

Employer Flexibility Key in Breast Cancer Survivors' Return to Work

Employers can play a major role in a patient's recovery from breast cancer, experts say, but they must be willing to be flexible, and communication is crucial.

By Jill Cueni-Cohen

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Returning to work from a breast-cancer diagnosis is extremely important, says Michael Klachefsky, national practice leader of Portland, Ore.-based The Standard's Workplace Possibilities program, which helps keep employees at work and return from disability leave.

"It's a symbol of their recovery, and that's true for all cancer patients, but for women who are dealing with breast cancer, getting back to a level of normalcy has a huge morale and psychological effect," he says. "It really helps people in general."

According to internal data from workplace disability benefits provider Unum, more than twice as many people who have battled breast cancer are returning to work after short-term disability leave. "Cancer is consistently the No. 1 cause of claims for disability products," says Cheryl Greaney, vice president of Medical Operations for Unum. Yearly, cancer accounts for approximately 15 percent of claims, and breast cancer is the most prevalent. "We have noticed that certain cancers, like breast, colon and prostate cancer, have shown tremendous improvement in positive outcomes and death rates have declined."

Greaney attributes better return-to-work rates to social awareness and medical advancements. "American Cancer Society data shows that the incidence and death rates started to decrease in the year 2000, which is when employers started educating their workforce and offering screening tests, like mammograms. And Breast Cancer Awareness Month sheds important light on this battle that hundreds of thousands of people wage each year. In addition, surgeries are more targeted, treatment is less invasive, and recovery can happen sooner, which makes a huge difference in a person's ability to return to work."

While breast-cancer patients on short-term disability leave are having improved outcomes, Unum data shows that there's a drop in the number of patients on long-term disability leave who are coming back to work. Greaney says that this trend may be influenced by some of the same factors that have improved success for people on short-term disability.

Employers can play a major role in a patient's recovery. "Returning to work after cancer treatment is a hallmark day," says Greaney. "We see highly motivated people who want to go back to work for many reasons, including the fact that they need their job for income; it's a very important tie in a survivor's life."

As a disability and productivity consultant for The Standard's Workplace Possibilities, Mary Malone has many experiences to share regarding cancer patients' return to work. "Returning to work when someone is receiving cancer treatment is different than major surgery," she points out, adding that HR leaders need to consider different ways in which they can help get their employee back to work.

"There needs to be a lot of flexibility," Malone says. "There's no control over the reaction to chemo side effects, and flexibility on the side of the employer is what it takes to get the employee back to work. I would never expect or mandate someone to work while they're receiving cancer treatments, but many of them really want to be working, because it keeps them sane during the treatment.

"It's important for the employer to not be restrictive," Malone says. "No strict hours, and no large projects with deadlines, because there may be days when they can't get out of bed, or can't keep food down, or they're experiencing overwhelming fatigue. When someone is on chemo every three weeks, they may be able to work the two weeks following. But as the chemo runs its course, it can become overwhelming, and their ability to work might decrease. Sometimes with cancer treatment there's a decreased blood count that affects their immune system, so they might need to avoid the public work space and work from home."

Malone says that communication with a patient's doctor may be needed to help everyone understand how much is too much. "In physically demanding jobs, I make sure they get the release from their physician. If I need to speak with the physician, I make sure I have a signed consent from the patient first."

Communication is crucial throughout the employee's illness. "If [the employee] is off work and has no communication from supervisors during that time, it's not a good feeling. You don't have to call and ask about their diagnosis or treatment, just make contact to let them know, 'We're thinking about you and hope you're doing OK, and we miss you at work.' A lot of people identify themselves by what they do for a living. That's who they are. That's also their socialization. If they're not having contact with peers at work, it can make a huge difference in someone's sense of well-being."

Disability insurance is another component in recovery that's sometimes overlooked by employers, and most employees don't even want to deal with it in the first place.

"The most important support happens before anyone gets sick at all," says Barry Lundquist, president of [The Council for Disability Awareness](#). "What's most important is to first educate workers about their risks and the importance of planning and having benefits. Relatively few people have disability insurance, because they underestimate their risk of becoming disabled. Breast cancer is a leading cause of disability, but people don't want to think it will happen to them."

Lundquist says that employers should make such benefits available and encourage their employees to take advantage of them. "We have tools to help with that," he notes, pointing to the [Defend Your Income](#) campaign, which helps educate people about their risks through an interactive website.

According to Lundquist, "Out of 310 million, 47 million people have no health insurance, and 100 million people have no disability. You really need both. Someone who gets sick and has

disability and medical insurance in place will have the resources available to pay their bills. It is terrible and stressful to just have medical insurance and not be able to pay bills."

The Council for Disability Awareness recently conducted research with employees regarding the disability divide. "We ask employees, 'What do you think about when you hear the word disability, and what do you think your odds are of becoming disabled? The starkest outcome of that research is that people underestimate how frequently disability happens by tenfold. Women think men are more likely to become disabled, but the opposite is true."

"We encourage employers to purchase long-term disability and critical illness insurance plans for their employees, as well as looking at other ways in their own organization to help employees through the most difficult times in their lives," says Greaney, noting that disability insurance replaces a portion of income when work is missed because of illness or injury. Critical illness insurance pays a lump sum upon diagnosis of a covered illness. "Do you offer life insurance? Can employees donate used time off? Is there an employee assistance program?"

"We have 12 million Americans living with a cancer history," says Greaney, "and the more employers understand the importance of having coverage, the easier it will be to remove [financial] barriers so that people can return to productivity and resume their active lifestyles."