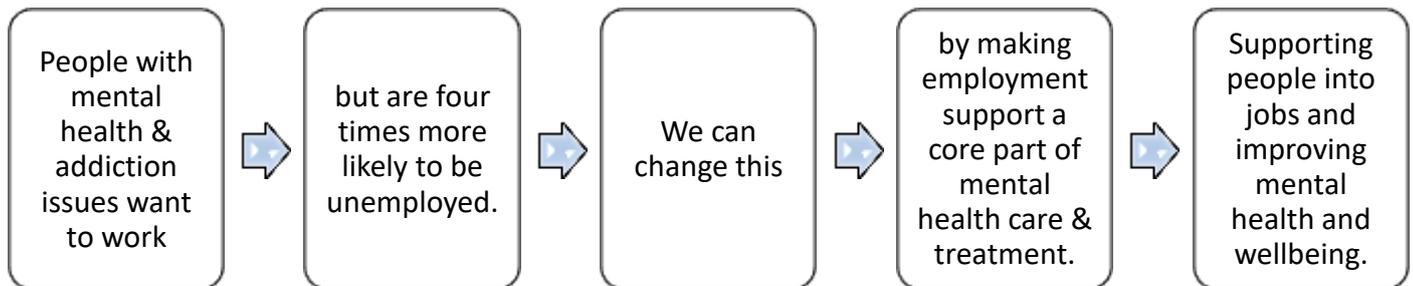


Employment support in mental health & addiction care and treatment

An evidence briefing for political parties



We know what works. It is now time to rapidly scale up access to employment support in GP clinics and mental health centres.

People with mental health or addiction issues have incredibly low rates of labour force participation and make up the largest group claiming welfare benefits for health or disability reasons. These numbers are growing rapidly.

This employment inequity is worse for Māori and Pasifika populations with mental health or addiction issues, and for people in contact with secondary mental health and addiction services (OECD, 2018).

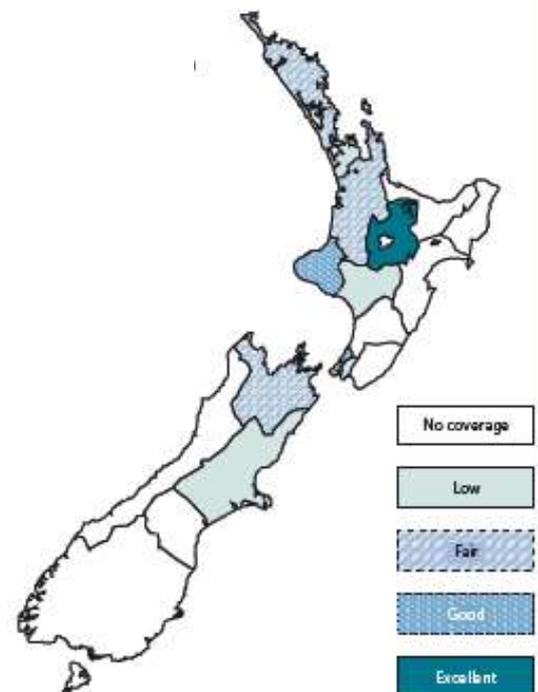
We know what works. It is now time to scale up.

Thirty years of rigorous international research combined with 15 years of delivery experience in Aotearoa New Zealand have found that the most effective way to support people into jobs and improve mental health and wellbeing are when employment support services are integrated with mental health and addiction care and treatment. Employment support is a health intervention, alongside medications and talking therapies (Poulton et al., 2020).

These proven evidence-based practices are called **Individual Placement and Support (IPS)** employment support services, and provide intensive, culturally led and person-centred employment support in health treatment settings.

Current access to employment support integrated with mental health care and treatment is uneven across the country, with no integrated employment support programmes in half of DHB regions.

IPS employment support programme coverage by district health board region



Suggested actions to achieve scale-up

New roles

- Establish employment support in secondary and primary care mental health and addiction services.

Training & technical assistance

- Deliver *'Let's talk about mental health and work'* training to mental health and addiction practitioners and Work and Income case managers.
- Provide implementation support to ensure effective integration of health and employment support services.

Joint purchasing

- Whilst health leadership is needed to ensure the delivery of integrated employment support in health settings, both the Ministry of Health and the Ministry of Social Development are crucial to the successful delivery of integrated employment support and mental health services at scale.

Integrated employment support is being scaled up worldwide

Aotearoa New Zealand is not alone in concentrating on an intentional scale up of access to integrated employment support programmes. In the UK, NHS England, the Department of Work and Pensions, and the Department of Health's Joint Unit for Work and Health are working together and have set targets for IPS employment support scale up. There have been two waves of central government funding, referred to as IPS Grow, for integrated employment support programme start-up, workforce development, and implementation support. NHS England have also invested in large-scale Randomised Controlled Trials of integrated employment support in addiction services, and in primary care.

In Australia, the Government has been trialling IPS employment support programmes in primary care Youth Headspace mental health centres. The initial 14 pilots are now being scaled up to 24 sites across the country. In addition, the Australian Productivity Commission is recommending the immediate scale up of employment support in adult mental health care and treatment.

Recent MSD evaluations of integrated employment support

Here in Aotearoa New Zealand, MSD has been examining the effectiveness of integrated employment support. This includes an evaluation of the Waitemata DHB and Take Charge IPS employment support trials (MSD, 2019), commissioning a systematic review of what works to support people with long-term health issues into employment (Fadyl et al., 2020), and a retrospective evaluation of the IPS employment support programmes funded through Vote Health in five DHB regions from 2016-2018 (MSD, under review).

In summary, these evaluations have found:

- for populations who have access to integrated employment support, employment outcomes align with or exceed international performance benchmarks
- of all research on what works to help people with health issues into employment, the IPS approach is the intervention with the strongest evidence base for effectiveness
- IPS employment support principles and practices address the barriers to people finding, securing and maintaining employment by integrating employment consultants with health treatment teams, offering personalised job search, financial advice and planning, and on-going support once working
- These employment support programmes can be effectively funded and delivered through partnerships between MSD and DHBs
- The principles align with Te Ao Māori, and uptake and outcomes from these integrated employment support programmes are equitable for Māori and Pasifika.

Work Counts, September 2020

For more information go to: www.workcounts.co.nz.