Promoting Employment for Individuals with Mental Illnesses

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For Individuals with Mental Illnesses

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# The Temple Collaborative

* A research and training center funded by the National Institute on Disability, Independent Living, and Rehabilitation Research
* At The Temple Collaborative we focus on *community inclusion* to determine how best to help people participate in everyday life
* Our research indicates that those with serious mental illnesses are often isolated – housing, friendships, education, friends, and more
* Employment is consistently reported to be the domain of life in which people with mental illnesses are most unengaged

# The Importance of Competitive Employment:Issues to Consider

## Defining Employment

 - full-time or part-time

 - ongoing or intermittent

 - entry-level or skilled positions

- protected employment or competitive jobs

## The Current Level of Unemployment

 - a staggering 85% of individuals with serious mental illnesses are unemployed at any single point of time, most relying on SSA

# Why Such High Rates of Unemployment?

* Fear of the permanent loss of SSA (SSI/SSDI) and medical supports
* Resistance from parents, clinicians, and rehabilitation personnel
* Concern about negative attitudes among employers at work
* Lack of Motivation?

 - poor prior experiences?

 - unavailability of ‘meaningful’ jobs?

- unavailability of employment supports?

- the impact of the ‘subculture of psychiatric disability?

# What Does the Research Say

* Should individuals with mental illnesses work?

- decreases in symptoms, increases in self-regard

* Would individuals with mental illnesses work?

- persistent expression of interest in competitive work

* Could individuals with mental illnesses work?

- supports make it possible for people to work independently

# Supported Employment: Key Elements

* Rapid placement in competitive employment
* No ‘readiness’ determinations or step-by-step advancement
* Provision of on-the-job or off-the-job supports as individually needed
* Long-term supports available to save or switch from jobs
* No fall-backs available to more sheltered roles

# The Good News / The Bad News

* Superior rates of job placement, job retention, and wage levels
* Job placement rates hover in the 50% range
* Placements remain clustered in the part-time & low-skill sector
* Little impact on the ‘myth’ of disability payments quickly vanishing
* Little progress in providing long-term supports: costs, nature, or funding frameworks

# Who Has Responsibility for Employment

* The Service Recipient
* Family Members
* Clinical Staff
* Case-management / Outpatient / CIRC-Psychosocial Professionals
* Peer Specialists / Training Programs

# Roles

* Encouragement – Intake, Program Planning, Evaluation
* Resources – OVR, Mainstream Training/Placement / PSR & CIRC
* Placement – Finding Jobs / Interviewing Skills / Initial Supports
* Responding to Issues and Crises at Work – Client & Employer
* Assisting in Changing Jobs – Every Job Loss is Not a MH Issue
* Celebrating Success – Recognizing Progress

# Stories: Mine and Yours

## Mine

 - New Hampshire

 - Chicago

 - New York

 - Pennsylvania

## . Yours

# Final Comment

If individuals with mental illnesses *‘should, would, and could’* work in the competitive labor market, we are in danger of losing another generation of individuals to a life of idleness, poverty, and isolation by limiting our focus on employment programming and outcomes. Let’s not let this happen again.