A New Look at Supported Employment: 
Modernizing Evidence-Based Practices

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Agenda/Learning Objectives

- Identify key aspects of Supported Employment
- Understand the need to adapt the refine vocational and employment supports to meet an individual’s needs
- Discuss strategies to integrate employment serves into existing programs

Pashka & Razzano (2013) A New Look at Supported Employment: Modernizing Evidence-Based Practices
President’s New Freedom Commission on Mental Health

- Final Report released July 22, 2003

- **Conclusion:** The mental health system is in lacking and is in need of wholesale reform; Employment included as a fundamental component.

- **Goal:** “…recommend improvements that allow adults with serious mental illness …to live, work, learn and fully participate in their communities.”

Healthy People 2020

- a health disparity as “a particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage….

- …Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; gender identity; age; mental health; cognitive, sensory, or physical disability; sexual orientation; geographic location; or other characteristics historically linked to discrimination or exclusion.”

Why is Employment Important?

Work, even part-time work, reduces…
- Poverty
- Social isolation, promotes positive relationships with work peers
- Mental health concerns, e.g., depression, anxiety
- Use of alcohol and recreational drugs
- Dependence on benefits, entitlements, and other shirking/shifting public support systems vulnerable to restrictions, time limits

Work is the single most normative activity in our society and helps us to define ourselves.


**EMOTIONAL**
Coping effectively with life and creating satisfying relationships.

**ENVIRONMENTAL**
Good health by occupying pleasant, stimulating environments that support well-being.

**INTELLECTUAL**
Recognizing creative abilities and finding ways to expand knowledge and skills.

**FINANCIAL**
Satisfaction with current and future financial situations.

**SOCIAL**
Developing a sense of connection, belonging, and a well-developed support system.

**PHYSICAL**
Recognizing the need for physical activity, diet, sleep, and nutrition.

**SPIRITUAL**
Expanding our sense of purpose and meaning in life.

**WELLNESS**

**OCCUPATIONAL**
Personal satisfaction and enrichment derived from one’s work.
Employment provides five categories of psychological experience that promote mental well-being:

- time structure (an absence of time structure can be a major psychological burden);
- social contact;
- collective effort and purpose (employment offers a social context outside the family);
- social identity (employment is an important element in defining oneself);
- regular activity (organizing one’s daily life).

Work & Identity

Merriam-Webster defines WORK as:
The labor, task, or duty that is one's accustomed means of livelihood.

- “Nice to meet you – what do you do?”
- Children go to school; Adults go to work
- Different values placed on different jobs

Work plays a pivotal role in defining an individual’s quality of life and should be seen as an integral part of a person’s overall life experience…
Work & Identity

Work offers more than just getting a paycheck. It is the vehicle for developing skills, building relationships, achieving personal fulfillment and contributing to ones community.

- I am WORTHY
- LEARNING by doing
- FEELING balanced
- Show me the MONEY

From A to Z: 26 Reasons to Work!

You have **three minutes** to work on your own to come up with a word/phrase for each letter of the alphabet that might be a positive reason someone would want to work – or you do the work you do.

Work & Mental Health

Five of the 10 leading causes of disability worldwide are issues of mental health: major depression; schizophrenia; bipolar disorders; substance use and obsessive-compulsive disorders (WHO, 2008).

These disorders – together with anxiety, depression and stress – have a definitive impact on any working population and should be addressed within that context (WHO, 2008).

They may also develop into long-term disorders with accompanying forms of disability (WHO, 2008).

A review of studies of the mental and physical health effects of unemployment and the mechanisms by which unemployment causes adverse health outcomes reveals a complex relationship.

There has been a serious debate about the direction of causality. Does unemployment cause deterioration in health, both mental and physical? Are the sick more likely to become unemployed?

Research indicates that the unemployment rate among people with mental illness ranges 3-5 time higher than among those with no mental illnesses…

… And an even higher proportion of people with severe mental illnesses are out of the labor force, i.e., not working and not looking for work.
Six principal barriers to the employment of those experiencing a psychiatric disability:

1. Lack of choice in employment services and providers
2. Inadequate work opportunities
3. Complexity of the existing work incentive systems
4. Financial penalties of working
5. Stigma and discrimination
6. Loss of health benefits

Supported Employment

- Self-Determination
- Person Centered Planning
- Social and Economic Inclusion
- Choice & Independence
- No one is unemployable
- Learn about work in work

Success + Satisfaction = Skills + Support

Research-Based Principles of Successful Vocational Rehabilitation Strategies

1. People with serious mental illness can be successfully engaged in competitive employment.

2. Vocational rehabilitation services should involve employment in integrated settings for minimum wage or above.

3. Consumers should be placed in paid jobs as quickly as possible and according to their preferred pace.

4. Ongoing vocational support should be available as needed and desired.

5. Consumers should be helped to find jobs that match their career preferences.

Research-Based Principles

6. Vocational rehabilitation services should explicitly address financial planning and provider education/support around disability benefits and entitlements.

7. Vocational and mental health services should be integrated and coordinated.

8. Vocational service providers should work collaboratively with consumers to address issues of stigma and discrimination, and to help negotiate reasonable accommodations with employers.

9. Vocational rehabilitation services should be made available to all mental health consumers.

10. Vocational services should involve family and friends in supporting consumers’ efforts to work.

Employment Intervention Demonstration Program
www.psych.uic.edu/eidp
Center for Mental Health Services
Substance Abuse and Mental Health Services Administration

Focus on Applying Key SE Services

- Comprehensive and integrated clinical and vocational services
- Individualized employment assistance
- Use of peer support in job search & support
- Place-then-train approach to employment
- Availability of on-going vocational supports
- Cultural diversity and gender awareness in employment services and career planning

So – Where are we?

- Research on SE shows that well-integrated, coordinated employment and clinical services result in better employment outcomes.
- Employment success increases over time, making it important that programs be prepared to offer ongoing support and services that build on career achievements.
- Integrated employment services result in positive employment outcomes regardless of personal characteristics, work histories, co-occurring health problems, mental health diagnoses, symptom levels, and functioning levels.

Employment & Health

Research indicates that disabilities and chronic health conditions affect employment rates

- As of June 12, 2013 EMPLOYMENT rates³:
  - Disability/Chronic Health: 17.3%
    - unemployment = 15%
  - No Disability/Chronic Health: 64.5%
    - unemployment = 7%

- Employment participation is nearly 3.5 times greater in general population

- Unemployment is over twice the rate for individuals with disabilities and chronic health conditions

Innovative SE for New Populations

- Supported Employment for Individuals with HIV/AIDS – funded by NIDRR
- Under-represented in the workforce due to chronic illness
- High rates of co-occurring mental health issues, particularly depression, anxiety
- Experience of stigma, isolation, discrimination
- Focus on principles of supported employment as well as other services in EBP literature from mental health services, psychiatric rehabilitation, etc.

Research-Based Services Expansion

- Address health beliefs and wellness within an employment/return to work context

- Ground activities in theory → Health Beliefs Model (HBM)

- Redesign, adapt programs with specific components for people with HIV/AIDS → use the “active ingredients” of evidence-based practices successful for other populations with similar experiences

## General HBM Structure

<table>
<thead>
<tr>
<th>Concept</th>
<th>Definition</th>
<th>Application</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Perceived Susceptibility</strong></td>
<td>One's opinion of chances of getting a condition</td>
<td>Define population(s) @ risk, risk levels; personalize risk based on a features/behaviors; heighten perceived susceptibility if too low</td>
</tr>
<tr>
<td><strong>Perceived Severity</strong></td>
<td>One's opinion of how serious is a condition, its consequences</td>
<td>Specify consequences of the risk and the condition itself</td>
</tr>
<tr>
<td><strong>Perceived Benefits</strong></td>
<td>One's belief in the efficacy of the advised action to reduce risk or seriousness of impact</td>
<td>Define action to take; how, where, when; clarify the positive effects to be expected.</td>
</tr>
<tr>
<td><strong>Perceived Barriers</strong></td>
<td>One's opinion of the tangible and psychological costs of the advised action</td>
<td>Identify and reduce barriers through reassurance, incentives, assistance.</td>
</tr>
<tr>
<td><strong>Cues to Action</strong></td>
<td>Strategies to activate &quot;readiness&quot;</td>
<td>Provide how-to information, promote awareness, reminders.</td>
</tr>
<tr>
<td><strong>Self-Efficacy</strong></td>
<td>Confidence in one's ability to take action</td>
<td>Provide training, guidance in performing action.</td>
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</table>
Applying Health Beliefs to Employment

**Barriers to Work**
- Disclosure, Depression,
- Fears Re: Benefits,
- Labor Markets, Education,
- Past Experiences

**Belief in Benefits of Work**
- Independence,
- Financial Stability

**Perceptions of Illness Seriousness/Severity**
- Symptom Effects, Function,
- Other Health Issues, Medications

**Cues to Action**
- Behavioral & Social Supports

**Self-Efficacy**
- Intent for Work Force Participation

**Cues to Action**
- Client-Provider Relationships

Employment

Program Structure

High Level of Integration with HIV Case Management Services

Key Supported Employment Elements
Vocational Assessment/Evaluation
Focus on Competitive Work
Client Specific Job Development
Rapid Placement
Collaboration with Employers
Vocational Support Groups
Collaboration with Family/Friends
Career Development
Off-Site Skills Training/Education
Off-Site Vocational Counseling
On-Site Job Support

Barriers individuals report in iFOUR

- What do you need to be successful in your work?
- Items that need to be addressed with participants:
  - Wellness & Mental Health
  - Substance Use
  - Criminal Histories
  - Transportation
  - Support

Donald Super (1957) and other theorists of career development recognize the changes that people go through as they mature. *Career patterns are determined by socioeconomic factors, mental and physical abilities, personal characteristics and the opportunities to which persons are exposed. People seek career satisfaction through work roles in which they can express themselves and implement and develop their self-concepts.* Career maturity, a main concept in Super's theory, is manifested in the successful accomplishment of age and stage developmental tasks across the life span.

Self-concept is an underlying factor in Super's model: "...vocational self-concept develops through physical and mental growth, observations of work, identification with working adults, general environment, and general experiences....As experiences become broader in relation to awareness of world of work, the more sophisticated vocational self-concept is formed”

**Vocational Maturity…**

Vocational Maturity…

Super and Thompson (1979) identified six factors in vocational maturity:

- Awareness of the need to plan ahead
- Decision-making skills
- Knowledge and use of information resources
- General career information
- General world of work information, and
- Detailed information about occupations of preference.

Career Wellness

Merriam-Webster defines WELLNESS as:

the quality or state of being in good health especially as an actively sought goal.

You might be thinking, “What does wellness have to do with work? What is Career Wellness?” Career Wellness describes taking steps to create a healthy and active career by setting and achieving goals. These accomplishments also help us improve our health. Below are some questions that will help us to see our Career Wellness and with what resources we have to work. We will complete this questionnaire two times during the workshop; once now, at the beginning and once again at the end of the workshop.

Your answers to the following questions may provide you with some important information and valuable feedback about your Career Wellness:

<table>
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<tr>
<th>Item</th>
<th>Question</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Career Attitudes</strong></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>I know my strengths in the workplace.</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>2</td>
<td>I know my weaknesses in the workplace</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>3</td>
<td>I have developed or learned ways to help improve my weaknesses in the workplace</td>
<td>1 2 3 4 5</td>
</tr>
</tbody>
</table>
What Can Providers Do?

- Talk about employment! Assess clients for interest/motivation to return to work
- Refer clients for benefits counseling services
- Stabilization! Address employment-specific barriers like medical care, mental health, housing, transportation, childcare, etc.
- Create goals to help build resume
- Support client’s goals to be productive and increase independence

Building on Best Practices

- Essential to explore client’s beliefs about work incentives, how work will impact their health, and why work is important.

- Coordinate with ALL supportive service providers to ensure stability in other areas - housing, mental health, medical health, and recovery when possible.

- Keeping a job is harder than finding a job so Post Employment Support is critical.

- Diversity and awareness in employment services and career planning.

“The only place success comes before work is in the dictionary.”

- Vince Lombardi

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