The impact of career guidance on the mental well-being of young people

Dr Pete Robertson
Briefing Paper

Summary

• Mental health conditions have relatively early onset compared to other major disease categories, and therefore have the potential to cause distress and negative economic impact throughout a person’s working life.

• Youth is a period of complex and prolonged transition, during which there is exposure to mental health risk factors. Youth unemployment may lead to both economic and health scarring with negative consequences that can endure long into adulthood.

• Risks to mental health are not borne equally by all sectors of society. Young people in socio-economically disadvantaged communities are most vulnerable.

• Career guidance has a number of features likely to promote positive well-being, including recognising strengths, a focus on the future, setting achievable goals, and building a social identity through work.

• Career guidance resembles counselling in terms of providing one-to-one attention, and a safe space to young people to share their concerns. It may therefore offer some of the short-term well-being benefits of personal counselling.

• More importantly, career guidance supports people to access decent work, and education or training opportunities that provide access to a source of income, social contact, purposeful activity, and some healthy challenges.

• Where the choice of career pathway is informed by good guidance, work is more likely to be rewarding, consistent with an individual’s needs and values, and as a result more likely to be sustainable over time.

• Career service organisations have access to the key target youth populations for public mental health interventions.

• Career guidance can be embedded in programmes to support unemployed youth, and is likely to complement psycho-educational interventions designed to promote resilience.

• The goals of public policy for career service organisations should encompass the promotion of mental health and well-being.

• Assessing the extent of impact of career guidance on well-being is not easy, because it is a modest scale intervention that is difficult to disentangle from its context. Large sample, longitudinal research is required to generate this evidence.

Introduction

According to international policy sources, career guidance is typically understood by governments as a service delivered in pursuit of three categories of policy goals:

1. Economic goals: improving the functioning of the labour market
2. Educational goals: promoting lifelong learning and informed choice of study
3. Social equity goals: promoting equality of opportunity and social mobility

Whilst this framework describes reasonably well how governments think about career guidance, it also demonstrates the widespread neglect of health outcomes. This paper will focus on the potential for career guidance to contribute to the mental health and well-being of young people. It will outline the reasons for concern, the potential contribution of career guidance, and make recommendations. Young people in the age range 15 – 25 years will be the primary focus of interest.

Youth mental health and economics

In the region of 1 in 10 children and young people have a diagnosable mental health condition. Of the main categories of illness affecting the working age population (e.g. cardio-vascular; muscular-skeletal), mental health conditions have the earliest average age of onset. They frequently arise in the teenage years or early adulthood, and may recur throughout adulthood. For this reason, there is the potential for major economic impact in terms of:

• absence from work
• reduced productivity at work
• claiming of sickness related working age benefits
• increased demand for health and social care services

A health economics perspective would suggest that it is particularly important to manage mental health conditions, because their impact on an individual’s contribution to the economy potentially extends throughout their working life. The economically based arguments do not diminish concern for the alleviation of distress as a valuable goal in its own right; rather it adds weight to the compassionate motivations for managing mental health.

Unemployment and mental health

Unemployment is known to be associated with an increased prevalence of symptoms of common mental health conditions. There are persuasive reasons to believe that unemployment is a major causal factor in mental ill health, as longitudinal studies tracking the impact of redundancy and re-employment have shown. This does not preclude the possibility of reverse causality: people with mental health conditions may be at a disadvantage when seeking or trying to retain work, particularly in a competitive labour market. Some evidence suggests men are more vulnerable than women, perhaps because of a strong cultural association between work and male social identity.
Health scarring and young people

Adolescence and young adulthood may be a critical period in the lifespan for the establishment of sound mental health. It is a period of neuro-biological change, and some have argued that permanent vulnerabilities may result from anxiety and depression causing structural change to the brain.

As youth to adult transitions have become prolonged in contemporary society, this potentially extends exposure to the social challenges and health risks associated with this period of life. e.g. experimentation with alcohol, drugs and sex; stress in trying to achieve economic independence; difficulty in establishing a stable supportive peer group. Youth is a period of exploration, frequent change and struggle to establish an adult social identity: unemployment may undermine this process.

There is an emerging body of work which suggests that youth unemployment may have a ‘scarring’ effect, that is a permanent impact on labour market outcomes, including reduced earnings, and employment security. There is evidence to suggest a health scarring effect too. Longitudinal research, most notably from Scandinavia, has tracked the impact of youth unemployment and found negative effects (on outcomes such as mental health, smoking and alcohol use) that endure over decades into middle age.

The evidence relating to whether training or employment support programmes for young people reduce this problem is rather limited. Nonetheless, there is some reason to believe impacts may be partially ameliorated by effective provision in education, training and the welfare benefits system where work is unavailable.

Health inequality

There are socio-economic gradients in the experience of symptoms of common mental health conditions. Whilst concern often focuses on university students, who face many pressures including financial issues, they are not necessarily the only vulnerable group. Young people with limited educational and economic resources to draw upon are disadvantaged both in terms of their career development, and in their exposure to threats to mental health. Young people who are not in education, employment or training are particularly at risk.

Adolescence and young adulthood may be a period in which health inequalities begin to become established.

Youth unemployment as a public health concern

Youth unemployment levels are typically higher than for adult workers. The youth labour market is limited in scope, and particularly sensitive to additional pressures such as regional economic decline or the effects of economic shock (such as the banking crisis of 2008). Public health experts have been forthright in identifying access to good quality work and learning for young people as a key area of concern. These sources are very clear that there are social causes of poor mental health. They are equally vocal in calling for social action to remedy these problems, including reforms of education and employment policy.
A rationale for the value of career guidance

There are two main reasons why career guidance may contribute
to mental well-being: it may offer short term positive impacts
associated with the experience of engaging with guidance; and it may offer enduring benefits associated with facilitating
participation in good quality work and learning 39.

To some extent, career guidance resembles personal counselling
and provides comparable benefits through supporting individuals
with the problems they face 39. It does so in a non-clinical, solution-focused way, in contrast to the symptom-focus of most talking
therapies. More specifically career guidance encourages people to:
• recognise their own strengths and build on them
• focus on the future
• envisage a desirable but attainable lifestyle and identity
• work out what is important to them
• set achievable goals

All of these features are conducive to promoting well-being. There
is good evidence that career guidance can have a positive effect on
relevant psychological variables 39. It is less clear that these effects
are enduring over time, as there is a lack of longitudinal evidence.
Short term impacts on well-being maybe adequate to facilitate an
individual taking action to improve their circumstances.

More powerful effects are likely to be indirect: through the support
career guidance provides to enable people to access opportunities.
Participation in work and learning is associated with psycho-social
benefits. Career guidance may offer advantages over other types
of employment support service in this respect, because it seeks to
help people:
• select opportunities in education and training thoughtfully
• choose work that they will have an enduring interest in
• access lifestyles that are personally and economically sustainable
over time

Career guidance is not necessarily a free-standing activity. It is
often embedded within education or training. In these settings it
can complement other interventions to promote mental health,
such as psycho-educational programmes, based on cognitive
-behavioural therapy, to manage stress or promote resilience.

Career guidance as a public health intervention

Reduced levels of mental health conditions in young people is
highly desirable as the potential gains in well-being to individuals
and economically to society are very substantial. Public health interventions seek to do one or more of the following:
• prevent the onset of a condition
• reduce its duration; delay or prevent its re-occurrence
• ameliorate its severity and impact on functioning

Career guidance is for all young people; not just for the unwell.
Public health interventions can be aimed at a whole population,
and seek to make minor shifts in the distribution of risk factors
across the population. The effect of such interventions is
disproportionately to the benefit of those on the cusp of suffering
health detriment: reducing the risk factors they face can prevent
the onset of mental health conditions.

Two problems must be overcome to have an impact. Firstly, the
compartmentalization of public health action into the National
Health Service. There is a need to recognise that education and
employment policy can directly address the social causation of
mental health conditions 40.

Secondly, public health interventions have to be able to reach
people, and often those most in need are hardest to reach. Here
career guidance services have an unrecognised asset 41. They
can potentially reach all young people in schools and colleges,
so can actively support them to avoid unemployment. They also
work with young people who are unemployed, and support
them to access work or learning. This can shorten periods of
unemployment, and therefore reduce exposure to health risk. In
the case of Scotland and Wales, both functions are performed by
the same organisation.

Recommendations

• Public policy in relation to career guidance services should be
developed not just with economic, learning and social equity
goals in mind, but also with consideration to the potential
contribution to health goals. The prevention and amelioration
of the mental health scarring effects of youth unemployment
represents a priority area for action.

• The impacts of career guidance services are difficult to
disentangle from the wider social economic and educational
context within which they are delivered. A focused research
effort is required to generate the evidence to identify the most
impactful approaches. This should ideally be large sample,
longitudinal, quantitative research making use of comparison
groups. This should be combined with more in-depth qualitative
research with focused samples.

About the author

Pete Robertson is a qualified career adviser and chartered
psychologist. His doctoral research focused on the
impacts of career guidance on mental well-being, and he has
subsequently published on this topic, specifically in relation
to public mental health, health inequality and youth
unemployment.

Dr Pete Robertson
Associate Professor/Head of Social Sciences
Edinburgh Napier University, Sighthill Campus,
Edinburgh EH11 4BN
email: p.robertson@napier.ac.uk
web: www.napier.ac.uk/people/peter-robertson
References (Endnotes)


