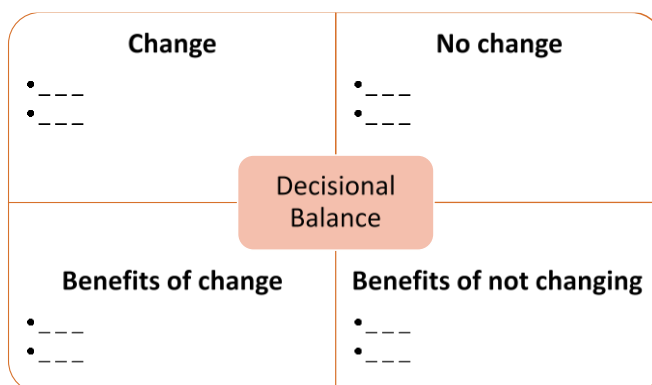
19.1.4. Description

Help the family member or informal carer to see how change will benefit them – it can be useful to provide case histories of MH people who are now in full time employment and doing well as a result of returning to education or employment.

Get them to write down the pros and cons of their current position. What benefit will it have on their and the MH person's lives?

Useful questions

- *Why did you come here today?*
- *Do you want a change in [the MH person]'s life?*
- *What do you want to change in [the MH person]'s life?*
- *Will it make a difference to your life?*
- *Do you think it will be worth the effort?*
- *Do you think there will be any problems as a result of change?*
- *Do you think it will make a difference to [the MH person]'s future?*



20. CREATE MY OWN SUPERHERO'S TEAM

20.1.1. The activity refers to

Informal carers & MH professionals for informal carers

20.1.2. Aim of the activity

The activity aims to assist the informal carers to identify and build their own support network. The narrative form of the activity assists them to open their mind to the possibilities and widen their view while the second part supports them to think creatively in finding support.

20.1.3. Theoretical framework

The activity is based on the understanding that informal carers are mainly alone in supporting they family member or friend in his/her mental health problems and are in need of support themselves.

20.1.4. Description

Imagine that you are a superhero! You arrive at a new city and you want to fight crime and help people. Of course you cannot do that alone. You need to build up your team. Think what kind of superheroes you would like on your side when you fight crime.

What kind of characteristics they would have? What is their special power? What do they look like? Remember when you are a superhero fighting crime, many different skills are important: strength (physical and mental), compassion, kindness, humility, resourcefulness etc

Superhero 1:

Superhero 2:

Superhero 3:

Sometimes being the carer of a person with mental illness feels like you are a superhero fighting crime in an unknown and dark city. You do not need to be alone in this. Even superheroes work in teams, you could also get the support you need.

Think of the characteristics you gave your fellow superheroes. Do you know any people in your larger family or friends' network that have similar characteristics? Could any of them form your support team?

Family member / friend 1:

Family member / friend 2:

Family member / friend 2:

Could some of these family members or friends be an organisation of fellow carers or self-support group? Could you research the internet for organisations like this near you? Or visit your nearest community center for information? Could they be a class (dance, pilates, etc) that you do for yourself and offers you relief?

20.1.5. Tips

For the informal carer:

The activity can be accompanied by a list of skills and strengths, to help the person identify and acknowledge characteristics that his/her superheroes possess and associate them with the real people of organisations in the second part of the activity.

For the MH professional:

The professional can provide a list of characteristics and strengths to assist the process. In the second part of the activity, he/she can ask questions to assist the association and provide ideas and ways to search for organisations or other activities that provide support to the informal carer.

21. MAKING YOUR DECISION: WHAT ARE YOUR CRITERIA? **DEFINE YOUR SOLUTION-SPACE!**

21.1 The activity refers to

MH NEETs, their informal carers and career counsellors

21.2 Aim of the activity

The aim is to help young people to find out which criteria are important for them in deciding on a career, as well as identifying constraints, so they can better prepare and concretize their career choice. The method also serves to foster broader capabilities for reflection, supporting the development of independent problem-solving and decision-making strategies.

21.3 Theoretical framework

Career decisions cannot be made on a purely rational basis: 'The decision becomes problematic under conditions of imperfect information about actually occurring situations in the environment and, accordingly, the outcomes of the decision' (Kirsch 2013, p. 40)¹³. The subjective context (e. g. workplace experiences) 'shapes [...] the solution space in which the problem solver searches for solutions to the problem' (ibid., p. 216).¹⁴ Reasons for poorly structured decisions are, among others, inadequate problem solving methods and incomplete information (ibid.). The method briefly outlined here offers an alternative approach: Decisions are not to be based on information that is as perfect as possible, but found by the application of a limited number of relevant criteria (e.g. "What prerequisites do I meet?", "What is important to me?") within a concretised solution space ("Which of the available solutions fits me best?") (Ertelt & Schulz, 2019). 'The solution space of a decision problem is defined by the decision variables' – i.e. the premises – 'and their attributes. The variations developed to solve

¹³ 'Problematisch wird die Entscheidung bei unvollkommenen Informationen über die tatsächlich eintretenden Umweltsituationen bzw. über die Entscheidungsergebnisse.'

¹⁴ 'Dieser subjektive Kontext prägt gleichzeitig den „Lösungsraum“, in dem der Problemlöser nach Lösungen des Problems sucht.'

the problem should cover this solution space as well as possible' (Grüning & Kühn 2013, p. 259).¹⁵

21.4 Description

Directions

To support a decision in the problem-solving process of a client, the counsellor queries the client to identify which premises/criteria and constraints the client can already formulate and which, if any, can still be discovered. This is achieved by proceeding as follows:

1. The client describes the decision s/he needs to make, e.g. the choice of an apprenticeship or vocational training course.
2. The client is asked to reflect on how s/he has been making decisions in the past. Are there particular problem-solving strategies that have proved successful? If so: Can this already existing approach to decision making be developed further to help with the current problem?
3. Criteria are collected that narrow down the possible options. Criteria on the one hand refer to *facts*, e.g. skills and competences, levels of performance, health status, etc. On the other hand they refer to *values*, such as wishes, preferences, social expectations etc.
4. The collected criteria and premises should then be noted down on a A3 sheet of paper around a field in the middle of the sheet, which represents the "solution space" to be concretised.
5. Once the criteria and constraints are defined, possible solutions can be played out to see if (and how well) they fit into this solution space.

¹⁵ 'Der Lösungsraum eines Entscheidungsproblems wird durch die Entscheidungsvariablen und ihre Ausprägungen definiert. Die zur Problemlösung erarbeiteten Varianten sollten diesen Lösungsraum möglichst gut abstecken.'

Materials required

- - Paper
- - Pencil

Sources

Ertelt, B. J., & Schulz, W. E. (2019). Das integrative Modell von Ertelt und Schulz. In Handbuch Beratungskompetenz (S. 199-266). Wiesbaden Springer-Gabler.

Grünig, R., & Kühn, R. (2013). Entscheidungsverfahren für komplexe Probleme: Ein heuristischer Ansatz (4. Aufl.). Berlin, Heidelberg: Springer Gabler.
<http://doi.org/10.1007/978-3-642-31460-5>

Kirsch, W. (2013). Einführung in die Theorie der Entscheidungsprozesse. Wiesbaden: Springer-Verlag.

22. COLLECTING AND EVALUATING INFORMATION FROM THE INTERNET

22.1 The activity refers to

MH NEETs, their informal carers and career counsellors

22.2 Aim of the activity

The goal is to provide guidance and advice on how to conduct targeted and critical research on the internet.

22.3 Theoretical framework:

Theoretical anchors are aspects of cognitive information processing theory (CIP) and informed decision-making (Peterson et al 1996; Ertelt & Schulz, 2019). From a career guidance perspective, the ability to search for and to evaluate information is a basic career management skill (e.g. Sultana, 2012: 228-230). Against the background of continually growing supply of information available through the World Wide Web, it is important to pay attention to theoretical aspects of the evaluation of validity and relevance of such information as well as to avoid information overload (Ertelt & Schulz, 2019).

22.4 Description

Aim

Young people with health restrictions often depend on experts and advisors from various agencies and authorities in their search for training and employment. Developing their own point of view based on their own research can foster young people's ability - in cooperation with professional counsellors - to deal with their issues and problems in a self-determined and mature way. Gaining agency and self-determination is an important aspect of growing up, strengthening young people's locus of control (Rotter 1966) and self-efficacy (Bandura 1978). Others' expertise can thereby be supplemented with their own knowledge and abilities, which

in the long term also contributes to increasing their resources and to strengthening their maturity.

Procedure

- Discussion of criteria and “checkpoints” for good online research
- Familiarisation with evaluation criteria for websites/search results
- Hints and suggestions for target-group specific search terms and for available online sources supporting career choice for young people with chronic illnesses or disabilities.

22.5 Resources required

- A competent counsellor to advise on criteria and checkpoints
- PC, laptop or tablet
- Internet access
- Access to portals with vocational information
- List of sources for critical use of information resources

Sources:

Bandura, A., (1978). Self-efficacy: Toward a unifying theory of behavioral change. *Advances in Behaviour Research and Therapy* 1: 4, 139-161

Ertelt, B. J., & Schulz, W. E. (2019b). Das integrative Modell von Ertelt und Schulz. In *Handbuch Beratungskompetenz* (S. 199-266). Wiesbaden Springer-Gabler.

Peterson, G., Sampson, J., Reardon, R., & Lenz, J. (1996). A cognitive information processing approach. In D. Brown & L. Brooks (Eds.), *Career choice and development* (3rd ed., pp. 423-475). San Francisco: Jossey-Bass.

Rotter, J. B. (1966). Generalized expectancies for internal versus external control of reinforcement. *Psychological Monographs* 80: 1, 1-28

Sultana, R. G. (2012). Learning career management skills in Europe: a critical review. *Journal of Education and Work* 25: 2, 225-248.

Internet Resources (to be adapted to national/regional conditions)

Critical Thinking and the Internet: Skills for a New Era

- <https://www.globalcognition.org/critical-thinking-and-the-internet/> (Access 30.11.2020)
- Seven Ways to Find What You Want on the Internet. Gathering What You Need, Discarding What You Don't
- <https://www.mindtools.com/pages/article/internet-searching.htm> (Access 30.11.2020)
- Bundeszentrale für politische Bildung. Internetrecherche.
- <https://www.bpb.de/lernen/grafstat/partizipation-vor-ort/155244/internetrecherche#:~:text=Die%20Recherche%20im%20Internet%20geh%C3%B6rt,Sch%C3%BClerinnen%20und%20Sch%C3%BCler%20ihre%20Computerkenntnisse.> (Access 30.11.2020)
- Alles über Suchmaschinen und das Finden von Informationen im Internet www.suchfibel.de (Access 30.11.2020)

23. WHO SUPPORTS YOU IN YOUR NETWORK?

23.1 The activity refers to

- MH NEETs, their informal carers and career counsellors

23.2 Aim of the activity:

The method helps young people to better understand their network and to identify people within their network who can act as supporters and/or advocates for them. Such help can, for instance, consist in practical support dealing with authorities or support in important conversations with professional services. Supporters/advocates can be people from their personal environment, or they can be people in professional, work or educational contexts. They may render support with specific problems and questions or offer their assistance over a longer period of time, maybe also covering a broader range of issues.

▪

23.3 Theoretical framework:

- The idea of advocacy and social system intervention in the context of vocational guidance is described, for example, in the standards of the NICE Network (2016). In the method presented here, a simplified network analysis (Bundesagentur für Arbeit 2013, p. 192) is used to identify potential individuals.

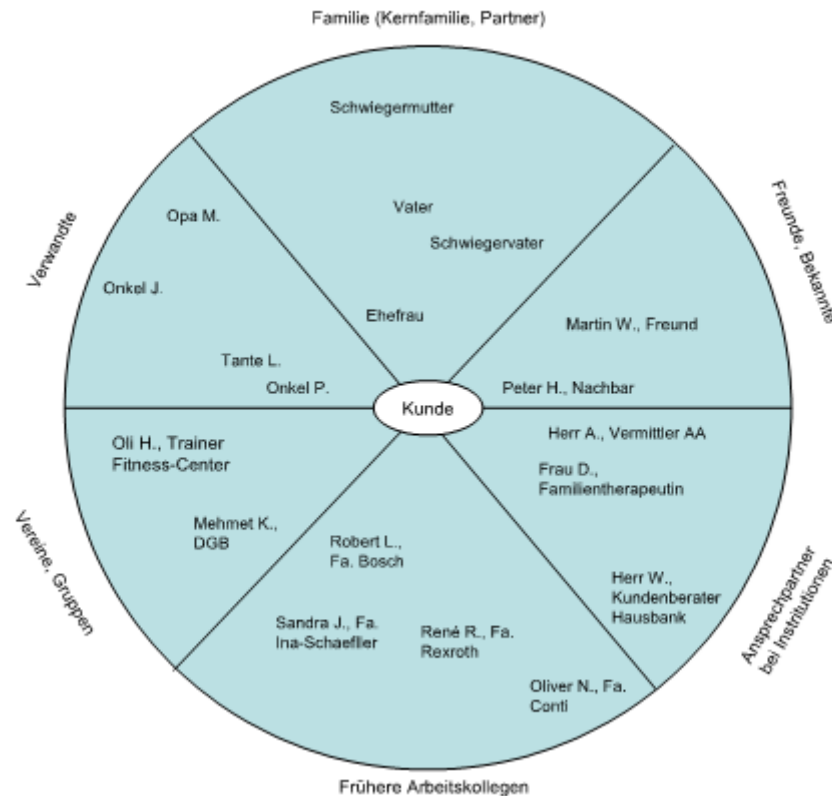
▪

23.4 Description

- The method can be applied by the young person independently, or together with an informal carer or a career counsellor.
- With the aim of mapping one's own network and identifying possible support from within it, a pie chart is drawn. Each segment of the pie symbolises a sphere of life in which the young person knows people, such as for example family and relations,

friends and acquaintances, associations and clubs, the workplace, school, institutions and authorities, and healthcare. The young person's name is placed at the centre of the circle. The network is then analysed in its relevance for the young person's current needs in the following three steps:

1. **Mapping:** The names of people who currently do or in future may support the young person are written in the appropriate slices. This affords the opportunity to reflect about what relationship people in different slices of the pie have to the young person.
2. **Matching:** The most pressing problems are identified and the chart is used to think about who of the persons named can be helpful in finding solutions. Persons are matched to problems they can help with. This affords the opportunity to think about what their connections, resources and competencies are and how they relate to the problem to be solved.
3. **Planning:** Once identified as potential support, the question is posed how these people can be best approached for help and what their specific contribution could be. How can their connections, resources and competencies be deployed? This necessitates considerations on what their specific reasons to lend their help could be and how this relates to how they can be recruited into one's network of support.



- **Diagram:** Example of a network map with actual and potential contacts (Bundesagentur für Arbeit, 2013, S. 199) – in the central oval we have the client, the segments are titled “family”, “friends and acquaintances”, “contacts in government agencies and other institutions”, “former work colleagues”, “clubs and associations”, and “relatives”

Material required

- Paper
- Pencil

Source:

- NICE (2016). *European Competence Standards for the Academic Training of Career Practitioners*. NICE Handbook Volume 2. Opladen: Barbara Budrich.
- Straus, F. (2007). Netzwerk und Beratung. In F. Nestmann et al. (Hg.) (2007): *Handbuch der Beratung*, Band 1: Tübingen: dgvt.
- Bundesagentur für Arbeit (2013). *BeKo - gut Beraten. Methoden und Techniken*. Nürnberg: Bundesagentur für Arbeit.

24. DOMINOES

24.1 Activity refers to

MH NEETs, their informal carers and MH professionals

24.2 Aim of the activity:

For mixed groups to explore ways of working together on a shared goal, assigning and re-arranging differentiated task-roles in a discursive process. Participants will have an opportunity to reflect on what kind of roles they tend to take, the way they take influence in decision-making processes (or refrain from doing so).

24.3 Theoretical framework:

This activity fits into many constructivist pedagogical frameworks – it can also be used in the sense of Critical Pedagogy. In order to achieve a shared aim in a task where the mental health professional will not immediately have a head start due to their educational background, processes and structures can be discussed and decided on an equal footing. It is designed to develop trust and critical thinking in the process of dialogical cooperation (Freire 1991:64f.).

24.4 Description

Aim

The group (of at least four and up to seven members) is told about the following task:

You have two hours to arrange two hundred dominoes in a straight line. Simultaneously tip over the dominoes at the opposing ends so that two waves of falling dominoes move towards each other. The aim is to arrange the dominoes in such a way that the two waves meet exactly in the middle.

Before time starts, the group is allowed questions about the nature of the task. They will also receive the following suggestion to structure their work

Procedure

The following procedure is suggested to the group:

- Do not start right away. It is advisable to have five minutes for single members to think about the task on their own.
- Discuss the individual suggestions.
- Make a plan
- Assign roles
- Try out – fail – learn from your mistakes: rewrite your plan, reassign roles (praxis as unity of reflection and action, Freire 1993: 60)

All decisions must be understood and agreed by all members. Especially carers and professionals will actively refrain from taking over in a directive way (if necessary, they should be briefed about this beforehand)

In order to make sure the task is challenging enough – or feasible at all – the supervisor is allowed to intervene. If the group is too fast and has a result after half an hour already, the extra task of rising frequency can be added (i.e. the waves have to accelerate as they move towards the centre). If the group is struggling one or two useful hints can be given (e.g. use an individual domino to measure/equalise the distance between the dominoes, or when building up leave gaps to minimise damage in case one of the dominoes falls over prematurely...)

The activity is to be discussed after completion (reflection on roles taken, on what they have learned from working together etc.)

24.5 Material required

- A set of 200 dominoes
- A2 paper / flipchart / pens / rulers
- Measuring tape / yard stick
- Non-transparent adhesive tape

25. WHERE AM I: CHECK-LISTING MY PROGRESS

25.1 Activity refers to

MH NEETs and informal carers

25.2 Aim of the activity

The aim of this activity is to locate one's progress in the process of vocational rehabilitation, identify next steps to be taken and catch up on actions that should have completed in the past. Also, the activity is designed to give the young person and their carers a sense of being in a process that is a) long term and b) manageable nonetheless.

25.3 Theoretical background

According to the theory of career construction, in an increasingly flexible and unpredictable labour market with fewer long-term career paths, one is to take an approach to the 'self as a project', continuously adapting to fast changing circumstances (Savickas 2013). If this is true for careers in general, it is so *a fortiori* for career choices and planning where regular paths are disrupted by chronic illness and/or disability, which requires flexible and person-centred planning (Marrone et al. 1997)

Specifically, this approach is informed the Cologne Toolkit (*Kölner Instrumentarium*) (Haerlin/Plöchl 2018), which is designed for the German institutional environment (also see Toolkit chapter 2.3.). Here it is adjusted to provide a checklist that can be adapted to different nationally specific conditions.

25.4 Description

The young person, either alone or with an informal carer, goes through the following list, ticking off items they are confident about having dealt with in a satisfactory manner. For those items where there are questions as to whether there is a need for action, the young person makes a list with questions to be asked and actions to be taken. The questions also are to be understood as actions, namely: find out who could advise on this item and get their view!

Items in preparation of vocational rehabilitation:

- *Orientation: Am I clear about my goals in life and what kind of career would be most likely to match my talents? Do I know about options for supported pathways into vocational training and employment?*
- *Resilience: What workload is right for me? How long and how much is too much? Has this been assessed? What can be done to strengthen my ability to deal with stress and who can help me with this?*
- *Basic work skills: Do I possess the required capabilities that are necessary to enter a course of training or an employment? If not: How can they be built up and who can help me with that?*
- *Guidance and counselling: Have I received professional support in assessing my situation, needs and opportunities?*

Items during vocational rehabilitation

- *Planning: Do I have a clear idea about what the presumed outcome of the rehabilitation process is going to be and what the steps towards this outcome are?*
- *Preparation: Am I prepared for my next steps into training or employment? Do I know what to expect? Do I know what I need? Have my needs been addressed?*
- *Training: Is the training adequate and manageable with a view of my career aspirations, my current level of resilience, my capabilities etc.? Can I keep up? Do I have the support I need?*
- *Career decision: Do I have a clear idea about what kind of job/position will my training lead to? Do I know the labour market for me?*

Entering employment

- *Placement: Do I have enough information about open positions that are suitable for me? Do I have competent and professional support in my search? Do I have the skills I need to apply successfully and perform well in job interviews? Can someone help me with these (e.g. a job coach)*
- *Onboarding: How do I arrive in my new position?*

- *Stabilisation: Is there a plan to review my situation in regular intervals? Who is my trusted contact at the workplace? Do I know who to turn to for support if things go wrong?*

It is not always necessary to have completed all steps. But if you find that some of them are lacking it will make sense to discuss them with someone supporting you and reflect on whether there remains something to be done.

Sources

- Haerlin, C., Plößl, I. 2018. *Berufliche Beratung Psychisch Kranker*. Köln: Psychiatrie-Verlag.
- Marrone, J, Hoff, D., Helm, D. T. 1997. Person-centered Planning for the Millennium: We're Old Enough to Remember when PCP Was Just a Drug, *Journal of Vocational Rehabilitation* 8, 1: 285-297
- Savickas, M. L. 2013. Career Construction Theory and Practice, in: Brown, S. D., Lent, R. W. (eds): *Career Development and Counseling: Putting Theory and Research to Work*, Hoboken, NJ, 147-183

ACTIVITIES AIMING AT:
MENTAL HEALTH PROFESSIONALS
AND/OR CAREER COUNSELLORS

26. THE WHEEL OF COMPETENCES (MH PRO & CAREER COUNSELLORS VARIANT)

The **activity refers to** MH Professionals and/or Career Counsellors

3.1. Aim of the activity

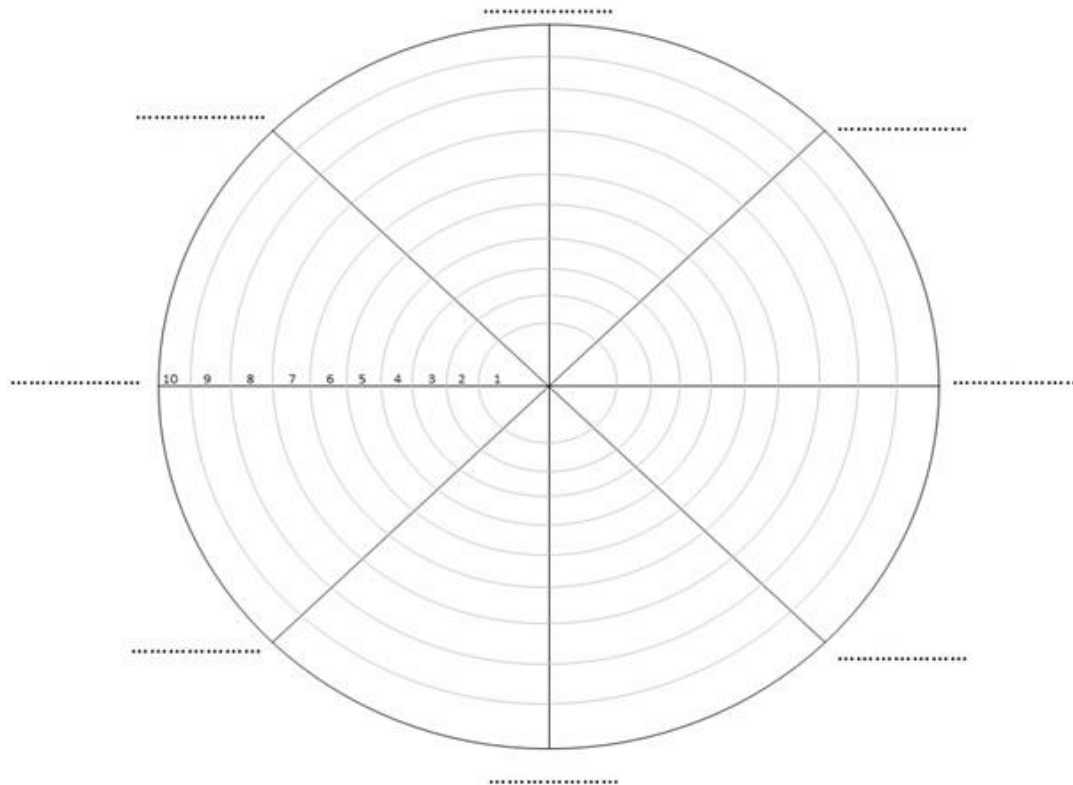
This activity is designed to strengthen your sense of competence by making you aware that you already have many of the subjectively important to you competencies that an "ideal professional" should have. Besides, you will see that those competencies that are still low in intensity can be trained. For this purpose, you will determine how you will develop them and plan activities aimed at their improvement so that you are able to help your clients the best you can.

3.2. Theoretical framework

This exercise allows the individual to assess their competences and abilities and provides an opportunity to present them graphically. Moreover, it assumes that identifying competences subjectively important for a given person, and then realising that some of them this person already has, strengthens the sense of competence and agency of the individual, consequently increasing self-confidence and motivation. The second part of the exercise allows you to plan activities aimed at improving those competencies which are low on the intensity scale.

3.3. Description

Instructions: Draw a large circle on a piece of paper. Divide it in half, again in half, and then in two diagonals so that you get eight parts of the cake. Below is an overview drawing that you can use.



Source: *smart-coaching.pl*

On the outside of the circle, enter the 8 most important characteristics of a competent MH professional.

Why eight?

These will be the eight pillars of your sense of competence. In the beginning, it is enough. Then you can add more traits. The point is not to get discouraged. This exercise will show you how to achieve the highest possible result with the least amount of work.

Estimate to what extent the competences you have chosen are with you today (now, already). Then on a scale from 0 to 10 mark in the circle how much this feature already exists in you, how saturated it is. Now, today, for this moment. We assume that 0 is the very centre of the circle where the lines intersect. 10 is the outside circle. Evaluate each feature separately. Take time, think, don't hurry. Your circle, after assessing competences, may look like this:



Source: alezmiana.pl

Which of these eight characteristics could be your touchpoint?

Next, we're going to do something called the lever touchpoint. We will try to raise as many competencies as possible with very little effort. Maybe all of them, or at least a large part. In the past, the lever application point was used in many situations, e.g. for drawing water from a well. Instead of getting tired, people used so-called cranes and with one light push of a long lever, a large bucket full of water was quickly pulled out. We will do the same. Here is our "psychological crane" - the leverage point:

1. Now select the trait that has the lowest estimate

or

1. a trait that, if you work on it, will lift all or most of the others.

2. Highlight this feature.

What will you do to raise this competence?

Then, come up with at least five ways that you will be able to raise this specific competence that you have just selected. It is your ideas that will help you most in this situation. For example, if it is your self-esteem, think about what you can do to increase it. For example, you can:

- write down 50 of your positive features and consider whether you remember about them daily, especially in difficult situations?
- go on the workshop classes,
- start your psychotherapy,
- talk to professionals who do not have this problem. Ask how they do it, that they trust their competences and have professional self-confidence?

Think and write down your ideas. This is a key part of the exercise!

From these five ideas, choose one to apply today. Write it now. If you can't start applying this idea today, then put it in to do for tomorrow. If it turns out that your ideas are so complex that you cannot start implementing them today or tomorrow, please break them down into smaller parts, i.e. into so-called detailed projects. Actions that you can immediately take to implement this competence.

What else will you gain if you feel competent?

Now answer the following questions honestly:

- What else will this competence, which you have just selected, give you, will it be a springboard for you?
- How will this affect your further career development plans?
- How will this affect your earnings?
- What kind of patients will you finally be able to see?
- How will this affect your patients? What will they gain from this?
- How will it affect your well-being?
- How will this affect those around you? What will they gain from this?
- What will others think of you?
- What will others say about you?
- How will this affect your personal life?
- How will this affect your appearance?
- How will this affect your health?

27. PERSONAL GOAL PROGRESS REVIEW

The activity refers to MH Professionals and/or Career Counselors

6.1. Aim of the activity

This activity helps to monitor progress on fulfilling your goals in a given area of functioning (i.e. your work). Regular reviewing if your efforts get you any closer to achieve your goal allows you to stay motivated, adjust your methods adequately to what is working and what is not and helps you to remember all the important detail and data associated with the whole process.

6.2. Theoretical framework

Objectives and the objective setting procedure is fundamental to stay motivated during the process of fulfilling your goals. Objective setting is best in the presence of unambiguous feedback which permits progress to be observed frequently and reassessment when required. The Personal Goal Progress Review is a self-reflection tool that will help you in checking progress towards objective fulfilment by regularly reviewing the progress they have made mindfully, without self-judgment.

6.3. Description

Think of a few essential questions that will help track their progress, for instance:

- What tasks did I complete in the last month that I am proud of?
- What are my goals for the next month?
- What problems have I faced? Have these been resolved?
- What is still to be achieved? What do I need to do to achieve these goals?

You can add your questions if you feel that something else would suit better your goal monitoring process.

The responses to these questions should be reviewed monthly in order to consistently monitor goal progress.

28. A MESSAGE FROM A GUARDIAN ANGEL

The activity refers to: MH Professionals

28.1. Aim of the activity: The activity aims to assist the person to identify her/his strong points, skills, competence and qualities. According to Yvonne Dolan (2000) – the author of this exercise, it “(...) is helpful for reclaiming and bolstering your self-confidence and courage”

28.2. Theoretical Framework: The activity is based on Solution-Focused Brief Therapy – it was developed by Steve de Shazer and Insoo Kim Berg and their colleagues beginning in the late 1970s in Milwaukee. SFBT is future-focused, goal-directed, and focuses on solutions rather than on the problems that brought clients to seek therapy¹⁶. According to Luc Isebaert (2016) SFBT “(...) like much of family therapy, emerged from a climate of theoretical and practical scepticism and intense interest in the mechanisms of therapeutic change. There was a growing disillusionment with psychodynamic therapy, and out of this dissatisfaction emerged a desire to find new ways of doing therapy in a less time-consuming manner”. While Yvonne Dolan (2000) points out that “The questions asked in Solution-Focused Therapy are positively directed and in a goal-oriented stance. The intention is to allow a perspective shift by guiding clients in the direction of hope and optimism to lead them to a path of positive change. Results and progress come from focusing on the changes that need to be made for goal attainment and increased well being”¹⁷.

28.3. Description: Read the following instructions to your client and ask him/her to prepare a list of characteristics dictated by the guardian angel.

“Imagine that wise and compassionate guardian angel has been sitting on your shoulder since you were born. You have not been aware of this presence up until now because angels are weightless. The angel’s sole purpose has been to recognize and observe all of your positive

¹⁶ <https://solutionfocused.net/what-is-solution-focused-therapy/>

¹⁷ <https://positivepsychology.com/solution-focused-therapy-techniques-worksheets/>

personality strengths and virtuous beliefs about the world. This is not an angel in charge of producing self-criticism or blame!”¹⁸.

“For the next fifteen minutes, imagine that the angel is now dictating you a list of your positive attributes through you. Writing down whatever comes to mind, make a list of what you think that angel would say”¹⁹.

The list

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Next, ask your client to read the list out loud and then ask him/her the following question:

- How do you feel knowing you have so many positive qualities?
- “Which personality traits do you value most and want to continue to influence your approach to life?”²⁰
- Which virtues or positive beliefs do you value most and want to continue to influence your approach to life?”²¹

¹⁸ Dolan Y., 2000, One Small Step. Moving Beyond Trauma and Therapy to a Life of Joy, iUniverse,

¹⁹ Ibid.

²⁰ Ibid.

²¹ Ibid.

Inform your client that he/she can also come back to it from time to time to remind himself/herself of his/her good qualities. Add that he/she can also ask the guardian angel after some time if it noticed any of his/her new traits and add them to the list.

29. SCALING QUESTIONS— A FEW SMALL STEPS TO A POSITIVE CHANGE

29.1 The activity refers to: MH Professionals (psychologists and psychotherapeutics) and Career Counsellors.

29.2. Aim of the activity:

Scaling questions in the SFBT approach invites the clients to put their observations, impressions, and predictions on a scale. This activity aims to enable the client to identify his current location on the way to the goal (including professional one) and the next possible steps that will bring him closer to the goal.

29.3. Theoretical Framework:

The activity is based on Solution-Focused Brief Therapy – it was developed by Steve de Shazer and Insoo Kim Berg and their colleagues beginning in the late 1970s in Milwaukee. SFBT is future-focused, goal-directed, and focuses on solutions rather than on the problems that brought clients to seek therapy²². According to Luc Isebaert (2016) SFBT “(...) like much of family therapy, emerged from a climate of theoretical and practical scepticism and intense interest in the mechanisms of therapeutic change. There was a growing disillusionment with psychodynamic therapy, and out of this dissatisfaction emerged a desire to find new ways of doing therapy in a less time-consuming manner”. While Yvonne Dolan (2000) points out that “The questions asked in Solution-Focused Therapy are positively directed and in a goal-oriented stance. The intention is to allow a perspective shift by guiding clients in the direction of hope and optimism to lead them to a path of positive change. Results and progress come from focusing on the changes that need to be made for goal attainment and increased well being”²³.

²² <https://solutionfocused.net/what-is-solution-focused-therapy/>

²³ <https://positivepsychology.com/solution-focused-therapy-techniques-worksheets/>

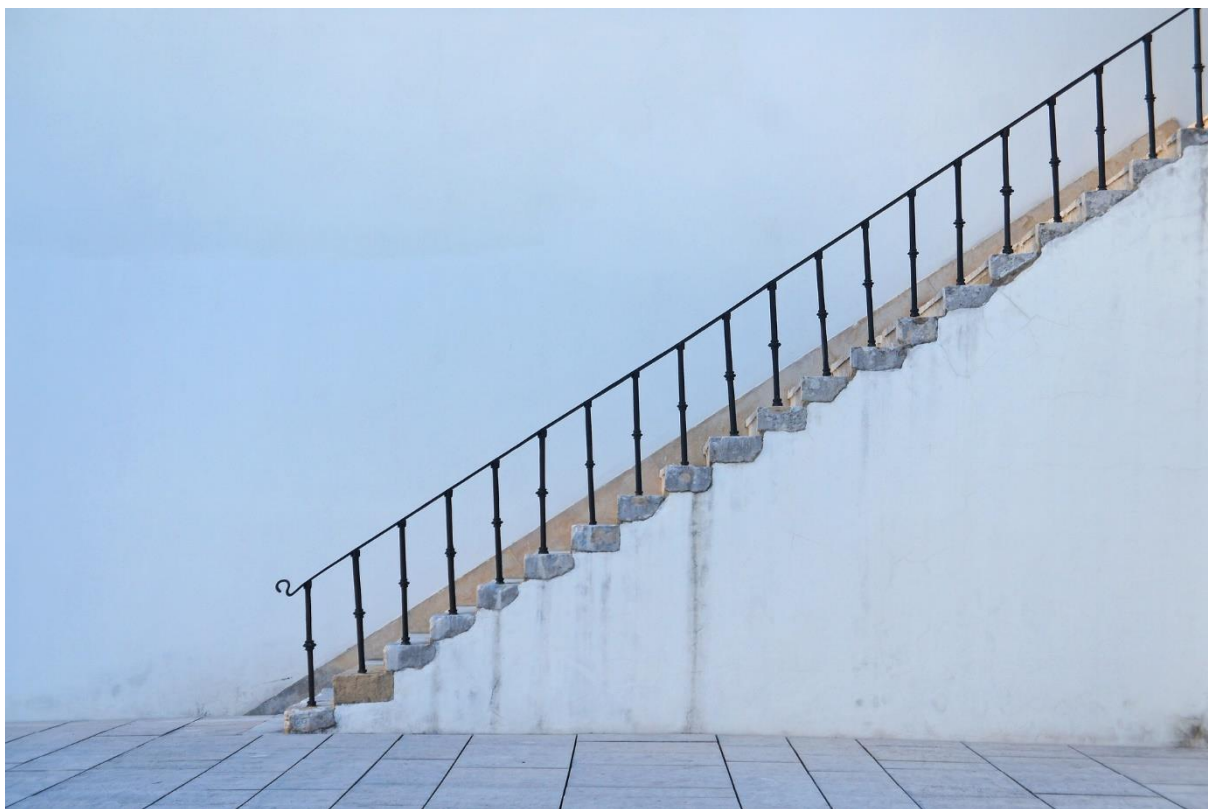
29.4. Description:

Show your client the drawing below (illustration of the stairs – you can print it give it to the client to write on and mark his/her progress) and tell him that his desired goal is at the top of the stairs (you can ask him what that goal is before). Add that to reach it he/she has to climb stairs. Then ask where he/she is on the way to his destination and how he/she knows that he/she is there. Then ask him/her what could be the next smallest possible step that would make him/her higher. Next, ask him/her how he/she assesses his/her readiness to take this step (for example from 0% to 100%). You might ask him/her who could help him/her take this step. You can use this exercise multiple times to identify the progress the client is making towards his goal.

Sample questions

- What is your goal?/What is your vocational goal?
- How will you know that you have achieved your goal?/ How will you know that you have achieved your vocational goal?
- Imagine that these stairs symbolize the path to your goal. Where are you now?/Imagine that these stairs symbolize the path to your vocational goal. Where are you now?
- How do you know that you are here (so high)?
- How did you do it?
- How did you do that you are not lower?
- Imagine the smallest possible step you could take to get a little higher. What would it be?
- What or who can help you?
- How do you rate your readiness to take this little, next step?

Attachment



Source: <https://pixabay.com/pl/>

30. THE MIRACLE QUESTION

The activity refers to: MH Professionals and Career Counsellors

30.1. Aim of the activity:

The miracle question is one of the most recognizable SFBT tools. It is a set of questions through which the client is invited to imagine (visualize) the day on which the problem will be solved – “This is the most spectacular therapeutic technique used by SFBT. Activates the client's creative forces: cognitive and motivational. It allows the client to visualize its desired future, imagine life without a problem. It gives the opportunity to "feel" the situation when the difficulty with which the client comes, disappears, it is smaller or allows it to live” (Kosman 2013). According to Yvonne Dolan (2000) – the miracle question (invented by Steve de Shazer and Insoo Kim Berg) is the first step to building the bridge to the client's desired future.

30.2. Theoretical Framework:

The activity is based on Solution-Focused Brief Therapy – it was developed by Steve de Shazer and Insoo Kim Berg and their colleagues beginning in the late 1970s in Milwaukee. SFBT is future-focused, goal-directed, and focuses on solutions rather than on the problems that brought clients to seek therapy²⁴. According to Luc Isebaert (2016) SFBT “(...) like much of family therapy, emerged from a climate of theoretical and practical scepticism and intense interest in the mechanisms of therapeutic change. There was a growing disillusionment with psychodynamic therapy, and out of this dissatisfaction emerged a desire to find new ways of doing therapy in a less time-consuming manner”. While Yvonne Dolan (2000) points out that “The questions asked in Solution-Focused Therapy are positively directed and in a goal-oriented stance. The intention is to allow a perspective shift by guiding clients in the direction of hope and optimism to lead them to

²⁴ <https://solutionfocused.net/what-is-solution-focused-therapy/>

a path of positive change. Results and progress come from focusing on the changes that need to be made for goal attainment and increased well being”²⁵.

30.3. Description:

a) Read the text below to your client

“Imagine that in the middle of the night, while you were asleep, a miracle happened and the problem or problems currently troubling you have either been resolved or you have found a satisfactory way to cope with them. Allow yourself to suspend any doubts, cynicism, or scepticism, and simply notice what comes to mind as you explore the fantasy of this miracle occurring. What would be different?

Since you were asleep when the miracle transpired, when you awakened the next morning you didn’t know it had happened. As you went through your day, you began gradually to notice signs that things were different, that the problems you had been struggling with on the previous day were now resolved”²⁶.

b) The next step is to figure out the first signs that would indicate your client’s miracle has happened – you might ask your client the following question:

- What would be the first small observable sign that would tell you your miracle had occurred and things were different?
- What would others notice in your behaviour that would first indicate that a miracle had happened in your life?
- What would the people who live with you notice?
- What would the people who study/learn/work with you notice?”²⁷

c) If your client has problems answering the above questions, you can ask him to imagine that he is watching himself in the film on the day after the miracle:

²⁵ <https://positivepsychology.com/solution-focused-therapy-techniques-worksheets/>

²⁶ Dolan Y., 2000, One Small Step. Moving Beyond Trauma and Therapy to a Life of Joy, iUniverse,

²⁷ Ibid.

“Imagine that you have a videotape of yourself that started running the moment that miracle happened in the middle of the night. What would you notice yourself doing if you were watching the videotape of yourself the first day (and night) after your miracle had happened? What would be the first image or frame on the videotape that would indicate to you that your miracle had happened? What would be the next one?”²⁸

- d) **Remember to focus on signs of behavioural changes in your client’s life.** These tend to be the most empowering because they are specific things your client can choose to do.
- e) **Make it real!** – to make your client’s a reality he/she must undertake one of the small behavioural indicators that attest to its having happened. You might ask the following question:

- What would be the smallest possible step you could take to come closer to the vision of your life after the miracle happened?

You might also add:

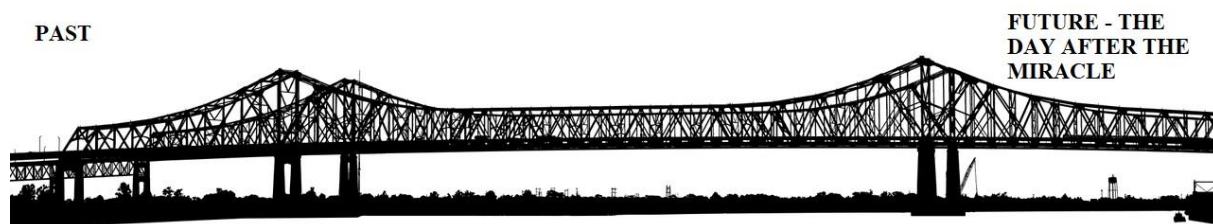
- “Start small, with one step, working one day at a time, first enacting the easiest behaviour that would be a sign your miracle has happened. Don’t overwhelm yourself with too much at first, this could intimidate you and jeopardize or sabotage your experience”.
- f) **Next small steps** – during the next meetings, you can ask about the next small possible steps that bring the client closer to vision after miracle:
- What next little hint of your miracle would be?

²⁸ Ibid.

You can also apply “the miracle bridge”²⁹ progress chart (see attachment) – ask the client to mark the current location on the miracle bridge” and then ask further questions:

- What do you have to do to move on “the miracle bridge” another small step?
- What next small step would be your progress?
- What could you do in the next few days?

Attachment



Source: <https://pixabay.com/pl/>

²⁹ Ibid.

31. CREATING A MAP OF MY STRENGTHS AND WEAKNESS IN CAREER COUNSELLING WITH MH NEETs

31.1. The activity refers to

Career counsellors of MH NEETs

31.2. Aim of the activity

The aim of the activity is to assist the career counsellor to identify the gaps in his/her practices, recognize the points that he/she need to focus on, and acknowledge the areas where he/she feels strong about.

31.3. Theoretical framework

Career counsellors of MH NEETs need to be aware of some issues that are crucial in facilitating young people in their journey towards their educational or vocational goals. The points that are deemed important in the proposed model of career counselling provide guidance for the activity.

31.4. Description

Tick the statement that applies to you, for the actions in the table's column.

	Haven't thought of it	Have thought of it but no actions taken	Have thought of it and taken some actions	Have thought of it and am fully engaged in it
Joint setting (counsellor and user) of concrete educational / career goals				
Use of appropriate tools and activities to identify the MH NEET person's interests, skills, abilities and wishes				

Joint development user's professional profile				
Creation of cv and a template for a motivational letter				
Training in job searching techniques				
Implementation of a job club for MH NEETs to meet and train together in job-searching techniques				
Training in self-presentation techniques				
Development of soft skills				
Group training sessions for soft skills development				
Continuous support after acquiring a job or enrollment in education				

31.4.1. Tips

Consider the reasons that you have taken no or little action for the aforementioned points. Do some of the reasons derive from your own personal views? Are some of these difficulties related to your work environment and policies of the organization where you work? Are there any actions you can take to improve the current situation? For example, negotiate with supervisors, network with colleagues, etc.

Have you discussed the points, in which you are fully engaged in, with other colleagues? It would be a good idea to exchange good and successful practices through a network of colleagues!

32. CREATING A MAP FOR NETWORKING WITH EMPLOYERS

32.1.1. The activity refers to

Career counsellors of MH NEETs

32.1.2. Aim of the activity

The aim of the activity is to assist the career counsellor to identify the gaps in his/her practices, recognize the points that he/she need to focus on, and acknowledge the areas where he/she feels strong about, in the field of networking with employers.

32.1.3. Theoretical framework

Career counsellors of MH NEETs need to be able to network with potential employers in order to facilitate the work integration of MH NEETs on one hand and to alleviate the impact of stigma, on the other hand.

32.1.4. Description

Tick the statement that applies to you, for the actions in the table's column.

	Haven't thought of it	Have thought of it but no actions taken	Have thought of it and taken some actions	Have thought of it and am fully engaged in it
Participation in conferences regarding Human Resources and Corporate Social Responsibility issues, to network with employers				
Enrollment in Human Resources and Corporate Social Responsibility portals, to keep up to date with them and network				
Participation or organization of 'career days' in which				

educational institutes, employers and MH NEETs meet and network				
Organisation of events in my Organization where I invite educational institutes' representatives and potential employers, for a chance to network				

32.1.5. Tips

Consider what kept you in engaging more in the points that you have not thought of doing and the ones that you have thought of and taken no or little action. Do your own personal views discourage you from implementing such activities? Do your organization policies or bureaucracies create difficulties in implementing / organizing such activities? Are there any actions you can take to alleviate these difficulties (e.g. negotiate with supervisors, network with colleagues, etc)?

Have you discussed the points you are fully engaged in with other colleagues? It would be a good idea to exchange good and successful practices through a network of colleagues!

33. PICTURE THIS!

33.1 Activity refers to

This activity is for career counsellors

33.2 Aim of the activity:

This activity is designed to help young people to develop an intuition for assessing career choices by employing narrative and visual imagination projecting themselves into vocational situations, while rooting their imagination in verifiable information.

33.3 Theoretical background:

Pictorial representations can capture core aspects of vocations very succinctly (Klevenow 2020), as the iconic representation of an activity condenses and focuses on the essential elements. The production or assembly of images in a projected career story can therefore productively employed to a first-person active imagination. If the fiction is based on valid information, active first-person imagination following the evidential consequences within the account (Reynolds 1989) can help to introduce realism into the assessment of a job situation that cannot be directly experienced.³⁰ A pictorially supported active imagination supplements Cochran's narrative approach of 'emplotting' the person as 'main character in a career narrative that is meaningful, productive, and fulfilling' (Cochran 1997: 55).

33.4 Description

Aim

Participants are to envision themselves in various vocations. In order to do this they have to engage in following activities:

- Visualisation of the vocation

³⁰ This is often a problem with internship and work experience: the actual job is not experienced as that would normally required a longer training period, so that interns tend to end up doing rather monotonous unskilled work (Klevenow 2020)

- Imagining themselves in the framework of this visualisation
- Presenting their imagination as a first-person account to the group

Procedure

Participants work on their own, but should present the results in a group of four to six peers. The activity should be supervised by a career counsellor with good knowledge of occupational praxis.

Each participant chooses one of the vocations that have been previously identified as a possible option to explore further. In independent guided work, the participant then puts together a portfolio about the vocation consisting in:

- Materials (notes, brochures, print-outs, etc.) already at hand from previous engagement with the vocation in question
- Additional material gathered in an online research, using sites identified by the career counsellor as reliable and informative (e.g. the careers pages of the public employment system, chambers of commerce and industry, professional associations, etc.)
- Additional material gathered in from the local library, the local employment exchange or careers information centre

From these materials, the participant then selects images that appear to capture two to four key activities typically involved in the vocation. For example, for a joiner this could include preparing material according to a technical drawing, working with the buzz saw, fitting a kitchen work surface etc. For a land surveyor it could include taking measurements using the theodolite and producing plot plans with CAD etc. For a pharmacist it could be advising customers about side effects of medication, preparing an ointment according to prescription, working with a software to check stocks and order from suppliers etc.

Participants arrange the images into a narrative order to represent highlights and routines of a working day. They then mentally travel through that day, writing down for each station the essential aspects of that activity:

- What needs to be done here, what does the job consist in? (task, activity)
- Why is this activity important? For what or whom is it important?

- What abilities, knowledge and skill do you need in order to do this well?
- What tools, machines, devices, and materials do you need for this activity?
- What is the setting? (What is going on around you? Where are you? Are you alone or with other people? Etc.)

The career counsellor supports the participant in assessing how realistic the resulting portrait of a vocation is.

For each picture, participants then imagine themselves doing the visualised activity and make notes about the following aspects:

- I would/wouldn't enjoy this aspect of the job, because ...
- Doing this would/wouldn't make me proud, because...
- I would/wouldn't be easy for me to learn, because ...

The final step is to present the result to the other participants as a guided tour through their (potential) future vocation. For this, the pictures are arranged in a "gallery" on moveable pin boards, so the presenter can walk the others through the activities. At each activity, the presenter tells the others "Here you can see an important part of the job I might be doing in the future. I will then..." etc. – according the aspects listed above and then takes questions from the audience.

33.5 Resources/Material needed

Internet access, printer, paper and pens, glue, access to information material on vocations from various sources, portable pinboards

Sources

Cochran, Larry (1997): *Career Counseling: A Narrative Approach*, Thousand Oaks, Cal.: Sage
Klevenow, Gert-Holger (2020): 'Arbeit 4.0 – Folgerungen für die Berufsorientierung', in: Thomas Freililing/Ralph Conrads/Anne Müller-Osten/Jane Porath (eds): *Zukünftige Arbeitswelten: Facetten guter Arbeit, beruflicher Qualifizierung und sozialer Sicherung*, Wiesbaden: Springer, pp.159-176

Reynolds, Steven L. (1989): 'Imagining Oneself To Be Another', in: *Noûs*, Vol.23, no.5, pp.615-633

34. BIOGRAPHICAL LINE

34.1 Activity refers to

Careers counsellors and MH professionals

34.2 Aim of the activity

To connect institutional biography (education, vocational training, support programmes etc.) with critical life course events and affective states as remembered, thereby pinning down critical turns, reflecting on stress factors and resources, and encouraging a planning process for a positive development into the future.

34.3 Theoretical framework

Biographical career maps have proved a highly useful research method in groups where for various reasons the articulation of a life history and particularly its emotional dimension is difficult (e.g. Schrubing et al. 2019) As such, biographical maps constitute one possible tool for ‘story crafting’ within a narrative approach to counselling (e.g. McMahon/Watson 2012). To materialise ones thoughts and feelings in lines has been identified as an historically embedded technique that facilitates the making of connections, construction of continuities, and making of meanings (e.g. Ingold 2015)

34.4 Description

Aim

The activity aims at generating an integrated account of significant life stages and events, connecting educational/vocational, family, personal and medical developments in light of their affective significance.

Procedure

The counsellor draws up a timeline (x-axis) and an emotion-scale (y-axis).

The counsellor inquires significant life stages (e.g. school, time in a clinic, apprenticeship, moving out from home etc.) and marks them off on the x-axis.

The client is then asked to draw a line that reflects her or his general emotional well-being during those times (the better, the further above the x-axis, the worse, the lower below it).

This done, counsellor and client talk about how ups and downs, and especially turning-points relate to the stages noted on the x-axis: did, for example, the school environment have an influence on the declining curve or was it rather that a deteriorating health led to dropping out? Were there other factors, significant events (such as the death of a significant other, a family break-up etc.)? The client adds comments to the biographical chart accordingly.

The counsellor guides the client to reflect on the resources that enabled the client to overcome the deepest points of the chart and to embark on the road of recovery. These are marked on the chart by the counsellor (preferably in a friendly colour), and utilised as a starting point to project a further upward trajectory, combining resources the client has named as central to the recovery process with ones to be identified on the basis of available resources both in terms of continued recovery and vocational rehabilitation.

34.5 Material required

Paper

Differently coloured pens

Sources

Schrubing, Astrid/Mayer, Jochen/Thiel, Ansgar (2019): 'Drawing Careers: The Value of a Biographical Mapping Method in Qualitative Health Research', in: *International Journal of Qualitative Methods*, Vol.18, pp.1-12

McMahon, Mary/Watson, Mark (2012): 'Story Crafting: Strategies for Facilitating Narrative Career Counselling', in: *International Journal for Educational and Vocational Guidance*, Vol.12, no.3. pp.211-224.

Ingold, Tim (2015): *The Life of Lines*, London: Routledge.

35. SYSTEMIC CHAIR

35.1 Activity refers to:

Career counsellors and MH professionals

35.2 Aim of the activity:

To create an opportunity for self-critical and self-appreciating reflection on the work with clients. Participants are facilitated in gaining a third-person perspective on their work and the way they infuse this work with their personality. This will create a basis for a respectful and supportive group discussion on future praxis.

35.3 Theoretical framework:

Systemic Therapy. it is grounded in the emphasis on role- and perspective-taking capacities that are at the heart of the human being as a social creature as analysed classically by George Herbert Mead and Helmuth Plessner. Moreno's famous "empty chair" and its subsequent use in Gestalt therapy has been understood against this background (Stammiller 2019). The technique supports maintaining a professional attitude as critical-reflective practitioner (Cunliffe 2004).

35.4 Description

Aim

To give an account how the professional feels she or he is seen by the clients in terms of attitude and praxis.

Procedure

In an exercise of reflection participants introduce themselves to the group by positioning themselves next to an empty chair. They assume the personage of a client of theirs and imagine themselves onto the chair. They then introduce themselves from the perspective of the client, answering the questions:

- Why is it good to have x as a counsellor – how has x helped me?
- What did not go so well – how could x improve their praxis?

This is then followed by a sequence of clarifying questions. After this, evaluative feedback is to be given.

35.5 Materials needed

Chairs

Sources:

Cunliffe, Ann L. (2004): 'On Becoming a Critically Reflexive Practitioner', in: *Journal of Management Education*, Vol.28, no.4, pp.407-426

Staemmler, Frank M. (2019): 'Gestalt therapy, Dialogical Self Theory, and the "empty chair"', in: Agnieszka Konopka/Hubert J. M. Hermans/Miguel M. Gonçalves (eds.): *Handbook of Dialogical Self Theory and Psychotherapy*, Abingdon: Routledge

36. YOU'RE ASKING THE QUESTIONS NOW!

36.1 Activity refers to

Career counsellors

36.2 Aim of the activity

This activity is designed to achieve mainly three goals. First, it offers an engaging way of finding out about vocational practice (concrete knowledge). Second, it helps honing one's ability to assess the fit between one's own abilities and inclinations and the tasks and activities involved in particular careers (career skills). Third, it also doubles as a preparation for job interviews by normalise talking about work and careers and reduce inhibitions talking to people with perceived higher status (interactional skills)

36.3. Theoretical background.

The activity supports the development of career maturity, with maturity in relation to career choices and decisions by de-sensitising fears and anxieties in interaction with persons with managerial roles, encouraging role-taking and perspective-change, which all contribute to career-relevant maturity as mapped out by Hogan & Roberts (2004)

36.4 Description

At a café-style event, the career counsellor organises meeting opportunities with various representatives of local businesses and organisations. The young people go from table to table to talk individually to them. They have 15 to 20 minutes time for a reverse job interview in which they quiz managers about one of their job offers with the aim to write a short piece about one of the job offers.

For the event, the careers counsellor needs to organise a location with café tables and chairs, and win participants from the local business community. These should be asked to name one or more careers that are possible in their organisation and about which they can answer in-depth questions. The young people participating in the event will be informed beforehand

about which careers will be thematic and given basic information about each of them. They will be asked to collect information about the invited businesses and prepare questions about various aspects of these careers (what are typical activities, how much do you earn, are there opportunities for personal development, what are the educational requirements, what kinds of people would they expect to apply etc.). There will be a preparatory group session of the young people supervised by the career counsellor to talk about questions and organisational aspects of the main event.

At the event, each employer is assigned one table. The young people are given a docket listing their attendance at each of the tables. Change of tables is indicated by an acoustic signal.

The young people interview employers on one job each and take notes.

After the event, each of the young people writes down one to two pages with the main points regarding the job they found most interesting. In a further group session supervised by the careers counsellor, the young people talk about the job they have summarised, and about their experience quizzing “managerial types”. Did they feel intimidated? Have they become more confident in the process of going from interview to interview? Etc.

Materials and resources needed

Furnished location (sufficient tables and chairs)

Notebooks (traditional ones made of paper) and pens

Contacts to local business networks

Sources

Hogan, Robert/Roberts, Brent W. (2004): ‘A Socioanalytical Model of Maturity’, in: *Journal of Career Assessment*, Vol.12, no.2, pp.207-17

References:

Ben-Shahar, T. (2009). *W stronę szczęścia*. Poznań: Dom Wydawniczy REBIS.

Emmons, R. A., & McCullough, M. E. (2003). *Counting blessings versus burdens: An experimental investigation of gratitude and subjective well-being in daily life*. Journal of Personality and Social Psychology, 84(2), 377-389.

Dolan Y., 2000, One Small Step. Moving Beyond Trauma and Therapy to a Life of Joy, iUniverse,
www.therapistaid.com

<https://solutionfocused.net/what-is-solution-focused-therapy/>

<https://positivepsychology.com/solution-focused-therapy-techniques-worksheets/>

37. IT CAN HAPPEN (UNDERSTANDING THE MEANING OF WORK)

37.1 Activity refers to

Careers counsellors and MH professionals

37.2 Aim of the activity

The activity contributes to a better understanding of social justice and the value of work. Careers counsellors and MH professionals have to analyse how work and social justice are interconnected. Moreover they will understand that counsellors' role includes advocacy.

37.3 Theoretical framework

To promote work integration of people with disabilities we need to work at multiple levels: (a) with the persons who are threatened by social exclusion, (b) with potential employers, (c) with the bodies or persons shaping employment policies (policy makers), and (d) with the wider social environment of individuals. People with mental health problems want to work. Their desire for work does not reflect a tendency to not have free time nor to get up early every morning having to complete specific tasks. On the contrary, it reflects the value and the centrality of work in the western world. Work is among the main pillars of the existential organization of individuals and an important feature for structuring their identity. Just think that among the first things that people say to others when they introduce themselves is their vocation. Therefore mental health service users want to work for several reasons. Apart from the obvious economic benefits, work comes with various other benefits. Users want the satisfaction, the feeling of self-worth, the daily routines, the levels of activity, and the challenges that work provides. Moreover they want the social exchange and the feeling that they are a contributing member of society. Finally, they want the social status and the dignity that comes with having a career.

37.4 Description

Participants will be asked to watch a movie and they will have to discuss the meaning of work for people from socially vulnerable groups. In order to promote their interest and motivation popular mainstream movies can be used (e.g. The movie “Si Può Fare” which present the emergence of social enterprises in Italy and the de-institutionalization of mental health patients).

A discussion forum is created in the Learning Platform. Each participant has to watch the movie and write a small essay of at least 150 words analysing the effect of work for each character. Additionally, he/she has to comment on the other participants’ essays and state his/her agreement or disagreement (at least 3 comments). Therefore, a discussion thread will be created with students arguing.

Participants will have to present their analysis and discuss with other colleagues defending their choice. At the end, a report will be developed by each student, as a self-reflection activity, where s/he will have to state their experiences from the activity and its “peer-review” procedure.

37.5 Material required

The movie “Si può fare” and having an online platform to host the discussion forum.



38. WHAT IS THE MEANING OF WORK?

38.1 Activity refers to

Careers counsellors and MH professionals

38.2 Aim of the activity

The activity contributes to a better understanding of the value of work.

38.3 Theoretical framework

People with mental health problems want to work. Their desire for work does not reflect a tendency to not have free time nor to get up early every morning having to complete specific tasks. On the contrary, it reflects the value and the centrality of work in the western world. Work is among the main pillars of the existential organization of individuals and an important feature for structuring their identity. Therefore mental health service users want to work for several reasons. Apart from the obvious economic benefits, work comes with various other benefits. Users want the satisfaction, the feeling of self-worth, the daily routines, the levels of activity, and the challenges that work provides. Moreover they want the social exchange and the feeling that they are a contributing member of society. Finally, they want the social status and the dignity that comes with having a career.

38.4 Description

Participants will be asked to watch the following video and to comment on how having a structured everyday routine helps people with mental health problems have a better quality of life: <https://www.youtube.com/watch?v=LXPYvXFe1Io>

A discussion forum is created in the Learning Platform. Each participant has to write a small essay of at least 150 words and to comment on the answers of his/her colleagues.

39.5 *Material required*

The following video: <https://www.youtube.com/watch?v=LXPYvXFe1Io> and an online platform to host the discussion forum.

39. BARRIERS TO WORK

39.1 Activity refers to

Careers counsellors and MH professionals

39.2 Aim of the activity

The activity contributes to a better understanding of the barriers to work that mental health service users have to face.

39.3 Theoretical framework

MH NEETs face a lot of extra challenges on their way to education and the labour market. Mental illness is likely to be both a risk factor for becoming NEET as well as a consequence of NEET status. Youth with prior mental illness are likely to terminate school early. Mental disorders are also likely to impede the transition into the labour force due to employment restrictions and stigma. The social exclusion that is associated with the NEET status combined with the social exclusion that is associated with the Mental Health Patient status could cause feelings of hopeless.

Despite their desire to work, mental health service users face many barriers that impede their work re-integration process. We will focus on 3 categories of barriers: (a) internal barriers and lack of skills, (b) stigma-related barriers, and (c) benefits-related barriers.

Internal barriers and lack of skills: Although each individual is unique, in the case of people with mental health problems we observe some common characteristics and patterns. When their illness begins to become noticeable (probably during adolescence or early adulthood), formal education or training is disrupted. Subsequently career development is stalled and acquisition of core work skills blocked. If the individual has already entered the labor market, his/her career is brought to a halt. Additionally, continuance of education or return to work right after the acute symptoms of the illness stop is quite rare. On the contrary, occurrence of mental health problems is strongly associated with long-term unemployment and its negative

effects. Moreover mental health users have to face low self-esteem, low self-efficacy, and fear of failure. On top of the aforementioned issues, they have to overcome practical issues, such as lack of means of transportation, unpredictable sleeping patterns due to medication, lack of interviewing skills and job-hunting techniques, and not having easy access to internet and technology.

Stigma-related barriers

Benefits-related barriers: As stated above the vast majority of mental health service users are unemployed and hence they do not have any income or health insurance. Consequently, they have to pursue the disability benefits that Social Security and Welfare services pay to people who are excluded from work due to a medical condition. In most countries this procedure takes months to complete and is exhausting and overwhelming for the individual. People have to gather doctors' reports, sign documents, and subsequently they are examined by a committee that will conclude whether they have enough disability to qualify for benefits. Additionally, they have to prove that they are completely disabled in order to have health insurance and a disability allowance that in many countries is below the poverty line. Fear of losing these benefits deters users from seeking employment and in many cases it becomes an anti-motive for work. People believe (and with good reason) that re-instating their official disability status after losing a job would be such a lengthy and overwhelming bureaucratic procedure that they prefer not to get employed in the first place. The benefits-related barriers will be further discussed in relation with the task of advocacy.

39.4 Description

Participants will be asked to have a role playing game with the following scenario:

Peter was diagnosed with schizophrenia when he was 16 years old. He is now 24 years old. He hasn't finished high school nor has he ever worked. His family kept him protected and isolated

and he has no social network apart from members of his family. His psychiatrist suggests that employment might be beneficial for him but he is quite terrified with this idea.

One participant will play the role of Peter and the other the role of a social worker that wants to empower Peter.

39.5 Material required

The case study (scenario) of Peter.

THE WORK4PSY CONSORTIUM

HdBAHochschule der
Bundesagentur für Arbeit

University of Applied Labour Studies

The **University of Applied Labour Studies of the Federal Employment Agency (HdBA)** is an important provider of study programs and training for students and practitioners in the field of vocational orientation and counselling. The HdBA regularly participates in projects that focus on young people with special social and health problems, such as programs for vocational training (BEB, Programme für die Berufsausbildung), assisted vocational training (AsA, Assistierte Ausbildung), Advice as innovative prevention of training dropouts (PraeLab, Beratung als innovative Prävention von Ausbildungsabbrüchen), etc.



The **Pan-Hellenic Association for the Psychosocial Rehabilitation & Work Re-integration (PEPSAEE)** has a broad expertise in the field of mental health and especially in the field of career counselling/ work integration of people with mental illness, as it maintains the only Supported Employment Office for people with mental health problems in Greece. The past year more than 150 mental health patients received services from specialized career counsellors and more than 40% of them are now in employment/ traineeship. PEPSAEE has, also, implemented innovative projects concerning this issue, such as "Bridges for Employment", a multilevel project, aiming at work integration of mental health patients.



CESIE is a European Centre for Studies and Initiatives, which focuses on the research of social needs and challenges and the use of innovative learning approaches. In this way, CESIE actively connects research with action through the use of formal and non-formal learning methodologies and has participated in a number of projects relevant to (a) the development of innovative approaches and tools to promote the inclusion of people with both mental and physical disabilities (Projects: MENS; ALdia; CREATE; EQUIL), (b) the development and implementation of training activities to promote employability (Projects: STARTUP; SUCCESS; SCIENT; ARISE; SERCO) and (c) the development of VET programmes (Projects: VIRTUS; CAPE; CREATE; Journeys; Arts).



POMOST is strongly active in the field of rehabilitation of young people with mental health illness from the Lodzkie region in Poland. POMOST's Day Care Centre hosts 26 people. The target of vocational rehabilitation of MH NEETs is also achieved through innovative projects such as "Focus on Job" aiming to build a model of cooperation between people with MH illnesses, job coaches and employers. POMOST is part of an initiative/coalition of non-profit organisations, companies and institutions. The initiative pursues incorporating supported employment as a standard part of rehabilitation in Polish social politics towards people with mental health (and other) disabilities.



VSI "eMundus" has a broad expertise in the development of various ICT applications. The mission of eMundus is to actively promote the development of the knowledge society by developing and developing services related to educational activities, information technology, innovation and practical applications in education and social activities, ecology, healthy lifestyles and harmonious education in order to ensure quality cooperation and unity between different generations and different groups in society.

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