

Supported Employment:

at the leading edge of mental health services
development in New Zealand

Rob Warriner, John Taylor,
Roy Wilson



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www.euseconference2009.org

***Kia ora, Malo a lei lei, Kia orana,
Ni sa bula vinaka, Talofa lava,
Fakaalofa lahi atu, G'day...***

- Greetings from the New Zealand
 - Largest population of Pacific people's
 - Total population of 4 million; 60 million sheep
 - Maori (the indigenous population) accorded specific rights of partnership, protection and participation through the Treaty of Waitangi (1840)
 - Rugby League World Cup holders
 - Rugby World Cup Winners, 2011

Supported Employment – our definition

- **Open waged employment** – Supported Employment is based in the open labour market; same rewards, same conditions as everyone else.
- **Individualised - based upon partnership** – Supported Employment services are expected to meet a client's individual support needs (whether employee or job seeker). They will fundamentally represent a partnership.
- **Direct access to employment pathways** – Supported Employment services will facilitate direct access to the labour market (optimally within 4 weeks) developing and utilizing a precise job/person match - without insistence upon prolonged “getting ready” activities or pre-vocational training
- **Inclusive services; socially inclusive outcomes** – no clients will be “screened out” or denied services based upon a perceived severity of challenge or disadvantage
- **“Life match” through choices** – ‘work’ is a means to an end and should complement and enhance a person's life and well-being, and the achievement of their aspirations and potential
- **Ongoing work place support** – support services and strategies are designed to achieve the best possible outcome for both employer and employee, and promote the development of natural supports which may lead to the withdrawal of formal support services

This Workshop

- A brief history
 - An introduction
- How the development of supported employment in New Zealand influenced mental health service development
 - outline
- How it might continue its influence into the future
 - discussion

A Brief History

- 1980s - deinstitutionalisation began
- 1990s - development of the non-government (NGO) sector as providers of support services
- NGO sector grew rapidly (up to 30% of the mental health spend)

A Brief History

- NGO sector “...often at the forefront of innovation in service delivery, workforce culture change, effective partnerships with services users, tangata whaiora, whanau, families and communities and putting recovery into action”

Te Kokiri, NZ Mental Health and Addiction Plan 2006 - 2015

A Brief History

- Supported employment for people who experienced serious and persistent mental illness was introduced to New Zealand in 1994 by the NGO sector
- The environment in 1994:
 - Work as therapy
 - Low expectations
 - Risk averse
 - Services designed to work with people who were not working
 - Need to educate the community

First Lesson

- Mental health services themselves present as great (if not greater) a barrier to people achieving their employment aspirations than the illness itself.

What do we mean?

A Contrast In Values...

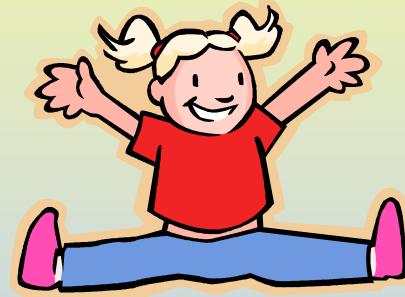
- Hospital →
- Segregation →
- Invalidation →
- Defined Roles →
- Diagnosis →
- Custody →
- Incarceration /compliance →
- Medical discourse →
- Community
- Inclusion
- Meaning
- Question practice
- Assessment of needs
- Inclusion
- Rights / responsibilities
- Personal / social discourse

...and Practice

- Ken's experience

...and Practice

- “I’ve got a job!!!”



- “But if you work on Tuesdays you will miss group”
- “who is going to do the shopping on Thursday’s now?”

...and Practice

- Employer:
 - “he is making lots of mistakes, seems distracted and is very unkempt”
- Mental Health Worker:
 - “Maybe working is too stressful for you; have you explained to you boss about schizophrenia? Would you like me to?”
- Client:
 - “Things are pretty bad for me right now – and being yelled at by my wife and boss is awful”

...and Practice

- Employer:
 - “he hasn’t turned up for work today; is he OK?”
- Mental Health Worker:
 - “We clearly need to get you out of this job and into a residential drug rehab. programme”
- Client:
 - “I couldn’t handle being on holiday – I was so bored I started drinking again”

How It Was Achieved

- Transformational leadership, legislative change and political activism
- Recognition of the need for a levelling of professional hierarchies and the introduction of alternative models of practice
- A belief that the community had a clear role in supporting / promoting mental health

How It Was Achieved

- The determined belief that mental health services should be intimately connected to, and a part of community life
- A fundamental belief that this was part of a service reform process that represented the uncompromising criticism of traditional dominant practices and their culture
- Support of a national association (ASENZ)

Four Quadrants – traditional mental health services

	<i>Subjective</i>	<i>Objective</i>
<i>Individual</i>	Service User	Clinical / Medical Perspective S
<i>Social</i>	Family / Whanau	
		Community

Four Quadrants

– reformed mental health services

	<i>Subjective</i>	<i>Objective</i>
<i>Individual</i>	Service User	Clinical / Medical Perspectives
<i>Social</i>	Family / Whanau	Community

Social Inclusion – building it into organisations

	Subjective	Objective
Individual	<p>Clients / Staff / People</p> <p>“supporting people in their communities not ours”</p>	<p>The Organisation</p> <p>“ensure we, and the communities we are a part of, are active participants in creating our own future, rather than passive players in someone else's...”</p>
Social	<p>Service Delivery</p> <p>“least intrusive, collaborative and flexible, delivered to people, based upon people’s changing and often unique support needs”</p>	<p>Community</p> <p>“partnerships with the community - resources and opportunities. Supporting people to exercise their rights and obligations, to find a place, meaning and fulfilment alongside of others”</p>

The Experience of Recovery

- Recovery is about nurturing hope and communicating people's worth and potential so clearly that they are inspired to see it in themselves.

World Cafe



What are the critical barriers to employment for people who experience mental ill-health in your own country?



How can supported employment further continue to influence mental health services?



Supported employment – does it work??



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