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Employment program for patients with severe mental illness in Malaysia: A 3-month outcome

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Abstract

Objective: This study aimed to examine the rate and predictive factors of successful employment at 3 months upon enrolment into an employment program among patients with severe mental illness (SMI).
Methods: A cross-sectional study using universal sampling technique was conducted on patients with SMI who completed a 3-month period of being employed at Hospital Permai, Malaysia. A total of 147 patients were approached and 126 were finally included in the statistical analyses. Successful employment was defined as the ability to work 40 or more hours per month. Factors significantly associated with successful employment from bivariate analyses were entered into a multiple logistic regression analysis to identify predictors of successful employment.
Results: The rate of successful employment at 3 months was 68.3% ($n = 81$). Significant factors associated with successful employment from bivariate analyses were having past history of working, good family support, less number of psychiatric admissions, good compliance to medicine, good interest in work, living in hostel, being motivated to work, satisfied with the job or salary, getting a preferred job, being in competitive or supported employment and having higher than median scores of PANNS on the positive, negative and general psychopathology. Significant predictors of employment, from a logistic regression model were having good past history of working ($p < 0.021$; OR 6.12; [95% CI 2.1–11.9]) and getting a preferred job ($p < 0.032$; [OR 4.021; 95% CI 1.83-12.1]).
Conclusion: Results showed a high employment rate among patients with SMI. Good past history of working and getting a preferred job were significant predictors of successful employment.
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1. Introduction

Employment has been recognized as an important tool in the treatment of people with severe mental illness (SMI) to promote recovery. It has become one of the important components in psychiatric rehabilitation. Besides providing in-

come, it may improve social function, self-esteem, quality of life, insight, treatment compliance and symptom [1–9]. The area has been extensively researched in the developed countries [1–9] with certain employment models being more and more incorporated into psychiatric services. The evidence indicates that many people with severe mental illness can be assisted in finding and maintaining competitive employment.

Among these models, individual placement and support (IPS) model of supported employment was observed to have the largest evidence for its positive outcomes [3,5,10–16]. This model employs the "place-train" approach unlike the traditional "train-place" model of vocational rehabilitation, whereby the individuals are immediately placed in the competitive employment settings and provided necessary training and ongoing support to maintain employment [11].

It has been consistently shown that IPS is superior to other rehabilitation programs with better employment outcomes, for example, better competitive wages and improving job retention [10,15].

In Malaysia, work rehabilitation program in the mental hospitals is still largely "train-place" in approach by providing work in a sheltered environment, training people before sending them to work. Supported employment using the IPS model in the current study setting was first developed in 2009 in a large scale where most of prevocational activities were stopped and resources channelled to place individual patients in the community jobs. Social enterprise is another model within the supported employment concept developed at the center, where patients are employed by businesses created in the center and receive competitive salary. Patients who do not survive these two types of employment are placed in the transitional work which acts partly as training for the patients as well earning income.

It is also important to know that work rehabilitation program in a developing country like Malaysia is operating on low-resource levels as resources in general are inadequate in all psychiatric service settings. This study aimed to examine the rate and predictive factors of successful employment at 3 months among patients with SMI upon enrolment into an employment program in a Malaysian mental hospital. The outcome of this study may be useful to inform further development in this area in developing countries like Malaysia.

2. Method

This study was conducted at the Hospital Permai, the second largest among the four mental hospitals in Malaysia. Data were collected cross sectionally in a period of 3 months between July and September 2011. The study was a naturalistic and retrospective cohort study on patients with SMI who were referred for job placement. All patients who completed the period of 3 months upon enrolment into the employment program were approached to participate in the study.

Inclusion criteria included the following: (1) having diagnosed with either schizophrenia, bipolar disorder or major depressive disorder with psychotic features by psychiatrists based on DSM IV-TR; (2) age between 18 and 60 years old; and (3) being proficient in either Malay or English language and literate. Exclusion criteria included the following: (1) being diagnosed with mental retardation and dementia and (2) refusal to consent. The employment profiles were obtained from the clinical records. Respondents filled in the Demographic Data Questionnaire, Clinical and Work History Questionnaire before they were assessed using the Positive and Negative Syndrome Scale (PANSS) and Schedule for the Assessment of Insight (SAI). S.H.W.K., who did the data collection, completed a training module on

the PANNSS. An approval was obtained from the Research Ethics Committee of the Faculty of Medicine, Universiti Kebangsaan Malaysia (UKM) and the Director of Hospital Permai prior to starting the study.

2.1. Study instruments

2.1.1. Demographic, clinical and work data questionnaires
These self-developed questionnaires were used to gather information on gender, age, ethnicity, marital status, education level, duration of illness, diagnosis, number of previous admissions, co-morbidities, medications and compliance to medications, employment status, previous employment, type of work, preferred job, satisfaction with job, salary and employer and motivation to work. Motivation for, interest in and satisfaction from job and salary were assessed with Likert scales: 5, very good; 4, good; 3, average; 2, poor; and 1, none.

2.1.2. The Positive and Negative Syndrome Scale (PANSS)
This widely used scale is a 30-item scale measuring positive, negative and general psychopathology. Symptom severity is assessed in a scale from 1 (absent) to 7 (extreme) with higher scores indicating more severe symptoms [17]. The scale has good internal reliability for all the components [17], inter-rater reliability and test–retest reliability [18]. It has been repeatedly shown to have criterion-related validity [17].

2.1.3. The Schedule for the Assessment of Insight (SAI)
This interviewer-rated rating scale was developed for use in psychotic conditions and uses scores from 0 to 14 [19]. It assesses insight in three different domains, that is, the recognition of mental illness (0–6); treatment compliance (0–4); and the reattribution of abnormal mental events (0–4). The maximum score is 14 with higher scores indicating greater insight.

2.2. Operational definition

Successful employment was defined as working for 40 h or more per month (or 5 days of working, 8 h a day) as being used in the "Demonstration to Maintain Independence and Employment" by the Centers for Medicare and Medicaid Services issued June 7, 2000 [20]. This definition has also been used in other studies [21].

2.3. Statistical analysis

Data were analyzed using the Statistical package for Social Sciences (SPSS) (version 19) computer program. Employment was the dependent variable and was treated as a binary variable (successfully employed versus unsuccessfully employed). Bivariate analyses were done using chi-square for categorical data and t-test for continuous data. Mean and standard deviation (SD) were used to describe continuous variables. Multiple logistic regression analysis was done to