

Vocational rehabilitation performed with multidisciplinary assessments and acceptance and commitment therapy to promote return to work and increased employability: A randomized controlled trial

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Background

- In 2009 the social insurance system in Sweden was reformed and a maximum time in the sick-leave reimbursements were introduced
 - 40 000 people on long term sick-leave were transferred to the Swedish Public Employment Service (SPES) to have their work ability assessed

Purpose of the Study

The aim of this study was to investigate the effects on return to work or changes in employability for people on long-term sick leave due to mental illness and/or chronic pain.

The objective was to analyze effects of two types vocational rehabilitation interventions.

Methods

The study was performed as an RCT, attendants were randomized to either:

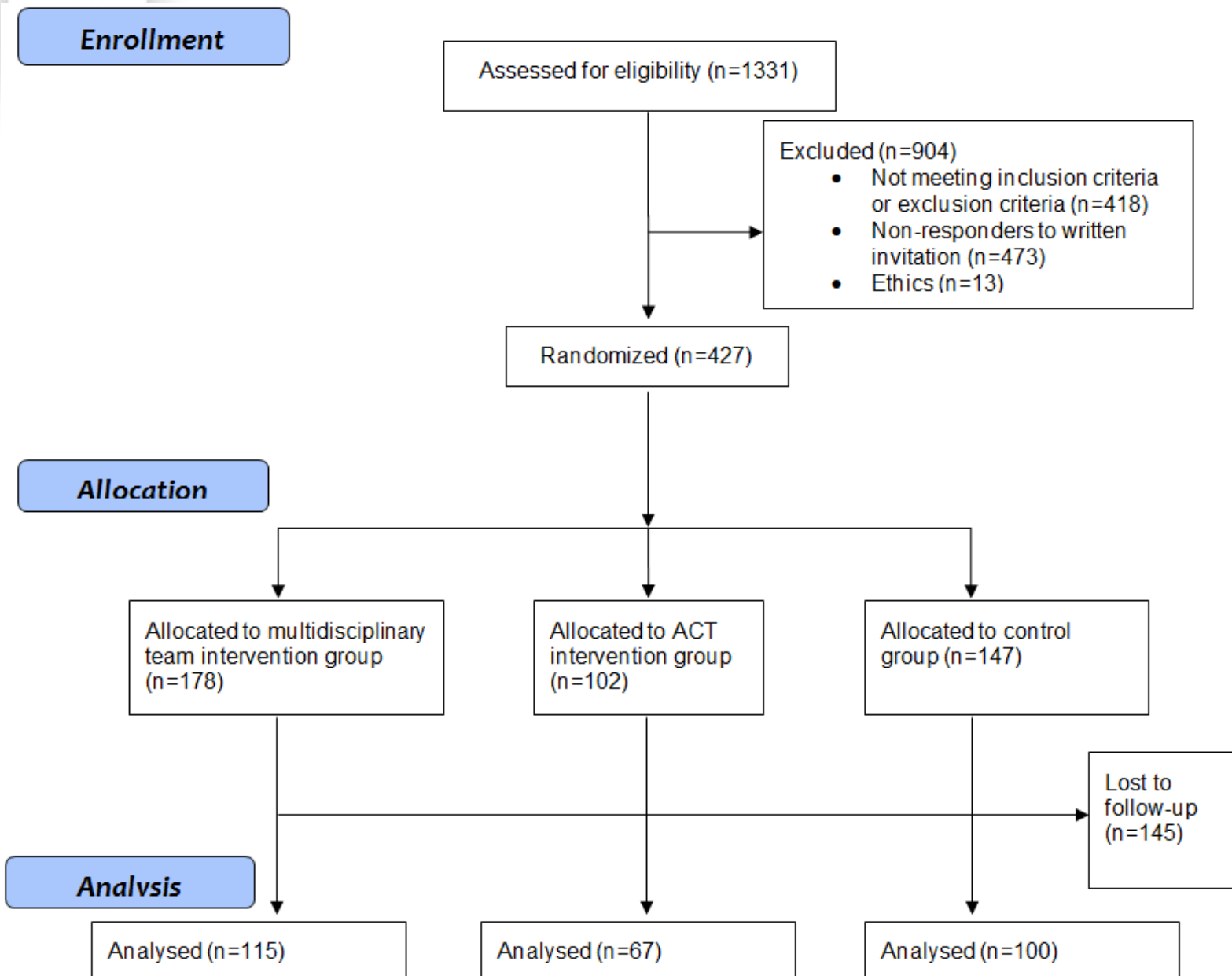
- A multidisciplinary team assessment and treatment intervention (MDT)
- An unimodal treatment with Acceptance and Commitment Therapy (ACT) provided by a psychologist
- Control (Treatment as usual)

Inclusion Criteria

- Between 20-64 years of age
- Being on sick-leave for mental illness and/or pain
- No current suicidal risk
- No current alcohol/substance abuse
- Not taking part in psychotherapy or vocational rehabilitation program
- First year: only women



Flow chart



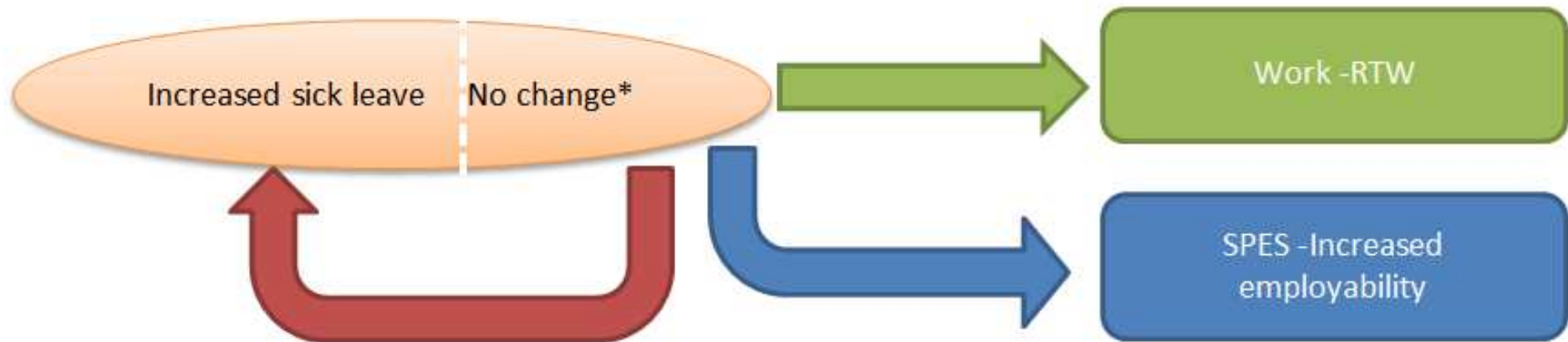
Study participants at baseline

Sex, %	Female	93.9
	Male	6.1
Age, mean (SD)	Years	48.7 (8.3)
Employment contract, %	Employed	62.8
	Not employed	37.2
Extent of sick leave, %	Full time	55.1
	Part time	44.9
Years on sick leave, mean (SD)	Years	7.8 (3.2)

Outcome measure (1 year after randomization)

- ❖ Return to work (RTW): was defined as an increase in salary due to more work.
- ❖ Increased employability: Increased availability for work, such as increased compensation from SPES
- ❖ Negative: If (part-time) salary was reduced or stopped or if it was an increased compensation from sick leave.
- ❖ No change: No change in salary, employability or sickness benefit.

Outcome measures (1 year after randomization)



*Reference category

Analyses

- Descriptive statistics
- Multinomial logistic regressions:
 - used comparing a negative outcome, increased employability and RTW to those with no changes as a reference category.
 - multinomial logistic regressions were also adjusted for other factors.

Outcome in different intervention groups

Outcome, %	MDT group	ACT group	Control group	Overall
RTW	31.3	17.9	16.0	22.7
Increased employability	27.0	35.8	14.0	24.5
Negative outcome	4.3	9.0	17.0	9.9
No change	37.4	37.3	53.0	42.9

Conclusions

- The results implied that it seems to be possible to increase RTW among people on long-term sick leave due to mental illness and/or chronic pain with a multidisciplinary team rehabilitation.
- Multidisciplinary team rehabilitation and sole ACT seems to be useful for increasing employability and stepwise move people through the welfare system
 - eventually towards RTW.



Thank you!

Erik Berglund