Arthritis Work Disability: Epidemiology and Evidence-Based Employment Retention

Enhancing Activity and Participation Among People with Arthritis (ENACT)

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NARRTC 34th Annual Conference
April 26, 2012

Arthritis: Diseases and Conditions that Affect Joints (Rheumatic diseases/conditions)

- Osteoarthritis
- Rheumatoid arthritis
- Psoriatic arthritis
- Ankylosing spondylitis
- Lupus erythematosus
- Scleroderma

Other rheumatic conditions like fibromyalgia
Rheumatic Conditions: Major Causes of Work Limitation

- More than 50% of people with arthritis in the US are employment aged, 18-64 years (Hootman, 2006 [2003 NHIS data])

- 30% have limitation in ability to work (Theis [2002 NHIS data], 2007)

- Rheumatoid arthritis
  - Of those employed at disease onset, ~ 30% no longer work at 10 years disease duration (Allaire, 2007)
  - Lupus erythematosus and similar illnesses also have substantial rates of complete work disability

- Fibromyalgia: 23-31% of subjects stop working prematurely (Wolfe, 1997; White, 1999)

Job Retention Vocational Rehabilitation (VR) Intervention Prevents Arthritis Work Disability (Allaire, 2003)

- RCT; 242 employed participants with a rheumatic condition at risk for job loss

- Job retention VR intervention delivered in two 1.5 hour meetings with a rehabilitation counselor
  - Assessment of work problems and development of solutions for problems (e.g., job accommodations)
  - Promotion of belief can work if problems addressed
  - Provision of information about rights, e.g., ADA
  - Discussion of disclosure issues
  - Planning for future job/career change or advancement
Translating Results into Practice: Limited Access to Rehabilitation Counseling Services

- Available mainly through public VR program
  
  - Program mandated to give priority to those who are most severely disabled
    - Most persons with arthritis mildly/moderately disabled
  
  - Most VR consumers are unemployed
    - Intervention at the preventive level is effective and requires relatively little time
Could Important Components of Job Retention VR Intervention Be Delivered by Other Professionals?

- Persons with arthritis have greater access to physical and occupational therapists (PTs/OTs)
- Helping people maintain roles is within PT/OT professional scope of practice
- Role appears plausible
  - Assess individuals’ health-related work problems and assist in generating solutions for problems (e.g., job accommodations)
- Provide resource information and referral

Use Work Barrier Assessment Tool: Work Experience Survey (WES) (Roessler, 1995)

- Uses/teaches the problem solving approach to reduce health-related barriers to work
  - Barriers identified from comprehensive checklists
  - Barriers prioritized
  - Solutions for 3 most bothersome barriers generated

- WES adapted for more comprehensive and efficient use with persons with rheumatic conditions – Work Experience Survey for Persons with Rheumatic Conditions (WES-RC) (Allaire & Keysor, 2009)
Pilot Study to Explore (Allaire, Baker & Keysor, 2009)

- Feasibility of WES-RC use by PTs/OTs
- Therapists’ perceptions regarding use of the instrument for their patients

Pilot Study

- 10 therapists
  - 6 PTs
  - 4 OTs
- Administered WES-RC to 20 employed persons with rheumatic conditions and work limitations
Pilot Study: Results Summary

- Therapists had favorable perceptions of the WES-RC
- They had no difficulty with barrier identification
- **BUT** sometimes had difficulty generating solutions
- Need: Improvement in therapists’ abilities to assist with solution generation

Solution Handbook Developed

- Available literature
- Expert opinion: PTs/OTs recruited from the Association of Rheumatology Health Professionals
Effect of Solution Handbook Use on Quality of Solution Generation (Allaire, Baker, Keysor, et al., 2010)

- Most PT/OT study participants able to generate helpful solutions for physical activity work barriers

For other content areas:
- Significantly larger proportions of PTs/OTs given the solution handbook developed helpful solutions than those without access to it
  - Cognitive work barrier, 86% vs. 45%
  - Vocational direction barrier, 82% vs. 35%

ENACT Study: Test Efficacy of Therapist Delivered WES-RC Based Intervention

- Randomized controlled trial
- Intervention provided by PTs/OTs to persons with rheumatic conditions at risk for work loss
  - Use WES-RC to identify and solve work barriers
  - Provide employment and disability-related information and resources
  - Provide written action plan
  - Follow-up on actions taken and revise plan as needed
ENACT Study: Test Efficacy of Therapist Delivered WES-RC Based Intervention

☐ PTs/OTs in community practice recruited
☐ Intervention being delivered to persons
  ■ Chronic rheumatic condition
  ■ Employed >= 10 hours/week
  ■ Age 23-63 years
  ■ Not on disability leave
  ■ Plan to work at least 2 more years

Questions and Comments

Center for Enhancing Activity & Participation among Persons with Arthritis (ENACT)
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The NIDRR Arthritis Rehabilitation and Training Center

NIDRR PR/Award #H133B100003