



Belgian IPS pilot project: Overview, Research Findings & Future Directions

NIHDI – National Institute for Health and Disability Insurance (INAMI/RIZIV/LIKIV)
Benefits Department
Directorate Employment Reintegration

ULB - Université libre de Bruxelles
Centre de droit public et social (CDPS)
Département d'économie appliquée (DULBEA)

IPS Europe Learning Community, “Twenty years of IPS in Europe and the road ahead”, Rimini, 20th Octobre 2023



- Funded by the NIHDI (Belgium's National Institute for Health and Disability Insurance)
- Pilot project → Steering committee
 - NIHDI Level: the **Directorate Employment Reintegration of the Benefits Department**
 - 1 project manager + 3 coordinators
 - Research Team: Université Libre de Bruxelles (ULB)
 - 4 researchers in **social law, sociology, and economics**

Design & Evaluation of the Belgian IPS pilot project

Phase 0: State of the art of vocational rehabilitation in Belgium (2015)

Phase 1: Preparation of the pilot project (2016-2017)

Phase 2: Launch of the pilot project (2018)

Phase 3: Follow-up of the pilot project (2018- 2025) : *Fidelity Reviews* (internal and international) and qualitative monitoring

Phase 4: Evaluation of the pilot project through a randomised trial (2017-2025)

▷ Reflection on potential sustaining implementation within the Belgian social security

Presentation Overview

1/ Presentation of the partners and the project : the role of *co-construction*

2/ Follow-up of the pilot project : *Fidelity Reviews* (internal and international)

3/ Research Findings : qualitative data & RCT

4/ Where are we now?

5/ Questions?

1/ Presentation of the partners and the project : the role of *co-construction* (A)

- In **Flanders**
 - **GTB**, an organisation that combines expertise on disability and employment in Flanders and maintains a unique partnership with the regional employment services (VDAB).
- In the **Walloon Region**
 - Liège Region: **ASBL Article 23**, an organization advocating for the right to work for mental health users, especially in ordinary employment.
 - Charleroi Region: **ISPPC**, a hospital structure that was one of the initiators of IPS in Belgium.
- In **Brussels**
 - **ASBL L'Équipe**, an innovative organisation focused on social and community psychiatry.

	Regular Rehabilitation	IPS	Total	Target	Percent
Flanders	362	430	792	680	116%
Wallonia	137	165	302	400	76%
Brussels	40	58	98	120	82%
Total	539	653	1192	1200	99%

1/ Presentation of the partners and the project : the role of *co-construction* (B)

- A unifying feature of all pilot phase sites is their collaboration :
 - NIHDI,
 - social insurance companies (known as ‘mutualités’/‘ziekenfonds’),
 - medical advisors (‘médecins-conseils’/‘adviserend artsen’),
 - return to work coordinators (‘CRAT’/‘TNWC’),
 - regional employment services (Actiris, Forem & VDAB),
 - and the person’s treatment network.
- Building a programme and process using bottom-up approach and *co-construction*, leveraging existing tools and considering the Belgian context.

1/ Presentation of the partners and the project : inclusion criteria (C)

- People who have moderate to severe mental illness (including those with only an addiction, depression, etc.)
- Who are designated with the legal status of “incapacity for work”
- Who may or may not have an employment contract, but who no longer return to their former employer
- Who agree to participate voluntarily in the IPS study during the pilot phase
- Attention, zero exclusion criterion (e.g. awareness of the medical advisors)
- Attention, during the pilot phase, integration into the clinical teams was challenging due to random treatment. This meant job coaches couldn't consistently connect with just one or two mental health centers, as clients could be affiliated with various health institutions.

2/ Follow-up of the pilot project : *Fidelity Reviews* (internal and international) (A)

- 2 '*internal*' *Fidelity Reviews* (NIHDI & ULB) in 2020 and 2021
 - Points for improvement :
 - **Cooperation with care and clinical teams**
 - *Integrating job coaches in diverse mental health centers has demonstrated promising practices*
 - **Prospecting to employers in Brussels and Wallonia**
 - *Unlike GTB in Flanders, it's not specific to the structure where they are embedded*
 - **Adhering to the 30-day criterion**
 - **Addressing benefits issues**, particularly when progressively resuming work (permitted activities)

2/ Follow-up of the pilot project : *Fidelity Reviews* (internal and international) (B)

- External, **international IPS reviewers** to examine how well the principles of the IPS model are respected within the Belgian context
 - **Working First** (France) & **Phrenos** (Netherlands)
 - 30 January 2023 - 10 February 2023
 - **All sites achieved a minimum of 'Fair Fidelity'**
 - 3 sites reached 'Good Fidelity'
- Belgian sites feature strong IPS teams
- Need for more systematic contacts with regional partners and social insurance companies
 - *Administrative problems with work resumption through permitted activity*
- Working with 'Peers' (support groups and peer workers)
- Enhance cooperation with mental health care as part of overall work reintegration programmes

2/ Follow-up of the pilot project : *Fidelity Reviews* (internal and international) (C)

- General reflections on *Fidelity* and necessary collective considerations:
 - Support within the IPS Europe Learning Community for training (e.g., Social Finance UK) and for *Fidelity* (e.g., Phrenos & Working First) ;
 - Recognize the substantial oversight required when organizing on a large scale ;
 - Consideration of costs ;
 - Determining the right frequency for *Reviews* ;
 - Emphasizing the value of ‘internal’ and ‘self-evaluation’ ;
 - Facilitating the exchange of best practices within the European Learning Community ;
 - ...

- **Qualitative exploration into ‘adapted work’ (pending).**

How can the tools and actors of the Belgian social security system, particularly in the realm of indemnity insurance, support work adaptations and adjustments necessitated by the health conditions of people living with mental illness?

In September 2023, a diverse focus group met, and fifteen interviews with experts are planned, encompassing professionals and lived experience experts from the mental health, the social insurance companies and the employment sectors.

3/ Research Findings : qualitative data & RCT (B)

- Reflection on the **identity of this new profession** of job coach within the social security system: a role still under development. *"Most actors are not yet familiar with the IPS (...) - this is also the case for the medical advisors, who are still getting acquainted with IPS in practical terms."* (IPS job coach). Each site must build its own collaborations and raise awareness of the programme and the methodology (including with other 'new' actors such as RTWCs).
- Reflection on the **role of medical advisors** (and **social insurance companies** in general) in support, as well as the challenges associated with cooperation between them and job coaches. *"As a medical advisor, we base our decisions on information from the insured person and their treating doctors. How does the patient envision their future, and what are their concerns about work? Some medical advisors are deeply involved, while others rarely discuss these points and provide minimal guidance."* (medical advisor)
- Reflection on the importance of **personalized benefits counseling** and ensuring **financial predictability**. *"This is a crucial aspect of my job where I truly feel impactful, supporting both my client and the employer at every step."* (IPS job coach)
- Reflection on **disclosure**: what does it mean to **disclose qualitatively**, both in terms of work incapacity *and* mental health?
- ...

- **Gathering insights from program clients and their families (scheduled for 2024).**

Through thirty semi-structured interviews with clients and their families, conducted in the three regions of the country, the aim is to understand what **the supports, incentives and obstacles encountered in the search for work.**

3/ Research Findings : qualitative data & RCT (D)

Sébastien Fontenay, Ilan Tojerow (ULB, Dulbea)

Supported Employment DI Recipients

Summary of findings

Using a Randomized Control Trial, we find that **compared to VR**:

- SE ↗ probability to work part-time (x2) after 18 months
- SE ↗ monthly earnings from work by 119 euros (x2) after 18 months
- SE ↘ monthly DI benefits by 77 euros (-6.5%) after 18 months
- SE effects sustained through COVID-19 pandemic
- SE does not affect exit from DI
- SE does not affect health or well-being

Suggested **mechanisms**:

- SE ↗ job search efforts
- SE ↘ reservation wage
- SE does not create lock-in effect

- Originally set for 2023, but now extended to 2025.
- In early 2022, Prof Dr. I. Tojerow and Dr. S. Fontenay presented **intermediate results**, encompassing more than 660 participants over a follow-up period of 18 months.

These findings are detailed in the paper titled, "*How Does Job Coaching Help Disability Insurance Recipients Work While on Claim?*" by S. Fontenay & I. Tojerow, published by the ISA Institute of Labor Economics (IZA DP No. 15386, June 2022).

- **Pilot Project Timeline:**

- Runs until Jan 2025 at sites; study concludes Dec 2025.
- Target: Full Implementation by Jan 2026.
- Intermediate RCT report due end of 2023.

- **Our Actions:**

- Continue pilot project oversight and sites engagement
- Share and adopt best practices
- Monitor International *Fidelity Review* results
- Collaborate closely with research teams
- Expand IPS knowledge via (inter)national exchanges on:
 - *Methodology*
 - *Best practices*
 - *Expanding target groups*
 - *Implementation strategies*

- **Next Steps:**

- Discuss IPS's role within Belgian social security
- Establish a central IPS contact point in Belgium

Any questions or comments?



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All our Belgian partners

- IPS – sites & participants
 - GTB
 - L'Équipe
 - Article 23
 - ISPCC
- Social insurance companies
- VDAB – ACTIRIS – FOREM
- Mental health care

... and grateful to the IPS Europe Learning Community for this valuable exchange opportunity!