

# Individual Placement and Support: History, Recent Research, and New Populations

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# Outline

- Importance of work
- History of IPS
- Recent research
  - Evidence for IPS principles
  - IPS for young adults
- New populations and settings

# Why is Work Important?

- Most people with mental illness want to work!
- Most see work as a key part of recovery
- Being productive = Basic human need
- In most societies, typical adult role
- Working can be a way out of poverty
- Working may prevent entry into disability system
- Working contributes to better health and well-being

# Positive Impact of Competitive Employment for People with Mental Illness

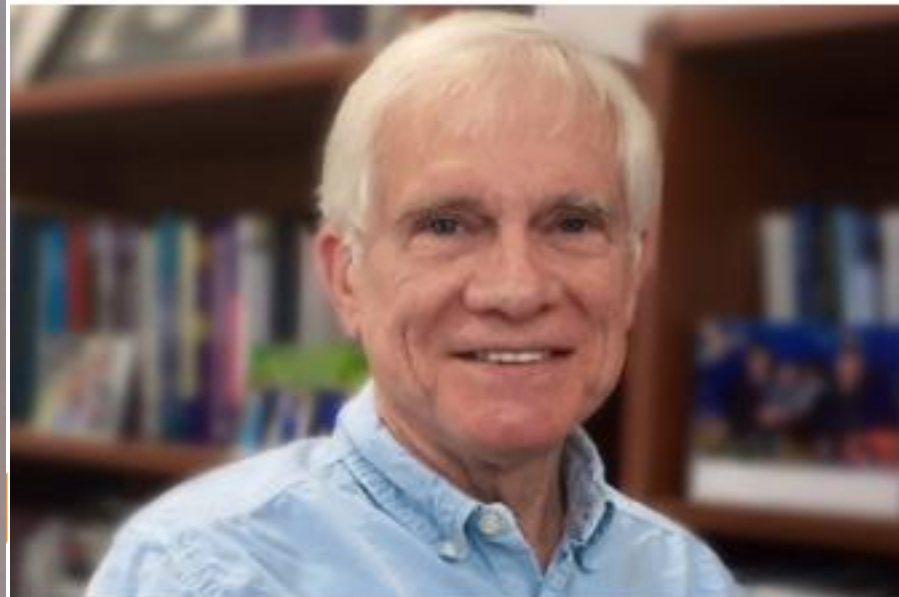
**Benefits of work for people with mental illness are similar to those for general population:**

- increased self-esteem, improved financial security
- fewer mental health symptoms, less social isolation, and reduced substance use

(Drake, 2020; Gibbons, 2019; Luciano, 2014; Wallstroem, 2021)

# Individual Placement and Support (IPS)

Evidence-Based Supported Employment Model  
Developed by Deborah Becker and Robert Drake  
*A Working Life* (1993)



# A Brief History of IPS

- What were vocational services like in the US before IPS?
- What new ideas did IPS introduce?
- What has the research shown?

# Before IPS: Beliefs about Employment for People with Serious Mental Illness

- Very few people with mental illness want to work
- Most people with mental illness aren't able to work
- Work is too stressful
- We must screen people for readiness if they do work
- We must prepare clients before placing them in jobs
- If ready, clients should be placed in easily-available jobs or temporary set-aside jobs

# Vocational Services for People with Serious Mental Illness in 1970s and 1980s

- Few mental health centers had any role in voc services
- Most clients had no vocational services at all
- Some attended day treatment for skills training
- For the few who did receive vocational services:
  - Sheltered workshops
  - Clubhouses providing unpaid work experiences and transitional employment



# Revolutionary Ideas Built into the IPS Model

- People with mental illness are capable of working
- Working is a crucial part of mental health treatment
- Anyone who wants to work should be offered employment services
- Competitive employment should be the only focus
- Most people have job preferences
- Prevocational training is a bad idea

Pioneering Study:

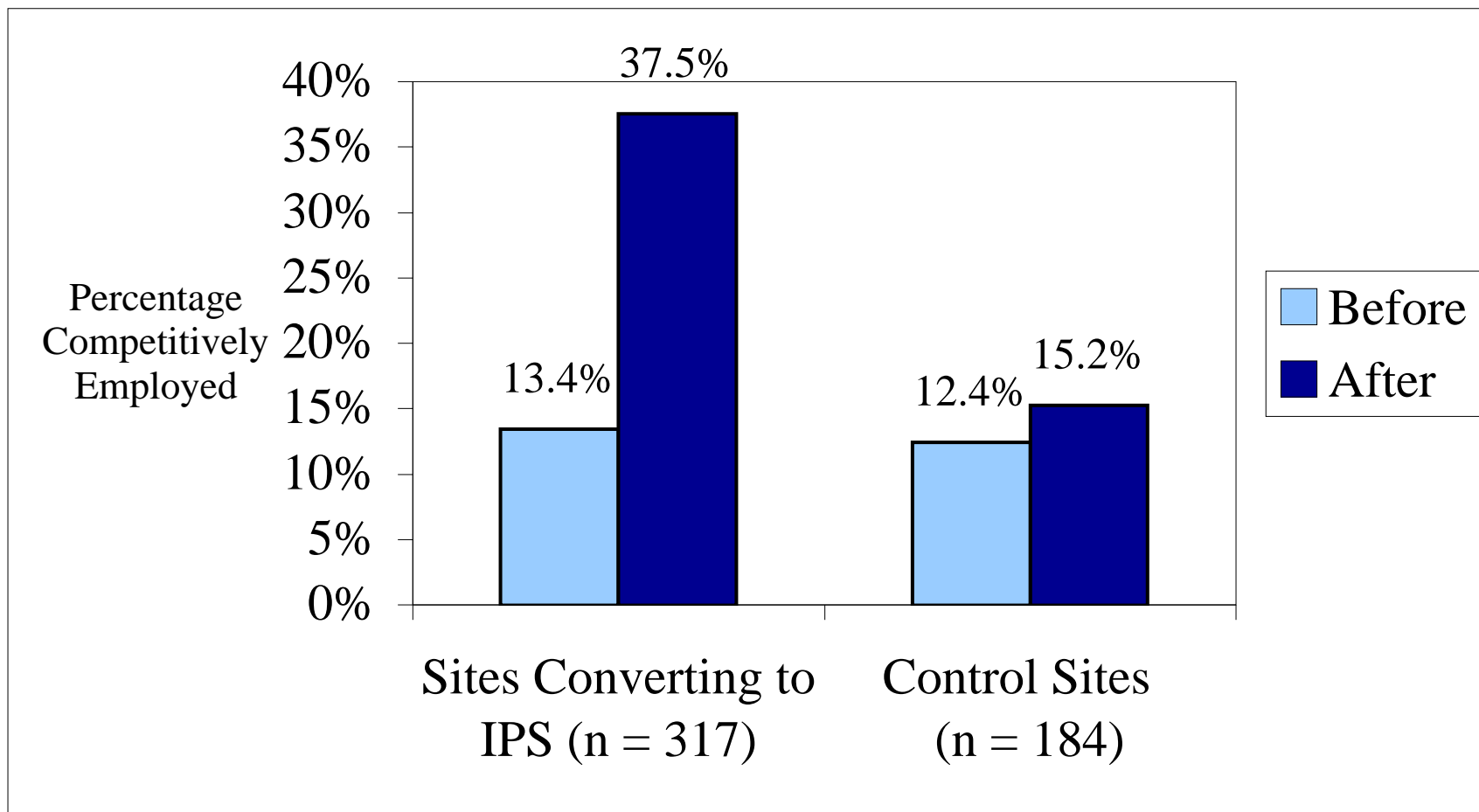
New Hampshire Study  
Converting Day Treatment to IPS

# Day Treatment Conversions to IPS: Common Study Design in 4 Studies

- Discontinued day treatment
- Reassigned day treatment staff to new positions
- Implemented new IPS program
- Compared to day treatment sites not converting

Sources: Drake and Becker

# Day Treatment Conversion Studies Comparing 6 Sites Converting to IPS to 4 Control Sites That Continued Day Treatment



# Similar Results in All Day Treatment Conversions

- Large increase in employment rates
- No negative outcomes (e.g., relapses)
- Clients, families, staff liked change
- Most former day treatment clients spent more time in community, even those not working
- Resulted in cost savings

# Unique IPS Tradition

Experimental Studies to Evaluate if IPS Works

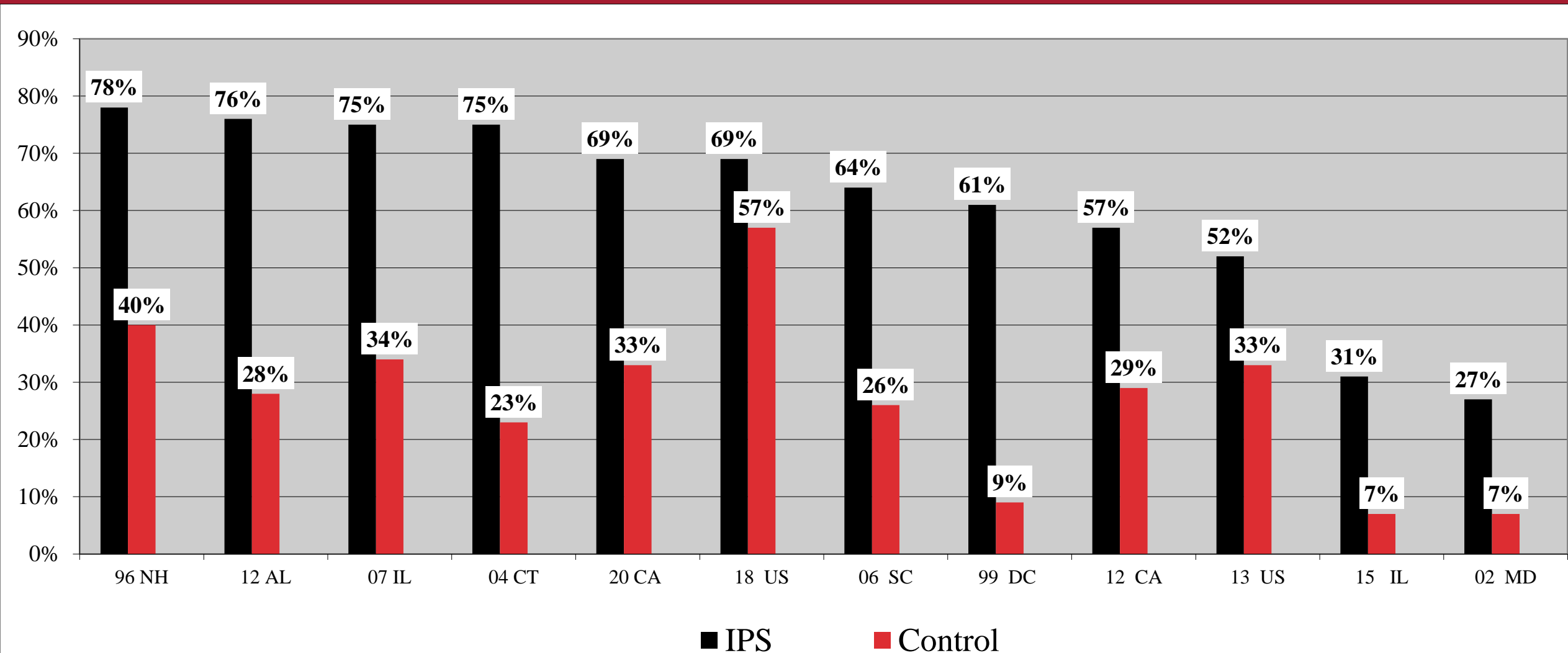
Started in US, Then Spread to Other Countries

# 28 Randomized Controlled Trials (RCTs) of IPS for People with Serious Mental Illness

Between 1996 and 2021, researchers conducted:

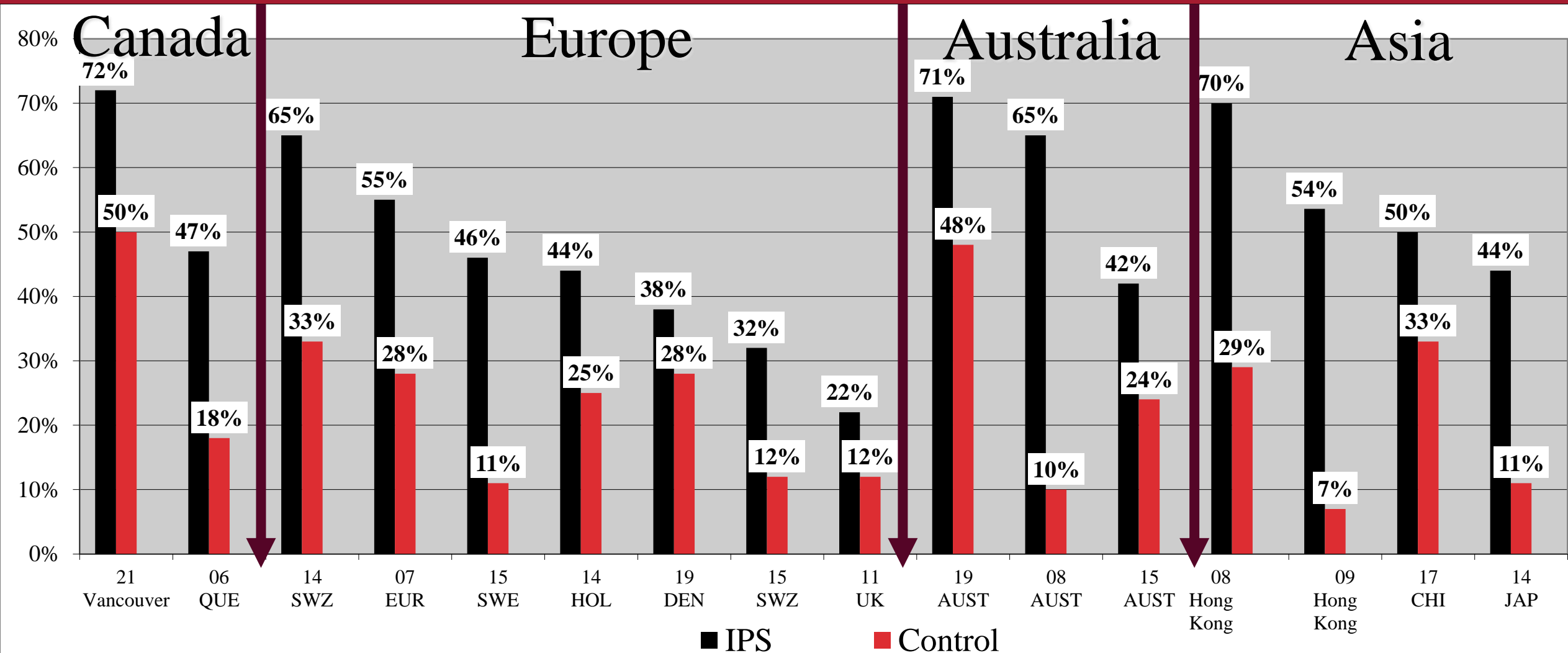
- 12 US RCTs and 16 RCTs in 12 other countries
- Most studies had at least 18-month follow-up
- Total enrollment = 6,468 participants
- In most studies, the control group received services as usual (sometimes best practices)

# Competitive Employment Rates in 12 RCTs of IPS in United States





# Competitive Employment Rates in 16 RCTs of IPS Outside United States

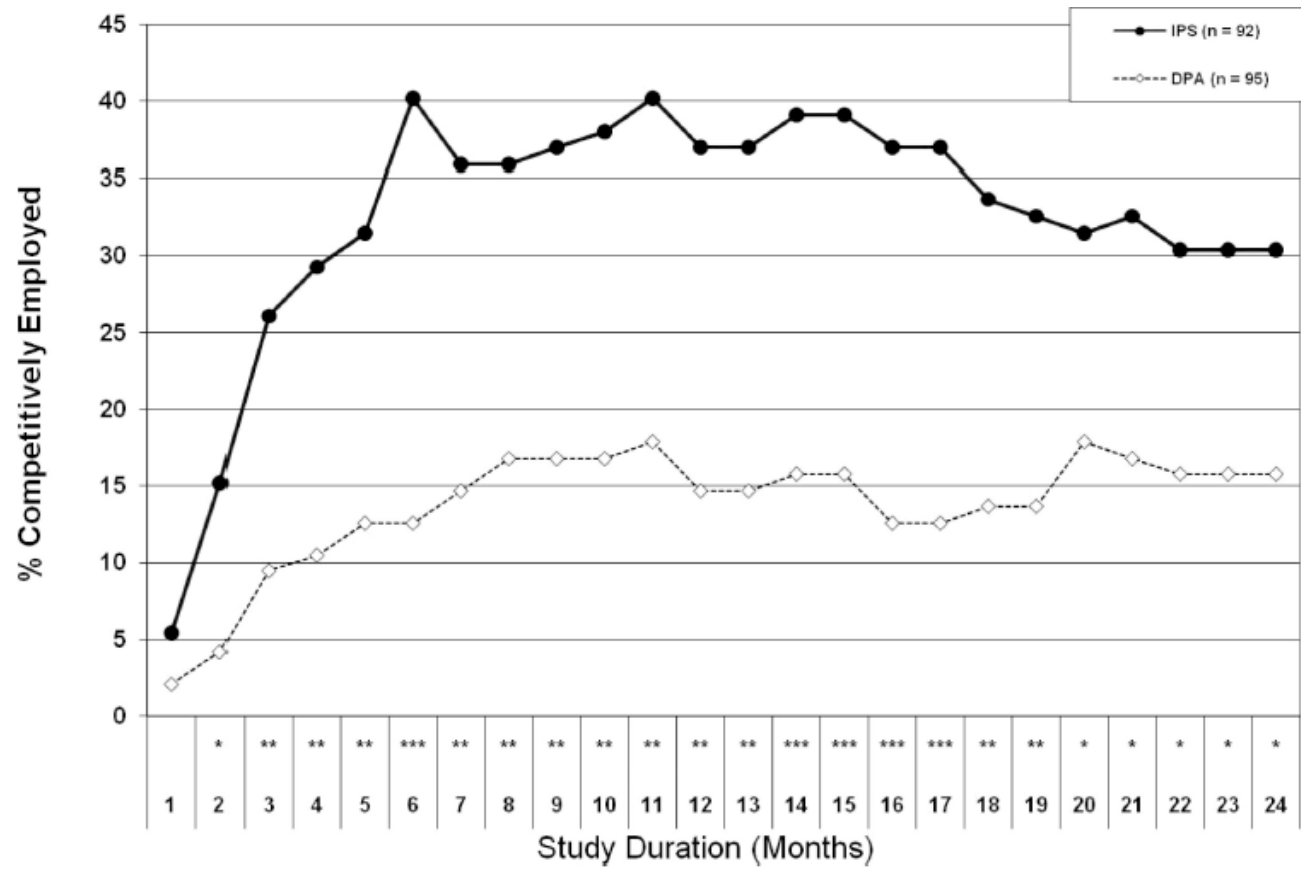


# Overall Findings for 28 RCTs

## Mean Competitive Employment Rates Across RCTs

	<b>US</b>	<b>Outside US</b>	<b>Overall</b>
<b>IPS</b>	61%	51%	55%
<b>Control</b>	27%	23%	25%

# IPS Typically Has Better Monthly Employment Rates: Examples from Two RCTs



Bond et al. (2007)

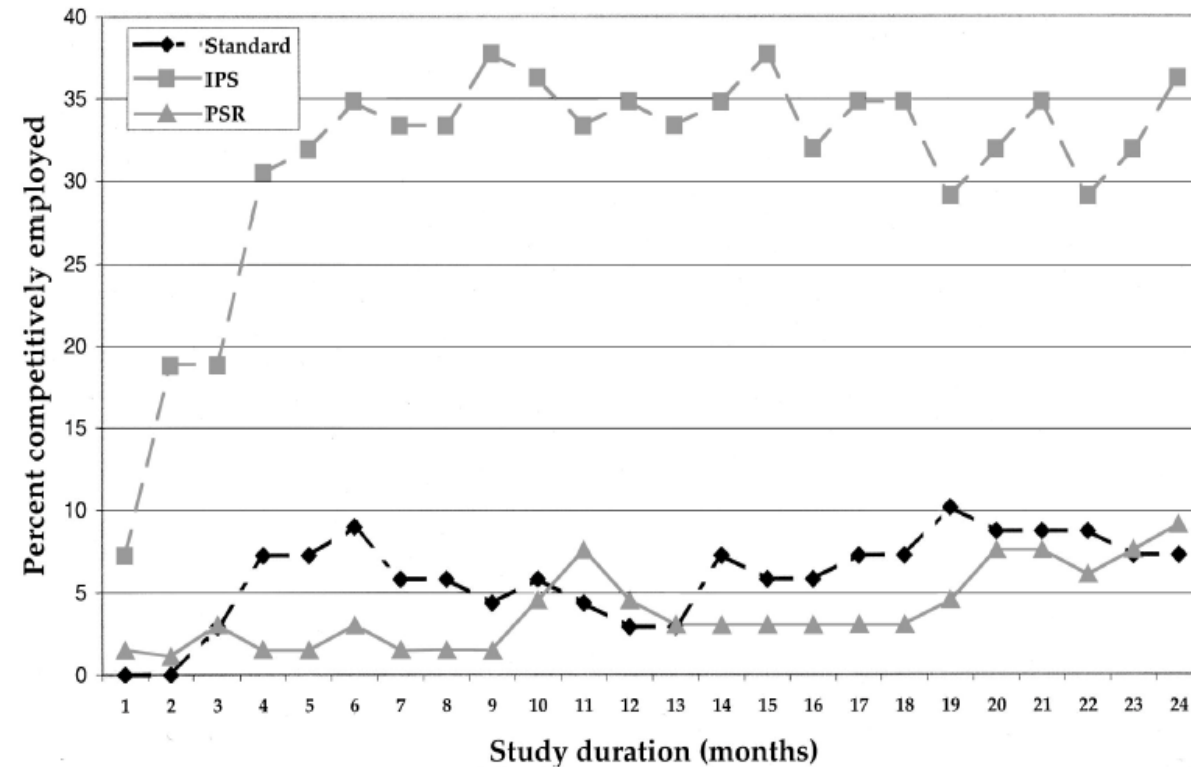


Figure 1. Monthly rates of competitive employment for clients in the standard services (Standard), individual placement and support (IPS), and psychosocial rehabilitation (PSR) programs.

Mueser et al. (2004)

# Compared to usual services, IPS has superior employment outcomes on numerous criteria

- 33% fewer days to first job
- Four times as many weeks worked during follow-up
- Triple the earnings from employment
- Triple the number working 20 hours/week or more
- Greater job satisfaction

(Bond, et al., 2020)

# Steady Employment Over Long Term for IPS: Combined Data from 3 Studies

<b>Program</b>	<b>Sample</b>	<b>% working at least half follow-up period</b>
<b>IPS</b>	120	49%
<b>Usual VR</b>	54	11%

Follow-up periods: Hoffmann (2014): 5 years;  
Salyers (2004): 10 years; Becker (2007): 8-12 years

# IPS Has Been Implemented Widely in Routine Practice

- IPS has been successfully implemented across the U.S. and worldwide
- Program leaders have overcome geographic challenges
- IPS is effective in both urban and rural communities

Who Benefits from IPS?

Researchers Looked at IPS  
for Specific Subgroups

# IPS Is Effective for Many Subgroups of People with Serious Mental Illness (Campbell, 2011)

- Different diagnostic groups, including schizophrenia
- All age groups and both men and women
- Diverse ethno-racial backgrounds
- Entire range of work history, including little or none
- All levels of educational attainment
- Mild or severe psychiatric symptoms
- Extensive hospitalization history



# Diversity, Equity, Inclusion, and Accessibility

(Bond et al., 2023)

Systematic review of IPS literature examined Access, Retention, and Effectiveness for Blacks and Hispanics

- **Access:** Mixed results. Some studies show less access for Blacks, some show equal access
- **Retention:** Once enrolled, Blacks and Hispanics have similarly high retention in IPS as Whites
- **Effectiveness:** Once enrolled in IPS, Blacks and Hispanics have similarly positive outcomes as Whites

# Recent IPS Research

- Assessing the validity of IPS principles
- IPS for young adults
- Extensions of IPS to new populations

# IPS Principles

- Open to anyone who wants to work
- Focus on competitive employment
- Rapid job search
- Targeted job development
- Client preferences guide decisions
- Individualized long-term supports
- Integrated with treatment
- Personalized benefits counseling

# Most People with Mental Illness Want to Work in a Competitive Job

## Adamus (2024) – systematic review

- 30 studies worldwide (12 from US) with a total of 11,029 respondents
- % respondents who want a competitive job:
  - Worldwide: 61%
  - In US: Also 61%

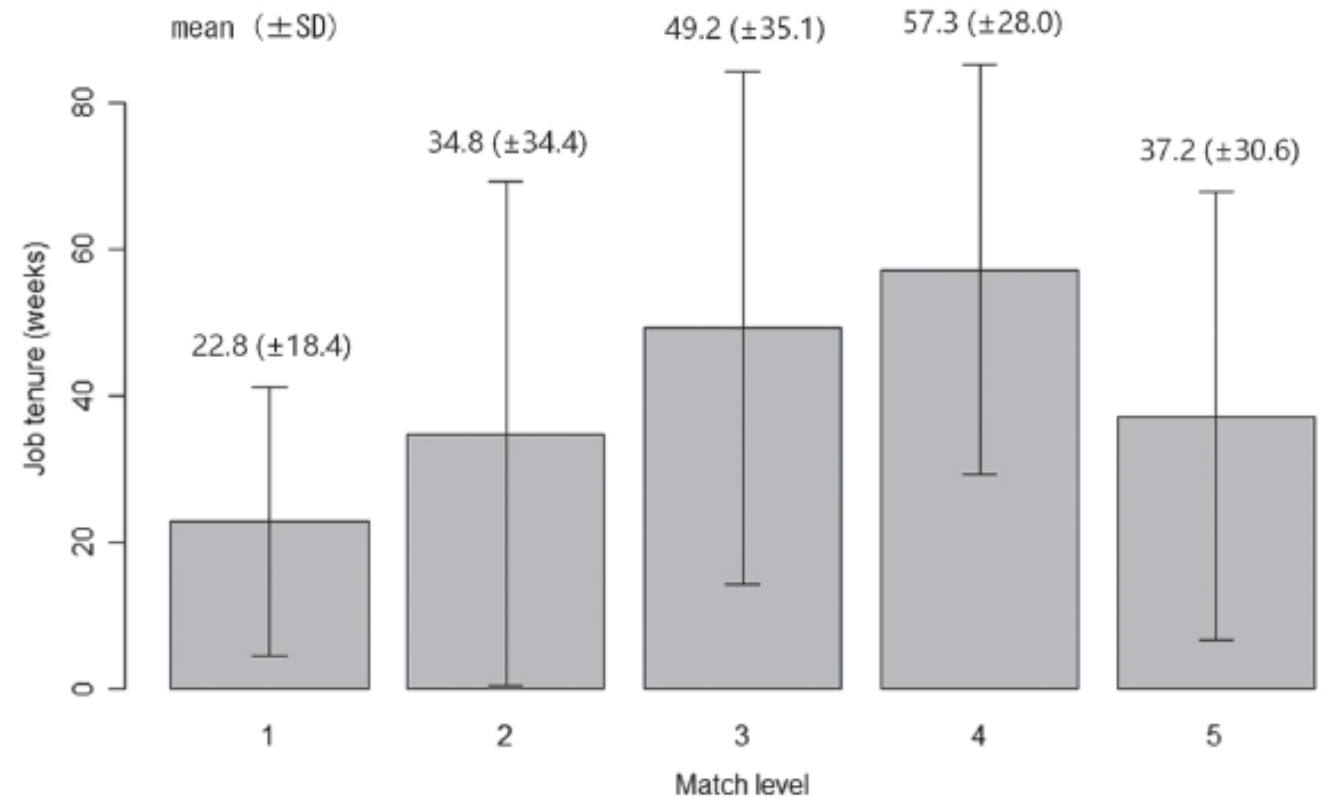
# Matching Preferences → Longer Job Tenure (Igarashi et al., 2022)

At IPS enrollment, clients asked job preference in five areas:

- Occupation type
- Monthly income
- Weekly work hours
- Commute time
- Illness disclosure

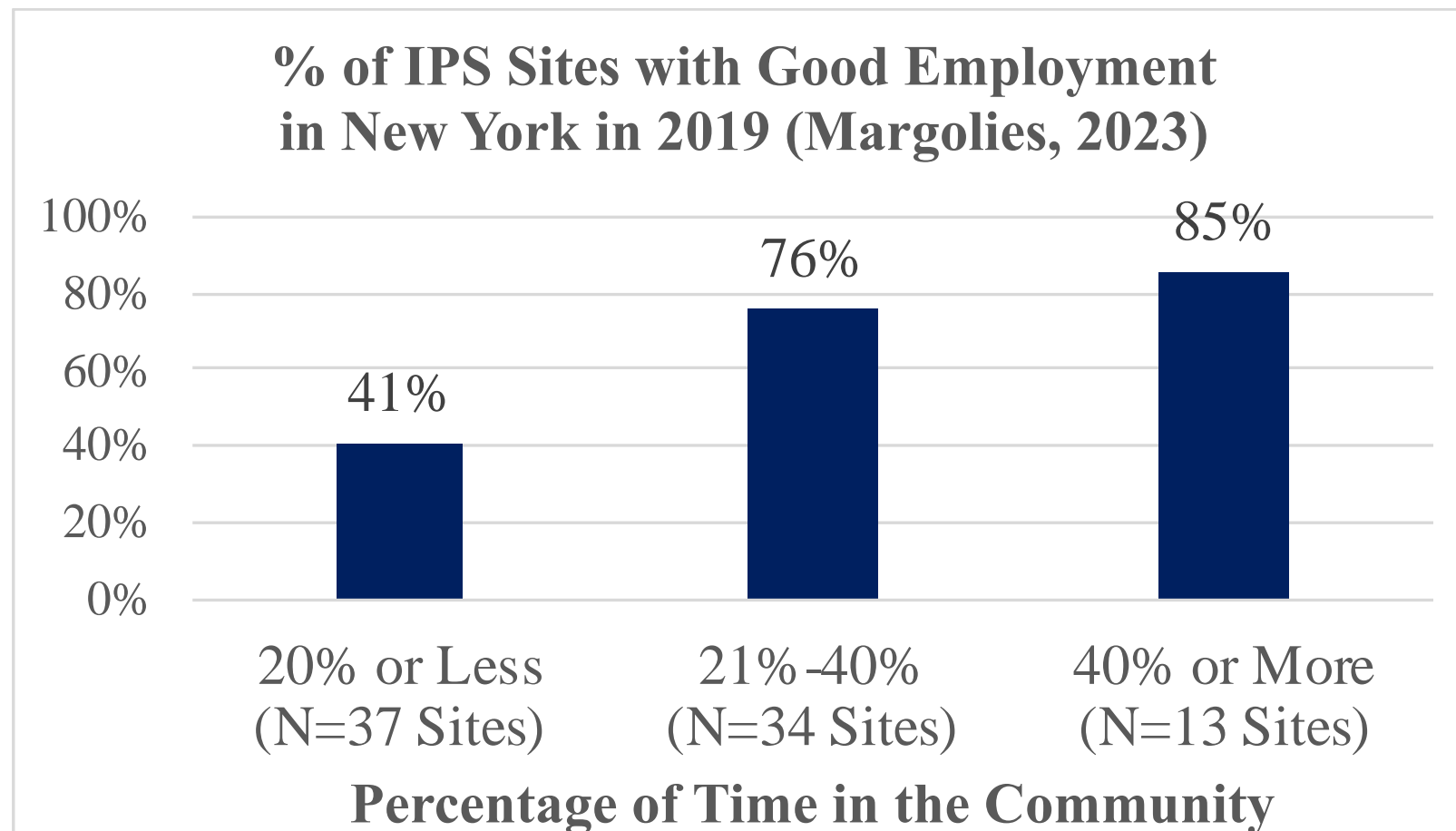
**Figure 2**

*Mean and Standard Deviation of Job Tenure by Match Level*



Number of Matches Out of 5 Areas

# % Time in Community Correlated with Better Employment Outcomes (Margolies, 2023)



- IPS teams with 20% or less contact time in the community had poorer employment outcomes

# IPS for Young Adults

# Prevalence of Mental Health Conditions in Young Adult Population

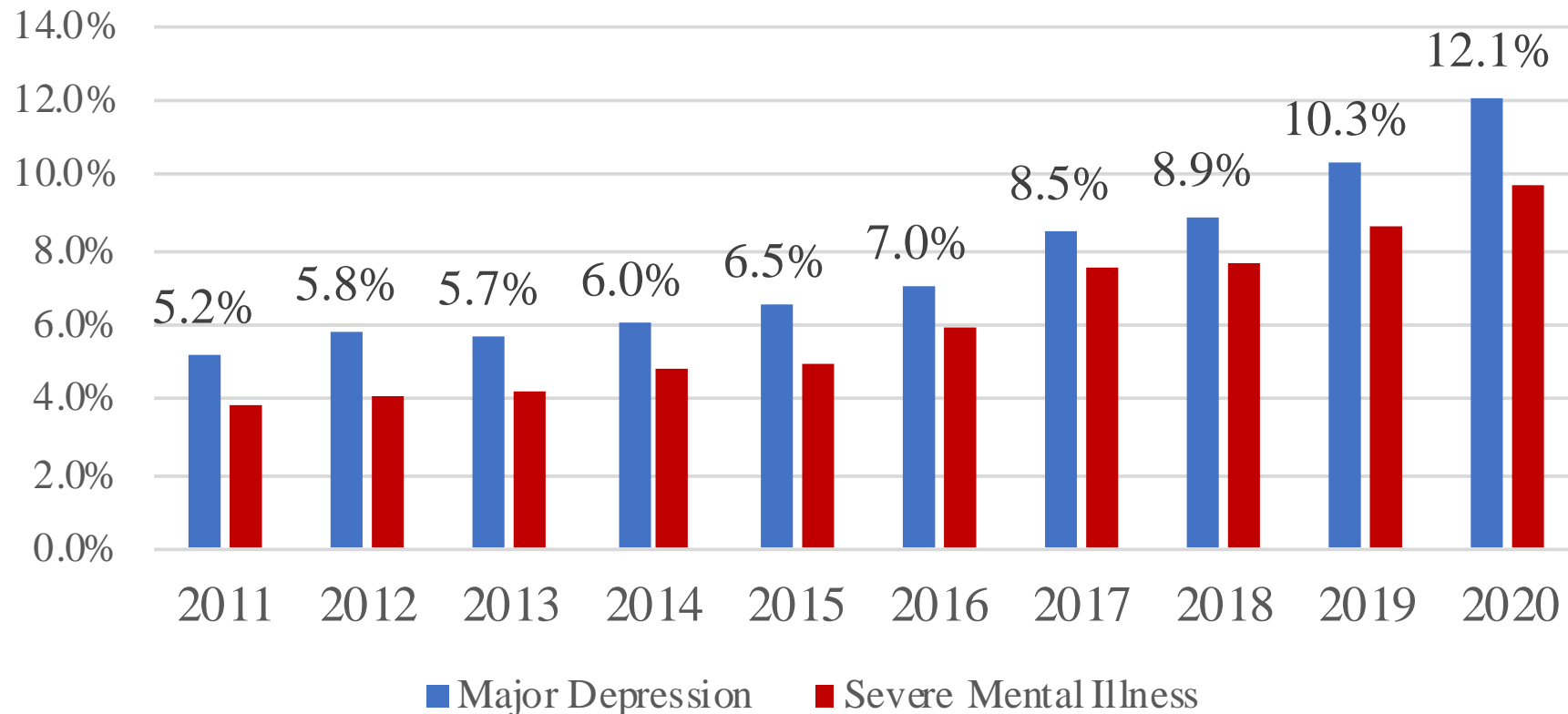
In 2022, according to National Survey on Drug Use and Health, of 35 million Americans aged 18 to 25:

- 12.6 million (36%) reported a mental health condition
- 4.0 million (12%) reported serious mental illness



# Mental Health Problems for Young Americans Have Been Increasing for Over a Decade

Percentage of Young Adults (Ages 18-25) Reporting Serious Psychiatric Symptoms



**Source:**  
National  
Survey on  
Drug Use  
and Health

# Competitive Employment of Young Adults

- Swedish study found **32%** of young adults (ages 19-30) with mental health conditions were **unemployed** over most of a 6-year follow-up period
- >1 million young adults with mental health conditions in U.S. are not in employment, education, and training (“NEET”)
- Long-term outcomes are poor for young adults in the NEET population who lack early intervention

# Recent Focus on Employment Services for Young Adults in Diverse Populations

- High school students with mental health conditions
- Foster care children transitioning from child and family services
- Homeless young adults
- Young adults in juvenile justice system
- Young adults with early psychosis
- Young adults enrolled in community mental health

# IPS for Young Adults: Is It Effective? Three Recent Reports

- Systematic review of randomized controlled trials of IPS for young adults with mental health conditions
- Australian study of IPS for young adults enrolled in headspace (specialty health service for young adults)
- US study of IPS for young adults with depression and anxiety enrolled in community mental health centers, family services, or comprehensive rehab programs

# Systematic Review: Research on IPS for Young Adults

- Seven randomized controlled trials (total N = 697)
  - 4 studies – young adults with early psychosis
  - 2 studies – young adults with serious mental illness
  - 1 study – young adults with mental health conditions receiving disability benefits
- Overall employment rate: 58% for IPS, 32% for controls
- Overall education rate: 52% for IPS, 37% for controls

# Australian IPS for Young Adults (Simmons et al., 2023)

- IPS teams in two headspace centers in Melbourne
- Sample consisted of 326 young adults (ages 15-25)
- 80% had a diagnosis of depressive or anxiety disorder or other nonpsychotic disorder
- Fair to good IPS fidelity
- Peer worker provided vocational support to 116 (36%) participants requiring additional support

# Australian IPS for Young Adults: Outcomes (Simmons, 2023)

- 195 (60%) of young adults achieved a competitive job working 15 hours or more per week
- 87 (55%) of approved jobs sustained for 26 weeks
- Young adults receiving peer support had similar outcomes as those who did not request help

# US Study of IPS for Young Adults (Bond et al., 2024)

- Study conducted from March 2020 to June 2022  
(included pre-vaccination COVID pandemic period)
- 9 IPS programs in 5 states (CA, KY, MN, SC, WI)
- 111 young adults (ages 16-24) enrolled and followed up until termination or one-year follow-up



# IPS for Young Adults: One-Year Outcomes (N = 111)

- **Mean program retention:** 5 months
- **Gained employment:** 51 (46%)
- **In education during follow-up:** 40 (36%)
- **Began new education program:** 14 (13%)
- **Employed and/or education:** 76 (69%)

# Summary: IPS for Young Adults

- Originally developed for working-age adults, IPS is also effective for young adults with mental health conditions
- Unique challenges in young adult population include engagement, overcoming lack of work experience, and securing funding for services for this age group

# IPS for Other Populations

# Expanding IPS to New Populations Beyond People with Severe Mental Illness

Research completed or underway for people with:

- Common mental disorders
- Substance use
- Medical conditions/physical disabilities
- Intellectual and developmental disabilities
- Autism spectrum disorder
- Justice involvement (felony convictions)
- TANF benefits (Temporary Aid to Needy Families)

# Expanding IPS to New Populations Often Means Expansion to New Settings

- Schools
- Substance use treatment programs
- Primary care settings
- Federally Qualified Health Centers
- Rehabilitation clinics
- Parole offices

**New settings require IPS adaptations**

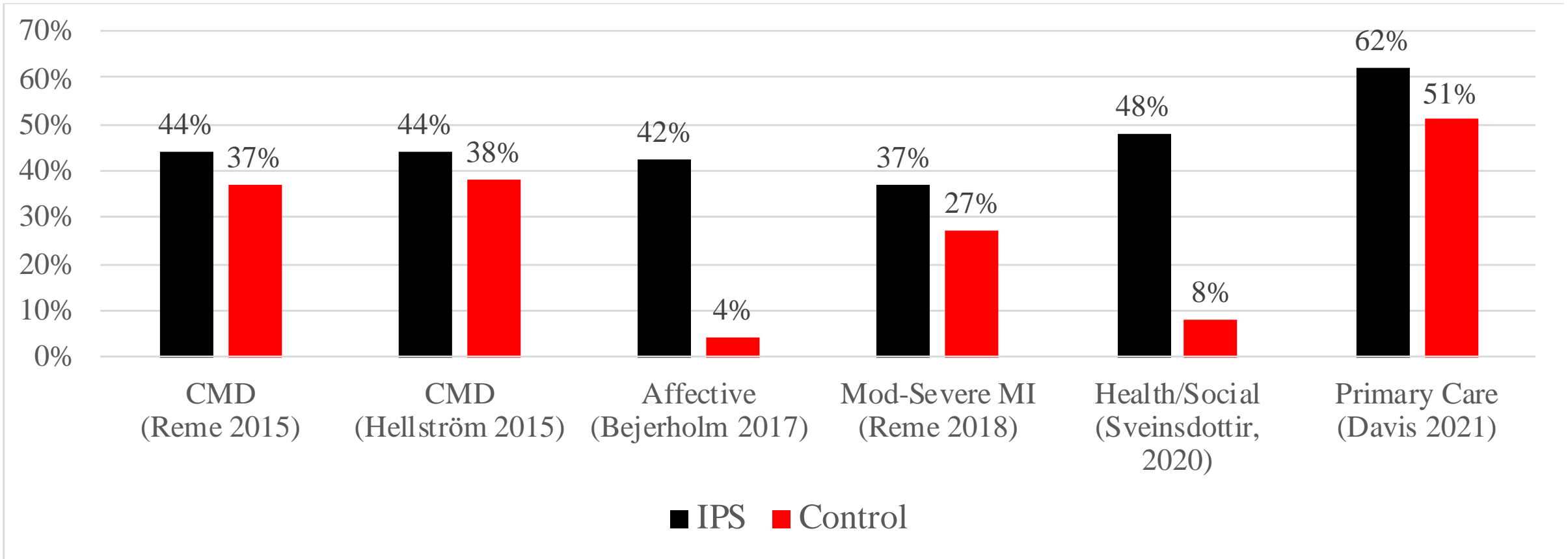
# IPS for People with Justice Involvement

- Two RCTs of IPS for veterans with justice involvement (LePage) and one small RCT for people with serious mental illness and justice involvement (Bond, 2011) – all three studies had positive results
- NextGen – Large multisite RCT of IPS for people leaving correctional system – in progress
- **Challenges: Integration with justice system and engagement of people during transition**

# IPS for People with Intellectual and Developmental Disorders (Including Autism)

- Widespread interest throughout US
- So far, little research
- Pilot project in Illinois for high school students with developmental disabilities showed feasibility of IPS (Noel, 2017)
- Large study of IPS for people with autism under way in Davis, California

# Competitive Employment Rates in 6 RCTs of IPS for People with Common Mental Disorders

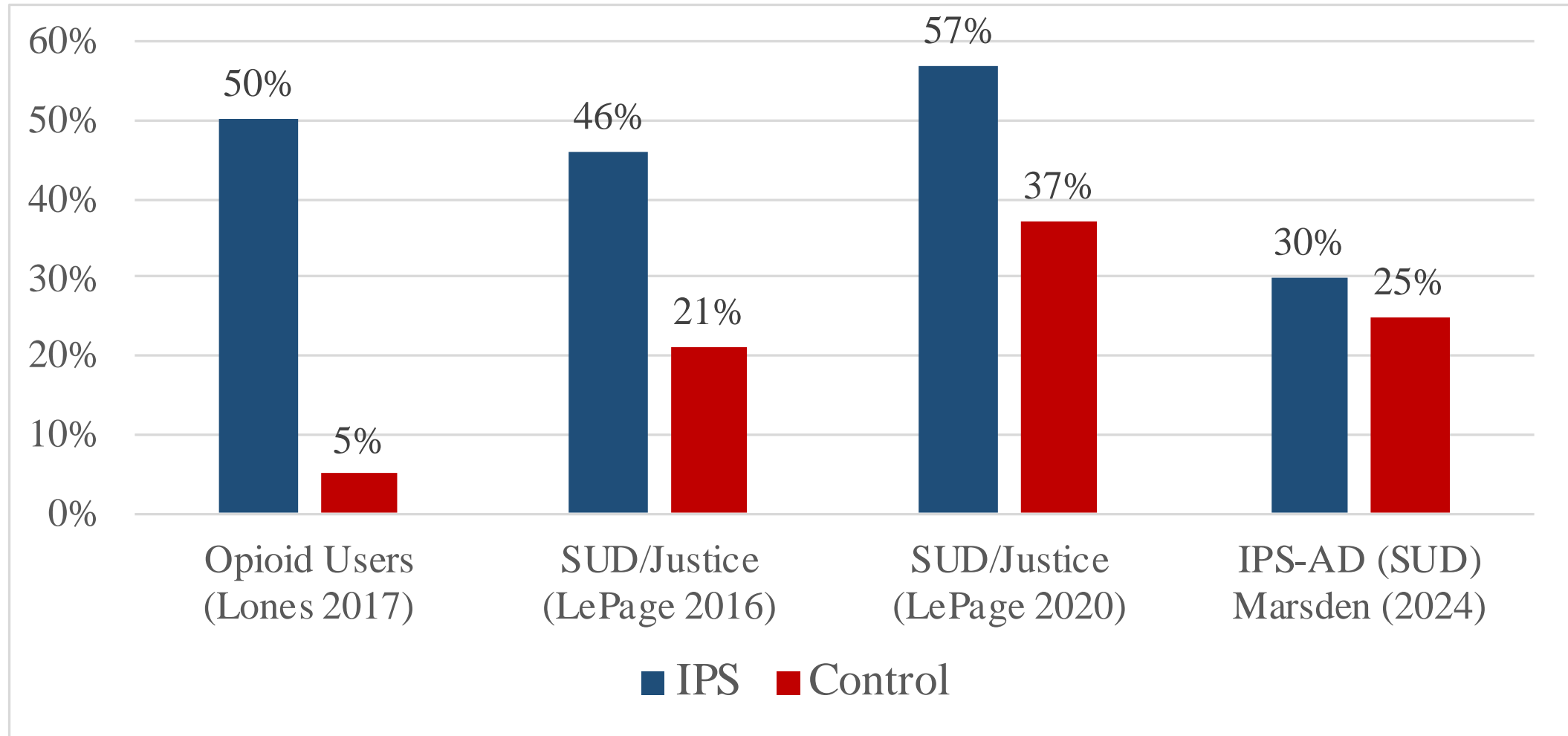




# IPS for People with Common Mental Disorders

- “Common mental disorders” include anxiety and depressive disorders
- Often includes people who are returning to an existing job
- Job search often not an issue
- Only one RCT completed in US: Davis (2021)

# Competitive Employment Rates in 4 RCTs of IPS for People with Substance Use Disorders

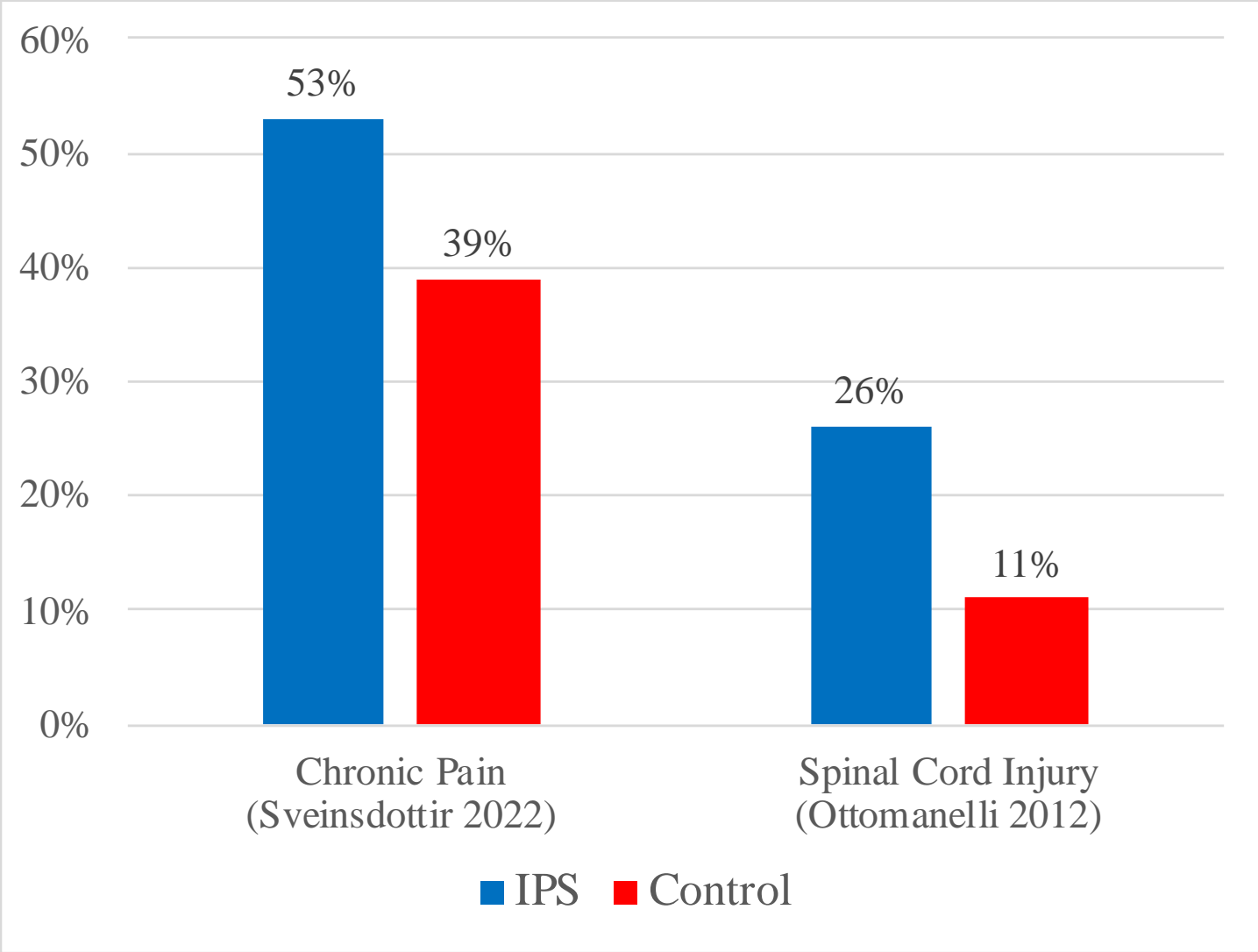


SUD = substance use disorder

# IPS for People with Substance Use Disorders

- Wide interest throughout US in extending IPS for people with a primarily diagnosis of substance use disorder
- In US, Project BEES is a national RCT of IPS for substance use – currently nearing completion
- European projects on IPS for people with substance use
  - UK expansion (Johnston, 2024)
  - Large studies in progress in Norway and Sweden

# Competitive Employment Rates in 2 RCTs of IPS for People with Medical Conditions/Physical Disabilities



# Summary

- IPS is by far the most extensively and carefully researched of all vocational models
- IPS improves competitive employment outcomes for people with serious mental illness
- Its applicability to other populations is promising