

What does employment mean for people with mental illness?

February 19 2016



Engaging in meaningful work allows people with mental illness to establish and re-establish their identities and valued life roles.

There are calls for employers to better engage with potential staff who suffer from mental illness, to break down barriers and stigmas in the

workplace.

Dr Polly Yeung from the School of Social Work at Massey's College of Health, co-authored Facilitators and barriers to employment for [people with mental illness](#): A qualitative study, recently published in the Journal of Vocational Rehabilitation.

The study, carried out in Australia, involved nine participants. All have experiences with mental illness including depression, bipolar affective disorder and schizophrenia. They were all adults who were working, seeking work or preparing to seek work and were recruited through mental health and employment services in Western Australia.

Dr Yeung says the aim of the study was to describe what employment means to people with mental illness, and identify the types of support and the challenges they encounter in both getting and keeping a job.

"We used individual in-depth interviews to gather information about their past and current experiences, what employment meant to them, their job aspirations, and what stood in their way of having a career."

Dr Yeung says engaging in meaningful work allows people with mental illness to establish and re-establish their identities and valued life roles.

"Low workforce participation rates exist for people with mental illness despite their ability to both benefit from, and contribute through, employment. The employment rate for people who suffer from [mental health issues](#) sits at just 22 per cent in Australia, one of the lowest ranked countries in the OECD [Organisation for Economic Co-operation and Development]."

So how does New Zealand compare?

As of March 2014, the most significant disability experienced by the 56,045 people receiving a Jobseeker Support benefit due to a health condition or disability in New Zealand was a psychological or psychiatric condition, experienced by 42 per cent of these people (Ministry of Social Development, 2014).

Mental disorders, as a group, are the third-leading cause of health loss for New Zealanders (11.1 per cent of all health loss), behind only cancers (17.5 per cent) and vascular and blood disorders (17.5 per cent).

Dr Yeung says the unemployment rate for disabled people, including those with mental illness, is higher than for non-disabled. "They tend to be under-represented in the workforce and are often found working in poorly paid, low-status jobs. Despite this, most people with experience of mental illness consider employment to be a priority, whether they are from New Zealand, Australia, the United Kingdom or America."

Dr Yeung says although participants were at different stages of their personal vocational journeys, many told similar stories of adversity in their private lives. "Participants used the words 'neglected', 'isolated' and 'abandoned' to describe the hurt they felt from the loss of personal relationships following the onset of mental illness."

With repeated encounters of discrimination, many participants withdrew from social situations. "Vocational activity resulted in personal interactions, which allowed opportunities for exploration of where they fit into life. They find working meaningful and rewarding."

For those in work, losing their job due to mental illness also led to mistrust of employers. Dr Yeung says seven of the nine participants lost their regular job with the onset of mental illness. "They spoke of fear, anger and anxiety, which led to feelings of invalidation and retreat from the world. Being unemployed also affected their ability to function in

other roles, such as their relationship with their partner, family and friends."

Dr Yeung says for the respondents, the pressure didn't end once work commenced. "They all said the workplace was a difficult environment to navigate. They were nervous and uncertain, and found that some symptoms of mental illness were exacerbated because of the added pressure of being in the workplace, where certain behaviours weren't understood.

"These findings, consistent with previous research, shows these barriers mean people with mental illness are faced with the significant challenge of deciding whether or not to disclose their mental illness to potential employers."

Issues to consider

She says there are some issues to remember when considering employing people with mental illness. "There are many benefits for employers in having an inclusive and diverse workplace to improve workplace culture and the organisation's reputation. Supporting people with mental illness in employment can be a good investment, particularly in terms of reciprocated commitment and loyalty."

Workplace accommodations that people with experience of mental illness found helpful include:

- Flexible hours, in terms of how much and when they work
- Flexibility in where they work (the option of working from home)
- Flexibility around attending appointments (being able to attend appointments in work time), or being able to continue to work even

when they are not 100 per cent well

Dr Yeung says it is important to understand these compromises are generally no greater than the arrangements other employees have to accommodate various aspects of their lives, including staff with long-term physical conditions or impairments, or children.

"People with mental illness should be aware they don't have to be 100 per cent fit and healthy to be a good employee – most of us aren't. When planning to return to work, they should ask their [mental health](#) team how they can get support to achieve [employment](#) goals. It may be a good idea to have a plan about when and how to disclose experience of [mental illness](#) to a prospective employer."

More information: Julie Ann Netto et al. Facilitators and barriers to employment for people with mental illness: A qualitative study, *Journal of Vocational Rehabilitation* (2016). [DOI: 10.3233/JVR-150780](https://doi.org/10.3233/JVR-150780)

Provided by Massey University

Citation: What does employment mean for people with mental illness? (2016, February 19) retrieved 18 April 2024 from

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