

Stephen Bevan Institute for Employment Studies

Cancer & Employment



- Half of those born after 1960 will receive a cancer diagnosis
- Worldwide, there will be 25m new cancer diagnoses each year by 2030
- About half of those diagnosed are of working age
- Despite improvements in cancer survival, RTW rates are low only 60% return within a year of completing treatment
- What are the barriers to RTW and what are the positive steps which employers, HCPs and OH professionals can take to help make the post-cancer experience of work fulfilling?
- IES & Working With Cancer carried out a survey of 1241 working age cancer survivors

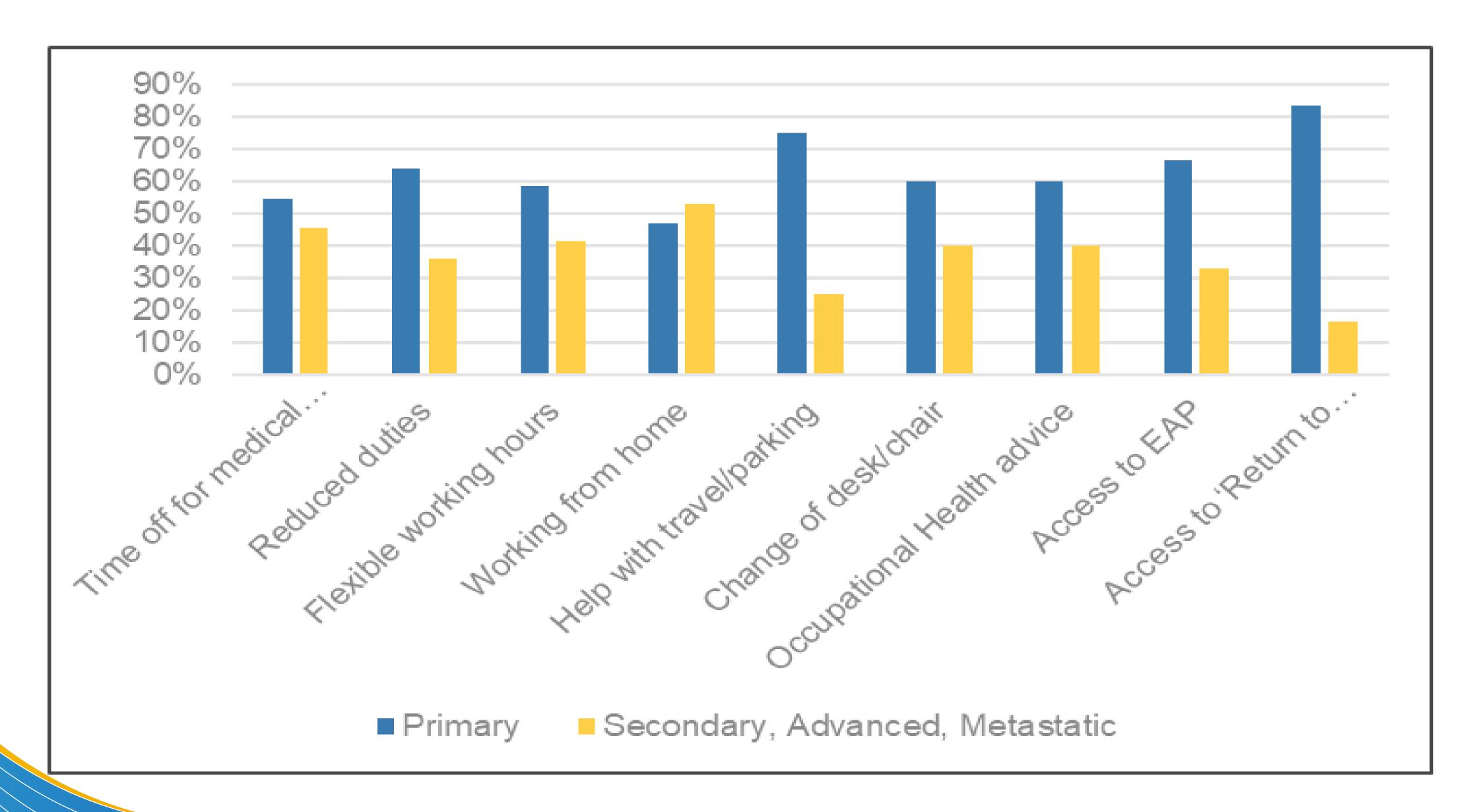
Our Respondents



- Predominantly female, highly educated professionals
- Before their cancer diagnosis, 73% were working full time, but this figure fell to 46% post-treatment
- Before their cancer diagnosis almost 58% were the main 'breadwinner' in their household and, post-treatment, this proportion fell only slightly to 51%
- A total of 72% of our respondents had returned to work after treatment and a further 28% were still having treatment
- Over 97% reported side effects from cancer treatment with fatigue (93%) brain fog (68%), pain (54%), anxiety (60%), loss of confidence (55%) and peripheral neuropathy (43%) the most commonly reported

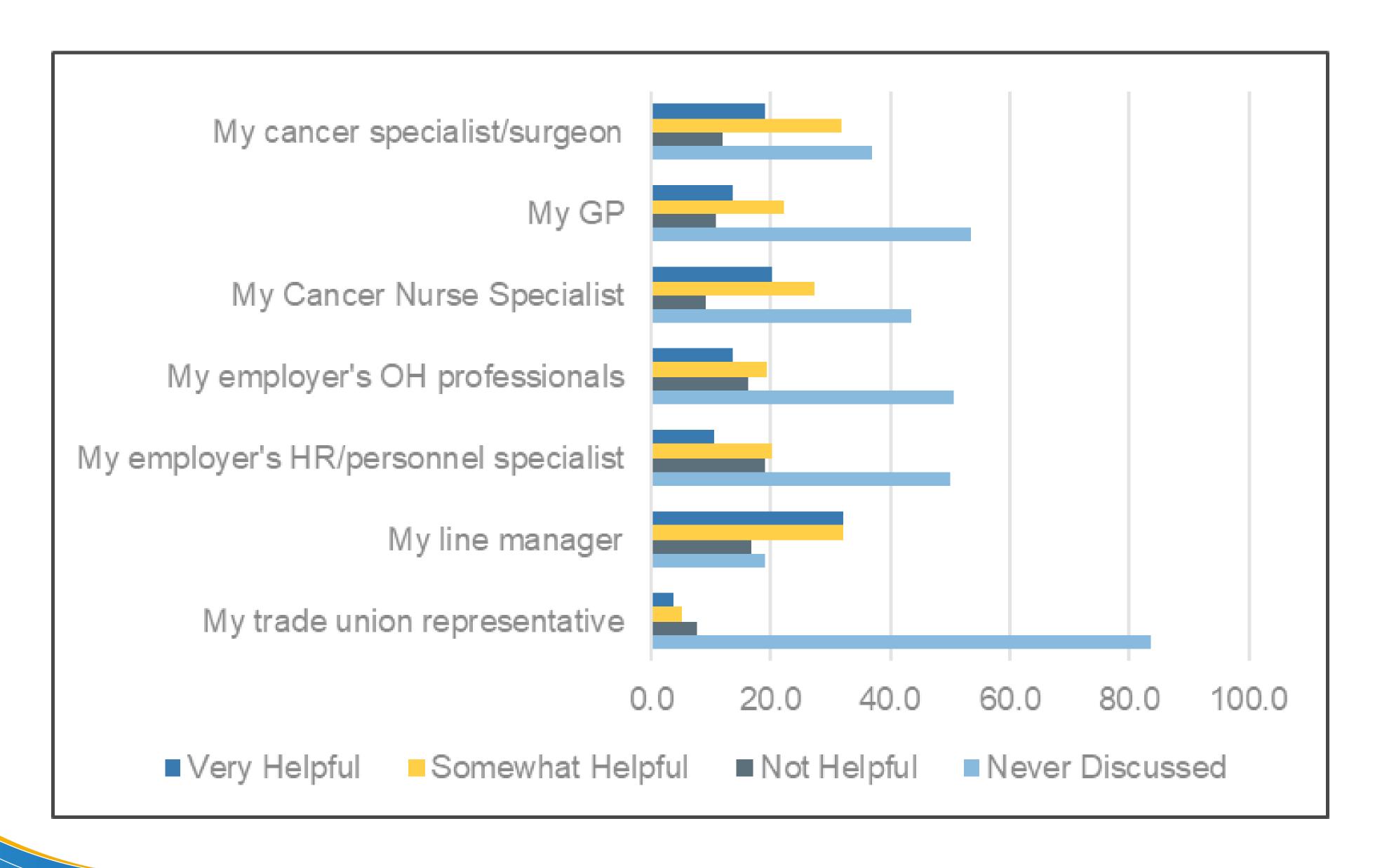
Adjustments received by stage of diagnosis





Helpfulness of RTW Advice





Impact of Cancer Treatment on Working Life



- Work-life balance is a big priority for most
- Many have started to reassess their career priorities because of cancer
- Most feel that the emotional impact of cancer treatment exceeds the physical impact
- Colleagues have been very supportive but...
- ...many have felt guilty about taking time off work because of their cancer

Positives & Negatives



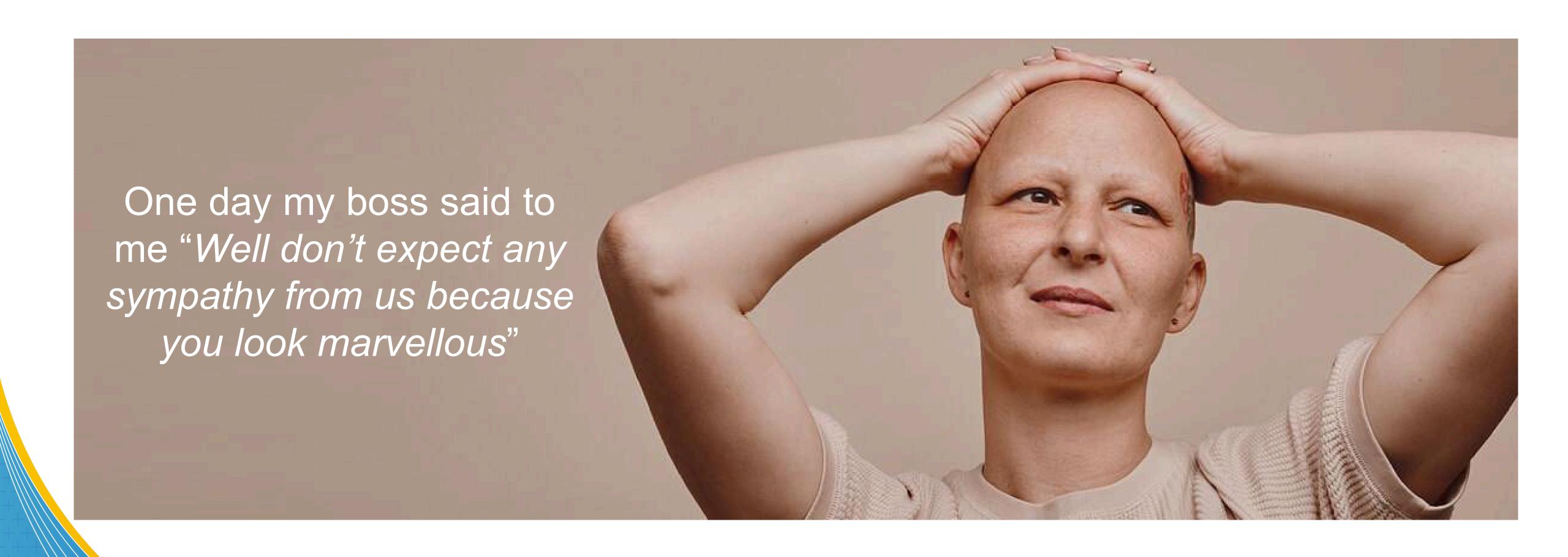
'I am lucky that I can afford to work part time which is great for me My work has been unfailingly supportive
- my manager and work colleagues. I do feel guilty that I'm not pulling my weight as I'm not doing face to
face work which means my colleagues do this in my place. This is made worse by the fact that I am feeling
physically well just now.'

'I don't feel like my brain has ever recovered from chemo and this has had a massive impact on my work, I constantly worry I'm going to make mistakes or forget things. I have a really poor concentration span & dreadful memory.'

'My manager made it clear she did not want me back, she suspected that I would be unreliable. She undermined my confidence to the extent that I was a nervous wreck. She kept saying 'so many things had changed', but refused to tell me what, even shouting at me that she wasn't my Mother, I would have to find out myself. She kept saying she thought I wasn't safe & I was 'woolly headed' & acting like I didn't really want to be there. She accused me of not being proactive. My union said they could approach her on my behalf, but it would be like 'putting a stick in a hornet's nest'. I eventually resigned'

'You look OK'





Other notable findings



- Among those who have returned to work, knowledge of the 2010 Equality Act and its provisions was low at 57%.
- A third of respondents did not phase their return to work and 25% had to take leave during their treatment
- Those with advanced or metastatic cancer reported lower levels of support for their return to work. Those with breast cancer reported more support than people with other cancers
- Many of those with advanced or metastatic cancer and some with a terminal diagnosis – are struggling to get RTW support which meets their needs

Meaningful Work?



While working in effect part time (due to chemo) I face low expectations from managers and am not given challenging or meaningful work. Because I am not present or very visible, my manager has taken credit for some of my contributions.



What Could We Do Better?



- Improved training on having RTW conversations for cancer nurse specialists, GPs and occupational health professionals – with a specific recognition of the mental health challenges faced by many patients
- Oncology medics and cancer nurse specialists should introduce integrated care & work
 protocols for working age cancer patients both before and after their treatment ends
- Employers should update their return to work policies to recognise the provisions of the Equality Act as it relates to people living with cancer
- Employers should offer 1:1 coaching on effective, flexible and compassionate return to work pathways for both cancer patients and line managers
- Employers should support & fund 'buddy networks' of employees who have had experience of cancer to help provide peer support and guidance for colleagues and their managers



About IES:

The Institute for Employment Studies (IES) is an independent, apolitical, international centre of research and consultancy in public employment policy and HR management. It works closely with employers in all sectors, government departments, agencies, professional bodies and associations. IES is a focus of knowledge and practical experience in employment and training policy, the operation of labour markets, and HR planning and development. IES is a not-for-profit organisation.

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