



Mental Health Reform

Promoting Improved Mental Health Services

Submission on Strand 3 of the Comprehensive Employment Strategy (CES) for People with Disabilities – Make Work Pay 7th October 2016

Mental Health Reform (MHR) welcomes this opportunity to make a submission on strand [strategic priority] 3 of the Government's Comprehensive Employment Strategy for People with Disabilities. As the national coalition promoting improved mental health services and social inclusion of people with mental health difficulties, Mental Health Reform makes this submission with particular reference to people with mental health difficulties.

Mental Health Reform has promoted key policy positions on both social protection and supported employment for people with severe and/or enduring mental health difficulties in recent years. Such positions are developed on broad-based consensus with our membership of over 50 organisations. Mental Health Reform sits on a number of national advisory councils that address social protection and employment issues, including the Department of Social Protection's Disability Forum. MHR's Director, Shari McDaid also represents the mental health sector on the Government's Disability Stakeholders Group (DSG) and the Comprehensive Employment Strategy Implementation Group (CESIG). Furthermore, starting in 2015, the Department of Social Protection has partnered with Mental Health Reform and the HSE on a pilot project on evidenced-based supported employment in four sites across the country.

Mental Health Reform makes the following recommendations for the purposes of this submission

- **The risk of losing benefits by taking up employment should be removed for people with mental health disabilities in order to support their recovery and encourage their participation in the labour market. The benefits system should ensure that individuals on benefits can automatically revert to benefits if they lose their job, with an appropriate income support assessment to follow after reinstatement of benefits**
- **Government should provide people with long-term mental health conditions the security of a medical card, including free prescriptions, in order to support their ongoing recovery and encourage their participation in the community, including in employment**
- **The evidence based approach to supported employment should be rolled out across the country to ensure that all individuals with mental health disabilities who want to work are provided with effective support into employment**

- **Initiatives to provide transport to work in rural areas for people with disabilities should be rolled out so that individuals can avail of employment opportunities within their community**

Background/key facts

The current system of employment supports for people with mental health disabilities, throughout the country, has not been successful in facilitating access to employment. People with mental health disabilities are nine times more likely to be out of the labour force than those of working age without a disability, the highest rate for any disability group in Ireland. Yet, half of adults with a mental health disability who are not at work say they would be interested in starting employment if the circumstances were right¹.

The costs associated with mental health difficulties continue to have a significantly adverse effect on the Irish economy. In 2008, it was identified that mental health difficulties cost the Irish economy around €3 billion or 2% of GNP annually and most of the costs are in the labour market as a result of lost employment, absenteeism, lost productivity and premature retirement². (This figure is based on 2006 GNP).

In the Department of Social Protection’s recent review of Disability Allowance, 50% of participants reported mental health difficulties as the health issue that affects them most. In the same review, fear of losing social welfare benefits and fear of losing the medical card were most highly reported as barriers to achieving individual employment goals.

Employment has been identified as increasingly important as a route to social inclusion and recovery from a mental health difficulty. In a detailed report on mental health and social inclusion, the National Economic and Social Forum in Ireland concluded that work is the best route to recovery and employment is the best protection against social exclusion. Studies have also indicated that returning to work can lead to clinical improvement and increased social functioning among individuals and improved quality of life.

In this submission, MHR will focus on the two actions included under Strategic Priority 3 – Make Work Pay of the Comprehensive Employment Strategy:

- “Develop ready reckoners to show how someone with a disability will fare financially if they take a job”
- “Maintain a streamlined way for people to resume their disability payment if they have an episodic condition or have to leave a job”

¹ CSO National Disability Survey 2006 – Volume 2, Dublin: The Stationery Office, p.86.

² O Shea, E. & Kenelly, B. (2008) p.v.

Loss of benefits (primary and secondary) as a barrier to employment

Mental Health Reform has consistently heard from people with mental health difficulties that one of the greatest barriers to taking up employment is fear of losing primary and secondary social welfare benefits. Mental health difficulties are often episodic and it can take years before some individuals settle into how to manage their condition and maintain stability. Some people will continue to have episodes of severe distress alongside periods of wellness throughout their lives. In MHR's public consultation meetings during 2015, participants expressed concerns with the administration of benefits, which often prevent people from participating in the workforce for fear of losing their benefits, inadequate information on citizen's entitlements to social welfare payments, changes to benefits on entering employment, in addition to inexperienced staff working in social welfare offices.

In particular, the current Partial Capacity Benefit scheme often discourages people with a mental health disability from taking up work because they must undergo a review of work capacity that can result in removal of their existing disability benefit. There is a real fear among individuals in receipt of Illness Benefit and Invalidity Pension that they will lose their benefits or be unable to return to benefits should they be unable to work in the future if they transfer to PCB.

Recommendation: The risk of losing benefits by taking up employment should be removed for people with mental health disabilities in order to support their recovery and encourage their participation in the labour market. The benefits system should ensure that individuals on benefits can automatically revert to benefits if they lose their job, with an appropriate income support assessment to follow after reinstatement of benefits.

Lack of security about the medical card is also known to be a deterrent to individuals with mental health disabilities taking up work, and therefore serves to further embed the social exclusion for people with mental health disabilities. Mental Health Reform has heard from members of its Grassroots Forum, made up of people with self-experience, family supporters and family members that the possible loss of a medical card is a barrier to people with mental health difficulties taking up employment.

Access to free healthcare is an important issue for individuals with long-term mental health difficulties who may require long-term treatment for both their physical and mental health. The costs of GP visits, plus the ongoing costs of multiple prescriptions for psychotropic medication are high and individuals in receipt of medical cards are often not willing to risk losing this benefit.

One member of MHR's Grassroots Forum said that:

“Having a medical card and being able to work are like ‘gold’. If I had to give one up I would give up working to keep my medical card. When you are able to keep up work with a mental health difficulty, ‘you feel part of the real world’. At the same time, you shouldn't live in fear of losing your medical card.”

Mental Health Reform acknowledges that the provision of medical cards for people with severe and enduring mental health difficulties does not fall under the remit of the Department of Social Protection, however, it is imperative that the DSP liaise with the Department of Health to address this issue as a matter of priority.

Recommendation: Government should provide people with long-term mental health conditions the security of a medical card, including free prescriptions, in order to support their ongoing recovery and encourage their participation in the community, including in employment.

The absence of an evidence based approach to supported employment in Ireland

It is largely recognised that individuals with severe and enduring mental health difficulties will require a range of supports to access and sustain employment. There is strong evidence that the internationally recognised approach to supported employment (Individual Placement Support) is the most effective method of supporting this group of individuals to achieve sustainable, competitive work. It has also been shown to be both cost effective and less costly than traditional vocational approaches.

This approach includes seven key essential principles including: integrated mental health and employment supports; intensive, individual support; rapid job search followed by placement in paid employment; and time-unlimited in-work support for both the employee and the employer.

There are a number of criteria [otherwise known as the fidelity scale] that must be met, in order to fulfil the evidenced based approach to supported employment. One such criteria is the provision of work incentives planning for individuals with mental health difficulties who want to work. It requires that “all clients are offered assistance in obtaining comprehensive, individualized work incentives planning before starting a new job and assistance accessing work incentives planning thereafter when decisions about changes in work hours and pay”. This clearly reflects action number one, as set out in the Make Work Pay priority in CES.

It is imperative, however, that the full range of supports, as set out under the evidenced based approach to supported employment are provided to ensure that individuals with severe and enduring mental health difficulties who want to work are adequately supported to do so. Early indications of the pilot project in Ireland are that this approach is able to provide a more integrated supported employment service than has been the case previously through Employability services.

Furthermore, one challenge, identified through the pilot project is lack of transport, particularly in rural communities, in enabling people to access and sustain employment. The absence or lack of public transportation in many areas of the country has meant that it is extremely difficult for many individuals to get to and from work. This is particularly problematic in the case of people with severe mental health difficulties, as many do not drive due to the effects of prescribed medications. It is of

paramount importance that this barrier to employment is addressed in the Irish context of supported employment.

Recommendation: The evidence based approach to supported employment should be rolled out across the country to ensure that all individuals with mental health disabilities who want to work are provided with effective support into employment. The commitment by the Department of Social Protection to invest in the pilot of the Individual Placement Support approach to supported employment is very welcome by Mental Health Reform. However, it is important that this commitment is continued and extended.

Recommendation: Initiatives to provide transport to work in rural areas for people with disabilities should be rolled out so that individuals can avail of employment opportunities within their community.

Conclusion

Mental Health Reform has previously identified the importance of a flexible benefits and medical card system in order to facilitate opportunities for people with a mental health difficulty to try work, fall out of work and re-enter the work force numerous times, without fear of losing income support. The provision of transport in rural areas will also be necessary for some people with disabilities to be able to take up employment opportunities. In addition, the evidence based approach to supported employment should be rolled out nationally to ensure that any individual with a mental health difficulty who wants to work is adequately supported to do so.

About Us

Mental Health Reform is the national coalition working to promote improved mental health services and social inclusion of people with experience of a mental health difficulty. Mental Health Reform is available to discuss this submission in further detail. Please contact Kate Mitchell, Policy and Research Officer at 01 874 9468 or via email at kmitchell@mentalhealthreform.ie for further information.