



# **Study of the Evolution of the Socio-Economic Position of Belgian Workers With Cancer**

## ***Measures and determinants of return-to-work after cancer***

***European Conference for Socio-professionnal rehabilitation***  
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# Objectives

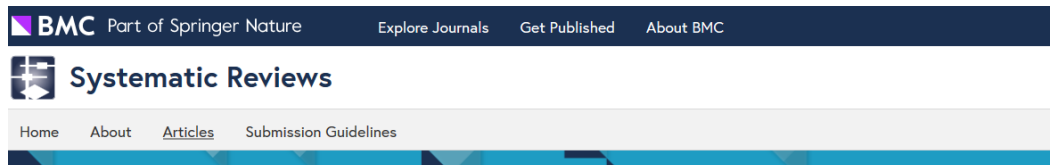


- Quantify the return-to-work after cancer
- Identify the determining factors of return-to-work after cancer
- Suggest measures to improve and facilitate the return-to-work after cancer



# Material, methods, results 2 literature reviews


## Identify the determining factors (at the individual level)



- Abstract
- Background
- Methods
- Results
- Discussion
- Conclusions
- Declarations
- References
- Comments

Research | [Open Access](#) | [Open Peer Review](#)

### Barriers and opportunities for return-to-work of cancer survivors: time for action—rapid review and expert consultation

Régine Kiasuwa Mbengi , Renée Otter, Katrien Mortelmans, Marc Arbyn, Herman Van Oyen, Catherine Bouland and Christophe de Brouwer

*Systematic Reviews* 2016 5:35

<https://doi.org/10.1186/s13643-016-0210-z> | © Kiasuwa Mbengi et al. 2016

Received: 30 September 2015 | Accepted: 10 February 2016 | Published: 24 February 2016

- > Age, sexe, level of education, level of income
- > cancer-related: site, stage, treatment, physiological and psychological symptoms
- > work-related: sector of activity, size of the company, relation with colleagues, head of service
- > subjective health and evaluation

## Identify/compare the existing measures in EU countries

Journal of Cancer Policy 15 (2018) 128–133



Contents lists available at [ScienceDirect](#)

Journal of Cancer Policy

journal homepage: [www.elsevier.com/locate/jcpo](http://www.elsevier.com/locate/jcpo)



How do social security schemes and labor market policies support the return-to-work of cancer survivors? A review article

Régine Kiasuwa Mbengi<sup>a,b,\*</sup>, Michele Tiraboschi<sup>c</sup>, Christophe de Brouwer<sup>b</sup>, Catherine Bouland<sup>b</sup>

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- Financial incentives and vocational rehabilitation
- Collaboration and coordination of actors
- Integration of the socioprofessional discussion in the care as usual
- Mindset regarding productivity/ performance





# Material, methods, results

## 3 cohort studies

- **Trough:**
  - The Permanent sample (EPS from AIM-IMA)
  - The disabled workers due to cancer (data from NIHDI)
  - Population-based cohort study (CR+ CBSS)

### Utilisation de l'échantillon permanent (eps) pour l'étude du retour au travail après cancer. Défis et opportunités pour la recherche

*The use of the permanent sample (eps) to study the return-to-work after cancer. Challenges and opportunities for research*

*R. Kiasuwa Mbengi<sup>1,2</sup>, R. Otter<sup>1</sup>, E. Abatih<sup>3</sup>, E. Goetghebeur<sup>3</sup>, C. Bouland<sup>2</sup> et C. de Brouwer<sup>2</sup>*

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Open Access

Research

### BMJ Open Assessing factors associated with long-term work disability after cancer in Belgium: a population-based cohort study using competing risks analysis with a 7-year follow-up

Régine Levo Kiasuwa Mbengi,<sup>1,2</sup> Alina Mioara Nicolaie,<sup>3</sup> Els Goetghebeur,<sup>3</sup> Renee Otter,<sup>1</sup> Katrien Mortelmans,<sup>4</sup> Sarah Missinne,<sup>1</sup> Marc Arbyn,<sup>5</sup> Catherine Bouland,<sup>2</sup> Christophe de Brouwer<sup>2</sup>

### Archives of Public Health

The EMPCAN Study: Study of The Evolution of The Socio-Economic Position of Workers With Cancer. Study Protocol of a Population-Based Cohort Study.



# Material, methods, results

## 3 cohort studies

### ■ Trough:

- The Permanent sample (EPS from AIM-IMA)
- The disabled workers due to cancer (data from NIHDI)
- Population-based cohort study (CR+ CBSS)

### 1. EPS (all patients but only a sample)

-> after 5 years, among who survived: 26% are sick listed/disabled, 12% unemployed and 63% do not receive social benefits

-> women are the most at risk forin sick leave/disability and young workers (20-44) are the most at risk for unemployment

### 2. NIHDI (only disabled)

-> overall median time of work disability was 1.59 years (ranging from 0.75 to 4.98 years)

-> after 5 years, 35% were able to work

-> more women were able to work at the end of follow-up, but the men could do so sooner



# Material, methods, results

## 3 cohort studies

### ■ Trough:

- The Permanent sample (EPS from AIM-IMA)
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**1. EPS (n=645, all patients but only a sample)**

**2. NIHDI (n=15.543, only disabled)**

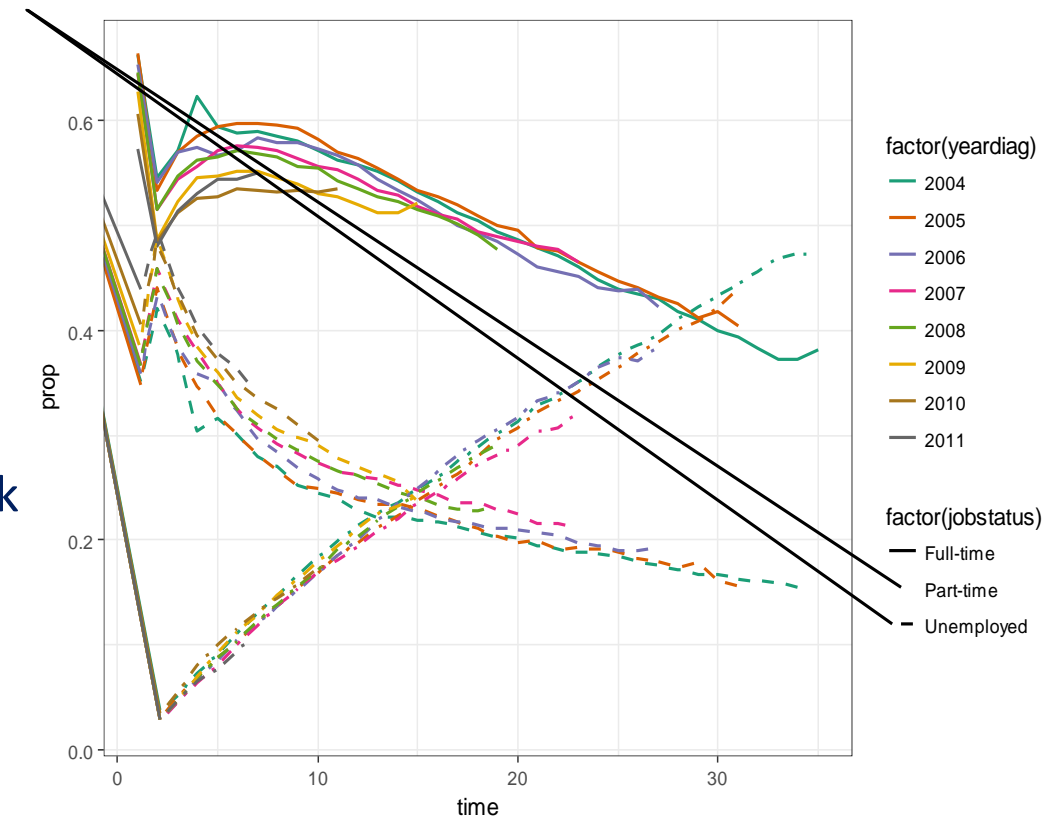
**3. EMPCAN (n=39094, all new cases 2004-2011)**

-> after 5 years, 69% of those who survived were working

(among whom 48% full-time)

-> the reasons of working part-time are disability or carrer break

-> more workers with cancer come back « part-time »



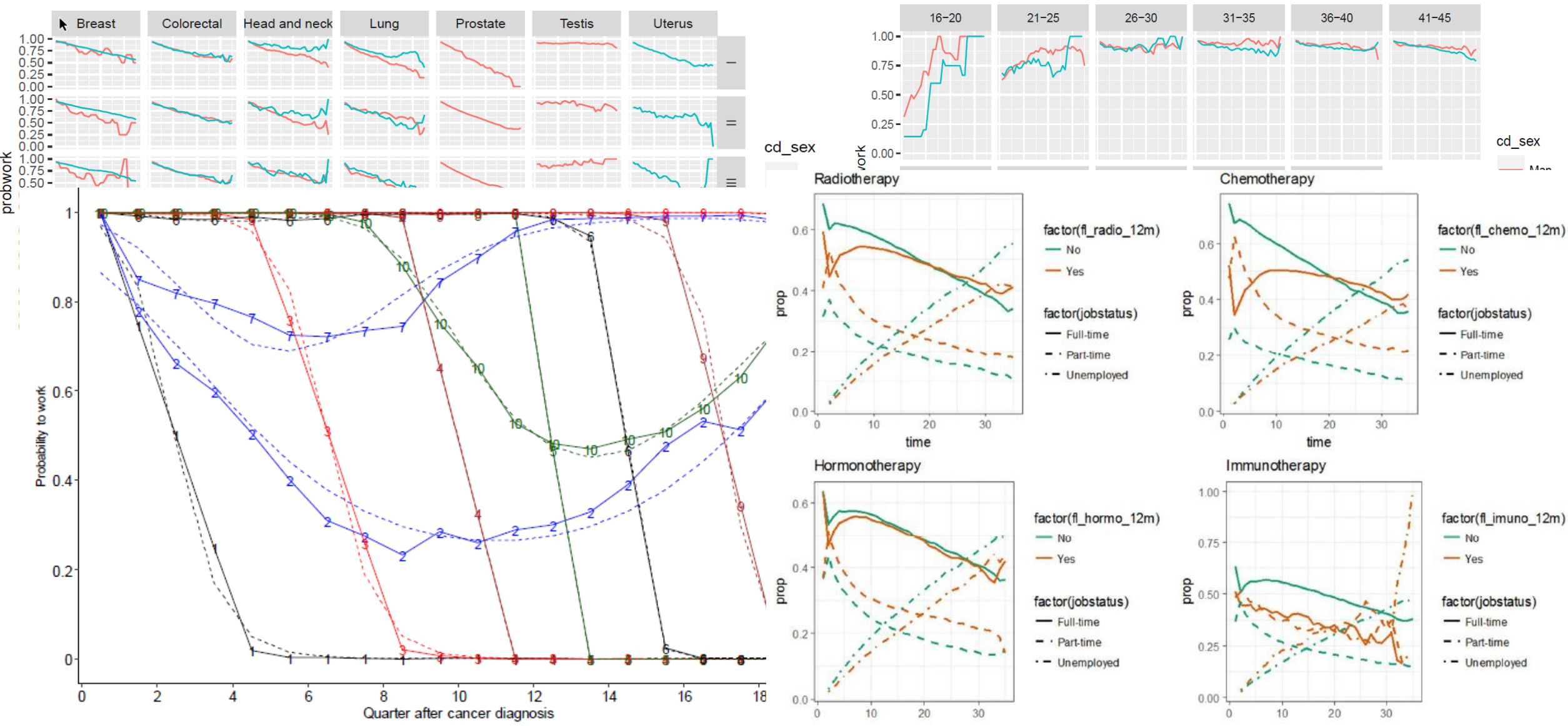




# Material, methods, results

## 3 cohort studies

### 3. EMPCAN (n=39094, all new cases 2004-2011)





# Material, methods, results

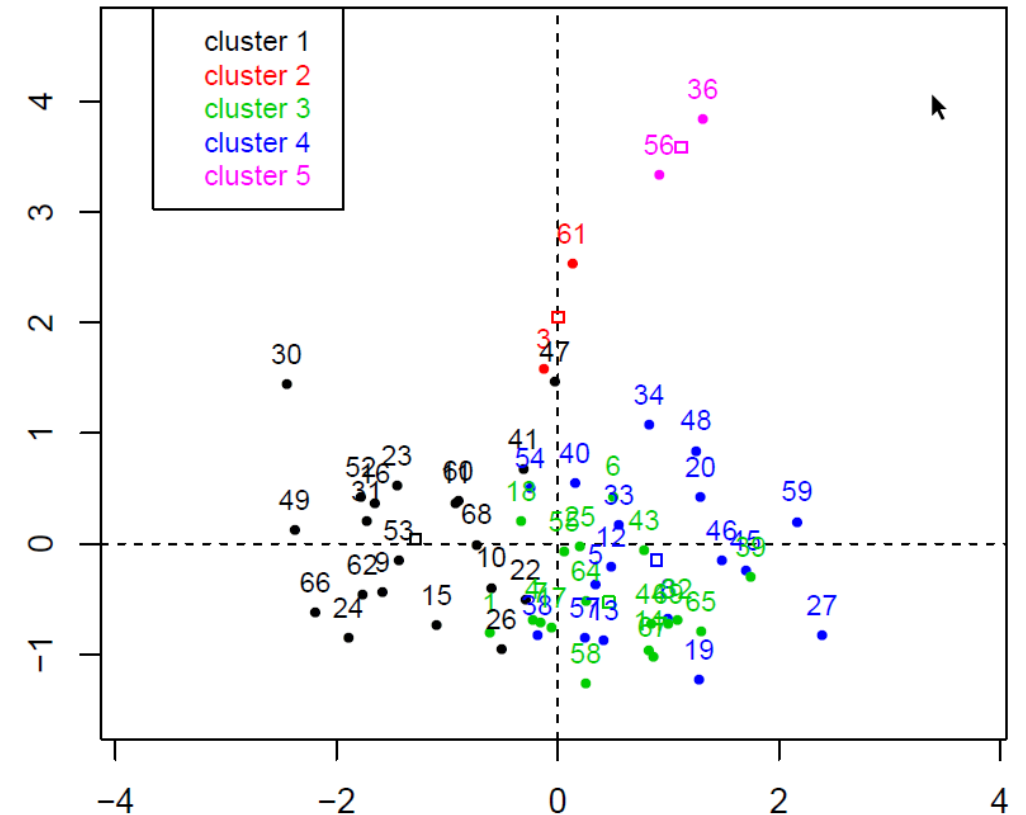
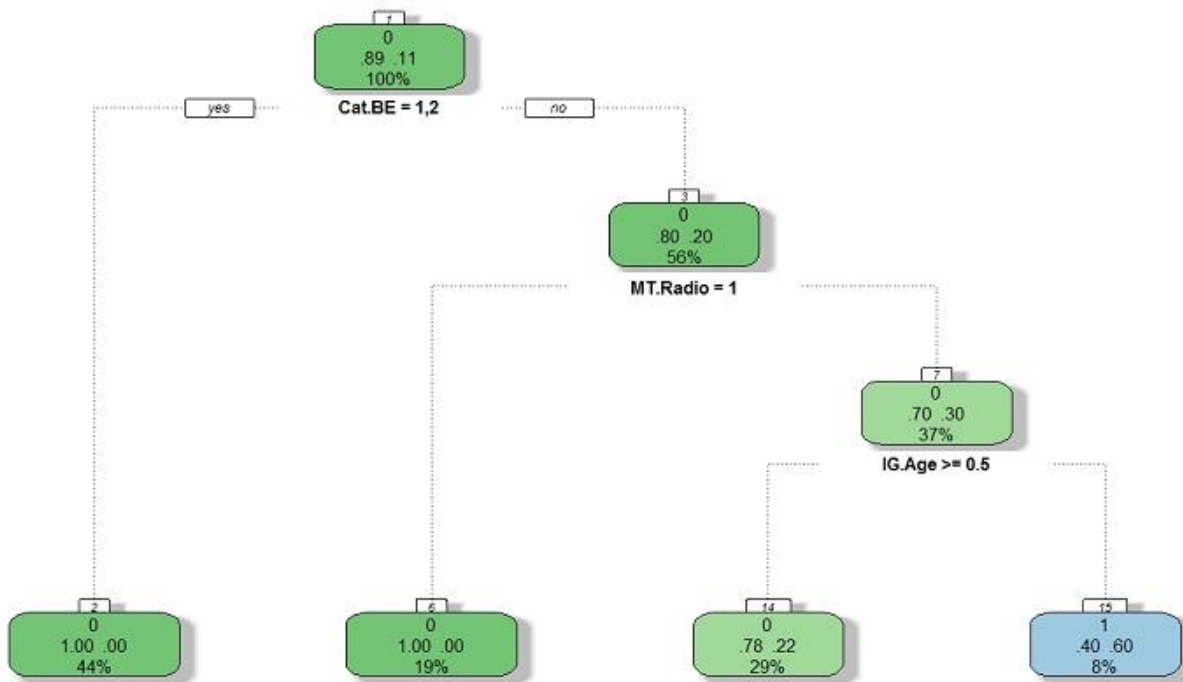
## 1 observational study

### Objectives:

-> to test the feasibility and acceptability of a role for intramuros health professionals in the support to professional rehabilitation

-> to monitor the change/importance in the determining factors

n= 75 patients in 2 hospitals





# Material, methods, results

## 1 observational study

### Objectives:

-> to test the feasibility and acceptability of a role for *intramuros* health professionals in the support to professional rehabilitation

-> to monitor the change/importance in the determining factors

n= 75 patients in 2 hospitals



### MAIN RESULTS

- Patients found it acceptable if no exchange of info with the employer
- Intramuros health professionals have limited capacity to answer work-related questions (e.g. about market law)
- Not necessary for all patients (should not be systematic)
- In the 6 first months, mainly health-related determining factors
- After 6 months, determining factors relate more on (1) subjective health, (2) the work environment and (3) financial issues
- Depression, fatigue and sleep disturbances are regularly reported as unmet needs

# GENERAL CONCLUSIONS

## ▪ Main messages

- > working rates after 5 years similar to those in the general population... but...
- > reasons of part-time working are different
- > (too much) unemployed among young workers (<45 years)
- > it's possible to determine a risk profile (allowing for early identification)
- > the nature of determining factors do vary along the care pathway
- > intramuros health professionals do have a role
- > less financial pressure and more vocational support



# Future research issues

- Quality of the return-to-work
- Underlying reasons of the part-time work
- Tool for early identification + defining RTW pathway that are needs centred
- Integration of vocational support in the care as usual

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*Thank you for your attention!*

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