

Outcomes of Supported Employment for Individuals with Severe Mental Illness

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Individuals with severe mental illnesses such as severe Major Depressive Disorder, Bipolar I Disorder, Schizophrenia, and Schizoaffective Disorder face heavy barriers to employment, including the symptoms of the disorders themselves, medication side effects, and stigma and misconceptions about mental illness from coworkers and employers. Consistent employment has a strong positive impact on recovery prognosis for the severely mentally ill, but up to 90% are unemployed in spite of their own desire for competitive employment and the presence of federal legislation and incentive programs intended to reduce unemployment in this population. Literature shows that access to and participation in supported employment services is the most powerful predictor of competitive employment for those with severe mental illness, but the presence of differing models of rehabilitation contributes to inconsistent levels of service and results. The medical model and the recovery model are two of the most popular and widespread models of rehabilitation currently in use. Research comparing these models is necessary to determine which is more effective at helping the mentally ill achieve and maintain competitive employment. This thesis reviews relevant literature and presents a research design for a nonequivalent group study inspired by the Metroplex Employment Model, comparing the outcomes of the medical model of rehabilitation and placement with those of supported employment within the recovery model of rehabilitation. The goal is to determine which service format provides the desired results (prompt and sustained employment) more efficiently and consistently, making process-based and outcomes-based program evaluation a vital part of the design. Samples of program evaluation forms can be found in the Appendix. It is hypothesized that supported employment services following a biopsychosocial, recovery-based model will result in consumers with severe mental illness attaining employment significantly more quickly and sustaining it for longer than rehabilitation services that follow the traditional medical model. Following the literature review and basic design, there is discussion of the importance and implications of the results of such a study, potential improvements upon the design, and variations on how the data may be computed.