



## ***THE RIGHT TO WORK IN PRACTICE***

***What works for people living with mental  
ill health (and why)***

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# A quick overview...

Four main categories of employment schemes:

- Sheltered work
- Vocational training
- Transitional employment (*or work experience*)
- Supported employment

*\*Volunteering important in its own right but not employment*



# Sheltered work

- Specially constructed and protected environments
- Disappearing from modern mental health services across the world...

## WHY?

- Changing aspirations of mental health service users
- Poor-quality, repetitive work (often with little or no pay)
- Segregation from the workaday world
- Very low rates of transition to the open labour market
- Very high costs

# Vocational training

- *Train, then place*: preparing people for work by providing them with vocational skills

## Difficulties?

- Poor results when it comes to finding paid work
- Fast-changing labour market vs basic, generic training schemes
- Basic training in IT skills, woodworking, catering = not sufficient
- *Training trap* : risk of getting stuck on a training roundabout, accumulating certificates in basic skills - which many enjoy and value - but never getting actual jobs.

# Transitional employment (or work experience)

Preparing people psychologically and socially for paid work by taking on a temporary job with a view to giving them the confidence and discipline to apply for more permanent positions

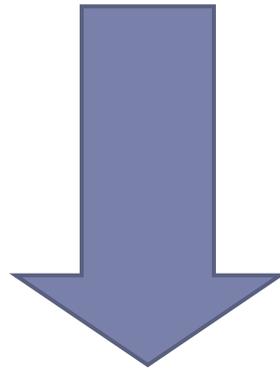
- *For some:* a relatively risk-free form of employment commitment as a necessary stepping stone to the open labour market
- *For others:* another difficult transition from a work experience to a permanent job

International Clubhouse Standards now include the provision of individually supported employment opportunities

# Supported employment

- *Place then train*
- Adapted originally from the 'job coach' model of supported employment for people with intellectual disabilities

Supported employment is today's focus



# Outline of talk



## Individual Placement and Support

- What the evidence tells us
- What are the key principles
- Why it works
- How to implement it

# What researchers say ...

This review compares supported employment and IPS with other approaches for finding employment. Drawing from a total of 2259 people with mental health problems in 14 studies, the review has two main findings:

- 1) Supported employment increases the length and time of people's employment
- 2) People on supported employment find jobs quicker. Supported employment and IPS are better than other approaches in these two respects...

*Kinoshita et al Cochrane Review 2013*

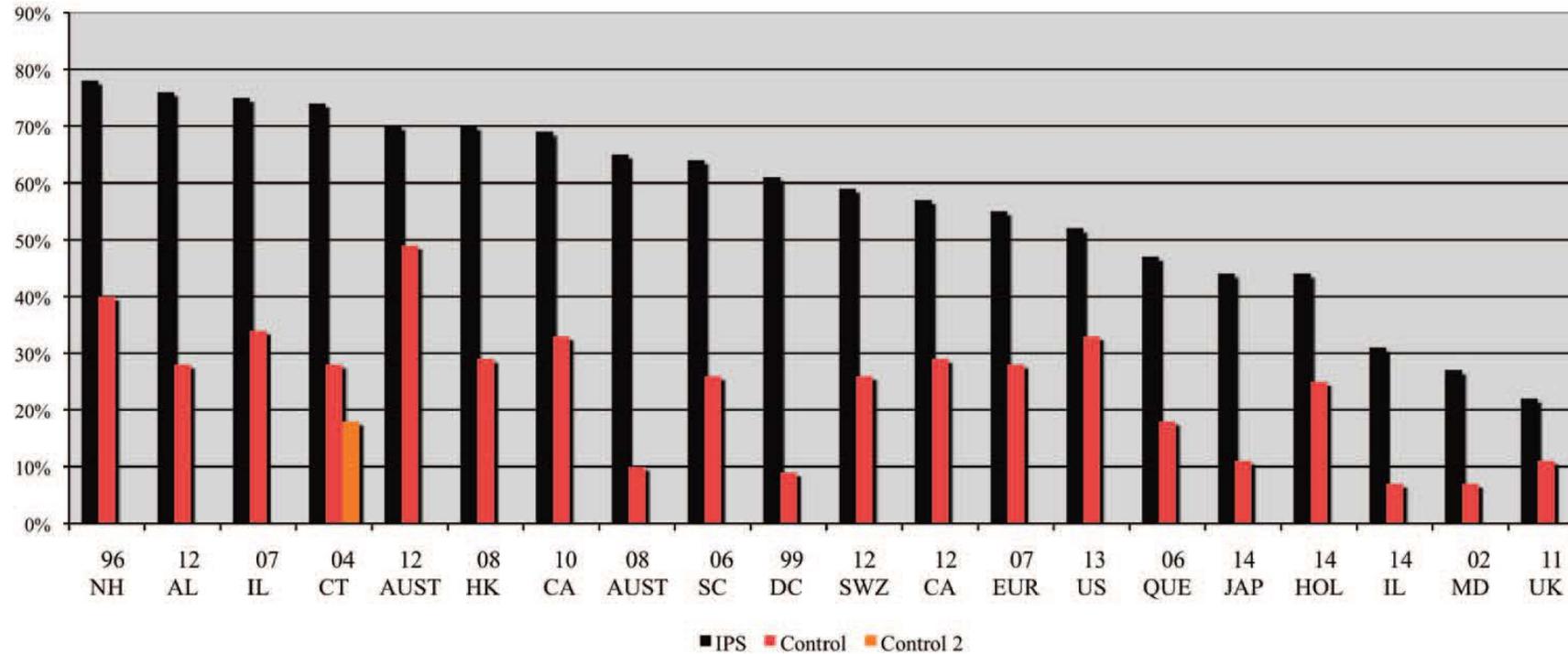
## What researchers say ...

The results demonstrate that the greater effectiveness of supported employment in improving competitive work outcomes is sustained beyond 2 years and suggest that supported employment programs contribute to reduced hospitalisations and produce a higher social return on investment.

*Hoffmann et al. Am J Psychiatry 2014*

# Evidence for what works best

Competitive Employment Rates in 20 Randomized Controlled Trials of Individual Placement and Support



# IPS in Europe: 6 countries trial

The EQOLISE RCT compared traditional vocational services (non-integrated 'train-place') with IPS for people with schizophrenia in the UK Germany, Italy, Bulgaria, Switzerland and the Netherlands (Burns et al, 2007):

- 55% gained in IPS employment vs. 28% in traditional service
- 13% drop-out in IPS vs. 45% in traditional service
- 20% readmitted in IPS vs. 31% in traditional service

There was therefore:

- A reduction in hospital admissions for those in employment
- No deterioration in health associated with employment

# IPS services worldwide

- North America

*USA, Canada*

- Europe

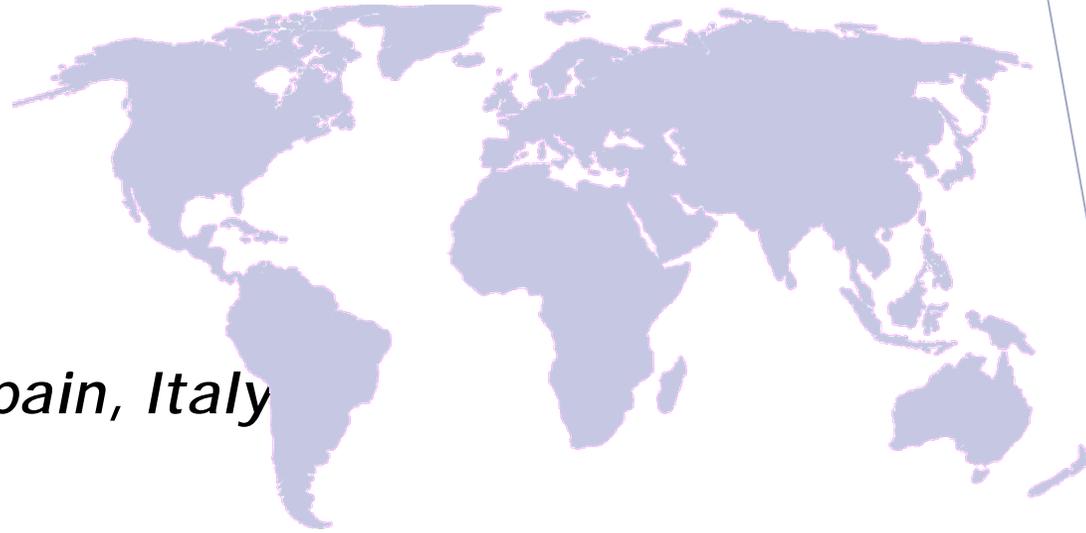
*UK, Netherlands, Norway, Spain, Italy*

- Australasia

*Australia, New Zealand*

- Asia

*Japan, Hong Kong*



# What is IPS?

8 evidence-based principles:

1. Eligibility is based on individual choice - no exclusions;
2. Competitive employment is the goal;
3. Employment support is integrated with treatment
4. Rapid job search (within 4 weeks)
5. Job finding, and all assistance, is individualized;
6. Employers approached with individuals in min
7. Follow-along (in work) supports are continuous;
8. Financial planning is provided.

# The keys to success

A pragmatic approach with employers:

- Understanding the way the local labour market works
- Bypassing conventional recruitment methods where necessary
- Selling the individual not the disability
- Building supportive relationships with good employers

# Implementation - fidelity to the model

- The greater the fidelity to the model the better the job outcomes. Fidelity a better predictor of employment outcomes than disability scores
- Employment specialist's skills and results improve with experience and good supervision
- Good record keeping and regular externally-led fidelity reviews improve performance and guard against programme drift
- State/Regional Trainer programmes have proved successful in the US, UK and New Zealand

# Conclusions

- Train and place models involving extensive (sometimes endless) work preparation do not work but are still far too common
- IPS is not a magic bullet but by far the best model we have and is effective across different cultures and language groups
- Understanding why it works and knowing how to improve performance are the keys to successful implementation.

# Thank you for your attention!

If you would like to read more...

Click below



- ▶ [International employment schemes for people with mental health problems, Bob Grove, BJPSYCH International](#)