Quick Takeaways

- Employment services are an important component of integrated care for homeless people with severe mental illness.
- Programs that combine housing, intensive supportive services, and employment increase the employment potential of this population, helping them reintegrate into their communities.

Summary

This study examined the vocational outcomes of individuals with severe mental illness who were enrolled in the Access to Community Care and Effective Services and Support (ACCESS) program. The researchers interviewed 4,778 participants at the time of enrollment and at three and twelve months post-enrollment. They assessed a number of factors, including history of homelessness, psychiatric history, substance use, and employment status. The analysis focused on three areas: 1) labor force statistics; 2) predictors of employment; and 3) services and employment status.

Findings

All of the labor force outcomes except one, hours worked per week, showed significant improvement between baseline and three months and between three and twelve months. The number of hours worked per week increased at both intervals, but only the three to twelve month change was significant. The percentage of employed participants who worked full time increased dramatically, with small but significant changes in other outcomes including the percentage of participants who worked in the previous 30 days; mean hourly wage; and estimated mean monthly income.

Several common factors predicted employment at 12 months, regardless of services received. Participants who were younger, male, unmarried, and college-educated were more likely to be employed. Additionally, successfully employed individuals were found to have a shorter lifetime history of homelessness; to be diagnosed with a mental illness other than schizophrenia or psychotic disorders; and to never have been hospitalized for psychiatric treatment.

The number of participants in the ACCESS program who were employed increased slightly over the 12 month period, whether they received employment-related training or assistance during the program or not. Interestingly, although more than half of participants expressed a desire for vocational and job training services, less than ten percent received them. However, participants who received these services were on average more likely to find employment by the end of the 12 month period.
Conclusion

Many programs that work with formerly homeless persons with severe mental illness wait to provide employment services until housing, medical and other needs are fulfilled. However, a multifaceted approach to care – one that provides housing, support services, and employment services from the outset may promote self-efficiency and lead to long term stability.