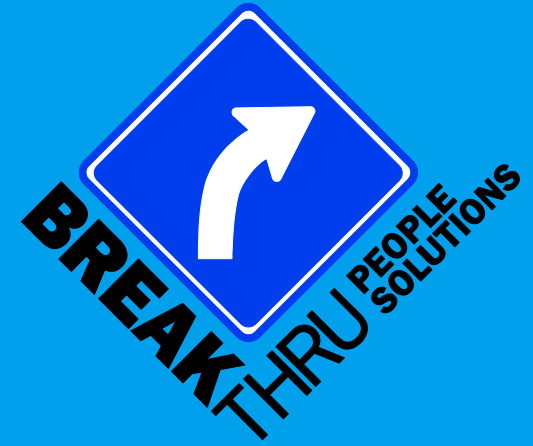


Working with Barriers

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Working With Barriers – Supporting Employment Outcomes for Jobseekers with Comorbidity Issues: Results from a 2 year Study

*Ashrafal Alam
Alison Jaworski
Lynne Harris
Lynda Matthews
Gokcen Bozdog*



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Presentation overview

- Background to the Working with Barriers project
- Results from interviews with staff, job seekers clients and client support persons
- Results from client surveys
- Next steps



Comorbidity in Australia

- 2007 National Survey of Mental Health and Wellbeing found that within a 12 month period:
 - 67,400 persons experienced combined anxiety & substance use disorder
 - Approx 39,000 persons experienced anxiety, affective & substance use disorder



Mental illness, substance use & work

- **Almost half of those with mental illness also have difficulties with substance use and report considerable disability in relation to work (Henderson, Andrew, & Hall, 2000)**
- **People with mental illness and additional substance use disorders have lower rates of workforce participation than people with mental illness alone (Compton et al., 2005; Drake et al., 2008).**



Working with Barriers – the project

Objectives:

- **Understand barriers to obtaining and maintaining employment for job seekers with mental illness and drug & alcohol problems**
- **Generate information to develop effective strategies to support employment service providers to identify and address the needs of these job seekers.**



Working with Barriers – the project

- Research partnership
 - **Break Thru People Solutions**
 - Since 1992 has offered a range of free specialist employment and training programs to job seekers.
 - One of the largest psychiatric disability specialist DES providers
 - Centre of Excellence: undertakes partnered research & explores international best practice



Working with Barriers – the project

- Research partnership
 - **The University of Sydney**
 - Research expertise
 - Resources: Library resources, analysis software
 - Supervision of research; technical support
 - Dissemination within academia
 - **The Steering Committee**
 - University of Sydney, Faculty of Health Sciences
 - Break Thru People Solutions
 - Jonine Penrose-Wall, JPW Results



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Working with Barriers – the project

- **Methodology**
 - 2 year, multi-method study design
 - Literature review
 - Study 1: Semi-structured in-depth interviews
 - Study 2: Surveys of clients with and without additional D&A use issues
 - Study site: Sydney Metro



Study 1: Semi-structured in-depth interviews



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Participant Profile: Job seekers

	Age	Years Education	Qualifications	Years unemployment	Living arrangements	Diagnosis	Drug & alcohol history
1	47	10	Commenced 2 TAFE courses (incomplete)	10	Boarding house	Schizophrenia/ Depression/ ADD	Current: alcohol Past: heroin, alcohol
2	29	11	Commenced 2 TAFE courses (incomplete)	4	Family of origin	Schizophrenia	Past: marijuana
3	57	8	None	4 – 5	Public housing	Depression	Current: marijuana Past: marijuana, alcohol, LSD
4	43	8	Apprentice chef	3	Family (wife)	Schizophrenia/ Depression	Current: alcohol Past: alcohol
5	33	10	Commenced 2 TAFE courses (incomplete)	1	Shared accommodation	Schizophrenia/ Depression	Past: alcohol
6	33	12	Commenced university (incomplete)	6	Boarding house	Schizophrenia	Past: marijuana, alcohol



Participant Profile: Employment Consultants

Participant	Position	Years working in this position
EC 1	Employment Consultant	1.5
EC 2	Employment Consultant	1
EC 3	Employment Consultant	0.2
EC 4	Employment Consultant	0.1
EC 5	Employment Consultant	2
EC 6	DEN Manager	6

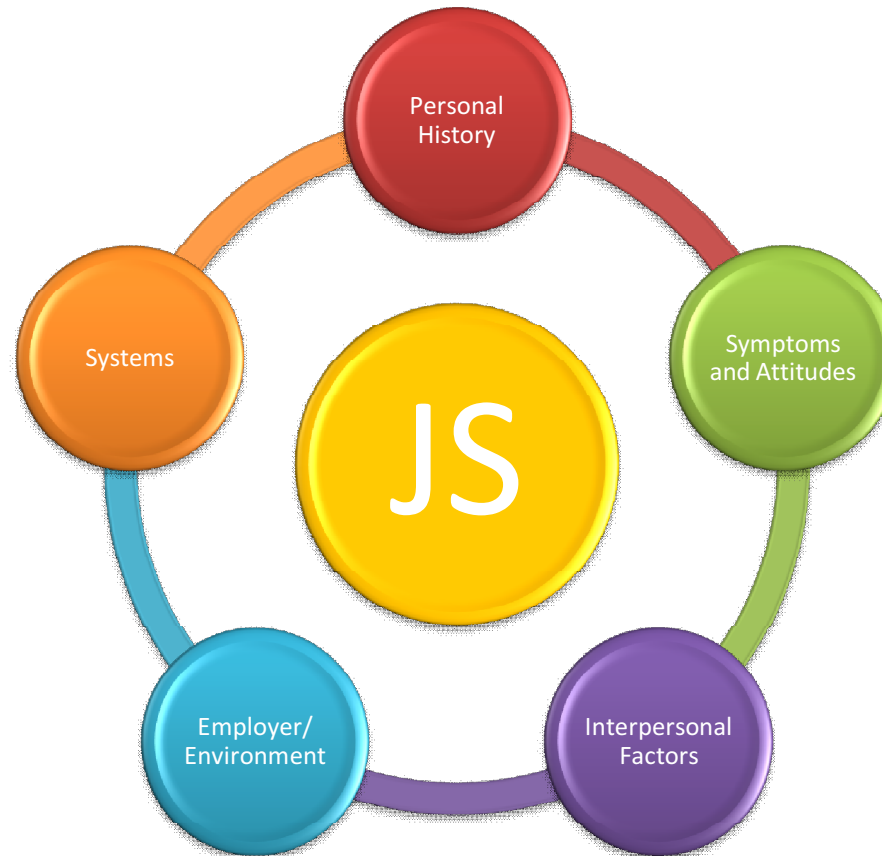


Participant Profile: Support Persons

	Age	Relationship to client	work	Living arrangements	Client's diagnosis	Client's Drug & alcohol history
1	66	father	courier	With clients	Schizophrenia Depression	Current: alcohol Past: heroin
2	41	sister	nurse	Separately from client	Schizophrenia	none
3	33	wife	cleaner	With client	Bipolar	none
4	60	mother	teacher	With client	Schizophrenia Depression	none
5	52	mother	HR professional	With client	Depression, Personality disorder, Bipolar	Past: alcohol



Results: Barriers to workforce participation



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Results: Personal History and Experience Barriers

- **Long term unemployment**
 - Lack of recent work experience or employer references
- **Employment disrupted due to hospitalisation**
- **Lack of qualifications/training or low levels of education**



Results: Personal History and Experience Barriers

- **Long term unemployment**

- *I think one of the main barriers is long term unemployment that I find. Because a lot of them have been out of work for quite a long time, and years in some cases, long, long years long term. So that's a very big barrier if they're wanting to enter the open employment market. [EC3]*

- **Lack of qualifications/training**

- *Yeah, you know I don't have any qualifications so I have no specialised - specialised expertise in a certain field so had to look for odd jobs and then jobs. So yeah it could be a deterrent to my, you know success in looking for work. [JS5, age 33]*



Results: Symptom and Attitudinal barriers

- **Symptom severity**
- **Lack of insight**
 - Unrealistic expectations about working
- **Lack of motivation**
- **Low confidence and self esteem**
- **Negative attitudes to work**



Results: Symptom and Attitudinal barriers

- **Symptom severity**

- *...you're dealing with having a voice in your head all the time, continuously, from the time you wake up until the time you go to sleep and when I had to concentrate I had this voice in my head. I get agitated, I get nervous, I get frustrated ... [JS4, age 43]*

- **Low self-confidence**

- *Being confident is what I need to work on because I've been out of work for quite a while now...I will definitely need to work on my confidence. I mean some days I feel like I can do anything, but some other days I'm just a total mess, totally disbelieve that I can't do nothing. That's got to be the most difficult thing to deal with. (JS1, 47)*



Results: Interpersonal Factors

- Poor social skills
 - Difficulties with social interaction
 - Poor interview skills
 - Personal presentation
- Limited social network/ community connection



Results: Interpersonal Factors

- **Difficulties with social interaction**
 - *like a lot of [clients] are you know...I feel anxious a lot and that might mean that I need to work in a quiet place or work in one to one situations rather than a big group of people [EC 4]*
- **Personal Presentation**
 - *... I think all the cuts and scars on her arms is very definitely a barrier. She dresses differently and she doesn't like to be conformist. [SP5, mother].*



Results: Employer/Environmental Barriers

- Psychiatric stigma held by employers
- Lack of understanding of psychiatric disability among employers
- Lack of appropriate employment opportunities
- Competition in the labour market with those without mental illness
 - Intensified with economic recession/global financial crisis



Results: Employer/Environmental Barriers

- **Stigma around mental illness & drug use**
 - *If I've got diabetes and I say to you, you're my employer, and I say, look I've got diabetes, I need to have my breaks at these times because I've got to go in and give myself insulin. And you'd say, oh sure, not a problem. But if you've got a mental health problem, ... one day I might have a cold and be a bit unwell, it's like [for the employer], oh that's too much bother. ... The whole stigmatism of mental health is what's pulling these people down. [SP2, age 41]*
- **Shortage of flexible work options**
 - *Just lack of suitable positions available as well, because you'll find somebody who have limited concentration now and can only work four hours a day, two days a week. There's not many positions out there for those people. [EC1]*



Results: Employment service and health system-related barriers

- Slow pace of employment service provider (as perceived by clients and support persons)
- Delayed diagnosis/ delayed treatment
- EC role restriction: limited scope for consultants to offer comprehensive counselling/support for non vocational barriers



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Results: Employment service and health system-related barriers

- **Delayed diagnosis/ delayed treatment**
 - ... X's [job seeker] *had her mental issue since she was quite young – just starting out to be a teenager. It's taken me five or six years to find a group that she's allowed to go on that helps her. That's ridiculous. I'm angry - I'm very angry.* [SP5, mother]
- **Slow pace of employment service provider support**
 - *The service is a bit slow because like it takes a while like I only see [consultant] once one hour a week and I've got the rest of the week doing nothing.* [JS5, age 33]



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Results: Additional barriers faced by clients with D&A issues

- **Lower & fluctuating energy, concentration & motivation**
- **Sign of alcohol/drug use off-putting to potential employers**
- **Increased difficulties in relationship with co-workers**
- **Increased difficulties maintaining appropriate workplace behaviour**
- **Additional stigma of alcohol/ drug use**
- **Difficulty working in environments with alcohol available (i.e. hospitality)**
- **Difficulties with medication compliance**



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Results: Additional barriers faced by clients with D&A issues

- **Increased stigmatisation**
 - *“Both groups are stigmatized, but the clients with D&A are perceived more negatively by employers.” (EC 2)*
- **Low/fluctuating energy/concentration/motivation**
 - *“People with a mental illness... most of them are stable on a weekly or monthly basis. ...but those with alcohol and drugs issues typically it could be a daily basis. Their energy, concentration and motivation levels varies daily. One day they feel energetic, the next they don’t. It fluctuates more.” (EC 5)*
- **Visibility of alcohol/ drug**
 - *“The first barrier is if they turn up to an interview and they’re smelling of alcohol. They’re not going to get a job. If we can smell it on them as well, an employer is going to [smell the breath]” (EC 2)*



What can service providers do?



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Strategies to improve workforce participation

- Referral to mental health services
- Involve job seekers in the job search process
- EC building rapport / trust / understanding
- Target employers with avowed corporate social responsibility agenda
- Education of employers
- Consider how the service can work with families



Study 2: Surveys of clients with and without additional D&A use issues



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Study 2 - Survey

- Initial survey of 110 jobseekers
- Screened on drug & alcohol use
- Clients divided into 2 groups (with and without additional D&A use problems)
- 2 groups compared on 3 occasions to determine what are the differences in employment outcomes, barriers to employment & support strategies



Study 2 - Survey

- Demographic Information Form
- **BASIS-32** (Behaviour & Symptom Identification Scale)
- **CANSAS** (Camberwell Assessment of Need Short Appraisal Scheme)
- **AUDIT** (Alcohol Use Disorder Identification Test)
- **DAST-10** (Drug Abuse Screening Test)



Survey – participants

- **Currently n=88**
- **Demographics**
 - 52% female; 48% male
 - 51% TAFE or Uni degree
 - Average age 40 years
- **Diagnosis**
 - Combined Anxiety/Depression **30%**;
Depression **28%**; Schizophrenia or psychosis **17%**;
Anxiety **13%**; Bipolar disorder **9%**;
Other/Did not disclose **3%**
 - **36% risky/high levels of D&A use**



Survey – participants

- **Length of unemployment**
 - Average of 12-18 months
- **Estimated time to get a job**
 - Average of 2-6 months (40% did not know)
- **Health over past month**
 - Average of 2.4
 - 4 point scale, 1 poor – 4 excellent



Survey – Differences between the two groups

- D&A group slightly younger (37 yrs vs 42 yrs)
- Greater difficulties experienced with impulsive behaviour
- Greater number of needs for help/assistance reported, particular needs that remain unmet



Survey – Similarities between the two groups

- No significant difference between the two groups in terms of:
 - Gender
 - How participants rated their level of health
 - Levels of difficulties experienced with relating to others; or with activities of daily living



Where to from here?

- Continue with survey data collection
- Analysis
 - Final analysis of group comparisons
 - Recommendations
- Dissemination
 - Publication of literature review and results of interviews pending
 - Reports to disability and employment industry providers, funding body, consumer groups
 - Publication of results from survey



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Further information:

Neeloy Ashraful Alam [Ashraful.Alam@breakthru.org.au]

Alison Jaworski [Alison.Jaworski@breakthru.org.au]

Lynne Harris [Lynne.Harris@acap.edu.au]

Lynda Matthews [Lynda.Matthews@sydney.edu.au]

Simon Fairall [Simon.Fairell@breakthru.org.au]



Questions?

