

Housing and Employment Outcomes for Mental Health Self-Direction Participants

Self-Direction

Self-direction is emerging as a promising model of service delivery for people with serious mental health conditions, and one that aligns with the federal focus on using individualized, person-centered care to effect recovery. Under the model, individuals who use publicly funded mental-health services, and who have an interest in selecting their supports, control a portion of funds normally spent on their mental health treatment. Self-directing participants allocate individual budgets in a manner of their choosing within a set of program parameters, selecting and purchasing goods and services to work toward their recovery goals. But what effect does self-direction have on important functional outcomes like employment and housing? To find out, we looked at data from the nation's largest and longest-standing self-direction effort: FloridaSDC.

The Study

With funding from the Robert Wood Johnson Foundation, HSRI researchers and colleagues compared outcomes of housing independence and employment between individuals who participated in self-direction and those who did not. We analyzed deidentified data on 271 self-directing participants across two FloridaSDC programs and compared this data to a matched group (composed of individuals with similar characteristics) of 1,099 nonparticipants. The groups had been assessed at multiple time points by the nonprofit entities who manage these programs; the nonprofits are required to collect demographic information, service event data, and mental health outcomes data.



Wesley's goal was to secure full-time employment and become financially independent. Florida's Self-Directed Care program helped him get there.

*Compared with nonparticipants, self-directing participants were **more likely to improve, or maintain at high levels, engagement in paid work and independent housing.***

We looked at data across a three-to-five-year period—examining the data from individuals' first assessment and last assessment—and found evidence suggesting positive effects of self-direction on both outcomes of interest: employment and independent housing.

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For the employment outcome, we looked at the number of days that individuals had worked for pay in the month leading up to the assessment. To explore housing independence, we looked at whether an individual had transitioned from dependent housing (dependent living with others, group home, assisted living, supported housing, or hospital) or homelessness to living independently or had maintained their independent housing status.



Several recent studies show that self-directing participants have made gains in vocational pursuits, independent housing, and community inclusion. Looking at purchase types, a recent study showed that individuals developed strategies that supported their wellness and increased their engagement in meaningful activities.

Future studies will continue to examine self-direction’s relationship to service use, housing and employment, and other outcomes that are important to people who use publicly funded mental health services in other states that are part of our *Demonstration and Evaluation of Self-Direction in Mental Health*. To learn more about the project, access additional mental health self-direction resources, and keep up-to-date about our work, visit www.mentalhealthselfdirection.org.

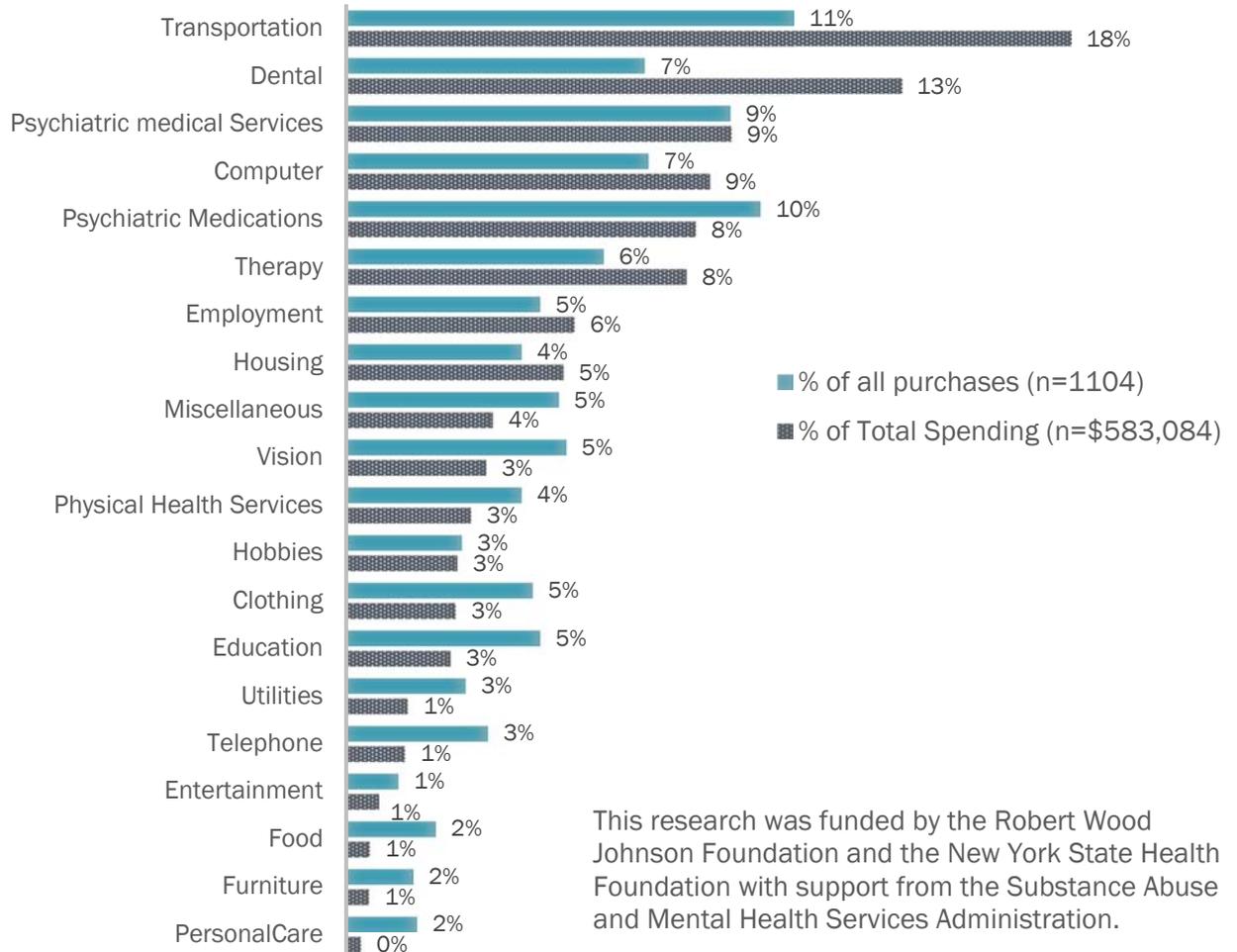
For more information:

See “[Housing and Employment Outcomes for Mental Health Self-Direction Participants](#)” in the journal *Psychiatric Services*

Or contact the author:

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Purchases by FloridaSDC participants were related to a range of goods and services—from transportation and dentistry to housing and employment-related supports to mental health treatment.



This research was funded by the Robert Wood Johnson Foundation and the New York State Health Foundation with support from the Substance Abuse and Mental Health Services Administration.

