REDUCING EMPLOYMENT BARRIERS FOR PEOPLE LIVING WITH A MENTAL ILLNESS

Using Evidence-Based Practices to Inform Canada’s Mental Health and Employment Policy Framework

Discussion Paper
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Background

The value of quality employment for the maintenance and improvement of mental health for all people is clear and widely understood. Employment not only provides a paycheck, but also a sense of purpose, opportunities to learn and a chance to work with others. More importantly, work offers hope, which is vital in the recovery from mental illness. Research shows that individuals living with a disability (including those living with a mental illness) are as - if not more - qualified, reliable, safe, loyal, and high-performing than their colleagues who do not have a disability. Everyone in Canada should have the opportunity to achieve the best possible mental health and wellbeing. Yet, mental illness exacts a high price – on individuals, employers and the economy.

Individuals:
- The lives of people living with a mental illness are often plagued by stigma as well as discrimination. 60% of people living with a mental health problem or illness won’t seek help for fear of being labeled.
- The highest rate of mental health problems and illnesses is among young adults aged 20 to 29, a time when people are transitioning from school to work.
- By the time Canadians reach 40 years of age, 1 in 2 have – or have had – a mental illness.
- Individuals living with a mental illness are much less likely to be employed. Unemployment rates are as high as 70% to 90% for people with the most severe mental illnesses.
- There is a strong link between unemployment and damage to mental health. The trauma of unemployment increases as the period lengthens, with those who have prolonged unemployment (six months or longer) experiencing poorer mental health due to “elevated levels of anxiety, frustration, disappointment, and alienation”.
- Individuals with severe and prolonged mental illnesses have historically had a tenuous or episodic attachment to the paid labour force. Those who work typically earn low or modest wages, often in unsecure jobs, and frequently have nowhere to turn but to welfare for support.

Employers:
- In any given week, at least 500,000 employed Canadians are unable to work due to mental health problems.
- The cost of a disability leave for mental illness is about double the cost of a leave due to physical illness.
- Mental health problems and illnesses account for more than $6 billion annually in lost productivity costs due to absenteeism and presenteeism.
- Mental health problems and illnesses account for approximately 30% of short and long-term disability claims.
- Mental illnesses are a leading cause of disability in Canada.

Economy:
- In Canada, approximately $28.8 billion dollars are spent each year in disability income support. Of that, almost one third of disability spending from income programs across Canada are for mental health-related reasons, a cost to Canadian taxpayers of approximately $9.6 billion dollars per year.
- Canada is estimated to experience significant labour market shortages (up to 2 million workers short by 2031!), costing the Canadian economy billions in lost GDP annually. People living with a mental illness represent an untapped population group that is skilled and ready to work.
- In any given year, one in five (7.5 million) Canadians experience a mental health problem or illness, with a cost to the economy of well over $50 billion per year (approximately $1,400 for every person living in Canada). This includes health care costs, lost productivity, and reductions in health-related quality of life. Cumulative costs to the national economy over the next 30 years are pegged at $2.5 trillion.
The Aspiring Workforce

It is worth noting that many factors that can contribute to persistent mental illness and the way we perceive people with ‘serious mental illness’ are related to the effects of poverty, social isolation and exclusion, poor education, chronic physical illness, housing instability and unresolved trauma. Having a stable and adequate income, safe and affordable housing, access to health and social services, the support of family and friends, secure employment, livable communities and dependable transportation are some of the important determinants of health and mental health.  

Although there is a general social trend towards inclusivity, there are a number of barriers that continue to impede the full integration and acceptance of persons with mental illnesses in contemporary society, including their access to income and employment security. These barriers include:

- The skills and talents of people living with a mental illness are often not recognized; their potential contribution to economic and civic life is wasted;
- Stigma and discrimination, income security policies that penalize (or fail to sufficiently reward) earned income, and inadequate sustained support for job search and maintenance;
- Public beliefs that persons with mental illnesses may not be able to perform job functions and may negatively impinge on Canada’s productivity,
- Negative attitudes towards the costs related to disability accommodation;
- Globalization and competition in the business environment where there is a strong belief that market forces should determine outcomes and that market interventions such as disability accommodation in the workplace impedes growth.

In 2013, the Mental Health Commission of Canada (MHCC) released the report, *Aspiring Workforce: Employment and Income for People with Serious Mental Illness*. The term Aspiring Workforce describes those people who, due to mental illness, have been unable to enter the workforce, are in and out of the workforce due to episodic or persistent illness, or wish to return to work after a lengthy period away from work.

The intent of the report was to identify existing and innovative evidence based practices that would assist people living with a mental illness to secure and sustain meaningful employment and a sustainable income. Key recommendations of the report include:

- **A paradigm shift to de-stigmatize people with serious mental illnesses**: There is a need to re-conceptualize the relationship between work and people with mental health concerns.
- **Collaboration among different sectors**: As the issue at hand spans multiple government ministries and multiple stakeholders/actors, the importance of partnership and coordination is integral to the process of increasing labour market attachment for people with mental illness.
- **Removing disincentives to return-to-work**: Our current income support systems create barriers, with few incentives for returning to work. Those receiving disability income supports fear exiting these programs - once a person begins to work, their financial situation may become precarious and can actually worsen. Ensuring there is sufficient incentive to return-to-work and allowing disability income support programs to serve as a safety net would benefit those living with mental illness while encouraging return-to-work.
- **Use existing best practices while continuing to innovate**: There are numerous best practices for engaging people with mental health disabilities in work. We know supported employment works, and there is a growing evidence base around the effectiveness and contributions of social businesses – but access to these opportunities is limited and lack stable funding. A commitment to invest in the development and testing of new strategies is also recommended.
• **Early intervention:** The longer a person spends away from the labour market, the more difficult it is to return. We need to ensure supports are offered early to reduce long term detachment and encourage career development.

• **System capacity building:** Compared to other OECD countries, Canada ranks 27th of 29 countries surveyed on public spending for disability-related supports, and provides the second to lowest levels of disability compensation and benefits. Reforms will require additional resources and funding in order to effectively expand labour force participation.

• **Knowledgeable consumers:** Success requires both the employee and employer to be on board and aware of their rights and supports available to them. Interventions discussed in the Aspiring Workforce report address the needs of both.

We know that employment plays an integral role in a person’s recovery journey and every effort should be made to support the individual in this process.

**Join us on November 28, 2017**

**On November 28, 2017,** MHCC will host a day to empower members of the federal, provincial, and territorial governments, researchers, community service providers, and people with lived experience to exchange ideas and share promising practices towards achieving a single goal: **Identifying actionable recommendations to reduce employment barriers for individuals living with a mental illness.**

Despite the above mentioned barriers, Canada has seen positive trends and practices over the last 10 years that increase representation of individuals living with a mental illness in the labour market, including:

- A growing awareness of labour market demand and the need for all qualified and able participants to be included;
- Recognition that our workplaces can provide accommodations that do not require costly interventions;
- A growing evidence-base of practices and policies that assist with speedy reintegration into the workforce; and,
- An increased level of education and awareness around mental health problems and illnesses.

Leadership from the Government of Canada is particularly noteworthy, especially in the areas of accessibility for all Canadians. The Canadian Government is emphasizing the need for adjusting our environments and attitudes to encourage inclusivity of individuals living with a disability and is committed to increasing labour market participation of all working-aged Canadians. Budget 2017 also promises investments and further funding in several areas, including skills development funding through employment insurance, through the Labour Market Transfer Agreements to the sum of $2.7 billion over six years, and through the Workforce Development Agreement (an increased investment of $900 million over the next six years) to consolidate federal, provincial and territorial programs. These investments will support working Canadians, as well as job seekers to find and keep jobs in this new economy, upgrade their skills, gain experience or get help to start their own business.

### Key Considerations for Policy and Decision Makers

Although significant steps have been taken, there is still much work to do. The following key considerations are evidence based and are thought to assist federal, provincial, and territorial governments in their efforts to reduce employment barriers for individuals living with a mental health related disability.

**Note:** the considerations below are not solely the opinion of the MHCC but a culmination of the opinions of many field experts and opinion leaders, including those who have helped MHCC plan this forum.
Policy suggestions to address income support and return-to-work

- Disability support policies, such as flexible work options, that recognize individuals with a mental health related disability often have intermittent work capacity.

- Existing mechanisms that help reduce disincentives to return-to-work should be reviewed and enhanced in light of the current economic and social needs of this population, e.g. The Working Income Tax Benefit (WITB), The Disability Tax Credit, etc.

- New policies or mechanisms may be considered that allow for reduced day-to-day survival burden on individuals when not at work, e.g. helping offset additional disability-related costs for individuals when unemployed, removing earning reductions for individuals earning pensions and working in consumer survivor businesses, raising allowances for earnings exemptions, increasing disability income support rates to reflect today’s higher cost of living, reducing red tape in the application and receipt processes, enabling options for gradual re-entry into the workforce, implementing rapid re-entry onto disability support for former recipients who become unemployed, etc. Such measures are known to support recovery and contribute to a faster return to work.

- Tax incentives or wage subsidies may be provided by the federal, provincial, or territorial governments to employers who hire persons with disabilities. Research suggests that places where these subsidies exist are under-utilized due to process inefficiencies and the duration of the subsidy.

- Policy mechanisms may be piloted and evaluated based on their efficacy in promoting workforce attachment for people with mental health related disabilities. Multiple measures such as wage supplementation, extension of income-in-kind, access to drug and dental coverage, etc. may be considered.

- Raising accessibility to employment support programs would allow individuals on disability benefits to be informed about how earnings from employment will impact their income support, requirements for reporting, and options for employment services.

**Recovery**

The concept of "recovery" in mental health refers to living a satisfying, hopeful, and contributing life, even when a person may be experiencing ongoing symptoms of a mental health problem or illness. Recovery journeys build on individual, family, cultural, and community strengths and can be supported by many types of services, supports, and treatments. Recovery principles, including hope, dignity, self-determination, and responsibility, can be adapted to the realities of different life stages, and to the full range of mental health problems and illnesses. Recovery is not only possible, it should be expected.

Take a closer look at MHCC’s Guidelines for Recovery-Oriented Practice

**Funding**

- Further consideration should be given to innovative approaches around programs and services. One such consideration would be to require decentralization of programs and services, allowing community-based organizations to make more decisions around designing service delivery practices. Providing funds to local employment service agencies instead of third parties, such as training boards, is shown to be more efficient in terms of government investment and customer service.

- Innovative types of funding provided to employment support programs, such as results-based funding (as opposed to fee-for-service funding) has been shown to be more effective and empowered programs to adopt evidence based practices.
Increased funding for the development of evidence-based employment approaches, including supported employment programs and social enterprise formation may be considered. Evidence suggests that working in a social enterprise supports the notions of security and a sense of caring, both of which are major advantages to fulfill the needs of this vulnerable workforce. Social enterprise programs are structured to be more flexible and accommodating to this target population.

**Skills development**

- **Considerations for people living with mental health related disabilities:**
  - All Canadians, including those with a mental health-related disability, would benefit from access to programs that help them develop the skills necessary to find and keep meaningful employment.
  - Targeting employment and skills training programs on labour market needs, while fostering partnership community stakeholders (including employers) would enable the development of focused solutions to meet the needs of those living with a mental illness.
  - Small business training, when included as a component of employment and skills training programs, could be an effective means of encouraging both traditional employment and self-employment.

- **Considerations for employment program developers and staff:**
  - Enhancing skills and competencies of employment program developers and staff to provide evidence-based interventions will best assist individuals living with mental illnesses.

- **Considerations for employers:**
  - Skills development for employers, managers and workplaces could include anti-stigma initiatives and awareness/education opportunities to reduce stigma associated with mental illnesses (e.g. Mental Health First Aid). Further upskilling could focus supporting and accommodating workers with mental illness.

**Did you know?**

The [National Standard of Canada for Psychological Health and Safety in the Workplace](https://www.compsych.ca/english/national_standard_of_canada_for_psychological_health_and_safety_in_the_workplace) is a set of voluntary guidelines, tools and resources and is the first of its kind in the world. The Standard has been downloaded over 38,500 since its release in January 2013 and has been adopted by employers across various industries and sectors.

Mental Health First Aid is the help provided to a person developing a mental health problem or experiencing a mental health crisis. More than 250,000 Canadians have been trained in MHFA.

The [Working Mind](https://www.workingmind.ca/) is an evidence-based education-based program designed to address and promote mental health and reduce the stigma of mental illness in a workplace setting. To date, 15,266 people have received training.
Program Design and Delivery

- **Considerations for Program Coordination:**
  - There is an opportunity for better coordination among programs (and at all levels of government), using a client-centered approach to program design and delivery, and provision of earlier access to supports that could facilitate re-integration to the workforce. These reforms could improve the efficiency of benefit programs, achieve better participation of people with disabilities in the workforce, and provide greater equity in the amount and duration of income security benefits.
  - A national online inventory of effective, evidence-based, innovative and promising programs and practices that support individuals with mental illness to find and secure employment may be created.
  - Further opportunities should be created to facilitate networking and partnership among multiple stakeholders, such as employers, supported employment programs, policy makers, families, and individuals living with mental illnesses.
  - Effective communication strategies can be considered alongside policy reforms. It is critical to recognize that policy reforms cannot succeed without clear communication to those who are affected, in order for the benefits of positive change to be reaped. The most effective communication is often delivered by peers with lived experience.

- **Considerations for Program Design:**
  - Programs that take a strengths-based approach to meet the needs of those living with a mental illness, while also addressing barriers they face will help connect individuals with employment more efficiently. There is a growing trend towards a model that, in the eligibility assessment process, focuses on assessing function and capacity, rather than diagnosis and incapacity, while addressing barriers to employment. If put into place carefully, research has shown that this holistic approach to assistance can lead to an easier transition into work when a person is ready, without creating the fear of losing assistance. While there are still uncertainties about how best to design and implement such a capacity-focused programming, this trend is a promising move towards supporting the full inclusion of people with disabilities.
  - Early intervention is important to promote return-to-work. There are two points of contact when considering early intervention in the prevention of disability income support reliance: (1) at the onset of disability, and (2) at the point of transition onto benefits.
  - To increase employment participation of individuals with serious mental illness, it is recommended that they have access to evidence-based interventions, such as Individual Placement and Support (IPS) which will contribute to positive employment outcomes and career development.
  - Income support programs may consider providing individualized supports by working closely with their recipients to identify their needs (real need not tied to their level of established capacity) and to develop work-benefit plans that will not only

**DID YOU KNOW?**

“It is Housing First, but not only housing.” This is one of the key findings from the At Home/chez Soi project, a research demonstration project that tested Housing First in Canada (2014). Housing First is an evidence-based approach that offers immediate housing, with no conditions, plus supportive services to individuals who were homeless and living with serious mental health issues. The project found that while housing was often the first stepping stone for a person and their recovery, it needed to be combined with other supportive services, including education and employment supports.
provide income support, but will also develop strategies for how to return to the labour market (i.e. determine what is needed). This plan could offer psychosocial rehabilitation and vocational training, mentorship, job search support, specific diversity needs’ services, additional income or other benefits, the possibility of different forms of employment (e.g., part-time), and connecting recipients to budget and benefit counseling services, etc.

- The system capacity could be increased to allow people receiving disability support to establish supportive relationships with case workers who can provide information about income and employment related supports; this contact should include both benefits counselling and connecting clients with employers and employment services. Providing solely for the financial needs of disabled people through the provision of income support benefits is insufficient as it systematically and inherently excludes many individuals from the labour market.

- A meaningful shift in culture which allows for positive labels such as “meaningfully employed with a disability” from negative labels such as “disabled and not able to work” will move the conversation to a more productive direction. When individuals with a disability apply for a disability support program they will be set up for success when connected immediately with employment supports.

- Mentorship and peer support are powerful and evidence based tools that, if incorporated within disability programs and policies, will enhance successful workforce reintegration of those with a history of mental health problems and illnesses.

- Further collaboration between stakeholders leading income support programs, employment support programs, mental health services, and employers will assist in focusing efforts on the needs of the clients. Innovative policies examining such needs will help ensure unintended barriers are not being created for those looking for meaningful employment.

- **Considerations for Access to Information:**

  - There is a tremendous amount of Labour Market Information (LMI) already available in Canada, but it is difficult to find and make sense of. A more strategic approach to LMI is one that coaches the user (employees and employers) to identify their needs and guides them to relevant information based on those needs in a timely fashion. A common approach towards LMI will prove useful to assist in the reduction of employment barriers for those living with a mental illness.

  - Tracking labour market participation rates for people with disabilities generally, and more specifically for people with a history of mental health related disabilities will be beneficial for all levels of government to gather accurate and timely information.

The goal of the November forum will be to gather thoughts and opinions from members of the federal, provincial, and territorial governments on future actions and initiatives necessary to reduce employment barriers for individuals living with a mental illness.
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