



Summary of the group work feedback:

Internal ETE services within drug and alcohol organisations

1. What are the biggest barriers to employment for drug and alcohol service users?

Employers

- Employer prejudice, stigma and low expectations of client group
- Need to improve awareness and understanding
- Perceptions of drug service users as having support needs, rather than their experiences being an asset
- Potential inflexibility of working hours
- Lack of adequate child care

Services

- Staff assumptions about their clients, low expectations
- Fragmented provision of services – lack of cross- borough communication
- Need for coordination with mental health services on dual diagnosis clients seeking work
- Lack of diversity in training – in particular, there is a need for vocational skills courses within a supportive environment that understands drug/alcohol use (gardening, painting, woodwork, decorating, plumbing, building)

Skills and Experience

- Low self-esteem and confidence, fear of change
- Need for soft-skills development
- Lack of employment history / references
- Feelings of not belonging / isolation
- Un-realistic expectations of employment

Funding/ Economic considerations

- Recession – increased competition for jobs
- Presentation and transport costs
- Funding for courses – e.g. counselling is expensive
- High private accommodation costs

Policy

- Benefit and housing traps – including the '16 hour rule' on volunteering/employment
- Job Centre Plus – needs to improve understanding and communication with drug and alcohol service users and staff

2. In your experience 'what works in employment support for people with drug or alcohol problems?' i.e. what types of ETE services should drug/alcohol organisations be delivering?

- End-to-end ETE support– continuity from pre-treatment through to in-work support
- Care co-ordination- ETE integrated with treatment
- Sign-posting to appropriate employment support providers
- Analyse client soft skills – make them measurable, transferable, applicable and “NVQable”
- Gradual support- develop thresholds (low-medium-high according to their capability)
- Drama therapy
- Supported work experience placements

- Volunteering – to develop skills and network with potential employers
- The process of writing a CV can be confidence building at the start of ETE work
- Motivation – realistic goals and taking small steps
- Relapse prevention skills
- Pre-employment workshops
- Advocacy workers
- Personalised programmes
- Training for workers on their views on employment and how to understand client skills/ambitions
- Key workers or peer mentors providing education access support
- DAAT lead on ETE Directory coordination

3. How can ETE services be integrated into core service delivery?

- Working in communities
- DAATs must fund this as part of the core service delivery
- Encourage workers to integrate ETE into tier 2/3/4 – should be built into the care plan
- ETE worker for each project
- Linking in with Job Centre Plus
- Provide flexible guided learning (agreed by JCP)
- Need to overcome the borough boundary obstacle
- Assessment to provide options suitable to clients need
- Career path – the future
- Multi-disciplinary care management/care planning
- Drug and alcohol services being creative and willing to fail. Taking responsibility and sometimes breaking rules (e.g. health and safety)
- Have hope as workers
- Good to use some courses that clients have to travel to externally and provide others in-house
- Links to employers - Job brokerage with local employers and advocacy at industry level

4. Do you have any examples of innovative internal ETE services?

- Camelia Botnar: young peoples service, work experience, vocational training and accommodation provided
- 'Goals' project
- Transitional Spaces Project
- SUDRG/ SUNDIAL
- Brixton step: support with housing and tenancy agreements and access to ETE
- St. Mungo's 'support employment programme'
- Social enterprises
- Spitalfields Crypt Trust
- Job Centre Plus – There is funding is available for courses (e.g Future jobs fund)
- Addaction smart scheme
- Progress2work
- Red Kite learning
- Thames Reach 'Travel' and 'Grow' programmes

Creating partnerships with external employment support providers

1. What are the current barriers for individuals with drug and alcohol problems/histories accessing mainstream/external employment support?

- Funding for courses
- Contacting the right boroughs

- Different agencies – how to choose which ones particular service users can fit into
- Lack of support for mental health issues or personality disorders

2. What is needed to improve access?

- Training for organisations on tax credits and providing ETE
- Directories of treatment services and ETE services (online)
- Online mentoring
- Coordinated care packages – housing/ mental health/criminal justice/ treatment/ employment
- More network events to learn what other are doing and sharing best practice with details of specific programmes
- Arrangements for JCP advisers to provide advice in treatment agencies

3. What are the advantages/disadvantages of working with external ETE providers?

Advantages:

- Saving own resources - not re-inventing wheel
- It is often possible to get satellites within your services
- Accreditation

Disadvantages:

- Different ideologies and perceptions of what ETE support should be e.g Job Centre Plus often does not recognise the ETE courses that drug and alcohol organisations provide internally