A research project by Southdown Housing Association

‘Is work good for you?’

Does paid employment produce positive social capital returns for people with severe and enduring mental health conditions?

By Martin Dominy and Toby Hayward-Butcher

Southdown Making Life Work
Research Summary Abstract

<table>
<thead>
<tr>
<th>Purpose of this paper:</th>
<th>This research examines whether paid employment produces positive social capital returns for people with severe and enduring mental health needs.</th>
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<tbody>
<tr>
<td>Design/ methodology/ approach:</td>
<td>A sample of 96 users of mental health services in Sussex who had been supported to return to work by Southdown Housing Association completed a questionnaire, rating their level of agreement with statements about their quality of life, both before and after they started working. In addition three supplementary individual case studies were made.</td>
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<tr>
<td>Findings:</td>
<td>Analysis showed a significant increase in reported quality of life following employment. The post-employment positivity of responses were found across most areas of wellbeing. With significant but varying gains were found in the majority of individuals reported improvement in the following areas; social life, independence, resilience, confidence and self-esteem, optimism, satisfaction, general happiness and ability to manage mental health. A third of individuals reported improvements in personal relationships and physical health (Qualitative data indicated increased confidence was perceived by participants as the most important factor). Increased benefits were also found to be associated with individuals who had worked for a longer period, worked longer hours and were supported on a contract with high fidelity to the IPS model.</td>
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<tr>
<td>Research limitations/ implications:</td>
<td>The paper relies on a self-report method requiring respondents to reflect on how they felt pre and post gaining employment. This follows a rather subjective methodology. There were a number of individuals who had only worked for 1 month or less in the past year. These individuals are unlikely to have experienced the kind of social capital returns, or in fact any real impact at all as a result of working and likely distorted the results to some extent.</td>
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<tr>
<td>What is original/value of paper:</td>
<td>There have been limited research studies that look at the additional social capital returns for people with enduring mental ill health who return to work.</td>
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Introduction

Southdown Housing Association, a not-for-profit Sussex-based organisation, is jointly commissioned by local authorities and Primary Care Trusts to provide vocational support services within Sussex Partnership NHS Foundation Trust’s Mental Health Recovery Teams. It currently provides vocational support to over 1,000 people each year across Brighton and Hove, East Sussex and West Sussex, and in 2010/11 successfully met its contract targets by securing paid employment for 191 individuals.

Based on the proven success of these kind of services, Southdown has been accredited as a national ‘Centre of Excellence’ for delivery of the IPS model by The Centre for Mental Health, working in partnership with the Sussex Partnership Foundation Trust.

As part of its commitment as a Centre of Excellence Southdown was keen to undertake additional research to consider the wider benefits to the individuals that it has supported into work. During the summer 2011 Southdown commissioned a research project that looked to answer the question ‘Is work good for you?’ – in particular to consider whether paid employment produces additional positive social capital returns for people with severe and enduring mental health needs.

Mental Health and Employment

The estimated employment rates (above the benefit threshold of 16 hours a week) for people with mental health conditions are estimated to be around 13.5%, whilst for people receiving secondary mental health care this figure is as low as 3.4%. These levels compare poorly with the national average of 73.5% for working age adults in the UK as a whole.

Mental ill health is the most common reason for claiming health-related benefits; 42% of the 2.6 million people claiming health-related unemployment benefits are doing so primarily because of a mental health condition. Many others have a secondary mental health condition that contributes to their continuing unemployment and increases the barriers faced in returning to the workplace.

Amongst the working population at any one time, one in three people of working age in the UK are likely to experience some kind of mental distress or mental health problem. One in six adults of working age experiences some symptoms of mental distress that do not meet the criteria for a diagnosis of mental ill health but can affect their ability to work. One in six experiences symptoms that meet the criteria for a clinical diagnosis of anxiety and/or depression, whilst one in 100 have symptoms that meet the criteria for a diagnosis of a serious mental health condition such as schizophrenia or bipolar disorder. Whilst these may have some impact upon a person’s work, the stigma and discrimination experienced is often a greater barrier. Other contributing factors are the limited availability of specialist employment provision nationally, and variations in performance and expertise within current commissioned employment services.
Specialist support to access employment

The model of supported employment adopted by Southdown is based on Individual Placement and Support (IPS) model. This model, originally developed by Robert Drake and Deborah Becker, is based on the principle that placing and then training people in the workplace is far more effective than traditional ‘work readiness’ approaches such as classroom pre-employment training and sheltered work. The model has been subject to considerable research, principally in the UK by The Centre for Mental Health (www.centreformentalhealth.org.uk).

The key principles of the model include:

- Zero Exclusion
- Welfare Benefit planning is offered
- Attention to individual’s preferences
- Competitive employment is the goal
- Rapid job search
- Continuous and comprehensive assessment
- Unlimited time support
- Employer engagement

Part of the accreditation process as a Centre of Excellence is the requirement for lead provider agencies to evidence the degree to which the delivery of their IPS services adheres to the key principles of the model. This is assessed through fidelity reviews which measure services against a fidelity scale. The Centre for Mental Health received Innovation funding during 2010 and 2011 to employ a dedicated IPS Training and Development Manager to work with Southdown to support the development of the IPS model, as well as undertaking fidelity reviews for all of Southdown’s IPS services in Sussex. All of Southdown’s services were assessed as meeting the fidelity scale.

Evidence base for IPS

Previous research seems to suggest that supported employment is more effective in improving mental health and clinical functioning than traditional vocational services, and that IPS is more effective in doing this than other models of supported employment. IPS is now internationally recognised as the most effective model at getting people into work and promoting recovery. Whilst we recognise and welcome the research that has lead to the formation of this evidence-based practice model, Southdown was keen to measure the impact and Social Capital gains of returning to work on the lives of the people who access our services.

Although there seems to be broad consensus that a link between work and recovery exists, there is very little empirical evidence to verify this. The research study reported in this paper directly addresses the link between work and mental health recovery by examining the relationship between working and the effects on people’s health, wellbeing and quality of life. In particular, it examines this effect for people with severe and enduring mental health conditions using supported employment services.
Social Capital Research

It is now thought that wellbeing and happiness can be approached scientifically and measured in quantitative terms. Indicators of general wellbeing tend to overlap strongly with indicators of recovery from mental ill health. Social Capital is an important concept in considering recovery and encompasses various factors related to life changes, including social life, personal relationships, confidence and social inclusion. There is a reciprocal link between work and recovery; and paid employment can provide several social capital returns to individuals.

Employment helps individuals to recover in a variety of ways. This includes promoting social inclusion and providing individuals with meaningful social and economic activity that fosters a sense of belonging and purpose in their lives.

However, whilst there has been a small amount of research in the UK into clinical outcomes for clients who have used IPS services, there has been little research into the social capital returns for such individuals.
The Research Project

Aim

The aim of our research project was to ascertain whether clients with mental health conditions who had been supported into employment through Southdown’s IPS services between April 2010 and March 2011 had experienced additional social capital returns that positively contributed to their general health and wellbeing, as well as their social recovery from mental health conditions.

Hypotheses

The hypotheses that we sought to test were as follows:

(a) The majority of clients, including those who have only used the service for a short time, have experienced a positive effect on their wellbeing and recovery, and have experienced social capital returns since gaining competitive employment.

(b) The longer the amount of time clients have spent in competitive employment post-IPS service positively correlates with the extent to which they have experienced social capital returns.

(c) The social capital returns will be higher in teams which have been assessed with a higher fidelity score to the IPS theoretical model – i.e. where job search and attainment has been rapid, and individual preferences have been satisfied to the greatest degree.

Methodology

Southdown employed a research worker to conduct the research project during summer 2011.

Study group

This comprised 191 clients supported by Southdown between April 2010 and March 2011 who had secured a paid employment outcome.

Study Design

The main source of data collection was a questionnaire designed with input from clients. This asked clients to state how entering paid employment had impacted on ten key Social Capital areas of their lives:

1. Independence
2. Managing new situations
3. Satisfaction
4. General happiness
5. Optimism/resilience
6. Confidence/self esteem
7. Social life
8. Physical health
9. Managing mental health
10. Close personal relationships

Respondents were asked to indicate their level of agreement with the ten areas using a five-point scale, with 1 indicating strong disagreement, and 5 indicated strong agreement. They were asked to make this assessment twice, once in relation to how they felt before work and once in relation to how they felt now.

e.g. Managing New Situations

--“Before I started working I felt able to deal with new challenges.”

--“Now that I have worked I feel able to deal with new challenges.”

In addition respondents were asked to provide general comments on the impact working had had on their lives. Questions were also asked regarding more general information in relation to how long they had been in work and the time it took to secure employment.

Space was provided for additional comments relating to the impact working has had on their lives.

Procedure

Questionnaires were sent to the 191 clients who received support for Southdown. Prospective research participants were initially given two weeks to respond to the questionnaire. After two weeks follow up phone calls were made by the researcher to assist respondents to carry out the questionnaire over the telephone.

50 people responded by post with a further 46 completing the questionnaire via a telephone interview with the researcher. Three more in depth interviews were conducted.

Statistical Analysis

Responses to the general question as to whether work had had an overall positive impact on the quality of life and mental health of participants were analysed.

The ten key Social Capital questions were analysed for variances pre and post gaining work. Mean differences were calculated for all variables, as well as standard deviations to show the variability of responses. Differences were further analysed by secondary factors (gender, age, time in job, weekly hours, time it took to find job).

Qualitative information was also gained from the additional three interviews with clients in the case studies and any additional general comments included in questionnaires.
Results:

Primary variables

Overall impact of work on the quality of life and mental health

Responses to the general question were measured on a five-point scale, with 5 indicating strong agreement and 1 strong disagreement with the statement that working had had a positive impact on the mental health and quality of life of the individual. The average response was 3.94.

Social Capital key questions

Results were analysed to indicate the movement between pre and post work. The average point-difference across all ten questions was 1.35, suggesting that in general, there was a significant upward shift in the level of agreement indicated toward all statements.
A more detailed breakdown per key area is shown below:

<table>
<thead>
<tr>
<th>Percentage of point-differences that were positive</th>
<th>Average point-difference</th>
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<tbody>
<tr>
<td>Overall impact of work on quality of life and mental health</td>
<td>80%</td>
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<table>
<thead>
<tr>
<th>Key Social Capital Areas</th>
<th>Percentage of point-differences that were positive</th>
<th>Average point-difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Independence</td>
<td>78%</td>
<td>1.31</td>
</tr>
<tr>
<td>2 Managing New Situations</td>
<td>78%</td>
<td>1.57</td>
</tr>
<tr>
<td>3 Satisfaction</td>
<td>76%</td>
<td>1.65</td>
</tr>
<tr>
<td>4 General Happiness</td>
<td>76%</td>
<td>1.53</td>
</tr>
<tr>
<td>5 Optimism</td>
<td>74%</td>
<td>1.67</td>
</tr>
<tr>
<td>6 Confidence/Self-esteem</td>
<td>73%</td>
<td>1.56</td>
</tr>
<tr>
<td>7 Social Life</td>
<td>52%</td>
<td>0.97</td>
</tr>
<tr>
<td>8 Managing Mental Health</td>
<td>61%</td>
<td>1.18</td>
</tr>
<tr>
<td>9 Physical Health</td>
<td>39%</td>
<td>0.59</td>
</tr>
<tr>
<td>10 Close Personal Relationships</td>
<td>31%</td>
<td>0.45</td>
</tr>
<tr>
<td><strong>Overall average</strong></td>
<td>64%</td>
<td>1.25</td>
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**Secondary Variables**

Results were also cross-referenced against the following other factors: gender, age, time spent in the job, weekly hours, and which of the three Southdown IPS services had provided support. This was to ascertain whether patterns of responses were significantly different for different groups.

**Gender**

No difference was found between men and women and both genders generally gave consistent and similar responses.

**Age**

When results were analysed as a whole, there was a suggestion of a small trend of more positive responses from older age groups, and less positive responses from younger age groups. However, this was not a trend that was present in individual analyses of all questions. Further research is needed to investigate this further.
Time spent in the job

The overall analysis suggested a positive correlation between the amount of time spent in the job, and the positivity of responses given, though this correlation was only present in approximately half of the key questions. There was also a suggestion that positive responses began to tail off once individuals had worked for over 24 months, but this is not wholly reliable since only 8 individuals in the survey had worked for over 24 months.

Weekly hours

Overall analysis, and analyses of all individual questions consistently produced strong positive correlations between the number of hours worked per week, and the positivity of the point-differences indicated toward questions. Those who worked longer hours seemed to report more positive benefits as a result of working than those who worked shorter hours.

Southdown Team providing support

With the exception of two individual questions, there was otherwise strong and consistent results indicating that those receiving support from the East Sussex Team had benefited from working more than those on the other two contracts. This trend was repeatedly found across nearly all questions, and was even stronger on overall analysis.
Conclusions against hypotheses

(a) The majority of clients, including those who have only used the service for a short time, have experienced a positive effect on their wellbeing and recovery, and have experienced social capital returns since gaining competitive employment.

This was generally supported by the findings. Of 96 respondents, 80% reported a positive change in their wellbeing following a period of employment. In addition many individuals expressed their sincere gratitude for the support from the service, claiming it had “turned their life around”.

Although the positive changes reported were significant, the impact of work is complex and any suggestion that work has had an overnight dramatic effect on people’s lives is clearly dependent on individual circumstances.

(b) The longer the amount of time clients have spent in competitive employment post - IPS service positively correlates with the extent to which they have experienced social capital returns.

There was some variability, but generally there was a degree of positive correlation between the responses given and the time spent in work. (However, this correlation seemed to tail off and responses were less positive after individuals had worked for over 24 months). What this suggests is that this part of the hypothesis is only partially supported by the evidence, indicating that the longer an individual works the greater his/her social capital returns. In addition, the strongest link found was between the number of hours worked per week and the positivity of responses (an additional factor to the original hypothesis).

In addition, the more hours clients worked each week seemed to increase their overall wellbeing. This is an interesting result as it is often assumed that people consider phased returns to work, often on a part-time basis and slowly building up their weekly hours. The more detailed case studies we undertook seemed to indicate that working more hours enabled people to establish a weekly routine more quickly, leaving less free time to fill, and actually helped reduce anxiety.

(c) The Social Capital returns will be higher in teams which have been assessed with a high fidelity score to the IPS theoretical model – i.e. where job search and attainment has been rapid, and individual preferences have been satisfied to the greatest degree.

This was perhaps the area that was most strongly supported by the evidence. Whilst it was only possible to analyse results by the three regional contracts and not the individual mental health teams within these, there was a consistent and strong correlation with respondents on the Brighton and Hove and West Sussex contracts responding in a broadly similar way, whilst respondents on the East Sussex contract responding in a significantly more positive manner. This is particularly significant given that fidelity reviews of the three contracts gave fidelity ratings of 103 (Brighton and Hove), 98 (West Sussex contract) and 110 (East Sussex). What this suggests is that the more delivery of services adheres to the principles of the IPS model, the greater the social capital outcomes for their clients.
Implications for practice

The research study provides confirmation that paid employment produces positive Social Capital returns for people with severe and enduring mental health conditions. In addition, the results of the questionnaire and the high levels of additional feedback provided by the clients has provided further guidance for improvements that could be made to maximise service impact.

Weekly hours: Evidence from operational teams indicates that many clients do not initially feel as though they are able to work longer hours, preferring to look for part-time positions. Although Employment Specialists will support this vocational goal, with evidence indicating that there may also be benefits for working longer weekly hours, staff should also promote this, using case studies of other successful clients. In addition it will be important to retain contact with clients in part-time roles to support them to review the options to increase hours as appropriate.

Further Employment support: Clients that had achieved entry level work were clear that they regard this as a stepping stone to other types of employment or towards their longer term employment goal. The in-work support meeting must ensure that once a person is settled and secure within a new job, the support then focuses on career development.

Fidelity Reviews: It is clear that the fidelity reviews and ratings also have a significant effect in terms of the positive impact of the service for the individual. This reinforces the need to ensure that the delivery and commissioning of IPS services adheres to the principles of the theoretical model.

Highly qualified people: Several people said that the employment service seems to “struggle” to offer sufficient guidance for people seeking higher level jobs for professionally qualified people. The IPS lead providers within the Centre of Excellence programme will be exploring this issue in order to reduce the impact of this.

Coaching: Clients were clear that they prefer the approach of the Employment Specialist to be based on a coaching model to develop long term skills, rather than having tasks done for them.

Structure and confidence: These themes were repeatedly stressed by clients. Work had provided a much needed structure to their day which had not been present before. The most important factor for clients on their return to work journey had been the confidence and feeling of self worth that the Employment Specialist encouraged and engendered.

Southdown and Sussex Partnership staff at National IPS Training London
Limitations and Further Research

Limitations in survey sample composition:
We were pleased to get a response rate of nearly 50% but appreciate that the sample size is still relatively small.

Within the sample there were a number of individuals who had only worked for 1 month or less in the past year. These individuals are unlikely to have experienced the kind of social capital returns, or in fact any real impact at all as a result of working and may have distorted some of our results (negatively).

Further Research:
The link between IPS and social capital returns in the UK is still largely without a coherent evidence base. Whilst the findings of this research suggest there is a positive link, we appreciate that this initial piece of research has some limitations. We consider that there will be benefits in repeating the research again, including undertaking a more detailed research to explore the impacts of length of sustained employment and the number of hours worked each week.

Author profiles

Martin Dominy is Head of Supported Employment at Southdown Housing Association.

Martin has over 20 years experience within the Mental Health sector, and has implemented and managed numerous supported employment services including 4 IPS services. Martin is frequently invited to speak at conferences and to deliver training in both the UK in Europe.

Toby Hayward-Butcher is an independent researcher.

About Southdown

Southdown Housing Association is a specialist provider of support and housing services to disabled and vulnerable people across Sussex. It’s vision is for ‘everyone, no matter what their life experience, background or challenges will have the opportunity to lead their life to the full.’ Established in 1972 it has a long history of working locally to develop and deliver innovative community based projects that puts this vision into practice. It employs 800 staff and provides support services to over 5,500 people each year.

To find out more contact:

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**Key terms**

- **Employment Specialist** – someone trained to support individuals with mental health problems to achieve their employment goals by providing ongoing support both before and after paid employment is secured.

- **Fidelity** – the degree to which the delivery of IPS services adheres to the key principles of the model. Assessed through fidelity reviews which measure services against a fidelity scale.

- **Individual Placement and Support (IPS)** – the model of supported employment whereby job search is rapid and based on individual preferences and the emphasis is on ‘place then train, rather than train then place’.

- **Recovery** – a process of either recovering from the symptoms of mental illness, or learning to manage it in a way that was not previously possible.

- **Social Capital** – a concept used to explain the kinds of returns (positive and negative) experienced by individuals that are non-economic. It focuses on the building of social bonds.

- **Social Inclusion** – the degree to which an individual is, and perceives themselves to be a meaningful and valued member of the society in which they live.

- **Supported Employment** – services aimed at helping individuals with mental health problems achieve paid employment. Based on the idea that work can have a positive impact on individuals’ wellbeing and mental health.

- **Wellbeing** – the way in which it is now considered that happiness can be measured in quantitative terms.
References


Further reading

- Sainsbury Centre for Mental Health, (2009), Commissioning What Works: The economic and financial case for supported employment
- Shepherd, Boardman and Burns, (2009), Implementing Recovery, a Model for Organisational Change, Sainsbury Centre for Mental Health.