



# Cross-Cutting Strategies to Address RETAIN Participants' Unmet Needs and Social Determinants of Health

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NORC at the University of Chicago

# Disclaimer

This event is conducted by the American Institutes for Research (AIR) for the U.S. Department of Labor (DOL) Office of Disability Employment Policy (ODEP) and the Retaining Employment and Talent After Injury/Illness Network (RETAIN) state grantees, 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.

# How to Participate

## Chat Box and Email:

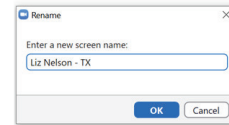
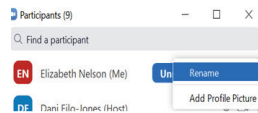
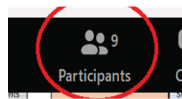
Use the chat box throughout the session to make comments and communicate your tech problems. Raise your hand and we'll call on you. Lower your hand after you've been called on.

You also can communicate by email at [RETAINTA@air.org](mailto:RETAINTA@air.org).

## Other Helpful Zoom Features:

To access closed captioning, click on the CC feature at the bottom of the Zoom window.

To add your state abbreviation to your name, find your name under "Participants," click "More" beside your name, and select "Rename."



# Virtual Meeting/Conference Recording Notice

The American Institutes for Research® (AIR®) allows for the recording of audio, visuals, participants, and other information sent, verbalized, or utilized during business-related meetings. By joining a meeting, you automatically consent to such recordings. Any participant who prefers to participate via audio only should disable their video camera so only their audio will be captured. Video and/or audio recordings of any AIR session shall not be transmitted to an external third party without the permission of AIR.

## Hosting and Participating in Meetings



### ENGAGE EVERYONE

Consider participants' needs (e.g., visual, auditory, sensory, cognitive, physical, and language). Establish meeting norms to encourage participation. Ask participants to alert the meeting facilitator if they have difficulty seeing the content and/or hearing the presenter. Designate a meeting monitor to address audiovisual issues, monitor the chat box, and respond to participants as needed.



### MINIMIZE NOISE

Avoid moving around or shuffling materials on your desk during the meeting. Eliminate crunching or chewing noises and loud typing, which interfere with sound quality for virtual participants and are amplified by microphones and sensory aids for visual or auditory impairments. Speak from a stationary position to keep the audio clear. Mute your phone or your computer microphone when you are not speaking.



### MAXIMIZE MICROPHONES

Presenters should use microphones to ensure that their voice is loud enough for all to hear. Microphones are needed for face-to-face and virtual meetings and are critical for engaging remote colleagues as well as persons with hearing loss. During virtual meetings, use headphones with a built-in microphone to make sure that the facilitator and attendees can hear you. During face-to-face meetings, set up microphones for the facilitator, presenters, and attendees. Make sure that hand-held microphones are available for meetings that include audience participation. Make sure that speakers are positioned near a microphone.



### ACKNOWLEDGE SPEAKER

Provide an auditory or visual cue before speaking to identify yourself as the speaker. State your name for those who cannot see you. When asking for questions or comments, meeting facilitators should allow five to seven seconds for participants to use the "raise the hand" tool, unmute their phones, or provide a response in the chat box. Be comfortable with the wait time.



### BE HEARD AND SEEN

Project your voice when speaking. Only one person should speak at a time. Avoid overlapping and sidebar conversations. Position everyone present so that they can be seen on screen. Encourage virtual participants to use their webcams if they feel comfortable doing so. Let people see your facial expressions and body language clearly if you are using your webcam.



### MAXIMIZE VISUAL DISPLAYS

Email materials to participants before the meeting. Display meeting documents on screen and capture the main discussion points verbally and visually by taking notes, restating key concepts, or using the chat box. If a participant asks for clarification, rephrase the content instead of repeating it. Assign a meeting note taker so that the meeting leader and monitor can focus on engaging participants. Notes also ensure access for individuals with executive function-related needs, processing disorders, or visual/auditory impairments.

These guidelines are intended to improve the meeting experience for all participants, including meeting facilitators, monitors, and attendees, as well as people with hearing loss or visual impairment, and those for whom English is an additional language. Some of the guidance presented here may apply only to in-person meetings, or virtual meetings, while other guidance applies to both meeting types. Developed by the Access AIR and AIR CREW Employee Resource Groups With Support From the AIR Diversity, Equity, and Inclusion Office

# RETAIN

Retaining Employment and Talent After  
Injury/Illness Network

# Meet the Presenter



**Jessica Fernandez, PhD**

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NORC, University of Chicago  
Senior Research Scientist  
[jfern14@terpmail.umd.edu](mailto:jfern14@terpmail.umd.edu)

# Workers' concerns following illness or injury

Can I stay at work?  
Can I go back to work?  
Should I go back to work?

How much work is  
waiting for me?  
How can I catch up?

Will I be able to do my job?  
Can I change my schedule?  
What will I need to do my job?  
Should I stay at work if I'm not  
supported?

Will working make my injury worse?  
Will I reinjure myself?  
How will I make it through the  
workday feeling like this?

Can I drive?  
How will I get to work?

Will my medical providers  
understand my work duties?  
Will my supervisor trust my  
medical providers?

How am I going to attend all of  
my medical appointments?

Do I want to continue working?  
Am I ready to start a new job?

What will my coworkers say?  
Will my boss be understanding?

# Workers' concerns following illness or injury

Can I stay at work?

I don't fully understand the information about my injury or illness – what does this all mean?

I already felt discrimination at work. Now, how are people going to treat me?

I don't trust doctors and I don't trust research studies.

I cannot fit any additional stressors in my life.

I am in so much pain at work and I don't know how long I can keep this up.

How will I make it through the workday feeling like this?

Can I drive?

Now that I'm a full-time caregiver, can I return to work?

I'm worried I won't be able to meet the requirements. I don't have a safe place to rehab.

Will my coworkers say my boss be understanding?

Am I ready to start a

I can't drive to work and my only option is the bus, which is often unreliable.



## During this session, we will:

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- Review categories of unmet needs and social determinants of health
- Review how injury and/or illness can impact different types of needs, in the context of social determinants of health
- Discuss existing strategies that states are using to address RETAIN participants' needs and how these strategies account for different social determinants of health
- Engage in group brainstorm to generate list of cross-cutting strategies that states could use to assist RETAIN participants across multiple categories of need and social determinants of health

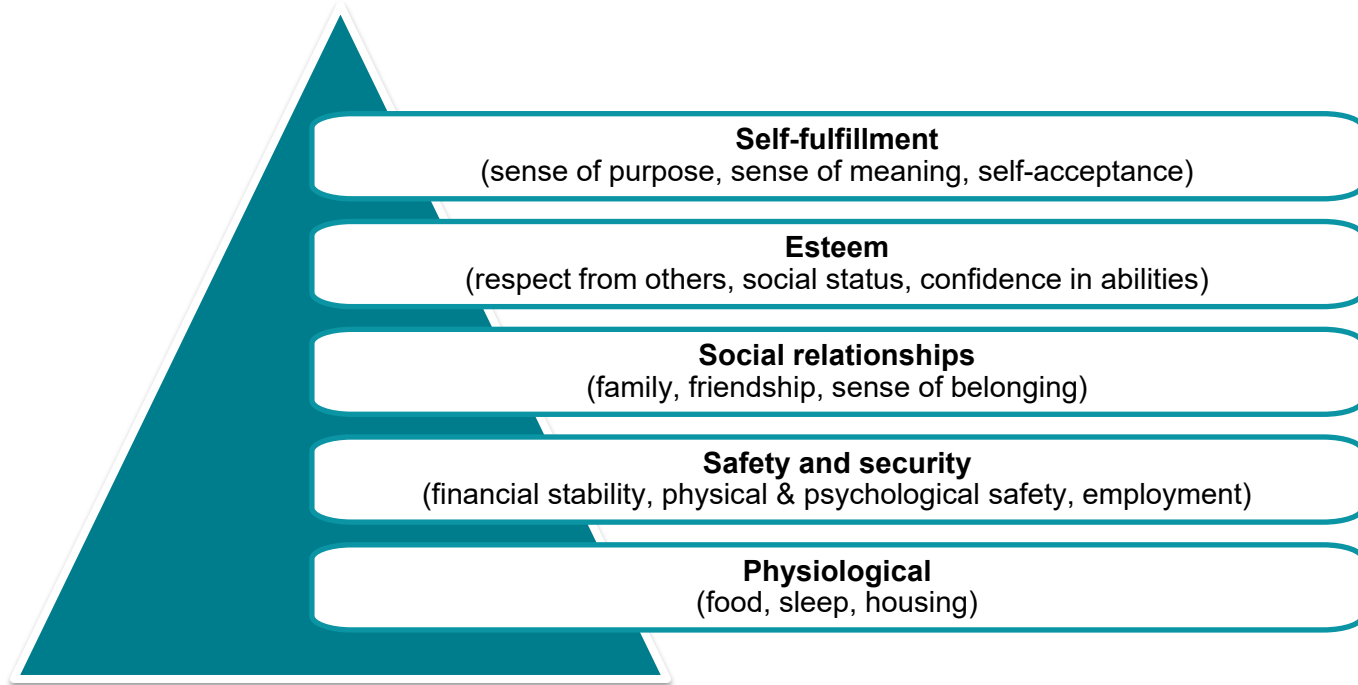
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# Motivational needs<sup>1</sup>

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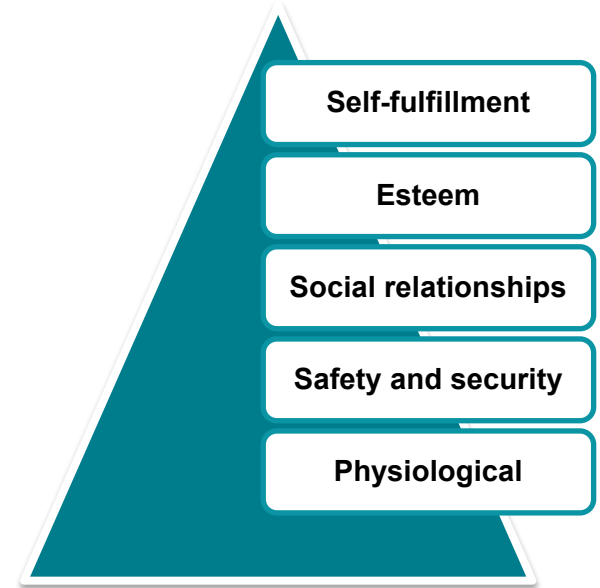


# Consequences of unmet needs

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- **Unmet needs can compromise physical and mental wellbeing<sup>2-16</sup>**
- **Consequences of unmet needs include:**
  - Increased chronic pain
  - Higher risk of chronic disease
  - Worse cognitive functioning
  - Higher rates of anxiety, depressive symptoms

*see appendix for additional examples*





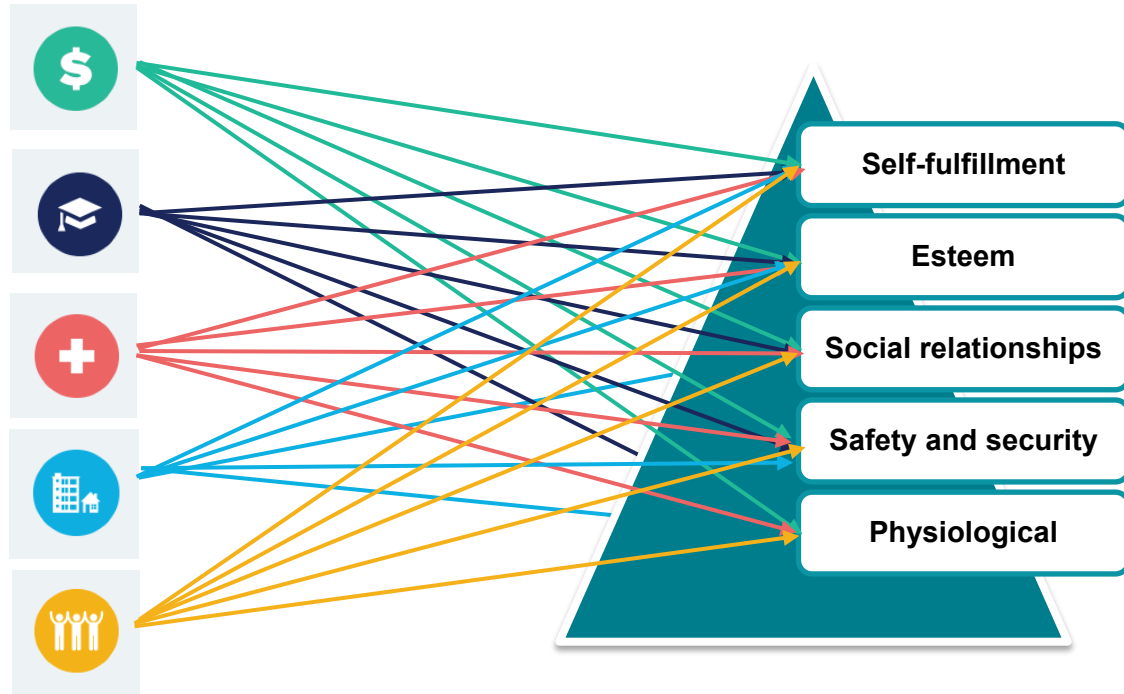
# Social determinants of health

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- Economic stability
- Education Access and Quality
- Health Care Access and Quality
- Neighborhood and Built Environment
- Social and Community Context



# How social determinants of health create unmet needs



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# Financial hardship

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- Stress and decision-making
- Risking long-term injury for fear of losing income
- Balancing priorities to afford living expenses



# Where workers live

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- Accessing transportation to work
- Accessing transportation to healthcare
- Access to rehabilitation services or safe spaces to exercise



# Unsafe working conditions

- Lack of psychological safety
  - Fear of losing job
  - Workplace discrimination
  - Healthcare discrimination
  - Lack of trust in employer
  - Lack of trust in the organization, healthcare system
- Lack of physical safety
- Lack of support in seeking help for workplace problems



# Aging populations

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- Age-related health conditions
- Lack of social support at work
- Sense of purpose from work



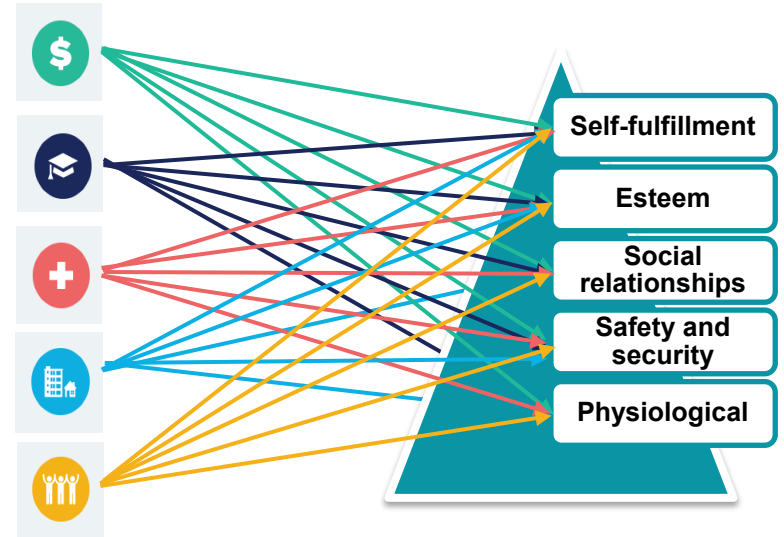
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# Existing strategies used by RETAIN states

- What are some examples in which you address unmet needs among RETAIN participants?
- How do these strategies relate to social determinants of health?



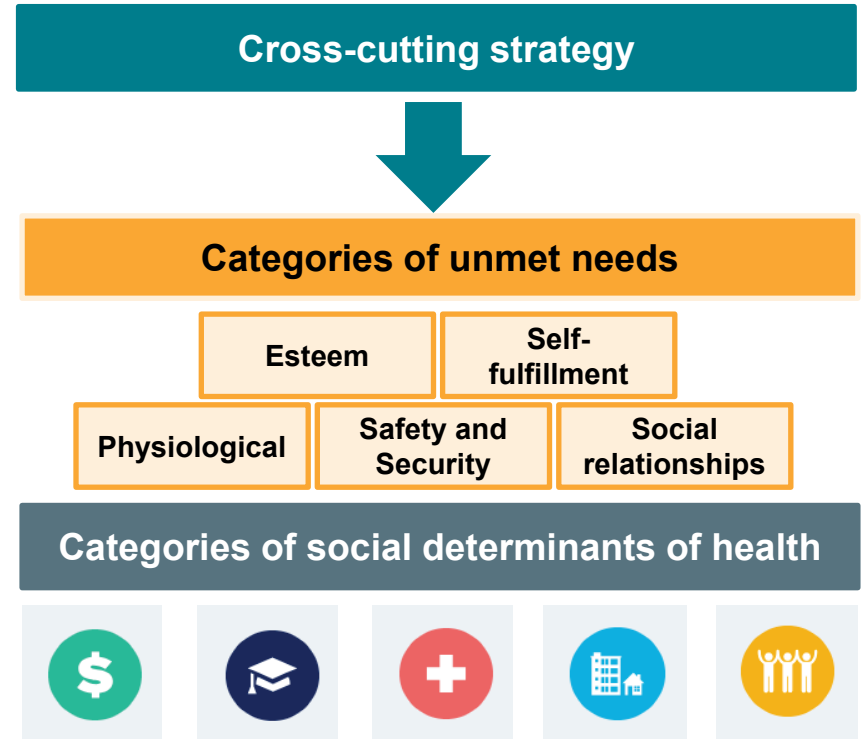
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# Group brainstorm to generate cross-cutting strategies

- What cross-cutting strategy can I use to address **participants' unmet needs**?
- How can this strategy be used **across different categories of unmet needs**?
- When implementing this strategy, what factors should I consider related to **different social determinants of health**?





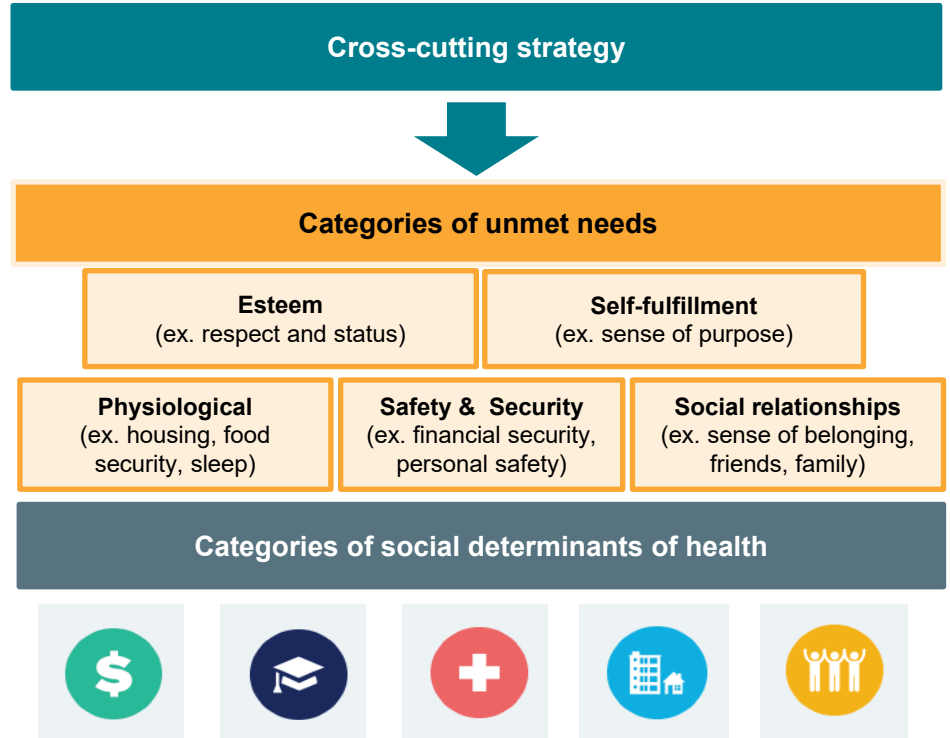
# Breakout Room Instructions

**Roles:** Each breakout room should assign one member as notetaker and one member to report out to larger group after breakout rooms

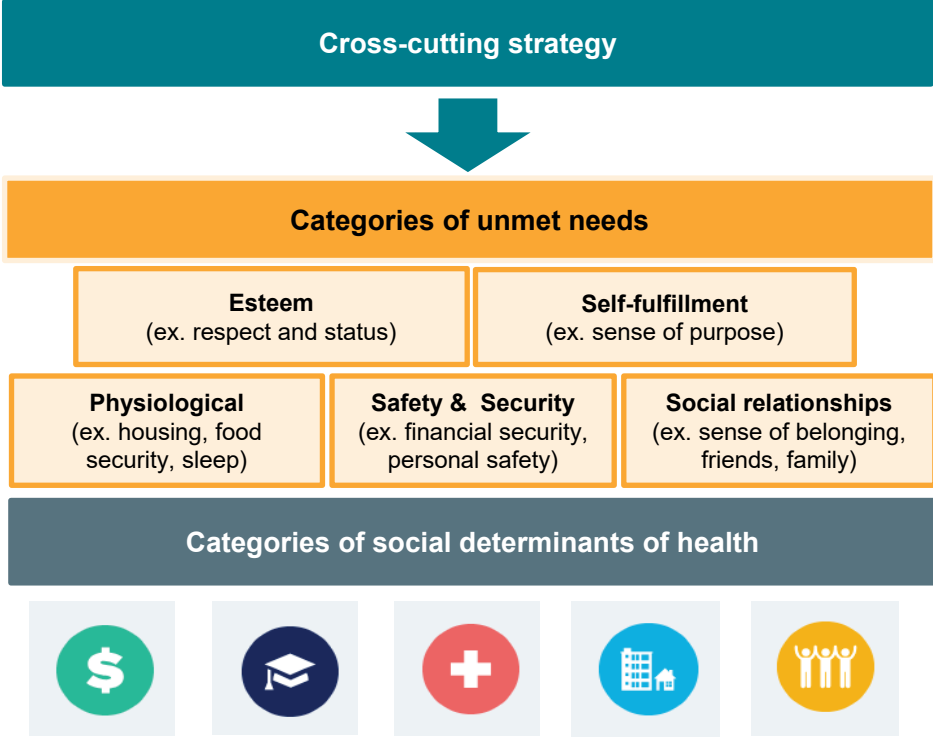
**Task:** Generate 1-2 strategies cross-cutting strategies that states could use for RETAIN participants.

**For each strategy, consider:**

- How can this strategy be used **across different categories of unmet needs?**
- When implementing this strategy, what factors should I consider related to **different social determinants of health?**



# Report Out Discussion



# Thank you!

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- **Contact information:**  
[jrfern14@terpmail.umd.edu](mailto:jrfern14@terpmail.umd.edu)

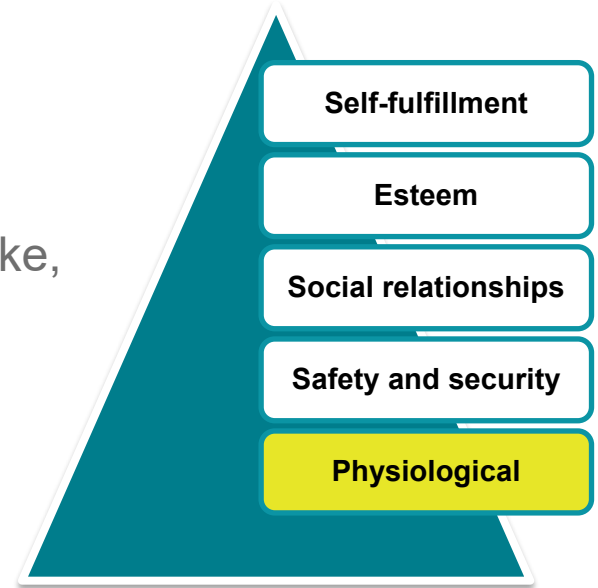
# Appendix

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# Consequences of unmet needs

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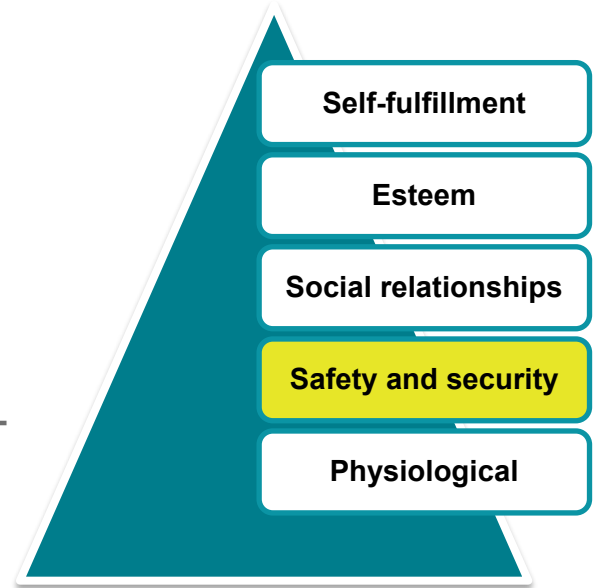
- **Food insecurity** → higher risk of anxiety, depression<sup>2</sup>, hypertension, and diabetes<sup>3</sup>
- **Sleep deficiency** → higher risk of heart disease, kidney disease, high blood pressure, diabetes, stroke, obesity and depression<sup>4</sup>
- **Lack of housing** → higher risks of illness, hospitalization, and earlier mortality<sup>5</sup>



# Consequences of unmet safety and security needs

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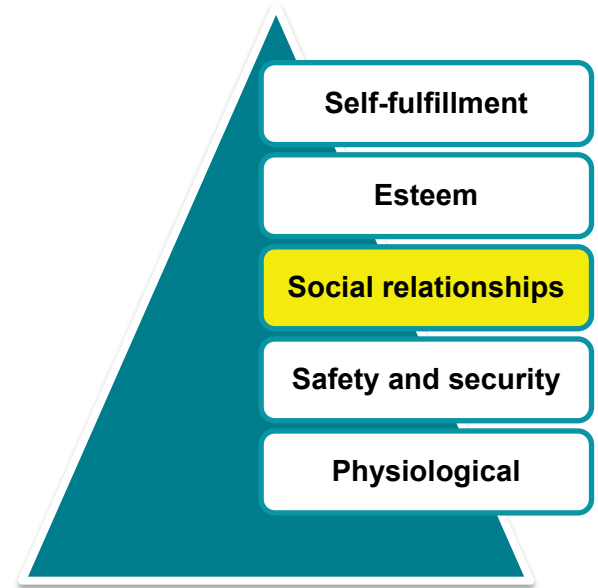
- **Financial difficulties** → chronic pain, chronic medical conditions, poorer self-rated health, sick days, and depressive symptoms<sup>6</sup>
- **Job loss** → higher risk of developing stroke, heart attack, heart disease, or arthritis and depression<sup>7</sup>
- **Lack of neighborhood safety** → poorer daily well-being, increased sensitivity to daily stressors<sup>8</sup> and higher risk of cardiovascular disease<sup>9</sup>



# Consequences of unmet social relationships needs

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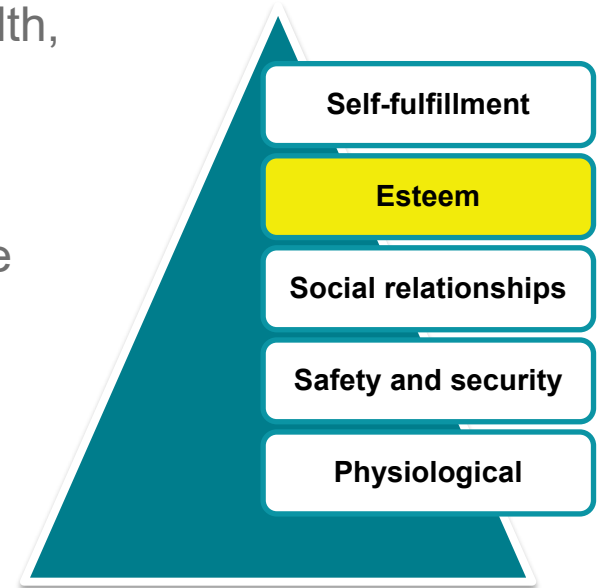
- **Poor social relationships** → higher risk of heart disease, risk of stroke<sup>10</sup>
- **Loneliness** → higher rates of depression, anxiety, and suicide<sup>10</sup>
- **Social isolation** → poorer cognitive function at 4-year follow-up<sup>11</sup>



# Consequences of unmet esteem needs

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- **Everyday discrimination** → poorer-self-rated health, higher risk of chronic disease, greater depressive symptoms and stress<sup>12</sup>
- **Low perceived social status** → higher prevalence of angina, diabetes, respiratory illness, poor self-rated-health, and depression<sup>13</sup>

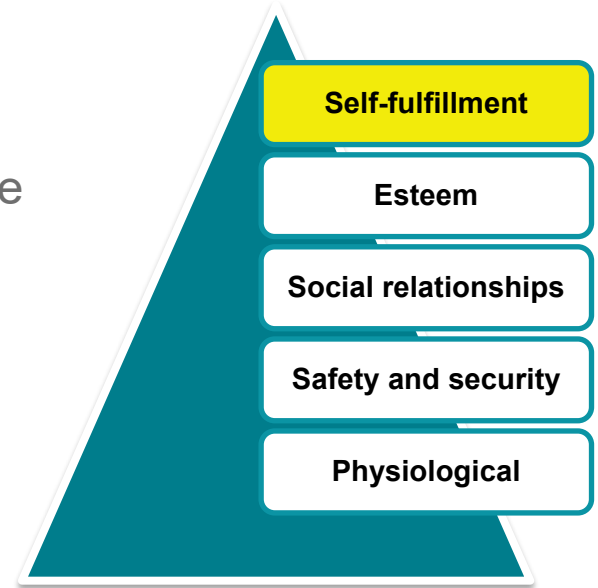




# Consequences of unmet self-fulfillment needs

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- **Lower sense of purpose** → higher risk of cardiovascular disease<sup>14</sup> and dementia<sup>15</sup>
- **Lower sense of purpose** → higher risk of all-cause mortality at 8-year follow-up<sup>16</sup>



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