

## For Your Insight: Research and Practice From the Field

**December 2, 2020**

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This monthly update highlights relevant research for RETAIN states and summarizes key takeaways that may benefit program implementation. Each summary includes a link to an article, a resource, or a formal abstract. An accessible version of For Your Insight is attached to this email.

### **Engaging Employees to Measure Success: Innovative Approaches to Encouraging Self-Identification of Disability**

This guide from the Employer Assistance and Resource Network on Disability and Inclusion highlights barriers that hinder employees from disclosing a disability and offers employers strategies to encourage self-identification. Barriers to employee self-identification include the following: “risk of being fired or not hired or promoted; risk of being treated or viewed differently by colleagues and supervisors; desire for privacy; risk of losing healthcare benefits; and that the disability has no impact on job performance.” To overcome these barriers, this guide recommends employers follow these strategies:

- *Ensure opportunities for all* by taking actions such as adding disability to company’s disability mission statement, expanding recruitment efforts to target workers with disabilities, encouraging employee’s with disabilities to participate in career development opportunities, and sharing success stories of employees with disabilities.
- *Create a welcoming environment* by promoting supportive relationships between employees and their supervisors, conducting employee-wide disability awareness and diversity training, holding employees with disabilities to the same standards as all employees, and using focus groups/surveys on how to make the workplace more inclusive.
- *Support health and wellness* by highlighting employee health benefits including mental health services and benefits, wellness initiatives, and employee assistance programs; ensuring health insurance coverage does not discriminate against employees with disabilities; and ensuring human resources staff understand existing benefits.
- *Ensure privacy* by explaining how employee self-identification is confidential and that their privacy will be protected and maintained.
- *Explain the reasons for self-identification* by emphasizing the benefits of self-identification, such as access to accommodations, and explaining how self-identification helps identify gaps in recruiting and promotion of individuals with disabilities.
- *Track progress for continuous quality improvement* by tracking applicant data, including federal contractors, other employers, and the number of reasonable accommodation requests, which will help highlight where improvements need to be made.

Tags: Accommodations, self-identification, barriers, employers

## Integrating Psychosocial and Behavioral Interventions to Achieve Optimal Rehabilitation Outcomes

Sullivan and colleagues (2005) conducted a review of the literature to examine psychosocial interventions developed to prevent work disability. The authors describe psychosocial risk factors as type 1 and 2. Type 1 risk factors occur within the individual (i.e., worker-related). Type 2 risk factors occur outside the individual (i.e., workplace-related).

Interventions that respond to type 1 risk factors include:

- *population health interventions*, which may target work disability on a large scale through ad campaigns;
- *primary care interventions*, such as medical reassurance, which refers to health care providers communicating with the patient to correct inaccurate beliefs and reduce fear;
- *clinic-based cognitive behavioral interventions*, including health care providers teaching problem solving skills to patients; and
- *community-based cognitive-behavioral interventions* such as the Pain-Disability Prevention Program, which is a network of psychologists distributed throughout communities to provide a psychosocial component of care and includes targeting risk factors such as fear of reinjury and depression.

Because type 2 interventions are relatively new, the authors found limited interventions in the literature. There is some evidence that supervisor attitudes and co-worker support may improve type 2 risk factors. Interventions that respond to type 2 risk factors include:

- *Sherbrooke Model for back pain management*, which is composed of an occupational intervention, a clinical intervention, and early rehabilitation.

The authors conclude that health care providers need more training to ensure they have the necessary skills to address psychosocial risk factors.

Full text available: [Sullivan, M. J., Feuerstein, M., Gatchel, R., Linton, S. J., & Pransky, G. \(2005\). \*Integrating psychosocial and behavioral interventions to achieve optimal rehabilitation outcomes.\* \*Journal of Occupational Rehabilitation\*, 15\(4\), 475–489.](#)

Tags: RTW, psychosocial risk factors, interventions

## Reducing Job Loss Among Workers With New Health Problems

This chapter by Ben-Shalom and colleagues (2018) summarizes the research showing that common health problems result in work disability and the importance of access to early support. The authors describe the research on the barriers that prevent workers from accessing early support, including the following:

- *Misaligned incentives*, in which stakeholders who experience economic loss from work disability (i.e., state and federal government) are different from the stakeholders in the position to prevent disability (i.e., private disability, workers' compensation, health insurers).
- *Lack of dedicated resources*, such as few charitable, nonprofit organizations dedicated to preventing work disability.
- *Fragmentation of responsibilities*, which results from a lack of coordination across stakeholders (i.e., absence of cross-agency collaboration agencies that fund vocational rehabilitation programs and training programs).
- *Legal barriers to communications* related to privacy protections such as HIPAA that prevent stakeholder (i.e., employer and healthcare provider) coordination to help workers stay at work.

To overcome these barriers, the authors recommend policy proposals aimed at improving employer and private insurer incentives (i.e., federal requirement for private disability insurers to pay the first

24 months of Social Security disability insurance benefits in exchange for a payroll tax deduction) and establishing a Health and Work Service that would be responsible for addressing “the lack of dedicated resources and limited responsibility across federal, state, and local levels for reducing work disability”. The authors also recommend developing a nationwide employability/eligibility service that would help manage the fragmentation of responsibilities among private sectors. The authors conclude by proposing that policymakers begin developing test proposals to address these barriers.

Full text available: [Ben-Shalom, B., Christian, J., & Stapleton, D. \(2018\). Reducing job loss among workers with new health problems. In S. Anderson, T. Greene, H. Prince, & C. E. Van Horn \(Eds.\), \*Investing in America's workforce: Improving outcomes for workers and employers\* \(pp. 267–288\). Mathematica.](#)

Tags: RTW, work disability

*This communication was prepared for the U.S. Department of Labor (DOL) Office of Disability Employment Policy and Retaining Employment and Talent After Injury/Illness Network (RETAIN) state grantees, by the American Institutes for Research under DOL Contract Number 1605DC-18-F-00429. The views expressed are those of the authors and should not be attributed to DOL, nor does mention of trade names, commercial products, or organizations imply endorsement of same by the U.S. Government.*