

Research

Does having been on a 'section' reduce your chances of getting a job?

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Abstract

Aims and method

We wanted to ascertain employers' attitudes to interviewing and hiring job applicants with a history of mental illness. In particular, we wanted to assess the potential effect on job prospects for applicants with a history of admission under the Mental Health Act, 1983. We sent tick-box questionnaires to 174 companies; there was a 32% response rate.

Results

The main factors influencing employers' hiring decisions were medical opinion regarding an applicant's fitness to work and their employment and sickness records. In about three-quarters of small companies and half of large companies questions about mental illness are simply never posed.

Clinical Implications

Approved Social Workers have no reason to caution people assessed under the Mental Health Act that being detained may harm their job prospects.

It is good practice for Approved Social Workers to advise a patient that there may be implications for the future should they be detained under the Mental Health Act. This research was motivated by the fact that in our experience it is quite common for Social Workers to tell patients who have been 'sectioned' that detention under the Mental Health Act could adversely affect their visa and employment prospects. In fact there is clear evidence that in the vast majority of cases visa applications are not affected by being 'sectioned' (Allen & Allen, 1994).

Although there is research, showing ways of improving employment outcomes for persons with severe mental illness (Lehman et al 2002) we could find no information in the literature about the attitude of employers towards employing someone with a history of mental illness. The only information we found was a letter by Laird (1990) indicating that a person was less likely to get a job if they had a criminal record than if they had a history of mental illness. There was no reference to detention under mental health legislation.

The Study

We wanted to compare small companies, where it was less likely that there would be access to an Occupational Health Service, with larger ones. We obtained details of 83 companies with between 1 and 10 employees and sales of less than £100,000 and 91 companies with between 100 and 1000 employees in the High Wycombe area. The questionnaire was divided into 3 sections. The first section asked when, if at all, an employer would ask a prospective employee if they have a history of mental illness. The second asked how the employer would proceed if a prospective employee were to give a history of mental illness. The third asked which factors would influence an employer in respect of appointing someone; one of the options in this section was 'Previous compulsory admission under the Mental Health Act'.

Findings

The main findings are summarised below:

	Small companies	Large companies	Total	Percentage
Surveys (n=174)				
Surveys mailed	83	91	174	100.00%
Returned but not completed	6	0	6	3.45%
Not returned	54	59	113	64.94%
Completed and returned surveys	23	32	55	31.61%
Questions Revealing Mental Illness (n=55)				
Asked before interview	3	4	7	12.73%
Asked during interview	3	6	9	16.36%
Asked after interview	1	6	7	12.73%
Not asked	17	16	33	60.00%
Response to Applicant Revealing Mental Illness (n=55)				
Employment record	17	26	43	78.18%
Sickness record	15	23	38	69.09%
Diagnosis	9	11	20	36.36%
Mental Health Act admission	8	12	20	36.36%
Medical opinion re: fitness to work	15	28	43	78.18%
All of the above	6	10	16	29.09%
Factors Influencing Appointment to Job (n=55)				
Employment record	17	26	43	78.18%
Sickness record	15	23	38	69.09%
Diagnosis	9	11	20	36.36%
Mental Health Act admission	8	12	20	36.36%
Medical opinion re: fitness to work	15	28	43	78.18%
All of the above	6	10	16	29.09%

p values were calculated for the differences between the small and large companies for all results using the standard error of the difference between percentages (based on table 2.5 of Statistical Methods in Medical Research; Blackwell Scientific Publications, Oxford). The only significant difference found was that no small companies would refer to Occupational Health compared with 9 (28%) large companies ($p < 0.001$).

Comment

This research is clearly based on a small sample size and therefore one has to take into account the possibility of response bias. The likelihood is that those companies that did not reply would be less likely to adopt good practice with regard to screening job applicants.

The most interesting finding is that in about three-quarters of the small companies and half of the large ones in our sample questions about mental illness are simply never posed. Secondly, when a history of mental illness is ascertained, the response is primarily one of seeking more information. Most companies will wish to discuss matters relating to mental health with the applicant. Large companies are more likely to utilise their Occupational Health Doctors - this was the only significant difference between the 2 types of company in our research. Small companies, in contrast, are more likely to

directly ask the applicant about their mental health. Furthermore, just over half the companies indicated that they would also want to speak with the applicant's GP.

When it comes to factors influencing job appointment, employers across the board are more concerned with a prospective employee's employment and sickness record than with their mental health history. All companies are interested in medical opinion about an applicant's fitness to work, with large companies putting more weight on this. About a third of companies are influenced by a history of hospital admission under the Mental Health Act, and similar numbers are influenced by the applicant's diagnosis. However, for all those companies indicating that an applicant's history of mental illness was relevant in their decision-making process, the majority indicated that it was just one aspect of a multi-factorial hiring decision.

A major caveat would have to be that the questionnaire measures companies' stated intentions rather than their actual behaviour, which may, of course, be markedly at odds with this. Clearly there is scope for research looking at this aspect.

In terms of our original motivation for doing the research it would seem that there is currently no evidence base for cautioning patients that detention under the Mental Health Act may be deleterious to their chances of employment. In fact, one may speculate that, since detention may facilitate early treatment, such detention could actually improve work prospects by shortening the overall time a person is off sick.

References

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