



Volume 9, Issue 2, 2014

reSearch

A collection of research reviews on rehabilitation topics from NARIC and other information resources.

Psychiatric Disabilities & Supported Employment: Review of the literature over the past 10 years

In this edition of *reSearch* we explore research in supported employment (SE) for individuals with psychiatric disabilities over the past 10 years. The employment of persons with disabilities has origins in vocational rehabilitation legislation such as the Vocational Rehabilitation Act (VRA) also known as the [Barden-Lafollette Act of 1943](#) and its various amendments, the [Rehabilitation Act of 1973 \(RA\)](#) and its various amendments that replaced the VRA, and the [Workforce Investment Act \(WIA\)](#) and [RA Amendments of 1998](#) and reauthorization of the RA/WIA through the [Workforce Innovation and Opportunity Act \(WIOA\) of 2014](#) (http://www.in.gov/fssa/files/History_and_Regulations.pdf).

According to the [National Parent Center on Transition and Employment](#), “Supported employment is based on the principle that individuals with severe disabilities have the right to be employed by community businesses where they can earn comparable wages, work side-by-side with co-workers with or without disabilities, and experience all the same benefits as other employees of the company” (<http://www.pacer.org/tatra/employment/supportemp.asp>).

SE is geared toward persons with severe disabilities who require intensive support services or extended services, or who have traditionally been excluded from competitive employment, or whose work has been interrupted or intermittent due to their disabilities (<http://worksupport.com/resources/viewContent.cfm/416>). Historically, SE originally was developed primarily for people with developmental and/or intellectual disabilities; however, the practice has been adopted and currently used with all disability groups (<http://cirrie.buffalo.edu/encyclopedia/en/article/241/>).

Individuals with disabilities have higher rates of unemployment and underemployment than individuals without disabilities (<http://disabilitycompendium.org/compendium-statistics/employment>). Individuals with psychiatric disabilities or living with other severe mental illness experience disproportionately high rates of unemployment and underemployment (http://www.nami.org/Content/NavigationMenu/State_Advocacy/About_the_Issue/Unemployment.pdf). Individual placement and support (IPS) is an evidence-based approach to SE, which supports individuals with psychiatric disabilities in maintaining employment in competitive jobs (full- or part-time) versus vocational rehabilitation approaches involving the use of [sheltered-workshops](#) or programs where individuals with disabilities are isolated from a diverse mainstream work environment (http://en.wikipedia.org/wiki/IPS_Supported_Employment).

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There are eight practice principles for IPS for SE:

- 1) Eligibility based on consumer choice—every person with a severe psychiatric disability/mental illness who wants to work is eligible for IPS SE
- 2) Integration of rehabilitative and mental health services
- 3) Focus on competitive employment
- 4) Personalized benefits counseling is available (i.e., understandable and accurate information on social security, Medicaid, and other government entitlements)
- 5) Rapid job search
- 6) Systematic job development (i.e., employment specialists develop relationships with employers based on consumer's preferences)
- 7) Job supports are continuous (i.e., no time restrictions for individualized support)
- 8) Attention given to consumer preferences (i.e., services are based on the consumer's preferences and choices) (<http://sites.dartmouth.edu/ips/about-ips/ips-practice-principles>)

This edition of reSearch provides a “snapshot” of over 10 years of research on supported employment and individuals with psychiatric disabilities. The combined search terms for this edition of reSearch included: Psychiatric and mental disabilities, supported employment, integrated placement support (IPS), and employment supports. A listing of over 150 additional descriptor terms between the NARIC, CIRRIE, ERIC, Cochrane, and PubMed databases can be found at the end of this document. A search of the REHABDATA database resulted in 112 documents published between 2004 and 2014. The CIRRIE and ERIC database searches resulted in 6 documents between 2008 and 2010 and 7 documents from between 2012 and 2007; respectively. The Cochrane database search resulted in 4 documents between 2010 and 2013. Finally, a search of the PubMed database resulted in 17 documents between 2005 and 2014. The complete citations are included in this research brief.

NIDRR Funded Projects Related to Supported Employment and Psychiatric Disabilities

In addition to document searches, we searched our NIDRR Program Database to locate grantees/projects related to supported employment and psychiatric disabilities. The search resulted in 19 currently funded projects, and 6 projects that are no longer active. Project information and their publications are offered as additional resources for our patrons.

Advanced Research Training Program in Employment and Vocational Rehabilitation of Persons with Psychiatric Disabilities

Project Number: H133P130011

Phone: 617/353-3549

Email: zlatka@bu.edu

www.bu.edu/SARPSYCH

Developing Executive Functioning Through Cognitive Remediation for College Students with Psychiatric Disabilities

Project Number: H133G130311

Phone: 908/889-2513

Email: mullenmi@rutgers.edu

Development Center to Enhance Evidence-Based Supportive Employment with a Technology-Based Management System

Project Number: H133A120164

Phone: 603/448-0263

Email: sarah.e.lord@dartmouth.edu

Enhancing the Community Living and Participation of Individuals with Psychiatric Disabilities

Project Number: H133A140032

Phone: 617/353-3549

Email: zlatka@bu.edu

www.bu.edu/SARPSYCH

Evaluating the Impact of Employment Services in Supportive Housing

Project Number: H133G130310

Phone: 856/566-2770

Email: gaoni@shrp.rutgers.edu

Examining Determinants of Community Participation Among Persons with Psychiatric Disabilities

Project Number: H133G130086
Phone: 212/237-8773
Email: pyanos@jjay.cuny.edu

Identifying Enabling Environments Affecting Adults with Psychiatric Disabilities

Project Number: H133G140040
Phone: 215/204-7879

Increasing Community Participation in Adults with Schizophrenia

Project Number: H133G130137
Phone: 215/204-2748
Email: gsnethen@temple.edu

Integrated Program to Improve Competitive Employment in Dually Diagnosed Clients

Project Number: H133G140261
Phone: 202/865-6611
Email: talim@howard.edu

Manual and Training Program to Promote Career Development Among Transition Age Youth and Young Adults with Psychiatric Conditions

Project Number: H133A130092
Phone: 908/889-2513
Email: mullenmi@rutgers.edu

A Prospective National Study of Sustaining IPS Through Vocational Rehabilitation and Mental Health Collaboration

Project Number: H133G110161
Phone: 603/448-0263
Email: gary.r.bond@dartmouth.edu

Recovery 4 US - Development of a Photovoice-Based Social Media Program to Enhance the Community Participation and Recovery of Individuals with Psychiatric Disabilities

Project Number: H133G140190
Phone: 617/353-3549
Email: zlatka@bu.edu

Rehabilitation Research and Training Center on Improving Employment Outcomes for Individuals with Psychiatric Disabilities

Project Number: H133B140028
Phone: 617/353-3549
Email: erogers@bu.edu, mfarkas@bu.edu
cpr.bu.edu/research/current-research/rrtc-2014-2019

RRTC on Psychiatric Disability and Co-occurring Medical Conditions

Project Number: H133B100028
Phone: 312/355-1696 (V), 312/422-0706 (TTY)
Email: jonikas@psych.uic.edu
www.cmhsrp.uic.edu/health/, www.facebook.com/UICHealthRRTC, twitter.com/UICHealthRRTC

A Supported Employment Program for People with HIV/AIDS

Project Number: H133G110108
Phone: 773/248-5200
www.chicagohouse.org

Temple University Rehabilitation Research and Training Center on Community Living and Participation of Individuals with Psychiatric Disabilities

Project Number: H133B130014
Phone: 215/204-7879
Email: mark.salzer@temple.edu
www.tucollaborative.org

Toolkit of Recovery Promoting Competencies for Mental Health Rehabilitation Providers

Project Number: H133G120117
Phone: 617/353-3549
Email: mfarkas@bu.edu
cpr.bu.edu/research

Treating Hidden Barriers to Employment: Integrated Treatment for PTSD in Supported Employment

Project Number: H133G140147
Phone: 908/889-2453

WorkingWell: Developing a Mobile Employment Support Tool for Individuals with Psychiatric Disabilities

Project Number: H133G140089
Phone: 603/448-0263

These projects have completed their research activities and are now closed...

Advanced Psychiatric Rehabilitation Research on Employment and Community Integration

Project Number: H133P050006
Phone: 908/889-2438
Email: kgill@umdnj.edu

Building Knowledge and Capacity in the Rehabilitation and Recovery of African Americans Suffering from Severe Mental Illness: The Dartmouth-Howard Collaboration

Project Number: H133A080063
Phone: 603/448-0263

Cognitive Remediation, Illness Self-Management, and Supported Employment in Severe Mental Illness

Project Number: H133G090206
Phone: 603/271-5747
Email: susan.r.mcgurk@dartmouth.edu

Investigating Environmental Factors Affecting Community Integration

Project Number: H133G090036
Phone: 803/777-2704
Email: kloos@sc.edu

A Randomized Controlled Trial of Two Vocational Models for Individuals with Psychiatric Disabilities and Criminal Justice Involvement

Project Number: H133G100110
Phone: 603/448-0263
Email: gary.r.bond@dartmouth.edu

Rehabilitation Research and Training Center on Vocational Rehabilitation Research

Project Number: H133B070001
Phone: 617/287-4317
Email: susan.foley@umb.edu
www.vr-rrtc.org

Full-text copies of these documents may be available through NARIC's document delivery service.

To order any of the documents listed above, note the accession number and call an information specialist at 800/346-2742.

There is a charge of 5 cents for copying and shipping with a \$5 minimum on all orders.



Documents from NARIC's REHABDATA search listed are listed below:

2014

(2014). **Sustaining IPS services.** *Career Advancement in IPS*, Winter.

NARIC Accession Number: O19377

Project Number: H133G110161

Full-text is available at <http://search.naric.com/research/rehab/download.cfm?ID=123944>

ABSTRACT: Newsletter provides information about individual placement and support (IPS), an evidence-based model of supported employment. IPS supported employment helps people with severe mental illness work at regular jobs of their choosing. This issue focuses on the sustainability of IPS. Topics include: sustaining IPS in South Carolina; Darlene's story; the role of the IPS learning collaborative in sustaining IPS services; IPS in Spain and Catalonia: government and IPS stakeholders working together to help meet their employment goals; state vocational rehabilitation and mental health partners sustain IPS; and tips on sustaining an IPS program: an IPS supervisor's perspective.

Bartsch, B., Brantschen, E., Kawohl, W., Nordt, C., & Rossler, W. (2014). **Supported employment—improving competitive employment for people with mental illness: The role of motivation and social network.** *Journal of Vocational Rehabilitation*, 40(1), 41-47.

NARIC Accession Number: J68801

ABSTRACT: Study examined the role of self-motivation, subjective norms, and support of social network among 116 people with mental illness who received supported employment services. Researchers found that self-motivation was high; 98 percent of the consumers think competitive employment is important or very important. The perceived motivation of the social network was also high, but significantly lower than self-motivation. Furthermore, the consumers assume that their social network supports their desire to work. These findings suggest that people with mental illness are motivated to work, they are not idle.

Becker, D.R., Bond, G.R., Carpenter-Song, E., Drake, R.E., Lord, S., Luciano, A., Swanson, S.J., & Swarbrick, P. (2014). **Evidence-based supported employment for people with severe mental illness: Past, current, and future research.** *Journal of Vocational Rehabilitation*, 40(1), 1-13.

NARIC Accession Number: J68799

ABSTRACT: Article summarizes 20 years of research on individual placement and support (IPS), describes current research studies, and proposes topics for future research. IPS is an evidence-based vocational rehabilitation intervention for people with severe mental illness that emphasizes client choice, rapid job finding, competitive employment, team-oriented approaches, benefits counseling, and ongoing supports. To identify published and unpublished IPS research, the authors conducted an electronic search of qualitative and quantitative IPS studies, examined findings from recent reviews, and sought expert recommendations. Past research indicates that IPS supported employment is the most effective and cost-effective approach for helping people with psychiatric disabilities find and maintain competitive employment. Employment improves clinical, social, and economic outcomes. Current studies on IPS address several research gaps: IPS modification, generalizability, program settings, international dissemination, cultural awareness, and supportive technology. Looking forward, the field needs studies that report long-term outcomes, financing mechanisms, cost offsets, and standardized supported education models.

Braude, L., Daniels, A.S., Delphin-Rittmon, M.E., Dougherty, R.H., George, P., Ghose, S.S., Goldberg, R.W., & Marshall, T. (2014). **Supported employ-**

ment: Assessing the evidence. *Psychiatric Services (formerly Hospital and Community Psychiatry)*, 65(1), 16-23.

NARIC Accession Number: J68123

ABSTRACT: Article describes the components of supported employment, rates the level of evidence (methodological quality) of existing studies of supported employment, and provides a concise summary of its overall effectiveness. Supported employment is a direct service with multiple components designed to help adults with mental disorders or co-occurring mental and substance use disorders choose, acquire, and maintain competitive employment. Authors reviewed meta-analyses, research reviews, and individual studies from 1995 through 2012. Three levels of evidence (high, moderate, and low) were designated based on benchmarks for the number of studies and quality of their methodology. The authors also examined the evidence for service effectiveness. The level of research evidence for supported employment was graded as high, based on 12 systematic reviews and 17 randomized controlled trials of the individual placement and support model. Supported employment consistently demonstrated positive outcomes for individuals with mental disorders, including higher rates of competitive employment, fewer days to the first competitive job, more hours and weeks worked, and higher wages. There was also strong evidence supporting the effectiveness of individual elements of the model. This review found substantial evidence demonstrating the effectiveness of supported employment. Policy makers should consider including it as a covered service. Future research is needed for subgroups such as young adults, older adults, people with primary substance use disorders, and those from various cultural, racial, and ethnic backgrounds.

2013

Becker, D.R., Bond, G.R., & Swanson, S.J. (2013). **Job development guidelines in supported employment.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal)*, 36(2), 122-123.

NARIC Accession Number: J66598

ABSTRACT: Article describes the rationale for building relationships with employers that benefit both employers and job seekers and outlines a framework for developing long-term relationships with employ-

ers. The authors also discuss strategies for individual placement and support supervisors to help employment specialists become comfortable working with employers. Employment specialists benefit from a structured format to develop relationships with employers, as well as good supervision in the field.

Becker, D.R., Drake, R.E., Glynn, S.M., Kern, R.S., Kopelowicz, A., Liberman, R.P., Mitchell, S.S., Smith, K.M., Tovey, W., Turner, L.R., & Zarate, R. (2013). **A demonstration project involving peers as providers of evidence-based, supported employment services.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal)*, 36(2), 99-107.

NARIC Accession Number: J66595

ABSTRACT: This demonstration project involved development of a training program designed to teach recovering consumers employed as peer advocates how to provide evidence-based supported employment services to consumers with severe mental illness. A training curriculum was developed to teach the core competencies of the individual placement and support (IPS) model of supported employment. Three peers participated in training and provided work outcome data from their caseloads. Assessments were conducted of peers' competence in implementing IPS and effectiveness in promoting job placements. Peer competency was assessed by the following: (1) a formal IPS fidelity review performed by two external reviewers to evaluate service implementation, and (2) the Kansas Employment Specialist Job Performance Evaluation, an objective measure of employment specialist attitudes and skills. Program efficacy was assessed by examining the number of job placements and corresponding tenure. The fidelity review revealed that peers met IPS standards of implementation on 7 of 14 items assessing service delivery. The Kansas scale results revealed attitudes to be a relative strength and job performance competency ratings fell in the average to above average range across skill areas assessed (e.g., vocational assessment, job development). Thirty-three percent of consumers from the peers' caseloads got competitive jobs; mean tenure was 26.1 weeks. This demonstration project provides a starting point for future efforts aimed at expanding the role of peers as providers of evidence-based mental health services and provides a measured degree of optimism that this is a realistic, attainable goal.

Bond, G.R. (2013). **Supported Employment for Justice-Involved People with Mental Illness.**

NARIC Accession Number: O19295

Project Number: H133G100110

Full-text is available at <http://gainscenter.samhsa.gov/cms-assets/documents/141809-655224.supported-employment.pdf>

ABSTRACT: This brief describes the individual placement and support (IPS) model and the feasibility of using this evidence-based practice with justice-involved job seekers. It reviews the evidence base for IPS, identifies current trends in IPS services for justice-involved people, summarizes studies of employment services for justice-involved people, and suggests IPS adaptations for justice-involved people with mental illness.

Bond, G.R., & Kukla, M. (2013). **A randomized controlled trial of evidence-based supported employment: Nonvocational outcomes.** *Journal of Vocational Rehabilitation*, 38(2), 91-98.

NARIC Accession Number: J66030

ABSTRACT: Study examined the impact of the individual placement and support (IPS) model of supported employment on nonvocational outcomes for clients with severe mental illness (SMI). Nonvocational outcomes were symptoms, psychiatric hospitalizations, quality of life, and social networks. This study examined 2-year outcomes from a randomized controlled trial comparing IPS to a stepwise vocational model, the Diversified Placement Approach (DPA). Participants were 187 adults with SMI, including 92 participants in the IPS group and 95 in the DPA group. Although the total sample showed improvement in several nonvocational domains over time, there were largely no differences between groups in nonvocational outcomes at follow-up or in their rates of improvement over time. The findings suggest that participation in supported employment alone is not sufficient to positively impact most nonvocational outcomes in people with SMI.

Carpenter-Song, E.A., Oulvey, E., & Swanson, S.J. (2013). **Principles for enhancing the role of state vocational rehabilitation in IPS-supported employment.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal)*, 36(1), 4-6.

NARIC Accession Number: J65824

ABSTRACT: Study examined strategies for vocational rehabilitation (VR) to enhance employment outcomes through better collaboration with individual placement and support (IPS) programs. Research has established the IPS model of supported employment as an effective approach for people with severe mental illnesses. Twenty-one focus groups were conducted in rural and urban locations in Illinois with mental health consumers, VR counselors, IPS specialists, and mental health professionals. Thematic analysis was conducted to identify features of strong collaborations between VR and IPS programs. Features of strong collaborations between VR and IPS programs included the following: (1) expertise, (2) consistency, (3) accessibility, and (4) integration. Five recommendations were developed from themes expressed in focus groups: (1) enhance mutual knowledge and understanding between VR and IPS practitioners, (2) examine and modify VR regulations and guidelines that conflict with IPS principles, (3) create clear guidelines for VR participation on IPS teams, (4) create guidelines for good relationships between VR and community mental health centers, and (5) develop tools to promote accountability in VR staff and systems to improve employment outcomes for people with mental illness. The findings suggest that modest changes in the federal/state VR program could enhance that system's capability to foster employment outcomes for individuals with severe mental illness.

Delman, J., & Ellison, M.L. (2013). **Supported education as a vital route to competitive employment.**

Focal point: Youth, young adults, and mental health. Education and employment, 27(1), 26-28.

NARIC Accession Number: O19349

Project Numbers: H133B090018; H133B090019

Full-text is available at <http://search.naric.com/research/rehab/download.cfm?ID=123919>

ABSTRACT: Article examines the importance of supported education services for the vocational outcomes of youth and young adults with serious mental health conditions. There is preliminary evidence that having the support of an education/employment specialist, combined with appropriate early intervention mental health services, results in higher rates of competitive employment and education that leads to attainment of a degree, certification and/or employment

qualification among transition-age youth. Thus, the combination of supported employment and supported education is a promising practice for vocational success that is explored in this article.

Fisher, W., Lidz, C.W., & Stone, R.T. (2013). **Employment, careers and recovery for young adults.** *Focal point: Youth, young adults, and mental health. Education and Employment, 27(1), 11-32.*

NARIC Accession Number: O19346

Project Number: H133B090018; H133B090019

Full-text is available at <http://search.naric.com/research/rehab/download.cfm?ID=123915>

ABSTRACT: Article suggests that recovery for young adults with mental health conditions requires a different approach to employment services. Viewing employment as a critical part of recovery, the authors argue that there is a need to think about how to develop a system that supports the career goals and ambitions of young people. They contend that career-focused education should be an option for everyone. Supported education is one model that responds to this need. It recommends services and supports to assist a person to successfully access and complete programs and courses of higher education. Supported education is driven by the preferences of the consumer and works to enhance students' academic strengths and build academic skills by maximizing the use of academic resources and educating schools on effective student supports, as well as through peer support.

2012

(2012). **Special issue on young adults with mental health challenges.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal), 35(3), 167-277.*

NARIC Accession Number: R09146

Project Number: H133B090018

ABSTRACT: Articles in this special issue explore the effectiveness of evidence-based interventions on transition age youth and young adults with serious mental health conditions. Topics include: rehabilitation research to improve services for youth and young adults; supported employment outcomes for transition age youth and young adults; adapting services to engage young adults in International Center for Clubhouse Development clubhouses; findings from

studies of wraparound examining whether team-based planning works for adolescents; longitudinal transition outcomes of youth with emotional disturbances; supporting the education goals of post-9/11 veterans with self-reported posttraumatic stress disorder symptoms; community participation as a predictor of recovery-oriented outcomes among emerging and mature adults with mental illnesses; participatory action research and young adults with psychiatric disabilities; prevalence and impact of substance use among emerging adults with serious mental health condition; young adults with mental health conditions and social networking websites; transition experiences of mental health service users, parents, and professionals in the United Kingdom; employment experience of young Medicaid Buy-In participants with psychiatric disabilities; social network analysis of child and adult inter-organizational connections; and a training program for fostering transitions to valued roles for youth. Individual articles are available for document delivery under accession numbers J62981 through J62995.

(2012). *Supported Employment Adapted for Young Adults with Peer Mentors: A Feasibility Study*.

NARIC Accession Number: O18352

Project Number: H133B090018

Full-text is available at <http://search.naric.com/research/rehab/download.cfm?ID=117653>

ABSTRACT: This brief describes a study examining the feasibility of modifying the individual placement and support (IPS) model of supported employment to target the needs of youth and young adults with serious mental health conditions. In the study, the IPS model is augmented by use of peer mentors who provide social support, encouragement, role-modeling, and guidance to facilitate young adults' engagement in vocational activities that achieve their goals.

Akhtar, A., & Schneider, J. (2012). **Implementation of individual placement and support: The Nottingham experience.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal)*, 35(4), 325-332.

NARIC Accession Number: J63637

ABSTRACT: This case study describes the implementation of individual placement and support (IPS), an evidence-based approach to employment support

for people with severe mental illnesses. The case study draws from the literature on implementation and describes lessons learned from the experience of a large mental health provider in urban Nottingham, United Kingdom (UK). It highlights issues arising from the current UK recession that affect the competition for available jobs and the service context into which the IPS development has been introduced. The future of IPS depends on its acceptance as an essential aspect of mental health services. IPS implementation also benefits with strong leadership, expert knowledge of implementing IPS in the UK context, commitment from senior managers and clinicians, a capacity to train staff according to IPS principles, and integration of rehabilitation services with mental health treatment. Ongoing funding is also a prerequisite to successful implementation.

Bacon, J., Grove, B., Lockett, H., & Shepherd, G. (2012). **Establishing IPS in clinical teams: Some key themes from a national implementation program.** *Journal of Rehabilitation*, 78(1), 30-36.

NARIC Accession Number: J62840

ABSTRACT: Article describes the problems associated with establishing an evidence-based approach to vocational rehabilitation in clinical teams. The data analyzed were obtained from 16 reviews of the individual placement and support (IPS) approach to helping people with major mental illness gain and retain paid employment. These were undertaken as part of a national program in England to support the development of an evidence-based approach to VR. The services were delivered by a specially trained employment specialist embedded in each team. A number of common themes that emerged across the different clinical terms as they sought to implement high-fidelity IPS are discussed. It is argued that if IPS can be established successfully in clinical teams, then it could make a major contribution to the recovery of people with severe mental health problems.

Becker, D.R., Bond, G.R., Drake, R.E., & Peterson, A.E. (2012). **Validation of the revised individual placement and support fidelity scale (IPS-25).** *Psychiatric Services (formerly Hospital and Community Psychiatry)*, 63(8), 758-763.

NARIC Accession Number: J64163

ABSTRACT: Study evaluated the psychometric

properties of a revised individual placement and support (IPS) fidelity scale. The IPS model of supported employment for people with severe mental illness is an evidence-based practice. The 15-item IPS Fidelity Scale (IPS-15) was developed to measure program fidelity and has been shown to have good psychometric properties, including predictive validity. On the basis of field experience and research updates, the authors developed an expanded and revised version of this scale, the IPS-25, also known as the Supported Employment Fidelity Scale. In addition to data on the local unemployment rate and program longevity, the authors' collected IPS-25 ratings and employment data for 79 sites in eight states participating in a learning collaborative devoted to implementing the IPS model. Descriptive data for items and the total scale and predictive validity were examined. Internal consistency reliability for the IPS-25 was .88. Predictive validity, measured as the correlation between the IPS-25 and site-level employment rate, was .34. Eight of the IPS-25 items were significantly positively correlated with employment rate. Items related to the vocational generalist role, disclosure, follow-along support, and vocational unit were the most strongly correlated with employment. Program longevity was positively associated with employment, whereas the unemployment rate was not. The IPS-25 has promising psychometric properties, with greater precision and content coverage than the IPS-15. However, it has not demonstrated an advantage over the IPS-15 in predictive validity. Research directly comparing the two scales is needed.

Blyler, C.R., Burke-Miller, J., Cook, J.A., Grey, D.D., & Razzano, L.A. (2012). **Supported employment outcomes for transition age youth and young adults.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal)*, 35(3), 171-179.

NARIC Accession Number: J62982

Project Number: H133B050003

ABSTRACT: Study examined the role of supported employment (SE) in achieving employment outcomes for youth (ages 18 to 24 years) and young adults (25 to 30 years), compared to outcomes for older adults (over 30 years). Data for the analysis were derived from the Employment Intervention Demonstration Program, a multisite randomized controlled trial of

SE among 1,272 individuals with psychiatric disabilities in 7 states. Results indicated that youth and young adults had significantly better outcomes in terms of any employment and competitive employment than older adults. However, in multivariable models of participants randomly assigned to SE, young adults had significantly better outcomes than youth or older adults. Other significant predictors of employment and competitive employment were future work expectations, not receiving Supplemental Security Income, and receipt of more hours of SE services. Characteristics of youth, young adults and SE programs that enhance employment are discussed in terms of policy and practice.

Bond, G.R., Campbell, K., & Drake, R.E. (2012). **Standardizing measures in four domains of employment outcomes for individual placement and support.** *Psychiatric Services (formerly Hospital and Community Psychiatry)*, 63(8), 751-757.

NARIC Accession Number: J64162

Project Number: H133G990155

ABSTRACT: Study examined differences between individual placement and support (IPS) and other vocational services in relation to four employment outcome domains: job acquisition, job duration, hours worked per week, and total hours and wages. Archival data from four randomized controlled trials of IPS involving 307 IPS participants and 374 participants in other vocational services (control sample) were analyzed. Eight competitive employment measures were examined: employed at any time, total weeks worked, tenure in the longest-held job, total hours worked, average hours per week worked, total wages, days to first job, and working at least 20 hours per week during follow-up. Correlations between measures within both the IPS and control samples were determined. Results indicated that IPS participants had significantly better outcomes across all employment measures and domains. Correlations between measures were strong within each domain, but they were variable between domains. In addition to improving job acquisition, IPS improved job duration, hours worked per week, and total hours and wages. The correlational findings suggest analytic and measurement strategies to assist meta-analysts in the synthesis of future studies for which direct measures are unavailable. Initial steps toward a cross-disciplinary theoretical framework for employment outcomes are described.

Bond, G.R., Drake, R.E., Goldman, H.H., Knapp, M., & Thornicroft, G. (2012). **Mental health disability: An international perspective.** *Journal of Disability Policy Studies*, 23(2), 110-120.

NARIC Accession Number: J64580

Project Number: H133G050181

ABSTRACT: Article reviews the current status of mental health disability and mental health disability systems, the findings related to evidence-based treatments and supported employment, and policy changes that might ameliorate the problem of rising rates of mental health disability. Across free market countries, the rate of mental health disability is growing and now constitutes about one third of all disability claimants. Mental health treatments, employment services, and disability policies powerfully shape the disability experience. Evidence-based mental health and employment services can ameliorate disability and could potentially prevent disability if applied as early interventions. Yet evidence-based mental health treatments and supported employment services are rarely available. Furthermore, current disability policies tend to trap people in a “disability benefits culture.” Policy changes should recognize that people with mental health disabilities usually want to work, that they are often able to work when provided with appropriate mental health and vocational services, and that employment is highly therapeutic. Disability policies need to strengthen work incentives for beneficiaries, providers, and employers.

Bond, G., & Kukla, M. (2012). **Job match and job tenure in persons with severe mental illness.** *Journal of Rehabilitation*, 78(1), 11-15.

NARIC Accession Number: J62837

Project Number: H133B040011

ABSTRACT: Study examined the relationship between job match and subsequent job tenure in clients with severe mental illness working in competitive employment. Data were obtained from 50 clients participating in a study investigating the individual placement and support (IPS) model of supported employment. These clients obtained a competitive job at baseline or during the preceding 6 months and received follow-along services from IPS employment specialists. Job match was assessed using the Job Match Survey at baseline and employment outcomes were assessed monthly over the 2-year

follow-up period. Overall, job match was correlated with months worked in the first job. The interest/enjoyment component of job match was most highly related to vocational outcomes. These findings suggest the supported employment services should focus on helping clients find a good job match in order to improve job tenure outcomes.

Carlson, L., Davis, J.K., Holter, M.C., Manthey, T.J., & Rapp, C.A. (2012). **The perceived importance of integrated supported education and employment services.** *Journal of Rehabilitation*, 78(1), 16-24.

NARIC Accession Number: J62838

ABSTRACT: Study investigated the nature and extent of supported education (SEd) services provided within individual placement and support (IPS) programs. Supervisors of IPS programs associated with the Johnson and Johnson Learning Collaborative completed 2 surveys. The first survey assessed educational staffing patterns and the second survey assessed the educational services being provided by IPS program and the importance placed on each of those services. Approximately 57 percent of programs were providing some form of educational service and support. The most common form of staffing found was SE workers providing both SEd and SE. The SEd characteristics rates most highly by respondents were providing concrete educational services and minimizing educational service barriers for participants. The findings provide information about how IPS and SEd are currently being delivered and highlight a need for further research about how SEd and IPS can be optimally delivered together.

Cook, J.A., & Mueser, K.T. (2012). **Supported employment, supported education, and career development.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal)*, 35(6), 417-420.

NARIC Accession Number: J65313

Project Number: H133B100028

ABSTRACT: This editorial reflects on the importance of meaningful employment, supported education, and career development for people with serious mental illnesses. It provides an overview of the existing research on supported education and discusses the current gaps in knowledge about supported education.

Davis, L.L., Drake, R.E., Drebing, C.E., Kashner, T.M., Leon, A.C., Parker, P.E., Toscano, R., & Ward, L.C. (2012). **A randomized controlled trial of supported employment among veterans with posttraumatic stress disorder.** *Psychiatric Services (formerly Hospital and Community Psychiatry)*, 63(5), 464-470.

NARIC Accession Number: J63833

ABSTRACT: Study examined the outcome of evidence-based supported employment for veterans with posttraumatic stress disorder (PTSD). Eighty-five unemployed veterans with PTSD were randomly assigned to either individual placement and support (IPS) supported employment or a Veterans Health Administration Vocational Rehabilitation Program (VRP) treatment as usual. Employment rates and occupational outcomes were followed for 12 months. Over the 12-month period, 76 percent of the IPS participants gained competitive employment, compared with 28 percent of the VRP participants. Veterans assigned to IPS also worked substantially more weeks than those assigned to VRP (42 percent versus 16 percent of the eligible weeks, respectively) and earned higher income (mean income of \$9,264 for IPS versus \$2,601 for VRP). This study showed that veterans with PTSD who received IPS were 2.7 times more likely to gain competitive employment than those who received VRP. Because work is central to recovery, these results should assist stakeholders in planning improved services for veterans with PTSD.

King, R., & Lloyd, C. (2012). **Implementation of supported employment: What are the implications for clinical services?** *Journal of Rehabilitation*, 78(1), 25-29.

NARIC Accession Number: J62839

ABSTRACT: Article discusses ways to successfully implement employment services within public mental health services. The authors first discuss the importance of work for people with severe mental illness and then go on to describe ways to integrate vocational and clinical services.

2011

Arbesman, M., & Logsdon, D.W. (2011). **Occupational therapy interventions for employment and education for adults with serious mental illness: A**

systematic review. *American Journal of Occupational Therapy (AJOT)*, 65(3), 238-246.

NARIC Accession Number: J61236

ABSTRACT: This study examined research literature evaluating the effectiveness of occupational therapy interventions focusing on participation and performance in occupations related to paid and unpaid employment and education for people with serious mental illness. The review included occupation- and activity-based interventions and interventions addressing performance skills, aspects of the environment, activity demands, and client factors. The results indicate that strong evidence exists for the effectiveness of supported employment using individual placement and support to result in competitive employment. These outcomes are stronger when combined with cognitive or social skills training. Supported education programs emphasizing goal setting, skill development, and cognitive training result in increased participation in educational pursuits. The evidence for instrumental activities of daily living interventions that targeted specific homemaking occupations and supported parenting was limited but positive. Environmental cognitive supports, such as signs, and other compensatory strategies are useful in managing maladaptive behavior.

Becker, D.R., Bond, G.R., Drake, R.E., Haslett, W.R., Martinez, R.A., & Nawaz, S. (2011). **A national mental health learning collaborative on supported employment.** *Psychiatric Services (formerly Hospital and Community Psychiatry)*, 62(7), 704-706.

NARIC Accession Number: J61804

ABSTRACT: Article describes a best practice for dissemination and implementation used by the Johnson & Johnson-Dartmouth Program: a national learning collaborative among community mental health programs on supported employment. In this two-tiered learning collaborative, researchers meet regularly with mental health and vocational rehabilitation leaders in 12 states and the District of Columbia, and state leaders oversee more than 130 individual programs in their respective states. Participants share educational programs, implementation and intervention strategies, practice experiences, outcome data, and research projects. The national learning collaborative facilitates implementation, dissemination, standardization, and sustainability of supported employment.

Bond, G.R., Clendenning, D.R., Kukla, M., & McGuire, A.B. (2011). **Service intensity as a predictor of competitive employment in an individual placement and support model.** *Psychiatric Services (formerly Hospital and Community Psychiatry)*, 62(9), 1066-1072.

NARIC Accession Number: J61965

ABSTRACT: Study examined four aspects of service intensity in an individual placement and support (IPS) program: average level, association with weeks worked, predictors, and modulators of its effect on weeks worked. Data were collected over two years from 91 individuals with severe mental illness who participated in one arm of a randomized controlled trial conducted at Thresholds, a psychosocial rehabilitation center in Chicago. Results indicated that services were more intense during the initial phase of services, service intensity predicted later weeks worked, and few individual demographic and clinical characteristics were related to service intensity. Finally, high levels of cognitive symptoms weakened the relationship between service intensity and weeks worked. This study suggests increased IPS service intensity may lead to better employment outcomes and has implications for service provision and fidelity measurement.

Bond, G.R., Devitt, T.S., Drake, R.E., Frounfelker, R.L., & Wilkniss, S.M. (2011). **Enrollment in supported employment services for clients with a co-occurring disorder.** *Psychiatric Services (formerly Hospital and Community Psychiatry)*, 62(5), 545-547. NARIC Accession Number: J61672

ABSTRACT: Study explored enrollment in supported employment services among clients with serious mental illnesses with and without co-occurring substance use disorders. Using data from electronic medical records from a psychiatric rehabilitation agency, relationships between co-occurring substance use disorders and supported employment were examined among 1,748 clients with serious mental illnesses who were consecutively admitted to the agency over a two-year period. Results indicated that despite a similar interest in employment, clients with a co-occurring substance use disorder were 52 percent less likely than those without to enroll in a supported employment program. Those who were enrolled had similar competitive employment rates (25 percent for those with co-occurring disorders and 28 percent for those without).

Bond, G.R., & Kukla, M. (2011). **Is job tenure brief in individual placement and support (IPS) employment programs?** *Psychiatric Services (formerly Hospital and Community Psychiatry)*, 62(8), 950-953. NARIC Accession Number: J61850

Project Number: H133B040011

ABSTRACT: Study examined job tenure over 24 months among 142 clients enrolled in high-fidelity individual placement and support (IPS) between November 2005 and June 2007. The IPS model has helped clients with severe mental illness obtain competitive jobs, but questions have been raised about whether job tenure is brief. Monthly data about job tenure were collected for 82 clients upon beginning competitive employment (prospective sample) and from 60 clients who had begun competitive employment in the preceding six months (retrospective sample). The 142 clients worked a mean of 12.86 months overall and 9.96 months at their first job; compared with the prospective sample, the retrospective sample worked for more months and worked more months at the first job. In this study, job tenure among employed clients of high-fidelity IPS was twice as long as previously reported, and about 40 percent became steady workers over two years.

Leczycki, A., Oyer, L., Perkins, D.V., Tschopp, M.K., & Wood, H. (2011). **Employment considerations for individuals with psychiatric disabilities and criminal histories: Consumer perspectives.** *Journal of Vocational Rehabilitation*, 35(2), 129-141. NARIC Accession Number: J62447

ABSTRACT: Study explored employment-related considerations through the perspectives of supported employment consumers with both psychiatric disabilities and criminal offense histories. Fourteen individuals participated in semi-structured interviews. Resulting themes included the importance of non-vocational services; relationship between mental illness and criminal activity; impact of mental illness and offense history on employment; helpful elements of supported employment; and recovery and advice to others. These findings help to explain how supported employment can mitigate social underachievement and social decline in an especially high need population.

2010

(2010). *Worksupport.com e-Newsletter, June 2010*.

NARIC Accession Number: O17810

Project Number: H133B040011

Full-text is available at <http://search.naric.com/research/rehab/download.cfm?ID=112493>

ABSTRACT: Newsletter provides information, resources, and research about work and disability issues. In this issue: (1) webcast on the impact of follow-along support on job tenure in evidence-based supported employment; (2) article on using positive behavior support as an intervention to support adults with autism spectrum disorders in the workplace; (3) online courses on ethical issues and decision making for rehabilitation professionals, transition to work for people with autism, self-employment for entrepreneurs with disabilities, supported employment, and supported competitive employment for people with mental illness; (4) fact sheet on benefits and employment services for veterans with disabilities; (5) training on how to get employer buy-in; and (6) upcoming webcast on the 3-factor model for counseling culturally diverse individuals.

(2010). *Worksupport.com e-Newsletter, September 2010*.

NARIC Accession Number: O17867

Project Number: H133B040011

Full-text is available at <http://search.naric.com/research/rehab/download.cfm?ID=113261>

ABSTRACT: Newsletter provides information, resources, and research about work and disability issues. In this issue: (1) Virginia Department of Education and Virginia Commonwealth University (VCU) announce new autism center partnership; (2) article on using personal digital assistants as cognitive aids for high school students with autism; (3) online courses on ethical issues and decision making for rehabilitation professionals, transition to work for people with autism, supported employment, and supported competitive employment for people with mental illness; (4) VCU Project Empowerment third research day; and (5) studies examined the effectiveness of hyperbaric oxygen treatment for traumatic brain injury.

Bond, G.R., Becker, D.R., & Dreher, K.C. (2010). **Creation of a measure to assess knowledge of the**

individual placement and support model. *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal)*, 33(3), 181-189.

NARIC Accession Number: J58557

ABSTRACT: Article describes the development and psychometric evaluation of the IPS-Q, a quiz assessing practitioner knowledge of the Individual Placement and Support (IPS) model of supported employment for people with severe mental illness. Using multiple resources, including the IPS Fidelity Scale and publications about the IPS model, a 30-item multiple-choice quiz covering fundamental IPS principles and key components was developed. Ratings by eight IPS experts supported its content validity. To examine the IPS-Q's psychometric properties, 107 practitioners from high-fidelity IPS programs and 59 practitioners from non-IPS vocational programs were administered the IPS-Q via a web-based survey tool. The measure displayed good internal consistency and a difficulty level consistent with that of typical job knowledge tests. The IPS-Q did not correlate with demographic variables that were considered extraneous to knowledge of IPS and did correlate with self-reported supported employment familiarity. However, the quiz was not significantly correlated with exposure to supported employment. The IPS-Q significantly discriminated between practitioners working in high-fidelity IPS programs and non-IPS vocational programs. Furthermore, supervisors from high-fidelity IPS programs scored significantly higher on the measure than vocational workers from high-fidelity IPS programs. The authors conclude that the IPS-Q is a valid measure of IPS knowledge and might prove useful for assessment, research, and training purposes.

Bond, G.R., Siu, P.S.K., & Tsang, H.W.H. (2010). **Nonvocational outcomes for clients with severe mental illness.** *Journal of Vocational Rehabilitation*, 32(1), 15-24.

NARIC Accession Number: J58076

ABSTRACT: Study examined the non-vocational outcomes and the changes in psychosocial functioning of individuals with severe mental illness over times as they entered competitive employment after a period of unemployment. Thirteen out of 56 participants in the individual placement and support (IPS) service who were competitively employed were selected for the

first interview. Eight of them who met the selection criteria were interviewed again for comparison. Data were collected through a tailor-made interview guide during their third and sixth months of employment and were analyzed through an inductive process. Data analyses indicated that the employed participants in the IPS group showed positive outcomes in both personal well-being and self-efficacy after three months of employment, while positive and negative impacts were obtained after six months of employment. A dynamic model was suggested based on the findings to explain the job tenure of participants. Further integration of this model to the existing supported employment model is explored.

Dolce, J., Gill, K., Librera, L-A., Lu, W., Murphy, A., Roberts, M.M., & Spagnolo, A. (2010). **A study of the impact of social support development on job acquisition and retention among people with psychiatric disabilities.** *Journal of Vocational Rehabilitation, 33*(3), 203-207.

NARIC Accession Number: J59671

Project Numbers: H133B080029; H133P050006

ABSTRACT: Study measured the use of person-centered planning (PCP) techniques by individual supporters and examined the impact of paid and non-paid social support on employment outcomes among individuals with psychiatric disabilities receiving supported employment (SE) services. PCP is an approach that may increase job tenure by counteracting some of the problems commonly associated with lack of social support by emphasizing the importance of natural supports as a complement to and, in some instances, in place of typical paid supports like employment specialists. A total of 110 individuals with psychiatric disabilities who were enrolled in 1 of 7 SE programs in one northeastern state participated in the study. Participant data on demographics, psychiatric history, work history, and social support were collected over a period of two years. Data on the use of PE practices were collected from SE staff every 3 months for the first 12 months of the study. A positive relationship was found between total days employed and the number of nonpaid supporters an individual reported having. A negative relationship existed between total days employed and number of paid supporters, and there was a positive correlation between total days employed and PCP techniques used at 9 and 12 months.

Frounfelker, R.L., Glover, C.M., Teachout, A., Whitley, R., & Wilkniss, S.M. (2010). **Access to supported employment for consumers with criminal justice involvement.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal), 34*(1), 49-56.

NARIC Accession Number: J59221

Project Number: H133A080063

ABSTRACT: Study investigated the influence of severe mental illness (SMI) and criminal justice involvement (CJI) on access to supported employment (SE) services using a mixed-methods design. The quantitative portion compared employment service utilization of consumers with CJI to consumers without CJI to examine potential differences in frequency of access and time to receipt of SE services. The qualitative portion included in-depth, individual interviews with consumers with CJI and service providers to gain various perspectives on consumers' with CJI entry to SE. Results indicated that consumers with CJI receive SE services at the same rate as those without CJI, but it takes them substantially longer to engage in SE services. Consumers with CJI and service providers identified the following as barriers or facilitators to access to SE: competing challenges for consumers with CJI such as mental health probation, the adverse impact of CJI on consumers' psychosocial functioning, social networks, consumers' relationships with practitioners, and practitioners' relationship with SE. Recommendations are offered for both programmatic and policy level interventions and modifications to support consumers with SMI and CJI.

Gold, J. (2010). **A-visions: A Scripps supported employment program.** *Journal of Vocational Rehabilitation, 32*(1), 47-59.

NARIC Accession Number: J58079

ABSTRACT: Article describes an innovative supported employment program that uses an evidence-based practice model based on recovery to fill a gap in the continuum of care for behavioral health services. A-Visions is a hospital-based supported employment and job placement program that was developed by staff of Scripps Health, a community-based health care delivery network in San Diego, CA. The A-Visions Program was developed as part of the treatment continuum to assist mental health patients improve their socialization and vocational skill set as

they prepared to enter the workforce. The overall program goal is to foster self-reliance and independence among clients while providing on-the-job training in a sheltered, supportive setting. Discussion includes the prevalence of mental illness in the United States, a review of the classic and recent evidence-based literature, a comprehensive description of the program (including analyses of outcome measures), suggestions for redesign and expansion, and conclusions. The program has grown since its inception and has received commendations from external stakeholders. Due to the success of the program in providing essential services to individuals with serious mental illness, the author recommends replication in other Scripps facilities.

2009

Bond, G.R., Drake, R.E., Goldman, H.H., & Skinner, J.S. (2009). **Social Security and mental illness: Reducing disability with supported employment.** *Health Affairs*, 28(3), 761-770.

NARIC Accession Number: J56758

Project Number: H133B040011

ABSTRACT: Article describes and analyzes the current situation for people with psychiatric disabilities in relation to policies concerning Social Security disability programs, mental illness and disability, and supported employment. The authors propose policy recommendations that include providing supported employment, mental health services, and health insurance to current and potential Social Security Disability Insurance and Social Security Income beneficiaries. Providing evidence-based supported employment and mental health services to this population could reduce the growing rates of disability and enable those already disabled to contribute positively to the workforce and to their own welfare, at little or no cost to the government.

Bond, G.R., & Kukla, M. (2009). **The working alliance and employment outcomes for people with severe mental illness enrolled in vocational programs.** *Rehabilitation Psychology*, 54(2), 157-163. NARIC Accession Number: J56576

ABSTRACT: Study examined the relationship between the working alliance and employment outcomes in clients with severe mental illness enrolled

in vocational programs. The study also compared the strength of the working alliance in two contrasting vocational programs, evidence-based supported employment and traditional stepwise vocational services. A secondary analysis was conducted of a two year randomized controlled trial comparing two employment programs providing services to people with severe mental illness. No overall relationship was found between the working alliance and employment outcomes. As expected, supported employment participants, each assigned to a single vocational worker, had more positive working alliances than participants served by a team of vocational workers in the traditional vocational program.

Bush, P.W., Kostick, K.M., & Whitley, R. (2009). **Supported employment specialist strategies to assist clients with severe mental illness and criminal justice issues.** *Psychiatric Services (formerly Hospital and Community Psychiatry)*, 60(12), 1637-1641. NARIC Accession Number: J58013

ABSTRACT: Study identified strategies used by supported employment specialists to overcome criminal justice issues among clients with severe mental illness. Semi-structured qualitative interviews were conducted with 22 supported employment specialists and their supervisors. Interviews were open ended and supplemented by ethnographic observation. Data were examined thematically by content analysis. Assisting clients with past and present criminal histories to find employment was confirmed as one of the hardest self-identified challenges for employment specialists. Three specific strategies commonly used by specialists for this subpopulation were documented and analyzed: (1) taking an incremental approach with clients vis-à-vis obtaining work and career advancement, (2) using a strengths-based model that emphasizes the client's strong points, and (3) focusing the job search on "mom and pop" businesses that typically do not conduct background checks or do not have rigid recruitment policies. Enacting these strategies led to some deviation from the individualized placement and support model of supported employment. Participants reported that they felt most challenged when attempting to serve and assist clients with sex offenses.

Roush, S. (2009). **The menu approach to supported employment for individuals with severe and persistent mental illness: Outcomes in an Oregon community-based program.** *Work: A Journal of Prevention, Assessment, and Rehabilitation*, 34(1), 45-51.

NARIC Accession Number: J59795

ABSTRACT: Study examined the vocational outcomes of the Abacus Program, a Menu Approach supported employment program designed to assist individuals with serious mental illness achieve competitive employment in the Pacific Northwest region of the United States. The Menu Approach seeks to provide supportive services to all individuals with mental illness regardless of the individual's desire or ability to work. A summative evaluation method was used to determine the vocational outcomes between the years 2000 to 2006 at the Abacus Program. Data was gathered from existing Abacus Program records and a computer program was used to calculate outcomes. The Abacus Program served 264 clients during the study period. Among those clients, there were 140 cases of vocational services that met study criteria which resulted in 83 successful instances of employment (59 percent). The results suggest that the Menu Approach to supported employment produces successful employment outcomes comparable to other published studies. Further research is warranted in order to confirm the initial results of this study in other settings.

2008

(2008). *Worksupport.com e-Newsletter, April 2008.*

NARIC Accession Number: O17504

Project Number: H133B040011

Full-text is available at <http://search.naric.com/research/rehab/download.cfm?ID=109270>

ABSTRACT: Newsletter provides information, resources, and research about work and disability issues. In this issue: (1) webcast on supported employment and mental illness, (2) article on public/private partnerships and employment of people with disabilities, (3) fact sheet on the Department of Veterans Affairs and Department of Defense disability benefit system, and (4) webcast on self-employment services provided through Medicaid waivers.

(2008). *Worksupport.com e-Newsletter, June 2008.*

NARIC Accession Number: O17506

Project Number: H133B040011

Full-text is available at <http://search.naric.com/research/rehab/download.cfm?ID=109272>

ABSTRACT: Newsletter provides information, resources, and research about work and disability issues. In this issue: (1) webcast on creative employment strategies, (2) the Quality Indicators checklist for review of competitive employment outcomes for veterans with a disability, (3) webcast on helping veterans connect with businesses, (4) fact sheet on disabled veterans and self-employment, (5) online courses on supported employment and on supported competitive employment for individuals with mental illness, and (6) article on choice and customized employment.

(2008). *Worksupport.com e-Newsletter, August 2008.*

NARIC Accession Number: O17508

Project Number: H133B040011

Full-text is available at <http://search.naric.com/research/rehab/download.cfm?ID=109274>

ABSTRACT: Newsletter provides information, resources, and research about work and disability issues. In this issue: (1) monograph describing the research conducted by the Virginia Commonwealth University Rehabilitation Research and Training Center on Workplace Supports and Job Retention, (2) webcast on state agencies and staffing agencies working together for successful employment in Virginia, (3) online courses on supported employment and on supported competitive employment for individuals with mental illness, (4) archived webcasts on self-employment topics, and (5) webcast on substance abuse and employment.

Bartels, S.J., Becker, D.R., Jeste, D.V., Narvaez, J.M., & Twamley, E.W. (2008). **Supported employment for middle-aged and older people with schizophrenia.** *American Journal of Psychiatric Rehabilitation*, 11(1), 76-89.

NARIC Accession Number: J56756

ABSTRACT: Study examined employment outcomes among 50 middle-aged and older participants with schizophrenia who were randomized to either individual placement and support (IPS) or conventional

vocational rehabilitation (CVR). Compared with CVR, IPS resulted in statistically better work outcomes, including attainment of competitive employment, number of weeks worked, and wages earned. Treatment group predicted future attainment of competitive work, but demographic and clinical variables (age, gender, ethnicity, education, illness duration, and medication dose) did not predict employment outcomes. Participants who obtained competitive employment reported improved quality of life over time compared with those who did not.

Becker, D.R. (2008). **Vocational rehabilitation.** In *Kim T. Mueser, Dilip V. Jeste (Eds.), Clinical handbook of schizophrenia. New York: Guilford Press, 261-267.*

NARIC Accession Number: J56749

ABSTRACT: Chapter focuses on the evidence-based supported employment approach to vocational rehabilitation for people with serious mental illness. In the individual placement and support (IPS) model of supported employment, employment specialists within a mental health center help patients obtain competitive jobs and provide them with ongoing support. IPS was developed to provide an alternative to traditional vocational services by emphasizing rapid placement into competitive employment with minimal concern for the development of work readiness. The research demonstrating the effectiveness of supported employment is reviewed and seven principles of evidence-based supported employment are discussed.

Becker, D.R., Bond, G.R., & Drake, R.E. (2008). **An update on randomized controlled trials of evidence-based supported employment.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal), 31(4), 280-290.*

NARIC Accession Number: J55195

ABSTRACT: This study reviewed randomized controlled trials examining competitive employment outcomes for individuals with severe mental illness in which participants were assigned to two or more conditions, one of which used the individual placement and support (IPS) model of supported employment. The following competitive employment outcomes were examined: employment rates, days to first job, annualized weeks worked, and job tenure in longest job held during the follow-up period. Across the 11

studies reviewed, the competitive employment rate was 61 percent for IPS compared to 23 percent for controls. About two-thirds of those who obtained competitive employment worked 20 hours or more per week. IPS participants obtained their first job nearly 10 weeks earlier than did controls. Duration of employment after the start of the first job averaged 24.2 weeks per year, or 47 percent of the 52-week year.

Becker, D.R., Bond, G.R., Marshall, T., & Rapp, C.A. (2008). **Key factors for implementing supported employment.** *Psychiatric Services (formerly Hospital and Community Psychiatry), 59(8), 886-892.*

NARIC Accession Number: J55419

ABSTRACT: Study identified strategies and barriers for implementing supported employment in routine mental health services. Qualitative and fidelity data from a two-year period were examined for nine sites participating in the National Evidence-Based Practices Project, which explored whether evidence-based supported employment could be implemented in routine mental health settings. At baseline, none of the sites were providing high-fidelity supported employment. However, by the two-year follow-up, eight of the nine sites successfully implemented high-fidelity programs. Three factors (leadership, mastery, and attitudes) were identified as strongly influencing the implementation (both positively and negatively) across the nine sites. The findings indicate the need for strong leadership on both the administrative and program levels, an in-depth understanding of the nature and level of training and consultation needed for program leaders and employment specialists, and the value of hiring staff with clinical or business skills. The study also demonstrated that employing staff who doubt and challenge the evidence-based model slows down the implementation process, suggesting the critical role of hiring staff who believe in recovery and supported employment principles.

Becker, D.R., Bond, G.R., McHugo, G.J., Rapp, C.A., & Whitley, R. (2008). **Fidelity of supported employment: Lessons learned from the National Evidence-Based Practices Project.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal), 31(4), 300-305.*

NARIC Accession Number: J55198

ABSTRACT: Article describes the National Evi-

dence-Based Practices Project, which evaluated the implementation of supported employment at nine sites in three states over a two year period. At each site, fidelity to evidence-based supported employment was assessed at baseline and every six months thereafter. Site reports based on the nine case studies were used to interpret the fidelity findings. At two years, eight of the nine sites achieved high fidelity. Most changes occurred within the first year. A review of the site reports suggested that four factors facilitated movement toward high fidelity: (1) discontinuing non-evidence-based vocational services, (2) making rapid structural changes through administrative action, (3) measuring key process indicators to move toward desired changes, and (4) gradually improving integration of the employment specialists with clinical services, primarily through supervisor leadership.

Becker, T., Burns, T., Catty, J., Drake, R.E., Fioritti, A., Knapp, M., Lauber, C., Lissouba, P., Rossler, W., Tomov, T., van Busschbach, J., White, S., & Wiersma, D. (2008). **Predictors of employment for people with severe mental illness: Results of an international six-centre randomized controlled trial.** *British Journal of Psychiatry*, 192(3), 224-231.

NARIC Accession Number: J56753

ABSTRACT: A randomized controlled trial comparing individual placement and support (IPS) with usual vocational rehabilitation was conducted in 6 European centers to determine which patients with severe mental illness do well in vocational services and identify predictors of employment outcomes. Patient characteristics and early process variables were tested as predictors of employment outcomes. Service characteristics were explored as predictors of the effectiveness of IPS. The IPS service was found to be more effective for all vocational outcomes. Patients with previous work history, fewer met social needs and better relationships with their vocational workers were more likely to obtain employment and work for longer. Remission and swifter service uptake were associated with working more. IPS fidelity (having an IPS service closer to the original IPS model) was the only service characteristic associated with greater effectiveness.

Becker, D.R., Drake, R.E., Nuechterlein, K.H., Subotnik, K.L., Turner, L.R., & Ventura, J. (2008).

Individual placement and support for individuals with recent-onset schizophrenia: Integrating supported education and supported employment.

Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal), 31(4), 340-349.

NARIC Accession Number: J55202

ABSTRACT: Article describes the adaptation of the individual placement and support (IPS) model of supported employment for people with a recent initial onset of schizophrenia. Participants were randomly assigned to either an 18-month IPS intervention or to vocational rehabilitation. Since the vocational goals of people with a recent onset of schizophrenia often involve completion of schooling rather than only competitive employment, IPS was extended to include both supported education and supported employment. Inclusion of supported education within an IPS model involved allowance for initial evaluation of whether schooling or employment was the immediate goal, having the IPS specialist work directly with educational as well as competitive employment settings to aid placement, and follow-along support that included aid in study skills and course planning in addition to contact with teachers and employers. Participants in the IPS condition returned to job only, school only, or both job and school with approximately equal frequency during the 18-month trial period.

Becker, D.R., Lynde, D., & Swanson, S.J. (2008). **Strategies for state-wide implementation of supported employment: The Johnson & Johnson-Dartmouth community mental health program.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal)*, 31(4), 296-299.

NARIC Accession Number: J55197

ABSTRACT: Article reviews key strategies for implementing evidence-based supported employment services statewide. The Johnson & Johnson-Dartmouth Community Mental Health Program collaborates with 9 states and the District of Columbia to implement supported employment in a sustainable way. Technical assistance and team-based training help agencies develop high-fidelity programs that result in good employment outcomes for people with severe mental illness.

Blyler, C.R., Burke-Miller, J.K., Carey, M.A., Cook, J.A., Donegan, K., Gold, P.B., Goldberg, R.W., Grey,

D.D., Kaufmann, C., Leff, H.S., McFarlane, W.R., Mueser, K.T., Onken, S.J., Pickett-Schenk, S.A., Razzano, L.A., & Shafer, M.S. (2008). **Effectiveness of supported employment for individuals with schizophrenia: Results of a multi-site, randomized trial.** *Clinical Schizophrenia & Related Psychoses*, 2(1), 37-46.

NARIC Accession Number: J56754

Project Number: H133B050003

ABSTRACT: Study examined the efficacy of supported employment for individuals with schizophrenia. A total of 1,273 patients with severe mental illness at 7 sites were randomly assigned to either a supported employment program or to a services-as-usual vocational model (control) and followed for 2 years. Data collection involved semi-annual, in-person interviews and weekly recording of all paid employment by vocational and research staff. Mixed-effects random regression analysis was used to examine the effects of intervention, schizophrenia diagnosis, and their interaction, on the likelihood of competitive employment. Results indicated that patients in supported employment programs and those with diagnoses other than schizophrenia were significantly more likely to be competitively employed than those in control programs and those with a diagnosis of schizophrenia.

Blyler, C.R., Carey, M.A., Cook, J.A., Donegan, K., Gold, P.B., Goldberg, R.W., Kaufmann, C., Leff, H.S., McFarlane, W.R., Mueser, K.T., Onken, S.J., Razzano, L.A., & Shafer, M.S. (2008). **The employment intervention demonstration program: Major findings and policy implications.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal)*, 31(4), 291-295.

NARIC Accession Number: J55196

Project Number: H133B050003

ABSTRACT: Article presents the results of the Employment Intervention Demonstration Program, a multi-site study examining the effectiveness of supported employment programs for 1,273 unemployed individuals with psychiatric disabilities. The study design, the supported employment models that were tested, and the characteristics of study participants are described. The findings confirm the effectiveness of supported employment across different models, program locations, and participant populations.

Bond, G.R., & Drake, R.E. (2008). **The future of supported employment for people with severe mental illness.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal)*, 31(4), 367-376.

NARIC Accession Number: J55204

ABSTRACT: Article reviews current research on ways to improve the dissemination and effectiveness of supported employment. The areas of investigation include: (1) organization and financing of services, (2) disability policies, (3) program implementation and quality, (4) motivation, (5) job development, (6) illness-related barriers, (7) job supports, (8) career development, and (9) new populations. Each of these areas offers promise of improving services and outcomes in the near future.

Bond, G.R., & Evans, L.J. (2008). **Expert ratings on the critical ingredients of supported employment for people with severe mental illness.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal)*, 31(4), 318-331.

NARIC Accession Number: J55200

ABSTRACT: Study examined the degree of agreement on the critical ingredients of supported employment among experts and practitioners. The experts group consisted primarily of university-based researchers, while the practitioner group was generated from lists provided by state leaders in two Western, two Central, and two Eastern states. A 59-item survey checklist was developed using multiple sources, including published guidelines and 3 supported employment fidelity scales. Participants rated items on a 7-point importance scale and indicated ideal specifications in 11 areas. To help interpret the findings, ratings on the survey checklist were compared to 15 items from the Individual Placement and Support (IPS) Fidelity Scale. Strong agreement was found on the critical ingredients of supported employment within the expert and practitioner groups. On most items, the two groups had similar mean ratings of importance. Experts rated 4 items reflecting evidence-based principles and 2 items related to outcome monitoring as more important than did practitioners, while practitioners rated 10 items reflecting pragmatic concerns (funding, accreditation) as more important. Comparing survey responses on the 15 items from the IPS Fidelity Scale suggested general endorsement of

IPS principles, except in the area of staffing. Ideal model specifications include caseload size of 16 and twice weekly supervision. Respondents also suggest critical ingredients not measured by the IPS Fidelity Scale, such as benefits counseling, supported education, and cultivation of employers.

Bond, G.R., Fraser, V.V., Frounfelker, R., Hardin, T., Harding, B., & Jones, A.M. (2008). **VR closure rates for two vocational models.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal)*, 31(4), 332-339.

NARIC Accession Number: J55201

ABSTRACT: Article presents a secondary analysis of data from a study comparing the individual placement and support (IPS) model of supported employment with a traditional vocational rehabilitation (VR) program, called the Diversified Placement Approach (DPA), at a psychiatric rehabilitation agency. The study compared the rates of successful VR closures (Status 26 closure) and the average length of time required to achieve VR sponsorship for IPS and DPA clients. Both IPS and DPA achieved a 44 percent rate of VR Status 26 closure when considering all clients entering the study. IPS and DPA averaged a similar amount of time to achieve VR sponsorship. Time from vocational program entry to Status 26 was, on average, 51 days longer for IPS.

Cimera, R.E. (2008). **The costs of providing supported employment services to individuals with psychiatric disabilities.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal)*, 32(2), 110-116.

NARIC Accession Number: J55642

ABSTRACT: Study compared the vocational rehabilitation (VR) costs generated by supported employees with various psychiatric disabilities to those generated by supported employees with other conditions. A structured cost-accounting method was used to compare the adjusted costs of services received by all supported employees funded by VR in Wisconsin from 2002 to 2005. Results indicated that supported employees with psychotic and non-psychotic disorders were among the least costly populations to serve, averaging annual per capita expenditures of \$3,846 and \$2,579, respectively. Supported employees, as a whole, generated average annual per capita expenditures of \$4,683.

Cimera, R.E. (2008). **The cost-trends of supported employment versus sheltered employment.** *Journal of Vocational Rehabilitation*, 28(1), 15-20.

NARIC Accession Number: J54291

ABSTRACT: Study compared the cost-trends of supported and sheltered employees with mental retardation as they completed one employment cycle, that is, from the point they entered their programs to the point when they changed jobs, left the program, or otherwise stopped receiving services. Results indicated that cumulative costs generated by supported employees are much lower than the cumulative costs generated by sheltered employees. In addition, the cost-trend of supported employees was downward while the cost-trend of sheltered employees was slightly upward, indicating that the costs of supported employment decline over time while those of sheltered workshops increase.

Nemec, P., & Sullivan-Soydan, A. (Eds.). (2008). **Special 10th anniversary issue on supported employment.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal)*, 31(4), 271-382.

NARIC Accession Number: R08940

ABSTRACT: Articles in this journal issue focus on supported employment (SE) in the context of psychiatric rehabilitation. Topics include: an update on randomized controlled trials of evidence-based SE; major findings and policy implications of the Employment Intervention Demonstration Program; strategies for state-wide implementation of SE; fidelity of SE; the Mental Health Treatment Study; individual placement and support (IPS) in Europe; expert ratings on the critical ingredients of SE for people with severe mental illness; vocational rehabilitation (VR) closure rates for two vocational models; IPS for individuals with recent-onset schizophrenia; cognitive remediation and VR; factors influencing the delivery of evidence-based SE in England; and the future of SE for people with severe mental illness. Individual articles may be available for document delivery under accession numbers J55195 through J55205.

Shawl, L.R., (Ed.). (2008). *Community Integration News: August, 2008*.

NARIC Accession Number: O17275

Project Number: H133B031109

Full-text is available at <http://search.naric.com/research/rehab/download.cfm?ID=107574>

ABSTRACT: This e-newsletter is sponsored by the University of Pennsylvania (UPenn) Collaborative on Community Integration, which is the Rehabilitation Research and Training Center (RRTC) promoting community integration of individuals with psychiatric disabilities. This issue focuses on employment and education. Topics include: new training resources for facilitating circles of support in supported employment, community integration tools and resources, publication highlights, UPenn collaborator highlights, and innovative community integration initiatives.

2007

(2007). *Worksupport.com e-Newsletter, July 2007*.

NARIC Accession Number: O17495

Project Number: H133B040011

Full-text is available at <http://search.naric.com/research/rehab/download.cfm?ID=109261>

ABSTRACT: Newsletter provides information, resources, and research about work and disability issues. In this issue: (1) self-employment webcasts, (2) online courses on supported employment and on supported competitive employment for individuals with mental illness, and (3) University of Maryland Rehabilitation Counseling program announces online certificate program in job development and placement.

Anthony, W., Hutchinson, D., Massaro, J., & Rogers, S.E. (2007). **Evaluation of a combined supported computer education and employment training program for persons with psychiatric disabilities.**

Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal), 30(3), 189-197.

NARIC Accession Number: J52189

Project Numbers: H133B040026; H133B40024

ABSTRACT: Article describes the evaluation of a supported education-supported employment program which focused on teaching computer, recovery, and work skills to people with psychiatric disabilities. Sixty-one students were involved in the evaluation over five years. Following a 10-month classroom training phase, students entered a 2-month intern-

ship to give them computer office work experience. Students were interviewed quarterly using standardized assessments related to work status, empowerment, self-esteem, community and social activity, and satisfaction with services. Results indicated that overall, participants experienced a positive change in work status and income and a decrease in mental health services utilization. In addition, self-esteem and perceptions of empowerment improved.

Bailey, E.L., Becker, D., Drake, R.E., & Whitley, R. (2007). **Long-term employment trajectories among participants with severe mental illness in supported employment.** *Psychiatric Services (formerly Hospital and Community Psychiatry)*, 58(7), 922-928.

NARIC Accession Number: J53381

Project Number: H133G050181

ABSTRACT: Thirty-eight adults with psychiatric disabilities were interviewed 8 to 12 years after they enrolled in supported employment to determine their pattern of work over many years. All participants worked during the follow-up period, with 71 percent working more than half of the follow-up years and 82 percent in competitive jobs. Participants reported that employment provided many benefits, including improvements in self-esteem, relationships, and illness management. Their psychiatric illness was the major barrier to work; part-time employment and long-term supports were the major facilitators. Qualitative analysis of the data revealed: (1) successful management of symptoms and the use of appropriate coping appeared to play an important role in finding and maintaining work; (2) participants preferred to work part-time because it allowed for maintenance of Social Security and health care benefits; and (3) participants saw the importance of ongoing individual placement and support services.

Baker, S.R., Becker, D.R., Carlson, L., Drake, R.E., Flint, L., Howell, R., Lindsay, S., Moore, M., & Reeder, S. (2007). **Critical strategies for implementing supported employment.** *Journal of Vocational Rehabilitation*, 27(1), 13-20.

NARIC Accession Number: J53701

Project Number: H133G050181

ABSTRACT: Seven case studies are presented describing how six states and the District of Columbia introduced new policies and procedures to imple-

ment supported employment services for people with severe mental illness. Each jurisdiction approached implementation differently, but each also achieved success. The diverse strategy used included: (1) instituting state-level administrative procedures and reconfiguration of local staffing to enhance collaboration between mental health and vocational rehabilitation; (2) promoting supported employment services through the media, online training, and training by early adopters; (3) hiring benefits specialists; (4) teaching outcome-based supervision; and (5) building capacity for supported employment fidelity reviews.

Barr, L.K., Boyle, M.G., Corrigan, P.W., Glenn, T.L., Kuwabara, S.A., & Larson, J.E. (2007). **Perspectives on benefits and costs of work from individuals with psychiatric disabilities.** *Journal of Vocational Rehabilitation, 26*(2), 71-77.

NARIC Accession Number: J52342

ABSTRACT: Study examined the perspectives of individuals with psychiatric disabilities enrolled in a supported employment program on the benefits and costs of work. The program provided assistance in weighing the pros and cons of work, locating employment based on personal choice, and maintaining competitive jobs through unlimited support. At the twelfth month of participation in the program, 59 unemployed participants and 30 employed participants discussed their views on the benefits and costs of work during one-on-one interviews with researchers. For the unemployed participants, 47 distinct themes emerged from the interviews that were categorized into 5 conceptual frameworks: financial, emotional, cognitive, behavioral, and interpersonal. For the employed participants, results suggested 25 distinct themes that were categorized into the same 5 conceptual frameworks. Implications for future research are discussed.

Becker, D.R., Bond, G.R., Dincin, J., Drake, R.E., Fraser, V.V., Haines, M., & Salyers, M.P. (2007). **A randomized controlled trial comparing two vocational models for persons with severe mental illness.** *Journal of Consulting and Clinical Psychology, 75*(6), 968-982.

NARIC Accession Number: J54215

Project Number: H133G050181

ABSTRACT: Study compared two approaches to vo-

ational rehabilitation for people with severe mental illness. Employment outcomes were examined for clients randomly assigned to the individual placement and support (IPS) model of supported employment or to the diversified placement approach (DPA), which emphasized work readiness and offers a range of vocational options, including agency-run businesses and agency-contracted placements with community employers. Over a 2-year period, IPS had significantly better competitive employment outcomes than DPA. Competitive employment rates over the 2-year follow-up were 75 percent for IPS and 34 percent for DPA. However, IPS and DPA did not differ on paid employment outcomes. The authors conclude that IPS is more effective than DPA in achieving competitive employment, but not paid employment.

Becker, T., Burns, T., Catty, J., Drake, R.E., Fioritti, A., Knapp, M., Lauber, C., Rossler, W., Tornov, T., van Busschblach, J., White, S., & Wiersma, D. (2007). **The effectiveness of supported employment for people with severe mental illness: A randomized controlled trial.** *The Lancet, 370*(9593), 1146-1152.

NARIC Accession Number: J54266

Project Number: H133G050181

ABSTRACT: Study examined the effectiveness of individual placement and support (IPS) compared with existing vocational services for people with severe mental illness in Europe and whether its effect is modified by local labor markets and welfare systems. A total of 312 patients who were randomly assigned in 6 European centers to receive IPS or vocational services were followed-up for 18 months. The primary outcome was the difference between the 2 groups in the proportions of people entering competitive employment.

Becker, D., Drake, R.E., Giesen, F.B.M., Kroon, H., McHugo, G.J., Michon, H.W.C., van Erp, Nicole H.J., & van Weeghel, J. (2007). **A multisite study of implementing supported employment in the Netherlands.** *Psychiatric Services (formerly Hospital and Community Psychiatry), 58*(11), 1421-1426.

NARIC Accession Number: J54208

Project Number: H133G050181

ABSTRACT: Study examined the implementation of the individual placement and support model of

supported employment in 4 Dutch mental health agencies. Structured site visits, employment data, and semi-structured interviews were used to assess fidelity, employment outcomes, and facilitators of and barriers to successful implementation at zero, 12, and 24 months. All four sites reached only moderate scores on two fidelity items: finding permanent jobs and providing services in the community. Of the 316 clients with mental illness, 56 (18 percent) obtained competitive jobs. Barriers to implementation included lack of organizational standards, loss of vocational staff, funding problems, insufficient time for program leaders, and inadequate cooperation between the involved organizations. Facilitators included the skills and commitment of the vocational team members and the integration of vocational and mental health staff.

Blyler, C.R., Burke-Miller, J.K., Carey, M.A., Cook, J.A., Donegan, K., Gold, P.B., Goldberg, R.W., Grey, D.D., Kaufmann, C., Leff, H.S., McFarlane, W.R., Mueser, K.T., Onken, S.J., Razzano, L.A., & Shafer, M.S. (2007). **Effects of co-occurring disorders on employment outcomes in a multisite randomized study of supported employment for people with severe mental illness.** *Journal of Rehabilitation Research and Development (JRRD) (formerly the Bulletin of Prosthetics Research)*, 44(6), 837-850.

NARIC Accession Number: J54481

Project Number: H133B050003

ABSTRACT: Study examined the effects of co-occurring disorders on work outcomes among individuals with severe mental illness who were participating in supported employment. At 7 study sites, at total of 1,273 people with severe mental illness and co-occurring conditions were randomly assigned to a supported employment program or a control condition and followed for 2 years. Analysis examined work outcomes including earnings, hours worked, and competitive employment as well as whether psychiatric disability was disclosed to coworkers and supervisors. Results indicated that those with physical comorbidities had lower earnings, worked fewer hours, and were less likely to work competitively. Disclosure was more likely among those with both cognitive and physical comorbidities, as well as those with learning disabilities. Competitive employment was less likely among those with intellectual disability, visual impairment, and human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS).

Bond, G. (2007). **International perspectives on implementing supported employment for people with severe mental illness.** *Journal of Vocational Rehabilitation*, 27(1), 1-2.

NARIC Accession Number: J54264

Project Number: H133G050181

ABSTRACT: Article introduces this special journal issue which focuses on the implementation and dissemination of evidence-based supported employment for individuals with severe mental illness. An overview is provided of the topics discussed in subsequent articles.

Bond, G., (Ed.). (2007). **Special issue: International perspectives on implementing supported employment for people with severe mental illness.** *Journal of Vocational Rehabilitation*, 27(1), 1-68.

NARIC Accession Number: R08873

ABSTRACT: Articles in this special journal issue present international perspectives on the implementation and dissemination of evidence-based supported employment for individuals with severe mental illness. Topics include: fidelity of implementation of supported employment in different types of provider organizations, clinical strategies for implementing supported employment, a comparison of employment outcomes for individual placement and support versus non-integrated pre-vocational services in the United Kingdom, challenges to implementing evidence-based supported employment in Australia, perceptions of illness as a barrier to work in consumers of supported employment services, situational assessment in psychiatric rehabilitation, and determinants of return to work among spinal cord injury patients. Individual articles are available for document delivery under accession numbers J53700 through J53706.

Born, D.L., Hart-Katuin, C., Holt, S.L., Perkins, D.V., & Tschopp, M.K. (2007). **Employment barriers and strategies for individuals with psychiatric disabilities and criminal histories.** *Journal of Vocational Rehabilitation*, 26(3), 175-187.

NARIC Accession Number: J52921

ABSTRACT: Focus groups were used to identify ways in which supported employment providers deliver effective services to people with mental illness and criminal histories. Providers reported that a sense of hope, a trusting relationship, realistic and

sincere expectations about work, and optimism on the part of both the consumer and the provider are key ingredients to success. Barriers to success included stigma and inadequate support. Successful employment reflects persistence, clinical and law enforcement supports as needed, lifestyle adjustment, face-to-face meetings with employers, effective disclosure strategies, and documenting work readiness using portfolios.

Born, D., Griss, M.E., Johannesen, J.K., & McGrew, J.H. (2007). **Perception of illness as a barrier to work in consumers of supported employment services.** *Journal of Vocational Rehabilitation, 27*(1), 39-47.

NARIC Accession Number: J53704

ABSTRACT: Study examined the relationship between self-perceived barriers to employment and vocational rehabilitation outcomes for 117 individuals with severe mental illness receiving supported employment services. Participants' perceptions of illness-related and common barriers to employment were assessed in relation to work and rehabilitation outcomes. At the time of enrollment in the supported employment program, endorsement of illness-related barriers correlated negatively with hopefulness and quality of life, whereas endorsement of common barriers correlated negatively with clinician ratings of independent functioning. Both total barriers and common barriers correlated negatively with later attainment of employment.

Boyle, M., Driscoll, H., & Loveland, D. (2007). **Enhancing supported employment services for individuals with a serious mental illness: A review of the literature.** *Journal of Vocational Rehabilitation, 27*(3), 171-176.

NARIC Accession Number: J54130

ABSTRACT: Article review the literature on intervention developed to enhance vocational rehabilitation services, including supported employment (SE), for individuals with serious mental illness. Three levels of barriers limit the impact of SE are examined: (1) sociological barriers, (2) agency and program barriers, and (3) disease-based impairments. Interventions that have been developed to enhance the impact of SE and help individuals overcome these 3 barriers to work are reviewed.

Collister, L., Killackey, E., Sherring, J., & Waghorn, G. (2007). **Challenges to implementing evidence-based supported employment in Australia.** *Journal of Vocational Rehabilitation, 27*(1), 29-37.

NARIC Accession Number: J53703

ABSTRACT: Article describes the challenges associated with efforts to integrate evidence-based supported employment with mental health services at seven sites in Australia. Issues of potential relevance to other sites implementing evidence-based practices and issues of international interest are highlighted. While the establishment of evidence-based supported employment appears feasible, when actually attempted, multiple and sometimes unique challenges emerged at each site. The major difficulties were related to service integration and utilizing the existing Federal disability employment system. The early implementation experiences of these Australian sites add to international knowledge on how best to implement evidence-based employment services for people with psychiatric disabilities.

Corrigan, P.W., Kuwabara, S.A., & Larson, J.E. (2007). **Mental illness stigma and the fundamental components of supported employment.** *Rehabilitation Psychology, 52*(4), 451-457.

NARIC Accession Number: J53599

ABSTRACT: Article examines two models of stigma, responsibility attribution and dangerousness, and their relationship to two components of supported employment, help getting a job and help keeping a job. Participants were randomly assigned to read a vignette about "Chris", a person alternately described with mental illness, with drug addiction, or in a wheelchair. Participants then responded to questions representing the two models of stigma and the two aspects of supported employment. When participants viewed Chris as responsible for his condition (mentally ill or addicted to drugs), they reacted to him in an angry manner, which in turn led to lesser endorsement of the two aspects of supported employment. People who viewed Chris as dangerous feared him and wanted to stay away from him, even in settings where people with mental illness might work. Implications for understanding supported employment are discussed.

Feldman, K., McGurk, S.R., Mueser, K.T., Pascaris, A., & Wolfe, R. (2007). **Cognitive training for supported employment: 2-3 year outcomes of a randomized controlled trial.** *American Journal of Psychiatry*, 164(3), 437-441.

NARIC Accession Number: J54268

Project Number: H133G050230

ABSTRACT: Study examined the effects of integrating a cognitive training program into supported employment services for patients with severe mental illness. Participants were randomly assigned to received either supported employment alone or supported employment with cognitive training. Measures at baseline and at three months included a brief cognitive and symptom assessment. Work outcomes were tracked for two to three years. Patients in the supported employment with cognitive training program demonstrated significantly greater improvements at three months in terms of cognitive functioning, depression, and autistic pre-occupation. Over two to three years patients in the supported employment training program were more likely to work, held more jobs, worked more weeks, worked more hours, and earned more wages than patients in the program offering supported employment alone.

Hollis, V., Liu, K.W.D., Warren, S., & Williamson, D.L. (2007). **Supported-employment program processes and outcomes: Experiences of people with schizophrenia.** *American Journal of Occupational Therapy (AJOT)*, 61(5), 543-554.

NARIC Accession Number: J53259

ABSTRACT: This qualitative study explored the experiences of a supported employment program from the perspective of seven program participants with schizophrenia. Data were collected through individual interviews and analyzed using a grounded theory approach. A tentative theory was developed to explain the process and outcomes of a supported employment program based on the program participants' perspective. The three outcome themes were: (1) removing barriers to job seeking, (2) improving psychological well-being, and (3) participating in work.

Perkins, R., & Rinaldi, M. (2007). **Comparing employment outcomes for two vocational services:**

Individual placement and support and non-integrated pre-vocational services in the UK. *Journal of Vocational Rehabilitation*, 27(1), 21-27.

NARIC Accession Number: J53702

ABSTRACT: Study compared the employment outcomes of two vocational services in the United Kingdom: and individual placement and support (IPS) service and a non-integrated pre-vocational service. In addition to employment outcomes, fidelity ratings, service costs, and findings from a survey of user experiences of mental health services two years after implementing IPS were examined. Results showed that high fidelity IPS was significantly more effective than non-integrated pre-vocational services in enabling people with severe mental illness to gain and retain employment. After two years of full IPS implementation, a significantly greater proportion of service users reported that they received help with vocational needs. In addition, service user expectations to gain open employment appeared to increase in comparison to the non-integrated pre-vocational service. The IPS was 6.7 times financially more efficient in terms of delivering open employment outcome than the non-integrated vocational service.

Shawl, L.R., (Ed.). (2007). *Community Integration News: October, 2007.*

NARIC Accession Number: O17272

Project Number: H133B031109

Full-text is available at <http://search.naric.com/research/rehab/download.cfm?ID=107571>

ABSTRACT: This e-newsletter is sponsored by the University of Pennsylvania (UPenn) Collaborative on Community Integration, which is the Rehabilitation Research and Training Center (RRTC) promoting community integration of individuals with psychiatric disabilities. In this issue: a randomized controlled study of the use of circles of support in supported employment, a randomized study of Internet-based support for people with psychiatric disabilities, a request for stories from parents with mental illness and from students with mental illness regarding their experiences, new community integration tools and resources, two new training workshops offered, and UPenn collaborators in the news.

2006

(2006). *Worksupport.com e-Newsletter, January 2006.*

NARIC Accession Number: O17479

Project Number: H133B040011

Full-text is available at <http://search.naric.com/research/rehab/download.cfm?ID=109245>

ABSTRACT: Newsletter provides information, resources, and research about work and disability issues. In this issue: (1) Web courses on supported employment and supported competitive employment for individuals with mental illness, (2) the APSE Mental Health and Employment Conference, (3) Webcasts on Medicare Part D and on technology and transition for individuals with learning disabilities, and (4) fact sheet on ways to foster a better working relationship between a customer with a disability and the One-Stop Career Center.

(2006). *Worksupport.com e-Newsletter, June 2006.*

NARIC Accession Number: O17484

Project Number: H133B040011

Full-text is available at <http://search.naric.com/research/rehab/download.cfm?ID=109250>

ABSTRACT: Newsletter provides information, resources, and research about work and disability issues. In this issue: (1) Webcast on achieving customized employment, (2) spinal cord injury and employment DVD, (3) Webcast on student views on expanding academic and career supports for college students with physical and neurological disabilities, and (4) Web courses on supported employment and supported competitive employment for individuals with mental illness.

(2006). *Worksupport.com e-Newsletter, July 2006.*

NARIC Accession Number: O17485

Project Number: H133B040011

Full-text is available at <http://search.naric.com/research/rehab/download.cfm?ID=109251>

ABSTRACT: Newsletter provides information, resources, and research about work and disability issues. In this issue: (1) Webcast on job restructuring and job negotiation, (2) Webcast on breaking down barriers to implementing community-based vocational training for youths with disabilities, and (3) Web courses on supported employment and supported competitive employment for individuals with mental illness.

(2006). *Worksupport.com e-Newsletter, August 2006.*

NARIC Accession Number: O17486

Project Number: H133B040011

Full-text is available at <http://search.naric.com/research/rehab/download.cfm?ID=109252>

ABSTRACT: Newsletter provides information, resources, and research about work and disability issues. In this issue: (1) Webcast on creating opportunities for workers with disabilities in small businesses, (2) newsletter on the universal design approach to learning, and (3) Web courses on supported employment and supported competitive employment for individuals with mental illness.

Alverson, H., Carpenter, E., & Drake, R.E. (2006). **An ethnographic study of job-seeking among people with severe mental illness.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal)*, 30(1), 15-22.

NARIC Accession Number: J51067

ABSTRACT: An ethnographic study using intensive participant observation methods identified critical differences in styles of searching for competitive employment among 25 individuals with severe mental illness and examined the social and cultural factors associated with those job-seeking styles. Results showed that the propensity for active job seeking was strongly associated with younger age, with participants' involvement in interdependent kin networks or households, with ethnic/racial minority background, and with capacity for coherent discourse. Active job seekers did particularly well in a supported employment program, but also were able to find employment when assigned to other programs. Passive job seekers had little success in any vocational program.

Barreira, P.J., Hargreaves, W.A., Jones, D.R., Macias, C., Rodican, C.F., & Wang, Q. (2006). **Supported employment outcomes of a randomized controlled trial of ACT and clubhouse models.** *Psychiatric Services (formerly Hospital and Community Psychiatry)*, 57(10), 1406-1415.

NARIC Accession Number: J51554

ABSTRACT: A vocationally-integrated assertive community treatment (ACT) program was compared with a certified clubhouse in the delivery of supported employment services. Employment outcomes for 121

adults with serious mental illness were compared with published benchmark figures for exemplary supported employment programs. Analyses then compared the ACT and clubhouse programs regarding service engagement, retention, and employment outcomes for 24 months. Results showed that outcomes for the 63 ACT and 58 clubhouse participants met or exceeded most published outcomes for specialized supported employment teams. The ACT program had significantly better service engagement and retention than the clubhouse program, but there was no significant difference in employment rates. Clubhouse participants worked significantly longer for more total hours and earned more than ACT participants.

Becker, D.R., Halliday, J., Martinez, R.A., McHugo, G.J., & Xie, H. (2006). **What predicts supported employment program outcomes?** *Community Mental Health Journal*, 42(3), 303-313.

NARIC Accession Number: J56748

ABSTRACT: Study identified differences in access to supported employment services and rates of competitive employment (efficiency) as well as predictors of access and efficiency. Data were provided by 26 sites participating in the Johnson & Johnson-Dartmouth Community Mental Health Program, a private-public-academic collaboration between state mental health agencies and vocational rehabilitation, designed to implement evidence-based supported employment services for people with serious mental illness (SMI). Results showed that access varied from 2 percent to 100 percent and was related to the percentage of supported employment specialists per consumers with SMI served by the mental health agency (funding). Efficiency varied from 7 percent to 75 percent and was related to implementation of the critical components of evidence-based supported employment and to the local unemployment rate.

Bond, G.R., Drake, R.E., & Rapp, C. (2006). **Explaining the variance within supported employment programs: Comment on "what predicts supported employment outcomes?"** *Community Mental Health Journal*, 42(3), 315-318.

NARIC Accession Number: J56751

ABSTRACT: Article addresses the reasons for the considerable differences in outcomes found across supported employment programs. The comments

focus on a study that identified differences in access to supported employment services and rates of competitive employment (efficiency), as well as predictors of access and efficiency, across different supported employment program (see accession number J56748). The study concluded that fidelity to the evidence-based model explained a significant proportion of the variation in employment outcomes among the supported employment program. The present authors suggest that the variance in employment outcomes is also attributable to clinical skills of employment specialists.

Boyd, J.K., Dudek, K.J., & Schonebaum, A.D. (2006). **A comparison of competitive employment outcomes for the clubhouse and PACT models.** *Psychiatric Services (formerly Hospital and Community Psychiatry)*, 57(10), 1416-1420.

NARIC Accession Number: J51555

ABSTRACT: Study compared the competitive employment outcomes for clubhouse program and program of assertive community treatment (PACT) participants with severe mental illness. Eighty-six clubhouse participants and 84 PACT participants were tracked for 30 months and employment outcome data were collected. Time-based and job-based analyses compared employment outcomes for clubhouse and PACT participants. Results showed that after 30 months, 72 clubhouse and 76 PACT participants remained active in the project. Seventy-four percent of PACT participants and 60 percent of clubhouse participants had been placed in at least 1 job. The average clubhouse participant worked 21.8 weeks per job and earned \$7.38 per hour, whereas the average PACT participant worked 13.1 weeks per job and earned \$6.30 per hour.

Carlioni, C., & Casper, E.S. (2006). **Increasing the utilization of supported employment services with the need for change scale.** *Psychiatric Services (formerly Hospital and Community Psychiatry)*, 57(10), 1430-1434.

NARIC Accession Number: J51557

ABSTRACT: Study compared consumers' felt need for employment with their mental health practitioners' assessments of need. Consumers rated their felt need for employment on the Need for Change (NFC) scale. Correlations between consumers' NFC ratings

and their decisions to accept supported employment services and correlations between their practitioners' decisions to refer consumers to supported employment services and the consumers' decision to accept referrals were analyzed. Results showed that consumers' decisions to accept a referral had a correlation of .72 with their NFC ratings, compared with .17 with their practitioners' decision to refer them. Of the 49 people with high NFC ratings, 45 were accepted into supported employment services. Only 10 of these consumers would have been referred by their practitioners. The NFC increased referrals to supported employment services by 24 percent.

Cook, J.A., & O'Day, B. (2006). ***Policy Brief: Supported Employment: A Best Practice for People with Psychiatric Disabilities.***

NARIC Accession Number: O16598

Project Numbers: H133B040013; H133B050003

Full-text is available at <http://search.naric.com/research/rehab/download.cfm?ID=102858>

ABSTRACT: Report describes the Employment Intervention Demonstration Program (EIDP), a multi-site randomized controlled trial of the effectiveness of supported employment for people with psychiatric disabilities. Researchers randomly assigned over 1,600 participants to experimental and control groups at the 8 EIDP sites and followed them for 2 years. The study documented vocational outcomes, including competitive employment, earnings, employment status, benefit receipt, and number of hours worked. Major study findings are presented and the implications for public policy and research are discussed.

McGurk, S.R., & Mueser, K.T. (2006). ***Strategies for coping with cognitive impairments of clients in supported employment.*** *Psychiatric Services (formerly Hospital and Community Psychiatry)*, 57(10), 1421-1429.

NARIC Accession Number: J51556

ABSTRACT: Twenty-five supported employment specialists identified 76 different strategies that they used to help their clients with severe mental illness cope with cognitive difficulties involving attention, psychomotor speed, memory, and problem solving. Then, 50 employment specialists were surveyed to determine whether they used each of the coping strategies and for each strategy used, how effective

it was. The specialists reported using an average of 48 different coping strategies, which they rated on average as just below effective. Strategies for dealing with attention problems were rated as more effective than strategies in the other 3 domains. Use of more strategies was correlated with the perceived effectiveness of the strategies and with higher rates of working clients on their caseloads.

2005

Aalto, S., Becker, D.R., Mueser, K.T., Ogden, J.S., Schiavo, D., Wallace, C.J., Wolfe, R.S., & Xie, H. (2005). ***The effectiveness of skills training for improving outcomes in supported employment.*** *Psychiatric Services (formerly Hospital and Community Psychiatry)*, 56(10), 1254-1260.

NARIC Accession Number: J49940

ABSTRACT: Study examined whether a workplace fundamentals program, a supplementary training on social skills for the workplace, would improve work outcomes for clients enrolled in supported employment programs. Thirty-five recently employed vocational rehabilitation clients with severe mental illness were randomly assigned to participate in either the skills training program or treatment as usual. Knowledge of workplace fundamentals was assessed at baseline and at 9 months; employment outcomes and use of additional vocational services were tracked for 18 months. Results showed that clients in the workplace fundamentals group improved more in knowledge of workplace fundamentals than those in the control group at the 9-month follow-up, but the 2 groups did not differ in the number of hours or days worked, salary earned, or receipt of additional vocational services over the 18-month period. In general, supplementary skills training did not improve work outcomes for clients who were receiving supported employment.

Becker, D.R., Drake, R.E., & Naughton Jr., W.J. (2005). ***Supported employment for people with co-occurring disorders.*** *Psychiatric Rehabilitation Journal*, 28(4), 332-338.

NARIC Accession Number: J48898

ABSTRACT: Article presents guidelines for providing supported employment services to people who have both a mental illness and a substance use

disorder. Authors first review the general principles of supported employment and then discuss specific guidelines that apply to individuals with co-occurring disorders.

Blankertz, L., Blyler, C., Burke-Miller, J.K., Cook, J.A., Drake, R., Grey, D.D., Leff, H.S., Lehman, A.F., McFarlane, W.R., Pickett-Schenk, S.A., Razzano, L.A., Shafer, M., & Toprac, M.G. (2005). **Integration of psychiatric and vocational services: A multisite randomized, controlled trial of supported employment.** *American Journal of Psychiatry*, 162(10), 1948-1956.

NARIC Accession Number: J56747

Project Number: H133B050003

ABSTRACT: Study compared the outcomes of clients with severe mental illness serviced in supported employment programs with high versus low integration of psychiatric and vocational services. A total of 1,273 patients with severe mental illness at 7 sites were randomly assigned to either a supported employment program or to a comparison services-as-usual vocational model and followed for 2 years. Data collection involved monthly services tracking, semi-annual, in-person interviews, weekly recording of all paid employment, and program ratings using a services integration measure. Mixed-effects random regression analysis was used to examine the likelihood of competitive employment and working 40 or more hours per month. Results indicated that supported employment models with high levels of integration of psychiatric and vocational services were more effective than models with low levels of service integration. Subjects served by models that integrated psychiatric and vocational service delivery were more than twice as likely to be competitively employed and almost 1.5 times as likely to work at least 40 hours per month, after controlling for time, demographic, clinical, and work history variables. In addition, higher cumulative amounts of vocational services were associated with better employment outcomes, whereas higher cumulative amounts of psychiatric services were associated with poorer outcomes.

Blankertz, L.E., Blyler, C.R., Burke-Miller, J., Cook, J.A., Dudek, K., Gold, P.B., Goldberg, R.W., Grey, D.D., Leff, H.S., McFarlane, W.R., Mueser, K.T.,

Razzano, L.A., Shafer, M.S., & Toprac, M.G. (2005). **Results of a multisite randomized trial of supported employment interventions for individuals with severe mental illness.** *Archives of General Psychiatry*, 62(5), 505-512.

NARIC Accession Number: J49135

ABSTRACT: Study tested the effectiveness of supported employment programs combining clinical and vocational rehabilitation services to establish competitive employment. Patients with severe mental illness from multiple study sites were randomly assigned to a supported employment intervention or to a comparison (control) condition, with follow-up for 24 months. Participants were interviewed semi-annually, paid employment was tracked weekly, and vocational and clinical services were measured monthly. Mixed-effects random regression analysis was used to predict the likelihood of competitive employment, working 40 or more hours in a given month, and monthly earnings. Results showed that individuals in the intervention group were more likely to achieve competitive employment, to work 40 or more hours in a given month, and to have significantly higher monthly earnings than those in the control group. Furthermore, the advantage of the intervention group participants increased over time relative to the control group.

Bond, G.R., Corbiere, M., Goldner, E.M., & Ptasiński, T. (2005). **The fidelity of supported employment implementation in Canada and the United States.** *Psychiatric Services (formerly Hospital and Community Psychiatry)*, 56(11), 1444-1447.

NARIC Accession Number: J49965

ABSTRACT: Article examines the degree to which supported employment programs in British Columbia, Canada are similar to those in the United States. Individual placement and support is the standard supported employment model for people with severe mental illness. Program implementation data collected in 2003 for 10 supported employment programs from vocational agencies in British Columbia were compared with data from 106 supported employment programs and 39 non-supported employment programs in the United States. Results showed that the Canadian programs that followed the individual placement and support model had the highest fidelity.

Born, D.L., Galka, S.W., Perkins, D.V., & Raines, J.A. (2005). **Program evaluation from an ecological perspective: Supported employment services for persons with serious psychiatric disabilities.**

Psychiatric Rehabilitation Journal, 28(3), 217-224.

NARIC Accession Number: J48892

ABSTRACT: Article describes an ongoing 11-year evaluation of supported employment services for people with psychiatric disabilities using an ecological perspective. The evaluation emphasizes multiple kinds of products and the careful development and maintenance of stakeholder relationships. Results indicate that the services are effective and efficient, that the employers and employees are satisfied, and that stable employment may reduce the overall costs of mental health care.

Born, D.L., Griss, M.E., Johannesen, J.K., Katuin, C., & McGrew, J.H. (2005). **Performance-based funding of supported employment: A multi-site controlled trial.** *Journal of Vocational Rehabilitation*, 23(2), 81-99.

NARIC Accession Number: J49779

Project Number: H133G030106

ABSTRACT: The outcomes of consumers served using results-based funding (RBF) for supported employment services were compared with outcomes under a traditional fee-for-service model for people with severe mental illness in Indiana. Under the RBF system, providers received payment only when clients successfully attained each of five employment milestones. Results indicated better vocational outcomes for clients funded using RBF. Clients served under RBF were more likely to achieve all five milestones, and were significantly more likely to have a person-centered plan and to retain employment for nine months.

Cook, J.A., & Razzano, L.A. (2005). **Evidence-based practices in supported employment.** In C. E. Stout, R. A. Hayes (Eds.), *The evidence-based practice: Methods, models, and tools for mental health professionals*. Hoboken, New Jersey: John Wiley and Sons, Inc., 10-30.

NARIC Accession Number: J49133

ABSTRACT: Article reviews research that investigates supported employment as an evidence-based best practice. Research-based principles related to vocational rehabilitation (VR) services are identified,

including: (1) competitive or supported employment services, (2) situational assessment, (3) rapid placement, (4) ongoing vocational supports, (5) clients' individual preferences, and (6) economic disincentives. Methods for assessing efficacy and effectiveness of supported employment, provider competencies that support best practices in VR, and other tools for evaluating VR services are discussed. Success stories and a case example illustrate supported employment programs that represent best practices.

Drake, R.E., Lynde, D.W., & Merrens, M.R., (Eds.). (2005). **Evidence-Based Mental Health Practice: A Textbook.**

NARIC Accession Number: R08653

ABSTRACT: Book provides an overview of the background, principles, and the challenges of implementing evidence-based practices (EBPs) for people with severe mental illness. Chapters include case examples to illustrate six EBPs: (1) assertive community treatment, (2) integrated dual-disorder treatment, (3) supported employment, (4) illness management and recovery, (5) medication management, and (6) family psychoeducation.

Mullen, M.G., Murphy, A.A., & Spagnolo, A.B. (2005). **Enhancing individual placement and support: Promoting job tenure by integrating natural supports and supported education.** *American Journal of Psychiatric Rehabilitation*, 8(1), 37-61.

NARIC Accession Number: J56516

Project Number: H133B031109

ABSTRACT: This article discusses the major limitation of the individual placement and support (IPS) model, short job tenure, and outlines service enhancements to address this limitation for people with psychiatric disabilities. IPS was developed as a model of supported employment to provide an alternative to traditional vocational services by emphasizing rapid placement into employment with minimal concern for the development of work readiness. Two service enhancements are proposed to increase job tenure in the IPS model. The first enhancement is the development of natural support networks to normalize individuals' roles in the workforce and decrease their reliance on paid support. The second enhancement is the establishment of a career ladder by increasing access to and success in postsecondary education and training institutions through supported education.

2004

Banks, S., Henry, A.D., Lucca, A.M., Page, S., & Simon, L. (2004). **Evaluation of an individual placement and support model (IPS) program.** *Psychiatric Rehabilitation Journal*, 27(3), 251-257. MARIC Accession Number: J47585

ABSTRACT: Describes study conducted to determine if real world individual placement and support (IPS) programs can achieve outcomes comparable to programs evaluated in randomized clinical trials. Article presents findings from an evaluation of an IPS-model supported employment program in Massachusetts. Evaluators obtained demographic, functioning, and employment data from three sources: program records, clinical records, and the Massachusetts Department of Mental Health Client Tracking system. Results indicated that the supported employment program maintained high IPS fidelity and achieved employment outcomes comparable or superior to other model programs described in previous research literature.

Becker, D.R., Bond, G.R., Bush, P.W., Drake, R.E., & Latimer, E.A. (2004). **The cost of high-fidelity supported employment programs for people with severe mental illness.** *Psychiatric Services (formerly Hospital and Community Psychiatry)*, 55(4), 401-406. NARIC Accession Number: J47522

ABSTRACT: Supported employment programs known to follow the principles of evidence-based supported employment provided detailed information on program costs, use, and staffing. Program fidelity was assessed using the Supported Employment Fidelity Scale. Cost and utilization data were analyzed in a comparable manner across sites to yield direct and total costs per client served, per full-year-equivalent client, and per employment specialist. Usable data were obtained from 7 programs in 7 states: Indiana, Kansas, Massachusetts, New Hampshire, Oregon, Rhode Island, and Vermont. All programs received high fidelity ratings, ranging from 70 to the maximum value of 75. Annual direct costs per client served varied from \$860 in New Hampshire to \$2,723 in Oregon, and direct costs per full-year-equivalent client varied from \$1,423 in Massachusetts to \$6,793 in Indiana. Direct costs per employment specialist did not show as much variation, ranging from \$37,339 in Rhode Island to \$49,603 in Massachusetts, with a

mean of \$44,082. Differences in cost per client arose in part from differences in rules for determining who is or is not considered to on a program's caseload. By assuming a typical caseload of about 18 clients, it was estimated that the cost per full-year-equivalent client averaged \$2,449 per year, ranging from \$2,074 to \$2,756.

Becker, D.R., Bond, G.R., Clark, R.E., Drake, R.E., Essock, S.M., Haines, M., McHugo, G.J., Mueser, K.T., Swain, K., & Wolfe, R. (2004). **The Hartford study of supported employment for persons with severe mental illness.** *Journal of Consulting and Clinical Psychology*, 72(3), 479-490. NARIC Accession Number: J56746

ABSTRACT: Study compared three approaches to vocational rehabilitation for people with severe mental illness (SMI). Two hundred four unemployed clients with SMI were randomly assigned to the individual placement and support (IPS) model of supported employment, a psychosocial rehabilitation (PSR) program, or standard services. Comprehensive employment data were collected for two years. Non-vocational outcomes, including psychiatric symptoms, overall functioning, social functioning and social networks, quality of life, and self-esteem, were assessed with interviews conducted at baseline and every six months for two years. Results indicated that clients in IPS had significantly better employment outcomes than clients in PSR and standard services. There were few differences in non-vocational outcomes between programs.

Bell, M.D., Greig, T., & Zito, W. (2004). **A hybrid transitional and supported employment program.** *Psychiatric Services*, 55(3), 240-242. NARIC Accession Number: J47396

ABSTRACT: Article describes a hybrid program that combines features of transitional and supported employment. Program participants are placed in real jobs in the community while they and their employers are given a trial work period to determine the feasibility of the individual's holding a position in which customary standards must be met. During the trial period, the vocational rehabilitation program managers provide subsidies that reduce the salary expenses for the employer. The use of subsidies makes it possible to place clients into jobs quickly; however, the transition period may become prolonged, with the

client remaining dependent on transitional funding. Preliminary data on the program's effectiveness are discussed.

Bond, G.R. (2004). **Supported employment: Evidence for an evidence-based practice.** *Psychiatric Rehabilitation Journal*, 27(4), 345-359. NARIC Accession Number: J47594

ABSTRACT: Article reviews research on supported employment for people with serious mental illness. Findings indicate that between 40 and 60 percent of consumers enrolled in supported employment obtain competitive employment while less than 20 percent of similar consumers do so when not enrolled in supported employment. The strongest evidence focuses on competitive employment, rapid job search, and integration of mental health and vocational services.

Burke, J., Cook, J., & Razzano, L. (2004). **Issues in supported employment for people with psychiatric disabilities.** *CRP Brief*, 3(1), 1-4. NARIC Accession Number: O15705

Full-text is available at <http://search.naric.com/research/rehab/download.cfm?ID=98297>

ABSTRACT: Article summarizes research identifying the principles of vocational rehabilitation that produce beneficial employment outcomes for people with psychiatric disabilities. The key principles, which characterize elements of supported employment include: (1) integration of vocational services with mental health services, (2) competitive job placements in socially-integrated settings, (3) consumer choice and career preferences, (4) rapid job placement, (5) ongoing vocational support services, and (6) peer-facilitated or peer-run support services.

Dorio, J. (2004). **Tying it all together—the PASS to success: A comprehensive look at promoting job retention for workers with psychiatric disabilities in a supported employment program.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal)*, 28(1), 32-39. NARIC Accession Number: J48340

ABSTRACT: Article presents a model of vocational rehabilitation that will help promote success in job placement and job retention for people with psychiatric disabilities. The PASS model encompasses four components: placement, attitude, support, and skills.

The model was developed based on previous research conducted by the author at the Chinook Clubhouse, a comprehensive supported employment program.

McGurk, S.R., Mueser, K.T. (2004). **Cognitive functioning, symptoms, and work in supported employment: A review and heuristic model.** *Schizophrenia Research*, 70(2), 147-173. NARIC Accession Number: J56745

ABSTRACT: Study reviewed research on the relationship between cognitive functioning, symptoms, and competitive employment in clients with serious mental illness. The review indicated that cognitive functioning and symptoms were strongly related to work in studies of general psychiatric samples. In studies of clients participating in vocational rehabilitation (VR) programs, associations between cognitive functioning, symptoms, and work were also present, but were attenuated, suggesting that VR (supported employment) compensates for the effects of some cognitive impairments and symptoms on work. Based on this review, a heuristic model of supported employment was developed that proposes specific interactions between cognitive factors, symptoms, vocational services, and employment outcomes.

Tauber, R., & Wallace, C.J. (2004). **Supplementing supported employment with workplace skills training.** *Psychiatric Services*, 55(5), 513-515. NARIC Accession Number: J47746

ABSTRACT: Article describes the evaluation of the workplace fundamental skills module, an adjunctive component of supported employment aimed at improving the job tenure of individuals with mental illness. The study compared the outcomes achieved by workers who were exposed to both supported employment and the workplace fundamental skill module with the outcomes of workers who engaged in supported employment service only. No significant differences were found between groups with respect to total earnings or number of hours worked. However, the supported-employment-only group held significantly more jobs than the other group, indicating greater job retention among participants who received supported employment services supplemented by the workplace skills training.



*Documents from the Center
for International
Rehabilitation Research
Information and Exchange
(CIRRIE-3) search at [cirrie.
buffalo.edu](http://cirrie.buffalo.edu) are listed below:*

2010

Corbiere, M., Lanctot, N., Latimer, E., & Lecomte, T., et al. (2010). **A pan-Canadian evaluation of supported employment programs dedicated to people with severe mental disorders.** *Community Mental Health Journal*, 46(1), 44-55.

ABSTRACT: Supported employment (SE) is an evidence-based practice that helps people with severe mental disorders obtain competitive employment. The implementation of SE programs in different social contexts has led to adaptations of the SE components, therefore impacting the fidelity/quality of these services. The objective of this study was to assess the implementation of SE services in three Canadian provinces by assessing the fidelity and describing components of SE services using the Quality of Supported Employment Implementation Scale. About 23 SE programs participated in this study. Cluster analyses revealed six profiles of SE programs that varied from high to low level of fidelity with a stronger focus on a particular component, and reflected the reality of service delivery settings. Future investigations are warranted to evaluate relationships between the levels of implementation of SE components and work outcomes while considering individual characteristics of people registered in SE programs.

Fung, K.M., Leung, A.Y., Li, S.M., & Tsang, H.W., et al. (2010). **Three year follow-up study of an integrated supported employment for individuals with severe mental illness.** *Australian and New Zealand Journal of Psychiatry*, 44(1), 49-58. ABSTRACT: OBJECTIVES: The aim of the present study was to examine and compare the long-term effectiveness of the Integrated Supported Employment (ISE) program, which consists of individual placement and support (IPS) and work-

related social skills training, with the IPS program on the vocational and non-vocational outcomes among individuals with severe mental illness (SMI) over a period of three years. METHOD: One hundred and eighty-nine participants with SMI were recruited from two non-government organizations and three day hospitals in Hong Kong and randomly assigned into the ISE (n = 58), IPS (n = 65) and traditional vocational rehabilitation (TVR) (n = 66) groups. Vocational and non-vocational outcomes of the ISE and IPS participants were collected by a blind and independent assessor at 7, 11, 15, 21, 27, 33 and 39 months after their admission, whereas the TVR groups were assessed only up to the 15th month follow up. RESULTS: After 39 months of service provision, ISE participants obtained higher employment rate (82.8 vs 61.5 percent) and longer job tenure (46.94 weeks vs 36.17 weeks) than the IPS participants. Only 6.1 percent of TVR participants were able to obtain employment before the 15th month follow up. Fewer interpersonal conflicts at the workplace were reported for the ISE participants. Advantages of the ISE participants over IPS participants on non-vocational outcomes were not conclusive. CONCLUSION: The long-term effectiveness of the ISE program in enhancing employment rates and job tenures among individuals with SMI was demonstrated by this randomized controlled trial.

2009

Boaden, R., & Cocks, E. (2009). **Evaluation of an employment program for people with mental illness using the Supported Employment Fidelity Scale.** *Australian Occupational Therapy Journal*, 56(5), 300-6.

ABSTRACT: BACKGROUND: The Individual Placement and Support (IPS) model aims to achieve open employment for people with mental illness. The Supported Employment Fidelity Scale (SEFS) is a 15-item instrument that evaluates the extent to which a service follows the IPS principles of best practice. This paper describes the IPS model and an evaluation of a specialist employment program for people with mental illness using the SEFS.

METHODS: The SEFS enabled a quantitative assessment of service provision against the criteria of evidence-based practice principles. Data were collected from multiple sources. In addition, a literature review was conducted, and personnel engaged in implementation of the IPS model at other Australian employment programs were consulted. **RESULTS:** The program achieved a score of 59 of a possible 75 on the SEFS, which is described as fair supported employment. **DISCUSSION:** Analysis of the 15-scale items resulted in the identification of strengths, areas for further development, and a set of recommendations. **CONCLUSIONS:** The program was operating substantially in line with evidence-based practice principles and had considerable scope for further development. Issues arising from the evaluation, areas of applicability of the SEFS and the underlying literature, and implications for occupational therapy are highlighted.

Chan, A., Liberman, R.P., Tsang, H.W., & Wong, A. (2009). **Vocational outcomes of an integrated supported employment program for individuals with persistent and severe mental illness.** *Journal of Behavior Therapy and Experimental Psychiatry, 40*(2), 292-305.

ABSTRACT: We examined the effectiveness of an integrated supported employment (ISE) program, which augments Individual Placement & Support (IPS) with social skills training (SST) in helping individuals with SMI achieve and maintain employment. A total of 163 participants were randomly assigned to three vocational rehabilitation programs: ISE, IPS, and traditional vocational rehabilitation (TVR). After fifteen months of services, ISE participants had significantly higher employment rates (78.8 percent) and longer job tenures (23.84 weeks) when compared with IPS and TVR participants. IPS participants demonstrated better vocational outcomes than TVR participants. The findings suggested that ISE enhances the outcomes of supported employment, endorsing the value of SST in vocational rehabilitation.

De Souza, T., Lloyd, C., Rampton, N., & Waghorn, G. (2009). **The working alliance in supported employment for people with severe mental health problems including commentary by Watzke S.** *International Journal of Therapy and Rehabilitation, 16*(6), 315-23.

No abstract is available.

2008

Chiu, R., Kin Wong, K., Mak, D., & Tang, B., et al. (2008). **A randomized controlled trial of a supported employment program for persons with long-term mental illness in Hong Kong.** *Psychiatric Services, 59*(1), 84-90

ABSTRACT: OBJECTIVES: Supported employment is an evidence-based practice that has proved to be consistently more effective than conventional vocational rehabilitation in helping people with severe mental illness find and sustain competitive employment. Most research on the effectiveness of supported employment comes from the United States. This study examined the effectiveness and applicability of a supported employment program based on the individual placement and support model in a Hong Kong setting. **METHODS:** Ninety-two unemployed individuals with long-term mental illness who desired competitive employment were randomly assigned to either a supported employment program or a conventional vocational rehabilitation program and followed up for 18 months. Both vocational and nonvocational outcomes were measured. **RESULTS:** Over the 18-month study period, compared with participants in the conventional vocational rehabilitation program, those in the supported employment group were more likely to work competitively (70 versus 29 percent; odds ratio=5.63, 95 percent confidence interval=2.28-13.84), held a greater number of competitive jobs, earned more income, worked more days, and sustained longer job tenures. Repeated-measures analysis of variance found no substantive differences between participants in the two groups and no significant change from baseline over time for psychiatric symptoms and self-perceived quality of life. **CONCLUSIONS:** Consistent with previous research findings in the United States, the supported employment program was more effective than the conventional vocational rehabilitation program in helping individuals with long-term mental illness find and sustain competitive employment in a Hong Kong setting. The supported employment program based on the individual placement and support model can thus be recommended for wider use in local mental health practice.



Documents from the Education Resource Information Center (ERIC) search at www.eric.ed.gov are listed below:

2012

Danermark, B., Germundsson, P., Gustafsson, J., & Lind, M. (2012). **Disability and supported employment: Impact on employment, income, and allowances.** *International Journal of Rehabilitation Research*, 35(3), 263-269.

ERIC Number: EJ1000208

ABSTRACT: In this article, we examine supported employment and its impact on the level of employment, disposable income, and sum of allowances, targeting a group of individuals with disabilities. We have particularly focused on individuals with psychiatric disabilities. Supported employment is a vocational rehabilitation service with an empowerment approach that has competitive employment as an expressed goal. Data collected from two Swedish organizations, providing services based on supported employment, have been used. Two groups have been considered: one group focusing on individuals who have received vocational rehabilitation, according to the supported employment approach, and the other group focusing on individuals who declined supported employment (control group). The groups have been examined according to a “before-and-after the intervention” design. Outcome measures have been retrospectively analyzed. The results indicate that the individuals who received supported employment were hired faster, earned a higher disposable income, and at the same time, had lower individual allowances. The same pattern as that for the overall population emerged for individuals with psychiatric disorders. Vocational rehabilitation based on the principles of supported employment may be very effective for individuals to gain employment, a better disposable income, and a substantial cutback in allowances. The intervention should be tailored according to individual needs rather than organizational rules.

2011

Unger, K.V. (2011). *The evidence supported education: A promising practice. Evidence-based Practices Kit (knowledge informing transformation). Substance Abuse and Mental Health Services Administration.*

ERIC Number: ED540220

Available in full-text at <http://files.eric.ed.gov/fulltext/ED540220.pdf>

ABSTRACT: Supported employment is an evidence-based practice that helps people with mental illness find and keep meaningful jobs in the community. Given these outcomes the challenge for Supported Employment programs is to rethink the emphasis on immediate work for everyone and help consumers utilize appropriate education and training opportunities available in their communities so they can, over time, qualify for skilled jobs and professional careers (Baron & Salzer, 2000; Bond et al., 2001). This paper introduces all stakeholders to the research literature and other resources on Supported Education. This booklet includes the following resources: (1) Review of the research literature; (2) Selected bibliography for further reading; (3) References for the citations presented throughout the KIT; and (4) Acknowledgments of KIT developers and contributors.

2010

Beimers, D., Biegel, D.E., Boyle, P., Ronis, R.J., & Stevenson, L.D. (2010). **Predictors of competitive employment among consumers with co-occurring mental and substance use disorders.** *Research on Social Work Practice*, 20(2), 191-201. ERIC Number: EJ875287

ABSTRACT: Objectives: This study examines consumer and agency level predictors of competitive employment for consumers with co-occurring disorders. Methods: The study sample included 191 consumers from mental health agencies receiving Integrated Dual Diagnosis Treatment services, including a subgroup which was referred for Supported Employment Services. Results: Logistic regression analyses show consumers with schizoaf-

fective disorder, greater psychiatric distress, and those not referred for Supported Employment services were less likely to enter competitively employment. Lack of previous employment and consumers' perceived disability negatively affected employment through referral status. Conclusions: Implications for mental health practice, service delivery, and future research are discussed.

Glover, J., Jonas, P., Kimberley, H., & Waterhouse, P. (2010). *What would it take? Employer perspectives on employing people with a disability. A national vocational education and training research and evaluation program report. National Centre for Vocational Education Research (NCVER).*

ERIC Number: ED508544

Available in full-text at <http://files.eric.ed.gov/fulltext/ED508544.pdf>

ABSTRACT: One focus of the Australian Government's social inclusion agenda is to help people with a disability into work. The government's new National Mental Health and Disability Employment Strategy acknowledges that a considerable barrier to employment for people with a disability is the lack of information for employers. It is therefore timely to examine employer views on employing people with a disability. Based on a series of focus groups with employers from small-to-medium-sized enterprises, this report describes the attitudes of employers towards hiring a person with a disability. It also sets out some strategies that would assist businesses to take on employees with a disability. The research confirmed that, even when employers are open to the idea of employing a person with a disability, they are often not confident that they have the knowledge, understanding and capability to do so. Employers are not looking for formal training in "disability employment." They are looking for assistance in building their capacity to support the productive employment of people with a disability. The vocational education and training (VET) system already helps employers to employ people with disabilities (by providing group training organization field officers, for example), but this report suggests a broader role could be developed. Inevitably, this would require financial support from governments.

Harris, M. (2010). **Reliability of a scale of work-related self-efficacy for people with psychiatric disabilities.** *International Journal of Rehabilitation Research*, 33(2), 183-186.

ERIC Number: EJ902247

ABSTRACT: Work-related self-efficacy at a core task level fits with the social cognitive career theory explaining the career development of people with severe mental illness. The aim of this study was to further investigate the psychometric properties of the "Work-related Self- Efficacy Scale" for use with people with psychiatric disabilities. Sixty individuals with schizophrenia or schizoaffective disorder participated in repeated telephone interviews conducted 2-5 days apart. Short-cycle test-retest reliability and internal structure were assessed. Face validity, consumer and clinician acceptability and utility were examined qualitatively. Short-cycle test-retest reliability was found to be very good at item and total score levels. The internal structure was consistent with previous investigations. Although face validity, acceptability and utility were adequate, use of face-to-face interviews is preferred over telephone interviews. The construct validity evidence supports wider use for research purposes in community mental health service, supported employment and other psychiatric rehabilitation settings.

2007

Becker, D.R., Bond, G.R., Dincin, J., Drake, R., Fraser, V.V., Haines, M., & Salyers, M.P. (2007). **A randomized controlled trial comparing two vocational models for persons with severe mental illness.** *Journal of Consulting and Clinical Psychology*, 75(6), 968-982.

ERIC Number: EJ781543

ABSTRACT: The authors compared two approaches to vocational rehabilitation for individuals with severe mental illness: the individual placement and support (IPS) model of supported employment and the diversified placement approach (DPA), which emphasizes work readiness and offers a range of vocational options, including agency-run businesses and agency-contracted placements with community employers. In all, 187 unemployed participants with

severe mental illness were randomly assigned to IPS or DPA. Over two years, IPS had significantly better competitive employment outcomes than DPA. Competitive employment rates over the 2-year follow-up were 75.0 percent for IPS and 33.7 percent for DPA. However, IPS and DPA did not differ on paid employment outcomes. The authors conclude that IPS is more effective than DPA in achieving competitive employment, but not paid employment.

Biegel, D.E., Kola, L.A., & Swanson, S. (2007). **The Ohio Supported Employment Coordinating Center of Excellence.** *Research on Social Work Practice, 17*(4), 504-512.

ERIC Number: EJ803444

ABSTRACT: The Ohio Supported Employment Coordinating Center of Excellence is a joint project of the Mandel School of Applied Social Sciences and the Department of Psychiatry at Case Western Reserve University. The center is focused on helping to implement and evaluate evidence-based employment services provided to individuals with a severe mental illness. The staffing and funding of the center is described, as are the current research projects, future directions, and the implementation lessons learned. This article is the latest in a series of reports of social work research centers published in "Research on Social Work Practice."



Documents from the Cochrane Database of Systematic Reviews search at www.thecochranelibrary.org are listed below:

2013

Amano, N., Bond, G.R., Furukawa, T.A., Honyashiki, M., Huxley, P., Kingdon, D., Kinoshita, K., Kinoshita, Y., Marshall, M., & Omori, I.M. (2013). **Supported employment for adults with severe mental illness.** *Cochrane Database of Systematic Reviews 2013, Issue 9.* Art. No.: CD008297. DOI: 10.1002/14651858.CD008297.pub2.
ID: CD008297

Full-text of the review is available at <http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD008297.pub2/pdf>

ABSTRACT: Background: People who suffer from severe mental disorder experience high rates of unemployment. Supported employment is an approach to vocational rehabilitation that involves trying to place clients in competitive jobs without any extended preparation. The Individual placement and support (IPS) model is a carefully specified form of supported employment. Objectives: 1. To review the effectiveness of supported employment compared with other approaches to vocational rehabilitation or treatment as usual. 2. Secondary objectives were to establish how far: (a) fidelity to the IPS model affects the effectiveness of supported employment, (b) the effectiveness of supported employment can be augmented by the addition of other interventions. Search methods: We searched the Cochrane Schizophrenia Group Trials Register (February 2010), which is compiled by systematic searches of major databases, hand searches and conference proceedings. Selection criteria: All relevant randomized clinical trials focusing on people with severe mental illness, of working age (normally 16 to 70 years), where supported employment was compared with other vocational approaches or treatment as usual. Outcomes such as days in employment, job stability, global state, social functioning, mental state, quality of life, satisfaction and costs were sought. Data collection and analysis: Two review authors (YK and KK) independently extracted data. For binary outcomes, we calculated risk ratio (RR) and its 95 percent confidence interval (CI), on an intention-to-treat basis. For continuous data, we estimated mean difference (MD) between groups and its 95 percent (CI). We employed a fixed-effect model for analyses. A random-effects model was also employed where heterogeneity was present. Main results: A total of 14 randomized controlled trials were included in this review (total 2265 people). In terms of our primary outcome (employment: days in competitive employment, over one year follow-up), supported employment seems to significantly increase levels of any employment obtained during

the course of studies (7 RCTs, n = 951, RR 3.24 CI 2.17 to 4.82, very low quality of evidence). Supported employment also seems to increase length of competitive employment when compared with other vocational approaches (1 RCT, n = 204, MD 70.63 CI 43.22 to 94.04, very low quality evidence). Supported employment also showed some advantages in other secondary outcomes. It appears to increase length (in days) of any form of paid employment (2 RCTs, n = 510, MD 84.94 CI 51.99 to 117.89, very low quality evidence) and job tenure (weeks) for competitive employment (1 RCT, n = 204, MD 9.86 CI 5.36 to 14.36, very low quality evidence) and any paid employment (3 RCTs, n = 735, MD 3.86 CI -2.94 to 22.17, very low quality evidence). Furthermore, one study indicated a decreased time to first competitive employment in the long term for people in supported employment (1 RCT, n = 204, MD -161.60 CI -225.73 to -97.47, very low quality evidence). A large amount of data were considerably skewed, and therefore not included in meta-analysis, which makes any meaningful interpretation of the vast amount of data very difficult. Authors' conclusions: The limited available evidence suggests that supported employment is effective in improving a number of vocational outcomes relevant to people with severe mental illness, though there appears to exist some overall risk of bias in terms of the quality of individual studies. All studies should report a standard set of vocational and non-vocational outcomes that are relevant to the consumers and policy-makers. Studies with longer follow-up should be conducted to answer or address the critical question about durability of effects.

2011

Heslin, M., Howard, L., Huxley, P., Jarrett, M., Leese, M., McCrone, P., Rice, C., Spokes, T., & Thornicroft, G. (2011). **Randomized controlled trial of supported employment in England: 2 year follow-up of the Supported Work and Needs (SWAN) study.** *World Psychiatry, 10*(2), 132-7.

ID: CN-00893836

Full-text is available at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3105475/pdf/wpa020132.pdf>

ABSTRACT: Studies from North America have concluded that supported employment using the individual placement and support (IPS) model is effective in helping individuals with severe and persistent mental illness gain competitive employment. The aim of this study was to investigate the effectiveness and cost-effectiveness of IPS in England in patients followed up for two years. Patients with severe mental illness were randomized to IPS or local vocational services (treatment as usual). Service use and costs were measured. Two hundred-nineteen participants were randomized, and 86 percent re-assessed two years later. In the multi-variate analysis, relatively low rates of competitive employment were found in both the intervention group and the treatment as usual group, although significantly more patients obtained competitive employment in the treatment arm (22 percent vs. 11 percent, p=0.041). There were no significant differences in costs. The employment rate among participants receiving IPS was lower than in previously published reports, and the number needed to treat to obtain the benefit of IPS was relatively high. This may reflect difficulties in the implementation of IPS where it is not structurally integrated within mental health teams, as well as economic disincentives which lead to lower levels of motivation for patients and mental health professionals.

2010

Cheung, W.M., Fung, K.M., Leung, A.Y., Li, S.M., & Tsang, H.W. (2010). **Three year follow-up study of an integrated supported employment for individuals with severe mental illness.** *Australian and New Zealand Journal of Psychiatry, 44*(1), 49-58.

ID: CN-00729626

ABSTRACT: OBJECTIVES: The aim of the present study was to examine and compare the long-term effectiveness of the Integrated Supported Employment (ISE) program, which consists of individual placement and support (IPS) and work-related social skills training, with the IPS program on the vocational and non-vocational outcomes among individuals with severe mental illness (SMI) over a period of 3 years. **METHOD:** One hundred

and eighty-nine participants with SMI were recruited from two non-government organizations and three day hospitals in Hong Kong and randomly assigned into the ISE (n = 58), IPS (n = 65) and traditional vocational rehabilitation (TVR) (n = 66) groups. Vocational and non-vocational outcomes of the ISE and IPS participants were collected by a blind and independent assessor at 7, 11, 15, 21, 27, 33 and 39 months after their admission, whereas the TVR groups were assessed only up to the 15th month follow up. **RESULTS:** After 39 months of service provision, ISE participants obtained higher employment rate (82.8 percent vs 61.5 percent) and longer job tenure (46.94 weeks vs 36.17 weeks) than the IPS participants. Only 6.1 percent of TVR participants were able to obtain employment before the 15th month follow up. Fewer interpersonal conflicts at the workplace were reported for the ISE participants. Advantages of the ISE participants over IPS participants on non-vocational outcomes were not conclusive. **CONCLUSION:** The long-term effectiveness of the ISE program in enhancing employment rates and job tenures among individuals with SMI was demonstrated by this randomized controlled trial.

Heslin, M., Howard, L.M., Huxley, P., Jarrett, M., Leese, M., McCrone, P., Rice, C., Spokes, T., & Thornicroft, G. (2010). **Supported employment: Randomized controlled trial.** *British Journal of Psychiatry*, 196(5), 404-11.

ID: CN-00748659

Full-text is available at <http://bjp.rcpsych.org/content/196/5/404.full.pdf>

ABSTRACT: **BACKGROUND:** There is evidence from North American trials that supported employment using the individual placement and support (IPS) model is effective in helping individuals with severe mental illness gain competitive employment. There have been few trials in other parts of the world. **AIMS:** To investigate the effectiveness and cost-effectiveness of IPS in the UK. **METHOD:** Individuals with severe mental illness in South London were randomized to IPS or local traditional vocational services (treatment as usual) (ISRCTN96677673). **RESULTS:** Two hundred

and nineteen participants were randomized, and 90 percent assessed 1 year later. There were no significant differences between the treatment as usual and intervention groups in obtaining competitive employment (13 percent in the intervention group and 7 percent in controls; risk ratio 1.35, 95 percent CI 0.95-1.93, P=0.15), nor in secondary outcomes. **CONCLUSIONS:** There was no evidence that IPS was of significant benefit in achieving competitive employment for individuals in South London at 1-year follow-up, which may reflect suboptimal implementation. Implementation of IPS can be challenging in the UK context where IPS is not structurally integrated with mental health services, and economic disincentives may lead to lower levels of motivation in individuals with severe mental illness and psychiatric professionals.



Documents from the National Library of Medicine PubMed search at www.pubmed.com are listed below:

2014

Areberg, C., Bejerholm, U., Hofgren, C., Rinaldi, M., & Sandlund, M. (2014). **Individual placement and support in Sweden: A randomized controlled trial.** *Nordic Journal of Psychiatry*, 1, 1-10. [Epub ahead of print].

PMID: 24983382

ABSTRACT: **Background:** Currently there is no evidence on the effectiveness of individual placement and support (IPS) in Sweden. **Aims:** To determine the effectiveness of IPS on vocational outcomes among people with severe mental illness (SMI) in a Swedish context. A secondary aim was to evaluate a community integration effect. **Methods:** A randomized controlled trial with a parallel design was used. Mental health outpatients with SMI were randomized to IPS or traditional vocational rehabilitation (TVR) services. The allocation status was assessor-blinded. The primary outcome was competitive employment. All vocational outcomes were

collected continuously, and socio-demographic and clinical variables at baseline, 6 and 18 months. The trial is registered with ClinicalTrials.gov: NCT00960024. Results: One hundred and twenty participants were randomized. Eighty seven percent were assessed after 6 months, and 73 percent after 18 months. IPS was more effective than TVR in terms of gaining employment at 18-month follow-up (46 percent vs. 11 percent; difference 36 percent, 95 percent CI 18-54), along with the amount of working hours and weeks, longer job tenure periods and income. Cox regression analysis showed that IPS participants gained employment five times quicker than those in TVR. Ninety percent of the IPS participants became involved in work, internships or education, i.e. activities integrated in mainstream community settings, while 24 percent in the TVR group achieved this. Conclusions: IPS is effective in a Swedish context in terms of gaining employment and becoming integrated within the local community. The welfare system presented obstacles for gaining competitive employment directly and it was indicated that internships delayed time to first competitive employment.

Becker, D.R., Bond, G.R., Carpenter-Song, E.A., Drake, R.E., Lord, S.E., McGurk, S.R., Nicholson, J., Swanson, S.J., & Tauscher, J.S. (2014). **The potential of technology for enhancing individual placement and support supported employment.** *Psychiatric Rehabilitation Journal*, 37(2), 99-106. PMID: 24912058

ABSTRACT: TOPIC: The potential of technology to enhance delivery and outcomes of Individual Placement and Support (IPS) supported employment. PURPOSE: IPS supported employment has demonstrated robust success for improving rates of competitive employment among individuals with psychiatric disabilities. Still, a majority of those with serious mental illnesses are not employed (Bond, Drake, & Becker, 2012). The need to promote awareness of IPS and expand services is urgent. In this study, we describe ways that technologies may enhance delivery of IPS supported employment across the care continuum and stakeholder groups. Directions for research are

highlighted. Sources Used: published literature, clinical observations, IPS learning collaborative. CONCLUSIONS AND IMPLICATIONS FOR PRACTICE: Technology has the potential to enhance direct service as well as workflow in the IPS supported employment process, which may lead to improved fidelity and client outcomes. Mobile and cloud technologies open opportunities for collaboration, self-directed care, and ongoing support to help clients obtain and maintain meaningful employment. Research is needed to evaluate efficacy of technology-based approaches for promoting client employment outcomes, to identify provider and organization barriers to using technology for IPS delivery, and to determine effective strategies for implementing technology with IPS in different settings and with diverse client audiences.

Bond, G.R., Campbell, K., & Drake, R.E. (2014). **Effectiveness of individual placement and support supported employment for young adults.** *Early Intervention in Psychiatry*, Aug. 2014. [Epub ahead of print].

PMID: 25138195

ABSTRACT: AIM: The individual placement and support (IPS) model of supported employment was first developed in community mental health centers for adults with severe mental illness. While IPS is an established evidence-based practice in this broad population, evidence on its effectiveness focused specifically on young adults has been limited. The current study aimed to address this gap. METHODS: To investigate the effects of IPS on young adults, the authors conducted a secondary analysis on a pooled sample of 109 unemployed young adults (under age 30) from four randomized controlled trials employing a common research protocol that included a standardized measurement battery and rigorous fidelity monitoring. Researchers assessed these participants over 18 months on nine competitive employment outcome measures. RESULTS: On all measures, the IPS group had significantly better employment outcomes. Overall, 40 (82 percent) of IPS participants obtained employment during follow-up compared with 25 (42 percent) of control participants, $\chi(2) = 17.9$,

$P < .001$. IPS participants averaged 25.0 weeks of employment, compared with 7.0 weeks for control participants, $t=4.50$, $P < .001$. **CONCLUSIONS:** The current analysis supports a small number of previous studies in showing that IPS is highly effective in helping young adults with severe mental illness to attain competitive employment. When young adults acquire competitive jobs and initiate a path towards normal adult roles, they may avoid the cycle of disability and psychiatric patient roles that are demeaning and demoralizing.

Bond, G.R., & Drake, R.E. (2014). **Introduction to the special issue on individual placement and support.** *Psychiatric Rehabilitation Journal*, 37(2), 76-8.

PMID: 24912057

ABSTRACT: This issue of the *Psychiatric Rehabilitation Journal* presents an update on individual placement and support (IPS), the evidence-based practice of supported employment for people with psychiatric disabilities. The papers in this special issue testify to the enormous potential of the IPS model. Clients, families, researchers, policy experts, practitioners, and administrators continue to identify creative ways to expand services to reach more people. The state of the art of IPS is expanding, changing, and ramifying broadly. IPS is appearing in middle-income countries in Latin America and in new populations, such as young adults with autism-spectrum disorders in Europe. Continued growth should follow the fundamental principles of values and science. First, we must honor basic values by listening to and learning from clients (Strickler, 2014), as well from IPS trainers, mental health and vocational rehabilitation leaders, and practitioners who face the daily realities of developing and sustaining recovery-oriented services (Swanson et al., 2014). Second, we must insist on rigorous research to ground our employment services in hard evidence.

Courtney, C.T., Meyer, R.H., Reeder, S.A., & Swanson, S.J. (2014). **Strategies for integrated employment and mental health services.** *Psychiatric Rehabilitation Journal*, 37(2), 86-9.

PMID: 24708194

ABSTRACT: OBJECTIVE: Individual placement and support (IPS) supported employment for people with mental illness is most effective when mental health and employment services are fully integrated within teams in a single agency. Despite this evidence, there are times when separate mental health and employment agencies must collaborate rather than integrate. This article examines how three state implementation teams helped separate agencies to partner on IPS supported employment. **METHOD:** The authors used qualitative interviews and direct observations to examine successful collaborations in three states. We visited IPS programs on multiple occasions, interviewed multiple stakeholders, and evaluated adherence to the principles of IPS. **RESULTS:** Leaders used four strategies to promote successful collaborations: (a) ensuring that employment specialists, and in some cases, vocational rehabilitation counselors, attended mental health treatment team meetings; (b) providing office space for employment staff at the mental health agency; (c) involving supervisors from both agencies in the implementation; and (d) using fidelity reviews to assess the quality of collaboration. **CONCLUSIONS AND IMPLICATIONS FOR PRACTICE:** Practitioners from separate agencies can coordinate services effectively, but successful coordination requires leadership at the state and local levels.

Dias, S., Gladman, B., Harris, M., Saha, S., & Waghorn, G. (2014). **A multi-site randomized controlled trial of evidence-based supported employment for adults with severe and persistent mental illness.** *Australian Occupational Therapy Journal*, Oct 2014. [Epub ahead of print].

PMID: 25284162

ABSTRACT: BACKGROUND/AIM: The individual placement and support (IPS) approach is an evidence-based form of supported employment for people with severe and persistent mental illness. This approach is not yet widely available in Australia even though there is mounting evidence of its generalizability outside the USA. One previous Australian randomized controlled trial found that IPS is effective for young people with first episode

psychosis. The aim of the current trial was to assess the effectiveness of evidence-based supported employment when implemented for Australian adult consumers of public mental health services by utilizing existing service systems. **METHODS:** A four-site randomized control trial design ($n = 208$) was conducted in Brisbane (two sites), Townsville and Cairns. The intervention consisted of an IPS supported employment service hosted by a community mental health team. The control condition was delivered at each site by mental health teams referring consumers to other disability employment services in the local area. **RESULTS:** At 12 months, those in the IPS condition had 2.4 times greater odds of commencing employment than those in the control condition (42.5 percent vs. 23.5 percent). The conditions did not differ on secondary employment outcomes including job duration, hours worked, or job diversity. Attrition was higher than expected in both conditions with 28.4 percent completing the baseline interview but taking no further part in the study. **CONCLUSION:** The results support previous international findings that IPS-supported employment is more effective than non-integrated supported employment. IPS can be successfully implemented this way in Australia, but with a loss of effect strength compared to previous USA trials.

Hashemi, L., Henry, A.D., & Zhang, J. (2014). **Evaluation of a statewide implementation of supported employment in Massachusetts.** *Psychiatric Rehabilitation Journal*, Sept. 2014 [Epub ahead of print].

PMID: 25243344

ABSTRACT: Objective: Randomized controlled trials (RCT) have shown supported employment (SE) to be an evidence-based practice (EBP) for people with psychiatric disabilities. Whether SE implemented under “real-world” conditions achieves outcomes comparable to RCTs is an important question for the psychiatric rehabilitation field. We examined employment outcomes achieved by SE programs in Massachusetts, and in particular examined whether fidelity to EBP standards was associated with outcomes. Method: We examined

outcomes for 3,474 clients served by 21 programs between 1997 and 2006, using multiple sources of data, including a client tracking database maintained by the SE programs as well as program site visits to assess fidelity to EBP standards. Using Generalized Estimating Equations, we modeled associations of client factors (demographics, diagnosis), program fidelity and other program factors to: (a) obtaining a job within one year of program enrollment; and among those obtaining jobs, (b) working 20 hours/week or more; and (c) earning \$9/hr or more. Results: There were 51 percent of clients who obtained a job within 1 year of enrollment. Clients served by high fidelity programs were more likely to obtain jobs (OR = 1.45) and to work 20 hr/week or more (OR = 1.52); fidelity was unrelated to wages. Conclusions and Implications for Practice: This study contributes to the evidence that real-world programs can implement SE with fidelity and achieve outcomes on par with those found in RCTs, and that fidelity makes a difference in the outcomes programs achieve. High fidelity programs may be most effective in helping clients acquire jobs and maximize the hours they work.

McGurk, S.R., & Mueser, K.T. (2014). **Supported employment for persons with serious mental illness: Current status and future directions.** *L'Encéphale*, 40, Suppl 2, S45-56.

PMID: 24929974

ABSTRACT: The individual placement and supported (IPS) model of supported employment is the most empirically validated model of vocational rehabilitation for persons with schizophrenia or another serious mental illness. Over 18 randomized controlled trials have been conducted throughout the world demonstrating the effectiveness of supported employment at improving competitive work compared to other vocational programs: IPS supported employment is defined by the following principles: 1) inclusion of all clients who want to work; 2) integration of vocational and clinical services; 3) focus on competitive employment; 4) rapid job search and no required prevocational skills training; 5) job development by the employment specialist; 6) attention to client preferences

about desired work and disclosure of mental illness to prospective employers; 7) benefits counseling; and 8) follow-along supports after a job is obtained. Supported employment has been successfully implemented in a wide range of cultural and clinical populations, although challenges to implementation are also encountered. Common challenges are related to problems such as the failure to access technical assistance, system issues, negative beliefs and attitudes of providers, funding restrictions, and poor leadership. These challenges can be overcome by tapping expertise in IPS supported employment, including standardized and tested models of training and consultation. Efforts are underway to increase the efficiency of training methods for supported employment and the overall program, and to improve its effectiveness for those clients who do not benefit. Progress in IPS supported employment offers people with a serious mental illness realistic hope for achieving their work goals, and taking greater control over their lives.

2013

Ernsång, B., Hansson, L., Markström, U., Nygren, U., Sandlund, M., & Svensson, B. (2013). **Predictors of vocational outcomes using individual placement and support for people with mental illness.** *Work*, 45(1), 31-9.

PMID: 23531564

ABSTRACT: **OBJECTIVE:** People with disabilities find it harder to enter the labor market than people without disabilities and those with a mental illness are, in relation to people with other disabilities, employed at an essentially lower extent. Many are effectively helped by the vocational rehabilitation model individual placement and support (IPS), but there are still many individuals left in undesired unemployment. This study investigates potential predictors of the vocational outcomes of a one-year follow up of IPS in the north of Sweden. **PARTICIPANTS:** The participants were 65 men and women, mostly younger than 30 years of age diagnosed with a mental illness (predominantly with a diagnosis of anxiety and/or depression). **METHODS:** Baseline data related to

socio-demographic and clinical characteristics of the client, the client's own perceptions of everyday living and participation, self-esteem and quality of life, as well as the quantity of employment support, were investigated using analyses of logistic regression. **RESULTS:** Of three identified potential predictors, only psychiatric symptoms remained significant in the multivariate logistic regression analyses. A lower level of symptoms increased the odds with 5.5 for gaining employment during one year. **CONCLUSIONS:** Careful investigation of how psychiatric symptoms influence clients' occupational performance is of importance. By understanding essential aspects of the relationships between the clients' individual characteristics, the rehabilitation context and the vocational outcomes, more appropriate and effective interventions may be offered to the individual client.

2012

Castle, D.J., Contreras, N., Crosse, C., Fossey, E., Harvey, C., Morgan, D., & Rossell, S.L. (2012). **Enhancing work-focused supports for people with severe mental illnesses in Australia.** *Rehabilitation Research & Practice*, Epub 2012 Jul 1. PMID: 22966462

Full-text is available at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3395169/pdf/RERP2012-863203.pdf>

ABSTRACT: Persons with severe mental illness (SMI) have reduced workforce participation, which leads to significant economic and social disadvantage. This theoretical review introduces the strategies that have been implemented to address this issue. These include Individual Placement and Support (IPS) services, the most widely researched form of supported employment, to which cognitive remediation has more recently been recognized in the USA, as an intervention to improve employment outcomes by addressing the cognitive impairments often experienced by people with SMI. The authors review the international literature and discuss specifically the Australian context. They suggest that Australia is in a prime position to engage clients in such a dual intervention, having had recent success

with increasing access to supported employment programs and workforce reentry, through implementation of the Health Optimization Program for Employment (HOPE). Such programs assist with gaining and maintaining employment. However, they do not address the cognitive issues that often prevent persons with SMI from effectively participating in work. Thus, optimizing current interventions, with work-focused cognitive skills development is critical to enhancing employment rates that remain low for persons with SMI.

2011

Corbière, M., Goering, P., Goldner, E.M., Houle, N., Kirsh, B., Lanctôt, N., Lecomte, T., Menear, M., & Reinhartz, D. (2011). **Organizational analysis of Canadian supported employment programs for people with psychiatric disabilities.** *Social Science & Medicine*, 72(7),1028-35; discussion 1036-8.

PMID: 21414706

ABSTRACT: Supported employment (SE) is widely considered to be the most effective intervention for helping people with psychiatric disabilities integrate into the competitive workforce. While fidelity to principles and standards of evidence-based SE, i.e., the Individual Placement and Support model, is positively associated with vocational outcomes, studies have revealed significant heterogeneity in SE programs implemented in Canada. This qualitative study thus aimed to shed light on organizational and contextual factors influencing SE implementation in three Canadian provinces (British Columbia, Ontario and Quebec). The study adopted several key concepts from the field of organizational studies (e.g., coalitions, archetypes, isomorphism) to guide data collection and analysis. Overall, 20 SE programs provided by 15 different agencies were examined. Findings revealed that agencies' exposure to different institutional pressures, their interactions and relationships with other groups and organizations, as well as their values, beliefs and ideologies played determining roles in shaping the evolution of SE services in each province.

2009

Barclay, K., Crain, M., Heah, T., Newstead, C., Penhale, C., & Thomson, L. (2009). **The contribution of IPS to recovery from serious mental illness: A case study.** *Work*, 33(4), 459-64.

PMID: 19923668

ABSTRACT: BACKGROUND: Individual placement and support (IPS) is an effective, evidence-based intervention to support transition to paid work for individuals who have a serious mental illness. Currently, there is a lack of qualitative reporting from the people receiving IPS and their support networks. APPROACH: A case study of a 42-year-old-man who has schizophrenia and who attends a community mental health team in a Canadian urban center is presented. His experience and that of his mother, employer, and clinical supports are shared through semi-structured interviews. The authors of this paper include a peer researcher who has been a participant in an IPS program. FINDINGS: The enduring and individual support of IPS is credited with being central to the study subject's successful acquisition and maintenance of paid employment. His involvement in paid work is also associated with improved health outcomes, including a significant reduction in the frequency of medical appointments to monitor his mental health. Improved social skills and self-efficacy are also reported. CONCLUSION: Provision of IPS services within a multidisciplinary mental health team can promote the acquisition of durable employment for individuals in recovery from serious mental illness. Clinicians are reminded to check their assumptions regarding which individuals could benefit from IPS, and are encouraged to take their lead from clients in determining whether to commence or continue employment services.

Chan, A.S., Li, S.M., & Tsang, H.W. (2009). **Case report of integrated supported employment for a person with severe mental illness.** *American Journal of Occupational Therapy*, 63(3), 238-44.

PMID: 19522132

Full-text is available at <http://ajot.aota.org/article.aspx?articleid=1865835>

ABSTRACT: **OBJECTIVE:** We illustrate the implementation of an integrated supported employment (ISE) program that augments the individual placement and support model with social skills training in helping people with severe mental illness (SMI) achieve and maintain employment. **METHOD:** A case illustration demonstrates how ISE helped a 41-year-old woman with SMI to get and keep a job with support from an employment specialist. An independent, blinded assessor conducted data collection of employment information, including self-efficacy and quality of life, at pre-treatment and at 3-month, 7-month, 11-month, and 15-month follow-up assessments. **RESULTS:** The participant eventually stayed in a job for 8 months and reported improved self-efficacy and quality of life. **CONCLUSION:** The case report suggests that ISE could improve the employment outcomes of people with SMI. Moreover, changes in the participant's self-efficacy and quality of life were shown to be driven by the successful employment experience.

2007

Bond, G.R., Drake, R.E., & Xie, H. (2007). **Can SSDI and SSI beneficiaries with mental illness benefit from evidence-based supported employment?** *Psychiatric Services*, 58(11), 1412-20.

PMID: 17978250

ABSTRACT: **OBJECTIVE:** Individuals with psychiatric disabilities are the fastest-growing subgroup of Social Security Administration disability beneficiaries and have negligible rates of return to competitive employment. Nevertheless, a new approach to vocational rehabilitation, termed supported employment, has increased the optimism regarding employment for this population. **METHODS:** Aggregating data from four randomized controlled trials of evidence-based supported employment for persons with severe mental illness, the investigators compared 546 Social Security Administration disability beneficiaries with 131 non-beneficiaries. Three employment measures were examined: job acquisition, weeks

worked, and job tenure. **RESULTS:** Beneficiaries receiving supported employment had better employment outcomes than those receiving other vocational services. Similar results were found for non-beneficiaries. Overall, non-beneficiaries had better employment outcomes than beneficiaries. However, the effect sizes measuring the improved outcomes with supported employment were similar for beneficiaries ($d=.52-1.10$) and non-beneficiaries ($d=.78-.89$). **CONCLUSIONS:** Evidence-based supported employment could enable many Social Security Administration beneficiaries with psychiatric disabilities to attain competitive employment even though receipt of disability benefits operates as a barrier to employment.

Carlioni, C., & Casper, E.S. (2007). **Assessing the underutilization of supported employment services.** *Psychiatric Rehabilitation Journal*, 30(3), 182-8.

PMID: 17269268

ABSTRACT: Supported employment services (SES) are evidence-based practices that appear to be underutilized. This study evaluated the level of SES underutilization at both urban and suburban agencies that served people with psychiatric disabilities. Two hundred sixty-nine unemployed consumers indicated their intentions to accept a referral to SES in the next 6 months. The 54 practitioners who served these consumers indicated their intentions to refer these consumers to SES during that time period. The concordance rate between the consumers' and practitioners' intentions was 55 percent. Urban and suburban agencies did not differ in concordance rate. Forty-nine percent of the consumers intended to accept a referral but their practitioners intended to refer 21 percent. An underutilization rate of 28 percent was found for the combined agencies. The factors contributing to the consumers' and practitioners' intentions were also investigated. The low concordance rate between these consumers and practitioners may have been due to their different perspectives about the importance of the consumers' felt need to work.

2006

Carnemolla, M.A., Gold, P.B., Keleher, J., Meisler, N., Santos, A.B., & Williams, O.H. (2006). **Randomized trial of supported employment integrated with assertive community treatment for rural adults with severe mental illness.** *Schizophrenia Bulletin*, 32(2), 378-95.

PMID: 16177278

Full-text is available at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1435374/pdf/sbi056.pdf>

ABSTRACT: Urban-based randomized clinical trials of integrated supported employment (SE) and mental health services in the United States on average have doubled the employment rates of adults with severe mental illness (SMI) compared to traditional vocational rehabilitation. However, studies have not yet explored if the service integrative functions of SE will be effective in coordinating rural-based services that are limited, loosely linked, and geographically dispersed. In addition, SE's ability to replicate the work outcomes of urban programs in rural economies with scarce and less diverse job opportunities remains unknown. In a rural South Carolina county, we designed and implemented a program blending Assertive Community Treatment (ACT) with an SE model, Individual Placement and Support (IPS). The ACT-IPS program operated with ACT and IPS subteams that tightly integrated vocational with mental health services within each self-contained team. In a 24-month randomized clinical trial, we compared ACT-IPS to a traditional program providing parallel vocational and mental health services on competitive work outcomes for adults with SMI (N = 143; 69 percent schizophrenia, 77 percent African American). More ACT-IPS participants held competitive jobs (64 versus 26 percent; $p < .001$, effect size [ES] = 0.38) and earned more income (median [Mdn] = 549 US dollars, interquartile range [IQR] = 0-5,145 US dollars, versus Mdn = 0 US dollars, IQR = 0-40 US dollars; $p < .001$, ES = 0.70) than comparison participants. The competitive work outcomes of this rural ACT-IPS program closely resemble those of urban SE programs. However, achieving economic self-sufficiency and developing careers probably require increasing access to higher education and jobs imparting marketable technical skills.

2005

Campbell, K., Madi, N., Melburg, V., Ruiz-Quintanilla, S.A., & Weathers, R.R., 2nd. (2005). **Participation in programs designed to improve employment outcomes for persons with psychiatric disabilities: evidence from the New York WORKS demonstration project.** *Social Security Bulletin*, 66(2), 49-79.

PMID: 16878427

ABSTRACT: The New York WORKS demonstration project was designed to improve employment outcomes for persons with psychiatric disabilities receiving Supplemental Security Income (SSI) disability payments. This article shows how the individual characteristics of participants were related to outcomes at each stage of the multistage recruitment process used in the project and how those characteristics contributed to enrollment. The findings are important to program administrators who are interested in ensuring that SSI recipients receive equal access to employment-related services and who want to improve recruitment strategies for future demonstration projects. The New York WORKS recruitment process used administrative records from the Social Security Administration (SSA) to identify the population of over 68,000 SSI recipients with a diagnosis of a psychiatric disability in Erie County and New York City. Staff involved in the project documented the results of each stage of the recruitment process. The New York WORKS project included four stages: (1) the provision of information (sending a letter and information packet); (2) demonstrated awareness of the project (response to a letter containing an overview of the project); (3) expression of interest (indication of interest in the project, using a postmarked form returned to New York WORKS project staff); and (4) participation (actual enrollment in the program). The project staff members were also able to identify data from administrative records that described the characteristics of the population, including age, sex, type of psychiatric diagnosis, the number of months that the person collected benefits before the recruitment process, employment experience before the recruitment

process, and annual earnings in the year before the recruitment process. The data on outcomes at each stage of the recruitment process and the characteristics of SSI recipients were analyzed using an empirical method recently suggested by Heckman and Smith. The analysis identified the relationship between the characteristics of SSI recipients and the outcomes at each stage of the recruitment process and demonstrated how those characteristics contributed to the overall likelihood of enrollment. Demographic characteristics, information about diagnosis, and characteristics related to work history had different effects on outcomes at different stages of the recruitment process. For example, younger SSI recipients were less likely to reply to the information letter but more likely to express an interest in the project and more likely to enroll, given that interest. This result suggests that there may be an information barrier for the younger group of SSI recipients during the early recruitment stages. There were also interesting differences by psychiatric diagnosis and by recent employment experience at each stage of the process. Most notably, persons with anxiety disorders were less likely to express an interest in the project and less likely to enroll in the project if they expressed an interest. This finding suggests that project administrators may need to examine more effective methods to accommodate persons with an anxiety disorder at the enrollment stage of the recruitment process. Persons with relatively low earnings in the year before the project were more likely to respond, to express interest in the project, and to enroll than were those with no earnings and those with relatively high earnings. This finding suggests that the recruitment strategy used by the New York WORKS project is more effective at enrolling a subset of the population that has some demonstrated work capacity and that, of those with a demonstrated work capacity, New York WORKS is enrolling those who are likely to have the most to gain from the project. This finding has implications for the development of sample designs for other demonstration projects, in particular the SSA-proposed mental health treatment study. A number of strategies may lead to improvements in future evaluations of participation in SSA proj-

ects and programs. For example, the New York WORKS data did not contain information for all SSI recipients on race, education, or literacy. These factors have been shown to be important in the Job Training Partnership Act literature and are likely to play a role in participation. The inclusion of these data in future evaluations may provide important information on participation in SSA projects. Another useful strategy for future evaluations includes the identification of random samples of those who choose not to enroll at different stages in the process and the collection of information on the reason for the decision. These additional data may help project administrators to gain a clearer description of the reasons for differences in outcome that occur at each stage of the process, assess the overall performance of the recruitment process, and improve the recruitment processes used in future projects.



Quick Looks

Online Resources Related to Supported Employment & Psychiatric Disabilities

Individuals with disabilities have higher rates of unemployment and underemployment than individuals without disabilities (<http://disabilitycompendium.org/compendium-statistics/employment>). Individuals with psychiatric disabilities or living with other severe mental illness experience disproportionately high rates of unemployment and underemployment (http://www.nami.org/Content/NavigationMenu/State_Advocacy/About_the_Issue/Unemployment.pdf). For more information regarding employment for persons with disabilities and psychiatric/mental disabilities we recommend the following resources:

APSE: The Network on Employment (Formerly the Association for Persons in Supported Employment)

Improving and expanding integrated employment opportunities, services and outcomes for persons experiencing disabilities.

Phone: 301/279-0060

APSE Chapter Directory:

www.apse.org/about/chapter-directory/

www.apse.org

Dartmouth IPS Supported Employment Center

Phone: 603/448-0263

Email: dprc@dartmouth.edu

<http://sites.dartmouth.edu/ips/>

Employer Assistance and Resource Network (EARN) through ODEP

EARN is a resource for employers seeking to recruit, hire, retain, and advance qualified employees with disabilities.

Phone: 855/275-3276

<http://askearn.org>

Integrated Employment Toolkit from ODEP

www.dol.gov/odep/ietoolkit/policymakers.htm

Job Accomodation Network (JAN)

Free consulting service to increase the employability of people with disabilities.

Toll Free: 800/526-7234 (V/TTY)

janweb.icdi.wvu.edu

Mental Health America (formerly the National Mental Health Association)

Toll Free Mental Health Resource Center:

800/969-6642 (V), 800/433-5959 (TTY)

The Resource Center is available Monday through Friday from 9 a.m. until 5 p.m. EST

If you need immediate help call the National Hope line Network 800/784-2433 to reach a 24-hour crisis center in your area.

Toll Free Suicide Helpline: 800/273-8255, Phone: 703/684-7722

Supported Employment: www.mentalhealthamerica.net/meaningful-work-and-recovery
www.nmha.org

MentalHealth.gov through Department of Health and Human Services

www.mentalhealth.gov

National Alliance on Mental Illness (NAMI)

Toll Free: 800/950-6264

Email: info@nami.org

Find Your NAMI State Organization and local

NAMI Affiliate: <http://tinyurl.com/c3pxn9l>

Supported Employment: <http://tinyurl.com/aq7jm>

www.nami.org

National Collaborative on Workforce and Disability

Toll Free: 877/871-0744, 877/871-0665 (TTY)

www.ncwd-youth.info

RRTC on Workplace Supports – VCU Rehabilitation Research and Training Center on Workplace Supports and Job Retention also known as VCU WorkSupport

Phone: 804/828-1851 (V), 804/828-2494 (TTY)

Email: RRTC@vcu.edu

Resources on supported employment: www.work-support.com/resources/listContent.cfm/24

www.worksupport.com

State Vocational Rehabilitation Offices

Listed in Alphabetical Order by State, available through the Job Accommodation Network

Toll free: 800/526-7234 (V/TTY)

<http://askjan.org/cgi-win/TypeQuery.exe?902>

Supported Employment: A Customer-Driven Approach

www.worksupport.com/documents/sechapter11.pdf

Supported Employment Evidence-Based Practices (EBP) KIT through SAMHSA

<http://store.samhsa.gov/product/Supported-Employment-Evidence-Based-Practices-EBP-KIT/SMA08-4365>

Substance Abuse and Mental Health Services Administration (SAMHSA)

SAMHSA's National Helpline provides 24-hour FREE and confidential treatment referral and information on mental and/or substance abuse disorders.

Toll Free: 800/662-4357 (V), 800/487-4889 (TTY)

[National Suicide Prevention Lifeline](http://www.national suicide prevention lifeline.org) is available 24 hours a day, 7 days a week toll-free at 800/273-8255 or via [Live Online Chat](http://www.samhsa.gov)

www.samhsa.gov

Ticket to Work

Help Line: 866/968-7842 (V), 866/833-2967 (TTY)
Monday through Friday, 8:00 a.m. until 8:00 p.m. EST

Email: support@chooseworkttw.net

Webinar schedule and tutorial information:

www.chooseworkttw.net/webinars-tutorials/index.html

www.chooseworkttw.net









































U.S. Department of Labor Office of Disability Employment Policy (ODEP)

Toll-free at 866/633-7365 (V/TTY)

Email: odep@dol.gov

www.dol.gov/odep

Search Terms for Supported Employment and Psychiatric Disabilities

-  Access to Health Care
-  Accessibility (for Disabled)
-  ADA
-  Adolescents
-  Adults
-  Agency Cooperation
-  Attitudes Toward Disabilities
-  Behavior Disorders
-  Best Practices
-  Capacity Building
-  Career Development
-  Case Management/Studies
-  Client Characteristics
-  Clinical Diagnosis/Management
-  Community-Based Services
-  Community Integration/Resources
-  Comparative Analysis
-  Competitive Employment
-  Cost-Benefit Analysis
-  Counselor Evaluation
-  Delivery Systems
-  Education/Postsecondary/Professional
-  Emotional Disorders/Disturbances
-  Employability
-  Employer Attitudes
-  Employment/Level/Opportunities/Practices Programs/Services
-  Entitlements
-  Evidence-Based
-  Feasibility Studies
-  Financial Support
-  Focus Groups
-  Follow-Up Studies
-  Foreign Countries
-  Health Services
-  Income
-  Individual Placement and Support (IPS)
-  Individualized Programs
-  Interagency Cooperation
-  International Rehabilitation
-  Intervention









***Search Terms for Supported Employment and
Psychiatric Disabilities continued ...***

- 📖 Job Development/Placement/Satisfaction/Skills
- 📖 Literature Reviews
- 📖 Mental Disorders/Health/Services
- 📖 Mentoring
- 📖 Model Programs
- 📖 Occupational Surveys
- 📖 Outcomes
- 📖 Peer Counseling
- 📖 People with Disabilities
- 📖 Performance Factors/Standards
- 📖 Placement
- 📖 Policy
- 📖 Posttraumatic Stress Disorders
- 📖 Predictor Variables
- 📖 Prevocational Services
- 📖 Program Development/Evaluation
Effectiveness/Implementation
- 📖 Psychiatric Disabilities/Rehabilitation
- 📖 Psychiatric Status Rating Scales
- 📖 Psychometrics
- 📖 Psychosocial Factors
- 📖 Public Agencies
- 📖 Qualitative Analysis/Research
- 📖 Quality Of Life
- 📖 Randomized Controlled Trials
- 📖 Referral
- 📖 Regression (Statistics)
- 📖 Rehabilitation Programs/Research
- 📖 Research and Development Centers
- 📖 Research Methodology/Projects/Utilization
- 📖 Rural Health Services
- 📖 Schizophrenia
- 📖 Self-Efficacy
- 📖 Service Delivery/Integration
- 📖 Severe Mental Illness
- 📖 Severity of Illness Index
- 📖 Social Skills/Work
- 📖 Socioeconomic Status
- 📖 Stakeholders
- 📖 Standards
- 📖 Statistics
- 📖 Substance Abuse
- 📖 Supported Employment
- 📖 Task Performance and Analysis
- 📖 Teamwork
- 📖 Test Reliability
- 📖 Therapy
- 📖 Training/Programs
- 📖 Transition
- 📖 Utilization Review
- 📖 Veterans
- 📖 Vocational Rehabilitation
- 📖 Welfare
- 📖 Work Environment/Experience/Performance
- 📖 Workers with Disabilities
- 📖 Young Adults
- 📖 Youth

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-  REHABDATA and the NIDRR Program database
-  Education Resources Information Center
-  National Clearinghouse of Rehabilitation Training Materials
-  Campbell and Cochrane Collaborations
-  PubMed and other National Library of Medicine databases
-  Agency for Health Care Policy and Research databases
-  Center for International Rehabilitation Research Information and Exchange
-  and other reputable, scholarly information resources.

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