

Trial shows Individual Placement and Support makes no difference to job prospects in south London

Individual Placement and Support (IPS) – a new way of helping people with severe mental illness get a job and keep it – may not be effective as a stand-alone package of support in this country.

The biggest trial of IPS in the UK to date was carried out by a team at the Institute of Psychiatry and showed that, after a year, IPS made no significant difference in terms of helping people secure work.

Under IPS, employment specialists help people secure a job competitively with a minimal preparation period, and then offer continued support to both the employee and the employer for as long as necessary.

IPS has been tested in America and has been proven there to help people who need more intensive support return to work, increasing people's chances of getting and keeping employment.

Realising ambitions: Better employment support for people with a mental health condition is a report commissioned by the UK government's Department for Work and Pensions which recommends introducing IPS in this country. It says that at least one employment specialist should be based in every community-based mental health team to offer people Individual Placement and Support.

But Louise Howard, the lead researcher on the SWAN (Supported Work and Needs) study, said: 'The IPS model may be less helpful in some settings. This may be because of the different nature of the labour markets and differences in welfare benefits systems in different countries. Outside of the USA, there are few incentives for employers to hire people with severe mental illness, and the system of paying for healthcare in the USA may increase the pressure to find work.

219 people from two south London boroughs took part in the SWAN trial. Half were enrolled in an IPS programme offered by STATUS Employment, a charity with experience of working with people with mental illness. This included helping people learn interview skills, prepare CVs and application forms, building their confidence, assessing their job preferences and supporting them when they were in employment. The other half were offered the routine vocational services available in the area.

One year later, 90 per cent of them were contacted: only a very small number of all the participants had secured work – 13 per cent of those who had been offered IPS, seven per cent of those who had not.

The four experienced employment specialists working on the IPS strand of the project liaised with community mental health teams, but were not officially part of them, and the research team suspects this may have had an impact on the low success rate. 'Research has shown that mental health professionals often have low expectations of people's ability to work, and indeed may advise people not to work,' said Louise. 'IPS may be more effective if it is properly integrated with community mental health teams and part of the teams' everyday work.'

Even in studies carried out in north America, IPS is successful in securing employment for only around 50 per cent of people with serious mental illness, she said.

'Our study was in a socially deprived inner city area, where most people with severe mental illness do not get jobs, and it may be that the successful implementation of IPS may depend also on the area: it may be difficult to achieve even moderate rates of competitive employment in some settings.'

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Louise and the research team conclude that IPS alone will not improve people's employment prospects, and say that additional support – such as cognitive remediation therapy, that aims to help people improve their thinking skills and attention, and to find ways of remembering important information – may be needed alongside the new initiative. A number of research studies in the USA have shown CRT can make a difference when used to help people get a job. In addition, said Louise, not everyone will obtain employment, particularly in the current economic climate. 'Social enterprises and voluntary work are also important in achieving social inclusion,' she said.

The SWAN study was funded by the Wellcome Trust, the King's Fund and the South London and Maudsley Charitable Trust.

Supported employment: randomised controlled trial,
Howard LM et al, British Journal of Psychiatry, 2010,
May; 196 (5); 404-11

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