

A graphic of a spiral-bound notebook with a blue cover and a white page. The page contains a blue rectangular box with white text. The text is centered and reads "METHODOLOGY" and "Work Disability Prevention". Below the box, the author's name and affiliation are listed.

METHODOLOGY

Work Disability Prevention

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A graphic of a spiral-bound notebook with a blue cover and a white page. The page contains a blue rectangular box with white text. The text is centered and reads "Intervention studies", "Cross-jurisdictional comparisons", and "Outcome measures".

Intervention studies

Cross-jurisdictional comparisons

Outcome measures

Take home message

- Intervention studies are very time-consuming, but worth the effort.
- Study both process and outcomes.
- Develop common language.
- Discuss relevant outcome measures.



Intervention studies for Work Disability Prevention



Why intervention research?

Kristensen TS. Occup Environ Med 2005;62:205-210

Four good reasons for doing intervention research

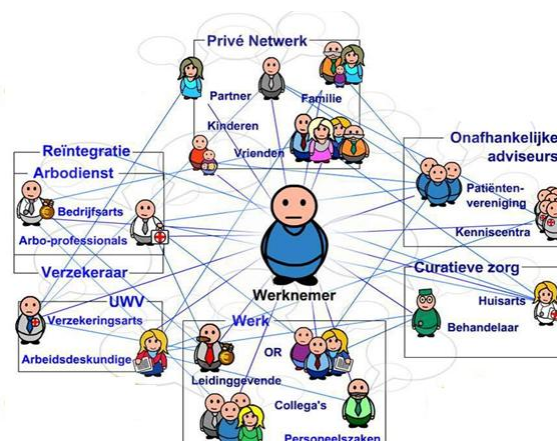
- Can lead to conclusive *causal evidence* (positive AND negative causal effects)
- Demonstration of *feasibility*
- The power of the *practical example*
- Researchers and practitioners (workplaces/ settings) may *learn* from the process

Common problems in intervention research

- No clear theoretical basis (often intuition, experience)
- No criteria on intervention duration, frequency, intensity
- Too little focus on the intervention process
- Too little attention paid to sample selection/recruitment
- No control group (often no randomization)
- Follow-up time arbitrary and almost always too short
- Statistical analyses often inadequate

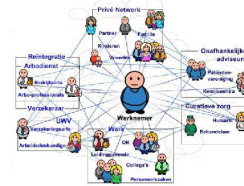
(Goldenhar & Schulte, 1994 and others since)

Challenging WDP intervention studies



Challenging WDP intervention studies

far more complex
far more unpredictable
far more difficult to describe
far more difficult to replicate
than a pill.

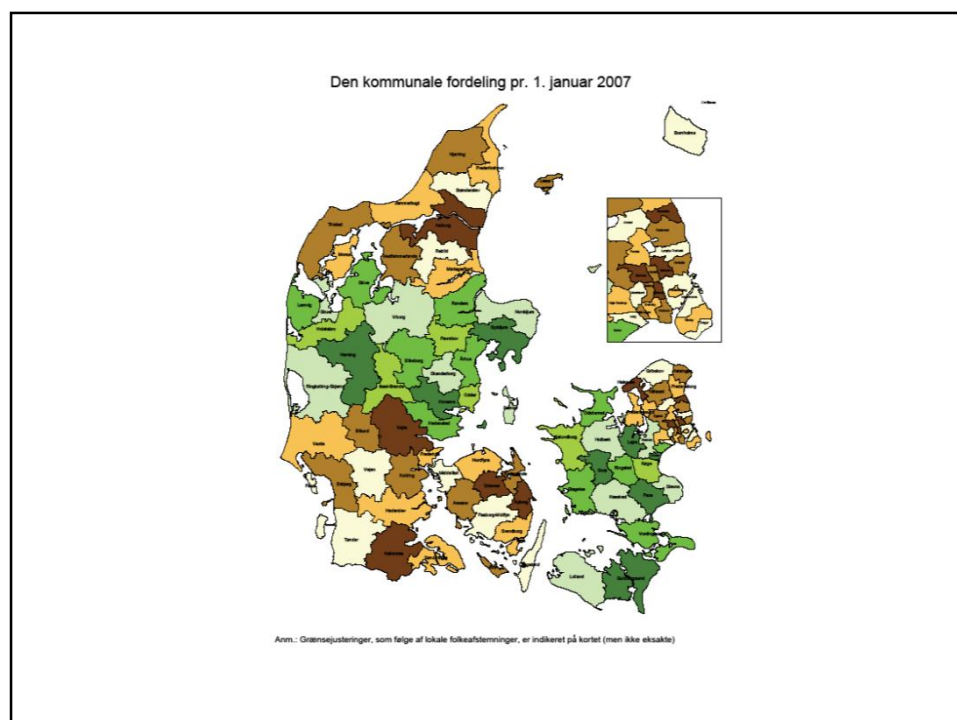
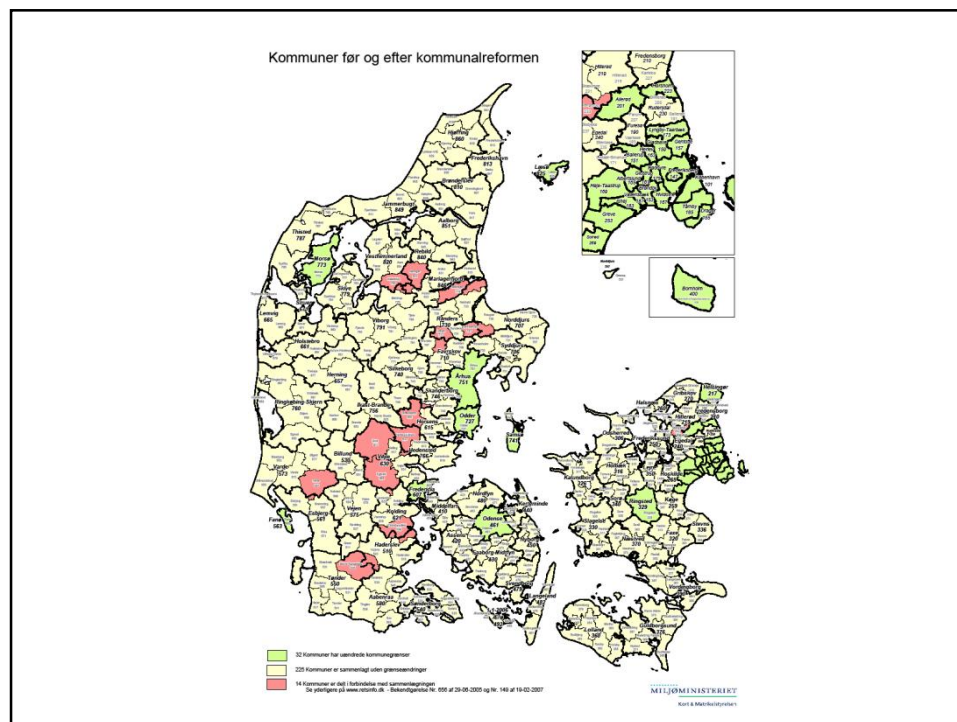


What about implementation?

Ute Bültmann · David Sherson · Jens Olsen ·
Carl Lysbeck Hansen · Thomas Lund ·
Jørgen Kilsgaard

10,666 per person at 12 months follow-up. *Conclusions* Workers on sick leave for 4–12 weeks due to MSD who underwent “CTWR” by an interdisciplinary team had fewer sickness absence hours than controls. The economic evaluation showed that—in terms of productivity loss—CTWR seems to be cost saving for the society.





Changing context

▪ Political, juridical, economical developments

- 2005 local government reform, effective in 2007
- 14 counties “replaced” by 5 regions
- 271 municipalities “replaced” by 98 municipalities
- regions and municipalities committed by law to collaborate
- regions responsible for health care organization
- municipalities responsible for prevention and rehabilitation

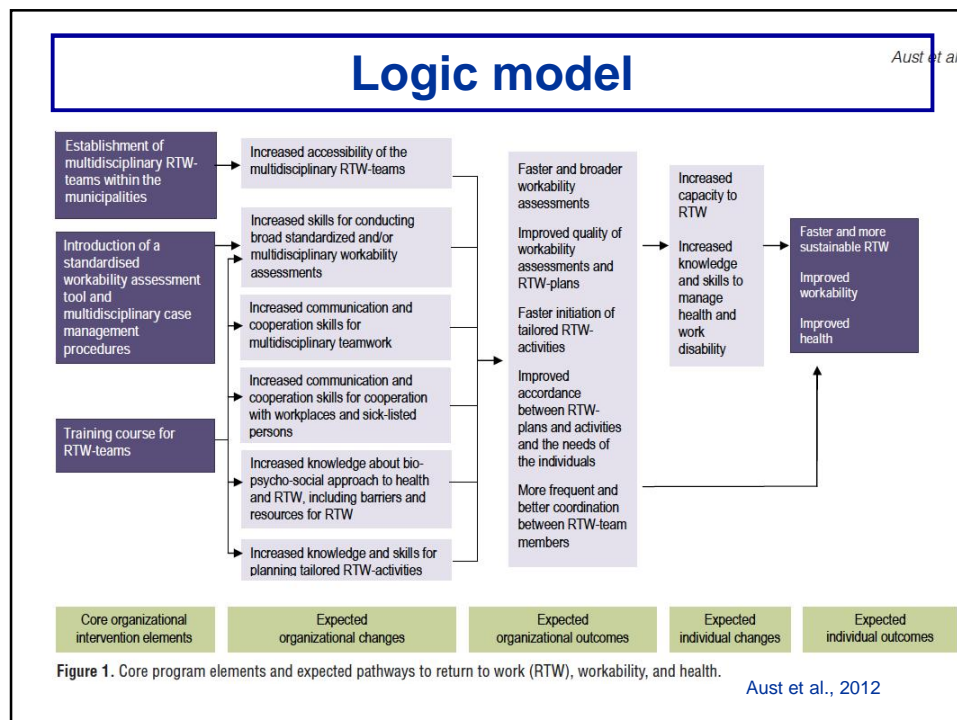
Implementation AND Effect

Implementation is just as important as effect.

Effect is just as important as implementation.

It doesn't help that the pill works, if the patient doesn't take it.

It doesn't help that the patient takes the pill, if it has no effect.



Original article

Scand J Work Environ Health. 2015;41(6):529–541. doi:10.5271/sjweh.3528

Implementation of the Danish return-to-work program: process evaluation of a trial in 21 Danish municipalities

by Birgit Aust, PhD,¹ Maj Britt D Nielsen, PhD,² Gry Grundtvig, MSc,² Helle L Buchardt, MPH,¹ Linnea Ferm, MSc,³ Irene Andersen, MSc,⁴ Trine L Lund, MSc,⁵ Martin Ohmann Claudio Jelle, MSSc,⁶ Malene F Andersen, PhD,¹ Jørgen V Hansen, PhD,¹ Torill Tverborgvik, PhD,⁷ Trine Helverskov, MSc,⁸ Jakob Bue Bjørner, PhD,^{1,10,11} Reiner Rugulies, PhD,^{1,9,11} Palle Ørbæk, DrMedSc,¹² Glen Winzor, MSc,¹ Ute Bültmann, PhD,¹³ Otto M Poulsen, DrVetSc¹



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Process evaluation of a problem solving intervention to prevent recurrent sickness absence in workers with common mental disorders



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No implementation or no effect?

THEREFORE:

- Study all the steps in the intervention process.
- Study facilitating factors as well as barriers.
- Use qualitative as well as quantitative methods.

Work Disability Prevention

Cross-jurisdictional comparisons

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Short Report

Cross-national comparisons of sickness absence systems and statistics: towards common indicators

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We aimed to identify common elements in work sickness absence (SA) in Spain, Sweden and The Netherlands. We estimated basic statistics on benefits eligibility, SA incidence and duration and distribution by major diagnostics. The three countries offer SA benefits for at least 12 months and wage replacement, differing in who and when the payer assumes responsibility; the national health systems provide health care with participation from occupational health services. Episodes per 1000 salaried workers and episode duration varied by country; their distribution by diagnostic was similar. Basic and useful SA indicators can be constructed to facilitate cross-country comparisons.

Common indicators?

Gauge the feasibility of eventually harmonizing and standardizing data and terminology for comparative research on RTW policies and practices.

Parameters

- Definition of sick leave
- Sick leave certification
- Most recent relevant regulatory reform
- Maximum duration
- Minimum sick pay
- Prerequisites for sick pay
- Waiting period (days)
- Insurance payer
- Care provider
- Time to RTW
- Part-time leave allowed



Similarities – 3 countries

- Sickness absence benefits for at least 12 months and wage replacements.
- National health systems provide health care.
- Distribution of episodes by diagnosis similar.

Differences – 3 countries

- Who and when payer assumes responsibility.
- Episodes per 1000 salaried workers and episode duration varied.

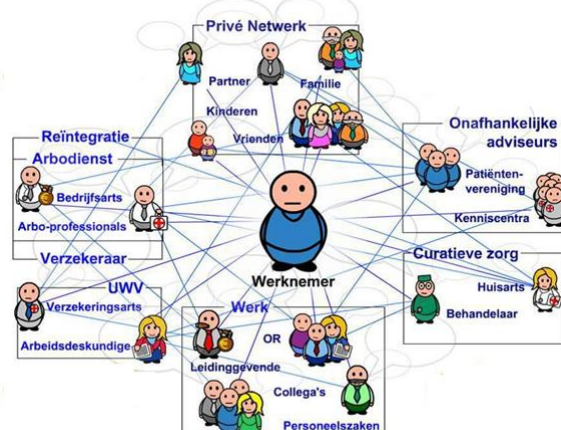
One language, one indicator?

- Important: *common terminology!*
- Despite differences: enough ground on which a few, basic, but useful indicators of SA can be constructed to facilitate comparison.
- Next step: *reaching out* to other jurisdictions.

Work Disability Prevention

Outcome measures

Stakeholder perspectives



What is "successful" RTW?

- Perspectives of **key stakeholders** regarding definition of successful RTW after sickness absence related to CMD

Hees et al., 2012

What is "successful" RTW?

- Perspectives of **key stakeholders** regarding definition of successful RTW after sickness absence related to CMD
- Occupational physicians, supervisors, employees
- Focus groups & interviews (N=57); Questionnaires (N=178)
- 11 content clusters & 52 unique criteria identified

Hees et al., 2012

Different perspectives

- **Employees**
 - Sustainability
 - Job satisfaction
 - Work-home balance
 - Mental functioning
- **Occupational physicians, supervisors**
 - Sustainability
 - At-work functioning



Current RTW outcomes may not adequately reflect key stakeholder perspectives!

Hees et al., 2012

Take home message

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