

TRANSITIONS

SHIFTING FROM TRADITIONAL TO EVIDENCE-BASED PRACTICES FOR PEOPLE WITH SEVERE MENTAL ILLNESS

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Prepared by

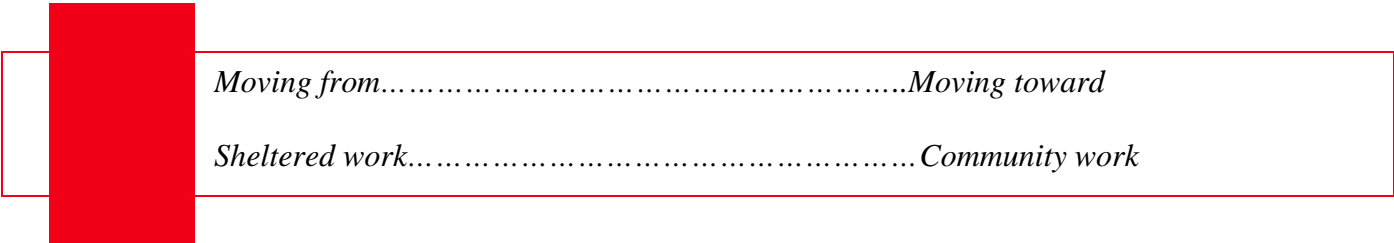
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Most people with long-term mental illness are not employed at any level. This is primarily because many people with a history of severe mental illness are not able to obtain and sustain jobs in the competitive market with no support and they are not interested in the generally low paying, repetitive jobs typically found in sheltered workshop settings (Ford, 1995). Current research indicates, among other things, that most people with psychiatric disabilities want to be employed and that gainful employment in jobs that improve a person’s status results in higher levels of self-esteem and overall life satisfaction (SPI, Virginia Commonwealth University, 2001).

A relative newcomer to the field known as *Evidence-Based Vocational Practices* is challenging the traditional service approaches available to people with severe mental illness. Evidence-based practices are interventions for which there is consistent scientific evidence showing that they improve customer outcomes. One of the six areas of evidence-based practices is supported employment. Supported employment was originally developed for individuals with developmental disabilities who were considered to be “unemployable” or who needed a great deal of “readiness” training if employment would ever be realized. The supported employment framework was based on the following principles:

- It is intended to serve individuals with the most severe disabilities in competitive community based employment options
- Authentic integration with non-disabled workers will be an outcome
- Work will occur on a minimum of a part-time basis (20 hours per week*) and workers will earn at least the prevailing minimum wage
- The supported employee will receive ongoing support from the provider agency

*This is a New York State standard. This standard can be waived for good reason if negotiated in the development of the Individualized Plan for Employment (IPE).

Recent research shows that employment outcomes are higher for people who participate in programs that incorporate evidence-based principles than for people in programs that follow different principles, (Becker 2001). Evidence-based supported employment practices follow six basic principles:

- 1) Eligibility is based on customer choice
- 2) Supported employment is integrated with mental health treatment
- 3) Competitive employment is the goal
- 4) Rapid job search is used
- 5) Job finding is individualized
- 6) Follow-along supports are continuous and ongoing

This is a drastically different approach to supporting individuals who are living with severe mental illness. Traditional treatment modalities incorporate a continuum approach to providing services and supports, requiring people to achieve some standard of performance at one stage prior to being granted opportunity to move to the next. This was based on the theory that wellness and social independence should precede efforts to obtain employment (Ford, 1995). Evidence-based practices eliminate the need for people who are interested in work to “jump through the hoops” in order to the support necessary to get a job.

The implementation of evidence-based practices or its equivalent will require a shift in the current system for the provision of supports and services to individuals who have severe mental illness. Some critical elements for systemic change will include the need for:

- Funding streams to be realigned to promote and support evidence-based supported employment services
- Agency administrators to ensure that appropriate leadership, structural and financial supports are in place for the delivery of these services
- Agency personnel to be provided the necessary technical knowledge and skills to provide quality supported employment services
- People who receive services, family members and other advocates to be provided the necessary information and opportunity to practice self-determined supported employment

Agencies wishing to put forth the effort for system change will have to grapple with the obvious questions:

WHERE TO START, WHO TO START WITH?

HOW TO BUILD MOMENTUM?— WHAT’S IT GOING TO TAKE?

HOW TO SUSTAIN AND REPLICATE ACTION?

The New York State Office of Mental Health is on the brink of implementing its Career Development Initiative in collaboration with the Cornell University School of Industrial and Labor Relations' Program on Employment and Disability. The intent of the Career Development Initiative is to help facility-based vocational rehabilitation programs increase the amount and quality of successful employment outcomes for individuals receiving services by moving from an employer based system (where the jobs obtained are those offered within the facility) to service delivery system that facilitates community-based employment options.

1. Begin with those consumers who express a desire to work
 - √ Foster and facilitate principles of self-determination
 - √ Use person-centered practices as a vehicle for planning
 - √ Restructure treatment teams into support networks

2. Build interest and demand for employment services
 - √ Publicize successes
 - √ Have employed participants mentor others
 - √ Develop a family-to-family connections process for support
 - √ Use community resources to support decision-making on issues such as effect of wages on benefits
 - √ Forge partnerships with the business community

Becker, D. (2001). Implementing Supported Employment as an Evidence-Based Practice. *SPI Connections*, Spring/Summer, 2-3.

Ford, L.H. (1995). Providing Employment Support for People with Long-Term Mental Illness Choices, Resources and Practical Strategies. Baltimore: Paul H. Brookes Publishing Co.

Connections: State Partnership Systems Change Initiative. (Spring/Summer 2001)

Implementing Evidence-Based Vocational Practices for Serving People with Psychiatric Disabilities. *Richmond: State Partnership Initiative (SPI), Virginia Commonwealth University.*