

IPS Research Update

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Three Themes in Recent IPS Research

- ① IPS Principles and IPS Fidelity
- ② New Populations
- ③ Innovations

New Research on 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**

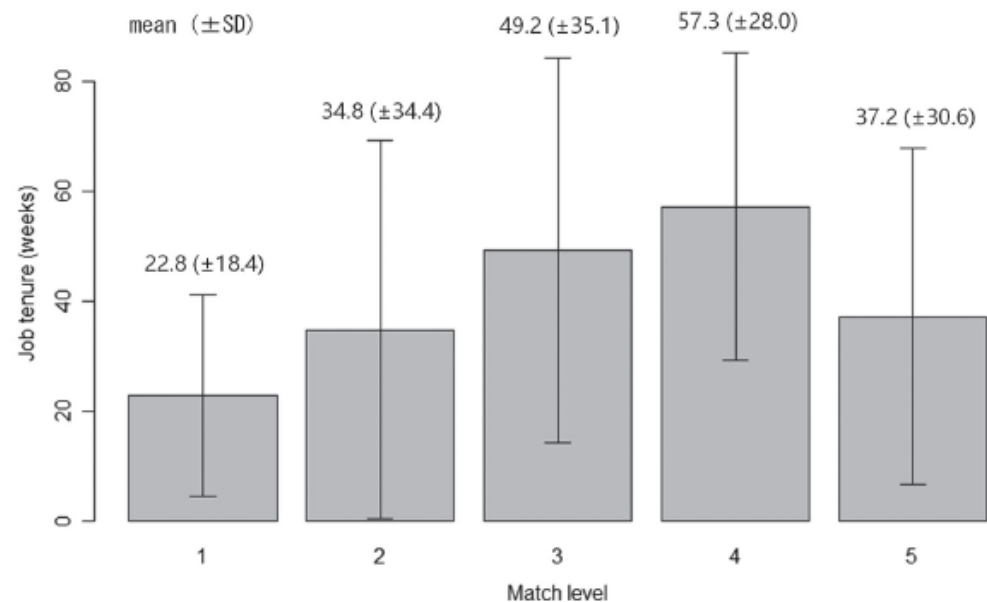
Matching Preferences → Longer Job Tenure (Igarashi et al., 2022)

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

Personalized Benefits Counseling Increases Earnings

- After receiving specialized benefits counseling, Social Security disability beneficiaries increased mean annual earnings by \$1200 (Tremblay et al., 2006)
- Observational study using matched sample of 1,926 VR clients with psychiatric disabilities (Kaya, 2023):

	Received Work Incentives Benefits Counseling		Signif.
	Yes	No	
% Competitively Employed (Successful VR Closure)	33%	29%	$p < .05$

New Evidence for IPS Principles: Summary

- Matching client preferences (including all aspects of the job in addition to occupational preferences) increases job tenure
- Personalized benefits counseling increases earnings but has at best a small impact on employment rate (that is, the decision to start a job)

IPS Principles Needing More Research

- Integration with treatment: How do we achieve that with new populations?
- Individualized follow-up: How long, how to ensure warm handoff and long-term support plan?

IPS Fidelity Standard for Face-to-Face Community Contact

- *Assumptions underlying Time in Community fidelity item:*
“Employment services such as engagement, job finding, and follow-along supports provided in community settings.”
- **Most IPS specialist contacts are face-to-face, and mostly in the community, especially with employers and clients**
- Online job searches not sufficient – Job development involves building relationships with employers
- Contact with mental health professionals includes in-person weekly treatment team meetings

How Should IPS Provide Services?

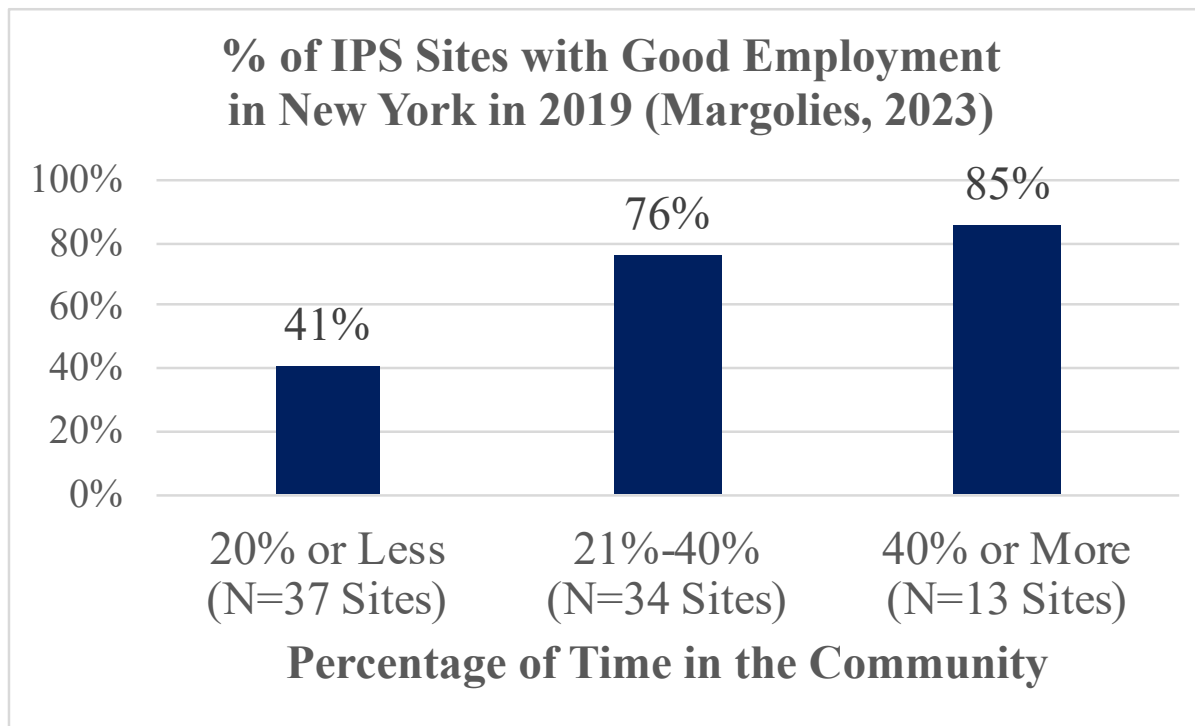
Impact of COVID Restrictions on IPS

- In NY: Reduced fidelity & initial dip in employment rate in March 2020, but quick rebound (Margolies, 2021)
- Norwegian study of 25 IPS specialists (Wittlund, 2022):
 - Less collaborative engagement with employers and with clinical teams
 - More virtual work-related meetings
- Since restrictions lifted, many IPS teams continued to rely on virtual meetings

Evidence Supporting the Importance of Community Contact

- Assertive community treatment literature has shown much higher rates of client engagement in services than office-based case management
- IPS study: Time in community correlated .82 ($p < .01$) with employment rate ($N = 10$ sites) (Becker, 2001)

% 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

Community Outreach on High-Fidelity IPS Programs in Japan (Yamaguchi, 2020)

	High Fidelity Programs (N = 7)	Low Fidelity Programs (N = 6)
Mean hours of service/month		
Outreach	10.5	1.9
Individual contact	8.4	1.6
Group meetings	7.0	17.8
Outcomes		
Employed last 12 months	68%	38%
Held job for 12 months	59%	21%

- Community outreach and individual contact with clients associated with better employment outcomes

Importance of Face-to-Face Contact after Job Start (Bond & Kukla, 2011)

- Correlations for frequency of IPS specialist contact with job tenure for 142 clients after first job start:
 - Face-to-face contact: 0.27, $p < .05$
 - Telephone contact: 0.01, ns

Importance of Face-to Face Community Contact: Current Evidence

- Community outreach to clients likely helps in the engagement process and probably reduces dropouts, but we need IPS-specific research
- Time in the community, with face-to-face meetings with employers and clients, may increase overall employment rate and job tenure
- Effectiveness of IPS of virtual counseling sessions and virtual meetings with other professionals untested

New Populations

- ① Traumatic Brain Injury
- ② Young Adults with Anxiety and Depression

IPS for Veterans with Traumatic Brain Injury (Pogoda, 2022)

- 12 VHA medical centers in US
- Administrative records for 2020-2022
- 92 veterans with traumatic brain injury (96% male)
- At baseline, unemployed for a median of 5 months

Outcomes

- 51% gained employment
- Mean job duration was 3 months
- Disability rating did not correlate with employment!

Research on IPS for Young Adults

Current Status

- Findings from a meta-analysis of 7 young adult studies:
 - Positive employment outcomes for IPS:
Overall employment rate: 58% for IPS, 32% for controls
 - Small positive findings for education outcomes
- Most rigorous research on IPS for young adults has been in the first episode psychosis population
- But many other subgroups of young adults receiving IPS

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
- 55% of jobs sustained for 26 weeks
- Young adults with peer support had similar outcomes as those not needing it

US Study of IPS for Young Adults (Albdulmunem, in press; Bond, in press)

- Study conducted from March 2020 to June 2022
- 9 IPS programs in 5 learning community states (CA, KY, MN, SC, WI)
- 111 young adults (ages 16-24) enrolled and followed up until termination or one-year follow-up
- Fidelity reviews completed using IPS-Y:
Adaptation of standard fidelity scale for young adults

IPS for Young Adults Participant Characteristics (N=111)

Characteristic	N (%)	Characteristic	N (%)
Gender		Psychiatric Diagnosis	
Female	59 (53.2%)	Depressive disorder	66 (59.5%)
Male	47 (42.3%)	Anxiety disorder	43 (38.7%)
Other	5 (4.5%)	ADHD	26 (23.4%)
Age	Mean = 19.2	PTSD	20 (18.0%)
16-17	26 (23.4%)	Schizophrenia spectrum	16 (14.4%)
18-20	53 (47.2%)	Substance use	14 (12.6%)
21-24	32 (28.8%)	Bipolar	12 (10.8%)
Race		Autism	10 (9.0%)
White	55 (49.5%)	Housing situation	
Black	29 (26.1%)	Living with family/caregiver	71 (64.0%)
Hawaiian/ Pacific Islander	3 (2.7%)	Private residence	26 (23.4%)
Native American	1 (0.9%)	Homeless	5 (4.5%)
Biracial/ Multiracial	6 (5.4%)	Other residential setting	9 (8.1%)
Not reported	17 (15.3%)	Marital status	
Ethnicity		Never Married	109 (98.2%)
Hispanic/Latino	20 (18.0%)	Married/Living as married	2 (1.8%)

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%)

Employment Outcomes for Worker Sample

Among Workers (N=51):	Mean
Time to First Job	3 months
Earnings	\$7,028
Time Worked	5 months
Hourly Wage	\$12.22

Innovations

- ① People with lived experiences providing IPS (Cook)
- ② Work-focused Cognitive Behavioral Therapy

Effectiveness of Peer-Provided IPS (Cook et al., 2022)

- Peer-run organization provided two types of supported employment services: IPS and Choose-Get-Keep
- IPS team achieved good fidelity

Competitive Employment Outcomes	IPS	Choose-Get-Keep	Signif.
	(N=184)	(N=164)	
Overall Employment Rate	43%	21%	p < .001
Monthly Employment Rate	38%	18%	p < .001

Work-Focused Cognitive Behavioral Therapy (CBT) Added to IPS (Kukla et al., 2019)

- Standard IPS is not successful for all clients
- This pilot offered 12-sessions of CBT for 44 veterans who had remained unemployed on average for a year after enrollment in IPS
- After receiving work-focused CBT along with IPS:
 - 75% worked over 6-month follow-up
 - 52% were steady workers (worked at least 3 months)

Conclusions Regarding IPS Innovations

- People with lived experience can deliver IPS at high fidelity and achieve better employment outcomes compared to using a non-evidence-based service model
- Work-focused cognitive behavioral therapy may be a useful adjunct for some client subgroups, such as:
 - Workers on sick leave returning to an existing job
- Randomized controlled trials needed

Overall Conclusions

- IPS principles have held up well over the three decades since Becker and Drake developed IPS
- IPS also continues to evolve, with expansion to new populations and testing of innovations
- The COVID pandemic led to widespread adoption of telemedicine. We need to rigorously evaluate the effectiveness of IPS services delivered remotely.