Employment Retention by Persons with Schizophrenia Employed in Non-Assisted Jobs


Article Summary

Work support programs assist many individuals with schizophrenia in acquiring and retaining competitive employment despite difficulties in adhering to a consistent work schedule, occurrence of unpredictable symptoms, dealing with the side effects of medication, and managing workplace stressors. However, the authors suggest that as many as two-thirds of competitively employed individuals with schizophrenia do not receive formal vocational supports. The authors of the current study sought to determine employment stability for individuals with schizophrenia who were not receiving formal supports on the job. Data derived from the Schizophrenia Care and Assessment Program (SCAP), a three-and-a-half year study conducted in six regions of the U.S. that was designed to determine the impact of medical treatment on various aspects of the lives of individuals over 18 years old with schizophrenia.

Out of a possible 2,250 (SCAP) participants, surveys from 159 were used for the current study. Comparisons were made between employment during baseline and six months later. Seventy-eight percent of the subjects lived in their communities without supports with 93.1% using at least one prescribed antipsychotic medication during the six-month period prior to the study. In addition, study subjects were relatively well educated with 47.2% having completed more than a high school education.

The results indicated that education correlated positively with job retention: those subjects with more than a high school education were twice as likely to be employed at the end of the six-month period. The risk of joblessness was greater for those individuals who had been hospitalized during the year prior to the study or in the six-month study period. Job loss was also more likely to occur for individuals taking first-generation antipsychotic medications as compared to those individuals taking atypical antipsychotic medications such as clozapine, olanzapine, quetiapine, risperidone, and sertindole.

Data analysis was also done to determine correlates for the 111 subjects who were employed at the end of the six-month period without formal supports as compared to those individuals who had begun receiving supports. Non-assisted living correlated positively with non-assisted employment. While the effects of schizophrenia are thought to decrease with the age of the individual, the study indicated that job less increased with age. The authors suggested that this finding could be attributed to factors other than the schizophrenia.

This study indicates that individuals with schizophrenia in non-assisted employment situations with higher educational levels, taking atypical antipsychotic medications, without hospitalizations, and living independently face the least risk of jobless.