

096: SUPPORTED EMPLOYMENT IN MENTAL HEALTH – THE NEXT STEP?

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Objective:

To establish and evaluate a programme of supported employment and training for individuals with enduring mental illness

Methods:

Historically, people with enduring mental health difficulties have had poor employment prospects and outcomes for a number of reasons. These include illness-related issues, employer-related difficulties and the general stigma which has been associated with mental illness. The problem is compounded by the early onset of illness, thereby interrupting formal education. Supported employment was based traditionally on models developed in the areas of learning and physical disability and, additionally, providers of supported employment in mental health frequently did not have close integration with the Community Mental Health Team nor formal training in the area of mental health.

The means chosen to attempt to overcome some of the inherent difficulties was to appoint an Employment Officer who would actively liaise with employers and training facilities on behalf of the client. Aims of this project were (a) assessment of capabilities, educational level and aspirations in context of limitations imposed by mental disorder; (b) appropriate placement of individuals in suitable employment/training/education to maximise potential without jeopardising mental health; (c) co-ordination of relevant practical support structures to facilitate entry into and continued attendance at chosen programme: and (d) increased employment and greater social inclusion through process of normalisation created by engagement in open employment.

The practical steps taken to achieve these aims will be presented along with the outcomes reported, including a novel approach with regard to liaison with mental health professionals.

Results:

In total 64 clients were referred to the project from May 2001 until January 2003. 45 of these were under 40 years and male:female ratio was 37:27. 31 were placed and supported in various employments, 12 in state sponsored employment schemes and 24 in various educational programmes (some clients engaged in more than one programme). 6 people in total dropped out of the project. A more detailed analysis of the types of programmes and employments will also be presented, including examination of reasons for drop-outs.

Conclusions:

This project addressed the needs of an identified group for whom there was little by way of supported employment and training available due to the fact that most such services in Ireland were based on models of learning disability and physical disability. Possibly the greatest single factor in the success of the project was the fact that the Employment Officer was also a trained psychiatric nurse and that she operated as part of the multi-disciplinary mental health team. This facilitated highly efficient exchange of information between agencies which would traditionally be separate, leading to greater support of the individual in the community. While further evaluation is needed, there is much in favour of incorporating a post such as this in all community mental health teams.