Guest Editorial

Psychiatric rehabilitation

It is with pleasure that I introduce this special issue devoted to vocational rehabilitation for persons with psychiatric disabilities. Vocational services have evolved significantly over the past several years. Supported employment has taken firm root as a viable approach to providing vocational services, the Americans with Disabilities Act mandating reasonable accommodations for persons with disabilities who are qualified for work has been in effect now well over 10 years, and our understanding of the value of situational and functional assessment has matured. Building on this evolution, the seven articles contained in this issue will broaden and expand our understanding of what vocational services work for whom and under what circumstances. In addition, the studies contained in this issue use a variety of research strategies, including a randomized clinical trial, a population based survey, a consumer driven survey and qualitative research methods. This diversity of research paradigms suggests that there are many viable ways to add to our body of knowledge about vocational rehabilitation and that our approach to vocational research has gained in sophistication.

Two of the articles contained in the special issue address ramifications of the Americans with Disabilities Act. Ellison and her colleagues explore the issue of disclosure in the workplace. Provision of reasonable accommodations in the workplace is contingent upon the worker disclosing his or her disability. The seemingly straightforward act is actually quite complex. The authors thoroughly and deftly explore how disclosure occurs, to whom, under what circumstances, and with what perceived effect. The findings in this article should be of assistance to vocational providers who are attempting to guide their service recipients about the benefits and disadvantages of disclosure. MacDonald-Wilson and her colleagues report on a study of functional workplace limitations. They examine the relationship between types and frequency of limitations and the accommodations used to address the limitations.

They also developed a taxonomy for categorizing functional limitations that should be helpful to vocational researchers and providers.

Understanding the factors that predict vocational rehabilitation or recovery is critical for policy makers and administrators. Two of the studies reported in this special issue tackle this important area. First, Cook reports on a one-year follow-up study of persons closed in status 26 from the Illinois state vocational rehabilitation agency. Cook found more positive outcomes than would be expected based on previous evaluations of state agency outcomes for persons with psychiatric disabilities. One year after closure, 71% of those who were employed when they exited the state vocational rehabilitation system were still employed. However, results suggest that the employed individuals remained in low paying, entry-level jobs. If individuals with psychiatric disabilities are to achieve an adequate quality of life, or leave the Social Security rolls and return to work, it is imperative that they obtain jobs that are above entry level. Future research should address how vocational rehabilitation services can help people with psychiatric disabilities achieve better vocational outcomes. The findings from this study add to the body of knowledge about predicting vocational outcomes using demographic characteristics and service utilization.

In addition to the Cook article examining long-term outcomes, we have a contribution from an international group of vocational researchers. Waghorn and his associates report on a population based survey, conducted in Australia, and analyzed in a sophisticated and complex way. The authors found that self-reported course of illness was a useful predictor of vocational recovery and that, in contrast to previous studies in the United States, educational attainment and age contributed to predicting vocational recovery.

Bell and his associates developed a behavioral intervention using a situational assessment instrument. Employing a randomized design, the authors tested 2 Guest Editorial

whether giving feedback from situational assessment ratings produced better vocational outcomes than no feedback. This study points to the value of conducting randomized trials on new interventions and the value of specific, behavioral feedback in improving vocational outcomes for persons with psychiatric disabilities.

Many system planners, administrators, and consumer advocates, as well as vocational service providers have made the argument over the past couple of decades that vocational services for persons with a psychiatric disability should be provided by a separate agency whose mission is vocational rehabilitation and whose personnel are trained to deliver vocational services and not treatment. Drake and his associates confront the thorny issue of whether vocational services are best delivered by an integrated team of providers. Using qualitative research and data from several studies, they explore several critical factors in the delivery of vocational services that can be enhanced using an integrated model. Finally, McQuilken and his colleagues use a participatory action approach to studying the perceived barriers to work for persons with psychiatric disabilities. Using a team of consumers in Colorado, they designed and implemented a survey research project that helps us better understand the barriers and disincentives to working.

I would like to thank each of the contributors to this special issue for their hard work and congenial nature while the manuscripts were undergoing numerous revisions. Special thanks to the support staff of the Center for Psychiatric Rehabilitation, and especially to Sherry Crombie for her competent and patient assistance with the editing of the special issue.

E. Sally Rogers, Sc.D.
Guest Editor
Director of Research and
Research Associate Professor
Center for Psychiatric Rehabilitation
Boston University
940 Commonwealth Avenue West
Boston, MA 02215, USA
Tel.: +1 617 353 3549

Fax: +1 617 353 7700 E-mail: erogers@bu.edu