Preface

Mental health disabilities are burgeoning and are repeatedly implicated when describing the challenges our society faces in global health and the societal burden of disability, now and in the future. Central to these issues is the work impairment associated with mental health problems. Research suggests that the numbers of individuals with mental health disabilities both in and out of the workforce are large and growing. Relative to physical disabilities, mental health disabilities have been the focus of vocational and occupational interventions and related research much more recently. Therefore our understanding of the most effective ways to intervene to improve work outcomes among individuals with mental health disabilities is more tentative, more fragmented, and less evidence-informed than in the physical rehabilitation world.

Mental health disabilities are repeatedly cited as reasons not only for unemployment but also for underemployment, lost productivity in the workplace (presenteeism and absenteeism), reduced quality of life, exploding medical costs, and public and private insurance programs. Historically, those involved in the provision of rehabilitation services have relied on the medical model of care for mental health disabilities with a correspondingly heavy emphasis on establishing a diagnosis and treating psychiatric symptoms. Such approaches to care may result in a stabilization of mental health symptoms, but have not been demonstrated to be sufficient for improving work function. Recent research has enhanced our understanding of the relationship between the functional impairments that individuals with mental health disabilities face in various life domains, in particular the role of worker. To intervene effectively and improve work outcomes, we must go beyond the medical model, with its reliance on diagnosis, symptoms, and stabilization, to incorporate an emphasis on work function, work environment, psychosocial factors, and employment outcomes. Our laws, norms, and cultural values also direct us to strive for full inclusion of individuals with all disabilities, including mental health disabilities, in the workplace. Not only is such inclusion mandated by existing laws and societal expectations but it also makes sense economically, from the employers’, compensation systems’, health care, and societal perspectives.

While our understanding of work outcomes for individuals with mental health disabilities is growing, there is, at the same time, no overarching, multisystem framework for conceptualizing and implementing interventions that promote the
engagement and retention of individuals with mental health disabilities in the workforce. Over the past few decades, there has been a proliferation of model development, research, and evaluation of vocational rehabilitation approaches for mental health disabilities. These efforts have moved the field to a somewhat more integrated and functional approach, but have not been guided by a conceptual framework. An integrated, biopsychosocial approach to vocational rehabilitation in mental health that combines clinical and occupational interventions is needed to address the complexities of the problems faced by persons with mental health disabilities and the equally complex work environments in which they are expected to function.

Despite the growing knowledge generated by recent studies, few research findings have been integrated and translated into policy, clinical or vocational rehabilitation practice, or new paradigms of service delivery. There is no accepted framework for assessing the work function of individuals with mental health disabilities, for prevention or early intervention of those working who become disabled, or for return to work services. Vocational and clinical rehabilitation professionals, employers, case and disability managers, and those involved with the work life of individuals with mental health disabilities need information on effective, evidence-based, integrated clinical and vocational interventions, as well as disability management and prevention approaches specifically tailored for individuals with mental health disabilities. Such information is needed because, unlike many medical conditions, mental health disabilities affect multiple areas of functioning in complex ways, including the domains of social, interpersonal, cognitive, and family, in addition to the vocational domain. Further, studies repeatedly demonstrate that individuals with mental health disabilities fare worse than individuals with other disabilities when they do receive vocational rehabilitation interventions. Such complexities in terms of the disability itself, the effectiveness of existing vocational rehabilitation approaches, and the ecology of the workplace call for an integrated, multisystem approach to maximize positive work outcomes. In this book, we attempt to systematically integrate existing knowledge, frameworks, and interventions that can assist clinical and vocational rehabilitation and related professionals to provide best or evidence-informed interventions for a range of mental health disabilities.

Complicating the complexities of mental health disability are the negative attitudes that prevail in society at large and in the workplace. Studies suggest that stigma remains a significant factor in the rehabilitation process and in the promotion of full inclusion of individuals with mental health disabilities in the workplace. Social stigma associated with mental disorders may be more disabili
disability, there are few systematic or legally defensible ways of identifying those at risk for significant problems and intervening with them early, before chronic disability and unemployment occur. This lack of a coordinated approach continues to be the norm, despite consistently promising outcome data on the use of an interdisciplinary, clinically, and vocationally integrated approach to services. The aim of this interdisciplinary book is to bridge this gap, and to discuss new developments in approaches to the clinical and vocational rehabilitation of individuals with mental health disabilities.

When we refer to individuals with mental health disabilities and work accommodations, what do we mean and what is the scope of our definitions? Throughout the book, authors of the chapters use the term “people with mental health disabilities” to refer to individuals with significant mental health problems, psychiatric disabilities or conditions, acquired and traumatic brain injuries, or cognitive impairments. All of these terms are meant to describe individuals who have significant impairments due to mental health conditions (e.g., anxiety and mood disorders, severe mental illness, such as schizophrenia and bipolar disorder, and brain trauma) that interfere with functioning and employment and, in particular, where reasonable accommodation or protection under the Americans with Disabilities Act or other legislation may be indicated. We intend this book to cover an array of mental health impairments broadly and, whenever possible, from a cross-diagnostic perspective, thus bridging the traditional separation between emotional and neuropsychological conditions that are often associated with different rehabilitation models and approaches. We also intend for the reader to obtain a broad view of accommodations in the workplace. We describe many interventions that go beyond the legal definition of reasonable accommodations (requiring disclosure of disability) to a wide array of system- and individual-oriented interventions that can assist persons with mental health disabilities to obtain, retain, or advance in employment despite their disability.

The book focuses on the current science related to work disability among individuals with a variety of mental health impairments, including new research and clinical and occupational models. Our book relies on the concepts of “knowledge exchange” that strive to integrate the recent advances in knowledge about the prediction of occupational disability and intervention in mental health. Diversity among persons with mental health disabilities has been recognized from diagnostic, functional, sociodemographic, and psychological perspectives. Clearly, individuals with mental health disabilities vary significantly in their functioning, ranging from those who acquire a moderately disabling condition while at work to individuals who because of a mental health disability have not entered the workforce.

Our book constitutes a state-of-the-art, integrated, research- and evidence-based resource to facilitate the transfer of knowledge and the development of new, effective clinical and occupational practices and policies for individuals with mental health disabilities. It synthesizes and critically reviews current research on mental health disabilities and provides broad epidemiological and economic information with implications for the identification of those at risk, intervention, case management, and disability prevention.
The book focuses on the functional and occupational impact of mental health disabilities and the most effective intervention approaches to help individuals become engaged in and retain employment or return to work. The conceptual and methodological issues and controversies, together with directions for future research and practice, are also highlighted. The book is further complemented by “how to,” practice-oriented information, with illustrations of best organizational and rehabilitation practices, solutions, and case scenarios.

The chapters in this multidisciplinary book were written by distinguished researchers and providers of services from the USA, Canada, the UK, and Australia, all recognized experts in the fields of occupational and vocational rehabilitation, medicine, psychology, and neuropsychology, to provide the best “state-of-the-science” information about mental health disabilities. Implications for best and evidence-informed practices in clinical and vocational rehabilitation are drawn from the body of knowledge of each one of the biopsychosocial conditions and from integrative themes cutting across these seemingly disparate conditions.

The intended readers of our book include vocational and occupational providers of all kinds and at all levels, including occupational and rehabilitation physicians, vocational rehabilitation providers, occupational therapists, psychiatrists, psychologists, neuropsychologists, and social workers who assist individuals with mental health disabilities to choose, get, or keep work. Nurses, particularly occupational health nurses and nurse case managers, are also the intended audience, as are occupational therapists, physiotherapists, as well as vocational rehabilitation and disability management professionals. Human resources, labor relations, and management professionals who deal with the growing challenge of mental health disabilities in the workplace, and the management consultants and disability insurance and compensation professionals who work in the disability management and disability determination fields will find this book beneficial as well.

Moreover, the book provides vital background information for policy makers and mental health advocates in healthcare, Social Security, human resources, employment fairness, and disability rehabilitation entitlement across different levels of government, compensation, disability insurance, and healthcare systems. Importantly, we provide the reader with the knowledge of concepts and empirical evidence to guide their practice, as well as, in some chapters, a “toolkit” for serving individuals with mental health disabilities.

The book consists of the following major sections. Part I covers Conceptual Issues in Job Accommodations in Mental Health. This section provides a comprehensive overview of the legal, epidemiological, and economic considerations and ramifications in the area of mental health disability. Part II, Mental Health Disabilities and Work Functioning, is designed to provide important information about the predictors of work capacity and work outcomes for individuals with mental health disabilities and how diagnostic categories such as anxiety, depression, psychosis, brain injury, and personality disorders affect occupational functioning. Part III, Employment Interventions for Persons with Mental Health Disabilities, leads with a critical discussion of disclosure in the workplace, including the why and how of effective disclosure of one’s mental health disability in a work context.
The rest of this section is devoted to descriptions of best practice interventions for individuals with anxiety and mood disorders, serious mental illness, mild cognitive disorders, and traumatic brain injuries. We conclude this section with two important approaches that focus on the system-level issues related to improving work outcomes for individuals with mental health disabilities.

Part IV focuses on *Barriers and Facilitators to Job Accommodations in the Workplace*. We examine employer attitudes toward accommodations, barriers, and facilitators in providing accommodations, and the role of stigma in work and job accommodations. In Part V, *Evidence-Informed Practice in Job Accommodation*, we examine the role of social processes, organizational culture, and known best practices in providing accommodations. Finally, in Part VI, *Future Directions*, we tie these preceding chapters together in an integrative article that weaves together what we know and do not yet know about improving employment outcomes for individuals with mental health disabilities. Current and future research, policy, and practice directions emerge from this overview.

It is likely that the reader of this book will find that some of the chapters offer disparate explanations or conflicting perspectives. Given the state of our knowledge about work functioning and vocational rehabilitation for individuals with mental health disabilities, this is to be expected. To some extent, it is a function of the multidisciplinary perspectives of our experts. That is, some experts focus on the legal aspects of disability, some on the biomedical, neuropsychological, or psychological aspects, while others focus on the ecological and workplace aspects of disability and accommodation. Our book attempts to provide best practice information that improves the work outcomes of individuals with mental health disabilities without regard to theoretical underpinnings.

We would like to thank all of the authors of the book chapters for their unique and valuable contributions, and for helping to realize this book on work accommodations and retention for individuals with mental health disabilities. We would also like to acknowledge the support and assistance of many colleagues on both the research and clinical sides of occupational disability through discussion, exchange of information, and suggestions.

In addition, we would like to thank Ms. Alanna Winter and Ms. Alison Stewart, Research Coordinators from the University of British Columbia, for their technical and research contributions to the development of this book. Ms. Mihiko Maru and Ms. Emily Green from the Center for Psychiatric Rehabilitation provided invaluable research and editorial help as well. We also appreciate ongoing support from our publishers at Springer.

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Work Accommodation and Retention in Mental Health
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2011, XXI, 481 p., Hardcover
ISBN: 978-1-4419-0427-0