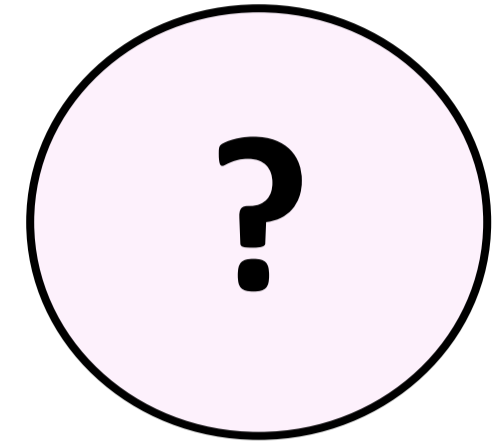


Unfolding the values of work

A qualitative study exploring therapists' experiences of attending to the return-to-work process in an inpatient occupational rehabilitation program based on Acceptance and Commitment Therapy (ACT)



How do therapists attend to the return-to-work process of their participants in occupational rehabilitation based on ACT?



Hysnes Rehabilitation Centre (2010-2016)

3,5 weeks inpatient occupational rehabilitation
group-based with individual sessions

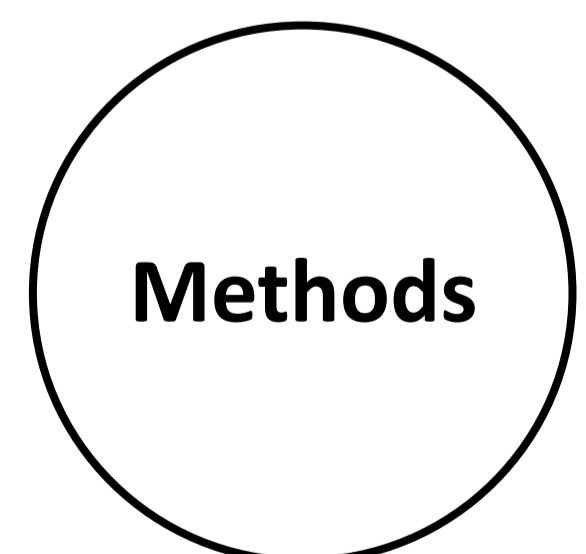
diagnoses: musculoskeletal pain
common mental disorders and/or
other non-specific disorders

multidisciplinary: psychological treatment
physical exercise
work-related problem solving



11 therapists participated in interviews

age: 26-62 years old
length of employment: 3 months - 6 years
sex: 5 women, 6 men
educational/
occupational backgrounds: physiotherapy, counselling,
preschool teaching, psychology,
nursing, human movement
science

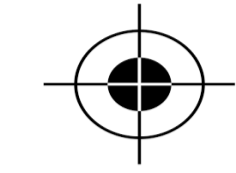


Qualitative interview study supported by participant observation

interview guide: experiences with attending to the return to work process
participant observation: how the return to work process was attended to during the program
analytic approach: Interpretative Phenomenological Analysis (IPA), informed by the analysis of field notes from the participant observation



Findings



The therapists described that their twofold goal was to help participants:

- create a meaningful life
- engage in sustainable work participation

The changes they sought to facilitate were described as long-term processes exceeding the timeframe of the rehabilitation program, and the following 5 processes were identified through the analysis:



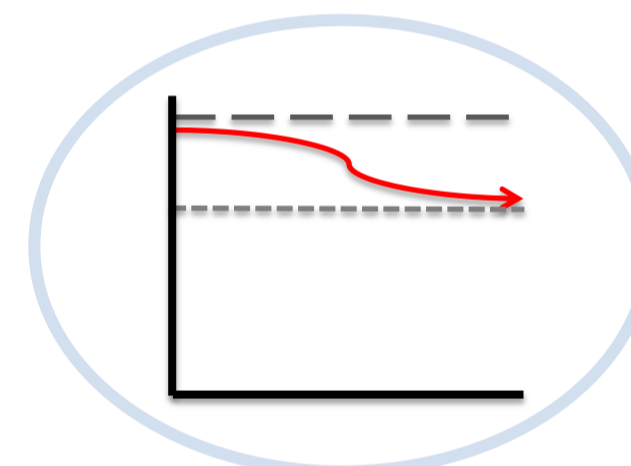
enable ownership to the process

- let participants define their own agenda according to their main challenges in life without confining this to work participation
- urge participants to autonomously develop solutions while refraining from providing advice



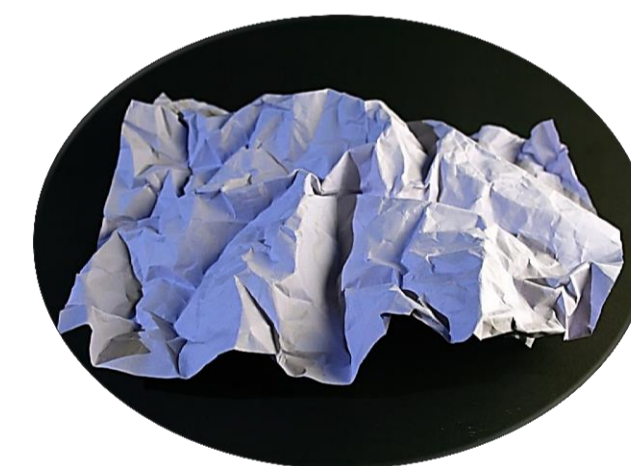
identify the complex causes of sick leave

- map out the totality of burdens in participants' lives that contribute to health problems
- create an understanding of how the relation to symptoms affect to what extent they are sustained, and thereby partly caused



change the relation to expectations

- create awareness of how demands often originate from participants' expectations of themselves
- adjust expectations to a realistic level by accepting current health situation, and be open about limitations to relevant others



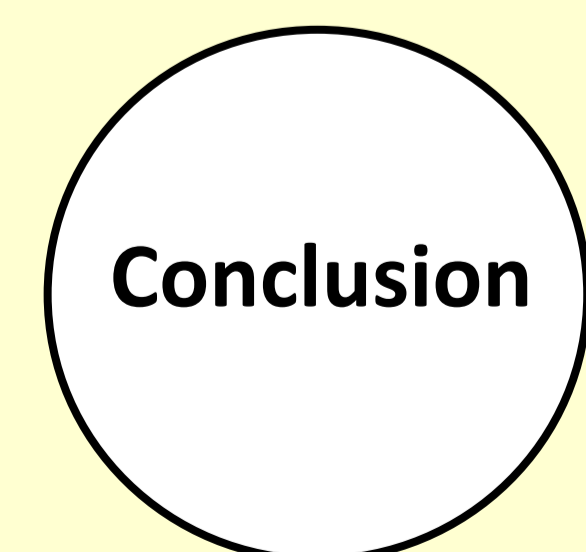
unfold the personal values of work

- investigate values connected to current employment or work participation in general
- pragmatic approach: work participation as a means to fulfill personal values considered more important than work



explore the scope of agency

- help participants differentiate between situations they are able to influence, and not
- ensure that their intended action is guided by individual values, and appropriate in scope to create sustainable change



Conclusion

Attending to the return-to-work process entails to:

- address the whole life situation of participants, and incorporate the arena of work with other arenas of life
- redefine work from normative expectation to arena of personal meaning



Potential dilemmas:

- make the transferability between the themes addressed throughout the rehabilitation and return-to-work evident to participants
- encourage actions appropriate in content and scope without providing advice

They have tried so many things, things they have heard from others, read about, advice they have received. Whilst this is supposed to be something you actually find important, truly believe in, and have experienced yourself that works. I believe that is the point, that it is more durable. And have more meaning.

Pain is one thing, suffering is another (...), all the collateral problems of pain. How you relate to pain might partake in sustaining some of the suffering (...). To work on that awareness is important, and the experience of cause, of what has sustained pain, often change within the course of the program.

We see many parallels to upbringing (...), they bring with them this productivity reflex, that you are supposed to be productive all the time. And then they feel like they don't suffice. But mother did, grandmother did, great grandmother did.

«Why do I work? What do work give me? What can I contribute to at work, and what can work provide me?» That is the colleagueship, to have competence or possibilities to evolve, to contribute to something greater (...), those things are often the values.

They get a tool: how to work on destructive thoughts and emotions, how to live with bodily symptoms that doesn't disappear (...), and still be at work. It can be a large change to become aware of that choice, that they might hurt, have difficult thoughts and emotions, yet still move in the direction they want.

