

Supplement. Overview of Studies

Authors, year (country)	Sample characteristics	Intervention	Design and analysis	Key findings
Abdel-Baki, A., Létourneau, G., Morin, C., & Ng, A. (2013). Resumption of work or studies after first-episode psychosis: The impact of vocational case management. <i>Early Intervention in Psychiatry</i> , 7, 391–398. (Canada)	97 young adults with first episode psychosis	Vocational case management modeled after IPS. Included psychiatric follow up, individual vocational case management and group therapies.	Observational study tracking the impact of the intervention based on case review using a pre-post design with a single group.	The occupation rate of the sample improved from 47% employed at admission to 57% at one-year post-intervention, and 70% at 48 months post-follow up.
Adler, D. A., Lerner, D., Visco, Z. L., Greenhill, A., Chang, H., Cymerman, E., ... Rogers, W. H. (2015). Improving work outcomes of dysthymia (persistent depressive disorder) in an employed population. <i>General Hospital Psychiatry</i> , 37, 352–359. (US)	167 employed adults with dysthymia.	Phone counseling with three components: work coaching and modifications, care coordination, and CBT with a work focus.	Subgroup analysis from an RCT comparing work-focused intervention with treatment as usual.	Participants in the work focused intervention showed significantly reduced depression symptoms, and less work productivity loss than those in the treatment as usual group.
Ahmed, A. O., Hunter, K. M., Goodrum, N. M., Batten, N.-J., Birgenheir, D., Hardison, E., ... Buckley, P. F. (2015). A randomized study of cognitive remediation for forensic and mental health patients with schizophrenia. <i>Journal of Psychiatric Research</i> , 68, 8–18. (US)	78 adults with schizophrenia or schizoaffective disorder receiving inpatient and forensic treatment.	Cognitive remediation coupled with bridging discussions to link cognitive skills derived from training to strategies for use in daily life.	RCT comparing Cognitive remediation program with a control group.	Individuals in the treatment group demonstrated gains in neurocognitive outcomes, and reductions in negative symptoms, and aggression.

<p>Allott, K. A., Cotton, S. M., Chinnery, G. L., Baksheev, G. N., Massey, J., Sun, P., ... Killackey, E. (2013). The relative contribution of neurocognition and social cognition to 6-month vocational outcomes following Individual Placement and Support in first-episode psychosis. <i>Schizophrenia Research, 150</i>, 136–143. (Australia)</p>	<p>135 adults with mental illness</p>	<p>IPS intervention</p>	<p>Follow up on RCT comparing IPS with treatment as usual. Investigated whether baseline neurocognitive functioning predicted later employment.</p>	<p>Receiving IPS was associated with greater likelihood of employment at follow up.</p>
<p>Alvarez-Jimenez, M., Bendall, S., Lederman, R., Wadley, G., Chinnery, G., Vargas, S., ... Gleeson, J. F. (2013). On the HORYZON: Moderated online social therapy for long-term recovery in first episode psychosis. <i>Schizophrenia Research, 143</i>, 143–149. (Australia)</p>	<p>20 adults with mental illness</p>	<p>Online behavioral intervention (Moderated on-line social therapy or MOST), integrating peer to peer networking, individually tailored interactive psychosocial interventions, and involvement of expert mental health and peer moderators to monitor safety.</p>	<p>Pilot study with single group design to evaluate feasibility, acceptability, safety, and initial effectiveness of intervention.</p>	<p>Participants showed a decrease in depressive symptoms at baseline. Majority of users reported a positive experience, no adverse events were recorded, and participants reported increase in feelings of social connectedness.</p>
<p>Andersén, Å., Larsson, K., Lytsy, P., Berglund, E., Kristiansson, P., & Anderzén, I. (2018). Strengthened General Self-Efficacy with Multidisciplinary Vocational Rehabilitation in Women on Long-Term Sick Leave: A Randomised Controlled</p>	<p>401 women on long-term sick leave from their employment for more than a year due to long-term pain or mental illness.</p>	<p>Individual meetings with diverse service teams as part of two tested interventions: 1) The Multidisciplinary team (TEAM) consisted of physician, occupational therapist,</p>	<p>RCT design, comparing TEAM, ACT, and a control group.</p>	<p>Participants in the TEAM intervention showed significantly higher self-efficacy at 12-month follow up compared to the control group. The ACT intervention had no effect on self-efficacy.</p>

Trial. *Journal of Occupational Rehabilitation*, 28, 691-700. (Sweden)

physiotherapist, social worker, and psychologist. 2) Acceptance and Commitment Therapy (ACT) included mindfulness, acceptance and fundamental values and was provided by a psychologist.

Anthony, W. A., Ellison, M. L., Rogers, E. S., Mizock, L., & Lyass, A. (2014). Implementing and evaluating goal setting in a statewide psychiatric rehabilitation program. *Rehabilitation Counseling Bulletin*, 57(4), 228-237. (US)

238 people with psychiatric conditions in Iowa who qualified for state-federal Medicaid services

The intervention was titled Intensive Psychiatric Rehabilitation and was based on the Choose, Get, Keep (CKG) model.

A single group pre-post design.

Improvements were noted across all three outcomes (i.e., residential functioning, employment functioning, and earnings).

Au, D. W., Tsang, H. W., So, W. W., Bell, M. D., Cheung, V., Yiu, M. G., ... & Lee, G. T. H. (2015). Effects of integrated supported employment plus cognitive remediation training for people with schizophrenia and schizoaffective disorders. *Schizophrenia research*, 166(1-3), 297-303. (Hong Kong)

90 people with schizophrenia or schizo affective disorder receiving outpatient services.

Two interventions were tested: 1) Integrated supported employment (ISE) and 2) ISE combined with a computerized cognitive remediation training.

Pre-post test comparing two intervention groups.

Both groups made improvements in the majority of outcome measures (vocational, clinical, psychological, and neurological). No significant differences were detected between groups.

Balcazar, F. E., Awsumb, J., Dimpfl, S., Langi, F. L. F. G., &

116 transition aged youth

Jobs for Youth Program: inclusion in general ed

A single group pre-post design.

Mostly descriptive results. All engaged in VR and

<p>Lara, J. (2018). Jobs for youth program: An intervention to improve transition outcomes of former dropout minority youth. <i>Career Development and Transition for Exceptional Individuals, 41</i>, 166–174. (US)</p>	<p>attending a charter school for students who have dropped out and receive special education services</p>	<p>classroom, Collaboration with state VR, Vocational education (certificate programs), paid internships, case management support, and family engagement</p>	<p>35% found employment after graduation.</p>
<p>Bechdorf, A., Wagner, M., Veith, V., Ruhrmann, S., Pukrop, R., Brockhaus-Dumke, A., ... & Bottlender, R. (2007). Randomized controlled multicentre trial of cognitive behaviour therapy in the early initial prodromal state: effects on social adjustment post treatment. <i>Early Intervention in Psychiatry, 1</i>(1), 71-78. (Germany)</p>	<p>128 young adults seeking outpatient mental health services.</p>	<p>Two interventions were tested: 1) Integrative Cognitive Behavioral Therapy (CBT) including individual and group counseling, cognitive remediation, and family counseling and 2) supportive counseling including individual therapy.</p>	<p>Multicenter RCT with two treatment groups. Both CBT and the supportive counseling groups showed positive improvement in social adjustment. The two interventions were not significantly different in their results.</p>
<p>Bejerholm, U., Larsson, M. E., & Johanson, S. (2017). Supported employment adapted for people with affective disorders—a randomized controlled trial. <i>Journal of Affective Disorders, 207</i>, 212-220. (Sweden)</p>	<p>61 individuals receiving outpatient treatment for depression or bipolar disorder.</p>	<p>To compare two interventions: 1) Individual Enabling and Support (IES) vs. 2) Traditional Vocational Rehabilitation (TVR). IES has 10 principles, seven of which follow IPS.</p>	<p>Assessor-blinded randomized controlled trial with a parallel design. IES group showed better employment outcomes. At one year, 42.4% of IES-participants were employed and only 4% of TVR participants employed.</p>
<p>Bell, M. D., Laws, H., Pittman, B., & Johannesen, J. K. (2018).</p>	<p>77 People with schizophrenia or</p>	<p>To compare two interventions: 1)</p>	<p>RCT with two groups. Rate of employment did not significantly differ</p>

Comparison of focused cognitive training and portable “brain-games” on functional outcomes for vocational rehabilitation participants. <i>Scientific Reports</i> , 8(1), 1779. (US)	other psychosis receiving VR services.	cognitive remediation plus a weekly goal-setting group vs. 2) portable cognitive games plus a weekly goal-setting group.		between groups. Quality of life and instrumental functioning were higher in the group that received cognitive remediation.
Bell, M. D., Zito, W., Greig, T., & Wexler, B. E. (2008). Neurocognitive enhancement therapy with vocational services: work outcomes at two-year follow-up. <i>Schizophrenia Research</i> , 105(1-3), 18-29. (US)	72 People with schizophrenia or schizoaffective disorder receiving community mental health services.	Compared two interventions: 1) Neurocognitive enhancement therapy plus VR vs. 2) VR only.	Unblinded randomized clinical trial with an experimental arm and an active control arm.	Neurocognitive enhancement therapy (NET) produced more hours worked over 12 month and had greater rates of employment.
Bonneterre, V., Pérennou, D., Trovatiello, V., Mignot, N., Segal, P., Balducci, F., ... & de Gaudemaris, R. (2013). Interest of workplace support for returning to work after a traumatic brain injury: a retrospective study. <i>Annals of Physical and Rehabilitation Medicine</i> , 56(9-10), 652-662. (France)	100 people with TBI in a workplace reintegration facility	The SPASE programme (personalized service of accompaniment and follow-up to employment) is a facility for workplace reintegration of TBI persons in the ordinary work environment.	Pre-post test (single group)	The presence of significant workplace support made a substantial difference in RTW rates at 3- and 5-years post-employment
Bowie, C. R., Grossman, M., Gupta, M., Holshausen, K., & Best, M. W. (2017). Action-based cognitive remediation for individuals with serious mental illnesses: Effects of real-world simulations and goal setting on	50 clients with SMI enrolled in vocational services as part of an outpatient mental health facility.	Compared the efficacy and effectiveness of two styles of cognitive remediation: 1) traditional cognitive remediation (tCR) and 2) Action-Based Cognitive	Pre-post test (multiple groups)	The ABCR intervention tended to produce greater benefits than tCR, including slightly higher employment rates and significantly less job-related stress

functional and vocational outcomes. *Psychiatric Rehabilitation Journal*, 40(1), 53. (NS)

Remediation (ABCR) which builds off of traditional cognitive remediation methods by providing a tangible bridge from computerized cognitive training to real world situations through simulated tasks and behavioral goal setting.

Bozgeyikli, L., Bozgeyikli, E., Rajj, A., Alqasemi, R., Katkoori, S., & Dubey, R. (2017). Vocational rehabilitation of individuals with autism spectrum disorder with virtual reality. *ACM Transactions on Accessible Computing (TACCESS)*, 10(2), 5. (US)

9 individuals with ASD recruited from VR, and 9 neurotypical individuals serving as controls.

VR4VR. A 4-hour Virtual Reality training was provided covering six highly transferrable work skills that included shelving, cleaning, money management, etc.

Pre-post with control group.

There was an improvement across each of the six skills.

Brusco, N. K., Watts, J. J., Shields, N., Chan, S. P., & Taylor, N. F. (2014). Does additional acute phase inpatient rehabilitation help people return to work? A subgroup analysis from a randomized controlled trial. *Clinical Rehabilitation*, 28(8), 754-761. (Australia and New Zealand)

137 adults previously engaged in work, who were admitted for inpatient rehabilitation and allocated to a control group ($n=63$) or an

Usual care rehabilitation therapy from Monday to Friday was compared to a group that received Saturday services as well (Physiotherapy and occupational therapy).

A subgroup analysis was performed on data from a multi-centre single-blind randomized controlled trial examining the outcomes of additional Saturday

No significant differences detected between groups on employment status, hours worked, or pay.

	intervention group (n=74).		rehabilitation therapy (occupational therapy and physiotherapy).	
Burke, R. V., Andersen, M. N., Bowen, S. L., Howard, M. R., & Allen, K. D. (2010). Evaluation of two instruction methods to increase employment options for young adults with autism spectrum disorders. <i>Research in Developmental Disabilities, 31</i> (6), 1223-1233. (US)	6 Young adults with ASD in the workplace.	The intervention was designed to teach clients how to perform the role of a fire safety mascot, with cuing provided through an iPod that was positioned inside a puffy mascot costume. The intervention had to parts: a performance cue system (PCS) provided through an app and behavioral skill training provided through a script and DVD.	Single case design	5 of 6 participants were able to achieve a high level of success with the cue system while one other mastered the tasks after only the behavioral skills training (cue system not needed).
Burns, T., & Catty, J. (2008). IPS in Europe: The EQOLISE trial. <i>Psychiatric Rehabilitation Journal, 31</i> (4), 313. (Europe)	312 individuals with severe mental illness randomly allocated to six sites in Europe, selected for their different economic and social conditions:	IPS Intervention.	Non-blinded, randomized controlled trial conducted across six European countries comparing IPS with traditional vocational services.	IPS was twice as effective as the vocational services in the primary outcome of returning to employment (54.5% vs. 27.6%).

London (UK),
Ulm-Guenzburg
(Germany),
Rimini (Italy),
Zurich
(Switzerland),
Groningen (the
Netherlands) and
Sofia (Bulgaria).

Busch, H., Bodin, L., Bergström, G., & Jensen, I. B. (2011). Patterns of sickness absence a decade after pain-related multidisciplinary rehabilitation. *PAIN*, 152(8), 1727-1733. (Sweden)

214 people with continuous sickness absence from work for 1 to 6 months due to nonspecific spinal pain, recruited from a major insurance system in Sweden.

Three interventions were compared with control group (TAU). The three treatment groups were: physiotherapy, cognitive behavioral therapy, and vocational multidisciplinary rehabilitation.

A blinded randomized controlled multicenter trial. This was a 10-year follow-up on medical needs and sick days.

The vocational multidisciplinary rehabilitation group experienced significantly fewer days of sick leave per year than the control or the other intervention groups. The economic analysis showed significant cost savings for the multidisciplinary group compared to other groups as well.

Carrougher, G. J., Brych, S. B., Pham, T. N., Mandell, S. P., & Gibran, N. S. (2017). An intervention bundle to facilitate return to work for burn-injured workers: report from a burn model system investigation. *Journal of Burn*

338 individuals who sustained an work-related burn injury, received care at a regional burn center, and were evaluated by a burn center VR counselor during

The interventions included patient/family education, employer contact and education by the vocational rehabilitation (VR) counselor, physician recommendations for work accommodations,

Pre-post (single group).

The cohort had a 93.5% successful return to work. Gender and age appeared to be significant predictors of RTW within this cohort.

<p><i>Care & Research</i>, 38(1), e70-e78. (US)</p>	<p>outpatient recovery.</p>	<p>and Activity Prescription Forms (APFs). Multidisciplinary team involving the patient, employer, Workers' compensation, and the burn clinic staff.</p>		
<p>Catty, J., Lissouba, P., White, S., Becker, T., Drake, R. E., Fioritti, A., ... & Van Busschbach, J. (2008). Predictors of employment for people with severe mental illness: results of an international six-centre randomised controlled trial. <i>The British Journal of Psychiatry</i>, 192(3), 224-231. (Europe)</p>	<p>312 individuals with severe mental illness randomly allocated to six sites in Europe, selected for their different economic and social conditions</p>	<p>IPS intervention</p>	<p>Non-blinded, randomized controlled trial conducted across six European countries comparing IPS with traditional vocational services. This study reports individual predictors associated with greater employment outcomes.</p>	<p>Having a previous work history, fewer met social needs, and better relationships with their VR counselors were more likely to obtain employment and have a longer tenure. Remission and swifter service uptake were associated with working more. Fidelity to IPS was associated with greater effectiveness.</p>
<p>Chandrashekar, R., & Benshoff, J. J. (2007). Increasing quality of life and awareness of deficits in persons with traumatic brain injury: A pilot study. <i>Journal of Rehabilitation</i>, 73(2), 50-56. (US)</p>	<p>36 individuals with TBI, receiving comprehensive rehabilitation services at one of four outpatient</p>	<p>The goals of the Quality of Life and Awareness Training (QLAT) were to increase self-esteem, belongingness, safety and perceptions of the physiological needs, and</p>	<p>Pre-post (multiple groups).</p>	<p>Perception of physiological needs was higher in the treatment group, but no other measure of quality of life or awareness was</p>

	<p>treatment facilities. Seventeen participants participated in the Quality of Life and Awareness Training (QLAT) and 19 participants did not participate in the QLAT.</p>	<p>perceptions of self-actualization. Also, training goals included realization of difficulties in memory, concentration, attention, relationships, communication, emotional changes, motivation changes, and difficulties in leisure activities after traumatic brain injury.</p>		<p>significantly different from the control group.</p>
<p>Chang, Y. J., Chen, S. F., & Chuang, A. F. (2011). A gesture recognition system to transition autonomously through vocational tasks for individuals with cognitive impairments. <i>Research in Developmental Disabilities, 32</i>(6), 2064-2068. (NS)</p>	<p>2 individuals recommended by job coaches from a rehabilitation institute- a person with dementia and another with schizophrenia and brain injury.</p>	<p>Intervention used a Kinect System that prompted participants in tasks for making five different types of pizza. The intervention combined prompts that were called the Kinempt system. The baseline was in person prompts and gestures where needed.</p>	<p>ABAB experimental design where A represents the baseline and B the intervention.</p>	<p>Significant improvements occurred in both of the intervention phases for both participants.</p>
<p>Chang, Y. J., Chen, S. F., & Lu, Z. Z. (2011). An accelerometer-based handheld system to reduce breaks in performance of young</p>	<p>2 individuals recommended by job coaches from a rehabilitation</p>	<p>Intervention used an accelerometer System that prompted participants in periods of</p>	<p>ABAB experimental design where A represents the</p>	<p>Significant reduction in breaks occurred in both of the intervention phases for both participants.</p>

adults with cognitive impairments. *Research in Developmental Disabilities*, 32(6), 2530-2534. (NS)

institute- a person with dementia and another with schizophrenia and brain injury.

inactivity. The intervention combined prompts that were called the Kinempt system. The baseline was in person prompts and gestures where needed.

baseline and B the intervention.

Chang, Y. J., Kang, Y. S., & Liu, F. L. (2014). A computer-based interactive game to train persons with cognitive impairments to perform recycling tasks independently. *Research in Developmental Disabilities*, 35(12), 3672-3677. (Taiwan)

3 individuals with cognitive impairments recommended by job coaches to participate in a gaming intervention at a sheltered workshop.

A computer-based interactive game was used to train individuals with cognitive disabilities to sort recycling appropriately.

A multiple baseline design was used for this single case study.

Significant improvement in task completion and no significant decline in ability 5 days later.

Ciechanowski, P., Chaytor, N., Miller, J., Fraser, R., Russo, J., Unutzer, J., & Gilliam, F. (2010). PEARLS depression treatment for individuals with epilepsy: a randomized controlled trial. *Epilepsy & Behavior*, 19(3), 225-231. (US)

80 individuals with epilepsy and clinical depression were randomly assigned to the PEARLS intervention (N = 40) or usual care (N = 40).

PEARLS, a home-based program for managing depression in adult individuals with epilepsy and clinically significant acute and chronic depression. Delivered by masters-level counselors, PEARLS is a collaborative care intervention consisting of problem solving treatment, behavioral

People receiving PEARLS had significantly reduced depression and suicidal ideation compared to the control group.

		activation, and psychiatric consultation.		
Clark, K. A. (2018). <i>The Generalized Effects of Upgrade Your Performance on Employment Soft Skills of Students with Intellectual and Developmental Disabilities: A Study of Generalization</i> (Doctoral dissertation, The University of North Carolina at Charlotte).	Two young adults with IDD working at community job sites on a local campus.	UPGRADE Your Performance instruction is a multicomponent intervention that includes self-monitoring, goal setting, self-graphing, and technology-aided instruction.	Multiple Baseline Across Behaviors single case design.	Two targeted soft skills were improved, and three non-targeted soft skills were improved during the intervention.
Connor, A. (2017). <i>Beyond Skills to Pay the Bills: Effects of a Vocational Social Skills Intervention on Psychosocial Functioning Among Young Adults with Autism</i> . Michigan State University. (US)	17 young adults with High Functioning Autism Spectrum Disorder and without intellectual disability.	Workplace social skills training. Based on the Skills to Pay the Bills framework, each lesson was customized for the ASD population, and new content was developed based on multidisciplinary team collaboration, the research literature, and other available and relevant resources.	Pre-post (single group)	On average, participants made statistically significant and clinically meaningful improvements in social cognition, empathic and social self-efficacy, and anxiety after completing the eight-week intervention.
Croke, E. E., & Thompson, A. B. (2011). Person centered planning in a transition program for Bronx youth with disabilities. <i>Children and Youth Services</i>	403 transition-age youth with disabilities receiving SSI.	The intervention consisted of Benefits planning and person-centered planning as well	Pre-post (single group)	Improved employment outcomes were noted as resulting from participants engaging in at

Review, 33(6), 810-819. (US)

as a summer youth employment training.

least one session of person-centered planning.

Crowe, T., Jani, S., Jani, S., Jani, N., & Jani, R. (2016). A pilot program in rural telepsychiatry for deaf and hard of hearing populations. *Heliyon*, 2(3), e00077. (US)

24 Deaf individuals who experienced barriers to psychiatry services.

Face to face and telepsychiatry was compared. Sessions were with a therapist fluent in American Sign Language (tele) or a qualified interpreter (face to face).

Pre-post (multiple groups)

Analysis of the data revealed no significant difference in coping abilities and psychiatric symptoms between those receiving face-to-face psychotherapy and those receiving telepsychiatry. Participants randomized to IPS were significantly more likely than those in the transitional work group to achieve steady employment and earn more income from competitive jobs during the 18-month follow-up (38.7% compared to 23.3%).

Davis, L. L., Kyriakides, T. C., Suris, A. M., Ottomanelli, L. A., Mueller, L., Parker, P. E., ... & Drake, R. E. (2018). Effect of evidence-based supported employment vs transitional work on achieving steady work among veterans with posttraumatic stress disorder: a randomized clinical trial. *JAMA Psychiatry*, 75(4), 316-324. (US)

541 unemployed veterans with PTSD currently receiving services from the VA

Study compared IPS vs. Transitional Work.

RCT

Davis, L. W., Lysaker, P. H., Kristeller, J. L., Salyers, M. P., Kovach, A. C., & Woller, S. (2015). Effect of mindfulness on vocational rehabilitation outcomes in stable phase schizophrenia. *Psychological Services*, 12(3), 303-312. (US)

34 individuals with schizophrenia who were engaged in outpatient services were enrolled into a VR program

Mindfulness Intervention for Rehabilitation and Recovery in Schizophrenia (MIRRORS). MIRRORS is modeled after Kabat-Zinn's mindfulness program and consists of group sessions over a standard 8-week

Randomized controlled feasibility study comparing MIRRORS with intensive support.

Treatment group worked significantly more hours and performed significantly better. Higher level of overall work performance in treatment (MIRRORS) group.

curriculum with a focus on stress related to work and schizophrenia

De Jong, S., Renard, S. B., Van Donkersgoed, R. J. M., Van der Gaag, M., Wunderink, L., Pijnenborg, G. H. M., & Lysaker, P. H. (2014). The influence of adjunctive treatment and metacognitive deficits in schizophrenia on the experience of work. *Schizophrenia Research, 157*(1-3), 107-111. (US)

100 individuals with schizophrenia or schizoaffective disorder were recruited from outpatient VA center and a community mental health center.

CBT group intervention focused on helping participants recognize basic cognitive processes and challenge dysfunctional beliefs, with a focus on work-related beliefs.

RCT comparing CBT group with standard support group therapy.

There was no main effect of treatment for work satisfaction or metacognitive capacity. However, an interaction effect was detected, higher metacognitive capacity (due to CBT) predicted higher job satisfaction.

Deal, J. A., Albert, M. S., Arnold, M., Bangdiwala, S. I., Chisolm, T., Davis, S., ... & Mosley, T. (2017). A randomized feasibility pilot trial of hearing treatment for reducing cognitive decline: Results from the Aging and Cognitive Health Evaluation in Elders Pilot Study. *Alzheimer's & Dementia: Translational Research & Clinical Interventions, 3*(3), 410-415. (US)

40-person pilot study of individuals 70-84 years with untreated bilateral hearing loss.

The study compared a hearing intervention with a successful aging intervention. The hearing intervention (experimental) included meetings with an audiologist, assistive technology devices for hearing, bilateral hearing aids, and rehabilitation counseling to manage expectations and optimize use in real world settings. The aging (control) intervention included meetings with a

RCT comparing best practices hearing to successful aging intervention including feasibility assessment.

The hearing intervention group demonstrated improvement in perceived handicap, loneliness, and social network diversity. Memory was unchanged or improved for the hearing intervention group, and unchanged or diminished in the control group at 6 months.

		nurse to discuss topics relevant to chronic health and disability prevention.		
Dicianno, B. E., Lovelace, J., Peele, P., Fassinger, C., Houck, P., Bursic, A., & Boninger, M. L. (2016). Effectiveness of a wellness program for individuals with spina bifida and spinal cord injury within an integrated delivery system. <i>Archives of Physical Medicine and Rehabilitation</i> , 97(11), 1969-1978. (US)	65 individuals with spina bifida and spinal cord injury recruited from an outpatient clinic.	Evidence-based wellness program consisting of care coordination from a mobile nurse, patient education, and patient incentives.	Pre-post (single group)	Participation in an evidence-based wellness program was associated with improved health and experience of care, including physical functioning, mood, quality of life, and perception of patient-centered care.
Dorstyn, D., Roberts, R., Murphy, G., Kneebone, I., Migliorini, C., Craig, A., ... & Field, D. (2017). Piloting an email-based resource package for job seekers with multiple sclerosis. <i>Disability and Rehabilitation</i> , 39(9), 867-873. (Australia)	18 individuals with MS recruited from advocacy agencies in Australia. Participants were either new job seekers or currently employed but seeking alternative work.	The Work and MS package that consisted of six learning modules focused on employment and topics relevant to individuals with MS.	Pre-post (single group)	Significant and positive changes were reported for vocational self-efficacy, identity, and optimism. Satisfaction with the content and delivery of the email-based intervention was also noted.
Dorstyn, D., Roberts, R., Murphy, G., Kneebone, I., Craig, A., & Migliorini, C. (2018). Online Resource to Promote Vocational	95 individuals with relapsing-remitting or progressive MS	The Work and MS package that consisted of six learning modules focused on employment	RCT with waitlist control group.	Participants who accessed the Work and MS module reported improved confidence in their career

<p>Interests Among Job Seekers with Multiple Sclerosis: A Randomized Controlled Trial in Australia. <i>Archives of Physical Medicine and Rehabilitation</i>, 99(2), 272-280. (Australia)</p>	<p>were randomly assigned to treatment or waitlist control. Participants were either new job seekers or currently employed but seeking alternative work.</p>	<p>and topics relevant to individuals with MS.</p>	<p>goals. There was no effect on job self-efficacy.</p>
<p>Dotson, W. H., Richman, D. M., Abby, L., Thompson, S., & Plotner, A. (2013). Teaching skills related to self-employment to adults with developmental disabilities: An analog analysis. <i>Research in Developmental Disabilities</i>, 34(8), 2336-2350. (US)</p>	<p>Eight students on the Autism Spectrum were recruited from a Transition Academy at a university in Texas.</p>	<p>The intervention consisted of teaching social skills related to self-employment in three conditions: (1) an independent, unprompted probe condition, (2) a natural environment condition with participants working as pairs to complete a shift, and (3) an alone natural environment where participants performed a shift independently.</p>	<p>single case design</p> <p>The teaching was successful in teaching three broad classes of skills related to self-employment, which generalized to the natural environment. Additionally, tasks were completed with a high degree of accuracy.</p>
<p>Drebing, C. E., Van Ormer, E. A., Mueller, L., Hebert, M., Penk, W. E., Petry, N. M., ... & Rounsaville, B. (2007). Adding contingency management</p>	<p>100 veterans with comorbid psychiatric disorders with services from a</p>	<p>Compared a Contingency Management (CM) intervention plus VR to VR-only. The CM group received incentives for</p>	<p>Random-assignment trial evaluating CM intervention with</p> <p>Abstinence rates were significantly improved in the VR + CM group at 16 weeks but not in subsequent follow-ups.</p>

intervention to vocational rehabilitation: Outcomes for dually diagnosed veterans. <i>Journal of Rehabilitation Research & Development</i> , 44, 851-866. (US)	VA Medical Center	taking steps towards obtaining and maintaining competitive employment and for abstinence from substance use.	VR compared with VR-only.	No relationship was found between relapse and employment.
Driver, S., & Ede, A. (2009). Impact of physical activity on mood after TBI. <i>Brain Injury</i> , 23(3), 203-212. (US)	16 individuals with TBI living in the community	Physical activity intervention consisting of an 8-week aquatic program (24 sessions), and the control group completed VR for the same number of weeks and sessions.	RCT evaluating physical activity vs. control condition (VR)	Significant differences and large effect sizes observed for changes in tension, anger, depression, vigor, fatigue, and confusion. No differences found in the control group across all variables.
Eack, S. M., Greenwald, D. P., Hogarty, S. S., & Keshavan, M. S. (2010). One-year durability of the effects of cognitive enhancement therapy on functional outcome in early schizophrenia. <i>Schizophrenia Research</i> , 120(1-3), 210-216. (US)	58 patients with schizophrenia from both inpatient and outpatient psychiatric clinics	Cognitive Enhancement Therapy group received computer-based training in attention, memory, and problem-solving; integrated with social-cognitive group therapy sessions.	RCT comparing Cognitive Enhancement Therapy to Enriched Supportive Therapy (control condition).	Functional outcomes resulting from CET were largely maintained at 1-year post treatment, and that those receiving CET continued to demonstrate significant differential functional benefits compared to those receiving EST.
Eack, S. M., Hogarty, S. S., Greenwald, D. P., Litschge, M. Y., McKnight, S. A., Bangalore, S. S., ... & Cornelius, J. R. (2015). Cognitive Enhancement Therapy in substance misusing	31 individuals with schizophrenia receiving outpatient mental health services.	Cognitive Enhancement Therapy integrates computer-based training in attention, problem-solving, and memory with structured social-	RCT – feasibility trial.	Results indicate high degrees of satisfaction with CET but challenges with recruitment and retention of substance misusing individuals. ITT

schizophrenia: Results of an 18-month feasibility trial. *Schizophrenia Research*, 161(2-3), 478-483. (US)

cognitive groups that target social milestones. Additional stress management principles (Personal Therapy) were included for the substance misuse component.

showed large improvements in neurocognition, social cognition, and social adjustment with CET.

Eilenberg, T., Frostholm, L., Schröder, A., Jensen, J. S., & Fink, P. (2015). Long-term consequences of severe health anxiety on sick leave in treated and untreated patients: Analysis alongside a randomised controlled trial. *Journal of Anxiety Disorders*, 32, 95-102. (Denmark)

126 individuals with severe health anxiety, divided into treatment (n=63) and waitlist control groups (n=63). Also compared to a matched population sample (n = 12,600).

Acceptance and Commitment Therapy group received 10 group sessions of manualized psychotherapy. Waitlist patients continued care with their primary care doctor during 10-month wait period, after which they could begin ACT treatment.

Randomized Controlled Trial. ACT vs. waitlist.

Individuals with health anxiety showed a greater time on sick benefits than the matched population sample, and ACT had no benefit over waitlist at the end of one year in use of sick benefits.

Evensen, S., Ueland, T., Lystad, J. U., Bull, H., Klungsøyr, O., Martinsen, E. W., & Falkum, E. (2017). Employment outcome and predictors of competitive employment at 2-year follow-up of a vocational rehabilitation programme for individuals with schizophrenia in a high-income welfare society. *Nordic Journal of Psychiatry*, 71(3), 180-187. (Norway)

148 individuals with schizophrenia from outpatient mental health clinics.

Participants were offered 10-months of VR with traditional services but also with sustained support, psychoeducation, and either Cognitive Remediation (CR) or Cognitive Behavioral Therapy (CBT) carried out by employment specialists.

Non-randomized, cohort design with VR, VR + CR, and VR + CBT.

No differences in employment outcomes between treatment groups.

<p>Falkum, E., Klungsøyr, O., Lystad, J. U., Bull, H. C., Evensen, S., Martinsen, E. W., ... & Ueland, T. (2017). Vocational rehabilitation for adults with psychotic disorders in a Scandinavian welfare society. <i>BMC Psychiatry</i>, 17(1), 24. (Norway)</p>	<p>148 individuals with schizophrenia from outpatient mental health clinics.</p>	<p>Participants in the treatment group (JUMP) were given traditional VR services plus either Cognitive Behavioral Therapy (CBT) or Cognitive Remediation (CR) for 2-hour individual sessions per week for 10-months</p>	<p>Randomized trial of VR + CBT, VR + CR (Cog remediation), and treatment as usual.</p>	<p>In the treatment group, vocational activity increased from 17% to 77%. Of these, 8% had competitive employment, 36% had placements in ordinary workplaces with social security benefits as their income, and 33% had sheltered work. Significant differences between CBT and CR groups were not seen.</p>
<p>Ferdinandi, A. D., & Bethea, J. S. (2006). Counselor active rehabilitation service and the reduction of hopelessness in individuals with substance abuse disorders. <i>Journal of Teaching in the Addictions</i>, 5(2), 81-96. (US)</p>	<p>50 individuals with substance use disorders attending a community-based substance abuse treatment center.</p>	<p>Comparison of CARS (treatment) vs. traditional rehabilitation counseling in reducing hopelessness among individuals with substance abuse disorder. CARS group, counselors used deliberate positive terminology and took a hands-on approach in assisting in role attainment.</p>	<p>RCT</p>	<p>The CARS group demonstrated a significant reduction in hopelessness.</p>
<p>Ferdinandi, A. D., & Eschenauer, R. (2008). Counselor Active Rehabilitation Service and the Reduction of Hopelessness in Individuals with Dual Diagnosis</p>	<p>50 people with dual diagnoses attending a community-based</p>	<p>Comparison of CARS (treatment) vs. traditional rehabilitation counseling in reducing hopelessness among individuals with</p>	<p>RCT</p>	<p>The CARS group demonstrated a significant reduction in hopelessness.</p>

Disorder. <i>Journal of Teaching in the Addictions</i> , 7(2), 133-144. (US)	substance abuse treatment center.	substance abuse disorder. CARS group, counselors used deliberate positive terminology and took a hands-on approach in assisting in role attainment.		
Ferdinandi, A. D., & Li, M. H. (2007). Counseling persons with comorbid disorders: a quantitative comparison of counselor active rehabilitation service and standard rehabilitation counseling approaches. <i>The Journal of Humanistic Counseling, Education and Development</i> , 46(2), 228-241. (US)	36 individuals from a community-based substance abuse treatment center who had concurrent SUD and MH diagnosis	The CARS model is a humanistic approach in which the counselor uses inclusive and esteem-lifting language combined with a hands-on approach to assist clients in overcoming barriers to role attainment.	Randomized comparison of CARS treatment group vs. standard rehabilitation counseling	Results indicate that the CARS treatment group were significantly more able to attain and sustain a desired life role.
Fetsch, R. J., Jackman, D. M., & Collins, C. L. (2018). Assessing changes in quality of life and independent living and working levels among AgrAbility farmers and ranchers with disabilities. <i>Disability and Health Journal</i> , 11(2), 230-236. (US)	191 farmers and ranchers with disabilities from 10 states.	AgrAbility conducted on-site and face-to-face evaluations about needs and accommodations on farms and ranches.	Pre-post (single group)	Participants experienced significant improvements in Quality of Life and Independent Living and Working measures.
Fetsch, R. J., & Turk, P. (2018). A quantitative assessment of the effectiveness of USDA's AgrAbility project. <i>Disability and</i>	225 ranchers and farmers from 12 states with various disabilities and a	The AgrAbility intervention included one or more on-site, face-to-face visits in the workplace and home to	Pre-post (multiple groups)	ArgAbility (treatment) group reported statistically significant pre- postsurvey

<p><i>Health Journal</i>, 11(2), 249-255. (US)</p>	<p>comparison group of 100 ranchers and farmers who received no intervention.</p>	<p>address client's and family's goals and needs. The control group did not receive any on-site visits or AgrAbility services.</p>	<p>improvements in Quality of Life.</p>	
<p>Fjorback, L. O., Carstensen, T., Arendt, M., Ørnbøl, E., Walach, H., Rehfeld, E., & Fink, P. (2013). Mindfulness therapy for somatization disorder and functional somatic syndromes: analysis of economic consequences alongside a randomized trial. <i>Journal of Psychosomatic Research</i>, 74(1), 41-48. (Denmark)</p>	<p>120 participants with mental illness recruited from outpatient primary care physicians and hospital wards.</p>	<p>Mindfulness and stress reduction intervention (MBSR) to improve physical health among individuals with somatic syndromes.</p>	<p>RCT</p>	<p>No difference between treatment and control groups in reports of physical health or health-related quality of life at 15-months. Demonstrated feasibility and efficacy of MBSR treatment.</p>
<p>Flannery, K. B., Benz, M. R., Yovanoff, P., Kato, M. M., & Lindstrom, L. (2011). Predicting employment outcomes for consumers in community college short-term training programs. <i>Rehabilitation Counseling Bulletin</i>, 54(2), 106-117. (US)</p>	<p>465 students with a disability enrolled in community college.</p>	<p>Career Workforce Skills Training in community colleges for individuals with disabilities to provide opportunities for individuals with disabilities to learn marketable job skills</p>	<p>Pre-post (single group)</p>	<p>Females, older participants, and those who received financial support were most likely to complete certificate, be employed at exit, and maintain employment for 90 days.</p>
<p>Flannery, K. B., Yovanoff, P., Benz, M. R., & Kato, M. M. (2008). Improving employment outcomes of individuals with disabilities through short-term postsecondary training. <i>Career</i></p>	<p>111 individuals with disabilities.</p>	<p>Short-term skills training programs to afford individuals with disabilities to learn marketable skills when specific programs are not</p>	<p>Pre-post (single group)</p>	<p>Successful participants had higher wages and worked more hours per quarter as well as more quarters during the first year post exit. Predictors of positive results were</p>

Development for Exceptional Individuals, 31(1), 26-36. (US)

offered at local community colleges.

receipt of financial assistance, career services, and vocational coursework.

Fredrick, M. M., Mintz, J., Roberts, D. L., Maples, N. J., Sarkar, S., Li, X., & Velligan, D. I. (2015). Is cognitive adaptation training (CAT) compensatory, restorative, or both? *Schizophrenia Research, 166(1-3), 290-296. (US)*

120 individuals with schizophrenia

Cognitive Adaptation Training (CAT) is a comprehensive assessment of behavior, cognition, functional skills, and the home environment. Following assessment, therapists worked with patients on a weekly basis to establish environmental supports.

RCT comparing CAT to two other treatment conditions (generic environmental supports, treatment as usual).

CAT significantly improved functional outcome compared to other treatment groups. The authors concluded that improvement in cognition is not a necessary condition for improvement in functional outcome.

Gaudelus, B., Virgile, J., Geliot, S., Team, G. S., & Franck, N. (2016). Improving facial emotion recognition in schizophrenia: A controlled study comparing specific and attentional focused cognitive remediation. *Frontiers in Psychiatry, 7, 105. (France)*

40 individuals with schizophrenia receiving in or outpatient MH services

GAIA s-face (treatment arm) is an individual, computer assisted cognitive remediation therapy focusing on facial emotion recognition.

RCT

Both groups demonstrated a significant improvement in facial emotion recognition, but the treatment group had a significantly greater effect.

Gilliam, W. P., Craner, J. R., Cunningham, J. L., Evans, M. M., Luedtke, C. A., Morrison, E. J., ... Loukianova, L. L. (2018). Longitudinal treatment outcomes for an interdisciplinary pain rehabilitation program:

353 patients with chronic non-cancer pain (CNC) enrolled in the Mayo Clinic Pain

The Mayo Clinic PRC is an intensive, outpatient interdisciplinary rehabilitation program focusing on functional restoration. The program consists of 15

Pre-post (multiple groups)

Effects were significant for all outcomes in directions indicating improvement at discharge from the program and at 6 months, irrespective of opioid status. This

Comparisons of subjective and objective outcomes on the basis of opioid use status. *The Journal of Pain*, 19, 678–689. (US)

Rehabilitation Center (PRC).

consecutive 8-hour days consisting of group programming. Participants participate in daily physical and occupational therapy and CBT. There is physician and pharmacist supervised opioid tapering.

supports the assertion that PRC program leads to significant improvements in subjective as well as objective indices of function.

Granholm, E., McQuaid, J., Link, P., Fish, S., Patterson, T., & Jeste, D. (2008). Neuropsychological predictors of functional outcome in cognitive behavioral social skills training for older people with schizophrenia. *Schizophrenia Research*, 100(1), 133–143. (US)

65 patients with schizophrenia or schizoaffective disorder from outpatient treatment centers or residential settings.

Cognitive Behavioral Social Skills Training (CBSST) - a group intervention combining aspects of CBT and social skills training (SST) to enhance neuropsychological functioning. SST aspects of intervention included symptom management, communication, and problem solving. Cognitive therapy aspects included targeted negative beliefs about psychotic symptoms, functional performance, and negative self-efficacy beliefs that interfered with functioning.

RCT-secondary analysis

The study examined whether function at baseline was a moderator for treatment effects of the CBSST compared with TAU. Results indicated that the treatment group improved in functional (IL skills) and neuropsychological outcomes (only executive functioning based on the tables), and gains lasted through the 12 month follow up. No effect associated with baseline functioning was observed.

Grizzell, S., Smart, J., Lambert, M., & Fargo, J. (2016). The use of feedback in group counseling in a state vocational rehabilitation setting. *Journal of Applied Rehabilitation Counseling, 47*(4), 10–19. (US)

30 participants from five VR agencies.

Two conditions were tested- group counseling (TAU) compared with group counseling plus enhanced client feedback each week. Feedback graphs were shared with clients in the treatment condition including data from the instruments they completed weekly (mental health functioning, symptoms, social role performance, and interpersonal relationships) as well as comments from the lead counselor facilitating the group.

RCT

Clients in the treatment (feedback) had enhanced perceptions of employment progress, social role performance, and mental health outcomes.

Gross, D. P., Asante, A. K., Miciak, M., Battié, M. C., Carroll, L. J., Sun, A., ... Niemeläinen, R. (2014). Are performance-based functional assessments superior to semi-structured interviews for enhancing return-to-work outcomes? *Archives of Physical Medicine and Rehabilitation, 95*, 807-815.e1. (Canada)

203 participants with chronic musculoskeletal conditions who were currently employed, recruited from a rehabilitation facility.

Clinicians who were trained and experienced in performing Functional Capacity Evaluations (FCE) were randomized into 2 groups. One group included 14 clinicians who were trained to conduct a semi structured functional interview; the other group (control group) continued to use

Cluster RCT conducted with analysis at level of claimant.

All outcomes were similar between groups, and no statistically or clinically significant differences were observed.

<p>Gross, D. P., Park, J., Rayani, F., Norris, C. M., & Esmail, S. (2017). motivational interviewing improves sustainable return to work in injured workers after rehabilitation: A cluster randomized controlled trial. <i>Archives of Physical Medicine and Rehabilitation</i>, 98, 2355–2363. (Canada)</p>	<p>728 claimants undergoing rehabilitation for musculoskeletal conditions</p>	<p>standard FCE procedures.</p> <p>Motivational Interviewing is a goal-oriented, client-centered counseling approach that facilitates behavioral change through identifying and resolving ambivalence. Treating clinicians at the facility were randomized into 2 groups. One group included 6 clinicians who were trained to conduct MI interventions during rehabilitation, while the control group included 6 clinicians who continued standard procedures.</p>	<p>Cluster RCT conducted with analysis at level of claimant.</p>	<p>Unemployed claimants in the MI group received significantly more partial temporary disability benefits, which indicates return to modified work duties. Claimants in the control group had higher recurrence rates.</p>
<p>Gussenhoven, A. H. M., Anema, J. R., Witte, B. I., Goverts, S. T., & Kramer, S. E. (2017). The effectiveness of a vocational enablement protocol for employees with hearing difficulties: Results of a randomized controlled trial. <i>Trends in Hearing</i>, 21, 1-12.</p>	<p>115 employees experiencing hearing difficulties and restrictions at work due to their hearing loss.</p>	<p>The Vocational Enablement Protocol (VEP) is a comprehensive, multidisciplinary program of care that includes vocational and audiological components.</p>	<p>RCT</p>	<p>No significant difference over the complete follow-up period was found between the intervention and control group for need for recovery. However, self-acceptance increased significantly in the VEP group, compared with the controls.</p>

<p>Hagen, E. M., Ødelien, K. H., Lie, S. A., & Eriksen, H. R. (2010). Adding a physical exercise programme to brief intervention for low back pain patients did not increase return to work. <i>Scandinavian Journal of Public Health</i>, 38, 731–738. (Norway)</p>	<p>246 patients with non-specific low back pain.</p>	<p>Patients in the intervention group participated in a physical exercise program at the spine clinic. The aim of the therapeutic exercises was to re-educate the trunk muscle to its normal stabilizing role and to improve balance, muscle co-ordination, and proprioception.</p>	<p>RCT</p>	<p>During the 2-year follow-up, there were no significant differences between the groups on sick leave, pain, use of analgesics, psychological distress, coping strategies, fear-avoidance beliefs, self-reported disability, or walking distances. Both groups increased return to work, reported less pain and better function, and reduced fear-avoidance beliefs for physical activity during the follow-up period. Fear-avoidance beliefs for work were not changed.</p>
<p>Hammond, A., O'Brien, R., Woodbridge, S., Bradshaw, L., Prior, Y., Radford, K., ... Pulikottil-Jacob, R. (2017). Job retention vocational rehabilitation for employed people with inflammatory arthritis (WORK-IA): A feasibility randomized controlled trial. <i>BMC Musculoskeletal Disorders</i>, 18, 1–15. (UK)</p>	<p>55 individuals with inflammatory arthritis.</p>	<p>WORK-IA intervention: Rheumatology occupational therapists provided individualized VR on a one to one basis. VR included work assessment, activity diaries and action planning, and (as applicable) arthritis self-management in the workplace, ergonomics, fatigue and stress</p>	<p>RCT - Feasibility</p>	<p>The intervention group reported changes from baseline in work instability, work limitations, confidence in managing arthritis at work, physical function, pain, hand pain and perceived health status, corresponding to a medium effect. In comparison, there were smaller changes in scores</p>

		management, orthoses, employment rights and support services, assistive technology, work modifications, psychological and disclosure support, workplace visits and employer liaison.		for the control group, corresponding to either no or small effect sizes
Hara, K. W., Bjørngaard, J. H. akon, Brage, S., Borchgrevink, P. C., Halsteinli, V., Stiles, T. C., ... Woodhouse, A. (2018). Randomized controlled trial of adding telephone follow-up to an occupational rehabilitation program to increase work participation. <i>Journal of Occupational Rehabilitation</i> , 28, 265–278. (Norway)	213 individuals with musculoskeletal or other chronic pain disorders attending occupational rehabilitation programs.	Two different regimes of post-discharge RTW follow-up were compared: boosted RTW follow-up added to standard RTW follow-up (intervention group) versus standard RTW follow-up only (control group). Booster sessions (primarily by telephone or video calls) were to be continued according to the same basic principles and standard protocol for the full 6 months regardless of whether or not the participant had returned to work.	RCT	One year after discharge the intervention group had 87% increased odds of (re)entry to competitive work ≥ 1 day per week compared with the controls, with similar positive results for sensitivity analysis of participation half time.
Hellström, L., Madsen, T., Nordentoft, M., Bech, P., & Eplöv, L. F. (2017). Trajectories	283 participants with recently diagnosed mood	IPS	secondary analysis based on a	Four trajectory classes of RTW were identified; non-RTW [70%

<p>of return to work among people on sick leave with mood or anxiety disorders: secondary analysis from a randomized controlled trial. <i>Journal of Occupational Rehabilitation</i>, 28(4), 666-677. (Denmark)</p>	<p>or anxiety disorders.</p>		<p>randomized superiority trial.</p>	<p>(196/283)] (practically no return to work); delayed-RTW [19% (56/283)] (6 months delay before full RTW); rapid-unstable-RTW [7% (19/283)] (members rapidly returned to work, but only worked half the time); and the smallest class, rapid-RTW [4% (12/283)].</p>
<p>Heslin, M., Howard, L., Leese, M., McCrone, P., Rice, C., Jarrett, M., ... Thornicroft, G. (2011). Randomized controlled trial of supported employment in England: 2 year follow-up of the Supported Work and Needs (SWAN) study. <i>World Psychiatry: Official Journal of the World Psychiatric Association (WPA)</i>, 10, 132–137. (UK)</p>	<p>219 individuals with severe mental illness.</p>	<p>IPS</p>	<p>RCT</p>	<p>Relatively low rates of competitive employment were found in both the intervention group and the treatment as usual group, although significantly more patients obtained competitive employment in the treatment arm (22% vs. 11%, p=0.041). There were no significant differences in costs.</p>
<p>Hilton, G., Unsworth, C. A., Murphy, G. C., Browne, M., & Olver, J. (2017). Longitudinal employment outcomes of an early intervention vocational rehabilitation service for people admitted to rehabilitation with a</p>	<p>97 individuals with a newly sustained traumatic spinal cord injury.</p>	<p>Early intervention vocational rehabilitation (EIVR). The VR professional focused on enhancing the return to work (RTW) culture within the rehabilitation</p>	<p>Pre-post (single group)</p>	<p>Ninety-seven participants were recruited and 60 were available at the final time point where 33% had achieved an employment outcome.</p>

traumatic spinal cord injury.
Spinal Cord, 55, 743–752.

setting, to encourage early, positive expectations about work, and to provide vocational interventions to encourage and facilitate vocational pathways and employment outcomes. The VR professional was also responsible for providing education about EIVR to other members of the inpatient rehabilitation team.

Himle, J. A., Bybee, D., Steinberger, E., Laviolette, W. T., Weaver, A., Vlnka, S., ... O'Donnell, L. A. (2014). Work-related CBT versus vocational services as usual for unemployed persons with social anxiety disorder: A randomized controlled pilot trial. *Behaviour Research and Therapy*, 63, 169–176. (US)

58 individuals with social anxiety disorder, seeking work and receiving services from a vocational rehabilitation center.

Work related CBT, delivered in a vocational service setting by vocational service professionals, aims to reduce social anxiety and enable individuals to seek, obtain, and retain employment.

RCT (Pilot);
WCBT + TAU or
TAU only

Multilevel modeling revealed significantly greater reductions in social anxiety, general anxiety, depression, and functional impairment for WCBT compared to TAU. Coefficients for job search activity and self-efficacy indicated greater increases for WCBT.

Humm, L. B., Olsen, D., Be, M., Fleming, M., & Smith, M. (2014). Simulated job interview improves skills for adults with serious mental illnesses. *Studies in Health*

96 unemployed adults with ASD, schizophrenia, or PTSD.

Job Interview Training with Molly Porter was designed to teach, reinforce, and refresh job-interview skills to adults with mental illness

RCT

Researchers observed a significant treatment condition effect for the Molly group in terms of post-intervention role-play scores and self-

Technology and Informatics, 199, 50–54. (US)

who are actively seeking employment. Within the training system, the onscreen coach provides insight during the conversation, and a comprehensive after-action review provides learners with feedback on the entire interview.

confidence compared to the waitlist control group.

Inge, K. J., Graham, C. W., McLaughlin, J. W., Erickson, D., Wehman, P., & Seward, H. E. (2017). Evaluating the effectiveness of Facebook to impact the knowledge of evidence-based employment practices by individuals with traumatic brain injury: A knowledge translation random control study. *Work*, 58, 73–81. (US)

60 individuals with TBI recruited through clubhouse programs.

The treatment condition was a secret Facebook group with the comparison group receiving “e-news” email blasts. The “e-news” email blast was considered the “business as usual” approach to delivering information on employment evidence-based practices. The same evidence-based information formed the foundation for the posts that were made in the secret Facebook group. The information provided included information concerning state resources, assistive

Randomized pretest-posttest control group design.

Both groups recorded significant knowledge gains from baseline to post-test. No significant knowledge differences were found at postintervention between groups.

		technology, disclosure, and interviewing techniques.		
Ipsen, C., Ravesloot, C., Arnold, N., & Seekins, T. (2012). Working well with a disability: Health promotion as a means to employment. <i>Rehabilitation Psychology, 57</i> , 187–195. (US)	297 VR clients	The adapted Working Well program included 10 chapters focusing on life values, goal setting, problem solving, pathway planning, healthy reactions, advocacy, stress management, physical activity, nutrition, and maintenance.	RCT	There was a significant decrease in limitations due to secondary conditions over time in both groups, but more dramatic decreases in the treatment group. No differences were observed in employment or self-efficacy.
Ipsen, C., Ruggiero, C., Ricles, B., Campbell, D., & Arnold, N. (2014). Evaluation of an online health promotion program for vocational rehabilitation consumers. <i>Rehabilitation Psychology, 59</i> , 125–135. (US)	222 VR consumers	There were three conditions: 1) FACTSHEETS: The health promotion (HPE) factsheet intervention included a series of four factsheets emailed every 2 weeks to participants. The factsheet content replicated the HPE website self-management pages. 2) HPE: a tailored self-directed online health promotion program	RCT; three groups, FACTSHEETS, HPE; HPE + MI	the Factsheet, HPE, and HPE + MI participants all experienced significant reductions in secondary conditions, symptom days, and significant improvements in healthy lifestyle behaviors over the 6-month study period.

designed for widespread adoption at little cost. 3) HPE + MI: The HPE plus motivational interviewing (MI) intervention included two telephone-delivered MI sessions during the first month of the intervention to increase participant engagement in the HPE website.

Ipsen, C., Seekins, T., & Ravesloot, C. (2010). Building the case for delivering health promotion services within the vocational rehabilitation system. *Rehabilitation Counseling Bulletin, 53*, 67–77. (US)

162 VR clients with primary disability of physical or mobility impairment was compared with a sample of 188 individuals who had participated in a health promotion intervention.

Living Well, is a health promotion intervention, delivered over eight weekly 2-hour sessions. Each session followed a behavioral intervention framework to promote healthy behaviors through interactive lectures, in-class assignments, and group discussion.

Pre-post (multiple groups)

The VR group and Living Well groups reported similar health conditions and limitations at baseline. The VR group experienced no change in limitation from secondary conditions over time, indicating that their health was not improving in the absence of a health promotion intervention.

Jackson, Y., Kelland, J., Cosco, T. D., McNeil, D. C., & Reddon, J. R. (2009). Nonvocational outcomes of vocational rehabilitation: Reduction in health

37 individuals with mental illness (MI) participating in a vocational rehabilitation

Flavour Budzzz: The project involved the establishment of a social enterprise that provides a supportive employment environment for

Pre-post (single group)

During the intervention, individuals with an MI had significantly fewer emergency department visits, ambulatory care visits, and hospital

services utilization. <i>Work</i> , 33, 381–387. (Canada)	program using a social enterprise.	individuals with an MI as part of their vocational rehabilitation.		admissions, but no difference in hospital length of stay, compared to baseline.
Jakobsson, B., Ekholm, J., Bergroth, A., & Ekholm, K. S. (2010). Improved employment rates after multiprofessional cross-sector cooperation in vocational rehabilitation: A 6-year follow-up with comparison groups. <i>International Journal of Rehabilitation Research. Internationale Zeitschrift Fur Rehabilitationsforschung. Revue Internationale De Recherches De Readaptation</i> , 33, 72–80. (Sweden)	51 individuals who participated in a developmental project (restricted work capacity), due to a long period of unemployment and a matched comparison sample.	Systematic multi-professional cross-sector rehabilitation, using a multi-professional rehabilitation group to improve communication and collaboration to produce a more effective and longer-lasting rehabilitation outcome.	Secondary data analysis.	The majority (59%) of the study group was employed 3 years after the intervention compared with 39 and 41% in the two matched control groups.
Katz, N., Gilad Izhaky, S., Ziv, O., & Revach, A. (2013). “Coffee Stands”: A vocational rehabilitation project in the community for people coping with mental disorders. <i>Work</i> , 44, 481–490.	44 people with chronic mental illness involved in the coffee stand project.	The Coffee Stand Project is a supportive program where individuals with chronic mental illness run coffee stands and perform all of the job duties associated. Participants are trained in all aspects of the job and supervised by community mental health staff.	Pre-post test (single group)	Results indicated that the training was successful and that participants were able to maintain an average 3 hours of work daily, demonstrating an improvement in their perception of their ability to work. After 6 months, participants showed improvements in health related measures of QoL

<p>Keysor, J. J., LaValley, M. P., Brown, C., Felson, D. T., AlHeresh, R. A., Vaughan, M. W., ... Allaire, S. J. (2018). Efficacy of a work disability prevention program for people with rheumatic and musculoskeletal conditions: A single-blind parallel-arm randomized controlled trial. <i>Arthritis Care & Research</i>, 70, 1022–1029. (US)</p>	<p>287 employed individuals with a rheumatic or musculoskeletal condition with concern about staying employed were randomized into treatment (n= 143) and control (n= 144) groups.</p>	<p>Rehab counselors, OTs and PTs used the (Work Experience Survey) WES-RC to identify work barriers and strategize how to address and reduce these barriers. The control group received mailed resource materials.</p>	<p>RCT</p>	<p>and satisfaction, but not in self-esteem.</p>
<p>Kilian, R., Lauber, C., Kalkan, R., Dorn, W., Rössler, W., Wiersma, D., ... Becker, T. (2012). The relationships between employment, clinical status, and psychiatric hospitalisation in patients with schizophrenia receiving either IPS or a conventional vocational rehabilitation programme. <i>Social Psychiatry and Psychiatric Epidemiology</i>, 47, 1381–1389. (Europe)</p>	<p>312 individuals with schizophrenia receiving services at one of six centers across Europe.</p>	<p>IPS</p>	<p>RCT comparing IPS to traditional vocational training.</p>	<p>Individuals who received an IPS intervention spent more hours in competitive employment and spent fewer days in psychiatric hospitals than individuals who received conventional vocational training.</p>
<p>Killackey, E., Allott, K., Cotton, S. M., Jackson, H., Scutella, R., Tseng, Y., ... McGorry, P. D.</p>	<p>146 individuals attending first-</p>	<p>IPS</p>	<p>single-blind RCT comparing receiving high-</p>	<p>Only methodology was reported.</p>

(2013). A randomized controlled trial of vocational intervention for young people with first-episode psychosis: Method. *Early Intervention in Psychiatry*, 7, 329–337. (Australia)

episode psychosis (FEP) services.

quality FEP treatment as usual plus IPS (IPS + TAU) to a FEP treatment as usual (TAU) intervention alone.

Knapen, J., Myszta, A., & Moriën, Y. (2016). Integration of mental and psychomotor training in vocational rehabilitation for persons with mental illness improves employment. *International Journal of Psychosocial Rehabilitation*, 20, 1. (Belgium)

141 individuals with disabilities participating in a vocational training program.

The I Care program integrates the basic principles of the vocational rehabilitation, recovery oriented care, cognitive behavioral therapy, psychomotor therapy, and solution oriented therapy.

Pre-post (single group)

Immediately after the I Care program 8 of the clients (7.02%) found a suitable job. The remaining 106 clients followed after the I Care program received additional training, of which 49 (46.23%) were employed within the year. At study's end, 24 clients were in training. Thirty-three participants (23.40%) ended the training without any paid work.

Kool, J., Bachmann, S., Oesch, P., Knuesel, O., Ambergen, T., de Bie, R., & van den Brandt, P. (2007). Function-centered rehabilitation increases work days in patients with nonacute nonspecific low back pain: 1-year results from a randomized

174 adults with chronic pain and previous sick leave from work of 6 weeks or more in an inpatient

Function-centered treatment emphasized activity despite pain through school and work activities as well as physical training. The goal of the intervention is to increase work-related

RCT comparing function-centered treatment to pain centered treatment.

There was a significant benefit for the function-centered vs. the pain - centered treatment group in the number of work days over the course of 1 year. There were no significant differences in

controlled trial. *Archives of Physical Medicine and Rehabilitation*, 88, 1089–1094. (Switzerland)

rehabilitation center.

capacity and improving self-efficacy.

unemployment rates or number of patients receiving compensation for permanent disability.

Kukla, M., Bell, M. D., & Lysaker, P. H. (2018). A randomized controlled trial examining a cognitive behavioral therapy intervention enhanced with cognitive remediation to improve work and neurocognition outcomes among persons with schizophrenia spectrum disorders. *Schizophrenia Research*, 197, 400–406. (US)

75 adult outpatients with schizophrenia or schizoaffective disorder in a community mental health setting.

A CBT approach to vocational rehabilitation titled *The Indianapolis Vocational Intervention*, coupled with cognitive remediation to link cognitive skills derived from training to strategies for use in daily life.

Single blind, three-armed RCT (Neuroplasticity models) with CBT and cognitive remediation vs. CBT only vs. an active control consisting of a weekly vocational support group for improving weekly work hours, work performance, and work quality.

The CBT with cognitive remediation group worked significantly more hours per week across 6 months and had greater work quality and performance compared to the active control group. The CBT only group did not differ from the active control on any outcome variables.

Kurtz, M. M., Mueser, K. T., Thime, W. R., Corbera, S., & Wexler, B. E. (2015). Social skills training and computer-assisted cognitive remediation in schizophrenia. *Schizophrenia Research*, 162, 35–41. (US)

64 adult outpatients with schizophrenia in a community mental health setting.

A social skills training combined with cognitive remediation training to improve cognitive and social functioning.

Single blind RCT to compare social skills training and cognitive remediation with social skills training and computer skills training.

The cognitive remediation with social skills training group improved significantly more in attention, working memory, and empathy than the social skills and computer skills training group. No significant differences were found in social skills or quality of life.

<p>Lacaille, D., White, M. A., Rogers, P. A., Backman, C. L., Gignac, M. A. M., & Esdaile, J. M. (2008). A proof-of-concept study of the “Employment and Arthritis: Making It Work” program. <i>Arthritis and Rheumatism</i>, 59, 1647–1655. (Canada)</p>	<p>19 adults with inflammatory arthritis who received outpatient arthritis services or who attended an arthritis-related educational workshop.</p>	<p>The <i>Employment and Arthritis: Making it Work</i> intervention was used to test a self-management program aimed at preventing work disability and maintaining at-work productivity.</p>	<p>Pilot study with single group design to evaluate feasibility, acceptability, and initial effectiveness of intervention.</p>	<p>At 12-month follow-up, 80% reported increased confidence in requesting job accommodations.</p>
<p>Lifshitz, H., Klein, P. S., & Cohen, S. F. (2010). Effects of MISC intervention on cognition, autonomy, and behavioral functioning of adult consumers with severe intellectual disability. <i>Research in Developmental Disabilities</i>, 31, 881–894. (Israel)</p>	<p>32 adults with severe intellectual disabilities receiving services in a rehabilitation center.</p>	<p>The <i>Mediational Intervention for Sensitizing Caregivers</i> intervention was used to increase duration of work and positive behaviors among other factors.</p>	<p>Pilot study with single Randomized controlled trial vs. a control group</p>	<p>The Mediational Intervention for Sensitizing Caregivers intervention group experienced increased duration of work and positive behaviors compared with the control group.</p>
<p>Liu, H. H. N. (2012). <i>Policy and practice: An analysis of the implementation of supported employment in Nebraska</i> (Unpublished Doctoral Dissertation, University of Nebraska). The University of Nebraska, Lincoln, NE (US)</p>	<p>1,884 people with severe mental illness receiving community mental health services</p>	<p>Supported employment services modeled after IPS.</p>	<p>Pre-post research design</p>	<p>Employment outcomes were achieved for 25% - 28% of individuals receiving services during the 3 years measured.</p>
<p>Luecking, R. G., Fabian, E. S., Contreary, K., Honeycutt, T. C.,</p>	<p>377 Transition aged youth with</p>	<p>The <i>Maryland Seamless Transition Collaborative</i></p>	<p>Pre-post with comparison group</p>	<p>The MSTC participants achieved higher</p>

& Luecking, D. M. (2018). Vocational Rehabilitation Outcomes for Students Participating in a Model Transition Program. *Rehabilitation Counseling Bulletin, 61*, 154–163. (US)

disabilities received the intervention with 6,111 in the comparison group

(MSTC) consisted of discovery, individualized work experiences, individualized paid integrated employment, family supports, early VR case initiation, systems linkages and collaboration, and coordination with teachers and instructional staff.

employment rates than comparison group but worked fewer hours and earned less than the comparison group.

Lyon, M. E., Garvie, P. A., Briggs, L., He, J., Malow, R., D'Angelo, L. J., & McCarter, R. (2010). Is it safe? Talking to teens with HIV/AIDS about death and dying: A 3-month evaluation of Family Centered Advance Care (FACE) planning—anxiety, depression, quality of life. *HIV/AIDS, 2*, 27–37. (US)

76 adolescents with HIV/AIDS receiving outpatient clinic services

The *Family Centered Advance Care* (FACE) intervention consisted of three semi-structured family interview sessions with the aim of planning for future care needs while maintaining quality of life.

RCT with intervention vs. control group that received healthy living training.

Intervention group completed advance directives more than controls without increasing anxiety or depression.

Lysaker, P. H., Davis, L. W., Bryson, G. J., & Bell, M. D. (2009). Effects of cognitive behavioral therapy on work outcomes in vocational rehabilitation for participants with schizophrenia spectrum disorders. *Schizophrenia Research, 107*, 186–191. (US)

100 participants with schizophrenia or schizoaffective disorder

A CBT approach to vocational rehabilitation titled *The Indianapolis Vocational Intervention*.

RCT with intervention vs. support services

Intervention group worked more hours, worked more weeks, and had generally better work performance than the comparison group.

<p>Lystad, J. U., Falkum, E., Haaland, V. Ø., Bull, H., Evensen, S., McGurk, S. R., & Ueland, T. (2017). Cognitive remediation and occupational outcome in schizophrenia spectrum disorders: A 2-year follow-up study. <i>Schizophrenia Research, 185</i>, 122–129. (Norway)</p>	<p>131 participants with schizophrenia referred from psychiatric and vocational services.</p>	<p>Vocational rehabilitation services intervention titled the <i>Job Management Program (JUMP)</i> combined with cognitive remediation</p>	<p>RCT of the intervention plus CR vs. the intervention plus CBT</p>	<p>Both groups experienced similar increasing in working hours. Number of working hours predicted by change in working memory.</p>
<p>Lytsy, P., Carlsson, L., & Anderzén, I. (2017). Effectiveness of two vocational rehabilitation programmes in women with long-term sick leave due to pain syndrome or mental illness: 1-Year follow-up of a randomized controlled trial. <i>Journal of Rehabilitation Medicine, 49</i>, 170–177. (Sweden)</p>	<p>308 women in Sweden on long-term sick leave for pain syndrome and/or a psychiatric condition.</p>	<p>ACT treatment was implemented as well as <i>Multidisciplinary Assessments and Individual Rehabilitation Interventions (TEAM)</i> that consisted of psychologist, occupational therapist, and a social worker.</p>	<p>RCT comparing the two interventions and a control group</p>	<p>No different across groups in reimbursed days or return to health insurance in 12 months. The TEAM intervention group saw a significant increase in working hours and in work-related engagement.</p>
<p>Man, D. W. K., Law, K. M., & Chung, R. C. K. (2012). Cognitive training for Hong Kong Chinese with schizophrenia in vocational rehabilitation. <i>Hong Kong Medical Journal, 18 Suppl 6</i>, 18–22. (Hong Kong)</p>	<p>80 participants with schizophrenia</p>	<p>A computer-assisted, errorless-learning (CAEL) training program was used for enhancing mental health and vocational outcomes</p>	<p>RCT of the intervention vs. a conventional therapist-administered errorless-learning program and vs. a control group</p>	<p>The CAEL group had better self-efficacy (social skills and personal appearance) in work training and positive affect than the control group</p>
<p>McGurk, S. R., & Mueser, K. T. (2008). Response to cognitive rehabilitation in older versus</p>	<p>76 participants with severe mental illness</p>	<p>A vocational rehabilitation intervention integrated</p>	<p>RCT of the intervention vs.</p>	<p>The intervention group experienced improved cognitive functioning.</p>

younger persons with severe mental illness. <i>American Journal of Psychiatric Rehabilitation</i> , 11, 90–105. (US)	receiving either supported employment or traditional vocational rehabilitation	with cognitive rehabilitation services	vocational rehabilitation only	However, older adults showed fewer cognitive gains.
McGurk, S. R., Mueser, K. T., Xie, H., Feldman, K., Shaya, Y., Klein, L., & Wolfe, R. (2016). Cognitive remediation for vocational rehabilitation nonresponders. <i>Schizophrenia Research</i> , 175, 48–56. (US)	54 participants with severe mental illness enrolled in vocational rehabilitation but had not benefitted from vocational services in the past	<i>Enhanced Vocational Rehabilitation</i> intervention combined with cognitive remediation. Then enhancement of vocational rehabilitation came in the form of training on cognitive difficulties for vocational specialists	RCT of the intervention group vs. <i>Enhanced Vocational Rehabilitation</i> alone	The primary intervention resulted in greater improvement in cognitive functioning and more weeks of work activity.
Mervis, J. E., Fiszdon, J. M., Lysaker, P. H., Nienow, T. M., Mathews, L., Wardwell, P., ... Choi, J. (2017). Effects of the Indianapolis Vocational Intervention Program (IVIP) on defeatist beliefs, work motivation, and work outcomes in serious mental illness. <i>Schizophrenia Research</i> , 182, 129–134. (US)	64 participants with schizophrenia deemed unready for supported employment by community mental health clinics.	A CBT approach to vocational rehabilitation titled <i>The Indianapolis Vocational Intervention</i> .	RCT of the intervention group vs. a supported therapy control group	The primary intervention group experienced greater motivation for work at follow-up and greater supported employment retention rates
Mervis, J. E., Lysaker, P. H., Fiszdon, J. M., Bell, M. D., Chue, A. E., Pauls, C., ... Choi, J. (2016). Addressing defeatist beliefs in work rehabilitation.	54 participants with SMI deemed unready for supported employment by	A CBT approach to vocational rehabilitation titled <i>The Indianapolis Vocational Intervention</i> .	Pre-post research design	Decline in work-specific defeatist beliefs was associated

<i>Journal of Mental Health</i> , 25, 366–371. (US)	community mental health clinics.			with better social functioning, self-esteem, and work behaviors.
Metcalf, J. D., Riley, J., McGurk, S., Hale, T., Drake, R. E., & Bond, G. R. (2018). Comparing predictors of employment in Individual Placement and Support: A longitudinal analysis. <i>Psychiatry Research</i> , 264, 85–90. (US)	1,004 unemployed Social Security Disability Insurance beneficiaries with a primary psychiatric diagnosis of schizophrenia or mood disorder	IPS intervention	Comparative analysis using secondary data from a RCT	A recent work history, less time on Social Security rolls, greater cognitive functioning, and a lower local unemployment rate were associated with greater probability of employment.
Middleton, J. W., Johnston, D., Murphy, G., Ramakrishnan, K., Savage, N., Harper, R., ... Cameron, I. D. (2015). Early access to vocational rehabilitation for spinal cord injury inpatients. <i>Journal of Rehabilitation Medicine</i> , 47, 626–631. (Australia)	100 individuals with Spinal cord injury admitted to spinal units.	<i>Early Vocational Rehabilitation Program</i> (In-Voc) provided vocational consultation to people with spinal cord injury within 6 months of acquisition	Pre-post research design	At discharge, about a third of patients were working, a third were unemployed, 13% were students, and 17% continued in vocational rehabilitation
Minton, D., Elias, E., Rumrill, P., Hendricks, D. J., Jacobs, K., Leopold, A., ... DeLatte, C. (2017). Project Career: An individualized postsecondary	150 undergraduate students with a traumatic brain injury enrolled in	<i>Project Career</i> is an intervention that emphasizes matching the person with technology	Pre-post research design	A total of 63% participants reported improved life quality and 75% reported improved academic performance.

approach to promoting independence, functioning, and employment success among students with traumatic brain injuries. *Work*, 58, 35–43. (US)

a 2-year or 4-year program. needs and vocational counseling and services

Mueller, L. N. (2007). *Self-help in vocational rehabilitation: Impact of a job search workbook on employment, job search behavior, skill, and self-efficacy* (Unpublished Doctoral Dissertation, Fordham University). Fordham University, New York, New York. (US)

62 veterans with a psychiatric or substance use disorder from a compensated work therapy program who were seeking rapid job placement. The *Getting the Job You Really Want* workbook integrated with eight individual sessions of staff member assistance

RCT with the intervention vs. a workbook only group.

No overall difference was found between the workbook-only and the workbook-plus-sessions groups on the number of days in competitive employment.

Mueser, K. T., Glynn, S. M., Cather, C., Zarate, R., Fox, L., Feldman, J., ... Clark, R. E. (2009). Family intervention for co-occurring substance use and severe psychiatric disorders: Participant characteristics and correlates of initial engagement and more extended exposure in a randomized controlled trial. *Addictive Behaviors*, 34, 867–877. (US)

108 participants with a psychiatric condition and active substance abuse or dependence. Comprehensive, behaviorally based family intervention for dual disorders intervention (FIDD) compared with a shorter-term family psychoeducational program (FPE)

RCT

Characteristics of relatives of client were the strongest predictors for successful initial engagement in the interventions. Other predictors included less severe drug abuse and male client gender.

Mueser, K. T., McGurk, S. R., Xie, H., Bolton, E. E., Jankowski, M. K., Lu, W., ... Wolfe, R.

40 participants with a psychiatric condition and Individualized CBT focused on anxiety reduction, education

Pre-post assessment of a

Cognitive functioning was not related to participation in CBT or

(2018). Neuropsychological predictors of response to cognitive behavioral therapy for posttraumatic stress disorder in persons with severe mental illness. <i>Psychiatry Research</i> , 259, 110–116. (US)	active substance abuse or dependence.	about trauma, and cognitive restructuring	subsample from a previous RCT	completion of homework. Lower cognitive functioning predicted less learning of information about PTSD at post-treatment and follow-up, but not less clinical benefit from CBT in symptoms.
Nilsen, V., Bakke, P. S., Rohde, G., & Gallefoss, F. (2015). Is sense of coherence a predictor of lifestyle changes in subjects at risk for type 2 diabetes? <i>Public Health</i> , 129, 155–161. (Norway)	213 people at risk for type 2 diabetes with a mean body mass index of 37	A low-intensity lifestyle intervention program included individual counseling with emphasis on diet and exercise.	Logistic regression analysis to assess how sense of coherence influenced change	Sense of Coherence had a significant and positive relationship with lifestyle change in the intervention group.
Ntsiea, M. V., Van Aswegen, H., Lord, S., & Olorunju, S. S. (2015). The effect of a workplace intervention programme on return to work after stroke: A randomised controlled trial. <i>Clinical Rehabilitation</i> , 29, 663–673. (South Africa)	80 stroke survivors between the ages of 18 and 60 who were employed at time of their stroke.	The workplace intervention program was tailored to functional ability and workplace challenges of each stroke survivor. The intervention consisted of workability assessments and workplace visits.	RCT with the intervention vs. a control group receiving usual stroke care that took into consideration job requirements but without workplace intervention.	At follow up, 60% of intervention group returned to work compared to 20% control group. Those who returned to work has a better quality of life than those who did not.
Nygren, U., Markström, U., Svensson, B., Hansson, L., & Sandlund, M. (2011). Individual placement and support—A model to get employed for people with	65 individuals with identified mental illness (depression and anxiety disorders	IPS	Pre-post research design	At follow up, 25% were employed, 14% in education. Those in work showed reported improvement in

<p>mental illness—The first Swedish report of outcomes. <i>Scandinavian Journal of Caring Sciences</i>, 25, 591–598. (Sweden)</p>	<p>most common) recruited from two different social service organizations.</p>			<p>psychiatric symptoms and global functioning.</p>
<p>O'Brien, L. (2007). Pre-vocational group intervention program for building motivation in mature aged unemployed people with a disability. <i>Journal of Rehabilitation</i>, 73, 22–28. (Australia)</p>	<p>37 people with disabilities who were 50 years old or older and who were denied public vocational rehabilitation</p>	<p>Pilot program to deliver pre-vocational through 6-week groups. Sessions included work motivation, barriers employment, and identification of resources.</p>	<p>Pre-post research design</p>	<p>Of 37 participants, 37.5% actively became engaged in vocationally directed activity, and 27% commenced paid work.</p>
<p>O'Connor, M. K., Mueller, L., Kwon, E., Drebing, C. E., O'Connor, A. A., Semiatin, A., ... Daley, R. (2016). Enhanced vocational rehabilitation for veterans with mild traumatic brain injury and mental illness: Pilot study. <i>Journal of Rehabilitation Research & Development</i>, 53, 307–319. (US)</p>	<p>18 veterans with a history of brain injury and co-occurring mental illness accompanied by unemployment or underemployment who were enrolled and participating in vocational rehabilitation.</p>	<p>Cognitive rehabilitation intervention embedded in vocational rehabilitation services. 12-session program including strategies to manage cognitive difficulties and to recognize and control behavior in the workplace.</p>	<p>RCT feasibility study</p>	<p>Small to moderate increase in vocational outcomes was reported.</p>
<p>Oh, Y. A., Park, S. A., & Ahn, B. E. (2018). Assessment of the psychopathological effects of a horticultural therapy program in patients with schizophrenia. <i>Complementary Therapies in</i></p>	<p>28 individuals with schizophrenia recruited from mental health clinic and mental</p>	<p>Horticultural therapy program designed around various plant cultivating activities.</p>	<p>Pre-post design with control group for comparison</p>	<p>Treatment group significantly improved in terms of positive, negative, and general schizophrenia symptoms.</p>

<i>Medicine</i> , 36, 54–58. (South Korea)	health rehab centers			
Ojala, B., Nygård, C.-H., & Nikkari, S. T. (2016). Outpatient rehabilitation as an intervention to improve employees' physical capacity. <i>Work</i> , 55, 861–871. (Finland)	605 municipal employees at an occupational health unit.	Outpatient rehabilitation program where participants defined their own goals to improve work ability by the aid of a goal-oriented multi-professional team. Options included physical training, social interaction, problem solving skills, individual goal setting.	Pre-post design	Physical capacity of employees was improved in multiple areas including submaximal aerobic capacity and flexibility.
Ottomanelli, L., Barnett, S. D., & Goetz, L. L. (2014). Effectiveness of supported employment for veterans with spinal cord injury: 2-Year results. <i>Archives of Physical Medicine and Rehabilitation</i> , 95, 784–790. (US)	201 unemployed or underemployed veterans with spinal cord injury receiving services from Veterans Affairs Medical Centers	The Spinal Cord Injury Vocational Integration Program is a supported employment program following the principles of IPS	RCT of intervention vs. Treatment as usual	The intervention group was significantly more likely to achieve employment than the treatment as usual groups.
Ottomanelli, L., Goetz, L. L., Barnett, S. D., Njoh, E., Dixon, T. M., Holmes, S. A., ... White, K. T. (2017). Individual placement and support in spinal cord injury: A longitudinal observational study of employment outcomes. <i>Archives of Physical Medicine</i>	213 unemployed or underemployed veterans with spinal cord injury receiving services from Veterans	The Spinal Cord Injury Vocational Integration Program is a supported employment program following the principles of IPS	Longitudinal pre-post follow-up on a RCT of intervention vs. Treatment as usual	The intervention group who received IPS achieved an employment rate of 43.2%; for the subsample of veteran's without TBI the employment rate was 52.2%

and Rehabilitation, 98, 1567-1575. (US)

Affairs Medical Centers

Ottomanelli, L., Goetz, L. L., Suris, A., McGeough, C., Sinnott, P. L., Toscano, R., ... Thomas, F. P. (2012). Effectiveness of supported employment for veterans with spinal cord injuries: Results from a randomized multisite study. *Archives of Physical Medicine and Rehabilitation, 93, 740–747. (US)*

201 unemployed or underemployed veterans with spinal cord injury receiving services from Veterans Affairs Medical Centers

The Spinal Cord Injury Vocational Integration Program is a supported employment program following the principles of IPS

RCT of intervention vs. Treatment as usual

The intervention group was 2.5 to 11.4 times more likely than treatment as usual groups to obtain competitive employment.

Pálsdóttir, A. M., Grahn, P., & Persson, D. (2014). Changes in experienced value of everyday occupations after nature-based vocational rehabilitation. *Scandinavian Journal of Occupational Therapy, 21, 58–68. (Sweden)*

21 individuals with stress-related mental illness: adjustment disorder, reaction to stress, or depression without current substance abuse

Nature-based vocational rehabilitation performed in a health garden on a university campus. Group therapy was used as the basis, integrating occupational therapy, physiotherapy, psychotherapy, and horticultural therapy.

Pre-post design

Significant changes included higher perceived occupational values in daily life and reduced symptoms of severe stress.

Penk, W., Drebing, C. E., Rosenheck, R. A., Krebs, C., Van Ormer, A., & Mueller, L. (2010). Veterans Health Administration transitional work experience vs. job placement in veterans with co-morbid substance use and non-psychotic psychiatric disorders.

89 veterans with comorbid psychiatric and substance use disorders.

The transitional work experience (TWE) involves immediate placement in structures work settings, in the VA or private companies, and being compensated for the work. On- or off-site coaching is provided.

RCT of intervention vs. control group who received minimal job placement services from state-federal vocational

Early engagement in paid work activity was greater for those in the TWE intervention. However, there was no significant difference in weekly paid activity rates after week 32, as the engagement of

Psychiatric Rehabilitation Journal, 33, 297–307. (US)

Ongoing support is not provided after competitive job acquisition.

rehabilitation agencies.

TWE clients decreased to 30-40%.

Porter, S., & Bejerholm, U. (2018). The effect of individual enabling and support on empowerment and depression severity in persons with affective disorders: Outcome of a randomized control trial. *Nordic Journal of Psychiatry*, 72, 259–267. (Sweden)

61 outpatient mental health service patients with depressive disorder/bipolar disorder and without substance abuse disorder or physical/somatic illness that could participation.

Individual Enabling and Support (IES) model. IES is a place-then-train model building on personal recovery, offering resources and job placements based on preferences, predicated on 10 principles.

RCT of intervention vs. traditional vocational rehabilitation (train-then-place)

At 12-month follow-up, IES participants reported greater empowerment and less depression severity. The improved depression scores were maintained for the remaining 6 months of follow-up.

Powers, L. E., Geenen, S., Powers, J., Pommier-Satya, S., Turner, A., Dalton, L. D., ... Swank, P. (2012). My life: Effects of a longitudinal, randomized study of self-determination enhancement on the transition outcomes of youth in foster care and special education. *Children and Youth Services Review*, 34, 2179–2187. (US)

69 youth in foster care receiving Special Education services while under state guardianship and attending public school.

A self-determination enhancement model, TAKE CHARGE, involves a self-help guide for students, weekly individual coaching sessions, and quarterly workshops with successful foster care mentors.

RCT of intervention vs. the foster care independent living program

The intervention group completed high school at a greater rate, were employed, and carried out independent living activities at a notably higher rate than the control group. Self-determination was confirmed as a partial mediator of enhanced quality of life.

Pramuka, M., Hendrickson, R., Zinski, A., & Van Cott, A. C. (2007). A psychosocial self-

61 adults with epilepsy

The 6-week self-management curriculum titled Intervention for

RCT of intervention vs. treatment as usual

The intervention had little effect on improving overall quality of life, but

management program for epilepsy: A randomized pilot study in adults. *Epilepsy & Behavior*, 11, 533–545. (US)

Self-Management in Persons with Epilepsy included a mixture of psychoeducation, medical information, and advocacy topics framed in the self-management activities of self-evaluation, self-monitoring, stimulus control, and self-rewards delivered by a multidisciplinary team.

there was a significant improvement in the aspect of Role Limitations, which addressed difficulty completing daily tasks.

Quinn, J. J. (2013). *The impact of cognitive Behavior Techniques on the vocational identity of persons with disabilities receiving SSI/SSDI benefits* (Unpublished Doctoral Dissertation, University of Arkansas). The University of Arkansas, Fayetteville, Arkansas. (US)

40 adults with disabilities, enrolled in VR and who are SSI/SSDI recipients.

Cognitive behavioral therapy provided by a VR counselor. Each participant attended 8 one-hour sessions, where counselors implemented the following CBT techniques: In vivo desensitization, reinforcement, thought stopping, and guided imagery - all applied to vocational counseling situations.

Pre-post design

Gains were observed in self-efficacy and vocational identity over the three assessment points. No changes were observed in vocational satisfaction.

Radford, K., Phillips, J., Drummond, A., Sach, T., Walker, M., Tyerman, A., ... Jones, T. (2013). Return to work after

94 patients with TBI who were working at time of injury and who

A case coordination approach titled the TBI specialist VR intervention was used to

Pre-post design with a comparison group receiving treatment as usual

More people who received the TBI VR intervention returned to work at a greater rate at

<p>traumatic brain injury: Cohort comparison and economic evaluation. <i>Brain Injury</i>, 27, 507–520. (United Kingdom)</p>	<p>had the intention to resume working</p>	<p>facilitate return to work. Components included education and community reintegration training and employer supports</p>		<p>12-months follow-up; Those with moderate/severe TBI received the greatest benefits. There were no differences in secondary outcomes between the groups.</p>
<p>Radford, K., Sutton, C., Sach, T., Holmes, J., Watkins, C., Forshaw, D., ... Phillips, J. (2018). Early, specialist vocational rehabilitation to facilitate return to work after traumatic brain injury: The FRESH feasibility RCT. <i>Health Technology Assessment</i>, 22, 1–124. (United Kingdom)</p>	<p>78 patients of trauma centers with TBI who were working at time of injury and who had the intention to resume working</p>	<p>Early Specialist Traumatic Brain Injury Vocational Rehabilitation (ESTVR) is a work retention intervention that is individually tailored to address the impact of TBI on work roles and responsibilities, designed to help individuals find strategies to address problems and prevent job loss.</p>	<p>RCT of intervention vs. usual care</p>	<p>Return to work was found to be most closely associated with social participation and work self-efficacy. The intervention was deemed feasible.</p>
<p>Rangaswamy, T., Mangala, R., Mohan, G., Joseph, J., & John, S. (2012). Intervention for first episode psychosis in India – The SCARF experience. <i>Asian Journal of Psychiatry</i>, 5, 58–62. (India)</p>	<p>47 patients with first episode psychosis receiving services through the Schizophrenia Research Foundation</p>	<p>Intervention had medical and psychosocial components. Pharmacological management was coupled with psychosocial interventions to patient and caregiver in the form</p>	<p>Pre-post pilot study design</p>	<p>Early intervention is effective and more so if the duration of untreated psychosis period is shorter. Over half of the participants were reported as experiencing total remission following first episode.</p>

		of psychoeducation, some received cognitive retraining		
Rehwald, K., Rosholm, M., & Rouland, B. (2018). Labour market effects of activating sick-listed workers. <i>Labour Economics</i> , 53, 15–32. (Denmark)	Sick listed workers receiving services through Danish Job Centers	Intensive Activation Strategy that focused on swift engagement in services like vocational counseling and guidance, courses aimed at enhancing skills, internships, and on the job training); paramedical care (courses on handling one's situation, psychological consultation, nutrition counseling, and exercise, or graded return to work (return to work part time with salary difference made up by sick leave benefits).	RCT of intervention compared with treatment as usual.	The intervention group showed less favorable outcomes than the control group, with the treatment group spending less time in regular employment than the control group.
Riley, B. R. (2009). <i>A pilot project for first year community college students with disabilities enrolled in pre-college level courses: Supported higher education program</i> (Unpublished Doctoral Dissertation, Wilmington University).	23 community college students, starting in remedial courses, who were also VR clients	Educational workshops targeted educational supports and provided tutoring in math, English, reading, and writing, and also included workshops in study skills and other skills such as	Pre-post design with single group	In year 1 (pilot year), 16 of the 17 who completed the intervention were considered academically successful. In year 2 when the program expanded to three campuses instead of just one, 33 of the 46 who

Wilmington University,
Wilmington Manor, DE. (US)

organization, time
management, memory,
test taking, oral
presentation skills, stress
and anxiety relief, career
guidance, and specific
academic skills

completed the
intervention were
academically successful.

Rinaldi, M., Perkins, R., McNeil,
K., Hickman, N., & Singh, S. P.
(2010). The Individual Placement
and Support approach to
vocational rehabilitation for
young people with first episode
psychosis in the UK. *Journal of
Mental Health, 19*, 483–491.
(United Kingdom)

166 Young adults
and adults with a
first episode of
psychosis
participating in
Early
Intervention
Services

Early Intervention
Services protocols for
vocational services were
augmented with an IPS
approach adapted to
include supported
education. An
employment specialist
was added to the multi-
disciplinary team
providing clinical
services to address the
vocational needs of
clients.

Pre-post design
with single group

The intervention group
appears to have a positive
effect on employment or
education with 69%
employed at 6 months and
rising to 81% at 18
months. The employment
rate increased from 13%
at baseline to 48% at 18
months and was
maintained at 24 months.

Rosen, M. I., McMahon, T. J., &
Rosenheck, R. (2007). Does
assigning a representative payee
reduce substance abuse? *Drug
and Alcohol Dependence, 86*,
115–122. (US)

1,457 homeless
individuals with a
serious mental
illness who were
receiving SSI or
SSDI and
enrolled in
Assertive
Community
Treatment

Assignment of a
representative payee
through SSA

Pre-post design
with multiple
groups

Beneficiaries assigned a
payee in the last 9 months
of treatment used
significantly more
psychiatric services and a
broader array of services
than those not assigned a
payee. Increased service
use by participants with
payees was not associated

<p>Rosenheck, R., Mueser, K. T., Sint, K., Lin, H., Lynde, D. W., Glynn, S. M., ... Kane, J. M. (2017). Supported employment and education in comprehensive, integrated care for first episode psychosis: Effects on work, school, and disability income. <i>Schizophrenia Research</i>, 182, 120–128. (US)</p>	<p>404 first episode psychosis participants on antipsychotic medication less than 6 months</p>	<p>NAVIGATE is a comprehensive program for first episode psychosis consisting of: personalized medication management; family psychoeducation; individual, resilience-focused training in illness self-management; and supported employment and education (SEE). SEE services are consistent with the IPS model, except for not requiring the desire to work or attend school. This secondary analysis was to look at the impact of SEE on outcomes.</p>	<p>RCT of intervention vs. treatment as usual</p>	<p>with improved mental health symptomatology, housing, or substance use.</p> <p>NAVIGATE as associated with greater improvement in work and school participation and this effect appeared to be mediated in part by participation in SEE. There was no difference in earning or public support payments.</p>
<p>Ruggiero, C. N. (2013). <i>An effectiveness evaluation of motivational interviewing as an addition to an Internet-based health promotion program for vocational rehabilitation consumers</i> (Unpublished Doctoral</p>	<p>142 VR consumers in the state of Washington</p>	<p>The intervention involved three groups: internet-based Health Plans for Employment (HPE) intervention focused on health promotion and goal</p>	<p>RCT</p>	<p>No group effects or group × time interaction effects on targeted outcomes. The HPE and the HPE+MI interventions led to higher self-efficacy beliefs on</p>

Dissertation, The University of Montana). The University of Montana, Missoula, MT. (US)

Saha, S., Bejerholm, U., Gerdtham, U. G., & Jarl, J. (2018). Cost-effectiveness of supported employment adapted for people with affective disorders. *Nordic Journal of Psychiatry*, 72, 236–239. (Sweden)

Schuring, M., Burdorf, A., Voorham, A. J., der Weduwe, K., & Mackenbach, J. P. (2009). Effectiveness of a health promotion programme for long-term unemployed subjects with health problems: A randomised controlled trial. *Journal of Epidemiology & Community Health*, 63, 893-899. (Netherlands)

Seyer, F., Witt, J. A., Taube, J., & Helmstaedter, C. (2018). The efficacy of a short-term multidisciplinary epilepsy program. *Epilepsy & Behavior*, 86, 98–101. (Germany)

61 unemployed patients with affective disorders were recruited from four mental healthcare centers

921 people on social security benefits who attribute inability to find employment to chronic health problems; those deemed capable of employment were included

1,573 patients with epilepsy in an inpatient clinic

setting, HPE and motivational interviewing group, and a factsheet group.

The Individual Enabling and Support Model (IES) was a modification of IPS for people with affective disorders

The Work on Your Health program included two 3-hour physical activity sessions a week and one 3-hour behavioral education sessions.

A short-term, modular multidisciplinary intervention. Intervention activities were based on the needs of the patient and provided daily during hospitalization. Services included education on cognitive

RCT of the intervention vs. traditional vocational rehabilitation

RCT of intervention vs. treatment as usual

Pre-post design with a single group

balanced diet, stress management, sleep, and physical activity.

IES showed to be cost effective compared to traditional VR

The health promotion program did not show positive effects on perceived mental and physical health, self-esteem, mastery, or fear of movement. Values and attitudes toward paid employment, job search activities, and employment status were not affected.

After intervention, 50.3% of patients showed significant improvement in total score, with compliance, activity, and affect being the most responsive domains.

		functions, exercises for coordination, therapeutic counseling, education on seizure documentation and control, mindfulness, and advice in social law.		
Shih, Y. N., Chen, C. S., Chiang, H. Y., & Liu, C. H. (2015). Influence of background music on work attention in clients with chronic schizophrenia. <i>Work, 51</i> , 153–158. (Taiwan)	49 people with schizophrenia residing in a halfway house and attending a vocational rehabilitation program	The intervention involved three groups: environments with no music in the background, light classical, or popular music in the background	RCT	The introduction of background music tended to increase testing attention in persons with schizophrenia, with a statistically significant increase with the introduction of popular music.
Sibitz, I., Provaznikova, K., Lipp, M., Lakeman, R., & Amering, M. (2013). The impact of recovery-oriented day clinic treatment on internalized stigma: Preliminary report. <i>Psychiatry Research, 209</i> , 326–332. (Austria)	80 working age adults at a day clinic with schizophrenia spectrum disorder	Day clinic program incorporating multidisciplinary therapeutic interventions mostly offered in a group format, with individual therapy sessions.	Pre-post design with a waitlist control group	Patients in the day clinic treatment showed a reduction in internalized stigma, improvement in quality of life domain psychological health, and in overall psychopathology.
Sinnott, P. L., Joyce, V., Su, P., Ottomanelli, L., Goetz, L. L., & Wagner, T. H. (2014). Cost-effectiveness of supported employment for veterans with spinal cord injuries. <i>Archives of Physical Medicine and Rehabilitation, 95</i> , 1254–1261. (US)	157 Working age Veterans with SCI who were not currently employed in the community or who were employed	SE services were provided by VR counselors who were integrated into the interdisciplinary SCI health care team at the study sites.	Pre-post design with a single group	The Spinal Cord Injury Vocational Integration Program intervention was not cost-effective compared with usual care.

	at wages less than Social Security's definition of substantial gainful employment	Services were provided in outpatient clinics, in the community, and at potential and actual job sites.		
Siu, A. M. H., Chan, C. C. H., Poon, P. K. K., Chui, D. Y. Y., & Chan, S. C. C. (2007). Evaluation of the chronic disease self-management program in a Chinese population. <i>Patient Education and Counseling</i> , 65, 42–50. (Hong Kong)	148 adults with chronic disease who had not previously enrolled in health education or self-help in the past two years.	The Chronic Disease Self-Management Program is a 6-week (one session per week) intervention led by a professional and/or lay person with a chronic illness. In group settings, the content of the program addresses diet, exercise, medications, fitness, emotion management, problem-solving, and communication with health professionals with the aim of increasing self-management and quality of life.	RCT of the intervention vs a Tai-Chi control group	The intervention group demonstrated significantly higher self-efficacy in managing their illness, used more cognitive methods to manage pain and symptoms, and felt more energetic than those in the comparison group.
Soeker, S. (2017). The use of the Model of Occupational Self Efficacy in improving the cognitive functioning of individuals with brain injury: A	10 adults with mild to moderate TBI (injury of at least a year without a psychiatric	The Model of Occupational Self-Efficacy (MOOSE) is a four-stage vocational rehabilitation intervention based on	Pre-post design with a single group	All participants presented with improved scores in cognitive functioning

pre- and post-intervention study. <i>Work</i> , 58, 63–72. (South Africa)	disorder and has previous post-injury work history)	including a reflective process on challenges to working, engaging in activities to enhance capabilities, participating in simulated work tasks, and returning to the labor market.		
Sohn, B. K., Hwang, J. Y., Park, S. M., Choi, J.-S., Lee, J.-Y., Lee, J. Y., & Jung, H.-Y. (2016). Developing a virtual reality-based vocational rehabilitation training program for patients with schizophrenia. <i>CyberPsychology, Behavior & Social Networking</i> , 19, 686–691. (South Korea)	9 Adults with schizophrenia receiving services through an outpatient clinic	The Vocational Rehabilitation Virtual Reality-Based Training Program consisted of common-sense training and two work-based scenarios related to convenience store and supermarket situations.	Pre-post design with a single group	Participants scores improved on multiple psychosocial functioning and memory scales.
Surti, T. S., Corbera, S., Bell, M. D., & Wexler, B. E. (2011). Successful computer-based visual training specifically predicts visual memory enhancement over verbal memory improvement in schizophrenia. <i>Schizophrenia Research</i> , 132, 131–134. (US)	14 adults with schizophrenia or schizo-affective disorders receiving supported employment and cognitive remediation training	Computer-based CR was implemented using auditory, visual, and cognitive control exercises	Pre-post design with a single group	Achievement on visual training exercises was strongly and significantly correlated with improved visual learning, not improved verbal learning or increased ability to manipulate visual information.
Svikis, D. S., Keyser-Marcus, L., Stitzer, M., Rieckmann, T., Safford, L., Loeb, P., ... Zweben,	628 adults with drug or alcohol use disorders,	Job seekers workshop (JSW) intended to improve job seeking	RCT of intervention	Participants in both groups had similar rates

<p>J. (2012). Randomized multi-site trial of the Job Seekers' Workshop in patients with substance use disorders. <i>Drug and Alcohol Dependence</i>, 120, 55–64. (US)</p>	<p>who were unemployed or underemployed and desired a job.</p>	<p>skills and interviewing behavior. Activities include locating jobs, making "cold" calls to potential employers, and rehearsing job interview skills. Individual video feedback was used to help participants observe, practice, and improve skills.</p>	<p>verses treatment as usual.</p>	<p>of employment at 12 and 24 weeks.</p>
<p>Taubner, S., Müller, S., & Kotte, S. (2017). Mentalizing vocational training increases mentalization interest in professionals and young people with the need for learning support: Results of a pilot study. <i>Mental Health & Prevention</i>, 6, 1–11. (Germany)</p>	<p>157 students with learning disabilities recruited from a vocational training center.</p>	<p>The Mentalizing Vocational Training is aimed at improving the interaction between professional and client Modules are aimed at team building, establishing knowledge of mentalization, and discussing case and team related issues and applying a mentalization framework to improve collaboration.</p>	<p>Pre-post design with a single group</p>	<p>At one year follow up, both trainees and staff showed significant increases in their mentalization interest, and trainees showed increased self-efficacy.</p>
<p>Thomas, M. L., Treichler, E. B. H., Bismark, A., Shiluk, A. L., Tarasenko, M., Zhang, W., ... Light, G. A. (2018). Computerized cognitive training is associated with improved</p>	<p>46 people with schizophrenia recruited from community based mental health program, one</p>	<p>Targeted Cognitive Training (TCT) involved participants working independently on laptops to complete training modules focused on</p>	<p>RCT of intervention vs. treatment as usual.</p>	<p>Participants in the treatment group showed higher engagement in group therapies, ADLS, and rehabilitation</p>

psychosocial treatment engagement in schizophrenia. *Schizophrenia Research*, 202, 341-346.

month after stabilization.

auditory processing speed or auditory memory. Group therapy, activity of daily living, and vocational rehabilitation acted as augmenting services.

activities compared to controls.

Thonse, U., Behere, R. V., Frommann, N., & Sharma, P. (2018). Social cognition intervention in schizophrenia: Description of the training of affect recognition program – Indian version. *Asian Journal of Psychiatry*, 31, 36–40. (India)

10 adults with schizophrenia in a psychiatric hospital receiving a stable dose of antipsychotics for more than 4 weeks.

The Training of Affect Recognition (TAR) is a standardized social cognition intervention program aimed towards improved recognizing of social cues and improve emotional processing. TAR follows principles of errorless learning, positive reinforcement, feature abstraction, and self-instruction.

Pre-post design with a single group

A significant improvement was shown in emotional recognition. No changes were shown in symptoms.

Tornås, S., Løvstad, M., Solbakk, A. K., Schanke, A. K., & Stubberud, J. (2016). Goal management training combined with external cuing as a means to improve emotional regulation, psychological functioning, and quality of life in patients with acquired brain injury: A randomized controlled trial. *Archives of Physical Medicine*

70 people with acquired brain injury who were former patients in a rehabilitation hospital (6 months post injury) diagnosed as experiencing executive dysfunction.

Goal management training (GMT) with added modules addressing emotional regulation and external cuing. The intervention addressed mindfulness, goals in daily life and forgetting, mental errors, managing competing goals, emotional

RCT of intervention vs. a psychoeducative control condition called the Brain Health Workshop

GMT was associated with improved emotional regulation and QOL, but not psychological distress compared to the control group.

and Rehabilitation, 97, 1841-1852. (Norway)

response, goal setting and strategies to complete tasks, role of thoughts and actions on feelings.

Townsend, C. O., Kerkvliet, J. L., Bruce, B. K., Rome, J. D., Michael Hooten, W., Luedtke, C. A., & Hodgson, J. E. (2008). A longitudinal study of the efficacy of a comprehensive pain rehabilitation program with opioid withdrawal: Comparison of treatment outcomes based on opioid use status at admission. *PAIN, 140*, 177–189. (US)

373 patients experiencing chronic non-cancer pain. Study participants were individuals who were consecutively admitted to a clinic during a 13-month time frame.

The Mayo Clinic Comprehensive Pain Rehabilitation Center (MCPRC) provides an intensive 3-week outpatient, interdisciplinary pain rehabilitation program that assists patients with adaptation to pain and related symptoms. The intervention incorporates i. identification of comorbid mental illness, family education, and assistance with aftercare.

Pre-post design with a single group

Patients improved on all treatment outcome variables, and these improvements were largely sustained at 6-month follow up.

Trexler, L. E., Parrott, D. R., & Malec, J. F. (2016). Replication of a prospective randomized controlled trial of resource facilitation to improve return to work and school after brain injury. *Archives of Physical Medicine and Rehabilitation, 97*, 204–210 (US)

44 people with acquired brain injury receiving outpatient rehabilitation services. Only included people who were employed or in school for 2 years

Resource facilitation is a comprehensive, multidisciplinary intervention in which the client is provided assessment, access to community resources, and ongoing service coordination. Goal is to facilitate a bridge

RCT of the intervention vs. treatment as usual

The resource facilitation group showed higher and faster rates of return to work compared to the control group.

	prior to injury and who had a return to work goal.	between medical and community resources and return to work.		
Tsang, H. W. H., Chan, A., Wong, A., & Liberman, R. P. (2009). Vocational outcomes of an integrated supported employment program for individuals with persistent and severe mental illness. <i>Journal of Behavior Therapy & Experimental Psychiatry, 40</i> , 292–305. (Hong Kong)	163 people with severe mental illness were recruited from community mental health programs.	Integrated supported employment (ISE) is described as IPS plus additional work-related social skills training (WSST)	RCT of the intervention vs. IPS and vs. a traditional vocational rehabilitation approach.	After 15 months, ISE participants had significantly higher employment rates and longer job tenure than comparison groups (IPS and TVR). The IPS group demonstrated better outcomes than TVR.
Tsang, H. W. H., Fung, K. M. T., Leung, A. Y., Li, S. M. Y., & Cheung, W. M. (2010). Three year follow-up study of an integrated supported employment for individuals with severe mental illness. <i>Australian & New Zealand Journal of Psychiatry, 44</i> , 49–58. (Hong Kong)	189 people with severe mental illness were recruited from community mental health programs.	Integrated supported employment (ISE) is described as IPS plus additional work-related social skills training (WSST)	RCT of the intervention vs. IPS and vs. a traditional vocational rehabilitation approach.	ISE group had higher employment rate and tenure than the comparison groups. No differences in secondary outcomes (managing job stress, personal well-being and self-efficacy), salary, or types of jobs. Individuals in IPS group expressed more interpersonal conflict resulting in job termination than IES group.

<p>Tsang, M. M. Y., & Man, D. W. K. (2013). A virtual reality-based vocational training system (VRVTS) for people with schizophrenia in vocational rehabilitation. <i>Schizophrenia Research, 144</i>, 51–62. (Hong Kong)</p>	<p>95 people with schizophrenia who were inpatients in a mental health hospital and receiving vocational rehabilitation services.</p>	<p>Virtual Reality Based Vocational Training involved problem solving as a teaching method and was based on a retail work environment. The intervention included: identifying clothes, checking stock, working with customers, and solving work-related problems.</p>	<p>RCT of the intervention vs. a therapist-administered group vs. a treatment as usual</p>	<p>Virtual reality group showed better outcomes in memory, executive function, work performance, and self-efficacy than both comparison groups. The therapist led group also performed better than the control group on the on-site performance test.</p>
<p>van Beurden, K. M., Vermeulen, S. J., Anema, J. R., & van der Beek, A. J. (2012). A participatory return-to-work program for temporary agency workers and unemployed workers sick-listed due to musculoskeletal disorders: A process evaluation alongside a randomized controlled trial. <i>Journal of Occupational Rehabilitation, 22</i>, 127–140. (Netherlands)</p>	<p>72 participants who were temporary agency workers or unemployed and sick-listed between 2 and 8 weeks with musculoskeletal disorders as a primary complaint.</p>	<p>The Participatory Return to Work Program involved a step by step process to identify and solve obstacles for RTW. This is done by the sick listed worker and RTW coordinator and labor expert brainstorming RTW solutions and problem solving to overcome barriers. The intervention included temporary work opportunities.</p>	<p>Pre-post design with a single group</p>	<p>The intervention was determined feasible, but timeliness needed to be improved.</p>
<p>van Dongen, C. H., Goossens, P. H., van Zee, I. E., Verpoort, K. N., Vliet Vlieland, T. P. M., & van Velzen, J. M. (2018). Short-term and long-term outcomes of a</p>	<p>58 people with acquired brain injury who were employed before their injury and</p>	<p>The interdisciplinary VR program consisted of six steps completed over 4 months. Steps included collaborative meetings</p>	<p>Pre-post design with a single group</p>	<p>Directly after the intervention 86% of patients had returned to work. A total of 64% were still working after 3-</p>

vocational rehabilitation program for patients with acquired brain injury in the Netherlands. *Journal of Occupational Rehabilitation*, 28, 523–530. (Netherlands)

were motivated to return to work.

where stakeholders discussed goals and progress. Steps included assessment of eligibility, job demands, and function, which informed the RTW goals.

6 years, 64% were still working at a paid job.

Vanderberg, L. E., Pierce, M. E., & Disney, L. J. (2011). Reading intervention outcomes for adults with disabilities in a vocational rehabilitation setting: Results of a 3-year research and demonstration grant. *Rehabilitation Counseling Bulletin*, 54, 210–222. (US)

57 people with disabilities that included low reading skills. Who were enrolled in a reading clinic in a vocational rehabilitation setting.

Project Advance is a reading intervention with three available components that include phonological processing, visual memory of letter and word patterns, and reading comprehension.

Pre-post design with a single group

Participants made gains in passage reading accuracy and comprehension. Individuals with lower initial reading comprehension made greater gains, as did those with higher verbal intelligence scores.

Vanderploeg, R. D., Schwab, K., Walker, W. C., Fraser, J. A., Sigford, B. J., Date, E. S., ... Warden, D. L. (2008). Rehabilitation of traumatic brain injury in active duty military personnel and veterans: Defense and veterans brain injury center randomized controlled trial of two rehabilitation approaches. *Archives of Physical Medicine and Rehabilitation*, 89, 2227–2238. (US)

360 military service members and veterans with moderate to severe receiving services at an inpatient brain injury rehabilitation VA medical center.

The Cognitive Didactic Treatment intervention targeted four cognitive domains: attention, memory, executive function, and pragmatic communication. This intervention focused on building self-awareness and targets working memory, ongoing mental tracking, awareness of functional communication

RCT

No group differences observed in primary outcomes at one year (independent living and employment/educational status). Participants in the cognitive-didactic group showed better immediate post-treatment outcomes in motor and cognitive scores (FIM).

problems, and executive self-awareness. The Functional Experimental Treatment focused on using real-life situations and common tasks to remediate or compensate for functional deficits following TBI.

Verhoef, J. A. C., Miedema, H. S., Meeteren, J., Stam, H. J., & Roebroek, M. E. (2013). A new intervention to improve work participation of young adults with physical disabilities: A feasibility study. *Developmental Medicine & Child Neurology*, 55, 722–728. (Netherlands)

12 young adults with physical disabilities receiving outpatient rehabilitation clinic.

At Work?! is a one-year, multidisciplinary vocational rehabilitation intervention designed for young adults with physical disabilities entering the labor market. Key elements include combining rehabilitation services through a group-based program with individual assessments and coaching.

Pre-post design with a single group

Participants showed improved occupational performance in work, self-care, and leisure.

Verhoef, J. A. C., Roebroek, M. E., van Schaardenburgh, N., Floothuis, M. C. S. G., & Miedema, H. S. (2014). Improved occupational performance of young adults with a physical disability after a vocational rehabilitation intervention.

11 young adults with physical disabilities receiving outpatient rehabilitation clinic.

At Work?! is a one-year, multidisciplinary vocational rehabilitation intervention designed for young adults with physical disabilities entering the labor market. Key elements

Pre-post design with a single group

Post intervention, participants showed fewer occupational problems and improved performance in work, self-care, and leisure. Participants and showed

Journal of Occupational Rehabilitation, 24, 42–51. (Netherlands)

include combining rehabilitation services through a group-based program with individual assessments and coaching.

improved vocational identity.

Vikane, E., Hellstrøm, T., Røe, C., Bautz-Holter, E., Aßmus, J., & Skouen, J. S. (2017). Multidisciplinary outpatient treatment in patients with mild traumatic brain injury: A randomised controlled intervention study. *Brain Injury*, 31, 475–484. (Norway)

115 working-age people with diagnosis of mild TBI recruited from an outpatient rehabilitation clinic

The multidisciplinary return to work intervention included a combination of individual contacts with employers, service providers as well as a psychoeducational group once a week over four consecutive weeks. Group sessions consisted of information about mild TBI, addressing common concerns, to share experiences and strategies, and ways to lessen impact and facilitate RTW.

RCT of intervention vs. treatment as usual

No difference in return to work, patient impressions of change, disability, or psychological distress. The intervention group reported fewer post-concussion symptoms at post-test.

Vizzotto, A. D. B., Celestino, D. L., Buchain, P. C., Oliveira, A. M., Oliveira, G. M. R., Di Sarno, E. S., ... Elkis, H. (2016). A pilot randomized controlled trial of the Occupational Goal Intervention method for the improvement of

25 people with treatment-resistant schizophrenia, receiving outpatient

The Occupational Goal Intervention (OGI) is a rehabilitation program that targets executive functioning using learning strategies to

RCT of intervention vs. a craft activities control

The intervention group showed greater improvements in executive function and functional performance compared to the control group based on family

executive functioning in patients with treatment-resistant schizophrenia. <i>Psychiatry Research</i> , 245, 148–156. (Brazil)	psychiatry services.	improve every day functioning.		report, but not based most other measures.
Vungkhanching, M., Heinemann, A. W., Langley, M. J., Ridgely, M., & Kramer, K. M. (2007). Feasibility of a skills-based substance abuse prevention program following traumatic brain injury. <i>The Journal of Head Trauma Rehabilitation</i> , 22, 167–176. (US)	117 (36 in intervention and 81 in comparison groups) people with TBI who were seeking employment and at risk for substance abuse disorders while receiving vocational rehabilitation	Skills-based Substance Abuse Prevention Counseling (SBSAPC) is an intervention based on social learning theory, using motivational interviewing and other approaches to help individuals build coping skills to avoid using alcohol or other drugs	Pre-post design with a no treatment comparison group	At 9-month follow up, the intervention group had significantly higher rates of employment, lower rates of alcohol use, and higher rates of coping skills as compared to the comparison group (adjusted for baseline rates).
Washington, A. L. (2013). <i>Effects of desktop virtual reality environment training on state anxiety and vocational identity scores among persons with disabilities during job placement/job readiness activities</i> (Unpublished Doctoral Dissertation, Oklahoma State University). Oklahoma State University, Stillwater, OK. (US)	8 state-federal vocational rehabilitation clients engaged in job search and readiness activities.	A virtual reality environment for users to explore a job site. Included a manager welcome, and users explored at their own pace and at will.	Pre-post design with a treatment as usual comparison group	While statistical testing was impossible due to small sample size, anxiety was lower for treatment group at post-test than the control group. The groups were similar in vocational identity.

<p>Wedlund, E. W., Nilsson, L., Erdner, A., & Tomson, T. (2012). Long-term follow-up after comprehensive rehabilitation of persons with epilepsy, with emphasis on participation in employment or education. <i>Epilepsy & Behavior, 25</i>, 219–223. (Sweden)</p>	<p>124 individuals with epilepsy who were living in the community following participation in an intensive rehabilitation program.</p>	<p>The day-treatment rehabilitation program for individuals with epilepsy takes a holistic approach to treatment. The group program consists of psychotherapy, epilepsy education, training in body awareness and relaxation, and cognitive counseling/training as well as support in psychosocial issues.</p>	<p>Pre-post design with a single group</p>	<p>38 of 124 participants had an improvement in educational or employment participation at follow up.</p>
<p>Willert, M. V., Wieclaw, J., & Thulstrup, A. M. (2014). Rehabilitation of individuals on long-term sick leave due to sustained stress-related symptoms: A comparative follow-up study. <i>Scandinavian Journal of Public Health, 42</i>, 719–727. (Denmark)</p>	<p>93 previously employed individuals who were sick listed due to stress-related symptoms.</p>	<p>The Mariendal Gardens intervention was held nearly all outdoors. included both group and individual activities Comparison group was a Stress & Job management stress reduction program, similar in many ways but all indoors.</p>	<p>Pre-post design with an indoor Stress and Job Management Reduction comparison group</p>	<p>Both groups showed improvements in sleep, mindfulness, self-efficacy, daily functioning, and work ability, with negligible between group effects.</p>
<p>Wisenthal, A., Krupa, T., Kirsh, B. H., & Lysaght, R. (2018). Cognitive work hardening for return to work following depression: An intervention study. <i>Canadian Journal of</i></p>	<p>21 people on sick leave who were referred for cognitive work hardening and RTW planning</p>	<p>The cognitive Work Hardening program was provided in a simulated office environment, with the environment created to include things</p>	<p>Pre-post design with a single group</p>	<p>Work ability, fatigue, and depression significantly improved post-intervention.</p>

Occupational Therapy, 85, 21–32. (Canada)

typically used and experienced by a knowledge worker. Included a comprehensive assessment, customized work simulations based on pre-disability job duties and tasks graded in complexity, pacing techniques, and targeted coping and behavioral skill development based on individual needs.

Yam, K. K. N., Lo, W. T. L., Chiu, R. L. P., Lau, B. S. Y., Lau, C. K. S., Wu, J. K. Y., & Wan, S. M. (2018). A pilot training program for people in recovery of mental illness as vocational peer support workers in Hong Kong—Job Buddies Training Program (JBTP): A preliminary finding. *Asian Journal of Psychiatry*, 35, 132–140. (Hong Kong)

6 people with mental illness who were stable and receiving follow up and supported employment services recruited from public psychiatric hospital

The Job Buddies Training Program (JBTP) provides Supported Employment Peer Services (SEPS) as well recovery coursework. Completers who also passed a written exam graduated and could apply for a job with the hospital.

Pre-post design with a single group

Small sample made inferential statistics impossible, but participants showed an increased awareness of their own recovery process, occupational competence and problem-solving skills, and reduced stigma.

Zhang, G. F., Tsui, C. M., Lu, A. J. B., Yu, L. B., Tsang, H. W. H., & Li, D. (2017). Integrated Supported Employment for people with schizophrenia in Mainland China: A randomized

162 people with schizophrenia who were unemployed and wanted to work were recruited

Integrated supported employment (ISE) is described as IPS plus additional work-related social skills training (WSST)

RCT of the intervention vs. IPS and vs. a traditional vocational

Individuals in the ISE group had higher employment rates and longer job tenure than the IPS and TVR groups. ISE participants also had

controlled trial. *The American Journal of Occupational Therapy: Official Publication of the American Occupational Therapy Association*, 71, 7106165020-7106165020. (China)

Note. NS = Not Specified in Article

from mental health centers.

rehabilitation approach.

better psychosocial outcomes