

How employers can help cancer survivors return to work

January 6 2020, by Stephen Bevan



Credit: AI-generated image ([disclaimer](#))

When I lost a relative to cancer in the late 1970s, people usually viewed a cancer diagnosis with horror. At the time, many treatments were both brutal and unsuccessful. Only [24% of patients survived](#) ten years after treatment. But when I received my own cancer diagnosis over 40 years later, it felt rather different. Now, with screenings, early diagnosis, and

better surgery techniques, [survival rates](#) have improved significantly.

Yet one aspect of [cancer](#) survival which still receives far too little attention is the challenge of returning to work. This can be tough so soon after what is often a debilitating and life-changing treatment—especially if you're expected to perform as you had before diagnosis.

In late 2018, after starting treatment for esophageal cancer, I wrote about how the amount of people returning to work after treatment hadn't kept up with survival rates. Shockingly, [fewer than two-thirds of employees](#) have returned to work, or are still working a year after getting a diagnosis. Barely a year on from my own diagnosis, I have completed my treatment and started my return to work. From my experience, I now understand why this gap remains—and how it can be improved.

Returning to work

Globally there are around [14 million](#) new cancer diagnoses a year—and this is forecast to increase to about [25 million](#) by 2025. Around 15% of people are diagnosed with cancer between [65 and 69 years of age](#). Currently, the average retirement age globally is 65 years of age, but it's set to increase to [67 years of age](#) around the year 2030. This means [around half](#) of those diagnosed with cancer will be of working age.

This means that employees who want or need to continue working after their diagnosis will be more common in future. Yet the data tells us that successfully returning to work is [much harder than it ought to be](#). Some of the barriers that people face are clinical: profound fatigue, lack of stamina, and [other side effects](#) from chemotherapy or radiotherapy [can make working difficult](#). Frequent follow-up appointments and the need to avoid infection can also impede regular attendance and make sudden and unpredictable absences common.

Other barriers are [psychological](#). These might include a lack of confidence, [low self-esteem](#), a fear of what the next CT scan might reveal, and worrying that colleagues see you as unreliable or a burden. Anxiety about being shunned at work, or colleagues not knowing how to talk to you are also [common experiences](#).

While many cancer survivors look well on the outside, the psychological effects of cancer and cancer treatment, or body image anxiety because of scarring or hair loss, can make it harder for workers to return. Yet many can't afford to stop work or even to reduce their hours.

Speaking with other cancer survivors, many agreed there were other hidden barriers that also inhibit a successful return to work. While many cancer patients are absent, employers might take temporary measures to cover their work. This might include hiring a temporary employee, re-allocating work, or even giving a colleague a [temporary promotion](#).

When returning after treatment, some find the process of standing these measure down to be difficult. For example, some worry that colleagues given a temporary promotion might be resentful when they return, and fear it could cause tension or even bullying to happen as a result.

Overcoming barriers

To make a return to work successful, it's important for employers and employees to work together. A [recent study](#) conducted in the Netherlands asked a group of 23 employers, and a group of 29 employees with cancer, to rank the most important things employers can do to support a successful return to work for cancer patients. There were seven areas of strong consensus:

- [emotional support](#) (employers showing interests, concern, and understanding for the person returning to work)

- practical support (adapting tasks, the workplace, or working hours)
- allowing sufficient sick leave, and not putting pressure on those returning to work too quickly
- making a return to work plan with input from the employee
- employers adjusting their expectations regarding performance and work intensity
- assessing workability (meaning there's a balance with work demands and capability)
- and showing appreciation, by helping the employee feel they're wanted back.

Employers might also help by providing access, even on a temporary basis, to flexible working, monitoring workload and work intensity, making sensible workplace adjustments—such as flexible working, home working, staggered start and finish times—and taking care when setting performance targets.

Being at work is necessary to both earn money and be able to socialize. Work can even have therapeutic benefits for people living with [chronic physical and mental health conditions](#), as fulfilling work can provide purpose, social support and boost psychological resilience. But for [cancer survivors](#), the physical and emotional effects of both the symptoms and treatment need special care from employers. Getting it wrong can exacerbate discomfort and uncertainty. Getting it right can be liberating and open up new opportunities for everyone involved.

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