

Future of Supported Employment

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The President's New Freedom Commission Report (2003)

- “The main goal of the mental health system is to help people to live, learn, work, and participate fully in their communities”
- Mike Hogan (2006): “Work is the most direct step to recovery”
- “Supported employment is the most effective strategy to help people achieve their employment goals.”

Overview

- Current Status of SE
- Limitations of SE
- Current Research on SE
- Thresholds-Dartmouth Center

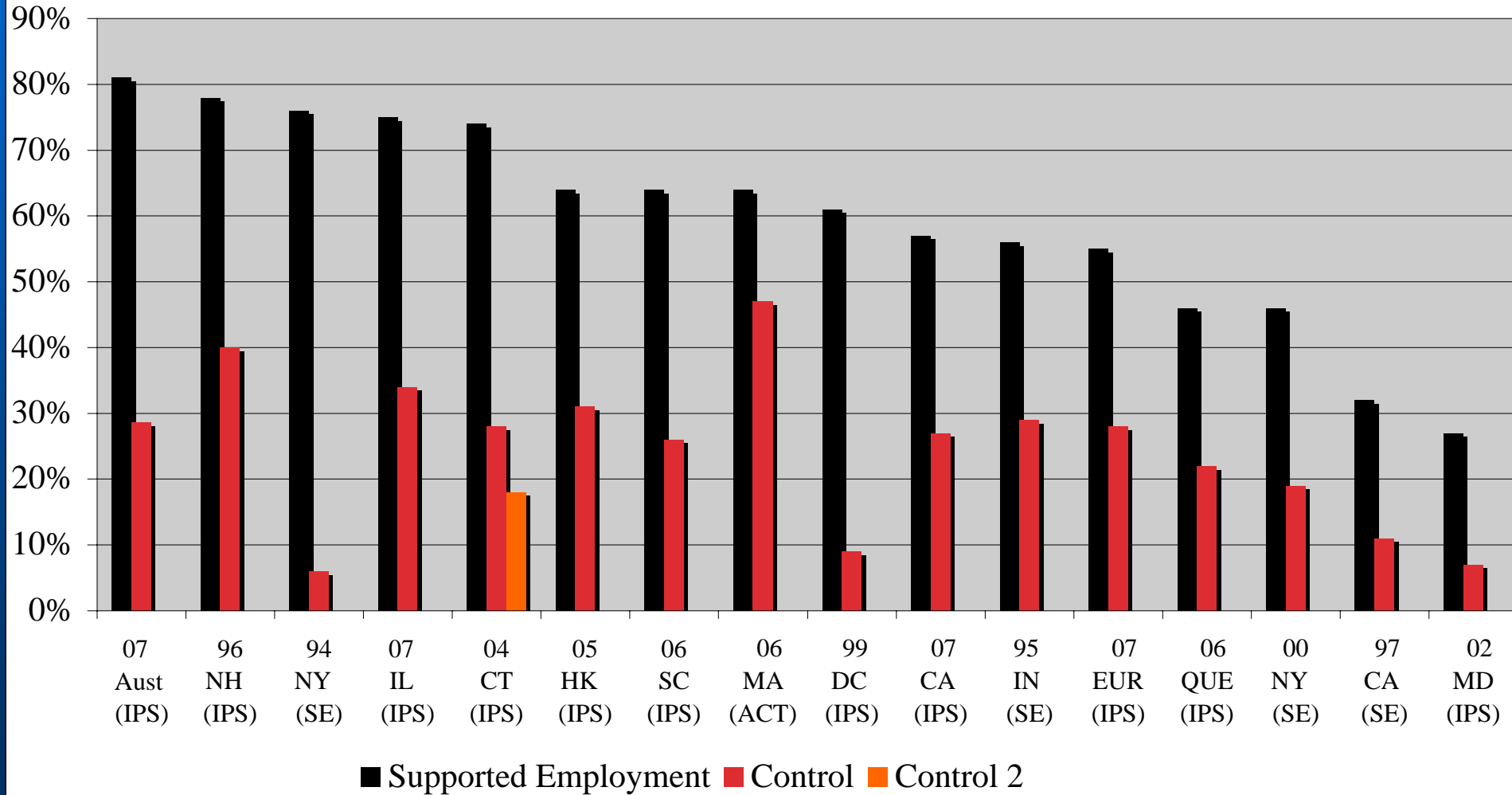
Current Status of SE

- SE model is simple and effective
- Other benefits accrue with consistent work
- Work outcomes improve over time
- SE is relatively easy to implement

IPS Supported Employment

- Competitive employment
 - Team approach
 - Client choice regarding timing
 - Benefits counseling
 - Rapid job search
 - Job matching based on client preferences
 - On-going supports
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- Becker (IPS Fidelity Scale, 2008)

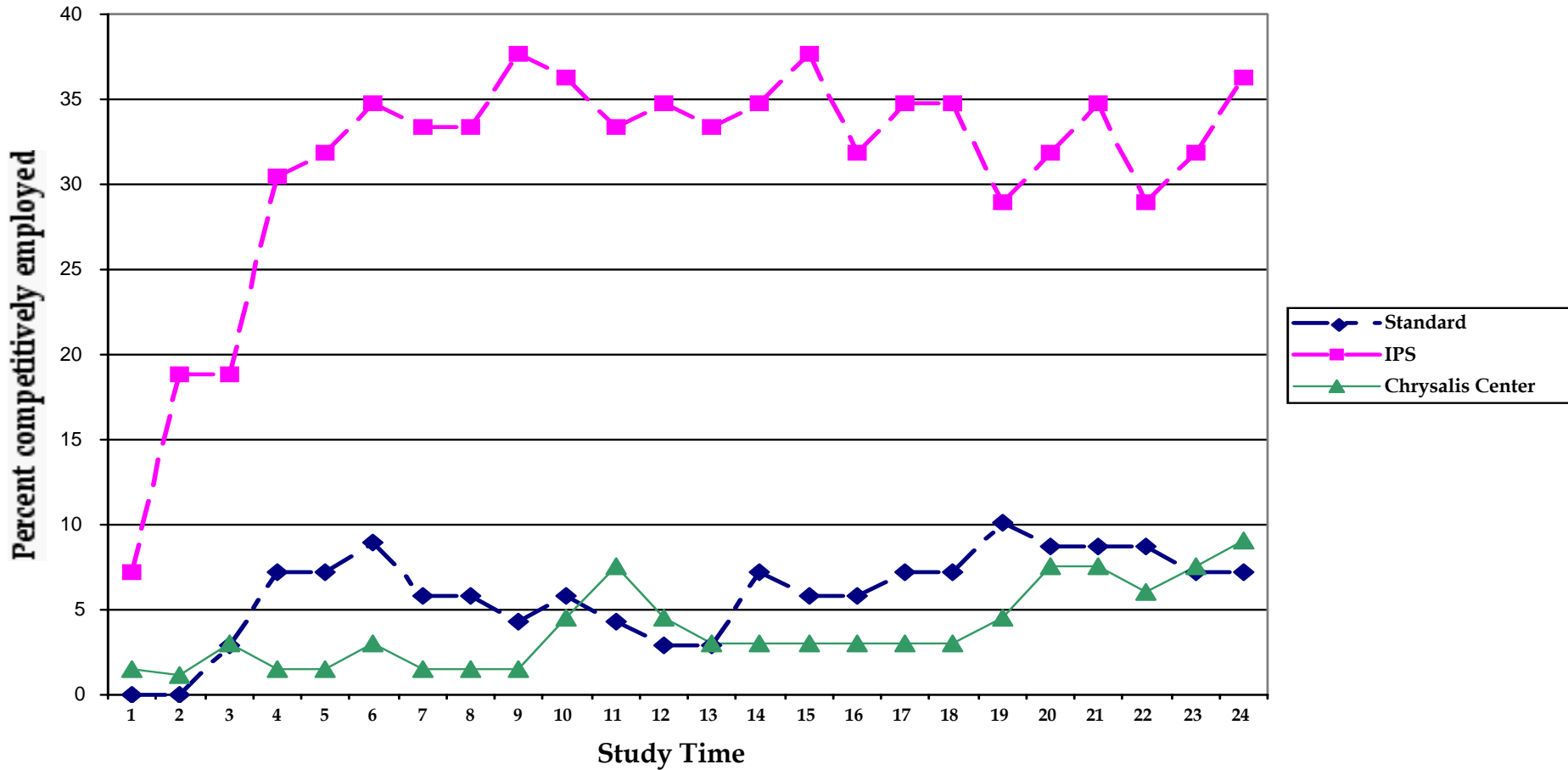
Figure 1. Competitive Employment Rates in 16 Randomized Controlled Trials of Supported Employment



CT Supported Employment Study

(Mueser, 2004)

Percent Competitively Employed in 24 month period



Impact on Other Outcomes

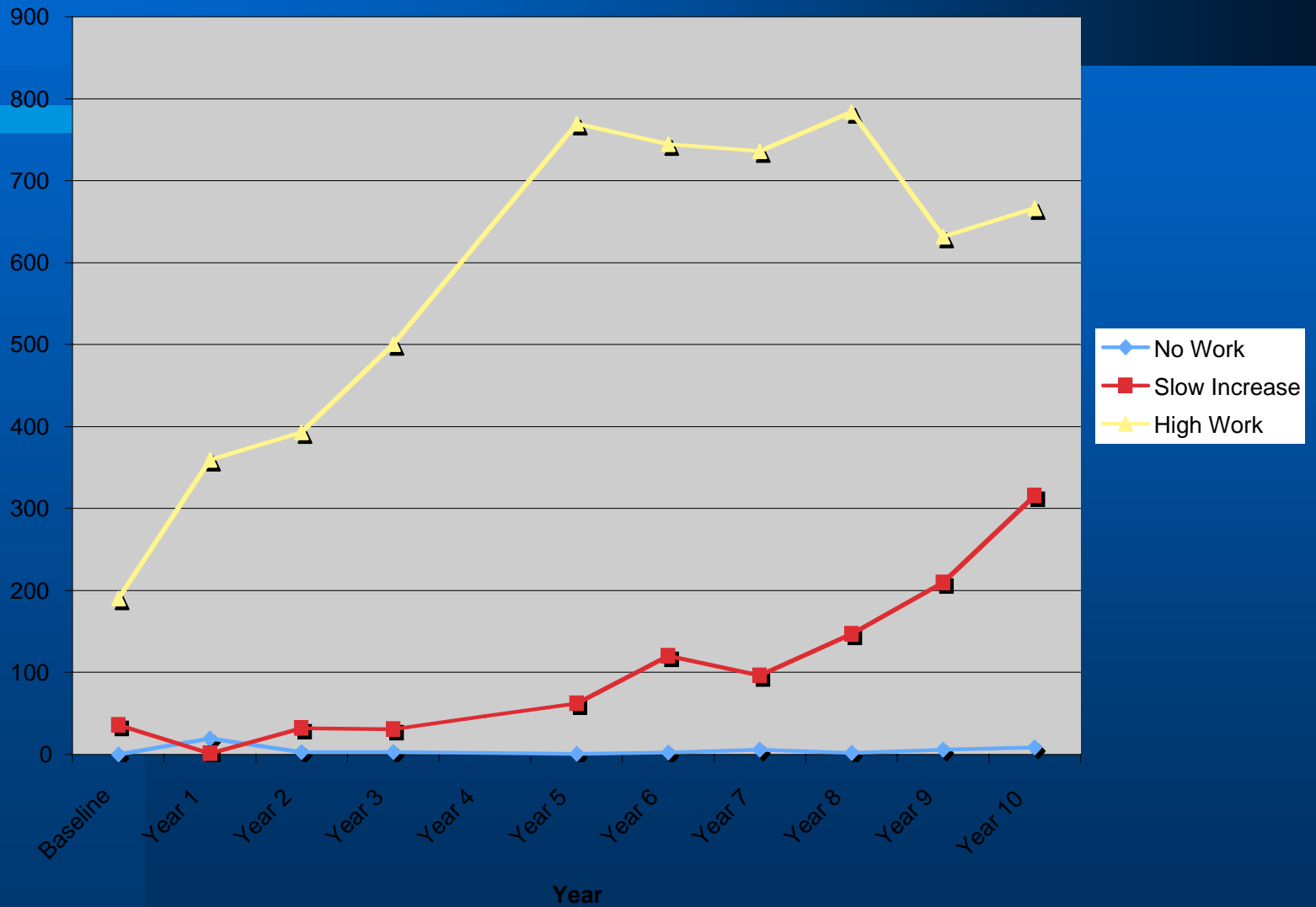
- Improved self-esteem, symptom control, quality of life
- Related to sustained competitive employment
- No changes with sustained sheltered employment

(Bond, 2001)

Long-Term Outcomes

- 4 studies with 10-year follow-ups
(Test, 1989; Salyers, 2004; Becker, 2006; Bush, in prep)
- Work outcomes improve over time
- Costs decrease dramatically for consistent workers (Bush, in prep)

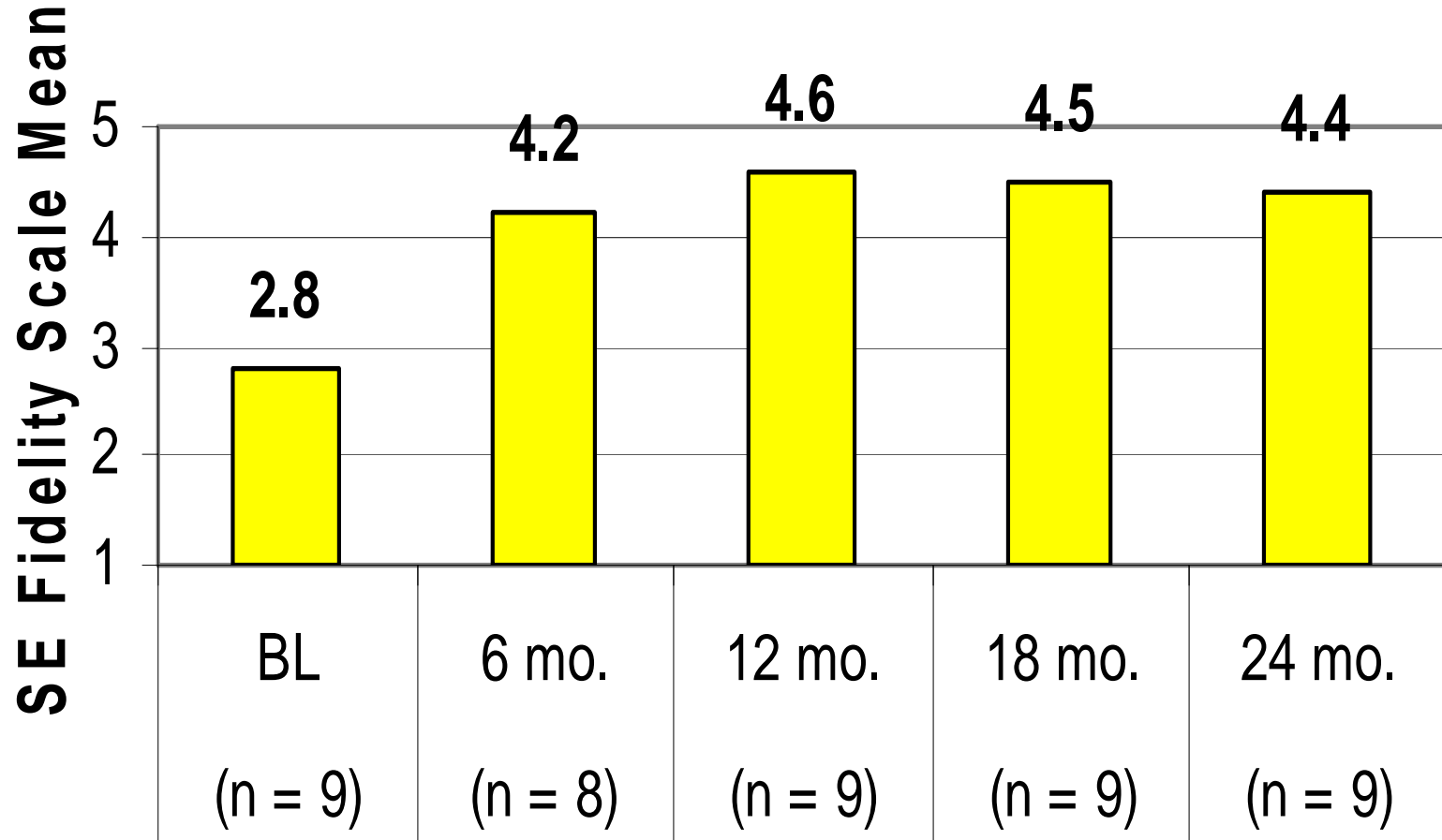
Average Hours of Employment, 3 group analysis



National EBP Project

- 5 evidence-based practices: SE, IMR, FPE, ACT, IDDT
- 53 sites in 8 states
- Programs studied for 2 years

Fidelity of SE Programs



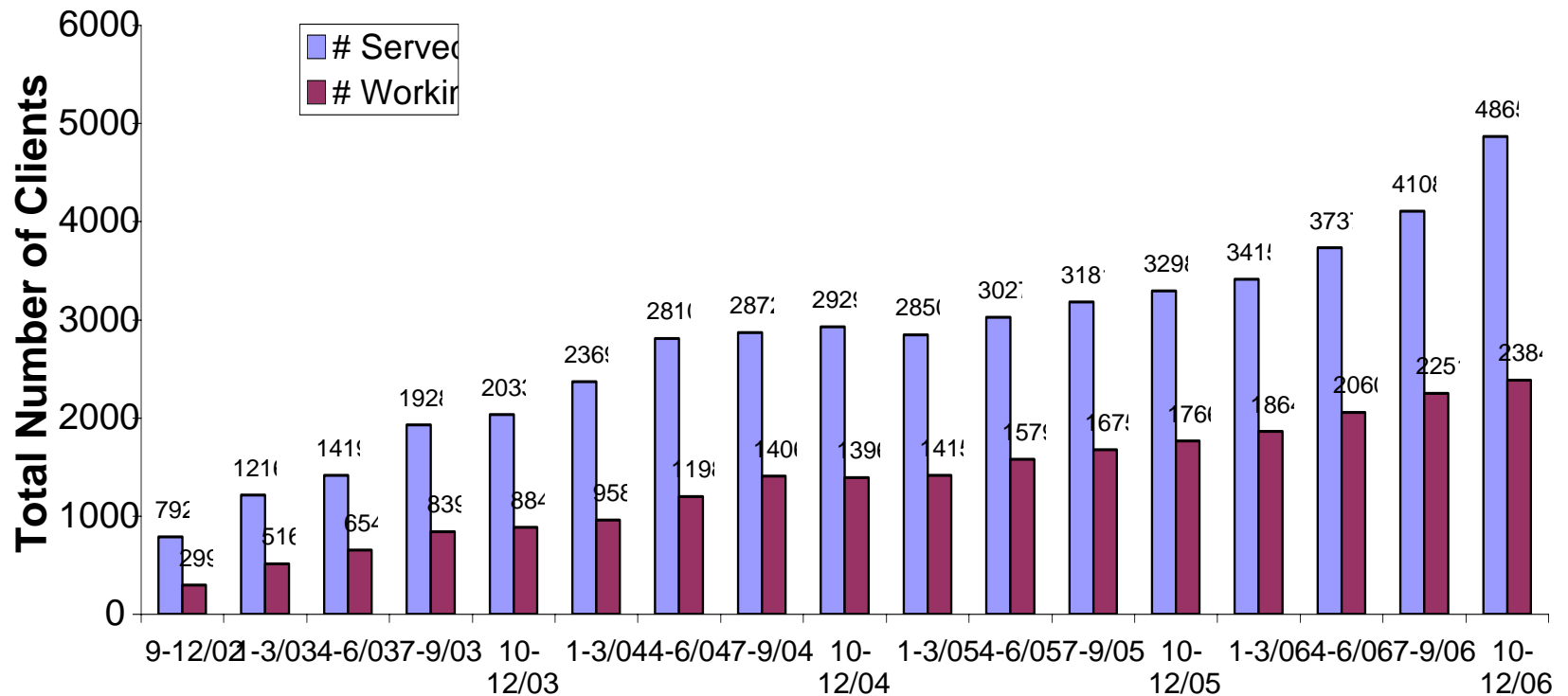
Johnson & Johnson- Dartmouth Project

- Mental health-vocational rehabilitation collaboration
- implement evidence-based SE
- Local programs selected by states
- Dartmouth provides training, consultation, and evaluation
- First states: CT, DC, KS, MD, OR, SC, VT
- New states: IL, MN, MO, OH

● (Drake, 2006)

J&J-Dartmouth Project

Total Number of Clients Served & Working in All Ten \$



Limitations of SE

1. Many do not express interest in SE
2. Many in SE do not achieve consistent employment
3. Consistent workers in SE do not work full-time

1. Lack of Interest in SE

- Expectations
- Benefits trap

8-12 Year Follow-up: Day Treatment to SE

- 71% working at follow-up
- 85% in competitive jobs
- 71% worked more than 50% of FU
- 90% still receiving benefits

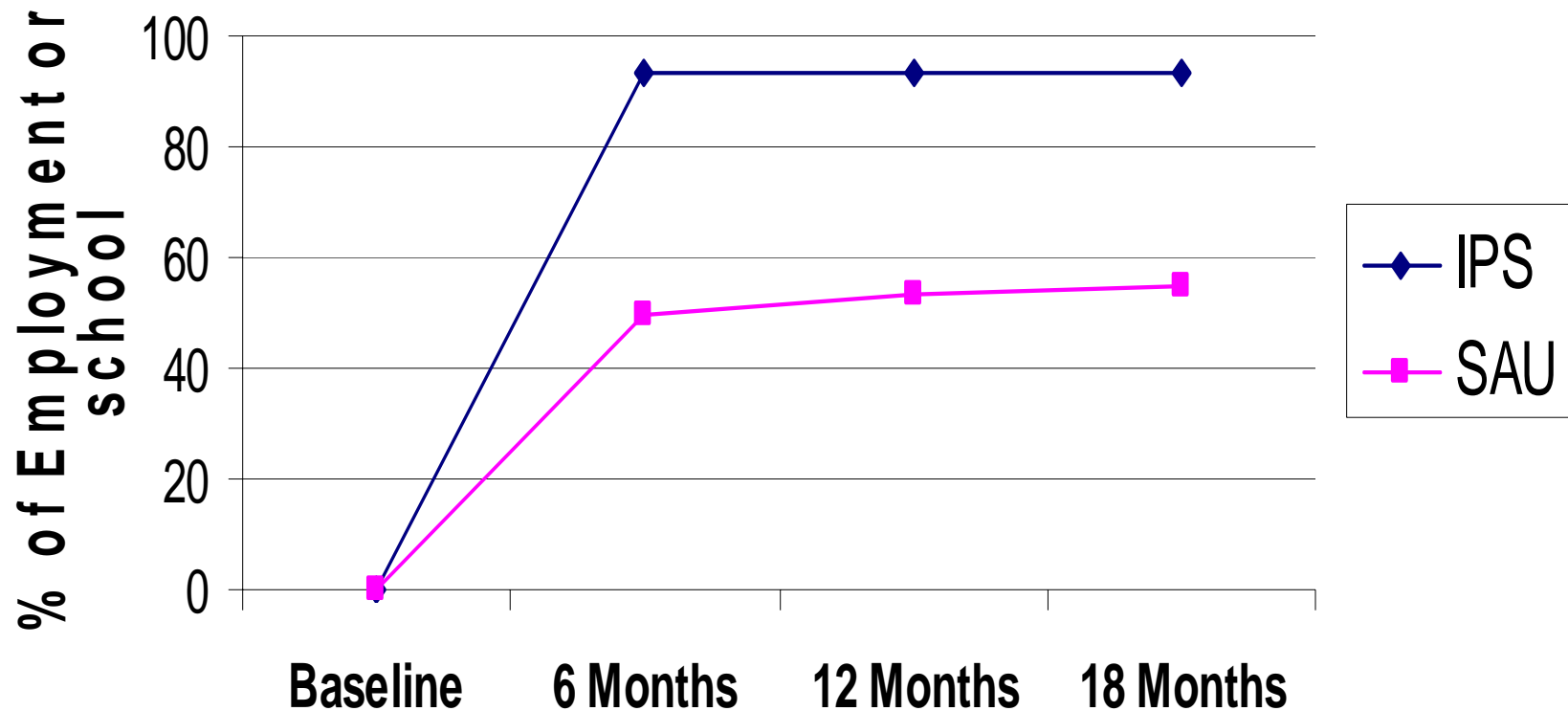
(Becker, 2006)

Early Intervention

- First episode psychosis (Neuchterlein, 2005)
- SSA: change adjudication process
- SSA: accelerated benefits
- Health insurance

Early Intervention (Neuchterlein, 2005)

IPS Supported Employment for Clients with First-episode Schizophrenia



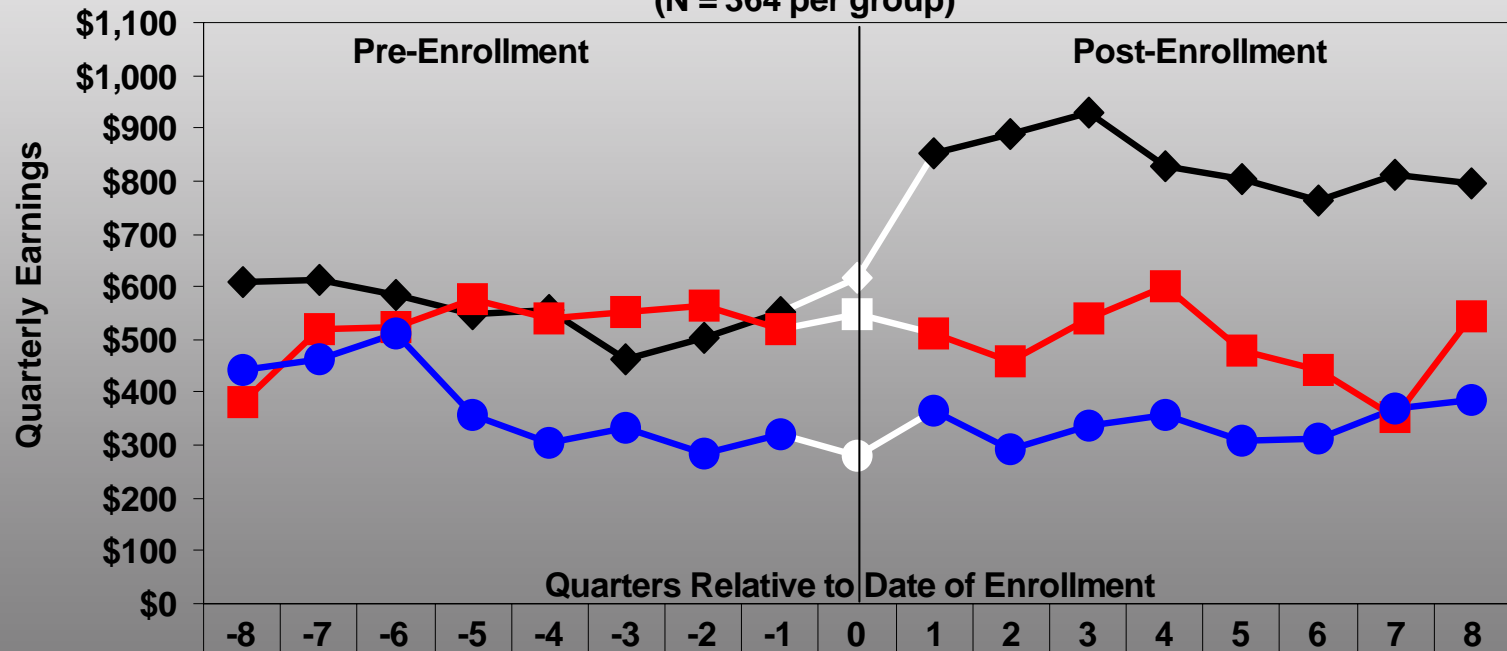
Motivation

- People fear losing benefits (NAMI, 2003)
- Benefits counseling
- Motivational counseling
- Contingency management

Benefits Counseling

(Tremblay, 2005)

**Outcomes for Psychiatric Benefit Counseling Intervention Group
Versus Two Nonparticipant Psychiatric Voc Rehab Comparison Groups
(N = 364 per group)**



◆ Intervention	608	612	585	549	557	464	504	552	615	852	887	928	830	804	765	812	796
■ Contemporaneous	382	521	525	575	540	553	566	519	546	511	459	538	602	478	441	353	542
● Historical	441	464	511	359	305	333	284	320	279	365	290	335	357	309	315	369	384

Motivational Interviewing

- Counseling to clarify goals,
- Resolve ambivalence,
- And enhance motivation

(Drebing, 2006)

Contingency Management

- Behavioral principles
- Reinforce desired behaviors
- Attendance, reduced substance abuse, job finding tasks
- Initial results positive

(Drebing, 2006)

Benefits Reform

- People are socialized into disability
- Changing benefits structure essential

Policy Changes

- **People with disabilities need cash, health insurance, and a job**
- **They do not need to be assigned to a lifetime of unemployment and poverty in order to get health insurance**
- **Legislative change is critical**

Carl Suter, CSAVR (2006)

Current Initiatives

- National health insurance
- Experiments with Social Security Administration regulations
- Temporary assistance and extended benefits with returns to work

2. Inconsistent Employment

- Only one-third become consistent workers
- One-third do not become competitively employed
- One-third do not become consistent workers

Efforts to Improve SE

- Address symptom barriers
- Improve job development
- Improve job supports
- Improve career development supports

Social Security Administration Mental Health Treatment Study

- RCT in 22 cities
- 3,000 SSDI beneficiaries
- Interventions
 - Insurance package
 - IPS supported employment
 - Systematic medication management
 - EB mental health practices
 - Medical care

(Frey, 2008)

Addressing Cognition

- Concentration, memory, reaction speed, and problem-solving
- Job match
- Improve cognitive function
- Compensatory strategies

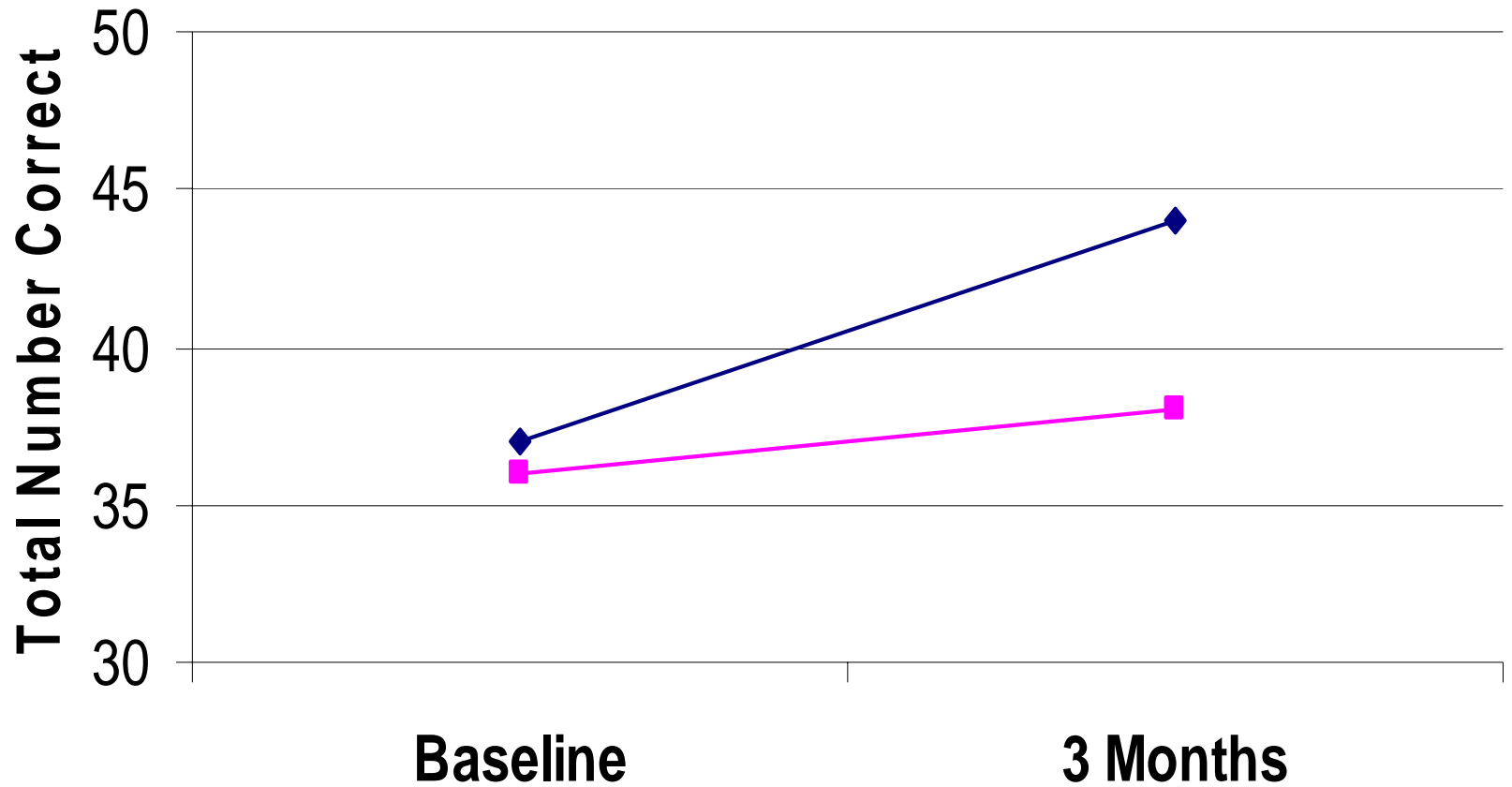
(McGurk, 2008)

Cognitive Training

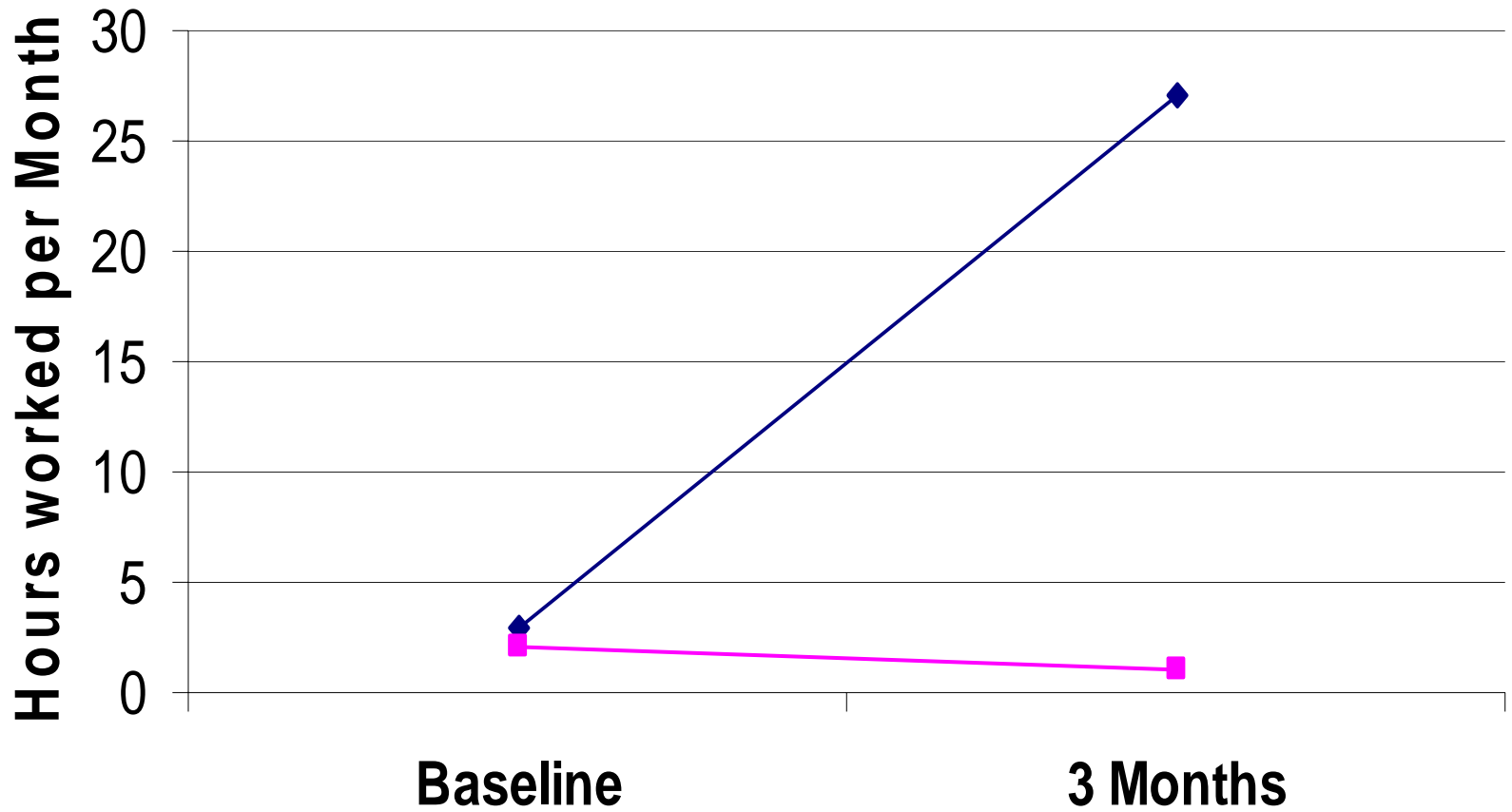
- Practicing cognitive tasks may create new neuronal connections
- Tasks directly relevant to work tasks
- New capacity may translate to work

(McGurk, 2005)

Computer Training and Memory



Computer Training and Work



Medications

- MATRICS study
- Cognitive medications for schizophrenia
- Will they impact functioning?

(NIMH, 2007)

Improve the SE Model

- Job finding
 - Variability in styles and successes
- Job supports
 - Skills training while working
 - Individualized job supports
 - Errorless learning

(Mueser, 2006; Marder, in prep)

(Kern, in press)

Career Development

- Long-term studies
- Supported education
- Disability policies
- Career counseling

3. Part-time Work

Disability Reforms

Insurance reforms

Thresholds-Dartmouth Center

- 6,000 clients per year
- Recovery center
- Multiple protocol choices
- 90% participation goal
- Electronic decision support systems

Conclusions

- SE has created hope for for people with psychiatric disabilities, their families, and MH/VR practitioners
- Outcomes can be enhanced further
- New research
- Policy changes

Dartmouth SE Team

- Hoyt Alverson
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- Laura Flint
- Paul Gorman
- David Lynde
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- Susan McGurk
- Kim Mueser
- Doug Noordsy
- Michelle Salyers
- Sarah Swanson
- Will Torrey
- Rob Whitley
- Rosemarie Wolfe
- Haiyi Xie

Updates on SE

- Psychiatric Rehabilitation Journal
 - Spring, 2008, special issue on SE
- Supported Employment: A Practical Guide for Practitioners and Supervisors

(Swanson, 2008)

Information: books, videos, research articles

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