

Return to work after severe acquired brain injury: a qualitative research study

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Introduction

Severe acquired brain injury (ABI) can result in physical, cognitive-behavioral and emotional deficits that, in the most of cases, can lead to permanent changes in functioning. Normally, traumatic and non-traumatic brain injuries require a major life adjustment and have a deep impact on social and work integration and thereby on quality of life.^{1,2} Return to competitive employment gives the possibility to promote autonomy, self-realization and personal dignity and can be considered the aim as well as a tool of rehabilitation. In literature there are a few studies concerning reintegration to work of people with this kind of disabilities.^{3,4} Most of this study investigate predictors of successful work reintegration, but does not give us information about participants' perceived occupational life situations.⁵ The present study is designed to assess the outcome of employment in people with severe ABI. We had two main purposes: a) subjective evaluation of return to work (RTW), and b) validation of some favorable predictors emerged in international scientific studies about RTW.

Materials and methods

Participants

We recruited 119 patients with severe ABI (both traumatic and non-traumatic injuries). All patients came to our centers to avail different services. To be included in the study all the participants had to complete occupational/reintegration to work processes. Severe psychiatric disorders, drop out of reintegration process, reintegration process still in progress and death composed exclusion criteria.

Materials and data analysis

The data were collected in a database from 1999 to 2013. Since we were interested in participants' perceived occupational life situations, we adopted a client-centred perspective using in the telephone survey a self-reported assessment about working gaps, satisfaction level, and mood. The telephone questionnaire was specially prepared and allowed us to check retrospectively the outcome of employment. In order to analyse the relationship between different variables we used contingency tables. All the results are represented in percentage.

Results

As a whole, our data highlights a high percentage of people with ABI returning to work; this percentage fall to vascular lesions (Figure 1). For the completion of the questionnaires, were considered only cases with stable employment therefore able to respond to all items. 49 cases (12 F; mean age 34.6 years old) set up our reference group. 71% of participants had a traumatic injury, while the resting 29% had a vascular one (for socio-demographic and clinical data see Table I). A great part of our interviewee do not work at the place of work prior to ABI. This agree with the literature reporting that a substantial proportion of people with ABI are not able to return to their former occupation.⁶ In our sample the 80% of people RTW had found a new job. As also shown in Table II, more than a half of subjects found employment with public support or cooperative (69.4%). Moreover, the relationship between people employed and the data related to legal disability had shown something predictable: 82% of people with a disability included between 46%-75% are employed, this allows companies to comply with their legal obligations. This percentage decreased while increase the percentage of legal disability (Figure 2). Our interview had shown also that a high percentage of people with ABI (69%) play different and lower-level tasks. In any case almost 60% (exactly 58.2%) are satisfied with their job with repercussion on their mood.

Discussion

The data recorded in the present study show that the percentage of people RTW is significantly higher in patients who have suffered a traumatic head injury. In this case, we can assume that some characteristics, such as younger age and greater family's propensity to continue rehabilitation processes, increase the opportunities to RTW for people with ABI. On the other hand, we must emphasize how companies prefer to hire someone young and male gender because it is easier to find simple tasks compatible with the type of disability. We point out also that, in 50% of cases, reintegration to work is by a social company as a non-profit organization. If we consider the large number of those who have not been able to indicate a service supporting RTW, we can assume that there is some distance

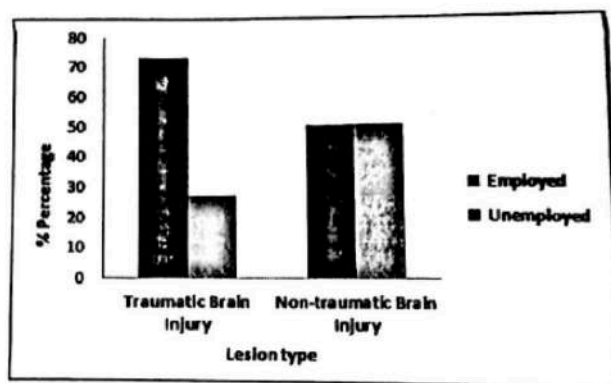


Figure 1. – Percentages of employed and unemployed people with ABI related to lesion type (traumatic vs. non-traumatic).

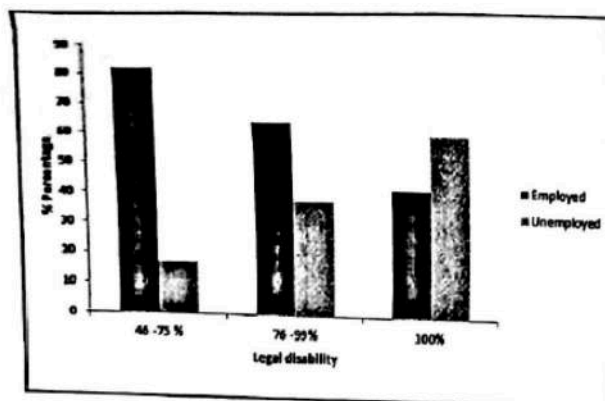


Figure 2. – Relationship between people with ABI employed and percentage of legal disability.

Table I. – Socio-demographic and clinical data.

	Average	n	%
Age	34.6		
Onset (years)	4.7		
Sex			
Male		37	75.5
Female		12	24.5
Educational level			
>10 years		18	36.7
≤10 years		31	63.3
Lesion type			
Traumatic		35	71.4
Non-traumatic		14	28.6
Employment situation prior to ABI			
Worker		32	65.3
Unemployed		12	24.5
Student		5	10.2
Satisfaction level relatd to work prior to ABI			
High		36	81.8
Low		8	18.2
Family support			
With		46	93.8
Without		3	6.2

between individual's needs and responses of local authorities.

Broadly, well-being of people with ABI employed is still basically good. However, qualification has a significant impact on motivational level. People with a high degree not easily accept to carry out simple tasks. In this sense, we have also noted that a high level of work satisfaction prior to ABI leads to a lack of motivation towards employment later downgraded. Lastly, often work placements are not long lasting. In particular some jobs have discontinuous periods or even finish without the possibility of being renewed in the same setting. This condition changes emotional tone and motivation, increasing sense of dissatisfaction, experienced bankruptcy and difficulty in rebuild-

Table II. – Support to RTW in our sample.

	n	%
Working place prior to ABI	2	4.1
Cooperative Progettazione	18	36.7
Public services	14	28.6
Private services	0	0
Disability recruitment targets	2	4.1

ing a functional and coherent sense of self. It happens, then, when there are proposals for job placement not definitive that many people prefer to avoid losing government contributions fixed, renouncing forever the possibility of RTW.

Conclusion

Despite our continuous upgrades in activities of occupational and working pathways, the number of job placements decreased from 25% in 2007 to 4% last year, probably due also to current socio-economic crisis. Furthermore it is important to note that predictors indicate in literature do not take into account the law and the economic reality of a State as well as the real possibility that labor market offers to people with ABI. Indices of a very good chance of recovery of everyday life, including work, collide with opportunities and resources of social, economic and political environment. In response to this critical situation, our centers have tried to use more and more high-tech information technology both as a means of training for future business activities and as strategic tools to address the practical difficulties that people with ABI encounter in workplacement.

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