

RETURN TO WORK OF MENTALLY-ILL PERSONS IN GERMANY: A SYSTEMATIC REVIEW

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Introduction: The benefits of vocational reintegration are already documented by many studies in different settings. In Germany, a special “return to work” concept for patients with mental disorders does not yet exist – although the number of mentally ill people have undeniably increased over the last years [5, 7, 13, 15]. There are several model projects, but most of these approaches only try to adapt strategies from the rehabilitation of physically-ill patients. Oftentimes, they are only partly focused on the needs of mentally ill patients [3]. The aim of this systematic literature review is to discover individual and structural factors of a successful return to work -concept for personnel with psychological disorders in Germany.

Materials and methods: A systematic literature review was conducted using literature databases such as MEDLINE, EMBASE, PsycINFO, PSYNDEX as well as several publisher databases (Springer, Thieme etc.). The search focused particularly on studies analyzing vocational rehabilitation / return to work of mentally-ill persons in Germany. Articles published in English or German language during the period from 1990 to 2009 were included in this review. Only articles regarding psychological disorders as a whole – as opposed to focusing on a single mental disease – were included.

Results: Initially, 277 studies were identified. After the exclusion of non-appropriate publications, a number of 17 studies remained. Findings of the literature search show that most studies focused on structural conditions of effective vocational rehabilitation. Important requirements for the success of rehabilitation include: constant participatory management, participation of all persons concerned (including family and employer) [3, 10, 16] and vicinity of rehability support to the patients’ place of residence [18]. Apart from these conditions, which are also important in the vocational rehabilitation of physically-ill patients, some special characteristics should be considered in the vocational rehabilitation of mentally-ill patients: the measures should be aligned more intensively to the particular needs of the patient concerned, and they should be more strongly linked with medical rehabilitation [1, 5, 8, 15, 16, 18]. Specifically, a close link between acute treatment and relapse prophylaxis is very important for these patients. Results of the literature research show that difficulties arise particularly in patients with long-term chronic mental disorders. Rehabilitation successes usually cannot be regarded as permanently secured; this is why a cascaded procedure – which is typical for other kinds of illnesses – does not fit for mentally-ill persons. Individual work offers and integration measures have to be rearranged consistently, so that they fit the individual profile appropriately, e. g. patients either can either drop or repeat certain stages several times [9, 11]. This can be achieved either by a community-based support connecting in-patient, semi-residential and out-patient care, or by a close co-operation and a well

functioning network of all participants [2, 3, 5, 6, 8, 13, 15, 18].

Only a few studies focus on individual conditions of the patient for an effective vocational rehabilitation and return to work. Three important individual factors for a successful process were identified: education, "aim of the patient" for the reintegration, and motivation. This personal motivation is not affected by age or severity of illness impacts, but rather by somatization and limitations in daily activities [7, 12, 14, 17].

Conclusion: For the German context – in order to optimize the rehabilitation and reintegration of mentally-ill patients into daily work environment – a stronger combination of medical, vocational and working measures has to be developed. Suitable models like the "place and train"-model from the USA should be installed to replace the existing "train and place"-model in Germany.

This concept of "train and place" is aimed at developing the abilities of the mentally-ill persons before they are tested and transferred to the job. According to this model, training and assistance leads to a final reintegration – which also means that usually no follow-up assistance takes place [4, 5].

As a step to changing this situation, a 'workplace-integrating'-vocational rehabilitation concept was conceded in Germany at the end of 2008. A law was passed to implement "supported employment". One of the main goals according to the new law is that a quick placement on the job market should be realized, so that the training can be provided directly during the normal work activities. This also allows mentally-ill patients to remain in care for longer periods of time. The first implementations of this supported employment model began in the middle of 2009 [4]. Further results regarding the co-operation between the different participants, as well as regarding economical and social statutory frameworks will demonstrate further needs for modification of this new model.

Keywords: return to work, supported employment, vocational rehabilitation, mental health disorders, Germany