

EMPIRICAL RESEARCH

Understanding Undergraduate Students Desire to Study Psychiatric Rehabilitation: A Qualitative Study

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To efficiently prepare future workers in the mental health and psychiatric rehabilitation fields, academic programs must evaluate and assess their programs to ensure their effectiveness. The purpose of this qualitative study was to evaluate an undergraduate degree program in psychiatric rehabilitation. Eleven students participated in semi-structured interviews with the purpose of exploring their motivations for pursuing the degree program and their perceptions of the program and curriculum. Thematic analysis generated three themes: Family and Lived Experience: Influences for Pursuing the Degree, Program Factors that Influence Success, and Professional Identity Formation within the Context of Lived Experience. The psychiatric rehabilitation program contributed positively to the development of the students' professional identity and students' personal experiences with mental health conditions impacted their motivation to pursue a career in mental health.

There is a severe shortage of skilled and qualified community mental health professionals (Michael et al., 2023). A significant factor impacting the mental health worker shortage is turnover in behavioral health programs (Brabson et al., 2020). Ballout (2025) highlights the impact of trauma, including secondary traumatic stress, in addition to factors like burnout and organizational challenges in the workplace. Murphy (2022) notes that stigma related to those served in behavioral health programs, low salary, and a lack of experienced candidates impact the recruitment and retention of professionals in substance use programs. A direct result of this workforce shortage and turnover is a lack of mental health services for individuals in need. According to the Substance Abuse and Mental Health Services Administration Behavioral Healthcare report for 2022, 57% of individuals living with a mental health condition do not access treatment, and a third of those living with serious mental health conditions do not obtain needed treatment and care. Further, there is an estimated shortage of 4 million behavioral health care providers (SAMHSA, 2022).

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Accordingly, academic programs that train mental health professionals play a critical role in addressing the national behavioral healthcare shortage, emphasizing the need for mental health programs to consider recruitment and retention strategies for students. A variety of factors influence students to pursue a career and program of study in the mental health field. Slaughter and Hoefer (2019) found that students were motivated to pursue careers in mental health due to personal factors, including a personal connection to a mental health diagnosis and a desire to help people. Furthermore, an internship can play an integral role in students' decisions to pursue a career in the mental health field, as students report satisfaction in gaining experience and directly impacting the lives of the individuals they serve in the internship. Additionally, students who reported an increase in motivation to work in the mental health field benefited from directly working with service recipients (Slaughter & Hoefer, 2019).

Building a strong professional identity is crucial for professionals across various fields. Professional identity is shaped by a set of key attributes such as knowledge, skills, ethics, socialization into a professional community, and group recognition (Fitzgerald, 2020). Often, it serves as a foundation for the way individuals perceive themselves in the context of their work, how they relate to their profession, and how they interact with others within their professional environment. The concept of professional identity is particularly salient in fields that require specialized skills and commitment to lifelong learning, such as healthcare, education, and social services. A clear understanding of professional identity can enhance outcomes and professional satisfaction (Fitzgerald, 2020). Most professional experts recognize the importance of professional identity, noting that it contributes to better self-regulation, goal setting, and resilience (Van Oeffelt et al., 2017). When faced with challenges or setbacks, professionals with a clear identity are better equipped to persevere, adapt, and bounce back as they remain anchored in their understanding of their role and value within their field. Thus, academic programs that train students to work in the challenging mental health field must impart to their students the identity of their profession.

To provide services in community mental health programs, staff members must be skilled in communication techniques, running groups, linking individuals to needed services and resources, outreach services, career services, and advocacy (Bates et al., 2012; Lidor et al., 2024; Waynor et al., 2016). Consequently, program directors and administrators are responsible for ensuring their programs' curriculum and culture successfully prepare students to serve the ever-increasing mental health needs in the post-pandemic world. Thus, developing a culture of evaluating program outcomes is a crucial component of academic mental health programs (Lewallen, 2015).

Evaluation of the Undergraduate Program

Description of Program

The Bachelor of Science (BS) in Psychiatric Rehabilitation and Psychology is a dual major, joint degree program that is offered in conjunction with partner universities in the state. Students take psychiatric rehabilitation courses at a large state university's School of Health Professions and complete their general education and psychology courses at the partner school. The BS level curricula in psychiatric rehabilitation is 45 credits and consists of four core courses covering the following: an introduction to the field of psychiatric rehabilitation, counseling techniques, group interventions, and a clinical principles course. Upon successful completion of these four core courses, students move into the next phase of the program, which includes clinical practicum courses. Students complete two semesters at faculty arranged clinical sites where they spend 240 hours (each semester) contributing to the provision of psychiatric rehabilitation interventions. Students take additional courses covering community resources, case management approaches and emerging trends in the field. Students also choose four upper-level elective courses focused on topics such as, co-occurring disorders (serious mental illness and substance use disorders), developmental disabilities, supported employment and supported education, working with an aging population, and wellness and recovery-oriented approaches (Waynor et al., 2016). Students may also choose to take an independent study research course that pairs them with a faculty member to assist with an original research project. This is a valuable option and one of the many ways that the program prepares students for a variety of graduate level programs.

Many of the students in the program identify as having a mental health condition (Waynor et al., in-press). These students are drawn to the program as obtaining a degree to pursue a career in the mental health field and providing services is appealing. The idea of self-help and of giving back is something that attracts students to the degree. The program also admits students who have family members or close friends who have mental health conditions. These students are interested in learning about treatment options and resources available for their family and friends.

When the students enter the above-mentioned clinical practicum sequence of courses, they get to put into practice the knowledge and skills they have learned in the classroom. Students are placed at community mental health programs where they get to make the transition from student interns to psychiatric rehabilitation practitioners. In the clinical practicum courses, discussions occur with the students about their future career goals, including the types of jobs they may want to have and where they may want to work. In addition, vocational and personal maturity are addressed as students begin to see psychiatric rehabilitation as a career. Most students are offered positions

from their clinical practicum sites either before completing the program or after obtaining the BS degree. It is a terrific opportunity for students to begin entry-level jobs in the field where they get to explore their future career goals.

Discussions also occur in the clinical practicum courses regarding students' readiness to attend graduate programs. The BS courses prepare students for graduate work by focusing on the academic skills required for graduate work. For example, all student papers must follow the writing guidelines established by the American Psychological Association (APA). In addition, the upper-level courses meet the standards for the MS program in Rehabilitation Counseling, Mental Health track, a Council for Accreditation of Counseling and Related Educational Programs (CACREP) accredited program that the BS students can apply to attend. If accepted, six credits of electives are accepted toward the degree.

In addition, the curriculum of the dual major program is very rigorous and was designed to cover the different treatment modalities and services provided by the field. It was developed using the Council on Rehabilitation Education (CORE) standards as a guide. With the merger of CORE and the Council for Accreditation of Counseling and Related Educational Programs (CACREP) in 2017, the BS curriculum continues to follow the standards. The program also incorporates the seven practice domains of the Psychiatric Rehabilitation Association from the Exam Blueprint that is used for the certification examination for the Certified Psychiatric Rehabilitation Practitioner (CPRP). The domains represent the knowledge and skills needed to become recognized as a competent psychiatric rehabilitation practitioner. Students who complete the program are eligible to take the CPRP exam, and since 2000, they have had a 100% pass rate. Therefore, the program prepares students for their careers in psychiatric rehabilitation and prepares students for graduate work.

When evaluating an educational program, it is best practice to use a variety of data collection methods, including descriptive data on program outcomes, and surveys and interviews with students (Lewallen, 2015). In the current decade, the program has averaged 37 students per academic year. Additionally, in the current decade, the program graduates an average of 21 students per year. The BS program has a 93.75% student retention rate, and a recent survey targeting 2022 and January 2023 graduates resulted in 26 responses (79% of the graduate pool) and found that 77% were working in the mental health field, 19% were enrolled in graduate/professional school, and 88% were either working in field and/or in graduate/professional school. The program serves a diverse student population with most students from underserved communities. In addition, a large percentage of students are first generation college students (Waynor et al., in-press).

Qualitative Data Collection

Despite the positive outcomes, it is critical to determine what factors are contributing to program outcomes and identify areas that may require improvement. Further, gaining an understanding of student perspectives on

the program can assist with our ability to continue to retain students who enter the program. Consequently, conducting semi-structured interviews and collecting qualitative data from students in the program can effectively gather information on 1) why students choose to study psychiatric rehabilitation, 2) how the curriculum helps with career goals, 3) how life experience influences educational experiences, and 4) student experience in the academic program. Blair and Valdez Noel (2014) note the importance of eliciting feedback directly from students when evaluating educational programs. The student data will provide the opportunity to combine case examples of student experiences and perspectives of the undergraduate program in psychiatric rehabilitation, providing data that can elucidate salient issues related to the program (Merriam, 2016). The qualitative evaluation of the student case examples addressed the following research questions.

Research questions

1. How does the experience of the clinical practicum contribute to student professional growth in the undergraduate Psychiatric Rehabilitation program?
2. What components of the Practicum experience lead to the high employment outcomes?
3. What is the contribution of the remaining curriculum on students' professional development?
4. How do students' personal experiences with mental health conditions impact their experiences in the academic program?

Methods

The current qualitative study is part of a larger program evaluation project that included several data collection methods (Waynor et al., in-press). Data from semi-structured interviews are reported here. The interview portion of the evaluation used a basic interpretive qualitative approach to evaluate the student experience (Merriam, 2016). The evaluation was approved by the university Institutional Review Board and deemed exempt.

Participants

The evaluation included students enrolled in the bachelor's degree program. Students were informed of the evaluation through a general announcement made by the program director, which clarified eligibility criteria to students. The announcement explained the purpose and asked students interested in participating to contact the program director. Eligibility criteria included students enrolled in the bachelor's degree program and enrolled in either the second semester of the practicum course or who had previously completed the entire practicum sequence, consisting of two semesters.

Data Collection

An interview guide was developed with five questions designed to gauge students' perceptions of the program and factors that contributed to their enrollment (Appendix A). The interviews were conducted online using Zoom platform by two faculty members employed in the department who had not previously taught any students who participated in the study. In addition, both interviewers are alumni of the dual major bachelor's degree program. The study team chose interviewers due to their alumni status, as their status supported their relatability to the student participants and provided a unique understanding of the participant's perspective. Author AB conducted the first two interviews, while author EB conducted the following nine interviews. Before proceeding with the interview, informed consent and demographic data were collected from participants. Transcribing the interviews were generated through Zoom AI and deidentified by the interviewers.

Analysis

After the interviews were conducted, researchers began the coding process using Thematic Analysis (Braun & Clarke, 2006). According to Braun and Clarke (2006) to conduct a thematic analysis researchers review the data, develop codes from the data, develop and discuss themes, and define and name the themes. To conduct the thematic analysis, researchers first individually reviewed the transcripts generated by Zoom and completed individual coding. Several steps were taken to verify coding for trustworthy analysis of data (Nowell et al., 2017). The evaluation team met to review individual coding and develop a codebook. Once the codebook was agreed upon, individuals coded the transcripts. When coding was completed, codes were reviewed by the team to begin identifying categories and themes. After several discussions and iterations, a consensus on the final themes was established.

Results

In total, eleven students were interviewed. Nine students were female, eight students were between the ages of 19 and 24, while 3 were above 24. Five students self-identified as white and non-Hispanic. See [table 1](#) for demographic data. Saturation was assessed by researchers by the eleventh interview when researchers determined that the data obtained in the interviews was similar and repetitive to data attained in prior interviews (Rahimi & Khatooni, 2024).

The evaluation team generated three major themes about the program, *Influences for Pursuing the Degree: Family and Lived Experience*, *Program Factors that Influence Success*, and *Professional Identity Formation within the Context of Lived Experience*. See [table 2](#) for themes and sub-themes.

Table 1. Student Demographics

Ethnicity	Gender Identity		
	Male	Female	Total
Caucasian	1	4	5
Hispanic	0	3	3
Asian	1	1	2
African (Arab)	0	1	1
Total	2	9	11

Table 2. Key Themes

Themes	Sub-Themes	Quote
Family and Lived Experience	Intrinsic attitudes, Family experience, Cultural attitudes surrounding education, Career goals and development process, and Family influence	"I realized that my father had a mental illness which I didn't know he was struggling with, he had bipolar disorder."
Program Factors that Influence Success	Curriculum, Alliance with faculty, Supportive faculty, Class characteristics, and Student community	"The engagement with the students, and I mean everyone, literally everyone I've talked with, loves their class."
Professional Identity Formation within the Context of Lived Experience	Practitioner identity, and Peer identity	"That actual real-life experience helped you to kind of figure out what you want to do in the future, because I feel like if I didn't have this experience, I don't know what I would be doing after I graduate."

Influences for Pursuing the Degree: Family and Lived Experience

Students are often initially attracted to the undergraduate degree program due to personal and family experiences with mental health conditions. One student described how a relative lived with severe depression and committed suicide. Another student described being inspired to study psychiatric rehabilitation due to a sibling diagnosis of schizophrenia. Additionally, a student described "*I realized that my father had a mental illness which I didn't know he was struggling with, he had bipolar disorder.*" Further, several students shared their own histories of living with mental health conditions, and due to their own experiences of recovery, expressed their desire to help others recover. "*So, when I was maybe around 13, I did have clinical depression, and I feel like that experience really helped me... And then, once I started getting interested in psychology I started learning about the different careers and options within the field and I had a high school psychology teacher who actually helped me choose this program.*" These experiences shared by the students led to the codes/sub-themes of *intrinsic attitudes* and *family experience*. The above examples illustrate that students were inspired to help others with mental health issues due to their early desire to help family members.

Additional patterns within this theme included *cultural attitudes surrounding education, career goals and development process, and family influence*. Several students shared that their parents instilled in them the value of pursuing education and learning as critical to one's life. Parents were

overwhelmingly mentioned as important role models regarding education, and it was clear that parents instilled in the students the value of looking to educators such as teachers and professors as important role models. One student with lived experience discussed how they were inspired by their family members' educational accomplishments, *"my father, my uncle, they both got a master's degree."* Thus, valuing education was clearly a cultural attitude that the student held. Nonetheless, in some cases, parents from immigrant backgrounds attitudes on education were perceived as a form of pressure on students when they were young. One student described their mother's influence *"she always wanted me to become a doctor since the day I was born."* Nonetheless, when this student was older, they were appreciative of the parent's high aspirations, as this was perceived as a factor in their later success, *"so I was the first one to get into a state school in America in my own family."* Another student with immigrant parents had a similar experience growing up *"I want to say my entire life my parents pushed me towards the medical field, but I really never took interest in physical medicine, internal medicine, or any of that. My sister's in Medical School my brother's applying to Medical School."* Despite some pressure from the family to pursue education in a particular direction, in all cases, these students' parents acquiesced and supported the student's choice of study; one student said, *"I don't need to be a doctor. I don't need to get my PhD for them. I would be okay with the masters. So as long as I get like some form of degree."* Thus, ultimately, the students were inspired to pursue academic studies, although in their chosen field. Thus, cultural backgrounds positively influenced education as a form of human capital and a means to better oneself and one's future.

Program Factors that Influence Success

The next theme was *Program Factors that Influence Success*, which included *Alliance with faculty/supportive faculty* and the *Curriculum*. The students universally acknowledged the role of the program faculty as a critical element in their academic success. The program faculty, who all have many years of experience working in direct service in community mental health agencies, acted as supportive role models. Additionally, the students reported the faculty's enthusiasm for the field and profession was infectious; after citing several faculty members by name, one student stated, *"The engagement with the students, and I mean everyone, literally everyone I've talked with, loves their class."* Further, the faculty were also acknowledged for supporting students' pursuit of their learning goals. One student living with a mental health condition who received accommodations acknowledged the critical role of faculty support in their academic success. *"Yeah, my accommodations were always there if I needed something and the faculty being very, very understanding...I do want to say that the faculty and the psych rehab Program have been absolutely amazing like there's no way I would be where I'm at right now, if it wasn't for them."*

The code/sub-theme *curriculum* was a major topic of discussion among the students. The faculty assumed that the clinical practicum component of the program would be the most salient factor. Nonetheless, students described more nuanced and balanced data regarding the contribution of the curriculum as a whole and validated the sequencing of program courses. One student placed in a case management program stated an overall perspective, *"And I think the curriculum is just really good, it's not your basic. It's very in-depth."* Additionally, this student's description of their practicum experience and the value of the real-life experience providing services in the community is representation of the data shared by most of the students, *"You know my practicum experience was a good experience for me as well, I went to transitional housing, so I was able to get an idea of what it's like to help participants of a program or peers."* Another student proudly described a success they had with a peer they worked with at their practicum *"The first case I opened on my own, she's doing really well."* These hands-on experiences of successfully facilitating the recovery process of people living with mental health conditions help students build self-efficacy in their professional role as psychiatric rehabilitation providers.

The value of the practicum was universal among the participants. However, students also universally acknowledged that the communications techniques and group methods courses were also transformative in their academic training. One student described their experience with the groups course, *"And even groups class was really helpful because we got to learn knowledge about how to run groups and different activities that can be helpful."* In discussing the curriculum as a whole the same student stated, *"the whole curriculum is I think, all the courses that I took they relate, and they actually helped me a lot in my practice."* The students also expressed how these introductory level courses prepare them to go into the field and work with people the following semester when they enter their practicum sequence. Additionally, students mentioned how the courses on services such as case management, career services, and substance abuse issues really rounded out the curriculum. Further, students with an interest in research also expressed that they enjoyed the opportunity to participate in the programs independent study research course.

Another pattern was *class characteristics/student community*. The students were from partner schools that often ran large lecture hall courses with hundreds of students. Additionally, the psychology major was the most popular major at the partner schools. Therefore, when arriving in the psychiatric rehabilitation program, one student described how they enjoyed having small classes with the same cohort of students. *"So, I definitely feel that having those small classrooms really helped me because it's usually with the same group of students... the classes are so non-judgmental and so supportive. You know, we all know, stuff about each other, and I feel like that really has helped us bond together... you know it's just like a family in a way."*

Professional Identity within the Context of Lived Experience

The third and final theme was *Professional Identity within the Context of Lived Experience*, which consisted of two related patterns: *practitioner identity*, and *peer identity*. One of the requirements to participate in the current study was to either complete the Practicum experience or at least be well into the Practicum II course. Thus, students in this study had a minimum of 300 hours of practical experience working in the field. Throughout the interviews students described their transition from being a student learner to becoming a psychiatric rehabilitation professional. One student describing their relationship with their peers in the program, “*you know you forge those relationships and have like a professional network coming right out of the gate.*” Thus, the student community during the program described above evolves into a professional network upon graduation. Another student described their passion to help people living with mental health conditions, “*even part of me thinks like whenever I am settled in my career. If I could, like help a boarding home on the side, just help out.*” This attitude denotes a level of professionalism, as the students appear to have made the shift from thinking of themselves as students to psychiatric rehabilitation professionals. Additionally, students described how their experiences in the program confirmed their professional development, “*that actual real-life experience helped you to kind of figure out what you want to do in the future, because I feel like if I didn’t have this experience, I don’t know what I would be doing after I graduate.*”

The last pattern within this theme, *Peer Identity* is related to the large proportion of students who disclosed being in recovery and living with their own mental health challenges. Students shared their challenges and clearly perceived themselves as being in recovery. This attitude appeared to fuel students to work in the field to correct negative experiences they had with the mental health system. One student who struggled with stigma due to their diagnoses stated they wanted to correct “*Very incorrect prejudices and stereotypes against people who had these kind of mental health conditions, who are medicated.*” The same student also stated, “*So I feel like when I did start to believe in the mental health field and medications and psychiatrists and all of that um I thought, well, I feel like if this saved my life, I can get into it and give back and possibly even save someone else’s.*” This quote is typical of the students who shared their own lived experiences with mental illness and how it inspired them to give back. Universally, this peer identity indicated a shift in the students from struggling with internalized stigma toward the development of an empowered identity. By training to work with people with mental health conditions, the students in recovery appeared to find a measure of healing within themselves.

In addition, although the feedback was overwhelmingly positive, students did provide feedback on areas that require improvement in the program. The main issue the students had was difficulty navigating the different systems within the university and partner schools. Faculty and administrators

are keenly aware of this issue. Nevertheless, this is an issue faculty, and administrators are challenged by themselves, as working with other universities' enrollment systems and coordinating among the various systems is an inherently difficult task. Another issue was connection to the larger campus community. Although classes occur on the main university campus, the SHP is part of a separate division of the university that does not provide access for the students for many campus resources, such as clubs and recreational facilities. In addition, all students who participated in the study were commuters which further prevented connection to the larger university.

Discussion

The current study of undergraduate students studying psychiatric rehabilitation found this group of students was highly focused on their career goals. This highly diverse group of students were intrinsically motivated to pursue a career helping others. Additionally, for the majority, their experiences with mental health conditions, either within their families or themselves, led to the pursuit of a career in the mental health field. These students described a process of taking classes, including the practicum experience, which created a shift in mindset and identity from student to professional. The students described receiving role modeling and verbal persuasion from the faculty, clinical supervisor and practicum staff. Additionally, they demonstrated mastery via accomplishments at the practicum site. These factors increase self-efficacy (Bandura, 1997) and contribute to the development of a professional identity (Fitzgerald, 2020; French & Clarke, 2024). The increase in both skills and confidence is particularly helpful in the labor market.

Another important factor to note in the findings is that the students all really valued education and had respect for teachers and professors. It was clear that the students and their families understood the value of human capital in the current labor market. Thus, this cohort of students chose a focused academic program of study that was developed to enhance the mental healthcare workforce in the state specifically.

Training Peer Providers

The core mission of the undergraduate program in psychiatric rehabilitation is to produce well-qualified entry-level staff for community mental health agencies in the state. In the current study 45% of the students identified as living with a mental health condition, and every semester faculty note that several students in the program report working as peer providers while attending classes. Further, the academic program collaborates with a large peer-run and operated community mental health provider in the state. Therefore, an additional benefit of the undergraduate program is that it provides professional training at a university setting for peer-providers. This factor can be especially empowering given the barriers peer providers often face in the field, including difficulties being accepted by other staff members,

the position itself frequently limiting promotability, and other issues related to stigma (Edwards & Solomon, 2023; Peck et al., 2023; Waynor & Pratt, 2012).

The literature on peer providers discusses issues related to training and integrating peer staff into community mental health programs (Siantz et al., 2023). Issues related to challenges with supervision, and working on teams primarily staffed with non-peers are often addressed in this literature (Edwards & Solomon, 2023; Waynor & Pratt, 2012). Most peer staff are trained via statewide peer specialist programs (Siantz et al., 2023). Nonetheless, peer staff often cite barriers to successful integration into the mental health field, in addition they are undercompensated, and their contributions are often underappreciated (Edwards & Solomon, 2023; Siantz et al., 2023; Waynor & Pratt, 2012). By pursuing a traditional form of training at the university setting, students with lived experience in the BS program receive the benefits of a universally recognized form of human capital. Additionally, they can work in the field with their skills immediately recognized. Thus, with the combination of the formal academic training and lived experience, graduates of the BS program in psychiatric rehabilitation can move forward and advance in their careers more rapidly than peer staff trained in other settings.

In the current study, participants with lived experience of a mental health condition cited that strategic academic support offered by faculty, coupled with the nature of the psychiatric rehabilitation undergraduate curriculum and community, positively impacted their development. These students noted a sense of empowerment, desire to engage in advocacy and systems change, as well as endorsement of additional positive sentiments related to their disability status. Disability identity theory, which explores the intersection of disability and identity development, provides a nuanced understanding of how one's sense of self is shaped by the interplay of disability and social contexts (O'Shea & Kaplan, 2018). This framework highlights how social context, like the campus climate and professor/ student interactions within the psychiatric rehabilitation program can profoundly influence identity development, especially through the cultivation of a positive disability identity (O'Shea & Kaplan, 2018). Research indicates that a positive disability identity correlates with higher rates of campus resource utilization, course completion and academic persistence among college students with disabilities (Kimball et al., 2016; O'Shea & Meyer, 2016; Tobias, 2023). Additionally, students who participated in the study noted that they leveraged their lived experience within their internships and/or practicum field work, thus, increasing their human capital to include a peer provide identity. Nurturing a positive disability identity can significantly enhance the efficacy of peer provider movements within the mental health workforce, advocating for better services and promoting equity and inclusion in the field.

Limitations

The participants were self-selected, as all the participants volunteered after being invited to participate by the program director. Students who chose not to participate may have different perspectives on the program. Additionally, there is always a possibility that a social desirability factor was potentially involved, as although the interviewers were not instructors of any of the students, the students were aware that they both held faculty positions in the department. Nonetheless, most of the data was consistent with what faculty members who teach in the program observe. Data saturation was determined when new information did not arise, though, there are limitations to using this approach to determine when enough information has been collected (Rahimi & Khatooni, 2024).

Implications and Future Directions

The undergraduate psychiatric rehabilitation program is an important component of the career ladder for individuals aspiring to work in the mental health field. Many of the program's graduates go on to pursue graduate and professional education in counseling, social work, and other health-related professions. Further, with the critical demand for psychiatric rehabilitation and community mental health providers, training students with their own lived experience of mental health conditions to work in the mental health field is crucial to help fill the numerous vacant positions in the field. The field must acknowledge that many of the staff are drawn to the field for intrinsic and personal reasons (Gill et al., 2005). Additionally, issues with stigma towards peer providers is another issue the field must address (Waynor & Pratt, 2012; Yanos, 2018), as the current study demonstrated that many students studying to work in the field, are indeed living with their own mental health issues. Also, implications from these findings for the undergraduate program's curriculum indicate including adding to our content on the role of peer providers in the field and adding content on how to become an effective peer provider. Additionally, although the program includes an upper-level elective on the role of families, including more information and content related to family resources is also indicated. Further, integrating content on family issues with curriculum on cultural diversity is also indicated.

A future direction would be to gather qualitative data from program alumni. This data would provide program administration on how well the program and its curriculum are keeping up with the current practices and culture of community mental health programs. Additionally, as alumni gain human capital via advanced degrees, many are likely to achieve leadership roles in the community mental health field. Thus, assessing a potential role in training future leaders of the field is indicated.

Finally, the findings of this study provide hope for people in recovery, as this study suggests that future providers of psychiatric rehabilitation services are a focused, caring and dynamic group, who are committed to improving

the mental health of their communities. These students are the future of the field and will be at the forefront of creating the innovative, promising and evidence-based services of the future.

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Appendix A. Interview Questions

1. What helped you decide to study Psychiatric Rehabilitation? Did something in your life experience contribute to your decision? Please explain?
2. Describe how our curriculum helped you with your career goals?
3. How does your life experience impact your education at SHP?
4. What parts of the program work well? What parts of the program could use improvement?
5. Is there anything else you would like to share/discuss?