



## POSITIVE EMPLOYMENT, GOOD HEALTH

*Addressing Psychosocial Barriers to Job Readiness and Employment*

# *Session Overview*

## **1. Introduction**

- 1.1 Disability and Unemployment
- 1.2 Health Benefits of Work

## **2. The Bio-Psycho-Social Model of Health and Work**

- 2.1 The link between Health and Work

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- 3.1 The role of the provider
- 3.2 Motivating and engaging clients
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## **4. The future of Disability Employment Services**

- 4.1 Strengths and weaknesses of the current framework
- 4.2 Future suggestions



# A few thoughts...

“ The main determinant of health and illness, and hence work incapacity, depend more upon lifestyle, socio-cultural environment and psychological factors than they do on biological and conventional medical management.

The optimal way to deal with this is by the use of the biopsychosocial model.”

M. Marmott 2004<sup>1</sup>

“Long term worklessness is one of the greatest risks to health in our society. It is more dangerous than the most dangerous jobs in the construction industry... more dangerous than smoking 10 cigarettes a day, increases suicide risk by 40 times in young men and reduces life expectancy”

Professor Gordon Waddell 2010<sup>2</sup>



# Introduction

- 59.2% of the 2.2 million people with a disability who are working age, were in the workforce or actively looking for work in 2009<sup>3</sup>.
- This compares to a workforce participation rate of 82.5% for people without a disability.
- Nearly half (47%) of those at working age who identify as having a disability reported moderate or mild disability and only 51% of these individuals reported to be working or actively looking<sup>3</sup>.
- In the 2010 Government white paper “Australia: the Healthiest Country by 2020<sup>4</sup>”, it identified that 32% of the total health burden of disease can be attributed to modifiable risk factors including obesity, alcohol, smoking and physical inactivity.



# Introduction

- The challenge of increasing employment participation for people with disability has been a topic of significant focus over the past two decades.
- The solution is likely to come from a holistic approach including welfare, participation, housing, education and training, infrastructure, labour market and workplace relations.
- A focus on the positive aspects of employment for the individual and their health is also likely to assist with increasing participation rates.
- DES provides have a core role to play in this because they are a key point of contact for people with a disability<sup>5</sup>.



# The Health Benefits of Work (HBOW)

**Work is generally considered to be Good for your Health.**

- It is becoming widely accepted that work is the **most effective** means of improving the future health of a person<sup>6</sup>
- The position of the Australasian Faculty of Occupational and Environmental Medicine (AFOEM) is that there is a positive relationship between work and health with long-term work absences and unemployment leading to negative health consequences.
- The AFOEM has recently released the Consensus Statement on the Health Benefits of Work with the purpose of:
  - Promoting awareness of the HBOW
  - Advocating for continuous improvement in public policy around work and health
  - Encouraging employers' continuing support of workers' occupational health



# The Health Benefits of Work (HBOW)

## Worklessness can lead to<sup>7</sup>:

- Poorer physical health
- Poorer mental health
- More medical care
- Poorer social integration
- Loss of worth and self-confidence
- Less monetary resources
- Transgenerational effects



# The Health Benefits of Work

## WORKING TOWARDS POSITIVE EMPLOYMENT

- Not ***all*** work is good
- It can depend in the nature and quality of work and its social context
- Work should be **safe** and **accommodating**
- Physical and mental demands must **match** the skill and capacity of the worker
- Ceasing an individual's benefits (i.e. suspended payments, or closing a compensation claim) without swift entry into work has been associated with deteriorated health and well being status<sup>6</sup>.



# The Health Benefits of Work

## WORKING TOWARDS POSITIVE EMPLOYMENT

- Positive Employment is not just about healthy or safe employment, it is also about providing meaning and value to life.
- Positive Employment is:
  - Matched to the individual's values
  - Provides the individual a connection to community
  - Gives the individual a sense of self-worth
  - Meets the individual's needs
  - Provides opportunity for growth
- Re-employment in suitably matched work, is able to reverse adverse health effects associated with unemployment<sup>6</sup>.



# The Bio-Psycho-Social Model

## THE RELATIONSHIP TO HEALTH AND WORK

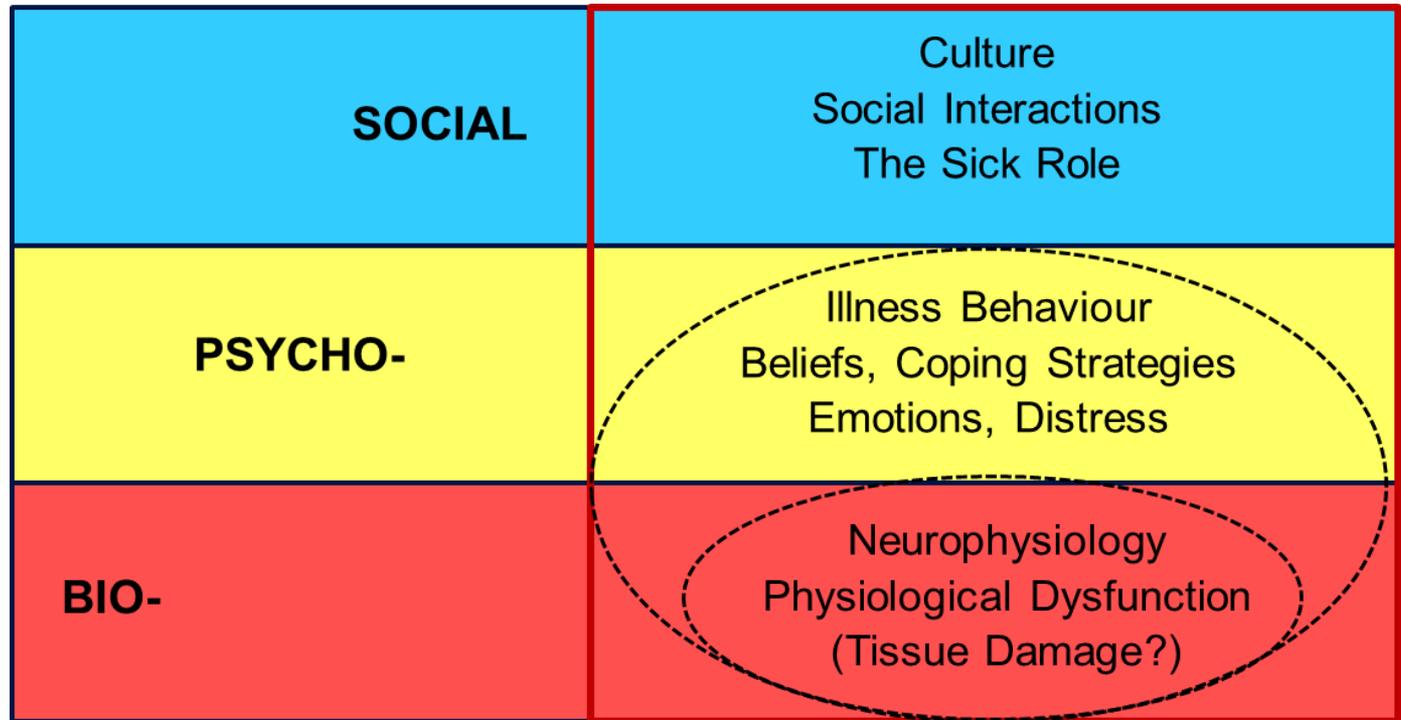
**Long-term work disability** relates more to individual, work-related social and psychological factors than either the physical demands of work or the medical condition<sup>2</sup>. The key elements include a person's:

- Beliefs about their condition and pain
- Family situation
- Job satisfaction (previous and/or current) and attitude towards work



# The Bio-Psycho-Social Model

THE LINK BETWEEN HEALTH AND WORK



# The Bio-Psycho-Social Model

## THE LINK BETWEEN WORK AND HEALTH

Many people with work disability experience the same symptoms as those who are currently working<sup>2</sup>.

<b>RANKING THE BARRIERS</b>	<b>%</b>	<b>RANK</b>
<b>Psychological / Cognitive</b>	38	1
<b>Workplace</b>	32	2
<b>Social</b>	11	3
<b>Economic</b>	9	4
<b>Symptom Percentage (esp: pain, fatigue)</b>	7	5
<b>Impaired Function</b>	3	6
<b>Total</b>	<b>100%</b>	



# The Bio-Psycho-Social Model

## THE LINK BETWEEN HEALTH AND WORK

Common psycho-social influences on work “incapacity” include<sup>2</sup>:

Low self efficacy
Low health literacy
Catastrophizing
Unstable relationships
Sole parent
Job dissatisfaction/ low skills
Pervasive thoughts about illness
Belief that stress is causal factor
Blaming work / people for condition



# *The Bio-Psycho-Social Model*

## IMPACT ON RE-EMPLOYMENT

If only 1 is present



Good chance of RTW



If 2 are present



50% chance of RTW



If 3 or more are present



Very low chance of RTW



# Engaging Clients in Positive Employment

## THE ROLE OF THE PROVIDER

- Identify and work to manage bio-psycho-social factors
- Use tools to evaluate the extent of the psycho-social context of the individual
- Use a multi-disciplinary approach
- Commitment to job-matching and post-placement support
- Commitment to working with medical / allied health professionals to educate the client on Health benefits of work
- Commitment to educating employers on reasonable accommodation, workplace modifications and health management<sup>2</sup>.



# Engaging Clients in Positive Employment

## THE ROLE OF THE PROVIDER

- In addition to potential Bio-Psycho-Social Barriers to employment, key activation policy changes over the last decade see the majority of people accessing DES because they are compelled to under Social Security Law.
- As of May 2015, less than 27% of DES participants were voluntarily participating in the program<sup>7</sup>.
- What strategies can be used to improve engagement when participants feel “forced into it”?



# Engaging Clients in Positive Employment

## HOW TO MOTIVATE AND ENGAGE UNDER-PARTICIPATING CLIENTS

- An individually tailored program aimed at addressing the client's barriers and goals
- Where possible, this includes identifying goals to achieve employment outcomes but could also be focused on achieving milestones towards improved employability
- Identifies and plans to manage psycho-social factors / barriers
- Provides appropriate Allied Health, Workplace, Home and / or Employment Service Support<sup>7</sup>.



# Engaging Clients in Positive Employment

## HOW TO MOTIVATE AND ENGAGE UNDER-PARTICIPATING CLIENTS

### Translating theory into practice:

- Initial Interview aimed at identifying the individual's strengths and goals and creating a plan for their program of services.
- Early engagement in Allied Health Support – liaison with GPs or use of internal practitioners.
- Ongoing vocational counselling and motivational interviewing to help identify transferrable skills and client values.
- Activity planning with the client to encourage daily routines prior to re-employment
- Use of intrinsic incentives and regular contact – identify what is meaningful to the individual in terms of the outcomes they could achieve through early engagement in services.



# Engaging Clients in Positive Employment

## HOW TO MOTIVATE AND ENGAGE UNDER-PARTICIPATING CLIENTS

### Example 1 – Medical Exemption/ DSP:

- Client MF lives in SE QLD. Medical conditions included lower back disc injury and depression and anxiety related to a MVA (occurred 3 years prior to engagement).
- MF had been engage in a CTP claim and placed on a medical exemption by her GP. MF had identified a desire to return to work Part-time as a Shopping Centre Security Officer; but she believed she was unable to work currently. Her GP had encouraged her to apply for DSP.
- **Goal** = engage in gym conditioning program, monitor psychological intervention, and engage in social conditioning (job club).
- **Outcome** = 6 months on medical exemption; gained employment 1 month after resuming full services.



# Engaging Clients in Positive Employment

## HOW TO MOTIVATE AND ENGAGE UNDER-PARTICIPATING CLIENTS

### Example 2 – Motivated but complex Psychosocial barriers:

- Client JW lives in a regional ESA in QLD. Medical conditions included ongoing ankle injury with nerve damage, resultant weight gain (morbidly obese), and chronic depression.
- Client J was active in the program and had a clearly identified employment goal = administration work. However, Client J also had a series of family problems including legal issues which impacted on her availability and mental state
- **Goal** = improve health and job readiness through daily activity / routine including hydro / gym, counselling, and job club (social conditioning). Maintain regular contact and ensure aligned with appropriate community services.
- **Outcome** = If we can improve Client J's job readiness and maintain her health, she will be able to gain employment in 12 to 18 months.



# The Future of DES

## HOW DOES THE CURRENT FRAMEWORK STACK-UP

- The current DES Programme has seen over 260,000 people achieve job placements since it commenced in 2010, with almost 1/3 of participants assisted to maintain employment for 6 months<sup>8</sup>.
- Strengths of the current framework include:
  - Driven by employment outcomes and rewards sustainable ongoing employment
  - STAR Rating system helps job seekers assess the performance of providers in their local area and allows DSS to measure performance
  - Ongoing support options for job seekers – Flexible, Moderate and high
  - Job in Jeopardy Program to assist workers to maintain employment



# The Future of DES

## HOW DOES THE CURRENT FRAMEWORK STACK-UP

- Weakness of the current framework include:
  - Limited funding - Improved funding to assist providers in managing psychosocial barriers for improved employment outcomes
  - Medical model of assessment - Eligibility assessments to utilise a broader assessment model than the medical model would improve the placement of job seekers with the most suitable provider.
  - Lack of flexibility in measuring outcomes - Recognition of achievements related to improving job readiness or gaining an initial level of employment (i.e. lower hours than benchmark) is more reflective of the participants employment journey and the steps taken by providers to address psychosocial barriers.



# The Future of DES

## EMPLOYER ENGAGEMENT

- 2011 research undertaken by DEEWR indicated that Employers were more likely to take on and retain individual's from DES where appropriate job-matching had been conducted<sup>8</sup>.
- Recommendations to assist providers in improving job-matching included:
  - Honesty upfront
  - DES support during the employment process
  - Employer incentives which are longer-term and more than just wage subsidies
  - Linking financial incentives to worker productivity and reliability
  - Support for making adjustments / workplace modifications



# The Future of DES

## RECOGNISING EMPLOYMENT MILESTONES

- With the introduction of the NDIS, it is likely a significant review of the DES Programme is on the horizon.
- One suggestion for a multi-disciplinary approach to improving job readiness and achieving employment outcomes is a two-tiered framework:
  - Tier 1 – Vocational Rehabilitation
  - Tier 2 – Employment Assistance / Job Placement Services



# The Future of DES

## RECOGNISING EMPLOYMENT MILESTONES

- Tier 1 – Vocational Rehabilitation
  - Aimed at improving job readiness and employability
  - Identify and manage Bio-psycho-social factors
  - Vocational counselling and identification of values and transferrable skills
  - Measured through employability milestones rather than employment outcomes
  - Stability of job readiness = transition into Tier 2



# The Future of DES

## RECOGNISING EMPLOYMENT MILESTONES

- Tier 2 – Employment Assistance
  - Confirm Employment Goals and Reinforce Activity planning
  - Support to maintain health and job readiness
  - Provision of job seeking skills and job placement services
  - Identify and implement appropriate level of post-placement support
  - Measured by employment outcomes and durability of employment



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