

What is the evidence of successful interventions that increase employment and livelihood participation for people with psychosocial disability?

The question and the problem

Globally, there are about one billion people living with either a moderate or severe disability, of which a substantial proportion of people live with psychosocial disability. Psychosocial disability is common in both men and women, but particularly high among adolescents and adults across the whole age range. In low- and middle- income countries (LMICs), poverty and social disadvantage are major concerns, and both issues can worsen the experience of psychosocial disability. In addition, in contexts where emergencies like natural disasters, war or disease outbreaks occur, there is a substantial increase in mental health conditions seen. Article 27 of the United Nations' Commission on the Rights of Persons with Disabilities (UNCRPD) explicitly focus on work and employment. Despite ratifications of the UNCRPD by several nations, people with psychosocial disability continue to face discriminations and inequalities to participate in [work and employment](#) when compared to people with sensory disability or people without disability. In this brief, we aim to summarise the evidence around interventions that increase employment and livelihood participation for people with psychosocial disability.

Recommendations

- **Recommendation #1:** Explicit inclusion of people with psychosocial disability in all national policies and programmes on disability within the UNCRPD framework.
- **Recommendation #2:** Address workplace stigma and discrimination around people with psychosocial disability using social contact interventions.
- **Recommendation #3:** Affirmative action such as workplace reasonable accommodation should be individualised based on the needs of people with psychosocial disability.
- **Recommendation #4:** People with psychosocial disability should have access to effective and affordable mental health services. Multi-stakeholders should co-ordinate their efforts to support people with psychosocial disability in employment opportunities.
- **Recommendation #5:** Allocate funding to implement Supported employment (SE), particularly 'Individual Placement and Support' (IPS), for people with psychosocial disability.
- **Recommendation #6:** Further develop the evidence base to inform and guide policymaking.

“Create awareness about the requirement to provide reasonable accommodations in employment amongst different stakeholders, including employers in both the private and public sector, and to take steps to eliminate mental disability stigma.”

- (Ebuenyi 2019)

Challenges

Challenge #1: A lack of clear and operational definition of psychosocial disability can undermine rights-based efforts.

- The fact that many psychosocial disabilities are associated with episodes of relapse, may vary in level of support required, and may be 'invisible', means that employers have struggled to formulate clear policies, compared to the area of physical and sensory disabilities.
- Legal requirements and policies in many countries in relation to workplace rights for people with psychosocial disability fall far behind those with physical and/or sensory disability, and psychosocial disabilities in many countries remains outside of out-dated official definitions of disability.

Challenge #2: Stigma and discrimination can take several forms and can adversely have an impact for people with psychosocial disability to effectively participate in employment on an equal basis with others.

- Attitudinal barriers such as stigma and discrimination remain primary challenges for inclusion and participation of people with disability in different spheres of life including education, employment, and health. Institutional or systemic discrimination and assumed competency or capacity of people with psychosocial disability is a common barrier for inclusion. Perception that people with psychosocial disability do not want to, or cannot, work at all is still prevalent. Internalised stigma can lead to a lack of confidence, and the resulting low-esteem has also been found to negatively affect people with psychosocial disability's ability to secure and retain employment.
- People with psychosocial disability are more likely to have experienced discrimination while securing employment as well as retaining their current employment. Additionally, people with psychosocial disability also tend to report anticipated discrimination that prevent them from proactively searching for work or returning to work following a period of absence due to worsening of mental health symptoms.
- Socio-cultural factors such as gender roles and local beliefs and practices put women at higher risk of experiencing workplace discrimination. Furthermore, women with psychosocial disability are more likely to report both experienced and anticipated discrimination compared to men with psychosocial disability.
- Evidence around effective workplace anti-stigma interventions for people with psychosocial disability have some indication of positive impact on employees' knowledge, attitudes, and supportive behaviour towards people with psychosocial disability. One review reported the following intervention types: Educational (e.g. presentations, self-study, public campaigns); Communication (e.g. discussion, reflection, posters, workshops); Technology (e.g. videos, websites, instant messaging); Creative (e.g. film screening, role play, drama), Social contact (e.g. direct, simulation, video); and Therapeutic (CBT).

Challenge #3: Assessing workplace accommodation needs are complex and there is no one-size-fits-all solution

- Vocational success for persons with psychosocial disability is characterised by the positive fit between employees' employment interest and skills, the tasks, and the workplace environment. Workplace accommodation need to address the environmental and structural barriers such as quiet office space, flexibility of working hours, and frequent breaks. Additionally, occasional disruption of work and periods of time off need to be managed. Facilitating stable mental health through a supportive work environment can help individuals maintain productivity.
- People with psychosocial disability may have unique workplace accommodation needs depending on the stage of employment such as recruitment, selection, social integration, and performance management. Furthermore, experience of negative symptoms can interfere with their cognitive or sensory processing skills that can have an adverse impact on their work performance. This needs to be recognised and not result in poor performance reviews.
- Experienced discrimination: participants might also be unwilling to disclose their mental illness on account of the heightened stigma against mental illness in the setting which might work against securing reasonable accommodation in employment.

Challenge #4: Multi-sectoral approach including integration of mental health and employment services is needed to address the multiple barriers faced by people with psychosocial disability.

- One review highlighted the following facilitating factors of employment among people with psychosocial disability: stability or reduced severity of mental illness; use of mental health services; and resolution of psychological conflicts.
- Internalised stigma experienced by those not in employment can undermine their abilities to seek help as well as their motivation to explore employment opportunities. Similarly, concerns about disclosure may impede help-seeking and service use. Psychological interventions are recommended to promote coping skills, increase self-esteem, and improve confidence to address internalised stigma.
- Effective employment models alone would not address the employability issues among people with psychosocial disability unless the barriers to employment such as lack of efficient mental healthcare, education, and stigma are addressed. This needs multi-stakeholder co-ordination between various sectors including health, education, and employment.

Challenge #5: Models of employment - Individualised planning and support is essential to obtain and retain employment

- Interventions to obtain and maintain employment for people with psychosocial disability depends on the type of employment model. Commonly used models include: Prevocational training (e.g. Social skills training, Cognitive training); Transitional employment (e.g. Sheltered workshop); Social enterprise; The Clubhouse model; and Supported employment.
- Evidence coming mostly from HIC have found positive effects of supported employment, particularly Individual Placement and Support (IPS) and on several employment outcomes such as entry to competitive employment, number of days in employment, and the time to obtaining first competitive employment opportunity. In Supported employment, people with psychosocial disability are placed in a competitive employment first and then trained through hands-on experience. The emphasis in IPS is on 'place-and-train' compared to the 'train-and-place' approach adopted in the traditional employment programmes such as the prevocational training model.
- The evidence around augmented supported employment programmes, combined supported employment with other interventions such as social skills training, is mixed. As augmented supported employment is a very heterogeneous group of programmes, further research is needed to confidently confirm the specific combinations of additional interventions along with support employment for people with psychosocial disability in LMICs.
- The majority of opportunities for people with psychosocial disability (as with most of the workforce) is for work in non-formal sectors such as agriculture or self-employment. Self-employment through farming was reported as a major form of employment for people with psychosocial disability. It should be noted though, that people with psychosocial disability should be given equal opportunity to aspire to the same range of careers as their peers.
- Lack of finance and government support have been reported as a major barrier to provide supported employment and self-employment of people with psychosocial disability in LMICs. This informal sector is hard to regulate and challenging to influence on a large scale through centralised programmes. There is scope for [Social protection systems](#) and other financial assistance, including cash transfers and integrated benefits packages, to address this barrier.

How did we find answers

We conducted a review of reviews, examining systematic, narrative, and other types of review evidence on the successful interventions to increase employment and livelihood opportunities for people with psychosocial disability. Recommendations are mostly based on reviews of literature from high income countries. Three reviews focussed on LMICs while two reviews specifically included studies from the African region. Additionally, we referred to two primary studies. One study explored the perspectives of mental healthcare providers on pathways to improved employment for persons with mental disorders in Kenya and Nigeria. Another study conducted in China used a clustered randomised controlled trial to assess the benefits of supported and augmented employment programmes.

Evidence-informed Recommendations and Actions

Key Recommendations	Actions
Explicit inclusion of people with psychosocial disability in all national policies and programmes on disability with the UNCRPD framework.	<i>Explicitly define psychosocial disability in all disability related policies and programmes. Ensure that anti-discrimination laws are effectively implemented by employers by creating an awareness of their legal obligations to protect the rights of people with psychosocial disability. Furthermore, organisations should explicitly include disability, giving equal considerations to both people with physical, psychosocial, and other hidden disabilities, in formal diversity statements and policies, and day-to-day practices.</i>
Address workplace stigma and discrimination around people with psychosocial disability using social contact interventions.	<i>Provide tailored anti-stigma programmes at workplace to improve employees' mental-health knowledge. Social contact interventions delivered face-to-face have been found effective in improving stigma-related knowledge, attitudes, and behavioural intentions in the short-term. However, the evidence around the long-term benefits is lacking. Essential features of the social contact interventions, between employers and employees, include: i. mutual respect; ii. active engagement intending to achieve a common goal; iii. interactive; iv. discussions need to be culturally appropriate; v. contact should aim to eliminate common myths about people with psychosocial disability; and vi. contact facilitated by a senior member of the organisation. Job Club group interventions provide the opportunity of peer support to cope with stigma, and have been found to increase personal control, self-esteem and job search self-efficacy.</i>
Affirmative action such as workplace accommodation should be individualised based on the needs of people with psychosocial disability.	<i>National legislation on reasonable accommodations should be enforced so that people with psychosocial disability can exercise their human rights to access inclusive and equitable employment opportunities. Employees look for personal preferences and perceived fit. People with psychosocial disability should be encouraged to explicitly disclose their disability so that employers can then work together with their employees to provide reasonable accommodation needs. When there is greater interpersonal and organisational trust people with disability are more likely to disclose their disability. Workplace accommodation forms a major component of successful models of employment such as the supported employment programmes. The strategies from the employer perspective can include offering sufficient time to assist, orient, and support employees with psychosocial disability to facilitate integration, acceptance, and satisfaction, and to promote the goals and interests of workers and employers; providing tailored training, appropriate feedback and flexible working schedules. Additionally, Social contact programme should be provided to improve interpersonal relationships so that persons with psychosocial disability have a supportive supervisor who is understanding, fair, and give constructive feedback; and friendly colleagues that are reassuring, inclusive, cooperative.</i>

People with psychosocial disabilities should have access to effective and affordable mental health services. Further, multi-stakeholders including mental health professionals and employment specialist should co-ordinate their efforts to support people with psychosocial disabilities to stay in work and to access employment opportunities.

Governments should improve health care financing including mental health care so that universal health care is available for everyone in LMICs. Mental health services should work in partnership with multiple stakeholders including employment specialist, and Organisations for people with disability, people with psychosocial disability, to support people with psychosocial disability to stay in work and to access employment opportunities. Integrated employment and wellness programme can support people with psychosocial disability to manage symptoms within the work context such as coping and problem-solving strategies to deal with stressors at work. Directive emotional support, having a focus on thoughts and feelings should be offered when the support provider assumes responsibility for tasks or choices on the behalf of the recipient. Non-directive instrumental support such as those provided by employment specialist during the initial employment process can have positive impact on employment outcomes, e.g. providing practical guidance on writing a CV, finding suitable employment, or job interview preparation.

Strengthen the social protection programmes for people with psychosocial disabilities as well as allocate funding to implement successful models of employment such as the 'Individual Placement and Support' programme for people with psychosocial disabilities including for those with severe mental illness.

Offer social welfare and protection programme for people with psychosocial disability. It may provide funding to engage in small business or informal work which is useful in promoting recovery. Organisations should proactively partner with vocational agencies and community-based organisations that specialise in supporting the employment needs of people with disability. Individual Placement and Support (IPS) is a type of supported employment that has been effective in high income countries particularly for people with severe mental illness, such as schizophrenia and bipolar disorder. Core principles of IPS include: i. Focus on the goal of competitive employment; ii. Support all individual expressing an interest to work, irrespective of factors such as readiness to work, work experience, and symptoms; iii. Respect individual choices, rather than employment specialist's expertise or judgments; iv. Initiate the support as soon as the individual expresses their interest to work, rather than providing lengthy pre-employment assessment, training and counselling; v. Targeted job development process should be initiated by the employment specialist through regular engagement with the potential employer and the job type based on individual's preference and interest; vi. An integrated employment and mental health services; vii. Personalised benefits counselling about financial implications such as social protection schemes and other government entitlements; viii. Duration for the tailored support should be based on individual's needs and preferences.

Further develop the evidence base to inform and guide policy making

Future research should be undertaken to establish the best strategies that work to improve the employment opportunities for people with psychosocial disability in LMICs. This can comprise of supported employment, combined supported employment and additional components such as social skills training and cognitive training. Further longitudinal observational and intervention studies should assess the impact of contact interventions to eliminate stigma and discrimination in the workplace. Similarly, future studies should review the actual implementation of laws on reasonable accommodations, and its impact on inclusive employment opportunities for people with psychosocial disability. Longitudinal studies should further explore the extra cost borne by people with psychosocial disability resulting directly due to disability in comparison to people without disability. In addition to employment related outcomes such as employment status, time to employment, tenure and length of employment, and income, evaluation studies should measure and report non-vocational outcomes such as quality of life, global functioning, and general mental health.

Policy priorities

A systemic approach is required to increase employment opportunities for people with psychosocial disability. This necessitates a multisectoral approach including social intervention to reduce stigma reduction, better mental health care, inclusive employment policies, and government commitment to health care and social welfare. Allocate sufficient funding to implement supported employment programmes such as the Individual placement and support. Furthermore, engage with multiple stakeholders including academic researchers; people with psychosocial disability, and their respective civil society organisations; public, and private sectors; and funding agencies to commission and improve evidence base as identified in gaps & research needs.

Conclusion

Employment rates of people with psychosocial disability in LMICs is very low. While the evidence base on what works to promote employment for people with disability in LMICs is very poor there is potential to implement effective interventions based on evidence from high income countries, particularly social contact interventions to address workplace stigma, and supported employment programmes to improve employment opportunities in formal and informal employment sectors. Finally, further research should be conducted to improve the evidence base of successful employment interventions in LMICs, particularly the unregulated and informal sectors.

Acknowledgements

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GAPS & RESEARCH NEEDS

Primary research using robust methodologies such as clustered randomised control trial should evaluate the effectiveness and cost-effectiveness of supported employment (e.g. Individual Placement and Support), and augmented supported employment (e.g. Integrated Supported Employment) compared to traditional vocational training to promote inclusive employment for people with psychosocial disability in LMICs.