SAMHSA ADVISORY

Substance Abuse and Mental Health
Services Administration

INTEGRATING VOCATIONAL SERVICES INTO SUBSTANCE USE DISORDER TREATMENT

For people in substance use disorder (SUD) treatment, gainful employment is strongly linked to better recovery outcomes (Magura & Marshall, 2020). Obtaining and maintaining employment helps clients establish a legal source of income, structure their time, and improve self-esteem, which in turn may greatly reduce substance use and criminal activity. Unemployment and SUDs may be intertwined long before an individual seeks treatment (Center for Substance Abuse Treatment [CSAT], 2000b). But people in recovery who are employed show lower rates of relapse and higher rates of abstinence compared with those who are unemployed (Harrison et al., 2020).

The process of finding and keeping a job can be an important part of establishing healthy new behaviors during treatment and recovery. Obtaining advanced education, certification, or licensure can support clients while they establish themselves as a person in recovery (Crutchfield & Güss, 2019). For clients who are employed, being able to improve their employment prospects improves long-term SUD recovery (Sahker et al., 2019).

This *Advisory*, based on the Substance Abuse and Mental Health Services Administration's (SAMHSA) <u>Treatment Improvement Protocol (TIP) 38</u>, <u>Integrating Substance Abuse Treatment and Vocational Services</u>, presents strategies and resources for SUD treatment counselors and clinic directors to improve outcomes for clients in recovery by helping them find and keep employment and deal with workplace stresses. It is directed to programs serving clients who are unemployed, underemployed, or struggling in workplace settings.

Key Messages

- Vocational services should be introduced as early as possible in SUD treatment for clients who need and are ready for them, and be an integral component of the entire treatment plan.
- Vocational plans should recognize the challenges posed to clients whose initial options may be limited to low-paying service-sector jobs and gig-based work provided by platforms such as Instacart, TaskRabbit, or Uber.
- SUD treatment programs that do not have a vocational rehabilitation (VR) counselor on staff should establish relationships with local VR counselors to work with clients.
- SUD treatment programs should establish referral relationships with job training programs, community colleges, GED programs, and employers.
- The way VR services are structured will vary according to treatment intensity and setting.
- Clients will need access to online job resources and training in how to use them.



Barriers to Successful Employment

Unemployed clients in SUD treatment programs face many challenges in obtaining and keeping jobs. Employed clients may need help finding more satisfying work or identifying and resolving stresses in the work environment that may exacerbate ongoing SUDs or precipitate a relapse.

Internal barriers to finding work can include:

- Education deficits.
- Lack of vocational training.
- Co-occurring physical disabilities and/or mental disorders.
- Unrealistic expectations for employment.
- Lack of familiarity with workplace culture.
- Potential competing demands of employment while participating in a treatment program.
- A history of incarceration and/or criminal involvement.

External barriers to finding work can include:

- Employer bias against hiring people in recovery.
- Limited opportunities to progress beyond entry-level positions, particularly with the economy's increasing reliance on low-paying service jobs or gig economy work.
- Lack of access to job-search tools. The job market has largely moved online, making it difficult
 to find employment without access to a computer or a smartphone, knowledge of the major jobsearch websites, and familiarity with the process of online job hunting (e.g., submitting résumés and
 applications online, following up via email after an interview).
- Insufficient support from local job training programs. Some states or municipalities have programs dedicated to offering vocational training to people in recovery, but others do not.
- Lack of coordination among treatment programs, vocational services, and employers.

Components of VR Services

VR counseling focuses on the process of improving clients' functioning based on their values, interests, and goals. Integrating VR services into SUD treatment can help clients overcome internal and external barriers.

If possible, an SUD treatment program should have at least one VR counselor on staff. If factors such as funding or program scope prevent this, arrangements should be made to have a VR counselor easily accessible to the program. Including a VR counselor who is cross-trained in SUD issues can raise awareness of vocational issues across the program. To supplement locally available VR services and establish a source of future VR staff, SUD clinic directors may seek to establish relationships with collegiate VR degree programs, and explore ways to offer internship and training opportunities. The National Center for Education Statistics College Navigator can help locate such programs.



The components of VR services include:

- Conducting assessments to help clients understand their qualifications and limitations. Many assessment tools are available for a fee, but several are offered free online:
 - California's Employment Development Department
 - U.S. Department of Labor's CareerOneStop
- Developing a vocational plan: Matching clients' qualifications with the job market and requirements for specific jobs.
- Providing instruction on basic problem-solving and coping skills.
- Helping the client obtain any needed education or skills training, including identifying entitlements for which they qualify.
- Helping the client connect with potential sources of employment.

Integrating VR Services Into SUD Treatment

Outcome Measures for a Vocational Rehabilitation Plan

What constitutes a successful outcome for a client receiving VR services? Measures may include:

- Number of hours worked per week (or per month, or in the past 6 months).
- Entry into and/or completion of an educational or training program.
- Temporary or permanent job.
- Achieving a particular earning level and/ or level of benefits.
- Employment evaluations, promotions, raises
- Duration of employment.
- Job satisfaction.
- Return to school to pursue long-term vocational goals.

Because productive work is crucial to long-term recovery, VR services should be provided at all phases of SUD treatment to every client who needs and is ready for them. Programs should be prepared to help clients with every step of the job search and provide support after they find a job.

Clients may need:

- Encouragement to focus on vocational planning, while also maintaining efforts critical to their recovery.
- Help understanding how previous work experience and other skills can prepare them for future work.
- Training and practice with computer skills.
- Habilitation (e.g., work on hygiene, time management, budgeting, communication skills, basic problem-solving, understanding employers' expectations).
- Help with preparing résumés and practicing mock job interviews.
- Help with any external logistical barriers, such as the need for child care or lack of access to transportation.
- Help in modifying potentially unrealistic employment expectations.
- Support to boost self-esteem and envision themselves as productive members of the workforce.
- Reminders that employment may come with relapse triggers such as boredom and stress.
- Help addressing specific obstacles to employment, such as a criminal record.
- Help coordinating their job hunt or employment with current methadone treatment.
- Reassessment and follow-up to measure progress and improve chances of success.



SUD counselors need to:

- Provide clients with strategies to cope with the stress of the job search and employment-related triggers.
- Understand clients' abilities and the needs of local employers, so they can mediate between and connect the two.
- Understand when to refer clients to a trained VR counselor.
- Account for a client's stability, stage of recovery, treatment duration, legal involvement, personal goals, and therapeutic goals.
- Account for external factors such as custody issues, immediate financial needs, requirements of welfareto-work legislation, and the demands of the local job market.

SUD program directors may need to:

- Restructure programs to integrate vocational services as early as possible, based on clients' need and readiness.
- Ensure that SUD counselors have some vocational services training.
- Ensure access to VR counselors cross-trained in issues related to SUD.
- Review and reinforce procedures for protecting clients' privacy under 42 CFR Part 2 when referring clients to outside programs (such as vocational training programs).

Ideally, both VR and SUD treatment will be part of a coordinated program overseen by a case manager. Case managers act as a single point of contact between the client and all needed services. They can help the client coordinate VR and job search activities with the demands of treatment, as well as other issues such as finding safe housing or arranging for child care (CSAT, 2000a).

SAMHSA 42 CFR Part 2 Revised Rule

The 42 CFR Part 2 regulations were revised to improve coordination of care in response to the opioid epidemic, while maintaining confidentiality protections of SUD client records (U.S. Department of Health and Human Services, 2020). Part 2 protects the confidentiality of SUD patient records by restricting the circumstances under which Part 2 Programs (federally assisted programs) or other lawful holders can disclose these records (SAMHSA, 2020).

- <u>Fact Sheet: SAMHSA 42 CFR Part 2 Revised Rule:</u> Provides information on what has changed and why
 it changed
- <u>SAMHSA's Substance Abuse Confidentiality Regulations webpage</u> includes two fact sheets: "Does Part 2 Apply to Me?" and "How Do I Exchange Part 2 Data?" and FAQs
- SAMHSA's COVID-19 Public Health Emergency Response and 42 CFR Part 2 Guidance



Individual Placement and Support

An intervention called Individual Placement and Support (IPS) was originally used and validated with clients with mental illness. Though not yet comprehensively studied in the general SUD treatment population, a review of recent research suggests that IPS can be effective. One study showed that participants in an IPS program were 11 times more likely to gain competitive employment than those in a control group (Harrison et al., 2020).

IPS involves eight principles (Drake et al., 2012):

- Competitive employment as an obtainable goal—IPS programs focus on assisting clients to enter the competitive job market directly (as opposed to using the stepwise approach of traditional vocational counseling)
- Eligibility based on client choice (i.e., "zero exclusion"), not on client limitations such as symptoms or disability level
- Integration of vocational rehabilitation and mental health services
- Services based on client preferences rather than providers' judgments
- Personalized counseling for benefits such as Medicaid and Social Security
- Rapid job search—The job search starts early, as opposed to starting after preemployment assessment and training
- Systematic job development—Employment specialists develop a network of relationships with employers to facilitate matching clients with jobs
- Individualized ongoing job support for as long as the client needs and wants it

Intensity of Treatment and VR Services

VR services are easier to integrate into programs and settings that offer more intense SUD treatment because clients spend extended and/or concentrated time in these types of programs. Less intense programs may need different approaches to VR services.

Residential treatment settings (where clients live at the facility for an extended period) and partial hospitalization programs (PHPs) or intensive outpatient treatment (IOP) programs (where clients live at home but spend a significant number of hours a week at the treatment program) have similar advantages with regard to VR services, because those services can be built into a client's regular treatment schedule and the client can see progress day to day. These clients also tend to have the most potential to benefit from VR services, particularly when their SUDs have kept them from completing their education or participating in the workforce. In addition to developing skills and looking for work, clients learn how to manage their earnings, set realistic personal goals, and meet employers' expectations (CSAT, 2000b).

Residential treatment, PHPs, and IOP programs can provide:

- Prevocational stage testing and work skills evaluation.
- Work adjustment training (including education about work).
- Attention to activities of daily living.
- Formal vocational training and services (both classroom and on the job).
- Help with goal setting and developing a personal plan.
- Postplacement job retention strategies.



The Importance of Peer Support in VR

The overall importance of peer support in SUD recovery has been well documented. Because peer workers have typically gone through training and certification at the state level, peers can be particularly effective as role models for finding and keeping employment, as well as offering encouragement and building morale.

Vocational readiness, in the form of skills needed to find and keep a job, is one of the main social supports peer workers can provide to clients in recovery. Peer workers also have the experience to link clients with community resources for education and training (Loveland & Boyle, 2005). Peer support is often incorporated into IPS programs (see box, p. 5).

Clients who are successful in their treatment may themselves find employment opportunities as trained peer support specialists, where their personal experience in SUD treatment is an indispensable asset (Chapman et al., 2018). Treatment centers may be able to obtain grant funding to support such positions.

Outpatient programs of fewer than 20 hours a week, where most SUD treatment is delivered, may benefit most from the addition of a full-time VR counselor to the staff. While time is limited, even 1 hour of rehabilitation services a week for 24 weeks, or 1 hour a day for 14 days, can be a significant level of attention for clients with serious vocational needs.

Outpatient programming may focus on:

- Vocational assessment at intake.
- Education about work and job seeking.
- Incorporating vocational issues into group treatment (job interview role play, input from employed members to guide those seeking work).

Short-term residential programs (28 days or less) tend to have the most difficulty integrating VR services because they typically do not have a VR counselor on staff and because clients often are admitted in crisis. However, they can prepare clients for postdischarge VR with services that may include:

- An intake interview with a vocational component.
- Some educational programming during the client's stay.
- Discharge planning that involves a referral to a VR counselor or an employer.

Because referrals may be the most helpful element of vocational services in short-term residential programs, it's especially important for staff to develop a knowledge of community resources for referral.



Helping Clients Navigate the Job Market

Clients may need help with:

- Setting expectations and plotting a strategy. Low-paying service jobs and gig economy work (e.g.,
 driving for a ride-sharing service, shopping for a grocery delivery service, working in an e-commerce
 fulfillment warehouse) represent the easiest entry into the job market but have limited opportunities for
 advancement. The vocational plan should include goals and strategies for moving up from the first rung
 of the job ladder for those clients who need or wish to do so.
- Completing education and training to achieve their initial employment goals. If clients lack a
 high school diploma, they may pursue a GED as part of their plan through online resources, self-study,
 or classroom programs. Available resources vary by state (www.ged.com/). Some clients may want
 to acquire entry-level credentials in certain fields through certificate programs or community college
 coursework.
- **Finding and applying for jobs.** Navigating online job sites and filling out online applications are key job seeking skills, and the vocational plan should include computer training to develop these skills. Clients without access to a computer at home may need to use library computers. The SUD treatment program may consider providing computer access if space and funding allow.
- Creating a résumé. A professional-looking résumé is a prerequisite for applying for many jobs.
 Ecoverycareers.com offers a <u>step-by-step checklist</u> for people in recovery. <u>Job Seeker's Workshop</u> has a résumé generator and sample résumés.
- Using mobile technology. Clients who can't routinely access a computer may need to conduct their
 online job searches via smartphone, and may need training on how to use their smartphone as a job
 search tool, including downloading job search apps, setting up alerts, and communicating with potential
 employers via email and text. The Pew Research Center states that 81 percent of the U.S. population
 owns a smartphone. The percentage climbs to 92 percent for those 30 to 49 years old and 96 percent
 among 18- to 29-year-olds.
- Practicing interview skills. In addition to standard interview questions, clients should prepare to
 openly address their past actions, as appropriate, if asked. Additionally, clients should understand
 their rights around what prospective employers can and cannot ask about substance use and SUD
 treatment (Semel Institute for Neuroscience and Human Behavior, 2020). The U.S. Department of
 Labor's CareerOneStop has a detailed section on interviewing, as does Job Seeker's Workshop. Peer
 support counselors can help with interview practice, and clients can practice with one another during
 group sessions.

Despite their best efforts, some clients may not find employment, and some may not be suited to employment. In these instances, SUD counselors, VR counselors, or case managers may help clients apply for disability benefits and other support programs they may qualify for to help clients meet their needs.



Resources for Online Job Searches

Whether a client is looking for "help wanted" listings or applying for a position with a particular employer, career and employment advertising are almost entirely online.

Some general online employment resources include:

- U.S. Department of Labor's CareerOneStop has a page with links to every state job bank as well
 as a Job Finder tool for searching four major general-purpose job listing sites: the National Labor
 Exchange, America's Job Exchange, CareerBuilder, and Indeed.com. The site also has a wealth of
 job-hunting advice. Its information on background checks may be of particular interest.
- <u>USAJobs.gov</u> lists federal job openings that can be searched on a number of criteria, including whether they are open to individuals with disabilities.
- Commercial job sites such as <u>monster.com</u>, <u>glassdoor.com</u>, <u>snagajob.com</u> (hourly jobs), and <u>LinkedIn</u> (free basic membership).
- State online job resources such as <u>California</u> and <u>Minnesota</u>.

Clients with a history of incarceration may benefit from the <u>National H.I.R.E. Network</u> (Helping Individuals with criminal records Re-enter through Employment) Network, a resource developed by the not-for-profit Legal Action Center to help individuals with criminal records enter the workforce. The <u>National Employment Law Project</u> tracks specific state laws regarding employment of people with convictions.

Some workplaces exist explicitly to provide employment for people in recovery from SUD, such as the not-for-profit <u>DV8 Kitchen Vocational Training Foundation</u> in Lexington, Kentucky, which provides training programs in food preparation and service, and also offers workshops to employers interested in developing a workforce that includes people in recovery.

The U.S. Department of Labor made <u>grants in 2018 to six states</u>—Alaska, Maryland, <u>New Hampshire</u>, Pennsylvania, Rhode Island, and Washington—to provide reemployment services for individuals impacted by opioid addiction (U.S. Department of Labor, 2018).

Impact of Legislation on VR Services and Employment

Both federal and state laws can affect the resources available to the SUD treatment population for VR services, their eligibility for services, and the extent to which details of their prior history, including substance use and treatment, are available to potential employers. While the legislative and regulatory environment is subject to change, the following may be relevant to those in SUD treatment:

- The <u>Americans with Disabilities Act</u> establishes those in recovery from SUD as having a disability. The <u>ADA Amendments Act of 2008</u> broadens protection from discrimination for people with disabilities.
- The <u>Workforce Innovation and Opportunity Act</u> of 2014 supersedes the Workforce Investment Act
 of 1998. Among other provisions, it authorizes funding for programs to address the training and
 employment needs of those in recovery.
- The Affordable Care Act established parity protections for mental health services, including SUD treatment (Abraham et al., 2017).



 "Ban the box"—As of September 2020, 36 states and more than 150 cities and counties have adopted ban-the-box laws that require employers to consider a job candidate's qualifications without first inquiring whether they have a conviction or arrest record. The National Employment Law Project estimates that 75 percent of the U.S. population lives in a ban-the-box jurisdiction. A federal ban-the-box law, the Fair Chance to Compete for Jobs Act of 2019, takes effect in December 2021 and applies to many federal agencies.

Resources

- Substance Abuse and Mental Health Services Administration (SAMHSA)
 - TIP 38: Integrating Substance Abuse Treatment and Vocational Services
- America In Recovery
- Are You in Recovery From Alcohol or Drug Problems? Know Your Rights
 - CareerOneStop
 - Employment and Training Administration
- Ensuring People With Convictions Have a Fair Chance To Work
- National H.I.R.E. Network
- Self-Assessment for Career Exploration, California Employment Development Department
- U.S. Department of Labor



Bibliography

- Abraham, A. J., Andrews, C. M., Grogan, C. M., D'Aunno, T., Humphreys, K. N., Pollack, H. A., & Friedmann, P. D. (2017). The Affordable Care Act transformation of substance use disorder treatment. *American Journal of Public Health*, 107(1), 31–32.
- Center for Substance Abuse Treatment. (2000a). *Comprehensive case management for substance abuse treatment*. Treatment Improvement Protocol (TIP) Series, No. 27. HHS Publication No. (SMA) 15-4215. Substance Abuse and Mental Health Services Administration.
- Center for Substance Abuse Treatment. (2000b). *Integrating substance abuse treatment and vocational services*.

 Treatment Improvement Protocol (TIP) Series, No. 38. HHS Publication No. (SMA) 12-4216. Substance Abuse and Mental Health Services Administration.
- Chapman, S. A., Blash, L. K., Mayer, K., & Spetz, J. (2018). Emerging roles for peer providers in mental health and substance use disorders. *American Journal of Preventive Medicine*, *54*(6 Suppl. 3), S267–S274.
- Crutchfield, D. A., & Güss, C. D. (2019). Achievement linked to recovery from addiction: Discussing education, vocation, and non-addict identity. *Alcoholism Treatment Quarterly*, *37*(3), 359–376.
- Drake, R. E., Bond, G. R., & Becker, D. R. (2012). *Individual placement and support: An evidence-based approach to supported employment.* Oxford University Press.
- Harrison, J., Krieger, M. J., & Johnson, H. A. (2020). Review of individual placement and support employment intervention for persons with substance use disorder. *Substance Use and Misuse*, *55*(4), 636–643.
- Loveland, D., & Boyle, M. (2005). *Manual for recovery coaching and personal recovery plan development*. Maryland Department of Health, Behavioral Health Administration. https://bha.health.maryland.gov/CLINICAL%20SERVICES/ Documents/ROSC/RC ManualDASAedition7 22 05.pdf
- Magura, S., & Marshall, T. (2020). The effectiveness of interventions intended to improve employment outcomes for persons with substance use disorder: An updated systematic review. *Substance Use and Misuse*, *55*(13), 2230–2236.
- Sahker, E., Ali, S. R., & Arndt, S. (2019). Employment recovery capital in the treatment of substance use disorders: Sixmonth follow-up observations. *Drug and Alcohol Dependence*, 205, 107624.
- Semel Institute for Neuroscience and Human Behavior. (2020). *Back on track: Employment during recovery.* University of California, Los Angeles. www.semel.ucla.edu/dual-diagnosis-program/News_and_Resources/Back_On_Track_Employment_During_Recovery
- Substance Abuse and Mental Health Services Administration. (2020). *Disclosure of substance use disorder patient records: Does Part 2 apply to me?* The Office of the National Coordinator for Health Information Technology. www.samhsa.gov/sites/default/files/does-part2-apply.pdf
- U.S. Department of Labor. (2018). U.S. Department of Labor announces \$22 million in grants to aid in opioid epidemic recovery in six states. www.dol.gov/newsroom/releases/osec/osec20180724



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