

**Research Articles and Essays****Literature Review on the Relationship Between Employment and  
Autonomy of Individuals with Mental Illness**Yumi Yuzawa<sup>1</sup> & Jun Yaeda,<sup>2</sup><sup>1</sup> Tanzawa Hospital, Kanagawa, Japan<sup>2</sup> University of Tsukuba, Tokyo, Japan**Abstract**

Four themes were identified from the literature review as factors of autonomy in the employment process of people with psychiatric disabilities. The results indicated that support for increasing autonomy might be basic and common to different interventions and its specific techniques are issue to be pursued in future research.

*Keywords:* autonomy, employment support, psychiatric disabilities

**Current Status of Employment for Individuals with Psychiatric Disabilities in Japan**

Since 2018, employing individuals with psychiatric disabilities has been compulsory for Japanese companies, subject to their size. Thus, the number of people with disabilities working in general business fields that are not welfare-oriented is increasing. According to a report on the current status of employment of people with disabilities published by the Employment Security Bureau of the Ministry of Health, Labour and Welfare (Japan, 2017), the number of new applications for jobs by people with psychiatric disabilities to the Public

Employment Security Office increased from 22,804 in 2007 to 85,926 in 2016, a 3.8-fold increase. Job placements have also increased from 8,479 in 2007 to 41,367 in 2016, a 4.8-fold increase (Ministry of Health, Labour and Welfare, Japan, 2018). However, the estimated number of people with psychiatric disabilities employed in Japan is about 200,000 (Employment Security Bureau of the Ministry of Health, Labour and Welfare, Japan, 2019), which is only 10% of the 2.28 million people aged 20 to 65 in FY2017 (Cabinet Office, Japan, 2019). There are still some challenges remaining for people with psychiatric disabilities in obtaining jobs.

### **The Significance of Employment for Individuals with Psychiatric Disabilities**

The efficacy of employment for the recovery of individuals with psychiatric disabilities has been recorded in several studies. Strong (1998) argued that work helps overcome illnesses and provides a place to be. Employment provides a structure for acquiring a new sense of self through opportunities to contribute to society by facing challenges and experiencing success. Work creates and facilitates changes in the self-concept and self-efficacy of people with psychiatric disabilities beyond the limitations of their disability (Strong, 1998). Provencher et al. (2002) indicated that employment was an opportunity for individuals with psychiatric disabilities to challenge the recovery process, promote self-empowerment and provide a conduit for overcoming uncertain recovery. Dunn et al. (2008) reported that working improves self-esteem, provides opportunities for coping with psychiatric symptoms, promotes independence from the family through economic benefits, and improves the overall quality of life for people with severe psychiatric disabilities.

### **Support for the Autonomous Motivation of People with Psychiatric Disabilities**

Motivation is a factor that enhances the occupational functioning of individuals with psychiatric disabilities in employment (Choi et al., 2013). Patients with mental illness who feel that they are making autonomous choices have better treatment outcomes (Michalak et al., 2004). Autonomous motivation is an essential factor in the treatment of addiction (Foote et al., 1999). Moreover, autonomous motivation effectively increases health behaviors in interventions for patients with lifestyle-related diseases (Halvari et al., 2017). Therefore, support for increasing autonomy influences an individual's involvement in treatment and promotes recovery from illnesses.

On the other hand, Heerings et al. (2020) reviewed the literature on supporting the development of autonomy of people with psychiatric disabilities and reported a dilemma for supporters between respecting the decisions of their patients and avoiding harm to their recovery when they make decisions interfering with their recovery. Also, this dilemma might become a conflict on the equal relationship between patients and professionals. However, there is no research focusing on how supporters overcome these conflicts or the type of support that enhances people's autonomy concerning the process of employment support.

### **Purpose of This Study**

This study was designed to clarify factors identified in the literature as enhancing the autonomy of the process of recovery and employment of individuals with psychiatric disabilities. The study was a preliminary step in examining specific support methods that would enable people with psychiatric disabilities to increase their autonomy, make their own choices, work as they wish, and recover themselves from illness.

The research questions of this study included the following:

- (1) How does the promotion of autonomy relate to the employment of people with psychiatric disabilities?
- (2) What factors in work motivation autonomy related to the employment and job retention of people with psychiatric disabilities?

## Method

### Selecting Literature for the Review

A literature review was conducted by searching MEDLINE and PsycINFO (Ovid), PubMed, and CINII (Japanese literature) between December 7-8, 2019. The study method was referred to Rodgers' concept analysis (Rodgers, 2000). The search terms were set as "autonomy" and related terms, "self-determination," to conduct a broad investigation of people with psychiatric disabilities' employment autonomy. The studies to be reviewed were retrieved by using the following keywords: "self-determination" or "autonomy" or "autonomous" or "motivation" and "employment" or "work" or "job" and "mental" or "psychiatric" or "schizophrenia."

First, the literature retrieved from the database that was not relevant to this study was excluded after reading titles and abstracts. The entire text of the relevant literature was then checked according to the eligibility criteria to determine the literature to be reviewed. The eligibility criteria were as follows:

- (1) The literature is about people with psychiatric disabilities, excluding intellectual and developmental disabilities.
- (2) The variable investigated in quantitative studies is autonomy or self-determination in

employment.

(3) The qualitative studies include the relationships between employment and autonomy or self-determination from the perspective of individuals with psychiatric disabilities.

(4) The studies must be original.

Descriptions of autonomy in the literature were extracted and categorized into qualitative groups and organized by the type of employment support.

### **Definition of Autonomy**

Self-determination theory (SDT) "refers to the theory of motivation as it relates to the development of human behavior and personality, as proposed by Deci, E.L. and Ryan, R.M." (Nishimura, 2019, p45). Autonomy is an integral part of intrinsic motivation in SDT and the key to understanding the quality of self-regulation (Deci and Ryan, 2000: Ryan and Deci, 2006). "Within SDT, autonomy retains its primary etymological meaning of self-governance, or rule by the self" (Ryan and Deci, 2006, p1562). SDT organizes the stages from extrinsic motivation to more autonomous motivation, i.e., the intrinsic motivation integrated with self-worth (Deci and Ryan, 2000). Intrinsic motivation, or autonomous motivation, is formed by fulfilling the need for autonomy, feelings of competence, and relationships that result from interactions with peers, family, and others (Nishimura, 2019).

## Results

### Literature Search Results

A total of 285 studies were identified through MEDLINE and PsycINFO (Ovid) through their titles and abstracts. As a result, 251 studies were excluded. 4 studies were added by searching PubMed. These 38 full-text documents were assessed for eligibility for the review, and 30 studies were excluded because they did not match the eligibility criteria. Finally, the remaining 8 studies were included in the review (Table 1). The literature reviewed consisted of 3 quantitative studies and 5 qualitative studies. Of the quantitative studies, 2 were cohort studies, and 1 was a survey, all of which were conducted in the United States. The qualitative studies were conducted in the United States, Australia, New Zealand, Norway, and between the United States and Finland. Thirty-two Japanese studies were retrieved from the database, but 30 were excluded based on their titles and abstracts. The remaining 2 Japanese articles were also excluded after verifying their content based on the eligibility criteria. As a result, no Japanese studies were included in this review. Table 1 shows a list of the studies reviewed in the present study.

**Table 1: A List of the Reviewed Studies**

Author	Year of publication	Country	Research methods	Objectives of the study	Number of samples
Iwanaga, K., et al.	2019	USA	Survey	Investigating the influence of Autonomy, Outcome Expectancy and Vocational Rehabilitation Engagement on the relationship between Working Alliance and	277 (breakdown) Sensory or physical

				Stages of Change for Employment	disability: 43%. Psychiatric disability: 35%. Developmental disability: 22%.
Croft, B., et al.	2018	USA	Cohort study	To investigate whether self-direction is useful for obtaining and maintaining independent housing and employment	Program participants: 403 Non-participants: 12,209
Macias, C., et al.	2009	USA	Cohort study	To investigate the impact of participation in non-preferred vocational programs on employment outcomes	177 Withdrawal: 3
Ellingsen-Dalskau, L. H., et al.	2016	Norway	Qualitative study	Understanding the experiences of people with psychiatric disabilities who participate in Green Work	Program participants: 10
Malmanche, J. & Robertson, L.	2015	New Zealand	Qualitative study	Understanding the employment experiences of people with psychiatric disabilities who have participated in KAIMAHI (Group Based Occupational Program)	Program participants: 6
Tanaka, K, & Davidson, L.	2015	USA Finland	Qualitative study	Exploring the meaning of a work ordered day (WOD) for clubhouse participants and its contribution to recovery	Program participants: 102 Staff: 25
Moran, G. S., et al.	2014	USA	Qualitative study	Exploring the motivations for working as a mental health peer worker	Peer worker: 31
Urlic, K. & Lentini, P.	2010	Australia	Qualitative study	Exploring, from the perspective of people with schizophrenia, (i) the subjective experiences associated with participation in occupations, (ii) the factors that contribute to participation in occupations, and (iii) the value of occupations	Workers with support: 6

### **The Relevance of Autonomy for Employment Outcomes**

A cohort study of participants and non-participants in Florida Self-Directed Care (Florida SDC) by Croft et al. (2018) indicated that program participants were more than twice as likely as non-participants to obtain and maintain independent housing and work significantly more days in paid employment. The Florida SDC is a program emphasizing self-selection by participants with psychiatric disabilities. The participants in the Florida SDC can decide how to use its service with the support of a coach, within the program's policy guidelines. Participants can relate purchases of goods and services, such as transportation or dentistry services, to housing and employment-related support, to specific recovery goals in plans developed by putting themselves in the center. The study results suggest that the individuals with psychiatric disabilities who choose these services on their own initiatives might increase employment outcomes. A study by Iwanaga et al. (2019) indicated that autonomous motivation functions as a mediator between the working alliance and stages of change for employment. These studies suggested that promoting autonomous motivation might improve employment outcomes.

### **Effects of Preferences and Autonomy of People with Psychiatric Disabilities**

Macias et al. (2009) offered two types of employment support and randomly assigned participants to one of the two programs: the Program of Assertive Community Treatment, or the Clubhouse model. They examined the difference in employment outcomes of being assigned to an employment support program that was not the participant's preference and that was preference. The results showed that the percentage of participants who did not find a job increased when they were assigned to the program they did not prefer, they might have lost



their interest in working. On the other hand, participants who were assigned to an employment support program they did not want, if they decided to participate in the support program, found a job, maintained employment longer and were more satisfied with the program than those assigned to their preferred program. This was possible because their commitment to work was enhanced when they chose to accept and pursue the assigned service, even though the program was not their preference. These results suggest that promoting autonomous motivation for effortful engagement to achieve objectives, regardless of the preferences, improves employment outcomes and satisfaction with the employment process.

### **Factors Increasing Employment-related Autonomy**

The literature review identified two categories of factors that increase the autonomy of people with psychiatric disabilities in working: “Autonomous Motivation Through Supportive Relationships with the Supporters” and “Autonomous Motivation Through Experience as a Worker”. Rodgers' concept analysis found 4 themes, namely, “Personal Relationships with Supporters,” “Structures Created by Working,” “Significance of Work,” and “Access to Self-selection Opportunities”. A brief description of each concept was provided below:

1. Personal Relationships with Supporters

Good relationships with supporters affect the autonomy of people with psychiatric disabilities. A better interactive relationship between supporters and their clients could lead to the acquisition and maintenance of employment.

2. Structures Created by Working

Work-related structures such as time and rules create a rhythm and order to life,

which provides a basis for discovering interests and developing self-confidence.

### 3. Significance of Work

Direct, work-related relationships with coworkers and customers, and positive feedback from them, bring a sense of fulfillment and meaning to work and lead to the discovery of self-identity. These experiences promote intrinsic motivation and increase autonomy.

### 4. Access to Self-selection Opportunities

The opportunity for self-selection is essential. Self-selection includes solutions to symptom related concerns and hygiene issues, removal of physical barriers such as housing and commuting, compensating for the lack of background and experience as a worker, and flexibility in the workplace and activities.

## **Autonomous Motivation Through Supportive Relationships with Supporters**

As an example of the first concept, “Personal Relationships with Supporters,” an article by Iwanaga et al. (2019) was relative. They suggested that employment outcomes for people with disabilities, including psychiatric disabilities, are associated with working alliances, with autonomous motivation being one of the mediating variables. Working alliances do not directly affect employment outcomes. Nevertheless, they are enhanced through multiple SDT-related mediators, including autonomous motivation. Therefore, good personal relationships with supporters might be associated with autonomy and improve employment outcomes [Personal Relationships with Supporters]. Hereafter, brackets [ ] indicate themes mentioned above.

### **Autonomous Motivation Through Experience as a Worker**

The experience of employment increased the work autonomy of people with psychiatric disabilities. The factors increasing the autonomy of work motivation through experience as a worker identified in previous studies are described for each employment support method.

#### **Group approach.**

Malmanche et al. (2015) conducted a qualitative study of people with psychiatric disabilities who participated in a group-based vocational program in a New Zealand fruit orchard. The program consisted of two weeks of training with mental health support, followed by approximately three months of paid seasonal employment in a kiwifruit packing house, with support to obtain further employment. The autonomous motivation factors derived in this study included support to overcome physical barriers to employment, such as commuting options and developing a work history through experience gained in the program. These factors were described as contributing to a broader range of employment options and increased self-determination opportunities for people with psychiatric disabilities [Access to Self-selection Opportunities]. Tanaka et al. (2015) also conducted a qualitative study of the nature and meaning of the "work-ordered day" (WOD), a central component of the Clubhouse, and the relationship between recovery and autonomy. The results showed that the essential elements promoting autonomy included acquiring a daily rhythm through work, gaining a sense of rest [Structures Created by Working], developing self-confidence, discovering the occupational identity [Significance of Work], and acquiring work skills [Access to Self-selection Opportunities]. The participation in structured situations where

meaningful but straightforward tasks were undertaken seemed to lead to the recreation of order and a rhythm in daily life, the discovery of interests and strengths, and an increase in self-confidence, which increased work motivation autonomy.

Furthermore, Ellingsen-Dalskau et al. (2016) conducted a qualitative study on the experiences of people with psychiatric disabilities participating in green work in Norway. Green work is vocational training that involves agricultural activities together with the usual workers in commercial farms. Ellingsen-Dalskau et al. (2016) analyzed the interview data from the perspective of SDT and found that the presence of work structures based on set hours and rules was useful for developing autonomous motivation [Structures Created by Working]. Providing activities with flexibility and diversity of choice was an essential facilitator for recovery [Access to Self-selection Opportunities], as it brought significance to work, such as interest, challenge, and growth [Significance of Work]. Understanding, approval, friendly guidance, and positive feedback from coworkers on the farm were critical factors in promoting autonomous motivation. The experience of helping others in a group setting leads to a sense of fulfillment, high-quality relationships, and psychological well-being [Significance of Work].

### **Peer work.**

In recent years, supportive work as peer workers and vocational rehabilitation facilitators has been offered as a new vocational path for people with severe psychiatric disabilities (Moran et al., 2014). In order to understand how autonomous motivation develops, semi-structured interviews were conducted with paid peer workers. Moran et al. (2014) described peer workers' motivations to work by categorizing them into intrinsic and

extrinsic motivated as conceptualized in SDT. The results described autonomy, competence, and relatedness, such as feeling significant in one's own way, consistent with the values of connecting with other peer workers and clients and helping others, and gaining confidence [Significance of Work]. Also, instrumental reasons for working, such as earning an income and building a work history, motivated peer workers [Access to Self-selection Opportunities]. Moran et al. (2014) concluded that the life experiences of people with psychiatric disabilities became part of their work histories through peer work, which facilitated the integration of work and illness experiences and enhanced their autonomy.

### **Supported employment.**

Supported employment is a vocational rehabilitation method that has been used since the 1980s, based on the "Place-Train" model. The "Place-Train" model means promptly providing job placement, followed by job training and support, rather than job training and then job placement (Anthony and Blanch, 1987; Becker and Drake, 2003). Urlic et al. (2010) analyzed the meaning of "work" in the daily lives of people with schizophrenia by interviewing and observing six clients (three in supported employment and three unemployed) of an Australian outreach team that provides supported employment services. The results suggested that getting a job creates a purpose and a structure in the daily lives of people with schizophrenia [Structures Created by Working], brings rewards [Access to Self-selection Opportunities], and improves self-esteem [Significance of Work] as factors that increase autonomy. In employment support for people with schizophrenia, it is essential to help remove barriers related to basic life needs, including finance, food, and hygiene. Urlic et al. (2010) argued that it is necessary to first increase support for people with schizophrenia for accessing self-selection opportunities to provide opportunities to participate in

employment.

## Discussion

### The Behavior of Supporters for Enhancing Autonomy

Four themes were identified by the literature review regarding facilitators of autonomy that affect finding and maintaining employment by people with psychiatric disabilities. These four themes indicated increasing autonomy in the following areas: support for symptom management, daily living needs, maintaining good relationships in the workplace, and motivational interviewing.

Fear of the inability to cope with psychological symptoms is a barrier to self-selection opportunities. Many people with severe psychiatric disabilities feel powerless in controlling their symptoms and the problems in their lives resulting from their illness (Davidson et al., 1997). Difficulties in coping with symptoms by people with psychiatric disabilities can limit their prospects, including finding a job (Urlic and Lentin, 2010). Therefore, the first line of support is to assist them with their psychiatric disorder and help them manage their symptoms. The ability to control symptoms might increase autonomy because it provides better options for self-determination in one's life. Moreover, increased autonomy can improve treatment outcomes (Michalak et al., 2004). People with psychiatric disabilities who experience poverty face significant barriers concerning their vocational needs and obtaining food, health, and social services. Therefore, it is necessary to ensure that they can participate in meaningful occupations by providing adequate food, housing, and medical services. (Urlic and Lentin, 2010). On the other hand, a study on the Florida SDC, which offered self-

selection-oriented support from the early onset of mental disorders (Croft et al., 2018), indicated a positive impact on finding and maintaining housing, and employment, by people with psychiatric disabilities. Developing a better interaction among increased autonomy, symptom management, and access to food and housing is expected to increase vocational participation opportunities for people with psychiatric disabilities.

Moreover, the structure and meaningfulness of work afforded by occupational participation opportunities are expected to create a better interaction with autonomy. The meaningfulness of work is greatly influenced by relationships with managers, colleagues, and customers (Ellingsen-Dalskau et al., 2016; Moran et al., 2014). It is expected that people with psychiatric disabilities will also require support in adjusting their relationships with people in the workplace. Frequently, the wishes of people with psychiatric disabilities are not accepted due to different external factors related to employment activities and working life. It is crucial to support them to maintain their autonomy even in these situations in which their wishes and preferences are not accepted. Motivational interviewing, which is based on client-centered therapy, can promote intrinsic motivation and increase autonomy (Ryan and Deci, 2008) and provides an effective method of achieving the goal of supporting them to maintain their autonomy.

Hospitalizations due to mental illness result in a lack of autonomy in people with psychiatric disabilities. People with psychiatric disabilities want to recover their autonomy and independence in the process of transition to the community; however, they also need consistent support. Also, they may not be able to engage in meaningful activities on their own due to a lack of self-efficacy. Their supporters must provide them with opportunities and encourage them to participate in activities while respecting their autonomy (Mutschler et al., 2019). Specifically, support for people with severe psychiatric disabilities requires respecting

them as people who can create a life for themselves. Research for identifying factors contributing to their recovery should be based on the experiences of people with psychiatric disabilities themselves (Davidson et al., 1997). However, the behavior of supporters that are able to ensure the autonomy of people with psychiatric disabilities for employment has not been identified to date, and this issue should be examined in future research.

### **Suggestions for Employment Support Focusing on Promoting Autonomy**

There are various methods of employment support for people with psychiatric disabilities. In a Cochrane review (Suijkerbuijk et al., 2017), employment interventions were categorized as "Prevocational Training," "Transitional Employment," "Supported Employment," "Augmented Supported Employment" that is supported employment augmented with other interventions such as Cognitive Skills Training, and "Psychiatric Care Only." Conversely, the same article states that most randomized controlled trials have focused on supported employment and extended supported employment, narrowing the view to other and new interventions. Autonomy is an issue that is common to all employment support methods. The results of this study show that increased autonomy was mentioned in all forms of employment support. The results also indicate that autonomy improvement is a common support issue even in countries with different welfare systems. This suggests that support for increasing autonomy might be a basic intervention common to different employment support methods. It is suggested that the development of autonomy in patients with mental illness seeking employment should be pursued as a point of departure for developing new intervention methods.

### **Significance and Limitations**



This study identified four themes in the literature on factors promoting autonomy in people with psychiatric disabilities in employment. However, the results' validity is limited by the shortage of studies on this topic and the small number of studies that were extracted based on the eligibility criteria of this study. Notably, there was little evidence of specific factors related to the behaviors of supporters that affect autonomy. Further studies should continue to explore autonomy-related factors that enhance people with psychiatric disabilities' employment outcomes. It is necessary to clarify the supporters' specific behaviors and relationship styles that enhance autonomy. It is also necessary to examine and demonstrate consistent support collaborations using experiences pertaining to people with psychiatric disabilities, from the onset of the illness to their working life, by focusing on issues related to promoting their autonomy.

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