

Professional Practice Guidelines for Integrating the Role of Work and Career
Into Psychological Practice

Task Force of the Society for Vocational Psychology
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Introduction

Work and career hold a central role in the lives of most adults and adolescents (Blustein, 2008; Fouad, 2007; Juntunen, 2006). The centrality of work can be documented in many ways with one of them being the simple fact that most adults will spend more time engaged in work than in any other waking activity. A person working full-time for 40 years, assuming a 40-hour work week and two weeks of vacation, will spend 80,000 hours in vocational activities. Work is also central in the various functions it plays and the multiple needs it meets for individuals, families, and society at large. Clearly, employment compensation often provides the means for meeting basic life necessities such as food and shelter. Work also has important psychological meaning. As articulated by Blustein (2006), work (a) provides people with a sense of identity, (b) has unique personal meaning to each individual, (c) allows individuals to contribute to the welfare of their social and cultural groups, and (d) is a constant that connects us to other human beings. However, the role of work in psychological theory, practice, and research has had a complex history (Blustein, 2006, 2008; 2012) where work-related issues are often dismissed or disregarded.

One of the reasons that psychologists need professional practice guidelines regarding work is that there exists significant evidence that vocational satisfaction is positively related to satisfaction in other areas of life (Swanson, 2012). Multiple studies conducted over the last 50 years have found consistent correlations between job satisfaction and life satisfaction (Moser & Schuler, 2004; Judge & Watanabe, 1994; Tait, Padgett & Baldwin, 1989), although, of course, this does not imply one causes the other. Furthermore, individuals who report a satisfying work life also report greater happiness and fewer psychological problems (Fritzsche & Parish, 2005; Heller, Judge, & Watson, 2002; Swanson, 2012).

Work also promotes well-being by serving a protective function for aversive life events and experiences. The attainment of work has been shown to correlate negatively with criminal activity (Crutchfield & Pitchford, 1997; Sampson & Laub, 1993, Shivy & Guion, 2012), substance abuse (Bellair & Roscigno, 2000), and other mental health concerns (Keyes & Waterman, 2003; Swanson, 2012). This is particularly critical for youth, a group for which unemployment is associated with several risk factors (Baron, 2001). Involuntary unemployment, among both youth and adults, is associated with numerous negative health outcomes, including increased depression and anxiety (Paul & Moser, 2009). Furthermore, these negative consequences are exacerbated with time such that those who experience long-term unemployment are more likely to suffer (Herbig, Dragano & Angerer, 2013). Underemployment, which can include working in a position that under-utilizes one's skills or knowledge, and/or being employed at a lower level or at a lower rate of pay (Feldman, Leana, & Bolino, 2002), is another area worthy of attention by psychologists. Although infrequently the focus of empirical study (Swanson, 2012), there is emerging evidence that underemployment also has important implications for well-being (McKee-Ryan, Virick, Prussia, Harvey, & Lilly, 2009; Rosenthal, Carroll-Scott, Earnshaw, Santilli, & Ickovics, 2012).

Although it is clear that work and career play a critical role in the lives of the general population, the relationship between working and psychology has not always been clear (Richardson, 2012). The substantive empirical and theoretical work in the field of vocational psychology often is not fully integrated into psychological training programs outside of industrial organizational and counseling psychology. Career development is rarely addressed in developmental courses (Vondracek, 2001), and scholars in vocational psychology are rarely cited by scholars in other areas of psychology, even when there is considerable overlap (Fouad & Jackson, 2013). Furthermore, there is evidence that psychologists frequently ignore work issues during intake sessions (Gelso et al., 1985; Vargo-Moncier & Jessell, 1995) and in the provision of psychotherapy (Rogers & Whiston, 2014). Given the centrality of work to the lives of individuals, it is suggested that psychologists in most applied fields develop the skills necessary to work effectively with vocational issues and acquire knowledge of the empirical support for vocational interventions. Further, it is important to recognize that the intersection of work with the behavioral, emotional, and physical aspects of health makes it likely that work-related concerns can emerge in multiple settings, and are not limited to psychotherapeutic services that are identified specifically as career counseling or vocational psychology. In fact, to overlook the impact of work and career development across domains and settings is inconsistent with the basic ethical principle of Beneficence and Nonmaleficence (Principle A) and the Ethical Standard of Competence (Standard 2) of the *Ethical Principles of Psychologists and Code of Conduct* (American Psychological Association, 2010), as both require that psychologists use their established base of knowledge to provide the best service possible. Given the rich support for the efficacy of occupational interventions, as documented by Whiston and Rahardja (2008), and the evidence that vocational well-being heavily influences emotional well-being (Blustein, 2008), vocational factors must be considered vital to the welfare of clients.

Definitions in Vocational Psychology

Since the early 1900s (Parsons, 1909), career interventions, defined as “any treatment or effort intended to enhance an individual’s career development or to enable the person to make better career-related decisions” (Spokane & Oliver, 1983, p. 100), have focused primarily on the role of work in the lives of individuals (Blustein, 2006). Career development occurs across the lifespan and it is affected by both personal and contextual factors that contribute or result in work activities or occupational attainment (Gottfredson, 1981; Super, 1957; Vondracek, Lerner, & Schulenberg, 1986). Historically, career has been defined as “a sequence of positions held during the course of a lifetime” (Super, 1980, p. 282). A more recent definition acknowledging the increased complexity of career sequencing and suggests that “careers typically involve instances of boundary-crossing, periods of organizational focus, and times of attraction or devotion to, or flight from, particular roles, organizations, occupations, industries or locations” (Inkson, Gunz, Ganesh & Roper, 2012, p. 331). These definitions reflect an emphasis on career choices across time, including the need to adjust to changes and problems that might arise.

Recently, several theorists have identified some limitations with previous definitions of vocational psychology and career, particularly noting that the emphasis on choice and the assumption that some career development theories might ignore the reality of people who do not have the access to resources that might afford such choices (e.g., Blustein, 2006). Consequently, recent definitions have focused more attention on contextual issues, including labor market factors and work-related barriers such as discrimination, lack of role models, and ageism. Walsh and Savickas (2005) proposed that vocational psychology be redefined as

a field, comprised of theory, intervention, and research practices, that is committed to the importance of work and relationships in people's lives, to helping people live healthy and productive lives, and to social justice, especially with respect to providing access to opportunity for those marginalized or disadvantaged due to social locations such as gender, race, and class, [as well as age, sexual orientations, gender expression, incarceration, and unemployment] (p. 59).

Additionally, other vocational psychologists (Blustein, 2006; Richardson, 2012) have suggested that "working" may be a better descriptor than "career", which implies choice and opportunity. In contrast, working can be defined as energy, activity, and effort in tasks that contribute to the economic and social welfare of society, including both paid and non-paid work (Blustein, 2006).

For the purposes of these guidelines, knowledge of factors affecting both work and career are considered fundamental to competency in professional psychology. While work may be more universally experienced than career, many clients will present concerns about both, and there exist rich and informative literature on both that can guide the practice of many psychologists.

Goals and Scope of the Work and Career Guidelines

The term "Guidelines" refers to pronouncements, statements or declarations that suggest or recommend specific professional behavior, endeavors, or conduct for psychologists (APA, 1992). These guidelines are intended for applied psychologists who are service providers. Within the American Psychological Association (APA), there are two types of guidelines (i.e., clinical and professional practice guidelines). These are professional practice guidelines as they provide suggestions for applied psychologists related to the broad area of career and work and do not focus on a specific diagnosis, which is characteristic of clinical practice guidelines. As stated by APA (2015), "The term *guidelines* refers to statements that suggest or recommend specific professional behavior, endeavor, or conduct for psychologists. *Guidelines* differ from standards. *Standards* are mandatory and, thus, may be accompanied by an enforcement mechanism; *guidelines* are not mandatory, definitive, or exhaustive. *Guidelines* are aspirational in intent. They aim to facilitate the continued systematic development of the profession and to promote a high level of professional practice by psychologists. A particular set of *guidelines* may not apply to every professional and clinical situation with the scope of that set of guidelines. As a result, *guidelines* are not intended to take precedence over the professional judgments of psychologists that are based on the scientific and professional knowledge of the field (Ethics Code, Std. 2.04)" (p. 824). Practice guidelines are intended to be consistent with ethical practice, as defined in the *Ethical Principles of Psychologists and Code of Conduct of the American Psychological Association* (APA, 2010). In the event of a conflict with the Ethics Code, adherence to ethical conduct takes priority. In addition, federal or state laws may supersede these Guidelines, particularly those related to employment law. Practitioners need to be aware of both federal laws that affect employment and unemployment, as well as relevant state laws governing employment and unemployment.

The interventions, assessments, and theories of vocational psychology are rooted in a substantive and empirically-supported knowledge base that can inform professional psychologists across specialty areas. The integration of theory, research, and practice in career

interventions is central to understanding current interventions (Sampson et al., 2014). There are several meta-analyses and reviews that have documented the effectiveness of career counseling (Brown, 2015; Brown & Ryan Krane, 2000; Oliver & Spokane, 1988; Spokane & Oliver, 1983; Whiston, Sexton, & Lasoff, 1998). Furthermore, Whiston, Brecheisen, and Stephens (2003) found that interventions that involved professional assistance were significantly more effective than counselor-free interventions. Hence, substantial research has been conducted regarding career interventions that can serve as a foundation for clinical work. Attention has also been paid to factors that support client readiness for successful interventions (Sampson, McClain, Musch, & Reardon, 2013). Consistent with the goal of integrating empirically-supported interventions into the repertoire of practicing psychologists, the following Professional Practice Guidelines are based on extant effectiveness studies and provide recommendations for psychological practice, although they are not based on a thorough, systematic review of all relevant literature.

Purpose

The specific goals of these Guidelines are to provide psychologists with: (a) the rationale and needs for addressing vocational behavior and the meaning of work in professional practice, (b) an introduction to the major issues in understanding vocational behavior and development and the world of work, and (c) specific recommendations for working effectively with work and career issues as they interface with multiple aspects of human behavior and functioning. These Guidelines are written specifically for psychologists working with clients or patients and provide guidance for clinical interventions related to work and career. These Guidelines are not intended to provide directions for interventions with organizations and industries but rather focus on the clinical aspects of working with individuals.

Background

This document is comprehensive but not exhaustive in scope. The goals above are addressed through presentation of six guidelines, each of which consists of specific recommendations for practice. These Guidelines have been developed through the collaborative efforts of many specialists in vocational psychology, but are not assumed to have addressed every possible situation or important variable. The writing team was augmented by a larger group of specialists in vocational psychology who identified key, recent, and relevant literature to include in each guideline, which were then critically reviewed and chosen by the writing team. This is a dynamic document that can be expected to change and evolve over time, as new research, practice, and theoretical implications emerge. Therefore, these guidelines will be in effect for 10 years. Ten years was selected as the term for these guidelines as over the last few decades there has been consistent and substantial research published each decade in this career and vocational area. This document is scheduled to expire [*insert date which will be 10 years from approval by APA*]. After this date, users are encouraged to contact the APA Practice Directorate to confirm that this document remains in effect.

The Guidelines

Guideline #1: Psychologists strive to have an awareness of the pervasive impact of work on an individual's identity and quality of life.

Guideline # 2: Psychologists are encouraged to be aware of the influence work has on behavioral, emotional and physical health, as well as the influence of health on work.

Guideline # 3: Psychologists are encouraged to understand the role of work transitions across the lifespan.

Guideline # 4: Psychologists strive to understand how cultural, individual, and role differences, including those based on age, gender, gender identity, geographic location, race, ethnicity, culture, national origin, socioeconomic status, religion, sexual orientation, disability, and language, may influence the pursuit and experience of work..

Guideline # 5: Psychologists strive to understand how the individual negotiates multiple life roles, including that of the worker.

Guideline # 6: Psychologists strive to understand how economic and social factors impact opportunities for and barriers to employment, and subsequently alter one's career trajectory.

Guideline #1: Psychologists strive to have an awareness of the pervasive impact of work on an individual's identity and quality of life.

Rationale.

Work has been identified as an essential aspect of life from both psychological and anthropological perspectives (Furnham, 2001). Blustein (2008) argued that the nature of working is inextricably linked to humans' evolutionary past, in which our survival was, and to an extent still is, dependent on our abilities to secure food, shelter, support, and protection. A number of distinguished vocational psychologists (e.g., Richardson, 2012; Schultheiss, 2006) have noted the degree to which vocational and work-related issues are embedded in many individuals' lives. As an example, satisfying employment is related to both mental and physical health (Jin, Shah, & Svoboda, 1995; McKee-Ryan, Song, Wanberg, & Kinicki, 2005).

Despite the centrality of work and the importance of vocational development, many applied psychologists and developmental psychologists have limited knowledge of theories and research related to vocational development (Vondracek, 2001). Richardson (2002) asserted that vocational development is an essential component of lifespan development and that human development cannot be understood without awareness of vocational development.

Related also to vocational development is the concept of identity formation, and several researchers have found that vocational issues play an important role in identity development (Hartung & Subich, 2011). There are indications that identity development and vocational exploration are significantly related to each other, such that well-developed career interests are associated with a strong sense of identity (Borgen & Betz, 2011).

Blustein (2006) has suggested that work plays a significant role in social connectedness and self-determination (Deci & Ryan, 2002), as well as survival and power. There are people for whom work provides a sense of purpose and identity; whereas, for other individuals work is unsatisfying and grueling. Some individuals struggle with the absence of connectedness and meaningful relationships in the workplace, which results in a sense of isolation and alienation (Schultheiss, 2006).

The normalcy of working is often an aspiration of individuals with significant mental or physical illnesses (Pryce, 2013). Although holding either a full- or part-time job may be difficult for those with severe mental or physical illnesses, there is evidence that work continues to be a stated priority for these individuals (Auerbach & Richardson, 2005; Kirsh, 1996). However, severe mental illness may impact career decision-making, performance at work, and

interpersonal relationships at work (Swanson, 2012). Although work-related issues may be seen as a secondary concern for those with severe mental illness, work may help to moderate the effects of the mental illness (Pryce, 2013). For example, financial concerns could exacerbate severe mental illness and work may play an ameliorating role in overall functioning (Guindon & Giordano, 2012). Work-related relationships may also provide social support for some clients with severe mental illness, or serve as a source of identity for others.

An understanding of the interplay among vocational factors and other psychological domains is an essential foundational competence for many psychologists and is particularly relevant to applied psychologists. Understanding the pervasive impact of vocation on an individual provides valuable information, but a practitioner is encouraged to also be knowledgeable and skilled regarding the specific interventions relevant to the client's presenting concern.

Application.

When conducting psychotherapy, assessments, or other psychological interventions with adults, psychologists are encouraged to explore the client's current work situation, past employment history, and vocational aspirations. As employment, underemployment, voluntary unemployment, and involuntary unemployment contribute to behavioral health, psychologists strive to thoroughly assess vocational factors (Juntunen, 2006). As such, psychologists are encouraged to:

1. Be aware of strategies for assisting individuals in clarifying their vocational identity or self-concept. Vocational identity refers to the view one has of one's self as a worker (Skorikov & Vondracek, 2011). Tokar, Hall, and Moradi (2003) defined vocational self-concept crystallization as the "extent to which one has a clear sense of one's own, vocationally relevant aptitudes or abilities, interests, and attitudes" (p. 26). Therefore, psychologists are encouraged to be proficient in clinical skills related to the exploration of abilities, interests, and attitudes.
2. Attend to the importance of clients' attributions regarding self and the world of work (Blustein, 1994; Duffy & Dik, 2009; Meijer, 1998; Schultheiss, 2006). Practitioners can reshape a client's work conceptualization (Schultheiss, 2006), reframe expectations for work, and help clients find purpose and meaning in their work (Duffy & Dik, 2009). Perceptions of work as meaningful have been linked to psychological well-being (Arnold, Turner, Barling, Kelloway, & McKee, 2007; Britt, Adler, & Bartone, 2001; Swanson, 2012). Identifying the goal of obtaining or maintaining meaningful work is therefore likely to be relevant to many treatment plans. Psychologists, however, are encouraged to be aware of their own biases concerning what constitutes meaningful work and ensure that they are sensitive to clients' conceptualizations of purpose and meaning in work.
3. Be able to understand and identify sources of work satisfaction as well as targets for interventions for those who are experiencing work-related dissatisfaction (Eggerth, 2015). Lent and Brown (2006, 2008) identified several common factors associated with work dissatisfaction, such as failure to attain expected work outcomes, exposure to adverse working conditions, and low self-efficacy related to work achievement. The Theory of Work Adjustment (Dawis, 2005) considers both satisfaction and

satisfactoriness, addressing the interaction of employer expectations and employee needs. Upon assessing work factors contributing to work dissatisfaction, practitioners can design interventions that assist individuals in ameliorating their unique struggles.

4. Given the reciprocal relationship between job and life satisfaction, psychologists are encouraged to be aware of factors that may be contributing to the interplay between job and life satisfaction. Judge and colleagues (Judge, Parker, Colbert, Heller, & Ilies, 2002; Judge & Larsen, 2001) found that dispositional factors may contribute simultaneously to work and life satisfaction. Therefore, psychologists are encouraged to be skilled in assessing both positive and negative affectivity and analyze how these dispositions relate to both work and life satisfaction. Further, psychologists are expected to integrate cultural identities and socioeconomic factors that influence this interplay for under-represented individuals and others subject to discrimination (Blustein, 2013).
5. Be aware of the role of work as a source of social support and as a means to bolster resilience for many clients, including those with severe mental illness. Work-related concerns may prevent mental health concerns, may help to moderate mental health concerns, or may be addressed in conjunction with other mental health treatments (Guindon & Giordano, 2012; Robitschek & DeBell, 2002).

Guideline # 2: Psychologists are encouraged to be aware of the influence work has on behavioral, emotional, and physical health, as well as the influence of health on work.

Rationale.

The separation and integration of work and “personal” issues has been thoroughly examined in counseling psychology, with most scholars agreeing that treating work and personal issues separately creates an artificial dichotomy (Hackett, 1993, Richardson, 2012, Swanson, 2012). Yet practicing psychologists often overlook work concerns in their treatment and case conceptualization (Axelrod, 1999; Blustein & Spengler, 1995; Rogers & Whiston, 2014). Although the reasons for such oversight are not completely clear, several contributing factors have been identified. Pinkney and Jacobs (1985) found psychologists-in-training tended to rank their willingness to work with career concerns significantly lower than personal concerns. There may also be a perception among psychologists and students that work issues are not as important or “serious” as other personal issues (Blustein & Spengler, 1995; Gelso et al, 1985; Heppner, O'Brien, Hinkelman, & Flores, 1996). Finally, some may perceive career counseling as being a “test-and-tell” exercise, rather than meaningful psychological work (Brown & Ryan Krane, 2000), and such perceptions appear to impact the quality of services provided to clients. Research indicates that individuals seeking assistance related to vocational issues do not differ from those seeking other types of psychotherapy in terms of the types of problems they are experiencing (Lucas, 1992), levels of emotional discomfort (Gold & Scanlon, 1993), or degree of adjustment (Lewis, 2001). Furthermore, Multon, Heppner, Gysbers, Zook, and Ellis-Kalton (2001) found the majority of individuals seeking vocational counseling reported significant psychological distress.

Both individual and aggregate studies suggest that involuntary unemployment has a deleterious impact on psychological and physical well-being (McKee-Ryan et al., 2005). In a review of the impact of involuntary unemployment on well-being, Jin et al. (1995) demonstrated that studies at the aggregate level associate involuntary unemployment with poor mental health

and mortality. Cross-sectional and longitudinal studies have demonstrated a negative impact of involuntary unemployment on both physical and psychological well-being (McKee-Ryan et al., 2005, Swanson, 2012). Underemployment and unemployment have both been identified as contributing to poorer health outcomes among urban men and women (Rosenthal, Carroll-Scott, Earnshaw, Santilli, & Ickovics, 2012). In a meta-analysis of 237 cross-sectional and 87 longitudinal studies, Paul and Moser (2009) concluded that there are significant mental health consequences of involuntary unemployment, and they found significant difference between employed and unemployed individuals in regards to depression, anxiety, subjective well-being, and self-esteem. In addition, they found a small effect size for psychosomatic symptoms suggesting that employment has some influence on physical health.

Long-term unemployment also has particular health impacts. Summarizing findings from German samples, Herbig, Dragano and Angerer (2013) concluded that long-term unemployment, defined as having been out of work for more than one year, is both a cause and effect of physical and mental illness. They found that long-term unemployed individuals were twice as likely to have a mental illness, had higher risks of heart attack and stroke, and had higher mortality rates than employed individuals. Interestingly, most of the current research examining long-term unemployment is being completed with samples in Europe and Australia, suggesting that little may be known about the experience of long-term unemployment in the U.S. However, the U.S. Department of Labor defines long-term unemployment as those seeking work for more than 27 weeks. Within this population is a group identified as discouraged workers. The Bureau of Labor Statistics (2014) notes that discouraged workers includes “those who did not actively look for work in the prior four weeks for reasons such as thinks no work is available, could not find work, lacks schooling or training, employer thinks too young or old, and other types of discrimination.”

Employment does not yield automatic health benefits for all workers. Broom et al. (2006) found people in poor quality jobs (i.e., those that lacked security and experienced high levels of strain) had higher odds of poor health than employees in better jobs. Furthermore, workers in these poor quality jobs had similar rates of mental health problems as those who were unemployed. In addition, Dooley, Prause, and Ham-Rowbottom (2000) found that young adults’ symptoms of depression increased when they were employed in low wage or involuntary part-time jobs. Both of these studies speak to the stressors related to underemployment (Rosenthal et al, 2012).

In addition to addressing the negative impact of involuntary unemployment or underemployment, a growing body of research highlights the association between job satisfaction, work-related issues, and psychological well-being (Swanson, 2012). In general, there is a significant positive relationship between work satisfaction and life satisfaction (Erdogan, Bauer, Truxillo, & Mansfield, 2012; Heller, Watson, Ilies, 2006; Judge & Watanabe, 1994; Moser & Schuler, 2004). Specifically, job satisfaction is linked to various health-related outcomes, including length of life (Palmore, 1969), burnout (Avanzi, Zaniboni, Balducci, & Fraccaroli, 2014; Maslach, 2003), psychological health (Chung-Yan, 2010), and physical health (Fischer & Sousa-Poza, 2009). Conversely, occupational stress has been linked to a variety of emotional and physical health concerns (Hurrell & Sauter, 2012), which can impact people differentially across the lifespan (Sauter, Streit, & Hanseman, 2009; Zacher, Jimmieson, & Bordia, 2014). The well-documented relationship between work-place stress and health has resulted in the development of occupational health psychology training, a joint effort between

the National Institute for Occupational Safety and Health (NIOSH) and the American Psychological Association (NIOSH, 2013).

The relationship between work and health is, of course, bi-directional, as health issues can be important contributors to work productivity and success. For example, depression has been linked to career indecision (Saunders, Peterson, Sampson, & Reardon, 2000). Other examples include clients with HIV, where the depression associated with the disease impacts work productivity. For psychologists, it is particularly relevant to attend to the influence of emotional, behavioral, and mental health concerns on both access to and success in employment. People with significant psychological concerns can be at a disadvantage in some work settings, particularly those that are high in pressure or stress (Jay & Hersen, 2004). Whether psychological concerns are acute and chronic, they can impact work satisfaction or behavior. For example, Bansal, Monnier, Hobfoll and Stone (2000) found with postal workers that depression and anger were correlated with a perceived loss of workplace social support and workplace resources for women and, to a lesser extent, men. Chronic concerns, such as the influence of physical and psychological disability on work, are of great importance and the complexities of managing this relationship are often overlooked outside the field of rehabilitation psychology (Szymanski, 2000). This becomes a particular concern for individuals with disabling conditions as the U.S. Bureau of Labor Statistics (2015) reported that, in 2014, only 17.1 percent of persons with a disability were employed as compared to 64.6 percent for persons without a disability. Across all educational attainment groups, unemployment rates were higher for persons with a disability than for those with no disability.

The impact of psychological health on work is also demonstrated through the proliferation of Employee Assistance Programs (EAPs), utilized by organizations of many types and sizes (Attridge, 2012). However, even psychologists working outside of EAP programs are likely to be called up at some point to assist a client whose behavioral, emotional, or mental health concerns are impacting his or her work performance. Such assistance may include sharing information with employers to explain a temporary absence or lapse at work, helping clients obtain appropriate accommodations as afforded by the American with Disabilities Act Amendments Act (ADAAA; U.S. Congress, 2008), providing assessment or evaluation information in support of disability or workers' compensation claims, or helping an employee disclose to an employer workplace discrimination related to identity factors such as sexual orientation or race, to name just a few. When sharing client employment information with employers or supervisors, psychologists may need to be cognizant of informed consent procedures and the possible consequences to the client.

Given the interacting influences of work and mental health, the separation of work from personal issues seems counterintuitive to a holistic perspective of psychotherapy. Numerous scholars (Blustein, 2006; Hackett, 1993; Swanson, 2002) have argued that treating work and other personal issues separately creates an artificial dichotomy that does not reflect the intertwined nature of people's lives. According to Meara and Patton (1994), "[clients] cannot compartmentalize their concerns related to self, relationships, or work in order to satisfy some arbitrary definition of a disciplinary subspecialty or a very narrow conceptualization of help-giver expertise" (p. 161), thereby challenging psychologists to be prepared to address the holistic set of concerns presented by clients, including work and vocational needs.

Applications.

Given the demonstrated relationship between work and both health and well-being, psychologists are encouraged to understand and explore the role of work, or planning for work, in the lives of clients. Embedded in this expectation is an understanding of the health consequences of underemployment, involuntary unemployment, or loss of work. To achieve that understanding of the interface of work and mental health, psychologists are encouraged to consider the following strategies as guidelines for practice and include work-relevant information in the initial clinical assessment and continue to consider work issues in conjunction with behavioral, emotional, or physical health concerns (Blustein & Spengler, 1995).

1. Include work satisfaction and workplace stressors in the development of treatment goals. Recognize that changes that occur through treatment may impact work behaviors. Conversely, work and workplace factors can either support or hinder treatment progress. Such potential interactions may need to be discussed with clients as part of the treatment planning process, thereby identifying sources of support and potential barriers to consider in treatment.
2. Select interventions that are common in vocational exploration, including exploring self-knowledge (Holland, 1996) and self-in-representation (Gysbers, Heppner, & Johnston, 2009), recognizing that such interventions contribute to vocational development and work satisfaction, as well as satisfaction in other aspects of life. Use assessment instruments designed to assess knowledge of self, including vocational interests (Hansen, 2005), work values (Rounds & Armstrong, 2005) and abilities (Ryan Krane & Tirre, 2005), which provide useful client information that can be readily integrated into treatment planning. This recommendation assumes evaluation of the instrument's psychometric qualities and that appropriate levels of competency in assessment have been attained, consistent with the American Psychological Association's (2010) *Ethical Principles of Psychologists and Code of Conduct* (see Standards 2.01, 9.02 and 9.06).
3. Attend to individual risks such as low levels of personal coping resources and high degrees of stress appraisal when working with clients who have been laid off and are in need of re-employment or are at risk for involuntary unemployment (McKee-Ryan et al., 2005). Upon noting individual risks, interventions may target threats to personal identity, bolster coping resources, and minimize negative appraisal of job loss.
4. Use empirically-supported interventions related to assisting individuals with issues related to vocational choice. Specific examples include providing individualized feedback on vocational assessments, modeling effective career decision making strategies, and strengthening of support networks (Brown & Ryan Krane, 2000), as well as working with clients to clarify their values and assets (Healy, 2001).
5. Consider the range of variables relevant to both work and life satisfaction when conducting assessments and planning interventions. To enhance practice, various empirically-supported measurements of interests (Hansen, 2005), abilities (Ryan Krane & Tirre, 2005), needs and values (Rounds & Armstrong, 2005) can be assessed and integrated with variables such as personality, self-efficacy beliefs, perceived barriers, and decision-making (Swanson & D'Achiardi, 2005).

6. When communicating with an employer on behalf of a client-employee, psychologists strive to consider the unintended consequences of the communication. To support this consideration, psychologists have sufficient familiarity with both federal and state regulations and statutes related to workplace discrimination and ADA accommodations to help clients understand their workplace rights. Psychologists also use caution in limiting their communication with employers to provide only essential information to ensure that the client's psychological needs can be met.

Guideline 3: Psychologists are encouraged to understand the role of work transitions across the lifespan.

Rationale.

Psychologists are encouraged to understand how individuals learn to make career decisions (Krieshok, Black & McKay, 2009), how they make transitions from school to school, school to work, work to non-paid roles (home care, unemployment, retirement), work to new paid work, and non-work to work (e.g., welfare-to-work, unemployment to employment, retirement to employment). Applied psychologists strive to understand factors involved in normal progressions in career development, as well as the disruptions that may happen during work transitions to better serve clients' mental health.

A number of researchers have found that vocational development begins in childhood and children's experiences influence later development (Hartung, Porfeli, & Vondracek, 2005; Schultheiss, 2008;). Hartung et al. (2005) reviewed research on children's vocational development and found that children as young as 3 to 5 years of age possess rudimentary knowledge about occupations, and this knowledge of occupations typically becomes more comprehensive and detailed as they age. Children's occupational aspirations, however, seem to be influenced by factors such as gender, socioeconomic status, and ethnic/racial differences (Schultheiss, 2008).

Staff, Messersmith and Schulenberg (2009) argued that the larger field of adolescent development has paid insufficient attention to work and career development during adolescence. Whereas in childhood, socialization for work often involves exploration and play related to different occupations, in adolescence, vocational development becomes progressively more complex, and contextual and environmental factors become increasingly more influential. Turner and Lapan (2005) documented the importance of career-development preparation in adolescence; specifically, they highlighted the need to facilitate adolescents' career related self-efficacy expectations and work readiness skills. One of the major social contexts that influence adolescents' vocational development is their family (Whiston & Keller, 2004). Bordin (1994) suggested that one's vocational development, particularly career choice, is not simply a product of an individual's exposure to parents' occupations. Whiston and Keller (2004) noted that families greatly vary; however, they concluded that family structural variables, such as socioeconomic status and parental achievement tend to influence adolescents' career aspirations and expectations. They further found that higher occupational expectations are associated with a supportive family environment that entails high parental expectations for the adolescent. As noted in Guideline 4, other contextual factors, such as race/ethnicity, social class, gender and worldview also affect vocational development.

The interplay between vocation and human development continues through adolescence into adulthood. Adults' vocational development is also influenced by contextual factors and socialization within their working environment (Cohen-Scali, 2003). This process entails an individual's integration into the world of work and the crucial role of social interaction in the workplace. Fouad and Bynner (2008) discussed work transitions across the lifespan such as school to work, work to other work, work to non-work, and non-work to work. Based on the developmental perspective of Erikson (1963, 1968), Fouad and Bynner (2008) noted the importance of adulthood development as individuals negotiate the critical task of being generative during midlife. Involvement with work can facilitate or impair the developmental tasks of adult development and aging based on the developmental perspective of Erickson, (1963, 1968) Fouad and Bynner, (2008) and Smyer, Besen and Pitt-Catsouphes (2009)

Transitions from one type of work or work environment to another can also represent an important task in lifespan development. One common example is the transition made by those employed by the military, given that there are currently more than 20 million veterans in the United States (Rones, 2010). Young adult and midlife transitions are commonly encountered by military veterans who have concluded a period of enlistment or who are transitioning out of a lengthy military career. Their employment transition needs have some unique characteristics. For example, veterans without a college education are more likely to benefit from a broad range of career services than those with a college education, but both groups may need assistance with job placement (Boutin, 2011). The employment needs of veterans are often complicated by mental and physical health concerns related to their service experiences (Cohen, Suri, Amick, & Yan, 2013; Davis, Pilkinton, Poddar, Blansett, Toscano & Parker, 2014), which may serve to delay their transition into civilian work. It is also important to recognize the work-relevant skills and strengths veterans bring to society. The general public often views returning veterans as being mentally unstable, violent, and as abusing substances (MacLean & Kleykamp, 2014), and veterans' attributes as potential employees may be overlooked. Psychologists can therefore be of service in working with veterans to emphasize the ways in which their military experience can translate into civilian work.

Psychologists are encouraged to also be aware of the transitions associated with moving to being an older worker and then moving from worker to retiree (Czaja & Sharit, 2009). It is estimated that by 2020, one-fourth of American workers will be 55 or older (Benz, Sedensky, Tompson, & Agiesta, 2013). Older workers who are looking for employment often find it difficult to secure new jobs. Not surprisingly, the prevalence of disabilities rises with age, which also influences employment opportunities (Burkhauser & Rovba, 2009). Nevertheless, many workers continue to work past the age of 65 because of financial necessity or by choice (Benz et al., 2013). The transition to retirement can be an especially important period for many older adults, particularly those who strongly identified with their work and careers. According to Wang and Shi (2014) retirement is an individual's exit from the workforce, which accompanies decreased psychological commitment to and behavioral withdrawal from work. Although many post-retirees report satisfaction during this stage, research demonstrates increased morbidity and mortality risks post-retirement, including suicide (Bamia, Trichopoulou, Trichopoulos, 2008; Brockman, Muller, & Helmert, 2009; Qin, Agergo, Mortsen, 2003; Schneider et al., 2013). For most individuals, postretirement activities such as bridge employment (Wang, 2007, Zhan et al. 2009), volunteer work (Dorfman & Douglas 2005, Kim & Feldman 2000), and leisure activities (Dorfman & Douglas 2005) are all beneficial to retirees' psychological well-being. For other

individuals, particularly for those with strong career identities, more intensive retirement interventions may be necessary.

Applications.

Psychologists are encouraged to adopt a developmental perspective in helping their clients develop career decision-making skills and the ability to appropriately navigate work transitions through the life span. Psychologists are further encouraged to draw from both therapeutic and psychoeducational strategies to help children, adolescents, parents, and adult clients consider the emotional and psychological aspects of vocationally-relevant transitions. Specific strategies may include:

1. Provide suggestions to parents regarding behaviors and intentions that produce positive career outcomes in children as well as provide them with psychoeducational consultation (Whiston & Keller, 2004).
2. Develop direct intervention programs to facilitate children's vocational development. At the elementary level, tasks should be discrete, concrete, and short when working with early elementary children, and may include field trips, career days, experience kits, personal portfolios, and exposure to a variety of workers and occupations. At later stages this may include expanding the variety of occupational role models to whom adolescents are exposed, providing concrete help in career decision making, and encouraging a variety of exploration activities (Young, Marshall, Valach, Domene, Graham, & Zaidman-Zait, 2011; Young, Valach, Ball, Paseluikho, McLean, & Turkel, 2001).
3. Include exploration of personally meaningful career options and foster vocational identity while attending to the broader social fabric, specifically the interaction of individual vocational development with cultural factors such as gender, sexual orientation, ethnicity, social status, ability, veteran status, and geographic location (Fassinger, 2008; Kosine et al., 2008; MacLean & Kleykamp, 2014). Adolescents could be engaged in structured group activities and dialogues that focus on evaluating career concepts and exploring the meaning that students attribute to personal, social, and work-related constructs. Psychologists may also use biographies, exemplars in novels, jobs in the community, extracurricular activities, and school service projects as means of enhancing adolescents' vocational knowledge (Gysbers et al., 2009; Hartung & Taber, 2008; Niles & Harris-Bowlsbey, 2009; Savickas, 2005).
4. Psychologists may help adolescents, as well as adults, to explore life goals, personal strengths and weaknesses, family expectations, potential barriers, and goal setting related to work. Tasks for adolescents could include community service, job shadowing, co-ops, extern- and internships, and summer jobs as well as formal assessments related to interests, values, and personality (Gottfredson, 1981).
5. Psychologists who are helping adult clients with work-related issues are encouraged to consider the client holistically rather than focusing exclusively on vocational development (Richardson, 2012), and recognize the interplay of work and non-work roles. As noted in Guideline 6, economic factors have significantly changed individuals' career and work security and clients will often have to make a series of career decisions across the lifespan, some of which are significantly influenced by external factors.

Guideline # 4: Psychologists strive to understand how cultural, individual, and role differences, including those based on age, gender, gender identity, geographic location,

race, ethnicity, culture, national origin, socioeconomic status, religion, sexual orientation, disability, and language, may influence the pursuit and experience of work.

Rationale.

Psychologists are encouraged to consider that the context in which individuals make work-related decisions strongly influences both the process and content of those decisions. All clients, racial/ethnic minorities as well as European Americans, operate within a cultural context, and their behavior (including work decisions) is influenced by their gender, racial identity and background, sexual orientation, socioeconomic status, age, and the presence or absence of disability. These contextual influences help to form their environments and their responses to the environment. To be most effective, psychologists are encouraged to explicitly incorporate those contextual factors into their work with clients, approaching each client from an understanding that they may belong to one or more cultures, some of which may be more salient at one time, and less salient at another. However, it is important to note that belonging to a particular culture does not automatically mean that a client will display stereotypic characteristics of that culture. Certainly there is often more within-group heterogeneity than differences between groups. Nevertheless, psychologists are encouraged to understand which cultural and identity variables are salient to the client, including the way those variables intersect. Psychologists are encouraged to consult with the various APA Practice Guidelines in working with various populations to help them work effectively with different groups including the *Guidelines for Psychotherapy with Lesbian, Gay, and Bisexual Clients* (APA, 2012), the *Guidelines for Psychological Practice with Transgender and Gender Non-Conforming People* (APA, 2015) the *Guidelines on multicultural education, training, research, practice, and organizational change for psychologists* (APA, 2003), *Guidelines on assessment and intervention with persons with disabilities* (APA, 2012), *Guidelines for practice with girls and women* (APA, 2007), and *Guidelines for practice with older adults* (APA, 2014).

Psychologists also are encouraged to be aware of several environmental factors that may influence the work decisions of many minority group clients, such as racism, social class, homophobia and heterosexism, ableism, transphobia, sexism, discrimination, geographic location, acculturation, and immigration status. Some clients may be first-generation college students and/or first-generation employment seekers, and might be limited by lack of mentors, opportunities, and/or access to social networks that may impede their access to employment opportunities and success in workplace settings. Psychologists should also consider the possibility of ageism as one in five workers above the age of 50 report having experienced discrimination or prejudice (Benz et al., 2013). Psychologists are also encouraged to understand the role of family in career decision-making, because in some cultural groups, family and geographic location plays a significant role in determining the appropriate career for an individual (Fouad et al., 2010). For these clients, family expectations may be more important than their own interests and values (Fouad et al., 2008). Poverty, poor academic training, and psychological factors related to feeling powerless and unable to plan for the future are realities for many clients (Blustein, 2006; Richardson, 2012; Smith, 2006). Acculturation and immigration status also are important variables to assess, since these factors may affect clients' consideration of various career choices (Flores et al., 2011; Miller & Kerlow-Meyers, 2009). For example, there may be immigrants who are highly trained or well educated who may be underemployed due to factors such as immigration status, language, or other factors.

Psychologists are also encouraged to understand the various meaning of work for clients. For some, work may be a means to survival, a paycheck that pays the rent/mortgage, and buys food. For others, work may be a means to create and sustain relationships. And for still others (including many psychologists), work may be a means to achieving an identity (Blustein, 2006). Psychologists are encouraged to help clients approach career decision-making from within the clients' own cultural contexts (Fouad & Kantamneni, 2008).

Early research on contextual influences in career decision making focused on how gender shapes work decisions (Fouad & Kantamneni, 2008). Indeed, gender influences the interests that individuals express, the careers men and women consider, and the outcomes of those decisions (e.g., pay, satisfaction) (Cook et al., 2002; Fassinger, 2005). Furthermore, the intersection of gender and parental status may contribute to increase difficulty among women returning to the workforce after a leave (Moore, Meiksins, & Root, 2013). While there have been some changes in the gender-stereotyping of occupations, some areas, such as the engineering occupations, continue to be grossly underrepresented by women (National Science Foundation, 2013) and many areas, such as speech and language pathologists, continue to be underrepresented by men (Bureau of Labor Statistics, 2012).

More recently, scholars have examined additional contextual factors on work decisions, such as social class (Blustein, 2006; Diemer & Ali, 2009), family (Richardson, 2012), relationships (Schultheiss, 2006), disability (Rojewski, Lee & Gregg, 2014), and geographic location (Ali & Saunders, 2009). In addition, several scholars (Blustein, 2006; Fouad, 2007; Fouad & Kantamneni, 2008) have urged the field to examine multiple dimensions (e.g., race *and* gender *and* social class) of context. Thus, research in vocational psychology has increasingly emphasized the role of contextual factors in work-related decision-making, attainment, achievement, maintenance, and transitions. Together, these findings provide significant information about the potential for contextual factors to serve as both barriers to and facilitators of vocational development.

Applications.

Given the evidence that contextual factors have a significant impact on work life, psychologists are encouraged to:

1. Develop the understanding and skills to work with clients, students, and research participants from diverse groups (APA, 2003; Chronister, 2006, Fouad & Kantamneni, 2008). This may include gaining an understanding of the role that domestic and international culture play in different groups, how various groups may express cultural values through work, and how work is perceived in various groups.
2. Examine their own contextual factors and values related to work that may impact their reaction to the work values and perspectives of clients, students, research participants and others from diverse groups (APA, 2003; Fouad & Brown, 2000; Smith, 2006).
3. Consider contextual factors in initial assessment of the client's current concerns (Subich, 2005). Psychologists are encouraged to consider that some individuals may rely more on their family than themselves for career choices (Fouad et al., 2008); whereas, in other cultures, career concerns may be an acceptable area to explore with a psychologist, and provide an opening to other areas of concern.
4. Examine with clients work and career options that go beyond traditional gender roles. (Betz, 2006; Fassinger, 2005; Perrone, 2009). Utilize interventions that help children and

adolescents recognize the ways in which gender-role socialization influences the vocational options they might consider (Corrigan & Konrad, 2007; Fassinger, 2008). Such interventions might include challenging sex- or gender-typed descriptors of people holding specific jobs (e.g., police officer versus policeman) and educating children, adolescents and parents about the influence of gender-role expectations (Corrigan & Konrad, 2007).

5. Examine with clients their perceptions and/or understanding of the impact of contextual factors on their current work aspirations, expectations, access, and attainment (Fouad & Byars-Winston, 2005). Help clients understand how contextual factors may have influenced their perceptions of opportunities, and how cultural values may influence career aspirations (Diemer, Kauffman, Koenig, Trahan, & Hsieh, 2006; Fassinger, 2008).
6. Integrate culturally-competent practices into work-related interventions (Byars–Winston & Fouad, 2006). This includes explicitly examining cultural influences on career decisions, on the career counseling goals that clients have, on their perceptions of problems, and the assessment process (Leong & Hartung, 1997). Specific attention could be paid to dominant themes about work that emerge in a client’s narrative. Psychologists are encouraged to consider the notion that society often attributes individualism and separateness to maturity and success (Schultheiss, 2006).
7. Help clients explore barriers in the workplace that may be due to discrimination or other external factors. Psychologists could help clients gain perspective on the aspects of working conditions that may be changed with appropriate advocacy, such as speaking out against discrimination by a co-worker. Conversely, psychologists may help clients assess whether a work settings have difficult entrenched practices that are unlikely to change. In the latter case, it is particularly important to help clients not place the blame on themselves, but to help them explore new work settings and to seek legal consultation when appropriate (Fouad & Kantamneni, 2013). Furthermore, psychologists may assist workers who are experiencing unhealthy workplaces understand the federal and local laws designed to protect them.
8. Use empirically-supported interventions to help clients with disabilities increase their access to the workforce (Ali, Schur, & Blanck, 2011). This may include assessing the meaning and value of work for people with disabilities. It may also be necessary to reach out to employers, with clients’ permission, and provide education about strategies such as supported employment, which have demonstrated success at the individual and organizational level (Gustafsson, Peralta, & Danermark, 2013).

Guideline # 5: Psychologists strive to understand how the individual negotiates multiple life roles, including that of the worker.

Rationale.

Freud (1930) contended that success in work and love is the hallmark of mental health. In the past, however, the domains of work and love often have been researched separately. Blustein (2001) argued that this separation of the worlds of work and family is not consistent with the experiences of people in which aspects of their lives are not neatly cordoned off into distinct segments. In the last 30 years as demographics within the workforce changed, particularly with the dramatic increases in women having paid employment, researchers began to examine the interface between work and family (Barnett & Hyde, 2001; Belliva & Frone,

2005; Fassinger, 2008; Halpern, 2005). In fact, the dual-earner family is now the modal structure for families in the United States (Barnett & Hyde, 2001; White & Rogers, 2000). Whereas the effects of maternal employment has been extensively studied, the results tend to indicate that maternal employment does not detrimentally affect children's achievement and development; however, the results are somewhat complex and depend on family structure, quality of childcare, socioeconomic status, age and gender of the child, time of maternal employment, and maternal attitudes towards work (Goldberg, Prause, Lucas-Thompson, & Himsel, 2008; Lucas-Thompson, Goldberg, & Prause, 2010).

The benefits of multiple roles for both men and women have been well-documented (Super, 1980; 1990), with research findings showing that those who engage in multiple roles as compared to fewer roles tend to report lower levels of stress-related mental and physical health problems and higher levels of subjective well-being (Barnett & Marshall, 1993; Thoits, 2003). Frequently, the multiple roles assumed by individuals involve commitments to work and family. Paradoxically, although there are substantial research findings that support the benefits of multiple roles, the majority of research related to the interface among work and family has focused on conflict between the work and family domains. It should be noted here that our definition of family is inclusive and includes same-sex partners, grandparents raising children, and single-head-of-households.

In the United States, work negatively affecting the family is quite common (Bellavia & Frone, 2005) and work negatively influencing the family is related to decreases in both life satisfaction and job satisfaction (Allen, Herst, Bruck, Sutton, 2000; Kossek & Ozeki, 1998). Hughes and Galinsky (1994) found work-family conflict was predictive of psychological distress and MacEwen and Barling (1994) found it was positively related to anxiety and depression. Furthermore, Frone, Russell, and Barnes (1996) found that work-family conflict was related to depression, poor physical health, and heavy alcohol use. There has also been a substantial research on predictors of work-family conflict. Byron (2005) found that gender was only weakly related to work interfering with family and family interfering with work. One consistent finding is parents tend to experience more work-family conflict than do nonparents (Greenhaus & Allen, 2011; Winslow, 2005).

The interface of work and family does not simply produce negative outcomes, as both work and family can positively influence the other domain. Researchers have found that work-to-family facilitation (i.e., when work enhances or enriches family life) is related to enhanced mental and physical well-being, lower levels of problem drinking (Grzywacz & Bass, 2003; Grzywacz & Marks, 2000), and greater organizational satisfaction and effort (Wayne, Musisca, & Fleeson, 2004). Work-to-family facilitation appeared to assist clients in coping with anxiety disorders (Grzywacz & Marks, 2000) and decreasing depressive symptoms (Hammer, Cullen, Neal, Sinclair, & Shafiro, 2005). In terms of family-to-work facilitation, Greenhaus and Powell (2006) noted that support received from a family member was related to career success, career development, and satisfaction at work. Therefore, both work-family conflict and facilitation are of interest to practicing psychologists.

Applications.

Psychologists are encouraged to integrate family relationship dimensions and broad-based conceptualizations of work and career development so that psychological practice reflects the interwoven nature of work and family. It is suggested that psychologists:

1. Integrate clients' work-family lives into psychological practice. Blustein (2006, 2008) and Richardson (2009, 2012) encouraged clinicians to consider a holistic rubric that includes a shift away from focusing on occupations to a more comprehensive conceptual view of work and a focus on relationships across personal and occupational domains.
2. Discuss the interaction of work and other life roles with the client (Moser & Schuler, 2004), recognizing that the salience of these roles may vary across developmental stages (Super, 1990) as family, social, and community roles change along with work roles. Work-family balance can have different meanings for individuals depending on their family roles and responsibilities (e.g., whether one is primary caretaker for children). Psychologists are encouraged to recognize multiple life roles and inclusive definitions of work (i.e., paid work in the occupational structure and personal work that people do for themselves, their families and their communities), thereby empowering clients to counter the risks of marginalization as it relates to personal or unpaid work in their lives (Schultheiss, 2006, Richardson, 2012).
3. Psychologists may want to explore the client's perceptions and definitions of work, family, and the interaction between work and family. For example, theory development in relational career theory (Richardson, 2012) and life design (Savickas 2012) provide strategies and suggestions for examining the meaningfulness and interaction of these perceptions.
4. Explore the degree of influence from one domain in life (e.g., work) to other domains. This exploration should include both positive and negative influences and the impact of this on health and well-being (Blustein, 2011).
5. Intervene to assist individuals and families to navigate the challenges posed by the intersection of work and family, particularly with a focus on identifying strategies to increase work-family and family-work facilitation. Psychologists working with couples are encouraged to become skillful at facilitating conversations among couples related to work. Interventions could also be preventative. For an example of a preventative program related to work-family conflict see Cinamon (2006).

Guideline # 6: Psychologists strive to understand how economic, legal, and social factors impact opportunities for and barriers to employment, and subsequently alter the career trajectory.

Rationale.

The impact of global economies, advances in technology, and decreased confidence in the predictability of employment increase the likelihood that adult workers will experience multiple work transitions, both expected and unexpected (Juntunen & Bailey, 2013). In the last decades of the 20th century, the world of work underwent complex changes, and these changes have become even more challenging in the beginning of the 21st century (DeBell, 2006). Rapid changes, often accompanied by new technology and related skill sets, are contributing to an increased demand for workers who are highly adaptable and engaged in lifelong learning.

Periods of economic stress, such as recessions or depressions, have a significant impact on employment and on well-being. This was examined during the mid-1970s recession in the U.S. (Tausig & Fenwick, 1999), and following the economic crisis of the late 2000s to early 2010s. Sharp global increases in involuntary unemployment, discouraged workers (those no

longer seeking work because they believe work is not available), vulnerable workers, and the proportion of employed people who are living in poverty have all been observed in the current decade (International Labour Office, 2010). In addition, disparity in incomes between the poor and wealthy in the U.S. is the highest it has been since the 1930s (DeSilver, 2013a). Current wealth disparities highlight the role of underemployment, which may be an even more important indicator of the health of the labor force than unemployment (Jensen & Slack 2003).

It is important to note that even in times of global recession and economic distress, the impact is not equivalent across groups. For example, age differences in unemployment emerge during economic downturns, with young people being more likely to become unemployed but older workers being less likely to become reemployed following a period of unemployment (Johnson & Butrica, 2012).

Racial, gender, ability, and sexual identities have all demonstrated some relationship to differential employment statistics, in both good and bad economic periods. For example, disparities in unemployment rates between Whites and Blacks living in the United States began to emerge in the 1940s, and across economic cycles the Black American unemployment rate has been roughly two times as high as the White American unemployment rates (DeSilver, 2013b). People with disabilities are almost twice as likely to be unemployed in the U.S. (Iezzoni, 2011), as are those who identify as transgender (National Center for Transgender Equality and the National Gay and Lesbian Task Force, 2009). Social and institutional factors, such as prejudice, have demonstrated links to work stress and decreased health among employees (Bond & Punnett, 2007). The multiple contexts of racism and sexism, in particular, have contributed to biased treatment, harassment, discrimination, and lack of support in the workplace, which subsequently impact emotional and physical health (Bond & Punnett, 2007). Further, both interpersonal and institutional racism, and their relative effects on important vocational constructs such as math and science self-efficacy, have been identified among Black adolescents as early as middle school (Alliman-Brissett & Turner, 2010).

Furthermore, social and legal factors intersect in the employment of individuals with a history of incarceration and these individuals face multiple barriers to obtaining employment after release (Varghese & Cummings, 2012). There are several challenges to accurate assessment of unemployment rates among individuals who have been incarcerated. However, Schmitt and Warner (2010) concluded that the presence of a criminal history will have a moderate to large effect on future employment options. In one study, more than 60% of incarcerated adults remained unemployed one year after release (Petersilia, 2001). The unique needs of incarcerated individuals transitioning out of prison and into the workplaces highlights the importance of psychologists being able to address individual factors, such as attitudes toward both legal and illegal work (Varghese, 2012), as well as systemic factors, such as labor market policies and practices (Western, 2001), which interact with increased complexity to limit access to meaningful work.

Furthermore, some workers are employed in settings that are either toxic or unhealthy. Although employees are encouraged to report unsafe and unhealthy work environments (U.S. Department of Labor, nd), many employees may feel implicit pressure not to report such violations. For example, the undocumented farm worker may feel disempowered to report a hazardous work environment. Worsening working conditions are faced by many employees and these conditions impact physical health (e.g., cardiovascular disease, hypertension, diabetes)

and mental health (e.g., depression) as well as lost productivity (Schnall, Dobson, & Roskam, 2009). One example of a worsening working condition is sexual harassment, which is common with women with Iles, Hauserman, Schwouchau, and Stibal, (2003) finding that 58% of women report having experienced potentially harassing behaviors and 24% reporting having experienced sexual harassment at work. On a positive note, psychologists know how to create healthy work environments (e.g., Day, Kelloway, & Hurrell, 2014; Dejoy & Wilson, 2009; Hoffman & Tetrick, 2003) and much work can be done in this area.

Applications.

Psychologists who work with diverse clients are encouraged to have an awareness of the labor market or the world of work, and its interaction with the development and well-being of and opportunities for individuals and groups (DeBell, 2006). Vocational psychologists have recognized the impact of labor market changes by examining concepts such as career adaptability (Savickas, 1997) and the experience of multiple career transitions. Given that career transitions are increasingly more common, psychologists are encouraged to:

1. Recognize that the lack of work impacts individuals, communities, and organizations, from the local to the global level (Fouad, 2007). Inherent in this expectation is the ability to recognize how the community in which an individual lives might support or hinder his or her vocational goals and how economic changes contribute to community and individual well-being.
2. Become familiar with the world of work and the resources that serve as references for employment statistics, employment projections and occupational information, such as the Bureau of Labor Statistics and Occupational Outlook Handbook (bls.gov). Become familiar with resources designed to help clients access work opportunities or pursue career advancement. Help clients prepare for career transitions in response to changing technology and changing labor force demands.
3. Advocate for organizational and policy changes that reduce the barriers to sustainable and rewarding work. Specifically, psychologists can educate policy-makers about how the economic and political structure of a nation-state influences opportunities and diversity in work, as well as how changes and anticipated future trends in the economic or political structure may impact the labor market and affect workers (Herr, 2003). Psychologists can also address issues of institutionalized discrimination and work with employers and organizations to address climate factors, such as workplace bullying (O'Farrell & Nordstorm, 2013).
4. Become aware of how globalization has impacted work around the world in both developed and emerging economies, paying particular attention to their ability to serve as agents of social change in developing economies where workers earn less than a living wage as a matter of course (Blustein, McWhirter, & Perry, 2005; Sloan, 2005).
5. Attend to and be aware of how specific re-training (such as increasing technology skills) may help individual clients identify and take advantage of the opportunities that are emerging in a changing labor market (Fouad & Bynner, 2008).

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