

Employers need to tackle culture of ignorance around breast cancer survivors who work

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Employers need to be more aware of the capabilities of women affected by breast cancer and provide them with better support, backed by employment directives and occupational health policies, according to a paper in the November issue of the *European Journal of Cancer Care*.

A review carried out by Dr Maggi Banning, from Brunel University, Uxbridge, UK, also showed that healthcare professionals need to provide [breast cancer patients](#) and survivors with better information about the best time to return to work.

Dr Banning reviewed ten studies on the employment experiences of 1,181 women affected by the disease from the USA, Canada, UK, Sweden and Denmark published between 1991 and 2010.

"Employment is an important factor in the lives of people with cancer as a return to work is often associated with a return to normality" says Dr Banning, a senior lecturer in clinical practice at the University.

"But it is clear that there are considerable differences in women's experiences of returning to work. Some positive working practices were reported, but other organisations were guilty of a culture of ignorance. Many of the [negative experiences](#) centred on the [unrealistic expectations](#) and inflexibility of some employers, lack of support from colleagues and mistaken assumptions about the woman's physical appearance."

Key findings of the study included:

Some women felt that returning to work was a welcome distraction from life as a [cancer patient](#) and provided a sense of normality, structure to their day, belonging, identity and [social connections](#). However, others were apprehensive because of low perceptions of their [physical fitness](#) and work capacity after treatment and concerns about what their employer would expect of them.

[Financial pressures](#) were a common driver, with studies estimating that half the women could no longer afford to remain off work. Some women even missed scheduled treatment sessions as it would have meant taking time off work. Lack of sick pay and concerns about losing their job were also common.

While many women felt positive about returning to work, some reported that they had re-evaluated their lives after their diagnosis and felt that work no longer held the same importance it used to. The work aspirations of some women were also reduced.

Coping with cancer or the side effects of treatment, such as fatigue and sickness, often had an impact on the women's health. Loss of confidence and emotional issues also proved problematic for some women.

Women reported that employers' expectations of their work capacity varied, and while some studies found examples of supportive employers and colleagues, this was not always the case. Women in Europe appeared to have a more supportive work environment than those in the USA and Canada.

Some women took up different positions or were able to reduce their working hours so that they could receive treatment and recover from the side effects. However, in some cases, work modifications were refused

and employers were openly hostile, insisting that they should resign from their jobs or retire.

A number of employers judged women by their physical appearance, not realising that up to a quarter of women experience residual fatigue for many months after treatment. Colleagues were also misled by women's [physical appearance](#) and this could lead to lack of sympathy and work-related support.

Dr Banning has come up with a number of recommendations as a result of her review:

Employers need to be better educated to avoid the culture of ignorance that exists within some organisations when it comes to the capabilities of [women](#) affected by [breast cancer](#).

There is room for improvement in the way that healthcare professionals and employers manage the return to work process.

Occupational health departments need to ensure that all cancer survivors have a fitness to work assessment before returning and need to provide managers with realistic guidelines of what they can expect from their employee.

Directives are also needed to influence and change welfare and employment policies to better support and manage the return to work process, including time off to attend treatments and follow-up appointments.

More information: Employment and breast cancer: a meta-ethnography. Banning M. *European Journal of Cancer Care*. 20, pp708 (November 2011). [DOI: 10.1111/j.1365-2354.2011.01291.x](https://doi.org/10.1111/j.1365-2354.2011.01291.x)

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