

# Meaningful Lives



## Supporting Young People with Psychosis in Education, Training and Employment

### Imagine a world where...

- Young people with psychosis are not stigmatised or discriminated against in education or employment because of their mental health difficulties
- Educators and employers are informed and supported in providing meaningful education and work opportunities for young people
- Young people with psychosis remain in school to complete their education and sustain paid employment surrounded by those who understand and care
- Hopes and dreams for education, training and employment are fulfilled

### The Challenge

*...can't get a job, can't get a girlfriend, can't get a telly, can't get nothing  
... it's just everything falls down into a big pit and you can't get out..."*

(Hirschfeld, 2005)

- 50% have less than 10 years of education, limiting longer term employment prospects
- At first contact, 40-50% are unemployed in first episode psychosis (FEP) (60-70% are unemployed in first episode Schizophrenia) but this figure rises dramatically to 75-95% within a year
- 20% of people with first episode psychosis have never worked
- Many young people get caught in a Government benefits 'poverty trap'
- Not working has non-financial costs in terms of loss of social capital; exacerbation of stressors; lack of a socially valued role.
- Lack of employment is a bar to other forms of social inclusion

### Potential Benefits

- Costs associated with unemployment make up over 50% of all costs associated with psychotic illnesses in Australia, USA and Europe
- Employment has been shown to significantly reduce reliance on welfare benefits.
- Successful employment is potentially associated with better management of symptoms, less hospitalisation and reduced substance use.
- Employment provides a socially valued role that has benefits in terms of identity and self-esteem.
- Employment provides a pathway to greater social and economic functioning. This directly addresses the social isolation experienced by many young people with psychosis.

### Key Principles

- All young people have a right to education, training and employment
- All young people have a right to citizenship and a basic income which is enough to live on
- All young people have the right to develop a career that gives meaning to their lives and makes use of their talents.
- Young people with psychosis should have the same educational and vocational opportunities as their non-psychotic peers

- No individual should be discriminated against or disadvantaged in relation to their educational and vocational aspirations because they have had a serious mental health difficulty
- Educational as well as vocational outcomes should be equally valued and supported in first episode psychosis

### Our Goals:

#### We aim to:

- Combat stigma, discrimination and prejudice in education, training and work settings by raising awareness about psychosis and the crucial importance of educational and vocational outcomes for longer term mental health
- Support young people to achieve their education, training and employment aspirations
- Ensure that functional outcomes, such as education, training and employment are seen as equally important in recovery as outcomes in symptom domains
- Advocate with funding agencies to appropriately fund evidence based interventions that address functional outcomes in relation to education, training and employment
- Combat factors that contribute to social exclusion and unfulfilled lives
- Encourage professional attitudes that engender hope and optimism that young people with psychosis can achieve meaningful lives
- Seek support from education, training, employment and benefits agencies to assist young people with psychosis to complete their education and procure employment

### Processes to enable this:

- Active confrontation of myths that people with mental illness typically do not want to and cannot work.
- Equal priority given to educational and work functioning as to symptom levels
- Access to evidence based vocational interventions for young people such as the Individual Placement and Support (IPS) model, for both employment and educational goals
- An active and flexible research programme to ensure the best evidence is available to support vocational interventions for young people with psychosis
- Access to specialist educational and vocational support to enable education and work goals that are sustained.
- Incentives for employment agencies to provide early and sustained support for employment goals

- Greater understanding of the processes that contribute to achieving and sustaining employment in FEP
- Greater understanding of ethno-cultural factors that have an impact on individuals' access to work, including lack of language competency, and dislocation in refugees and asylum seekers
- Employment interventions focusing on retaining and sustaining employment in addition to gaining employment
- More flexibility in employment and benefit systems to be sensitive and responsive to the episodic nature of psychosis for some young people
- Long term protection of housing and healthcare costs when coming off benefits to return to or start work
- Protection of individual rights to choose not to disclose the nature of a mental health difficulty to prospective employers

### Further information

This statement is a product of an international meeting looking at the benefits of supported employment and education in FEP which took place in London on 30th June 2008 involving clinicians, researchers, economists and policy makers from the UK, USA, Canada and Australia.

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A copy of this international consensus statement can be downloaded from <http://www.iris-initiative.org.uk/>

### References:

1. Borgele J and McGorry P Early Intervention and Recovery of Young people with Early Psychosis: Consensus Statement British Journal of Psychiatry, 2005; 187(5): 461-467
2. Hirschfeld R, Smith J, Towse P and Griffin C. What do psychiatric experiences mean for young men? A qualitative investigation. Psychology and Psychotherapy: Theory, Research and Practice, June 2005, 76, 2, 249-253
3. APA Working Group on Schizophrenia. Practice Guidelines for the Treatment of Patients with Schizophrenia, Second Edition. Washington: APA, 2004.
4. Becker DR, Drake RE. A working life for people with severe mental illness. New York: Oxford University Press, 2003.
5. Bond GR. Supported Employment: Evidence for an Evidence-Based Practice. Psychiatric Rehabilitation Journal, Sept. 2004; 27(4):345-359.
6. Killackey E, Jackson H, McGorry P.D. Vocational Interventions in First Episode Psychosis: A Randomised Controlled Trial of Individual Placement and Support versus Treatment as Usual. British Journal of Psychiatry, 2008; 193: 114-120.
7. Killackey E, Jackson H, Gleeson J, Hickie B, McGorry P.D. Ending Career Opportunity Barriers: Early Intervention and Vocational Rehabilitation in First Episode Psychosis: Empowering Genuine Outcomes. Australian and New Zealand Journal of Psychiatry, 2008; 40: 91-92.
8. Mawhood S, Johnson S. Schizophrenia and employment: A review. Social Psychiatry and Psychiatric Epidemiology, May 2004; 39(5):327-330.
9. Marwaha S, Johnson S. Stages and Experiences of Employment among People with Psychosis: A Qualitative Descriptive Study. International Journal of Social Psychiatry, Dec 2005; 11(3):193-204.
10. National Institute of Clinical Excellence. Schizophrenia: Full national clinical guideline on care interventions in primary and secondary care. London: Laskell and the British Psychological Society, 2003.
11. Nuechterlein KH, Subotnik KL, Turner ER, Wiggins J, Becker DR, Drake RE. Individual placement and support for individuals with recent-onset schizophrenia: comparing supported education and supported employment. Psychiatric Rehabil. 2006; 10(4): 305-316.
12. Briskin M, McNeil S, Finn M, Sakuma M, Pankov R, Singh SP. What are the benefits of evidence-based supported employment for patients with first-episode psychosis? Psychiatric Bulletin, Aug 2004; 28 (8):281-284.
13. Royal Australian and New Zealand College of Psychiatrists Clinical Practice Guidelines Team for the Treatment of Schizophrenia and Related Disorders. Australian and New Zealand Journal of Psychiatry, 2005; 39:1-30.
14. SANE. Schizophrenia Care: An analysis of the burden of schizophrenia and related suicide in Australia. SANE, Australia, 2002.
15. Volk IO, Benbow RP, Shi L, et al. The Economic Burden of Schizophrenia in the United States in 2002. Journal of Clinical Psychiatry, Sep 2005; 66 (9):1222-1229.

### Introduction

The Early Psychosis Declaration (2005) set out 5 key objectives for action to provide much needed support for young people who develop psychosis, including raising community awareness about psychosis and the promotion of recovery and ordinary lives.

This International Consensus Statement sets clear goals for what we would like to achieve in relation to employment and educational outcomes for young people with psychosis. We highlight current challenges and potential benefits of supporting young people with psychosis to complete their education and gain employment. We identify key principles and processes by which these goals may be enabled. This requires a commitment for change in the way we support young people with psychosis and how we work together across health, benefits, education and employment agencies to successfully enable young people to achieve meaningful lives.