



NATIONAL COALITION *for* HOMELESS VETERANS

“Cognitive Impairment as Barrier to Engagement in Vocational Services Among Veterans With Severe Mental Illness”

O’Connor, Maureen K., Lisa Mueller, Alice Van Ormer, Robert Drake, Walter Penk, Robert Rosenheck, Alicia Semiatin, and Charles E. Drebing / [Full Report](#)

Quick Takeaways:

- Cognitive impairment, paired with severe mental illness (SMI), is a barrier to employment, and to seeking vocational services (VS) which would help veterans return to the workplace.
- Early screening for cognitive impairment, and an integrated plan combining mental health services and VS would “improve vocational outcomes when compared with traditional models, resulting in significantly greater work productivity, more hours worked, and greater wages earned.”

Study:

A total of 179 veterans were recruited from VAMCs in Bedford, MA and Dallas, TX, with participants identified as having SMI, vocational needs, and meeting a minimum threshold on the Mini-Mental State Threshold. For each participant, a five-year work and salary history was collected. Researchers collected from each participant a mental health history with a focus on seeking and utilizing VS pathways-to-care. Information collected included the onset of SMI; recognition of a problem by the participant or family member; seeking professional help; and participating in VS.

The cognitive functioning of participants was measured through the use of the Trail-Making Test, Part B (TMT-B). TMT-B measures a number of cognitive processes, and presents a “predictive measure of generalized cognitive impairment.” Participants were sorted into three groups based on the TMT-B: non-impaired, mildly impaired, and moderate to severely impaired. After sorting, 104 participants were classified as non-impaired, 23 as mildly impaired, and 52 as moderately to severely impaired.

Findings:

Those with moderate to severe cognitive impairment took longer to progress through pathways-to-care, with an average of 4.44 years. This remained consistent in each stage of pathways-to-care, from recognition of a problem to VS participation. Even after receiving treatment that managed cognitive impairment, this group took longer to find employment.

Conclusion:

Cognitive impairment is associated with delayed employment services, including VS. Earlier education and screening are needed during the VS intake process to identify those who may suffer from cognitive impairment and provide additional resources and testing. An integrated plan which combines mental health services and vocational services would provide a stronger path back to employment for veterans.

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