# COCHRANE CORNER

<sup>1</sup>This review is the abstract of a Cochrane Review previously published in the *Cochrane Database of Systematic Reviews*, 2020, Issue 1: CD013152, doi: 10.1002/14651858. CD013152.pub2 (see www.cochranelibrary.com for information). Cochrane Reviews are regularly updated as new evidence emerges and in response to feedback, and the *Cochrane Database of Systematic Reviews* should be consulted for the most recent version of the review.

© 2021 The Cochrane Collaboration. Published by John Wiley & Sons, Ltd.

We thank the Cochrane Work Group for their support in publishing this review.

See Round the Corner in this issue.

# Health-improving interventions for obtaining employment in unemployed job seekers: a Cochrane Review<sup>†</sup>

Marja Hult, Kirsi Lappalainen, Terhi K Saaranen, Kimmo Räsänen, Christophe Vanroelen & Alex Burdorf

#### Background

Unemployment is associated with decreased health which may be a reason or a consequence of becoming unemployed. Decreased health can inhibit re-employment.

#### **Objectives**

To assess the effectiveness of health-improving interventions for obtaining employment in unemployed job seekers.

### Search methods

We searched (3 May 2018, updated 13 August 2019) the Cochrane Central Register of Controlled Trials, MEDLINE, Scopus, PsycINFO, CINAHL, SocINDEX, OSH Update, ClinicalTrials. gov, the WHO trials portal, and also reference lists of included studies and selected reviews.

#### Selection criteria

We included randomised controlled trials (RCTs) of the effectiveness of health-improving interventions for obtaining employment in unemployed job seekers. The primary outcome was re-employment reported as the number or percentage of participants who obtained employment. Our secondary outcomes were health and work ability.

#### Data collection and analysis

Two authors independently screened studies, extracted outcome data, and assessed risk of bias. We pooled study results with random-effect models and reported risk ratios (RRs) with 95% confidence intervals (Cls) and assessed the overall quality of the evidence for each comparison using the GRADE approach.

### Main results

We included 15 randomised controlled trials (16 interventions) with a total of 6397 unemployed participants. Eight studies

evaluated therapeutic interventions such as cognitive behavioural therapy, physical exercise, and health-related advice and counselling and, in seven studies, interventions were combined using therapeutic methods and job-search training.

## Therapeutic interventions

Therapeutic interventions compared to no intervention may increase employment at an average of 11 months follow-up but the evidence is very uncertain (RR = 1.41, 95% CI 1.07 to 1.87, n=1142, 8 studies with 9 interventions,  $I^2$  = 52%, very low-quality evidence). There is probably no difference in the effects of therapeutic interventions compared to no intervention on mental health (SMD 0.12, 95% CI –0.06 to 0.29, n=530, 2 studies, low-quality evidence) and on general health (SMD 0.19, 95% CI –0.04 to 0.41, n=318, 1 study, moderate-quality evidence).

#### Combined interventions

Combined interventions probably increase employment slightly compared to no intervention at an average of 10 months follow-up (RR 1.12, 95% Cl 1.06 to 1.20, n = 4101, 6 studies,  $l^2$  = 7%).

There were no studies that measured work-ability, adverse events, or cost-effectiveness.

#### Authors' conclusions

Interventions combining therapeutic methods and job-search training probably have a small beneficial effect in increasing employment. Therapeutic interventions may have an effect on re-employment, but we are very uncertain. Therapeutic interventions may not improve health in unemployed job seekers. Large high-quality RCTs targeting short-term or long-term unemployed people are needed to increase the quality of the evidence. A cost-effectiveness assessment is needed of the small beneficial effects.