



Government Affairs Dept.

Mental Health Association in New Jersey



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PUBLIC POLICY STATEMENT

EMPLOYMENT FOR PEOPLE WITH MENTAL ILLNESS: A KEY TO SYSTEM TRANSFORMATION

BACKGROUND

Never before has there been so much promise for the treatment of mental illness – a disease that strikes one in every five Americans, with 5% - 7% of the adult population in any given year experiencing a serious mental illness. Yet, the employment of persons with serious mental illness remains as one of the most challenging issues to consumers, providers, advocates and policy makers. The Mental Health Association in New Jersey (MHANJ) has identified employment as a major issue as we transform the system of care from a medical model to one of wellness and recovery, driven by consumers as full partners. According to the President's New Freedom Commission, "approximately 90 percent of adults with serious mental illness are unemployed. Studies show that many of them want to work and many can work. Instead, our nation's largest 'program' for people with mental illness is disability payments."

In New Jersey, former Governor Codey's Mental Health Task Force wrote, in its March 2005 final Report, that "individuals with mental illness who have learned to manage their conditions also need to provide for their own housing, education and employment in order to become contributing members of society. Such a goal is the essence of wellness and recovery, consistent with the American dream. New Jersey needs to promote employment opportunities for the majority of consumers who are able."

This lofty goal, however, is tempered by the realities underscored in the research conducted by the Cornell University Institute for Policy Research. In a policy brief entitled "Dismantling the Poverty Trap: Disability Policy for the 21st Century," the authors show that working-age Americans with disabilities are much more likely to live in poverty than other Americans.

Specifically, the employment rate for disabled persons is about half the employment rate of working age people without disabilities. What is even more disheartening about the data is that it clearly demonstrates that persons with mental health disabilities have even lower employment rates and higher rates of living in poverty as compared to other disability groups!

The Cornell researchers go further by analyzing the root causes for these unsettling disparities. The first and foremost among these causes is the obsolete income support policies that are built on the false premise that people with particular disabilities cannot work, thereby fostering their continued reliance on government entitlements and subsidies. There must be a provision of incentives for individuals to work without the risk of losing some financial supports. It is clear that without dramatic changes, most people with disabilities will continue to be mired in a state of poverty.

UNDERSTANDING THE NEW JERSEY SYSTEM

In an effort to gain a better understanding of how current employment programs, practices, and policies impact mental health consumers, the MHANJ, along with its Public Policy Committee, undertook several

steps to identify and clarify the issues and impediments that undermine recovery and the achievement of economic independence. These steps included conducting forums with consumers and providers of employment services about employment related issues, a review of current standards and regulations governing partial care services (including employment and prevocational activities) and partnering with the NJ Consumer Advocacy Partnership to conduct a consumer satisfaction survey of partial care services. Additionally, MHANJ invited numerous presentations by speakers from the SSA, DVR, and employment related services, as well as policy leaders from the John J. Heldrich Center for Workforce Development, to testify at the Association's Public Policy Committee meetings.

From these efforts, it became apparent that the MHANJ's findings were consistent with those identified by the Cornell Research Institute – that current work related programs and policies designed to assist the disabled to transition from public entitlements to economic self sufficiency are ineffective and require significant and earnest reform.

Major disability groups including the developmentally disabled, mentally ill and the physically disabled require and deserve a system that meets their needs to become productive and valued members of today's society. The fragmentation and patchwork of programs throughout the Federal and State government do not meet these needs.

A summary of feedback from the MHANJ consumer and provider forums includes the following information.

Consumers enumerated a number of issues about employment related services that included:

- a lack of meaningful work related activities;
- fear of relapse due to stressors on a job;
- not making enough money to go off of SSI/SSDI or rental assistance;
- employers who are fearful of hiring the mentally ill;
- some staff treating consumers like children and having negative attitudes; and/or low expectations for the consumers' recovery.

Some of the major issues identified by providers included:

- pre- employment services currently not part of all levels of the system;
- the number of Supported Employment programs is inadequate to meet the need;
- regional job readiness programs are needed;
- evaluations are not consistent and result in multiple evaluations;
- One-Stop Centers are under-utilized by mental health consumers;
- services for persons with co-occurring substance abuse issues do not exist.

Feedback from providers and consumers involved in employment related programs indicate that there are many areas of agreement. Specifically, areas of agreement included:

- consumers fear the loss of benefits/entitlements;
- lack of education about how benefits can be protected and where to get help finding employment;
- the need to have supported education services connected with vocational and employment goals and evaluations;
- continuing support needed pre and post employment;
- lack of state-of-the art technology to develop skills that match employment opportunities.

Even though the consumers and providers emphasized different areas, they both agree that the system requires dramatic changes to meet the needs of the disabled.

MHANJ RECOMMENDATIONS

The MHANJ is recommending that the following steps be taken toward reforming employment/vocational services to insure that persons with mental illness are included in what we all aspire to be – productive and self-reliant members of our communities:

- ◆ The establishment of leadership by state government in incorporating the employment needs of people with disabilities into workforce development.

- ◆ More effective and comprehensive public awareness campaigns which promote the work capabilities of all persons with disabilities. For mental health in particular these efforts should be coordinated with the Council on Stigma.
- ◆ Development of consistent coordinated policies governing employment related services by the various State and Federal agencies responsible for administering employment, vocational and entitlement programs. One possibility is to explore the integration of the Department of Labor (One-Stops, DVR) and the Department of Human Services' mental health service providers (partial care, ICMS, PACT, SE) through the creation of a liaison system to promote seamless linkage for consumers.
- ◆ The provision of personal support that ensures that eligible persons can work at some level, if even part-time or intermittently, without jeopardizing necessary Social Security Disability and/or other State support payments.
- ◆ Establishment of a major focus on pre-employment and post-employment services, including the enhancement of supported employment services.
- ◆ The development of standardized evaluations that follow the client throughout the service system.
- ◆ Access to health care without regard to employment status.
- ◆ The provision of support services that are well coordinated, easy to navigate and tailored to meet the individual's needs.
- ◆ The goal of employment programs should be to promote self-sufficiency through work which provides a reasonable standard of living.
- ◆ The availability of more peer mentors and life coaches in employment related programs.
- ◆ An integrated approach to employment and educational services.

SUMMARY STATEMENT

Employment should be a priority at all levels of care in the mental health system, beginning with hospitalization and extending to discharge planning, and outpatient treatment, as well as partial care and case management programs. The Mental Health Association believes that significant changes must be made in programs that provide and/or support employment related services to persons with mental illness and that these changes must reflect the values embedded in the wellness and recovery movement, promote economic self-sufficiency, and as importantly, increase the standard of living for consumers. Without these changes and reforms persons with mental illness will continue to live in poverty, be underemployed, live in conditions that undermine the achievement of their highest potential and will be denied an important part of the American dream.