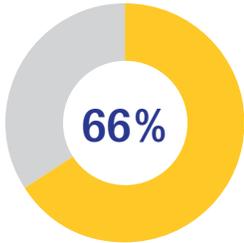


SOAR Enhances Recovery by Providing a Pathway to Employment



Work is a Critical Step in the Recovery Process

Working is a critical step in recovery for people with serious mental illness.



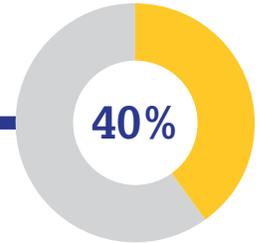
66% of people with serious mental illness want to work¹



Only 15% of people with serious mental illness are working²



Competitive employment through Individual Placement and Support (IPS) leads to increased income, improved self-esteem, improved quality of life, and reduced symptoms



Approximately 40% of clients who obtain a job with help from IPS become steady workers and remain competitively employed³



Benefits and Employment Integration Increases Housing Stability

Maximizing income supports through an integration of benefits and employment increases housing stability for people with serious mental illness. Careful benefits planning while utilizing SSA work incentives helps increase income while maintaining benefits. Work pays!



SOAR Employment Resources

SAMHSA SOAR TA Center employment resources for case workers:

- 2 issue briefs
- 2 webinars
- 11 articles
- 8 blogs



SOAR and IPS Integration Pilot

Through the Integration Pilot, programs offered client service assessments for both the SOAR and IPS model

- 1-year pilot
- 12 states engaged in pilot
- 75% of clients chose to enroll in both services⁴



SOAR Employment Outcomes

Based on outcomes reported in the SOAR Online Application Tracking system:

- Clients had an average earning of \$280/month while applying⁵
- Clients had an average earning of \$329/month post-approval⁶



SOAR Links Disability Benefits to Employment, Enhancing Outcomes

Individuals with serious mental illness can work while applying for and receiving Social Security Disability benefits. Myth busting and benefits planning are essential elements of community efforts.

Encourage Work From the Start

Employment Conversation Guide (<https://bit.ly/2lLjSX7>)

Integrate Services Whenever Possible

Resources from the SOAR and IPS Integration Pilot (<https://bit.ly/2s8wcoY>)

Utilize Social Security Work Incentives

Yes, You Can Work flier (<https://bit.ly/2xbNk2W>) and SOAR and Employment Issue Brief (<https://bit.ly/2s8VgMB>)

Resources

SSA's Ticket to Work

Ticket to Work service providers offer Social Security disability beneficiaries (persons who receive SSI or SSDI) age 18 through 64 who want to work with free job support. Services offered may include job coaching, job counseling, training, benefits counseling and job placement.

<https://choosework.ssa.gov/>

Employment and Work Incentives Resources on the SOAR Website

The SOAR TA Center has gathered a number of employment resources and links for your reference.

<https://soarworks.prainc.com/topics/employment-work-incentives>

The IPS Employment Center

The IPS Employment Center is a multidisciplinary team of researchers and trainers who conduct research studies, disseminate findings, prepare training and educational materials, and provide training and consultation services. The focus of the center's activities is employment for people with serious mental illnesses.

<https://ipsworks.org/>

References

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- 2 Rosenheck RA, Leslie D, Keefe R, et al. Barriers to employment for people with schizophrenia. *American Journal of Psychiatry* 2006;163:411-417.
- 3 Bond GR, Kukla M. Is job tenure brief in Individual Placement and Support (IPS) employment programs? *Psychiatric Services* 2011;62:950-953.
- 4 SAMHSA SOAR TA Center. "Cooperative Agreements to Benefit Homeless Individuals (CABHI): SSI/SSDI Outreach, Access, and Recovery (SOAR) and Individual Placement and Support (IPS) Integration Pilot and Learning Community Final Report." September 22, 2017.
- 5 Outcomes data reported in the SOAR Online Application Tracking (OAT) program. <https://soartrack.prainc.com/> Summary report pulled on April 18, 2018.
- 6 Ibid.
- 7 Burns T, Catty J, White S, et al. The impact of supported employment and working on clinical and social functioning: Results of an international study of Individual Placement and Support. *Schizophrenia Bulletin* 2009;35:949-958.