

PEOPLE WITH SCHIZOPHRENIA AND POSSIBILITIES OF THEIR EMPLOYMENT IN THE WORK MARKET

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Summary

The paper deals with the viewpoint of social workers on schizophrenia and people suffering from the illness, with their further possibilities to prepare and employ themselves in the labour market. The aim of the paper is to characterize schizophrenic illness, reveal consequences of the illness in real life and give the legislation background, regulating the possibilities of employing the people with disabilities in our labour market, and with directly addressed schizophrenia issues viewed by social workers. The final part focuses on the opportunities of people suffering from schizophrenia to be prepared as well as to be employed in the labour market.

Keywords: people suffering from schizophrenia, employment, labour market, opportunities, social worker

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Introduction

Many people with various physical disabilities can be seen in the society and our surrounding, but people with mental illness cannot be always so easily observed. What often happens is the situation that the society condemns some person for his/her unusual behaviour, but that can be also bound with his or her mental illness.

However, we need to think further and realize that mental illnesses exist, and they are a part of our society life. Each disease or illness has specific symptoms and manifestations with various incidences. The ICD-10 (International Classification of Diseases-10) provides their division and characteristics.

Within the basic diagnostic categories of mental disorders according to ICD-10 belong:

- Organic mental disorder including symptomatic, mental disorders (F 00-F 09). This group includes disorders caused by morphological changes in the brain or disorders caused by physical or systemic diseases.

Here belongs dementia, psychosis, mood disorders, or delirium;

- Mental and behavioural disorders due to psychoactive substances use (F 10-F 19);
- Schizophrenia, schizotypal disorders and delusional disorders (F 20-F 29).

The disease development is preconditioned by genetics, by biological but also environmental factors;

- Mood/Affective disorders (F 30-F 39) represent a composition of syndromes and symptoms accompanied by several other problems, such as manic depression or permanent mood disorders;

- Neurotic, stress-related and somatoform disorders (F 40-F 48) are caused by the survival of stress or somatoform disorders;

- Behavioural syndromes associated with physiological disturbances and physical factors (F 50-F 59);

- Disorders of adult personality and behaviour (F 60-F 69) are based on an imbalanced of individual personality traits, such as paranoid disorder, dependent personality disorder, etc.;

- Mental retardation (F 70-F 79);
- Disorders of psychological development (F 80-F 89);
- Behavioural and emotional disorders with onset usually occurring in childhood and adolescence (F 90-F 98);
- Unspecified mental disorder (F 99) Probstová, Pěč (2014).

At present schizophrenia becomes more and more common type of mental illness. Schizophrenia is triggered not only by greater pressure from society, increased stress caused by the economic situation, or the use of various addictive and narcotic substances, but also by many other factors.

Schizophrenia does not only affect the life of the illness carrier, but it further affects the lives of family members and his surrounding, but an unfavourable health state is not the only thing that accompanies a person. In the case of schizophrenic illness, person has to visit a psychiatrist on regular basis the, go to day-care hospitals or social service homes.

The loss of income, required care, expenses for ensuring sufficient care are further consequences but the most important is their inability to enter the labour market which is caused by various reasons. The illness in high stage must be understood as the impossibility to work, but do not also forget that different situation comes with people at different stages, who suffer from a mild forms of schizophrenia, or are already stabilized after overcoming the most acute phase. The practical experience points to the fact that people at this stage are able to work, but they are not allowed to do so. Their situation is complicated by the lack of knowledge where and in which area to apply for a job. Fear in a part of society or stigmatization can be placed in a high position within the effort of a person suffering from schizophrenia to enter the labour market.

Main part

Schizophrenia is a very serious mental illness with its origin deeply rooted in genetics. Bleuler (*in Hell-Fischer, 1987*) described schizophrenia as an illness characterized by a mismatch of feeling and thinking, where the symptoms are observed from an early adulthood. Through reduced functionality the illness mainly affects cognitive, behavioural, emotional, but also social skills. Schizophrenic symptoms can be accompanied by auditory or visual hallucinations, the person is often confused, depersonalized, and rarely appears the state of delirium. Schizophrenia is connected with manic-depressive states, impaired memory, but also autistic behaviour, the attention should be paid to remission or relapses, means the stage that at least twice must be manifested and that is the most acute period of illness. Only after remission or relapse overcoming it make sense to set up the rehabilitation process in order to return the person into normal life.

The weakening of skills has negative impact on a person and his standard of living, as it affects the loss of employment, associated with the loss of income. From schizophrenia suffers about one percent of Slovak population (*League for Mental Health, 2012*). Schizophrenia is ranked among the most serious mental illnesses in the world, it belongs to one of the ten most common causes of permanent disability of people (*Češková, 2005*).

Health disadvantage and job loss are within the society perceived as social cases, understood as an unfavourable situation. Based on the unfavourable situation that arose from the above mentioned reasons, a person with a disability is entitled to certain legislative forms of assistance. The position of society related to the situation of the handicapped reflects the mental level of the state and his way of thinking. From the social work viewpoint important are

consequences, such as a decline of economic income, increased need for health care, exclusion from work and subsequent social isolation from the society and social life (*Levická et al., 2007*).

Important is to keep in mind that anyone with schizophrenia who passed through the most serious period of illness, and reached the stable stage is then able to lead own independent life, secure himself with financial sources, can be independent from the family members. With the participation, help and support of specialists and social workers, during the rehabilitation period, it is possible to prepare a person with schizophrenia for a job interview and further employment. Seemingly ideal solution is highly influenced by labour market opportunities, reflected also by the viewpoint of employers and their standpoint to employ people with schizophrenic illness. A part of blame lies on society, which often supports negative attitudes towards the mentally ill people, what reduces their possibility to find a job in the labour market. Important is the fact that society needs to realize, mainly the employers, that everyone has the right to the quality life, regardless the health, but unemployment reduces the quality of life to a very high extent and on the opposite side the work significantly affects the quality of our lives, and at the same time represents an integral part of our living. As declared by law, it is a source of income through which we secure the basic necessities of life or the little things that evoke a feeling of joy in us, that directly increases the quality of life from which personal growth can arise.

As it was already mentioned, a person suffering from schizophrenia after passing the most acute phase, under the supervision of experts, in cooperation with a social worker, has the opportunity to find a suitable job. Nevertheless, it is important to realize that the mentally ill person definitely has certain limitations, so choosing the job should be tailored to his possibilities and abilities. At the very beginning should be permanent employment excluded and recommended are the ways of employment that include work in sheltered workshops or protected workplaces, contract works – where the employee can work maximum ten hours per week (maximum of forty hours per month) or work part-time, with the possibility to work twenty, maximum thirty hours per week. The length of working hours must be adjusted based on individual needs and based on the agreement between the employee and the employer.

Important is the type or scope of work specification, as people with mental and health disabilities are not able to perform tasks where maximum concentration is required, or to lead people or have important responsibilities. Therefore, social workers recommend their involvement and work in administration, culture, or work manually, but not physically demanding work. Regular contact with people at work is just beneficial and a person with schizophrenia can faster adapt and get back to the society (*Olsovská, 2018*).

Dragonová (2006) claims that to provide job to people suffering from schizophrenia is a serious problem, they find it very difficult to find a job on the labour market. Employers have various prejudices that reduce job opportunities for people with disabilities. In the case of persistent prejudice and stigmatization of people with schizophrenia, beneficial can be education of employers in the context of schizophrenia.

Act no. 5/2004 Coll., § 55 regulates the employment of people with schizophrenia and mentioned legislation in detail describes the employment services and the possibilities of employment in sheltered workshops or protected workplaces. The job positions are specially adjusted to conditions, adequate health status of employees. The law also mentions the benefits for employers resulting from the job provision to a disadvantaged candidate. If the employer meets the specified conditions stated in the Act, then he has the possibility to gain various contributions and subsidies from the competent authorities. § 58 of the Code also points to the possibility of employment mentioned through the agencies for supported employment, which

open new opportunities for the people with schizophrenia in the labour market. The team from supported employment agencies provides support, advice and assistance to the candidate in obtaining and subsequently maintaining the job. They also provide work and legal protection, advice in the field of finance, or help to orient them in the labour market (*Act No. 5/2004, 2004*). From the social work point of view can be mentioned that the legislation represents a significant support in solving the unfavourable life situation of people with schizophrenia and the effort to find a job in the job market.

It is not easy to prepare a person suffering from schizophrenia for a labour market. A good choice is to start with rehabilitation during the time of hospitalization as the addition to pharmacological treatment of schizophrenia. During the stay in a hospital, in the most cases psychiatric wards provide their patients with therapies aimed at work and practical activities, where their tasks are adapted to the individual possibilities of patients. After discharge from the hospital, it is good to supervise the patient so that he does not stagnate. What should be kept in mind is that the patient was hospitalized or isolated from society for some period of time and his only contact was the psychiatrist, a social worker or a family, what means that he or she needs to be reintegrated into society and gradually prepared for employment.



Pic. 1. Process of preparing for work

Source: Hell, Fischer-Felten, 1997

The social workers play a key role in the mentioned process, because they accompany the client throughout the process, but with permanent, important participation of experts. In the case of people with schizophrenia, important is the participation of a psychiatrist, a GP, and the family members. The social worker has at disposal several types and possibilities of therapy while working with a client, where social counselling is one of them, as it focuses on help, support and development, and helps a person suffering from schizophrenia to overcome a difficult life situation. The aim of counselling is to find a new vision of himself/herself, the surrounding, gain new information useful in practice (*Matousek, 2013*).

After social counselling completion to a person suffering from schizophrenia, further can be implemented steps through the development of an individual action plan. This method belongs to the most effective tools for achieving goals. When working with an individual, appropriate is the specific task-oriented approach, where its mission and procedures, can increase the client's chance to employ in the labour market. In the task-oriented approach, the employee focuses mainly on the short-term intervention, an ideal path when preparing for employment. The benefit of task-oriented approach is the support of self-confidence or humanity. In the cases of people suffering from schizophrenia, self-confidence and self-esteem promotion is an important factor in finding and subsequently maintaining the found job (*Vaska, 2014*).

The social worker also focuses on support and development of client's skills, knowledge and competencies, useful for work and employment. Suitable are exercises of social skills, during which the social worker focuses on communication. Other additional help is a group work, where clients have the opportunity to train various situations that may occur at work, but the training must be voluntary from the client's side. Training is the biggest benefit for the upcoming job interview or starting a job, effective is the role-play implementation. Clients of a day-care centre or home of social services, together with a social worker imitate various situations and train reactions suitable for practice, during the training the social worker then cannot save praise, because they are of great importance to a person suffering from schizophrenia.

Weeghel (1995, in Wilken, Hollander, 1999) comes up with an interesting theory of occupational rehabilitation. He argues that occupational rehabilitation can be beneficial in returning to working life and renewing the work process, important in occupational therapy is to provide support for a person suffering from schizophrenia in order to avoid loss of self-confidence. The benefit of occupational therapy is the elimination of the lost social skills at the time of hospitalization. There are many ways to prepare a client for the labour market, but they are all at the discretion of the social worker.

Setting of the client's plan, choice of training or therapy are exclusively in the competence of the social worker who based on a doctor's report, an interview with a client or his family, prepares an individual plan, adapts it to the client's needs and based on it runs a rehabilitation program.

Conclusion

The characteristics of schizophrenia allowed us to describe clearly the illness consequences, while we were focusing on its impact on employment. The above mentioned information shows that not only the symptoms but also the consequences of the disease affect their ability to enter the labour market. The high impact is also connected with the issue and the viewpoint of employers and society towards people suffering from schizophrenia. Nevertheless, we have identified ways and types of employment adequate for people suffering from schizophrenia. The main point for us was the legislation, protection of people with disabilities and at the same time support of employers who provide employment to disadvantaged applicants. At the end were described various possibilities of social work useful in practice in the process of preparing a person suffering from schizophrenia for the labour market. Despite the quality preparation for employment by a social worker, it is important to work systematically to eliminate prejudices and not to stigmatize people suffering from schizophrenia.

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