



THE TOUGHEST JOB YOU'LL EVER LOVE:

BEING A YOUNG PARENT WITH A MENTAL HEALTH CONDITION WHILE PURSUING WORK AND SCHOOL GOALS

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The Learning & Working Center



Acknowledgements

The Learning & Working Center at Transitions RTC is a national effort that aims to improve the supports for youth and young adults, ages 14-30, with serious mental health conditions to successfully complete their schooling and training and move into rewarding work lives. We are located at the University of Massachusetts Medical School, Worcester, MA, Department of Psychiatry, Systems & Psychosocial Advances Research Center. Visit us at:

http://www.umassmed.edu/TransitionsRTC

The Transitions RTC incorporates Participatory Action Research with young adults with lived experience in the design, conduct and interpretation of research and knowledge translation activities.

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ICEBREAKER





Questions

Are you a parent?

How would you describe parenting in 1 word?

What do you admire from parents you know?





BACKGROUND





Work and School in Young Adulthood

- Young adulthood is an important time to establish work habits and explore career interests.
- Employment and/or post-high school education is critical for young adults because it can provide:
 - A source of income
 - Increased financial security
 - Increased earning potential over time
 - A better quality of life
- Early career activities predict long term economic growth (increased earnings over time)







Benefits of Work and School for Young Adults with SMHC

- Employment and/or post-high school education can also have many features that aid in the recovery of young adults living with SMHCs, including:
 - Structure
 - Daily activity
 - Meaning
 - Social contact & community integration
 - Self-esteem





Young Adults with SMHC

- Young adults with serious mental health conditions (SMHC) often have:
 - Lower rates of high school graduation
 - Lower rates of enrollment in post-secondary education
 - Lower rates of employment
 - Additional challenges that can impact school and work (e.g. justice system involvement, co-occurring disorders, homelessness, parenting at an early age)





Young Parents with SMHC

• Individuals with SMHC tend to parent at an earlier age on average than the general population.

Average Age of Becoming a Parent				
	General Population	People diagnosed with SMHC		
Women	24 years old	19-22 years old		
Men	27 years old	24-25 years old		





Work and School for Young Parents

- Young parents with SMHC tend to...
 - Have fewer finished years of education
 - Hold part-time, low-level service jobs at low salaries if employed
 - Be more likely to receive public assistance

Osgood DW, Ruth G, Eccles JS, Jacobs JE, Barber BL. Six paths to adulthood: Fast starters, parents without careers, educated partners, educated singles, working singles, and slow starters. Chicago, IL: The University of Chicago Press; 2005.





Why this research?

 Little is known about how young parents balance parenting responsibilities with work and school activities while living with a SMHC



• More understanding about how young parents navigate these roles is needed to inform culturally-competent interventions for young adult parents





Today's Objectives

- Encourage understanding around the challenges young parents with SMHC face in reaching their school and work goals
- Promote culturally competent research on young parents with lived mental health experience
- Present findings from qualitative interviews with 19 young parents, ages 22-30, living with SMHC
- Understand the motivating force that children can be in the lives of young parents with SMHC
- Share Jennifer's story of being a young mom with lived experience
- Provide list of services and supports for young parents with lived experience to help them more easily reach their school and work goals





THE CHEER STUDY

Collecting Histories of Education and Employment during Recovery





Overview of The CHEER Study

- We interviewed young adults with SMHC about their employment and education activities
- One-time, 90 minute qualitative interviews
 - School and work background
- 61 young adults diagnosed with SMHC
 - 42 non-parents
 - 19 parents





Eligibility Criteria

- 25-30 years old (22-30 if young parent)
- Have been diagnosed with at least one of the following:
 - Major Depression
 - Anxiety Disorder
 - Post-Traumatic Stress Disorder
- Bipolar Disorder
- Eating Disorder
- Borderline Personality Disorder
- Schizophrenia or Schizoaffective Disorder
- Reported significant treatment or disruption due to SMHC
 - Inpatient hospitalization
 - Partial hospitalization
 - Client of DMH

- Received Special Education Services
- Formal Leave of Absence

Some school and work history





Recruitment

- Recruitment sources from Central and Eastern Massachusetts:
 - Clubhouses
 - Outpatient mental health providers
 - Drop-in resource centers
 - Referrals from contacts within the MA Department of Mental Health
 - Parent support agencies such as SMOC





Coding and Analysis

- Most interviews recorded, all transcribed
- Dedoose coding software
- Qualitative coding process
 - Developed codes based on themes in the interview data
 - Created codebook
 - Iterative group process





Interview Questions

- All participants were asked to describe:
 - Their education, training, and employment experiences and career goals
 - Decision-making processes for education, training, and employment activities
 - The influence of their SMHC and other life circumstances and events (e.g. hospitalizations, homelessness) on these activities





Young Parent Sample (n=19)

- In addition, parents were asked about:
 - How being a parent may have affected their school and work activities or career goals
 - Changes in school and work activities that occurred during pregnancy or after having children
 - Custody and living arrangements with children
 - Services or supports that have been helpful to them as they manage school, work, and parenthood





What We Learned: Young Parents









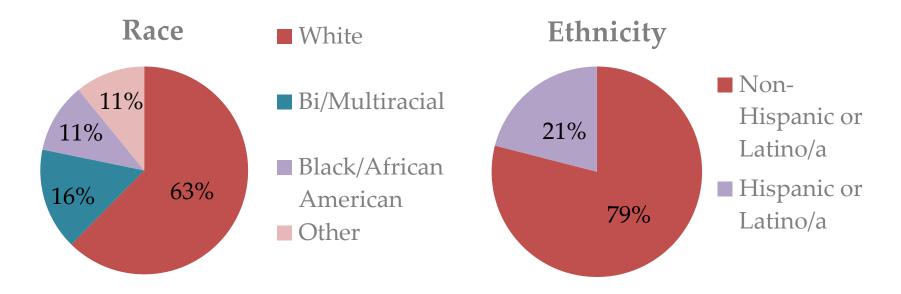
RESULTS

Description of Young Parent Sample (N=19)





Demographics (N=19)



Gender		
Female	16 (84%)	
Male	3	

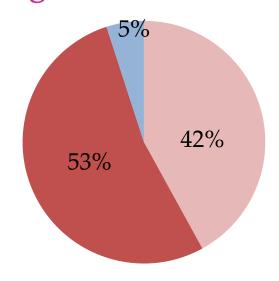
Age		
Range	22-30	
Average	26	





Parenthood (N=19)

Age Became Parent



- Under 20 years old
- 20-25 years old
- Over 25 years old

Age of Children		
Range	2 weeks – 12 years	
Average	5 years	
Number of Children		
1	10 (53%)	
2	7 (37%)	
3	1 (5%)	
4	1 (5%)	





Mental Health Experiences

Diagnoses Reported		
Anxiety Disorder	16	
Major Depression	14	
Post-Traumatic Stress Disorder (PTSD)		
Bipolar Disorder	9	
Eating Disorder		
Schizophrenia/Schizoaffective		
Borderline Personality Disorder	1	

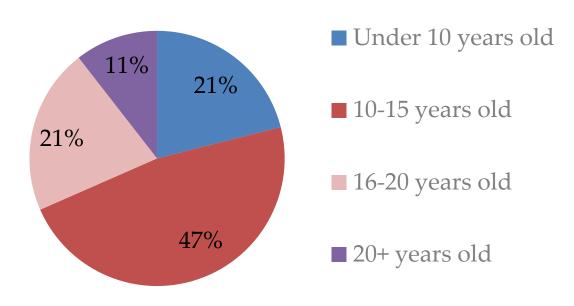
# of Diagnoses Reported		
1 Diagnosis	3 (16%)	
2 Diagnoses	4 (21%)	
3 Diagnoses	7 (37%)	
4 Diagnoses	4 (21%)	
5 Diagnoses	2 (11%)	
6 Diagnoses	1 (5%)	





Mental Health Experiences

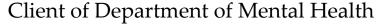
Age of First Diagnosis







Mental Health Experiences

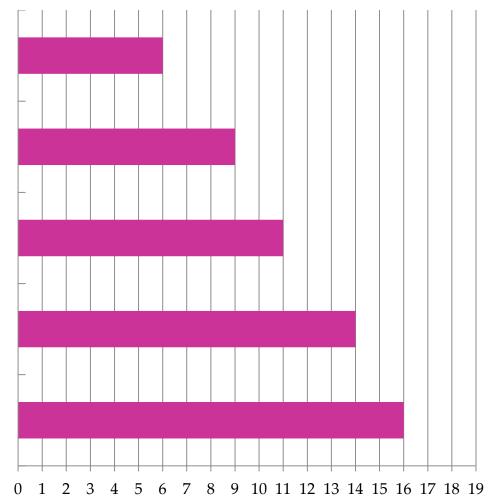


Special Education Services in School

Day Treatment Program

Overnight Hospitalization

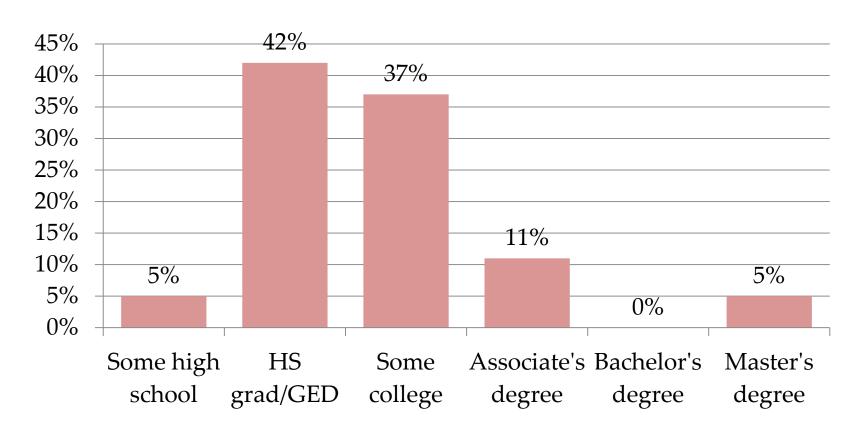
Leave of Absence from School/Work







Highest Education Level Completed







Summary of School or Training Activities

- High school
 - 7 participants dropped out of high school
 - 6 have GED
- College
 - Majors included Psychology, Human Services, Counseling, Education
 - Mostly part-time, semester here and there
 - Often put 'on hold' until children are older, few have degrees
 - Those who did have post-secondary degree reported being more successful in their careers
- Trainings
 - Peer Specialist, Medical Assisting, Skin Care, Food Safety, Cosmetology, Pharmacy Technician, PCA
 - Some parents pursuing training or certification programs, balancing with other responsibilities





Summary of Work Activities

- 3/4 of parents were employed at time of interview
- Service jobs in restaurants and retail common
- Career growth over time unfortunately uncommon
- Peer work is exception

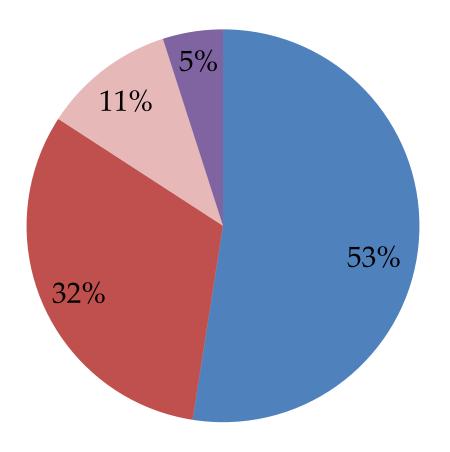


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Annual Income



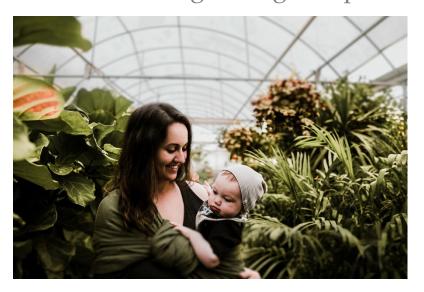






Custody Arrangements

- Only 1 dad had partial custody
 - He saw children on weekdays for few hours after school
 - Other 2 dads had no custody of children
- 14 moms had primary custody
 - Only 2 moms did not have custody. In these cases, grandparents had custody & moms were—living with grandparents and child.

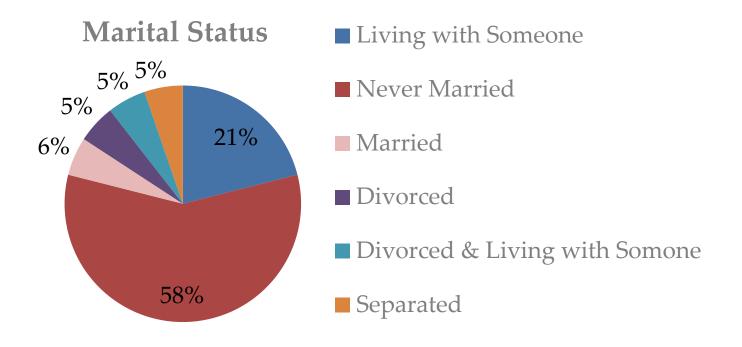






Relationship Status

• Few participants were living with other parent(s) of their children, often due to relationship issues







Young Dads (N=3)

- Ages became dads: 19, 20, 24
- 2 dads had 8 year old boys
- 1 dad had a set of twins who are 5 years old



- 2 dads have gone extended periods (4-7 years) without seeing child
 - Incarceration
 - Other parent refuses visitation





QUALITATIVE FINDINGS

In their own words





Impact of Parenting on Work

- Parenting is a full time job itself
- Working becomes a necessity
- Takes longer to fulfill career goals
- Reducing to part-time
- Arranging work schedule to prevent gaps in childcare
- Work is an escape

"When I'm at work, that is my time to relax. It sounds funny. But it's like when [my son] is at daycare and I'm at work, I don't have to worry about entertaining him, feeding him, changing his diaper. The lady at daycare is doing all that."

(Morgan, 30)





Impact of Parenting on Career Decisions

- For some, becoming a parent influenced decisions about their career path
 - Switching majors to early childhood or education
 - Wanting to work with adult clients
 - Applying for school year positions
 - Needing a job with mother's hours (i.e. day time hours)

"I started to really consider what that would look like in a job, and the hours would mean late evening hours. And I didn't know how I could make that work with my daughter. I figured switching [majors] might open the doors to more opportunities that would work with my daughter." (age, mom)





Impact of Parenting on Career Decisions

Having a less-demanding job is important

"I think it's really important for me to have that time and energy. Because if I'm working 8 to 4 at McDonalds I would be drained when I got home. And that mental energy I have for [my daughter] would probably be limited." (age, mom, P209)





Maternity Leave

- Most young moms worked up until birth
- Time off after birth varied from 2 months to 1 year
- Most moms felt very happy to be home with baby
- Returning from leave
 - Many reported no trouble returning back to work
 - Some moms expressed difficulty leaving child
 - Typically start working at reduced hours





Daycare and Childcare

- Lack of childcare is greatest barrier to work and school
 - Expense of daycare
 - No one available to watch children
- Often the grandparents or other family members (e.g. siblings, aunts) helped with childcare
- Daycare vouchers were helpful but not easy to acquire





Co-Parenting

- Few participants were co-parenting with biological parent
- Some children had visitation with other parent
- For young moms,
 - Dads tended to help out early in child's life but often became less and less involved over time
 - Relationships with fathers often stressful and unhealthy





Resiliency of Single Moms

• 10 participants were single mothers (over half of sample)

"I am mom and I am dad. So I have to look out for her safety and her well-being all the time, and cook dinner and laundry and everything." (young mom, age, 216)

"Being a single mom is not easy. It's not easy at all. But I can do it. There is something every day that makes me smile about him. And as frustrating as it can be. As much as it makes me want to pull my hair out, there is something every day." (young mom, age, 210)





Housing Instability

- 3 moms were living with their children in homeless shelters at time of interview
- Some had been homeless with their children in the past
- A handful experienced homelessness before becoming parents
- The majority of parents have experienced housing instability (homelessness, moving frequently, unstable living circumstances) at some point in their lives





Parenting while Living with SMHC

- Understanding the need to take care of oneself first
- "I need to take care of myself so I can take care of [my son]" (age, 218)
 - Take medication consistently
 - Go to therapy, learn coping skills
- Many are aware of how their SMHC symptoms affect them as a parent
 - Worrying about child, overthinking
 - Low-energy, not playing with children as often
 - Irritability, less patience
 - Feeling triggered by child's behavior
- Exhaustion from parenting can affect mental health





Children as Motivators

Caring for children can be a motivating force that helps some young parents:

- Get out of bed when depressed
 - "When I get like that, I just want to sleep and lay there and take care of my kids. I don't want to get up... But I do. It's probably a good thing I have kids." (174)
- Overcome suicidal thoughts
- Avoid hospital stays
 - "I came home, put my foot down, and kind of did what I had to do. Because honestly, I don't want to leave my kids. Nobody will take care of them the way that I do." (174)
- Stay sober





Children as 'Grounding'

Feeling purposeless when away from child

"I was just like really depressed. I was in a trance. I didn't feel like myself. Not without my kid... And like there's no one asking me to cook them meals during the day or do anything for them...I'm not accountable for anything."

Becoming a better person because of child

"I definitely feel like she changed me...Before I used to surround myself with bad friends and do dumb stuff... I don't know how someone can pop out a child and just start leaving them everywhere. Go out and drink and do all that."





Pride in Parenting

- Participants expressed great pride in their healthy parenting techniques
 - Ensuring child feels loved
 - Promoting child's self-confidence
 - Helping child learn and understand new things
 - Being consistent with child, offering them stability

Parents experienced joy in observing their children being "good kids"

behaving nicely,showing their intelligence







JENNIFER'S STORY





Jen's Personal Statement

"Being a young adult parent has been to say the least a journey. I have faced the good and bad but it has just made me stronger and my relationship with Emily has blossomed over the last 6 years. From being stigmatized by having a mental health condition and being a young parent to balancing everyday life dynamics has only made me a stronger person and mother to my little girl. It's hard but each day I get up knowing I have a little girl to worry about and raise to be the best person and

mother I can be."





Background

- Became a parent at 21
- My daughter
 - Emily
 - 6 years old in December
- Work history
 - Employed at the Transitions RTC for 7 ½ years
- Mental health history
 - Diagnosed with depression/anxiety & bipolar disorder at 12







Balancing Work and Parenting

- Missing many days of work due to childcare
 - Emily being sick
- Making sure all of my daughter's needs are met
- Financial burdens
 - Daycare and after school programs are expensive







Co-parenting

- Challenges coming to an agreement, one of the most difficult things as a young adult parent
- Visitations holidays, birthdays, school vacations
- Child support







Social Challenges

- Making new friends
- Going out and having a social life
- Maintaining relationships







Stigma & Disclosure as a Young Parent

- Disclosing a mental health condition can be extremely stigmatizing
- It is difficult to know what/when to disclose
- Hesitant to disclose to providers, especially Emily's providers
- Fear of losing my child







Having a Child is Life Changing

 Parenting is a 24/7 job non-stop, around the clock



- Huge responsibility to look after another life
- Accommodating your life to your child





Being a Parent is Rewarding

- Emily has changed my life since day 1
- Despite everything, I am
 so grateful to be her mom







RESOURCES





MA Resources

• Family Resource Centers (FRCs):

https://www.frcma.org/

 Southbay Mental health: https://www.southbaymentalhealth.org

Pernet Family Services:
 http://www.pernetfamilyhealth.org/

Employment Options Clubhouse
 https://www.employmentoptions.org



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National Resources

http://www.nationalparenthelpline.org/



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