

Platform Employment Forum - Opening remarks Warren Elwin Workwise Chief

Executive

Kia ora koutou

Nice to be here, I've been looking forward to this day. It's nice to be Wellington, I'm a Taranaki boy born and bred although for the last 20 years I have lived in Coromandel, which at the moment is inundated with camper vans filled with world cup tourists. I'm social worker by training and very fortunate that every day I get to do something I love in helping people connect with what they need to build their lives.

This morning I want to talk about the environment we find ourselves in, in regards to employment and mental health, I also want to cover a bit about what we at Workwise know and believe, and finish up with some opinions on what we'd like to see happen. In the week that we are likely to win the world cup – I'm going to begin by pointing out that we're not winning when it comes to employment and mental health. In New Zealand, people who are in contact with mental health services have an employment rate of less than 20 per cent. In fact, people who experience mental illness have the lowest employment rates of any disadvantaged group we have.

Over the last decade people with mental illness have become the largest proportion (at around the 40% mark) of people claiming invalids and sickness benefit. They have become a significant group experiencing poverty and income inequality, and therefore their needs are increasingly of concern to governments and agencies who

are worried about economic growth. Most of us in this room are rightly concerned also around people's wellbeing and the connection work has to this. We've got a challenge and an obvious way to meet that is to implement practices that will assist people to get and keep work.

We are in an era where most OECD countries are struggling with welfare-to-work reform. Many countries including New Zealand are involved in health reform as well. There are many changes occurring in health and welfare and we all realise I think that change has to occur. In the next few weeks the government's policy following the Welfare Working Groups recommendations will begin to be released. There will be significant changes mooted around sickness and invalids benefit. Changes to way health care is delivered will gain speed over the next couple of years. Various parts of the sector have endeavoured to influence where we can around any reforms, to advocate for a sound approach for the employment needs of people with mental health conditions. We will see as they come to pass.

In the late 19 90's when I was first getting involved with supported employment it was commonly thought that people with mental health problems:

- did not actually want to work,
- or if they did, that they needed an extended period of training and preparation before entering the competitive job market,
- and that this would only happen after 'recovering' before entering the stressful environment of the workplace

- It was also thought that employment services should be provided on a separate basis to mental health treatment.

Since that time Workwise has grown to support around 1800 people a year, with employment consultants integrated into 30 odd mental health environments ranging from NGO teams, community mental health teams and recently into primary care. I need to declare that I've become a fanatical fan of evidence-based supported employment, and that's happened through watching the gains several hundred people a year make in their lives by returning to work through this approach. However these gains are tempered for me given what more could be done - less than 25% of our mental health services in New Zealand are integrated in any way with employment support.

Here in 2011 we know a lot more about employment and mental health than we did 10 years ago.

We know that many people who experience a mental illness want to work, and can work.

When unemployed people with experience of mental illness are asked about their hopes for a job, the majority say they would like to work...either now or sometime in the future.

We know that using evidence-based supported employment can make a huge difference. In fact, many scientific studies and our own experience have shown that the use of this approach can push employment rates to over 60 per cent.

We know that when people are working they are less reliant on the welfare system.

We also know that having a paid job can be a key part of getting well and staying well.

Every week I hear people who have a job talk about the important role that working plays in their well-being. They also consistently talk about how important work is to their financial independence, their pride in themselves and their sense of self-worth and confidence. Many studies have also shown that having a job not only improves the symptoms of a mental illness, but it reduces the contact time people need from mental health teams. It also reduces the number of hospital admissions as well as the length of those admissions.

Employment then, to my mind is a health intervention. Conversely, we know that unemployment is bad for our health, particularly our mental health. Help to get a job isn't something that happens after treatment; it is part of a person's treatment.

Our view is that the very low employment rates for people who experience mental health conditions is both a welfare and a health issue. It is everybody's business.

We know that the earlier we support in this area the better. We believe that if New Zealand extended evidenced based supported employment into more primary and secondary mental health services, that there is huge potential to reduce the number of people on benefits at the same time as improving their mental health. Recently we have been working with Price Waterhouse Coopers and we know that this is an effective use of tax payer's funds.

Evidenced based supported employment is increasingly attracting attention here, with several DHB's funding these programmes. More and more mental health services are seeing that they have a key role to play in supporting people to engage with employment. The response to this forum is testament to that. We're at a time where many of us are looking outside of our existing world views about illness. Visions for mental health services are increasingly underpinned by a desire for a social inclusion kaupapa that links across health and housing, education and community strengthening and employment. Well being, in this view, is highly concerned with the idea of building a life beyond or including illness. Hope, a sense of personal control and opportunity, are key things relating to social recovery. And employment, as everyone in this room knows - is so often the foundation that can help deliver these things for people

The Australasian College of Physicians Consensus Statement

Last year these foundations were recognised across the health sector through a consensus statement released by the Royal Australasian College of Physicians and signed by many of our government departments and our professional bodies.

It outlines much of the evidence there is for the links between health and work. It also states that health professionals have a lead role to play to ensure their patients,

including people who experience a mental illness, can access the health benefits of work.

The statement highlights an important shift in thinking. I was delighted to see the recognition given in the statement to the negative effects of unemployment on mental health. I think viewing employment and health separately, whether in policy making, in funding or in delivering services, runs the risk of working to the detriment of people, their families and our communities. The statement provides recommendations to government, medical professionals and employers. It is important reading and its easily found on Google.

Early last year I took a phone call from a grateful mother whose 27 year old son had entered community mental health services for the first time with bi polar disorder. He had a job although that had gotten pretty shaky due to his illness induced behaviours in the workplace. His psychiatrist had organised for an employment consultant to meet with him, because the young man was worried about his job because he had been away from it for a few weeks. The employment consultant visited the employer – who was pretty grateful about the visit because he wasn't at all sure how to deal with the situation. The result was that the job was saved and a return to work plan was put in place – with the involvement of clinicians, the employer and other supports. Another person from Workwise's books got a fixed term contract providing cover.

His mother was calling to say thanks because she'd been looking after his two kids and it all meant that they were able to go back to their Dad once he was better, and

because he was working. She also said to me that all her sons' mates were at his work. Reflecting on this, I was reminded again that work and employment are not only often the main way by which people connect with their communities and build their lives, but that one job saved or secured often involves and affects many people.

So my final thoughts

Evidence based supported employment works, but it is not yet widely used across New Zealand. As a country we need to do much better. Only one in five people with mental illness have a paid job. These poor employment rates are of concern to government, policy-makers and planners, and indeed must be to all of us. I'd like to see employment support available to any one who wants it, in any mental health and addiction service, primary or secondary in New Zealand. The time for the development of policies that require supported employment to be funded, provided and monitored in these environments is now.

I think that this is an exciting time for vocational rehab. We know that paid employment is central to human health, and we also know about the work required if we are to make the mental health service user with a job and a career the norm not the exception. We're all working and I have to say in the right jobs! That's because wellness is the future, and it will be in addressing the social determinants of health that the solutions to achieving that wellness, for our country, will come. I suspect that many of the champions for this are already in the room.

Thank you Platform and ASENZ for organising this day - I hope that it is a time for us all to reach out and make connections with each other as people who can make a difference, and for us all to come away inspired in regards to the work to be done.

Thank you for your kind attention

Kia Ora