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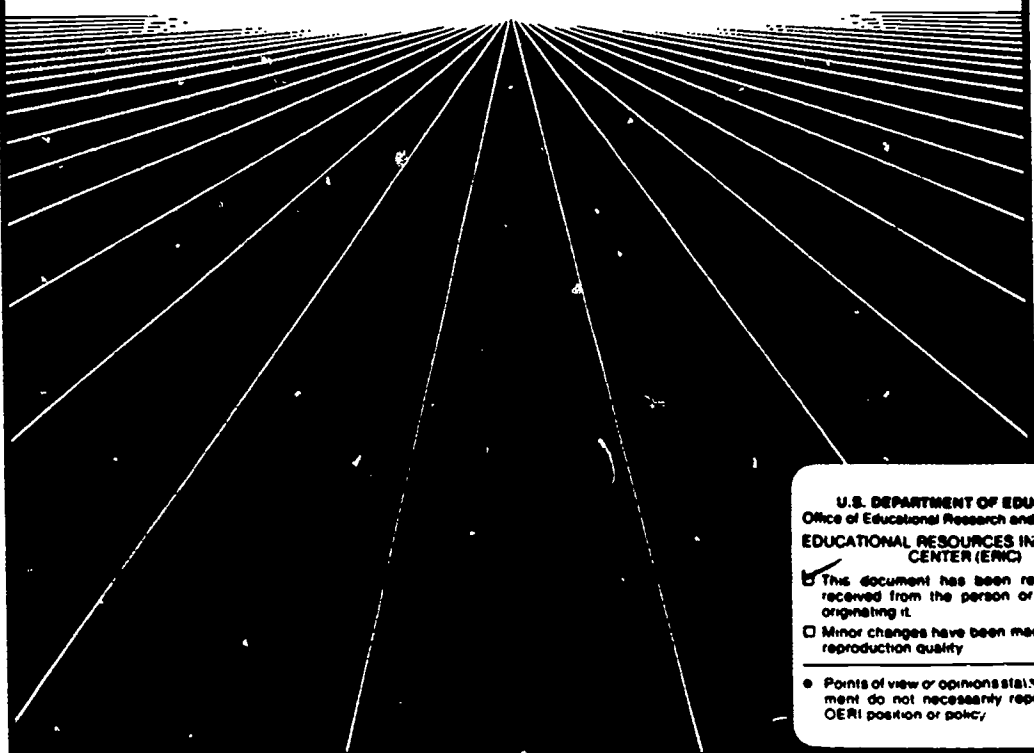
## ABSTRACT

Return-to-Work is a short-term group counseling intervention consisting of three major components: coping with disability and related life changes, life and benefits planning, and return to work. It is designed to enhance functional adaptation to mid-career disabilities by using structured activities and discussion to teach individuals how to change the nature of their "assumptive worlds" and, in so doing, to establish personal directions for their physical and vocational rehabilitation programs. These new directions are considered in terms of the functional beliefs and coping skills (interpersonal control, self-efficacy, and direct action) required to increase the probability that the person will return to work. The three modules present appraisal/reappraisal, remotivation, and restructuring strategies. Specific topics addressed by the modules include: ways that disability and unemployment affect personal, social, family, and vocational functioning; emotional and behavioral reactions to disability; rational behavior problem solving; life goals; the impact of work resumption on financial benefits; work readiness assessment; vocational interests assessment; and a vocational goal plan. This trainer's manual contains a suggested narrative that the trainer may paraphrase and displays each page of the Participant's Workbook, containing 25 activities designed for use in a small-group counseling program. Appendix A presents the theoretical rationale for the intervention, and Appendix B describes the provisions and benefits of Social Security, Workers' Compensation, and Long-Term Disability Insurance. (Contains 27 references.) (JDD)

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Trainer's Manual

# RTW RETURN TO WORK



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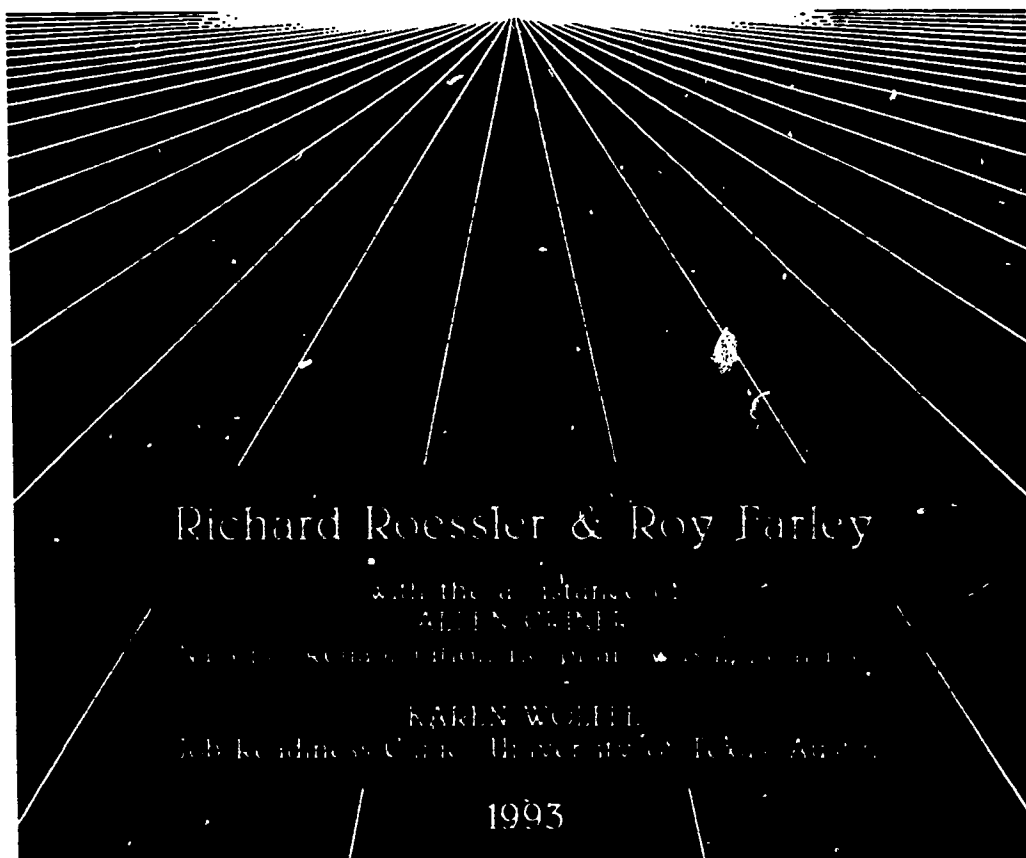
Arkansas Research & Training Center in Vocational Rehabilitation  
University of Arkansas at Fayetteville Arkansas Rehabilitation Services

EC 302083

# RIW

## Return to Work

Trainer's Manual



Arkansas Research & Training Center in Vocational Rehabilitation  
University of Arkansas at Fayetteville Arkansas Rehabilitation Services

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## Foreword

People with disabilities receiving rehabilitation services at the Hot Springs Rehabilitation Center (Hot Springs, AR), the National Rehabilitation Hospital (Washington, D.C.), Goodwill of Arkansas (Little Rock, AR), and the Job Readiness Clinic (Austin, TX) have contributed to the development of RTW. We appreciate their comments and wish them success in their return-to-work plans. We also acknowledge the helpful critiques from the following RTW trainers: Sandy Parkerson, John Heimback, Dale Hoff, Brenda Robinson, and George Evans.

The Authors

## **Introduction to the Return-to-Work Trainer's Manual**

Return to work for persons who have experienced a mid-career disability is an increasingly important rehabilitation priority. To meet this need, a counseling intervention, Return-to-Work (RTW), was developed for use in rehabilitation facility settings. RTW is a short-term group counseling intervention consisting of three major components: Module I: Coping with disability and related life changes, Module II: Life and benefits planning, and Module III: Return to work.

### **The Need for a Return-to-Work Intervention**

Data on the rate at which individuals with disabilities are resuming work clearly document the need for RTW. In 1980 only one of every two men with disabilities (49.1%) was working. By 1985 the proportion of men with disabilities who were employed had decreased to about one in three (37%). Women with disabilities have historically fared poorly in maintaining or resuming employment. In 1980 and 1985, only one in four women with disabilities was in the workforce (Bowe, 1986).

Factors negatively affecting return-to-work rates include work disincentives in disability benefit programs, employer stereotypes regarding people with disabilities, and the nonexistence of early rehabilitation interventions (Bowe, 1986; Galvin, 1986; Gleason, 1986; National Council on the Handicapped, 1986). Collectively, these factors weaken the connections between the work role and the person who has experienced a mid-career disability (Tate, Habeck, & Galvin, 1986). Without motivational interventions such as RTW, the ensuing long-term unemployed status produces (a) increases in depression, tension, and self-imposed handicaps, and (b) decreases in self-esteem, health status, and psychological well-being (DeFrank & Ivancevich, 1986).

### **RTW**

RTW is designed to enhance functional adaptation to mid-career disabilities. In a small group counseling format, RTW uses structured activities and discussion topics to teach individuals how to change the nature of their "assumptive worlds" and, in so doing, to establish personal directions for their physical and vocational rehabilitation programs (Schlossberg, 1981). These new directions are considered in terms of the functional beliefs and coping skills (interpersonal control, self-efficacy, and direct action) required to increase the probability that the person will return to work (Brammer & Abrego, 1981). Three modules present the appraisal/reappraisal,

remotivation, and restructuring strategies in RTW (see Appendix A for a discussion of the psychological theory underlying RTW).

**RTW Module 1: Coping with disability and related life changes.** Opening with an orientation to RTW and a group cohesion exercise, the first module involves participants in appraisal/reappraisal activities. Initially, group members discuss the ways that disability and unemployment affect their personal, social, family, and vocational functioning. Participants examine their emotional and behavioral reactions to determine whether they are in their best interests, that is, contribute to goal achievement, resolve personal conflicts, and enhance personal health and safety. Module 1 exercises introduce participants to the fundamentals of rational behavior problem-solving (Farley, 1984) such as how to challenge irrational beliefs, develop rational self-statements, and practice effective behaviors.

**RTW Module 2: Life and benefits planning.** Stressing life and benefits planning, Module 2 involves RTW participants in the remotivation phase of adapting to disability. Two critical considerations are covered: (a) significant life goals and (b) the impact of work resumption on financial benefits. Having related personal hopes to social role opportunities, participants are prepared to clarify life goals by dealing with such topics as the relative importance of their goals and their readiness to initiate action (Wise, Charner, & Randour, 1976). Using a decision-making model, participants determine, with regard to important hopes for the future, the following: a goal or goals, the extent of additional information needed, the effect of future events on the goal, personal resources for achieving the goal, options for achieving the goal, and anticipated outcomes for selected options. This general life planning provides a basis for more indepth consideration of a vocational goal in the third module.

Before starting the third module, participants discuss financial considerations related to returning to work. Group members initially identify their return to work needs from a list of concerns such as retraining, child care, transportation, attendant care, housing, medical treatment or therapy, costs of looking for work, and special equipment. After they have listed their needs, they examine major benefit systems for which they have qualified or might qualify to determine whether the systems provide financial resources to meet personal needs. Participants also analyze the impact of returning to work on their benefits. All of this information is consolidated in a monthly budget developed on an individual basis with the trainer's help. As a result of these exercises, group members can estimate the impact that work resumption would have on their financial situation, information that is critical in the third RTW module.



During the benefits planning phase, the RTW trainer is encouraged to invite experts from Social Security and Workers' Compensation to present information on work incentives to the group. To supplement the RTW leader's understanding of provisions and resources of major benefit programs, Appendix B in the trainer's manual overviews Social Security, Workers' Compensation, and Long-Term Disability Insurance provisions. RTW trainers should also study Social Security Administration guidebooks such as the Red Book on Work Incentives (1991).

RTW Module 3: Return to work. Stressing, in part, the concept of work remotivation, Module 3 presents several structured activities, for example, a graphic work readiness scale ("how ready are you to return to work?"), an appraisal of the needs met through employment, and an examination of "jobs I would like." Two job alternatives are chosen in order to evaluate the job/person match considerations. Reasonable accommodations are discussed as means to enhance the match between the person and the jobs.

Consistent with restructuring, Module 3 activities result in a vocational goal plan for the person to implement. Each participant selects a job and specifies services and personal actions required to complete an employment plan. An employment expectation (ranging from unemployed to employed full-time) is projected for each of three time periods: 3-months, 6-months, and 1-year from completion of the RTW program. The final job goal is stated with the steps required to reach that goal listed in proper sequence.

Following completion of Module 3, participants return for follow-up RTW sessions in which they discuss their progress in achieving their goals. Group support, discussion of barriers, and adjustment of goal plans are important features of these follow-up (restructuring) sessions. Monitoring should continue for three to six months.

### Selecting RTW Participants

RTW is appropriate for use in rehabilitation facility and medical settings with individuals who have encountered a mid-career disability. Program participation should follow acute care and occur concurrently with physical and occupational therapy services. RTW could even be initiated during the latter stages of a hospital stay. Individuals should read at the fifth grade level and have no severe cognitive or psychiatric limitations that impair their reality orientation. Some previous work experience is assumed. Initial demonstrations of RTW have included individuals with conditions such as spinal cord injury, chronic pain, orthopedic impairments, cardiac disability, post-stroke complications, and amputation.

## RTW Training Conditions

RTW groups should be small -- 6 to 10 people -- and meet in a comfortable, confidential setting. The room used for training should be large enough so that participants can move around easily. Tables are needed for writing exercises.

The three RTW modules require approximately 25-30 hours to complete with a group of 6 participants. It is best to schedule the sessions every day or every other day to provide continuity and to enhance group dynamics.

## RTW Materials

Trainer's Manual. The Trainer's Manual contains a suggested narrative that the trainer may paraphrase during RTW sessions; the Trainer's Manual also displays each page of the Participant's Workbook. Appendix A presents the theoretical rationale for RTW, and Appendix B describes the provisions and benefits of Social Security, Workers' Compensation, and Long-Term Disability Insurance.

Participant's Workbook. The Workbook contains the material used by participants during RTW. Participants should retain their workbooks as personal records of their plans to achieve self-selected life goals.

Red Book on Work Incentives - A Summary Guide to Social Security and Supplemental Security Income Work Incentives for the Disabled and Blind is available from Regional Offices of Social Security Administration (Office of Disability, SSA Pub. No. 64-030; Social Security Administration, 1991).

## Purchasing RTW Materials

RTW materials can be ordered from:  
Publications Division  
Arkansas R&T Center in Vocational Rehabilitation  
Hot Springs Rehabilitation Center  
P.O. Box 1358  
Hot Springs, AR 71902

# RIW

## Module I



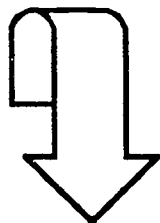
Coping with Disability  
and Related Life  
Changes

## ACTIVITY 1

1. Introduce yourself. Share your background, reasons for doing RTW training, and activities you enjoy.
2. Ask participants to introduce themselves. They might share information on their backgrounds, work experiences, and activities they enjoy.
3. Describe RTW as a small group counseling program that will help participants gain control of their lives. RTW group members can give each other valuable support as they learn to cope with their disabilities and achieve new life goals.
4. RTW means return-to-work, but return to work is not our only goal.
  - You will identify other important goals for your life.
  - In fact, successful return to work often requires achievements in other areas first.
  - But remember, you too can return to work. Many people just like you have. Let me give you some examples (cite examples and show pictures of people with severe disabilities who have returned to work. Video portrayals are helpful as well, for example, "Part of the team - people with disabilities in the work force (1990)," available from the National Easter Seal Society, 110 West Hubbard Street, Chicago, IL 60610).
5. Here are our RTW objectives -- see Activity 1. Read statements. Any questions?

## Activity 1: Return-to-Work (RTW)

RTW will help you gain control of your life. You will also have the opportunity to:



- share with others who have experienced a disability;
- explore your reactions and the reactions of others to disability;
- learn new ways to think about and cope with disability;
- develop new life goals;
- explore your images of satisfying work;
- identify a work goal; and
- develop a plan to return to work.

## ACTIVITY 2

1. Each of you shares a common experience. You are dealing with the impact of disability on your lives.
2. Disability can affect us in many life areas (see Activity 2). It may change how your bodies work, how you think, feel, or act. It may affect your social lives and your ability to work and earn money.
3. Disability is a life altering event, but you have dealt with tough situations in the past.
4. Read examples of other difficult events in Activity 2. Remember -- you have coped with these types of events in the past; you can learn to cope with disability too.

## Activity 2: Examples of Major Life Events

### Examples of Major Life Areas

- \* Physical  
How our bodies work
- \* Intellectual  
How we think
- \* Emotional  
How we feel
- \* Behavioral  
How we act
- \* Social  
Our family and friends
- \* Work  
Our ability to earn money
- \* Economic  
Our finances

### Examples of Major Life Events

- \* People acting contrary to what we want
- \* Changes and transitions
- \* Unfair or unjust treatment
- \* Losing someone or something very important
- \* Difficulties or hardships
- \* Dangerous or threatening situations
- \* Not getting something we want

## ACTIVITY 3

1. How each of you sees your disability is important. Complete Activity 3 by describing your disability, that is, how you define/perceive it and how it affects you.
2. Discuss in pairs.
3. Discuss in group most important points -- description of disability and limitations involved.
4. Have group discuss any life problems associated with their disabilities.
5. Identify issues -- state expectation that each participant can learn to cope with disability-related problems.



### Activity 3: My Disability as a Major Life Event

#### How I see my Disability

My description of my disability:

My disability affects my ... (Check all that apply.)

- |                                           |                                                           |
|-------------------------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> Use of arms      | <input type="checkbox"/> Memory                           |
| <input type="checkbox"/> Use of hands     | <input type="checkbox"/> Ability to understand speech     |
| <input type="checkbox"/> Ability to walk  | <input type="checkbox"/> Vision                           |
| <input type="checkbox"/> Ability to stand | <input type="checkbox"/> Hearing                          |
| <input type="checkbox"/> Ability to sit   | <input type="checkbox"/> Speaking                         |
| <input type="checkbox"/> Strength         | <input type="checkbox"/> Moods/Emotions                   |
| <input type="checkbox"/> Endurance        | <input type="checkbox"/> Ability to get along with others |
| <input type="checkbox"/> Learning         | <input type="checkbox"/> Judgment                         |
| <input type="checkbox"/> Reading          | <input type="checkbox"/> Problem-solving ability          |
| <input type="checkbox"/> Writing          | <input type="checkbox"/> Desire to work                   |

## ACTIVITY 4

1. People react to disability in many different ways. These reactions usually fall into one of two categories: feelings or actions.
2. Present the emotional and behavioral reactions in Activity 4 as typical reactions to disability.
3. Do any of these sound familiar to you? Can you identify with any of these feelings and actions? Which ones?
4. Pairs select a negative feeling or action and discuss it in terms of positive alternatives.
5. Discuss positive alternatives with the group.

## Activity 4: Typical Reactions to Disability

### Typical Feelings (Emotional Reactions)

I just feel numb and empty. This is all unreal. (SHOCK)

I don't know what to do. I am so scared I can't think. (FEAR)

I feel worthless; I don't care what happens. What's the use? (DEPRESSION)

I hurt deep down. All I can think about is the way things used to be. (GRIEF)

I feel guilty; I must have done something to deserve this. (GUILT)

I'm mad. It's not fair. This should not have happened to me. (ANGER)

### Typical Actions (Behavioral Reactions)

I just sit and watch television. (IMMOBILIZATION)

I don't talk about it. I am going back to my regular routine. (DENIAL)

I often cry. I remember how good things used to be. (MOURNING)

I stay home. I don't see anybody or do anything. (WITHDRAWAL)

I take my medicine off schedule. I don't take care of myself. I just don't  
care. (SELF-ABUSE)

I argue. I tell people their ideas are stupid. I do what I want to do.  
(AGGRESSION)

I throw things at people. (HOSTILE ACTING OUT)

## ACTIVITY 5

1. How about you? How do you feel and act?  
Complete Activity 5.
2. Ask participants to share their dominant feelings and actions. Discuss their current reactions.
3. Help participants explore the outcomes or results of their current reactions to their disabilities.

## Activity 5: My Reaction to my Disability

### Reaction



#### Feelings/ Emotions

Numb  
Anxious  
Indifferent  
Angry  
Depressed  
Bitter  
Guilty  
Hostile



#### Actions/ Behavior

Strike others  
Stay silent  
Refuse to participate  
Say mean things  
Argue with others  
Make no decisions  
Try to do everything  
Hurt myself

### My Reaction

When I think about my disability and my situation, I usually feel (list feelings) and I usually act (list actions):

List Feelings

List Actions

## ACTIVITY 6

1. Now we will focus on how disability affects different areas of your lives. Complete Activity 6. Check life areas that your disability affects. Think about how your disability affects those areas.
2. List some of your feelings and actions as you react to the influence of disability on different areas of your life.
3. Discuss in pairs and total group, for example, what areas are affected, what gains or losses are associated with disability, and how do you feel and act? Focus part of the discussion on the impact of disability on employment.
4. Reinforce "I" statements related to coping with personal or external barriers.

## Activity 6: Changes in Major Life Areas

My disability affects my ... (check all that apply)	My General Reactions to Disability Feelings/Actions
<input type="checkbox"/> Physical functioning	
<input type="checkbox"/> Emotional functioning	
<input type="checkbox"/> Family life	
<input type="checkbox"/> Educational plans	
<input type="checkbox"/> Employment status	
<input type="checkbox"/> Economic situation	
<input type="checkbox"/> Social/Leisure activities	

## ACTIVITY 7

1. Think about the reactions you identified in Activities 5 and 6. Are they in your best interest? Why/why not? Discuss.
2. See Activity 7. Review characteristics of reactions. The first list describes outcomes of reactions that are helpful; the second list describes results that are harmful.



## Activity 7: Determining if Emotions (Feelings) and Behaviors (Actions) are in My Best Interest

Reactions that are in our best interest help us ...

1. See things clearly.
2. Think clearly.
3. Have helpful feelings.
4. Make creative and realistic plans.
5. Act in productive ways.
6. Achieve our goals.
7. Maintain good interpersonal relationships.
8. Maintain our safety and health.

Reactions that are not in our best interest ...

1. Interfere with seeing things clearly.
2. Confuse us.
3. Lead to destructive feelings.
4. Block creative and realistic plans.
5. Lead to further self-defeating actions.
6. Block goal achievement.
7. Result in interpersonal conflict.
8. Harm our safety and health.

## ACTIVITY 8

1. Are your reactions in your best interest? Are they resulting in the outcomes you want? Use the checklist in Activity 8 to evaluate your reactions.
2. Discuss results of checklist in total group.
3. Your feelings and actions can help you. You can control them and respond in ways that are in your best interest. The next few activities will show you how to do that.

## Activity 8: My Reactions: Are They in my Best Interest?

Yes    No    (Check your answer.)

- |     |     |                                                                            |
|-----|-----|----------------------------------------------------------------------------|
| ___ | ___ | 1. My feelings and actions help me see the situation clearly.              |
| ___ | ___ | 3. My feelings and actions help me think clearly.                          |
| ___ | ___ | 4. My feelings and actions help me experience helpful feelings.            |
| ___ | ___ | 5. My feelings and actions help me set realistic goals and plans.          |
| ___ | ___ | 6. My feelings and actions help me behave productively.                    |
| ___ | ___ | 7. My feelings and actions help me achieve my goals.                       |
| ___ | ___ | 8. My feelings and actions help me avoid negative conflict with others.    |
| ___ | ___ | 9. My feelings and actions help me maintain my personal safety and health. |

Overall:

- |     |     |                                                                               |
|-----|-----|-------------------------------------------------------------------------------|
| ___ | ___ | My feelings and actions are helpful, productive, and serve a useful function. |
|-----|-----|-------------------------------------------------------------------------------|

## ACTIVITY 9

1. Turn to Activity 9. We need to learn more about our feelings and actions and why we react the way we do.
2. Each of you has experienced a disability. Your disability has caused some major changes in your life with many emotional and behavioral consequences.
3. Disability and related life changes are important events to which you react; they are referred to as “events.” Discuss events in Activity 9.
4. Emotional and behavioral reactions to these events occur. We call these reactions feelings and actions. Discuss reactions.
5. Without thinking about it much, it is common to believe that the event directly causes the reactions. Look at the examples in the middle of Activity 9 for this connection. Discuss the relationships between the events and the reactions. For example, how does disability elicit a denial reaction?
6. Although an event contributes to one’s reaction, it does not solely cause it. Otherwise, people would react the same way to the same event. Do they? Discuss examples from group of similar situations to which people respond differently.

## Activity 9: Understanding Feelings and Actions

<b>Events</b>	<b>Reactions: Feelings/Actions</b>
Not getting what I want	Denial
Others behaving contrary to what I want	Anger
Losing something important	Depression
Experiencing changes or threatening situations	Fear
Unfair or unjust treatment	Arguing
Experiencing difficulties or disabilities	Withdrawing

<b>Event</b>	<b>Causes</b>	<b>Reaction</b>
Disability		Denial
Dangerous situation		Fear
Losing something important		Depression
Not getting what I want		Anger

We think that the event directly causes the reaction. But is that the case?

## ACTIVITY 10

1. Here is an example. See Activity 10. How could the same event, losing a job, lead to the different reactions? Help participants develop plausible scenarios for the different event/reaction combinations, for example, losing a job and feeling depressed.
2. What do you conclude about the connection between an event and our reactions? If people respond differently to the same event, there must be more to it. Something happens between the event and the reaction.
3. What we think and say to ourselves -- our beliefs about the event -- affect how we react. Draw on examples from the discussion of the lost job.
4. Now we see that it is what we believe about those events or say to ourselves about them, that leads to our feelings and actions.
5. We have choices about what we think and say to ourselves in relation to any event, even disability or unemployment. What we choose to say and think makes a difference -- we call that our beliefs and thoughts about the event. Knowing that we can influence our own thoughts and beliefs gives us personal power over our lives; we have choices about how we think about events. Our choices affect our reactions.

## Activity 10: The Role of Beliefs

<u>Same Event</u>	<u>Different Reactions</u>
Losing a job	Depressed Afraid Angry Happy
<u>Why?</u>	

Event	Your Beliefs about the Event	Reactions: Feelings/Actions
-------	---------------------------------	--------------------------------

## ACTIVITY 11

### Major beliefs about events

1. Review the four types of beliefs and irrational and rational ways of thinking.
2. Help participants see the difference between thinking typical of the left side of the page (irrational thinking) and the right side of the page (rational thinking).
3. How would each way of thinking lead to different reactions? Why do some beliefs lead to helpful emotions and actions and others do not ?
4. Stress that problems lie ahead for people who demand, awfulize, mope, and condemn. Ask participants to explain why they agree or disagree with that statement.



## Activity 11: Major Beliefs About Events

1. Our beliefs about what we want the situation to be; our goal for the situation.
2. Our evaluation of the negative aspects of the situation.
3. Our beliefs about the difficulty of the situation and our ability to cope with it.
4. Our evaluation of our worth and that of others.

### Beliefs that Control our Reactions

#### 1. What we want the situation to be:

<u>Irrational</u>	<u>Rational</u>
Demanding _____	Preferring
demand	desire
insist	want
have to/must	wish
require	prefer

#### 2. Negative aspects of the situation

Awfulizing _____	Adjusting
awful	bad
terrible	undesirable
horrible	unfortunate
catastrophic	inconvenient

#### 3. Ability to cope

Moping _____	Coping
can't	can
impossible	possible
too hard	difficult
too difficult	manageable

#### 4. Worth

Condemning _____	Valuing
rotten	worth
sorry	talented
worthless	able
useless	skilled

## ACTIVITY 12

1. Review Activities 3 and 6. Repeat the description of your disability in the A block or briefly describe an unfortunate situation, such as unemployment, that was caused by your disability.
2. Now complete block C by describing your reactions -- how you feel and act. Review Activities 5 and 6.
3. Complete block B by listing what you believe, think, or say to yourself about your disability or life event. Review Activity 11 as a guide.
4. Study your reactions in block C; are they in your best interest? If not, you probably have some irrational beliefs. Look for demands, exaggerations, denial of your capabilities and strengths, and/or poor self-image.
5. Discuss in pairs and then in total group. Discuss reactions and related beliefs. Encourage participants to assume ownership of their beliefs and of their power to change those beliefs.
6. We can replace self-defeating beliefs with self-enhancing beliefs. We have control over our beliefs.

**Activity 12: Understanding Personal Reactions to Disability and Related Life Changes**

**A Your Perception of the Event**

**B Your Beliefs About the Event**

**C Your Reactions: Feelings and Actions**

## ACTIVITY 13

1. The steps to learning how to control your beliefs are presented in Activity 13. Let's review those steps.
2. Step one provides a checklist to determine whether your beliefs are rational and helpful. Review your beliefs in Activity 12 and answer the questions (yes/no) in the checklist.
3. Have participants describe their results on the checklist and share examples of irrational thoughts.
4. Irrational thoughts are not helpful; you must challenge those beliefs and learn how to create rational self-statements. Review Step Two with participants.
5. You can learn rational self-statements and self-enhancing feelings and actions. But you must practice using them (see Step Three). It is difficult to overcome old habits.

## Activity 13: How to Change Beliefs

### **Step One: Challenge and dispute self-defeating beliefs ...**

- Does evidence exist to support my beliefs?      \_\_\_Yes      \_\_\_No  
Do my beliefs lead to helpful feelings?      \_\_\_Yes      \_\_\_No  
Do my beliefs lead to productive action?      \_\_\_Yes      \_\_\_No  
Do my beliefs help me avoid negative conflict  
with others?      \_\_\_Yes      \_\_\_No  
Do my beliefs help me maintain my health?      \_\_\_Yes      \_\_\_No

### **Step Two: Learn rational self-statements that stress ...**

1. Preferring: state your desires as preferences, not requirements.
2. Adjusting: acknowledge the negative aspects of the situation, but don't exaggerate them.
3. Coping: recognize the difficulty but acknowledge your ability to cope; don't deny your capabilities.
4. Valuing: stress your self-worth and value.

### **Step Three: Practice your ...**

1. Rational self-statements
2. Self-enhancing feelings and actions

## ACTIVITY 14

1. Refer participants to Activity 14.
2. Remember, at the same time that you are challenging irrational beliefs, you must develop rational beliefs.
3. Review the guidelines for developing rational self-statements.
4. Participants identify and record an example of one of their irrational beliefs from Activity 12.
5. Divide the group into pairs; pairs develop rational alternatives to the irrational beliefs.
6. Discuss the new beliefs in the total group; discuss why they are rational. Will those beliefs lead to helpful thoughts and actions? Why? What are some of the helpful actions?

## Activity 14: Learning Rational Self-Statements

### GUIDELINES

- Change demanding to preferring  
“I want, wish, or prefer” instead of “must,” “should,” or “do.”
- Change awfulizing to adjusting  
Use “unfortunate” instead of “awful” or “terrible.”
- Change moping to coping  
“I can, although it might be hard” instead of “I can’t; it’s impossible.”
- Change self-condemning to valuing  
“I am a person of worth. I have many valuable skills.”

### EXAMPLES

An irrational statement: \_\_\_\_\_

---

---

A rational alternative: \_\_\_\_\_

---

---

## ACTIVITY 15

1. Do you see how you can influence your feelings and actions by what you think and say, that is, by your beliefs? Let's try an example.
2. In Activity 15, describe your disability in Section A using what you wrote in Activity 12.
3. Complete Section B by listing several rational self-statements that produce helpful feelings and actions. See Activity 11 for ideas.
4. Complete Section C by listing the feelings and actions you would expect to occur if you held the beliefs in Section B.
5. Share your reactions to Activity 15. Stress preferring, adjusting, coping, and valuing beliefs in the discussion. Other discussion questions include:
  - How will you take charge of your beliefs?
  - How will you help yourself react in your own best interest?
  - What new feelings will result?
  - What new actions will result?
6. Now you will begin to use some of your rational beliefs and productive feelings and actions to help you set and achieve important life goals. It is time to take charge of your life and begin life planning.



## Activity 15: Practicing New Beliefs

**A** Your Perception of the Event

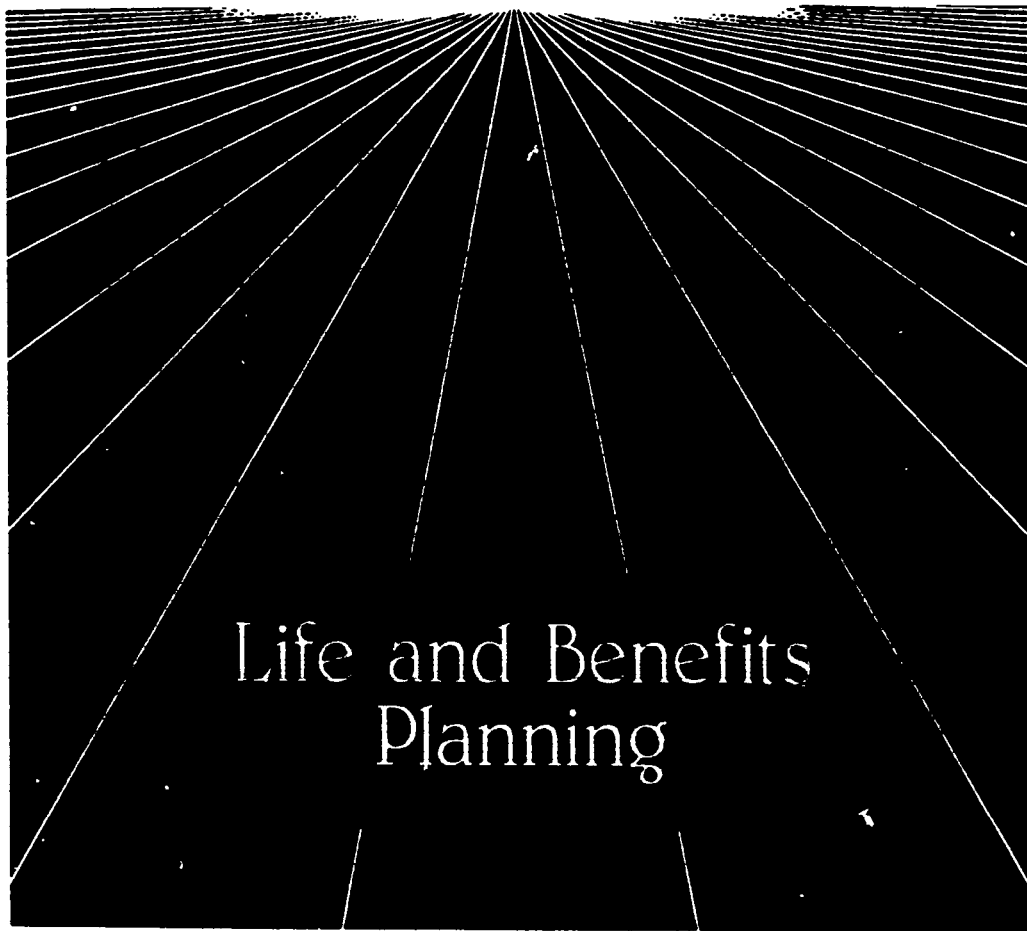
**B** Your Beliefs About the Event

**C** Your Reactions: Feelings and Actions

# RTW NOTES

# RIW

## Module II



## ACTIVITY 16

1. Life planning builds feelings of control, hope, and optimism. It requires actions that involve you with others, help you explore new possibilities, and set new life goals. Review seven important life areas.
2. What personal priorities or goals do you have for those areas? Write one goal for at least three different areas. Include an employment goal as one of your three entries.
3. Pairs discuss goals and the important questions at the bottom of Activity 16.
4. Group discussion. Share employment goals whenever possible. Use the important questions to guide the discussion.
5. What beliefs will help you achieve your goals? What beliefs will hinder?
6. Stress the value of returning to work as a means for increasing one's self-esteem and self-support. Mention that future RTW lessons focus more and more on the work role.

## Activity 16: Taking Control

Areas

Goals

<b>Physical well-being: Your health and strength</b>	
<b>Emotional well-being: Your self-image and mental health</b>	
<b>Social relationships: Family and friends</b>	
<b>Educational development: Training and skills</b>	
<b>Employment: Satisfying work</b>	
<b>Economic: Financial well-being</b>	
<b>Leisure/Recreation: Hobbies and relaxation</b>	

### Important Questions

1. What exactly do I want to achieve?
2. When do I want to achieve it?
3. What information and help do I need?
4. What are the costs/benefits to me and others?
5. How can I improve my chances of succeeding?

## ACTIVITY 17\*

1. Getting ready to return to work requires some pre-planning. What are some important considerations in your employment planning? Complete Activity 17.
2. Participants volunteer important considerations. Involve the group in briefly brainstorming some potential solutions.
3. Offer to help participants on an individual basis to identify resources/solutions for their problems.

\*Note to the trainer: Activities 17 and 18 are optional. Participants may complete Activity 17 in the group and Activity 18A and 18B as a homework assignment. You will need to help some participants complete Activity 18.

## Activity 17: Considerations in Preparing for Work

Check items that are important in your employment planning.

- 1. Disability or health problems.
- 2. Need for marketable skills and/or training.
- 3. Loss of certain benefits or insurance payments such as medical benefits, Social Security, Workers' Compensation, disability insurance, etc.
- 4. Lack of child care.
- 5. Lack of attendant care.
- 6. Lack of affordable and accessible transportation to and/or from work.
- 7. Unavailability of affordable and accessible housing.
- 8. Need for special equipment or devices to do my work or to get around at work.
- 9. Need for medical treatment or therapy.
- 10. Lack of suitable work or difficulties finding suitable work.
- 11. Employers who do not recognize that I am capable of working.
- 12. Costs of looking for work (printing resumes, travel expenses to get to interviews, etc.)
- 13. Lack of family support.
- 14. Start up costs for self-employment.

List and check other personally important items.

- 15. \_\_\_\_\_
- 16. \_\_\_\_\_

## ACTIVITY 18A/B

1. Participants complete Activities 18A/B as homework. Activity 18A helps them identify sources/types of support available through benefit programs. Activity 18B enables participants to develop responses to informational or financial needs.
2. Discuss the results individually with participants.
3. Help participants identify benefit systems from which they are receiving assistance or for which they are eligible. Discuss how the benefit programs can help them return to work.\*
4. Suggest resources and develop action plans to respond to financial concerns identified in this activity.

\*See current informational publications for benefits information, e.g., "Red Book on Work Incentives" (#64-030), "Disability" (05-10029), and "Benefits for Disabled People who Return to Work" (#05-10095) published by the Social Security Administration.



## Activity 18A: Benefit Systems

Check the benefit systems that apply to you.

Some types of disability related benefits:

- 1. Social Security Disability Insurance
- 2. Supplemental Security Income
- 3. Workers' Compensation
- 4. Long-term disability benefits
- 5. Medicaid/Medicare coverage
- 6. Medical benefits - health care benefits
- 7. Disabled veterans' benefits
- 8. Disability retirement
- 9. Other private insurance
- 10. Public assistance

## RTW NOTES

**Activity 18B: Planning Inventory**

1. What is (are) your present source(s) of income?

<u>Monthly Amount</u>	<u>Source</u>
_____	Self (savings, work)
_____	Family/spouse
_____	Social Security (SSI/SSDI)
_____	Disability insurance
_____	Public assistance
_____	Other (list) _____

2. How much money do you need to cover your living expenses and any debts you may have?

\_\_\_\_\_ per week or \_\_\_\_\_ per month

3. Do you currently have any judgments or legal actions pending against you?  Yes  No

4. Are you receiving any legal advice or assistance?  
 Yes  No

5. Are you in need of any legal advice or assistance?  
 Yes  No

6. List any other social service agencies or organizations that are assisting you.

7. Are you responsible for the care/well-being of any minor children, disabled or elderly individuals?  Yes  No (If yes, please indicate name, age, and relationship)

Name	Age	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____

## RTW NOTES

Are present arrangements adequate to meet these demands?

Yes  No

8. Are your family members or the people you live with helpful or supportive of you in trying to find work or obtain training?

Yes  No

**Information Needs:** Review your answers to Questions 1-7. List items that indicate areas in which you need help. State your information needs for each item.

Item #      Question or Comment

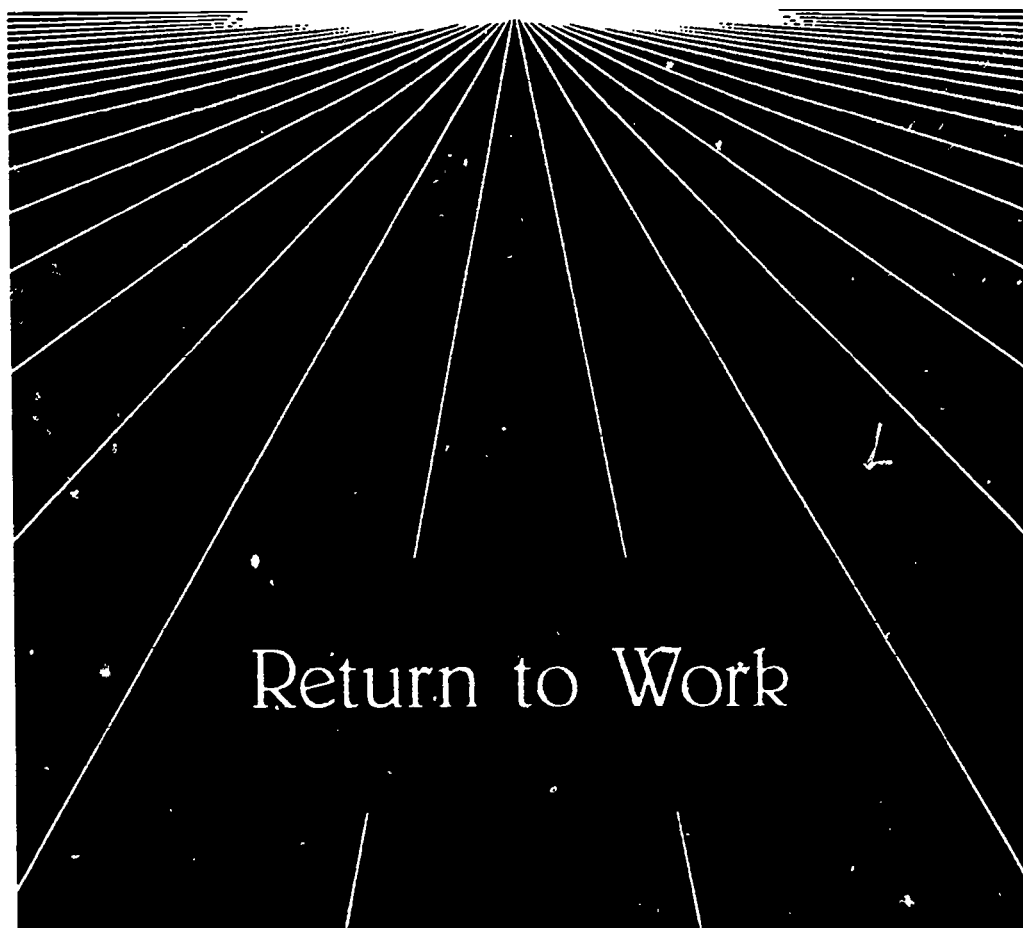
_____	_____
_____	_____
_____	_____
_____	_____

Financial Concerns	Resources	Plan of Action
1.		
2.		
3.		
4.		
5.		

## RTW NOTES

# RTW

## Module III



## ACTIVITY 19

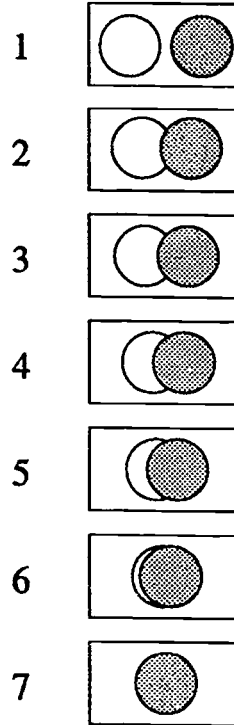
1. Explain that returning to work is an important goal, but possibly not for everyone at this time. Participants vary in their readiness to return to work.
2. Read the instructions for Activity 19 and have participants complete the activity. Request that they list two reasons for their rating.
3. Discuss the ratings, focusing on why some people evaluated their work readiness differently. Explore the realism of the participants' ratings.
4. Briefly mention services, strategies, and resources that could increase participant work readiness.
5. Encourage everyone to develop a return-to-work goal, but respect the need that some members have for not returning to work immediately. Help them select a goal from another area later in the program. Even participants without employment goals can complete Activities 19-21 for future reference.



## Activity 19: Employment: How Ready Are You?

### Instructions

How ready are you to return to work? Imagine that the shaded circle represents ready to work and the other circle represents you.\* In Box 1, the two circles are separate, indicating that you are completely unready to return to work. In Box 7, the two circles overlap totally, indicating that you are ready to return to work today. Circle the number of the box that shows how ready you are to return to work, considering your skills and disability.



List two reasons for the rating you selected.

- 1.
- 2.

\*Kanungo, R. (1982). Work alienation. New York: Praeger. Reprinted with permission.

## ACTIVITY 20

1. Work provides many benefits that help us meet our personal needs. List two jobs that are attractive to you because they will help you meet your needs at the present time.
2. Discuss jobs mentioned by participants. Encourage each participant to mention at least one job goal.
3. Let's see if your two job choices can pass a brief test. Think again about how well the jobs satisfy your needs. Complete the check list on the bottom of Activity 20.
4. Discuss participants' views of jobs and need fulfillment.

## Activity 20: Work Meets Many Needs

Two attractive job choices:

1. \_\_\_\_\_

2. \_\_\_\_\_

Will this job help you ...

	Job 1		Job 2	
	Yes	No	Yes	No
Make enough money?	___	___	___	___
Gain the respect of others?	___	___	___	___
Use your talents?	___	___	___	___
Make new friends?	___	___	___	___
Help other people?	___	___	___	___
Improve your skills?	___	___	___	___
Get control of your life?	___	___	___	___

## ACTIVITY 21

1. **Select two job choices that are attractive to you. List them at the top of Activity 21.**
2. **Are these realistic choices for you? Do your abilities meet the demands of the job? Complete the checklist in Activity 21. Determine first whether you have any significant limitations in the different ability areas. Then indicate the abilities required in each job. Identify areas where your current limitations may affect your ability to meet the demands of the job.**
3. **Groups of two discuss the results of the job/person analysis, i.e., matches and mismatches between abilities and job demands. Encourage each person to list strategies for improving job/person match -- job training, aids, devices, and worksite modifications. Remind participants that selecting another job is another way to improve the match. Encourage them to reexamine the appropriateness of the job choices as well.**
4. **Continue the discussion in the total group. Identify reasonable accommodations that participants may need to successfully return to work. List strategies, accommodations, and services on a flipchart.**

## Activity 21: Matching Job Requirements and Abilities

Job 1: \_\_\_\_\_ Job 2: \_\_\_\_\_

<u>Abilities</u>	Any limitations? (Check if a limitation.)	Job Requirement? (Check if a requirement.)	Job Requirement? (Check if a requirement.)
Learn quickly	___	___	___
Read/Write English	___	___	___
Remember facts/ figures	___	___	___
Look at things without confusion	___	___	___
See	___	___	___
Hear	___	___	___
Speak	___	___	___
Understand what others say	___	___	___
Use arms	___	___	___
Use legs	___	___	___
Get around	___	___	___
Sit for long periods	___	___	___
Stand for long periods	___	___	___

✓ ✓ indicates an area in which you may need a reasonable accommodation.  
List reasonable accommodations that you may need to return to work.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

## ACTIVITY 22

1. It is time to select a goal. If you are ready to return to work, choose a job goal. If you are not ready to choose a work goal, consult Activity 16 for ideas about another goal.
2. Write your goal (Activity 22). Have each participant share his or her goal with the group.
3. Before you develop a goal plan, you need to consider two other concerns: (a) what obstacles must you overcome and (b) who can help you achieve your goal. List any obstacles that you foresee and describe who can help and how they can help you overcome those barriers.
4. Remind participants that their families, employers, physicians, and rehabilitation professionals represent valuable resources. How can they help remove obstacles and encourage goal attainment?

## Activity 22: Getting Started

My goal: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Obstacles

1. \_\_\_\_\_  
Who can help?/How can they help? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_  
Who can help?/How can they help? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_  
Who can help?/How can they help? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## ACTIVITY 23

1. You are ready to develop a goal plan -- a list of steps that you will take to achieve your goal.
2. Complete Activity 23 by restating your goal and checking the important areas in which you will need help.
3. Pairs brainstorm steps (actions) to meet needs in important areas so that the person can achieve the goal. Discuss steps in the group.
4. Participants order steps and transfer them to the goal plan. They indicate when they will achieve their goal (deadline).
5. Part of this work may be done as a homework assignment.



## Activity 23: Writing a Goal Plan

My goal: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Important Areas (check all that apply)

- |                                                                |                                                            |
|----------------------------------------------------------------|------------------------------------------------------------|
| <input type="checkbox"/> Physical (medical)                    | <input type="checkbox"/> Attendant services                |
| <input type="checkbox"/> Emotional (counseling)                | <input type="checkbox"/> Financial & health benefits       |
| <input type="checkbox"/> Training (educational/<br>vocational) | <input type="checkbox"/> Housing                           |
| <input type="checkbox"/> Family (child care)                   | <input type="checkbox"/> Transportation                    |
| <input type="checkbox"/> Other (specify) _____                 | <input type="checkbox"/> Employer (training/modifications) |

### My Goal Plan

Area 1: \_\_\_\_\_

Brainstorm all steps that apply:

List steps in order:

## RTW NOTES

Area 2: \_\_\_\_\_

Brainstorm all steps that apply:

List steps in order:

Area 3: \_\_\_\_\_

Brainstorm all steps that apply:

List steps in order:

## RTW NOTES

Area 4: \_\_\_\_\_

Brainstorm all steps that apply:

List steps in order:

Area 5: \_\_\_\_\_

Brainstorm all steps that apply:

List steps in order:

# RTW NOTES

## My Goal Plan

Goal: \_\_\_\_\_  
\_\_\_\_\_

Area:

Steps:

Area:

Steps:

Area:

Steps:

Area:

Steps:

Area:

Steps:

I will achieve my goal by \_\_\_\_\_

## ACTIVITY 24

1. In closing, participants (a) list and share their goals (Activity 24) and (b) discuss the highlights of their goal plans. Focus the discussion on the following questions:
  - What is your goal?
  - What must you do to achieve it?
  - Are you optimistic about achieving your goal? Why or why not?
  - What will the consequences of your goal plan be -- for yourself and others?
2. Review any remaining obstacles to goal attainment and possible solutions. Ask participants to list new ideas of value to their goal plans.
3. Have participants who have an employment goal to project their employment status at 3 months, 6 months, and 1 year. Discuss reactions to the projections.
4. Ask each participant to state one rational belief that will help him/her complete the goal plan. Write the beliefs on a flipchart and post the chart on the wall.
5. Close with a group discussion of the following:
  - Do you feel more in control of your life? Why or why not?



## Activity 24: Reviewing our Goal Plans

My goal \_\_\_\_\_

### New Ideas for my Goal Plan

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

### Expected Employment Outcomes

	3 mos.	6 mos.	1 year
Employed full-time	_____	_____	_____
Employed part-time	_____	_____	_____
Self-employed	_____	_____	_____
In vocational training or school	_____	_____	_____
Unemployed	_____	_____	_____

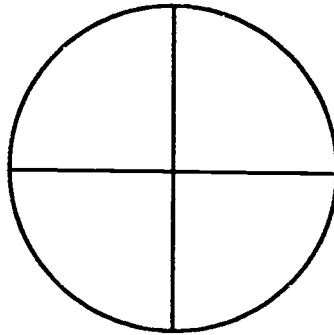
## ACTIVITY 25

1. Activity 25 presents an outline for follow-up sessions after participants have completed RTW.
2. Conduct the monitoring sessions every two weeks if possible until most participants are well into their goal plans.
3. To begin the follow-up sessions, have participants complete the progress question and describe their feelings. Discuss reactions in the total group.
4. Explore rational and irrational beliefs and related feelings and actions affecting the goal plan. Help participants develop rational beliefs. Remind them of the rational beliefs on the flip chart (Activity 24).
5. Discuss in the group barriers to goal progress and possible solutions. List solutions on a flipchart. Work with individual RTW participants to modify their goal plans and actions as needed.
6. Close each session with a discussion of whether participants feel in control of their lives. Close by restating examples of rational beliefs that exemplify a preferring, adjusting, coping, and valuing approach to disability and unemployment.

## Activity 25: Following Up

Describe your progress on your goal plan.

How do you feel about your progress toward your goal? Write a feeling word in each quadrant.



What concerns/problems have you encountered in returning to work or achieving your goal?

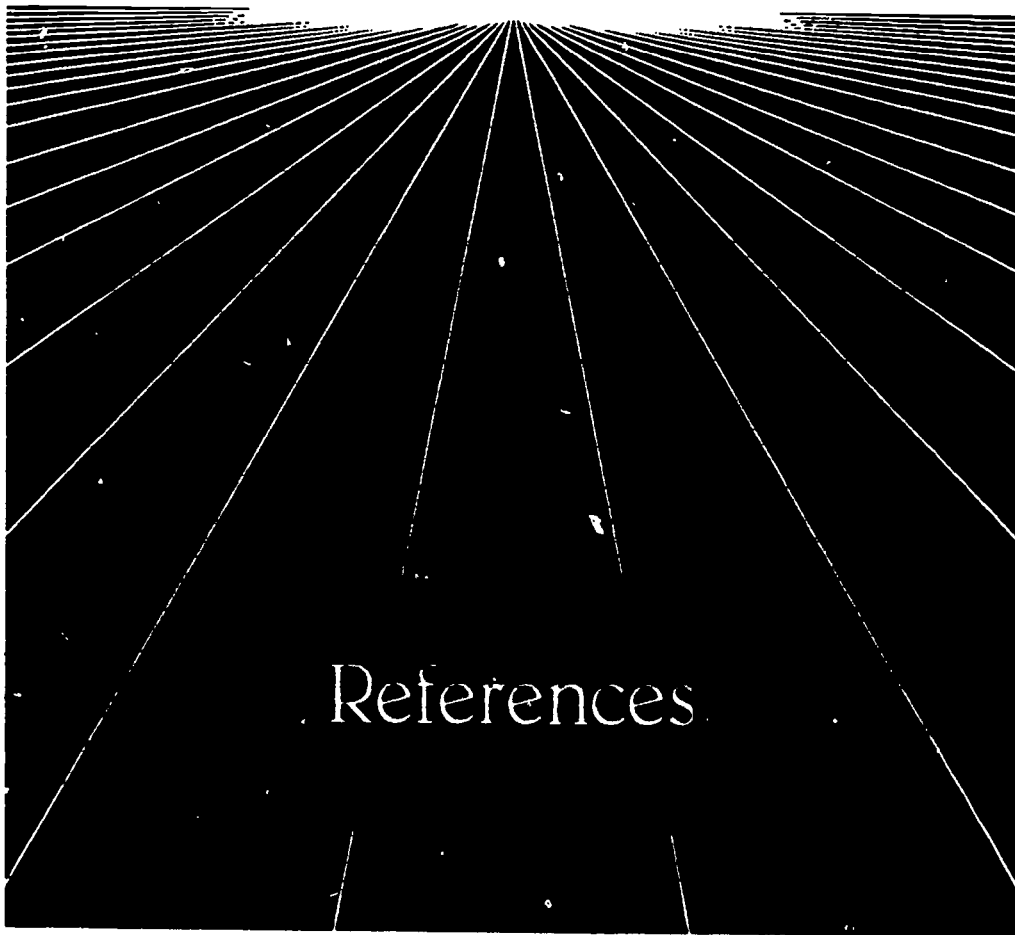
How will you deal with each of those concerns?

What changes do you need to make in your goal plan?

Do you feel in control of your life? Why or why not?

## RTW NOTES

# RIW



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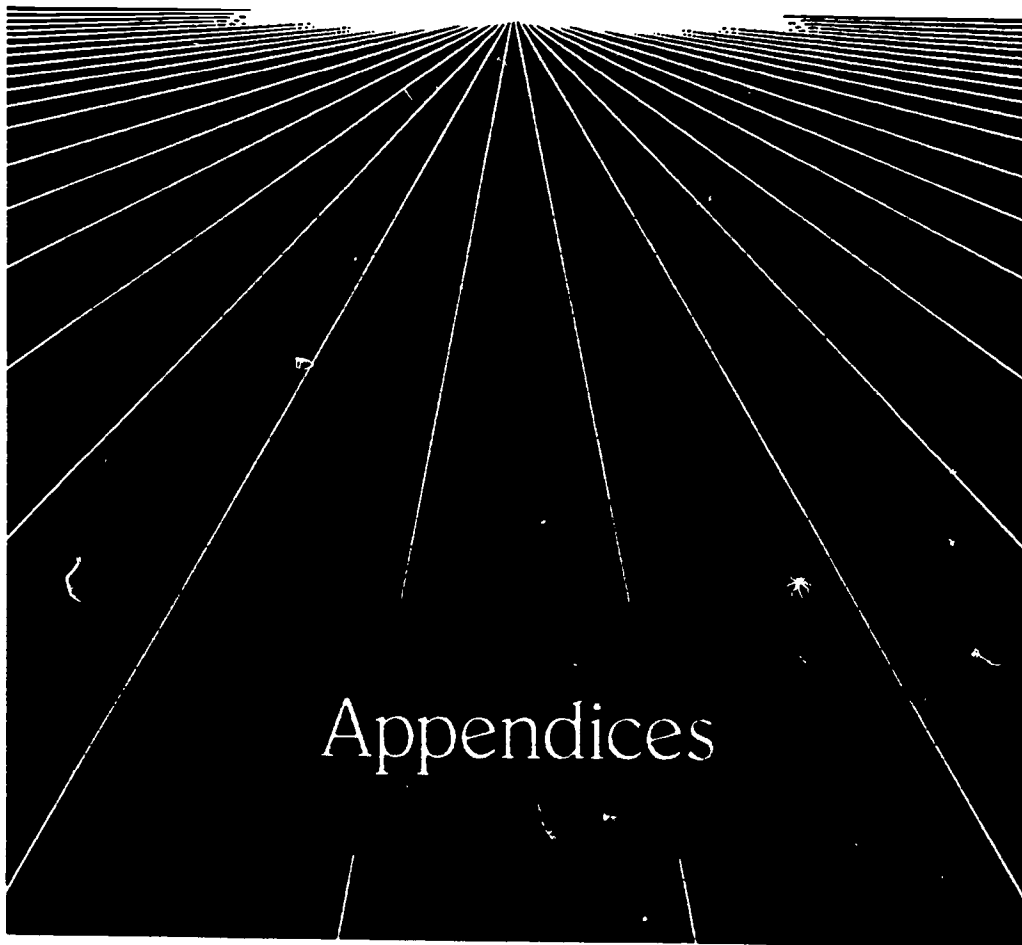
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# RIW



## APPENDIX A

### A Theoretical Model for RTW

## A Theoretical Model for RTW

People who have experienced a mid-life disability must cope with both the disability and its effects on their employment status. Successful resolution of this crisis requires the person to develop functional values, beliefs, and skills associated with two developmental phases -- acknowledgement and accommodation. Disability acknowledgement requires the individual to accept affectively the permanence of the disability, develop asset values, and assume responsibility for personal outcomes. In disability accommodation, the person identifies and pursues new life goals and develops and applies problem-solving, decision-making, and goal-setting skills (Livneh, 1986a, 1986b; Wright, 1983).

### A Theoretical Foundation for RTW

The theoretical model for RTW draws on systems theory and adult coping and transition research. For example, systems theory stresses that organisms strive to maintain homeostasis or balance. Interfering with predispositions to independence and self-control, disability and unemployment (adult transitions) threaten the individual's system balance, thereby requiring coping responses on the person's part (Shontz, 1975).

Theories of coping emphasize the importance of three elements: the event or stressor, the interpretation of the event, and the system response (Matheny, Aycock, Pugh, Curlette, & Cannella, 1986). In their depiction of the disability coping process, Power, Hershenson, and Schlossberg (1985) placed event interpretation in the initial phase of reappraisal. Remotivation and restructuring that follow reappraisal include, respectively, the selection, refinement, and implementation of a coping response. Event Interpretation, Reappraisal, Remotivation, and Restructuring (Hershenson, 1981) are alternative ways to describe the phases in Livneh's (1986a, 1986b) model of adaptation to disability. Therefore, to counter the early retirement syndrome, acknowledgement/coping skills must be taught and reinforced in an early return-to-work intervention for individuals who are experiencing feelings of depression and external control.

### Nature of the Event or Stressor

The adaptation process is significantly affected by the nature of the event disturbing the system's equilibrium. In this example, disability and unemployment represent the stressful events. Both are associated with a variety of negative psychological reactions (e.g., feelings of helplessness,

depression, hopelessness, and lack of personal control) (Belgrave and Washington, 1986; DeFrank & Ivancevich, 1986).

In her adult transition model, Schlossberg (1981) presented several explanations for the negative impact of disability and unemployment. Disability and unemployment portend long-term, undesirable role changes. Mid-life disability is often not only sudden in impact, but also unexpected or "off-time." Collectively, such event attributes ensure that the person's initial appraisal of the situation will result in system disequilibrium.

### Appraisal/Reappraisal

In explaining reactions to stressors, research underscores the importance of individual appraisal (Brammer & Abrego, 1981; Lazarus, 1966; Shontz, 1975). Occurring in the initial period of adjusting to an event, appraisal consists of three phases. The primary phase is feeling oriented; the event is associated immediately with positive or negative affect. Following this immediate affective reaction, a second, more cognitive appraisal occurs in which the person assesses the seriousness of the event, its impact on critical life areas, and the immediate ratio of personal deficits to personal resources. Results of this processing are evidenced in short-term reactions combining affective and cognitive components. Appraisal resolutions (tertiary phase) may leave the person in a state of negative affect with cognitions characteristic of depression and hopelessness, or in a state of positive affect with cognitions fostering hopefulness and energy. Depending on (a) future social/interpersonal events, (b) the presence of therapeutic interventions, and (c) factors related to the medical condition, trends in the appraisal phase crystallize into more positive or negative orientations during reappraisal.

Reappraisal consists of several types of cognitive assessments that have long-term implications for the individual's adaptation. Channeled by affective and cognitive states present at the end of the appraisal phase, reappraisal involves the person in intrapsychic processes in which self-beliefs, values, expectations, and perceived incentives and disincentives are considered. For reappraisal to initiate functional adaptation (Troll, 1981), the individual must interpret the event using cognitions and self-messages associated with internal control and positive self-esteem. In addition, if individuals are to return to work, they must value the work role (Kanungo, 1982; Shamir, 1986) and believe that the incentives for work resumption outweigh the disincentives (Hood & Downs, 1985). Moreover, individuals must believe that they know what steps to take to resume work (outcome

expectations) and that they possess the ability to implement those steps (self-efficacy judgments) (Bandura, 1986).

Other factors such as the availability of additional data influence reappraisal. New information gained about one's own psychological functioning, personal health, and social and vocational role opportunities affects one's reaction to a stressful event (Schlossberg, 1981). Reappraisal is also more likely to result in adaptive responses if the person acknowledges reality and accepts others and their help (Livneh, 1986b). Appropriate reactions are formulated during the remotivation stage.

### Remotivation

Principally a problem-solving stage, remotivation involves the person in developing goals and goal attainment plans, one of the latter disability adjustment steps (Livneh, 1986b). Problem solving and goal setting (changing the situation by initiating direct action) represent the most frequently used coping strategies (Matheny et al., 1986). Other coping mechanisms may also be selected such as neutralizing threat by controlling the meaning of the event (interpretation) or minimizing personal discomfort without working on the problem (Brammer & Abrego, 1981; Shontz, 1975).

Falling in the direct action category, problem-solving behaviors refer to actions "directed at the stressor to reduce its stressfulness." Other direct action techniques include the use of social skills, assertive responses, and structuring. Structuring is a form of anticipatory coping in which the person reviews resources and responses and plans how to use them in an expected stressful situation (Matheny et al., 1986, p. 512).

Other frequently used techniques such as cognitive restructuring (reframing) and information seeking focus on the meaning of the stressor, with the end goal being to decrease stress by interpretation (Matheny et al., 1986). Reframing involves changing one's perception of the stressor or changing one's assessment of personal resources. By accumulating additional information, the individual may reduce the stressfulness of an event or identify new, potentially successful responses.

Responses falling in yet another coping category, minimizing personal discomfort without addressing the problem, include avoidance/withdrawal, suppression/denial, and self-medication (drugs or alcohol). These responses are, at best, short-term solutions. Other forms of tension reduction such as "relaxation procedures, play exercise, or hobbies"

(Matheny et al., 1986, p. 512), however, have the potential to foster readiness for direct action.

Livneh (1986b) stressed the importance of direct action strategies during remotivation. Such strategies include identifying, exploring, and resolving the person's practical problems and redefining the person's "personal, social, and vocational goals and setting appropriate priorities for each" (pp. 8-9). For this reason, an early return-to-work intervention should adopt, in part, a problem-solving and goal-setting methodology. Remotivation includes identification of the core problem or problems, identification of the desired goal, generation of the desired goal, generation of alternatives, review and assessment of consequences or alternatives, solution and selection, solution implementation, and monitoring of outcomes of the action strategy (Tisdelle & St. Lawrence, 1986). Solution implementation and outcome monitoring are the essential elements of the restructuring phase.

### Restructuring

During restructuring, the person follows the goal plan, tests various options, and generalizes results from the plan to as many situations as possible. Brammer and Abrego (1981, p. 27) discussed successful implementation of plans as requiring five important skills: "identify stressful situations related to implementing goals, identify negative self-statements which interfere with implementing plans, utilize self-relaxation routines while anticipating the stressful implementation of plans, utilize self-rewards in goal attainment, and identify additional skills needed to implement goals." The end result of these actions is a new event that reinstates the appraisal, reappraisal, remotivation, and restructuring cycle.

### Return-to-Work: A Small Group Counseling Intervention

The purpose of this theoretical discussion of stress and transition models is to provide a rationale for RTW, an early counseling intervention for people who have experienced mid-career disabilities. The probability of resuming work can be enhanced through an appraisal/reappraisal, remotivation, and restructuring intervention that enables people to adapt to disability and unemployment. RTW is seen as appropriate for individuals who are in the medical stabilization or vocational evaluation phases of their rehabilitation program.

## Appendix B

### An Overview of Major Benefit Systems

1. Social Security Benefits and Work Incentives
2. Workers' Compensation
3. Long Term Disability

## Appendix B

### An Overview of Major Benefit Systems

#### Introduction

Distilling the complex and varying benefit systems into a succinct format is beyond the scope of this section. Instead, the material to follow presents general characteristics of major benefit systems. The Social Security section is the most universal, whereas Workers' Compensation varies according to state or federal jurisdictions. The long-term disability section is also a gross generalization, and the RTW trainer must make it very clear that stipulations may vary from policy to policy.

RTW instructors are cautioned not to apply the information in Appendix B unless it is modified and adjusted to conform to each participant's situation. For example, the trainer must research Workers' Compensation laws, regulations, and administrative procedures in the appropriate jurisdiction for each participant. Workers' Compensation programs may be either in state or federally administered.

In cases of long-term disability, the participant or facilitator may wish to discuss specifics with the insurance claims personnel or the participant's legal counsel if applicable. This may be addressed in assigning "homework" to participants.

The following are some services/documents for additional information:

#### I. Social Security

- a. Contact the Regional Social Security Claims Office in your area.
- b. "Red Book on Work Incentives - A Summary Guide to Social Security and Supplemental Security Income Work Incentives for the Disabled and Blind", Social Security Administration, Office of Disability SSA, Pub. #64-030, IC/U 436900, June, 1991.
- c. Szymanski, E. (1988). Rehabilitation Planning with Social Security Work Incentives: A Sequential Guide for the Rehabilitation Professional. Journal of Rehabilitation, 54(2), 28-33.



## II. Workers' Compensation

- a. Analysis of Workers' Compensation Laws, prepared and published annually by the U.S. Chamber of Commerce, 1616 H Street, NW, Washington, D.C., 20062, 301-468-5128.
- b. Contact the Regional Office of U.S. Department of Labor, Vocational Rehabilitation Department for Federal Jurisdictions of Workers' Compensation, for example, Federal Employee's Compensation Act, Longshore and Harbor Workers Act, etc.
- c. Commercial Insurance Carriers Claims Department, Claims Supervisor or Claims Manager, reference, Casualty Insurance Claims Directory, Francis B. Kelly & Associates, Los Angeles, California, 213-462-6570.
- d. Contact the Industrial Commission in your state for a copy of the State Compensation Act and for consultation.
- e. State Bar Association or Trial Lawyers' Association.
- f. Local Chapter of the National Association of Rehabilitation Practitioners in the Private Sector (NARPPS).
- g. State or local Chamber of Commerce.

## III. Long-term Disability

- a. Consult policy of individual or group policy.
- b. Consult claims personnel or legal advisor if applicable.
- c. Consult Employee Benefit Manager if employer sponsored group plan.

## Section I

### Overview of Social Security System Factors

#### Work Incentives

##### I. Impairment Related Work Expense

Provides that the cost of certain impairment related items/services that a person needs in order to work can be deducted from earnings and excluded from earned income in determining eligibility for benefits such as SSDI under substantial gainful activity or SSI monthly payment amount.

Note: Costs must have been paid by person with a disability (not paid by other source, e.g., insurance, employer, etc.). Service or item is necessary to work. Approved expenses can be excluded to compute eligibility payments or continuance of payments.

Examples - Attendant care at work or preparation for work, special transportation, job site accommodations, or devices like typing aids.

##### II. Continued Payment to Individuals under a Vocational Rehabilitation Plan (Section 301)

Provides continuation of SSDI/SSI payments after a person is found "no longer disabled on the basis of medical recovery" -- if the individual is participating in an approved state vocational rehabilitation plan and if such participation is likely to lead to independence (permanent removal from the disability rolls).

##### III. Trial Work Periods (SSDI)

Purpose: Offers the individual an opportunity to test ability to work without losing benefits.

Allows accumulation of up to 9 months of trial work (not necessarily consecutive) when earnings reach or exceed \$200 per month or 15 hours of work for self-employed.

#### **IV. Extended Period of Eligibility (Grace Period SSDI)**

**Purpose:** Reinstatement of SSDI cash payments for any month an individual does not perform substantial gainful activity within a specific period following the end of the trial work period.

**Note:** Not an extension of trial work period.

Individual may not need to file a new application for benefit checks if not successful in reaching or maintaining substantial gainful activity after completion of the trial work period.

Thirty-six months after the end of the trial work period is defined as the grace period.

#### **V. Medicare Qualifying Period (SSDI)**

**Purpose:** If a new disability begins, the individual does not need to wait for medicare coverage if previously qualified.

#### **VI. Extension of Medicare Coverage (SSDI)**

**Purpose:** Extends Medicare coverage up to 36 months beyond the end of the re-entitlement period or the last month of payment of disability benefits, whichever is later, or 39 months after the trial work period.

This applies to termination due to achievement of substantial gainful activity.

#### **VII. Plans for Achieving Self-Support (SSI)**

**Purpose:** Allows the individual to set aside income or resources to achieve a work goal, increasing or maintaining SSI payments.

Income and resources set aside are excluded under SSI income and resource tests in payment determination.

**Example -** Individual can set aside money, if approved by SSA, for plans such as education, training, starting a business, equipment, real property, etc. The funds must be utilized to develop paid employment or income generation.

Note: A formal plan will need to be prepared and submitted to the Social Security Administration. The SSA will help people put the plan in writing.

### VIII. Blind Work Expense (SSI)

**Purpose:** Excludes earned income of an individual with blindness which is used to meet expenses incurred in earning the income in determining SSI eligibility or payment amount.

Some examples of blind work expenses: transportation to and from work, guide dog expenses, vision and sensory aids, translation to braille materials, attendant care services, and union dues.

### SSI Special Benefits

#### For People Who Work

#### SSI Cash Benefits

SSI recipients with disabilities may receive cash benefits even if they work at the substantial gainful activity level.

They must meet all other eligibility and resource tests.

If earned income drops below the SGA level, the individual will be paid regular SSI benefits if requirements are met.

#### SSI Recipient Status for Medicaid

**Purpose:** Protects Medicaid benefits (if your state provides medicaid coverage to SSI eligibles) when earnings are too high for cash payments but not high enough to offset the loss of medicaid.

### Some Useful Definitions

#### Substantial Gainful Activity

Performance of physical or mental activity for remuneration (pay) or profit. Generally determined to be \$500 per month (persons with blindness have higher limits that change annually); self-employed persons

have different guidelines. This applies to the SSDI program. It applies to SSI only for initial determination.

### Beneficiary

Person who qualifies for Social Security Disability Insurance (SSDI) status or both SSDI and Supplementary Security Income (SSI).

### Recipient

Person who qualifies for SSI.

### Purpose of Work Incentives

To help people continuing to have disabling impairments to return to work by protecting their status and entitlement to cash payments or medicaid/medicare protection until they can reasonably be expected to pay their own way or buy their own health insurance protection. There are limitations and exceptions in the administration of the Social Security programs that apply.

## Section II

### Workers' Compensation Overview

#### To the Trainer:

The exercise in Section II is intended for Workers' Compensation beneficiaries; however, others may participate in the lecture and discussion. Advise participants that this section will cover an overview of the Workers' Compensation system as it affects their personal decision making.

A brief information session on key aspects will be presented and followed by a brief discussion period. Following the discussion period, instruct the participants to complete the attached worksheet by marking in the spaces provided. This worksheet will not be shared with the group, but used as a self-inventory to work with the facilitators in planning for a return to work.

Note: The trainer/facilitator should have a thorough knowledge of specific compensation laws for states and federal jurisdictions.

#### Introduction

Workers' Compensation is the oldest form of social insurance. Each of the 50 states and U.S. territories has a compensation law. Several federal Workers' Compensation laws also cover public and private employees.

In essence, Workers' Compensation laws require that employers assure the costs of occupational disabilities without regard to fault. It serves to relieve the employer from common law suits involving negligence.

#### Basic Objectives of Workers' Compensation Laws

1. Provide sure, prompt, and reasonable income and medical benefits to work accident victims or income benefits to their dependents regardless of fault.
2. Reduce court delays and costs that arise from personal injury litigation.
3. Relieve public and private charities of financial drain.
4. Encourage maximum employer interest in safety and rehabilitation.
5. Study causes of accidents, thereby, reducing preventable accidents.

Remember, each state or jurisdiction has established its own "rules" for coverages and requirements. Be aware of the jurisdictions that RTW participants are in and help them understand their rights and responsibilities under that law.

Generally, the benefits include such things as:

- Medical benefits - usually without time or dollar limits for work-related injury coverage.
- Impairment or disability benefits - income or cash benefits are generally assigned on the basis of a percentage of wages with minimum and maximum benefits stipulated by each jurisdiction. Some jurisdictions allow additional amounts for dependents.
- Rehabilitation benefits

Rehabilitation is provided in all states. Even if unspecified in the law, it includes medical rehabilitation but may extend to vocational rehabilitation or retraining. Medical restoration costs, job placement assistance or vocational training assistance may also be provided.

Although variations will occur from state to state or jurisdiction to jurisdiction, the following are some general provisions of Workers' Compensation. These provisions are included for discussion purposes but must be related to the participant's individual situation and jurisdiction.

### Types of Ratings

**Temporary Total Disability.** The person is totally disabled during the benefit period but has a reasonable expectation of recovery to some extent and subsequent return to employment. (Not necessarily the same job.)

**Permanent Total Disability.** The employee is regarded as totally disabled and will permanently be unable to perform any gainful employment (paid employment).

**Partial Disability.** The disability may be either temporary or permanent in nature where some work capability is retained. Generally, a wage loss/replacement percentage is paid or a scheduled award is made, where a predetermined payment percentage is calculated.

## General Guidelines

Depending upon state or jurisdiction regulations and type of rating, benefits consisting of a percentage of wage replacement are paid.

Example: Provision of 66 2/3% of average weekly wage is paid to an individual classed as having a temporary total disability until the person reaches maximum medical improvement, employment is re-established, or work capability is defined (depending on state systems). Income support benefits would be adjusted according to regulations of specific laws.

## Miscellaneous Information

Medical benefits covering losses associated with the "compensatory injury" (specific work-related injury) may continue beyond return to work and adjustment of income supports (unless included in legal settlement of claim).

A worsening of condition after resumption of work that interferes with continued employment may result in resumption of income benefits if related to the original claim.

New injuries (not related to original injury) would be administered separately by the employer, if work related.

Some jurisdictions require or mandate participation in vocational rehabilitation and require employers to support the costs. Approximately three-fourths of all states and jurisdictions mandate vocational rehabilitation with reduction in benefit consequences for noncompliance with approved plans.

Maintenance benefits to support participation in vocational rehabilitation are generally available for such costs as transportation as justified by the individual plan.

Job placement services may be funded.

In certain instances, job retraining costs may be paid.



## Trainee Workbook

### Workers' Compensation

If you are a Workers' Compensation beneficiary, please complete the following:

1. In what state or jurisdiction are you covered? \_\_\_\_\_

2. What is your benefit type?

Temporary Total Disability \_\_\_\_\_  
Permanent Total Disability \_\_\_\_\_  
Permanent Partial Disability \_\_\_\_\_  
Temporary Partial Disability \_\_\_\_\_  
None of the above \_\_\_\_\_

3. Are you receiving or have you filed for any of the following (check if yes)?

Disability retirement \_\_\_\_\_  
Age retirement \_\_\_\_\_  
Social Security Disability \_\_\_\_\_  
Settlement \_\_\_\_\_  
Long-term disability benefits \_\_\_\_\_

4. How would your income benefits be affected if you were to find employment?

No effect \_\_\_\_\_  
Stop \_\_\_\_\_  
Reduce \_\_\_\_\_  
Supplement earnings \_\_\_\_\_  
Don't know \_\_\_\_\_  
Other, please describe \_\_\_\_\_

5. My state or jurisdiction:

a. Pays for vocational rehabilitation (placement and/or training).

Yes \_\_\_\_\_  
No \_\_\_\_\_  
Don't know \_\_\_\_\_

b. Requires participation in vocational rehabilitation (placement and/or training).

Yes            \_\_\_  
No             \_\_\_  
Don't know   \_\_\_

c. Encourages participation in vocational rehabilitation.

Yes            \_\_\_  
No             \_\_\_  
Don't know   \_\_\_

6. My employer is required to re-employ me in my old job or a new job or continue my benefits.

Yes            \_\_\_  
No             \_\_\_  
Don't know   \_\_\_

7. My employer/insurance company is required to help me find a job paying at least the salary of my last job.

Yes            \_\_\_  
No             \_\_\_  
Don't know   \_\_\_

8. If I return to employment and I have problems with my work injury, I will be responsible for medical bills for treatment of my work injury.

Yes            \_\_\_  
No             \_\_\_  
Don't know   \_\_\_

## Section III

### Long-term Disability

#### Overview

Long-term disability insurance coverage varies from policy to policy but essentially covers lost earnings due to an impairment. Generally, there is a waiting period before eligibility for benefits is established. Inability to perform usual work is the criterion for benefits. In many policies, inability to perform the usual occupation for two years will entitle the claimant to wage loss benefits. Often after two years of benefits, the claimant is evaluated on the basis of ability to perform any work to establish eligibility of continued benefits. As policies differ greatly, it is important to establish a firm understanding of your particular coverages and entitlements.

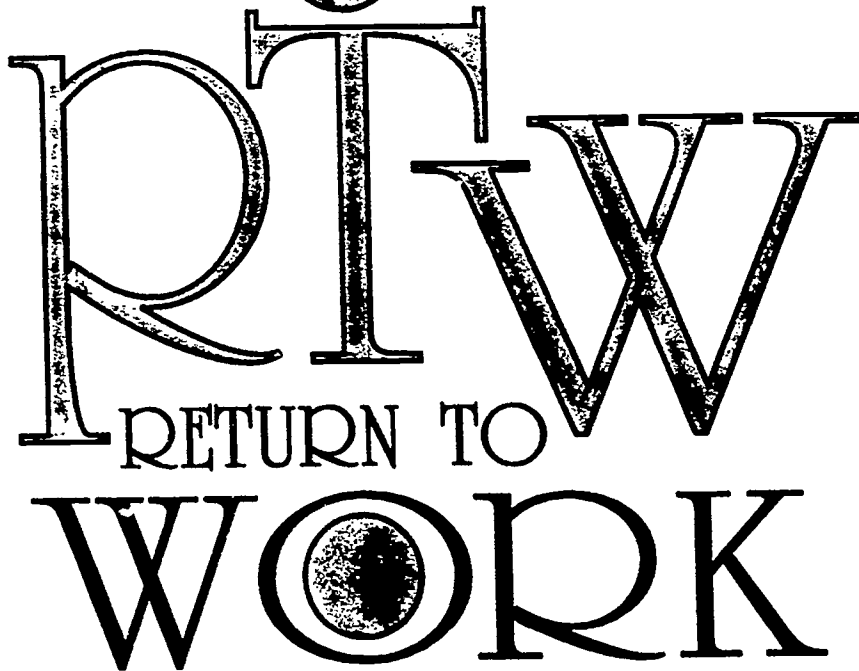
#### Purpose

Provides wage protection for inability to work due to impairment.

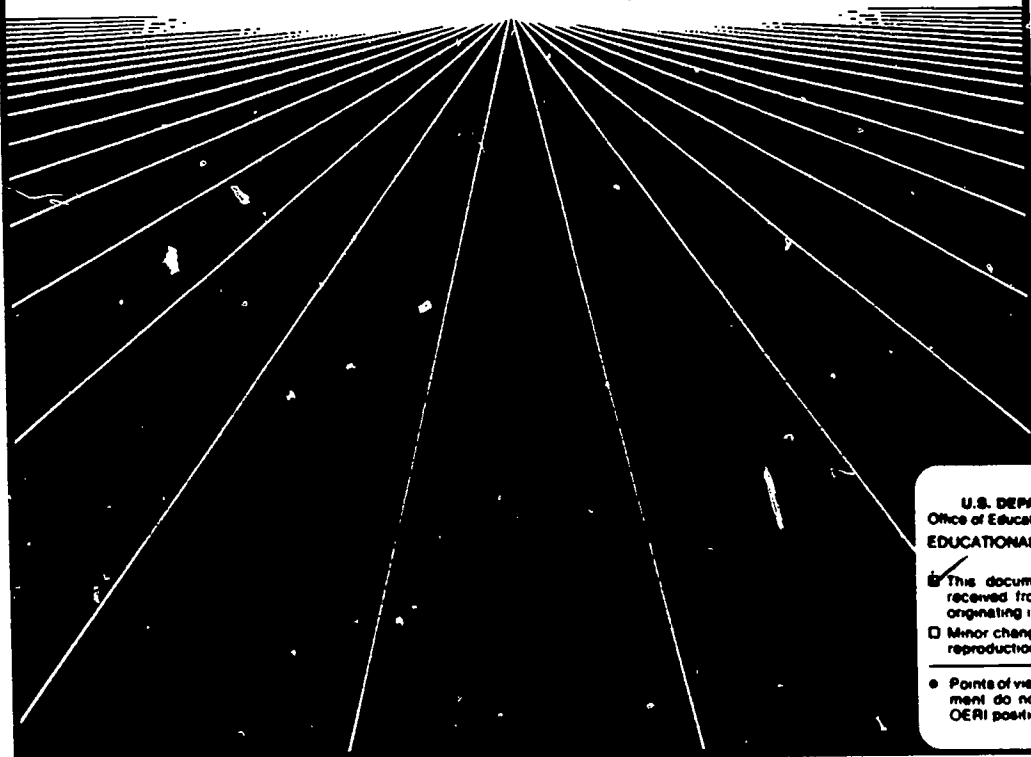
Coverage varies from policy to policy but usually up to two years if the person is not able to return to usual and customary work due to disability. If unable to work in any occupation after two years, benefits may continue.

Insurer may require or recommend vocational rehabilitation to assist in return-to-work planning.

Insurer may recommend an application to Social Security Disability Insurance as a benefit offset. Work incentives under Social Security would apply.



# RTW RETURN TO WORK



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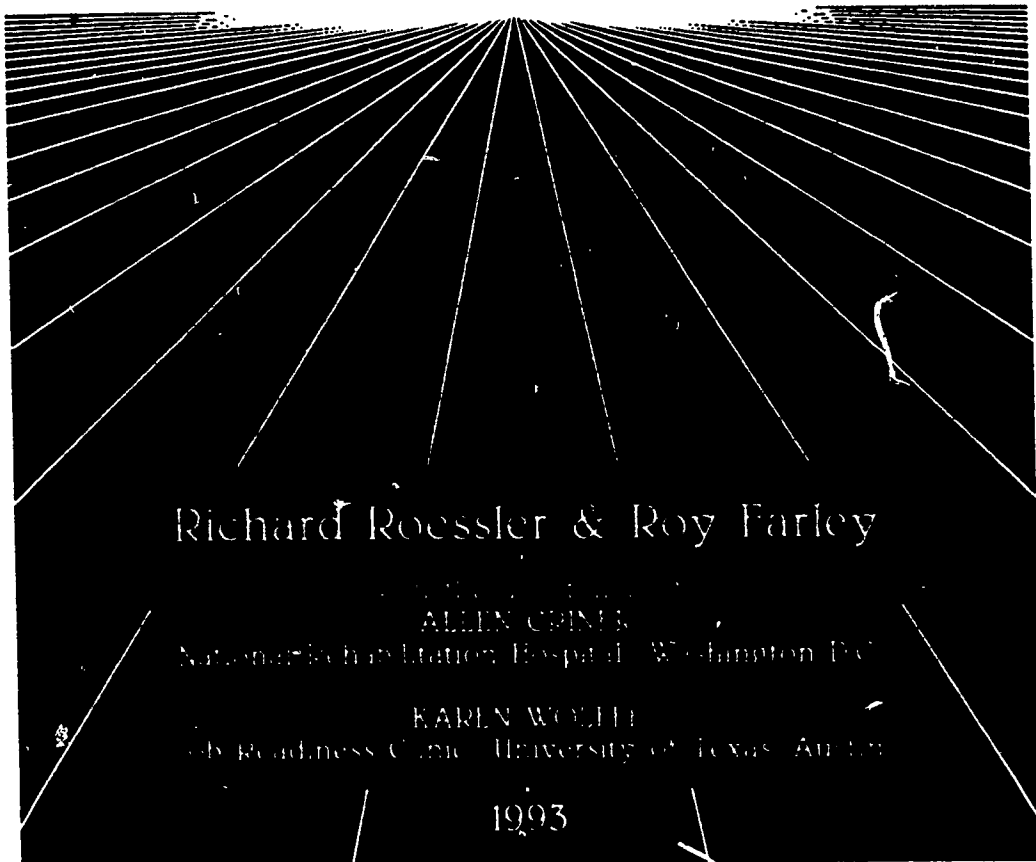
Roy Farley

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# RIW

## Return to Work

Participant's Manual



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1993

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## Foreword

Welcome to the Return-to-Work (RTW) program. We are pleased that you are interested in examining your goals and plans for the future. You will find many interesting ideas and activities in RTW. You will also make some good friends over the next few weeks -- people who can help you achieve your goals.

RTW is divided into three major sections:

Module I: Coping with Disability and Related Life Changes

Module II: Life and Benefits Planning

Module III: Return to Work

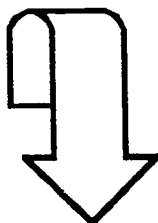
You will complete most of the activities in your workbook during the RTW sessions. Occasionally, you will have some work to do outside of the group, but your RTW leader will help you with those activities.

Best wishes for a successful RTW experience.

The Authors

## Activity 1: Return-to-Work (RTW)

RTW will help you gain control of your life. You will also have the opportunity to:



- share with others who have experienced a disability;
- explore your reactions and the reactions of others to disability;
- learn new ways to think about and cope with disability;
- develop new life goals;
- explore your images of satisfying work;
- identify a work goal; and
- develop a plan to return to work.



## Activity 2: Examples of Major Life Events

### Examples of Major Life Areas

- \* Physical  
How our bodies work
- \* Intellectual  
How we think
- \* Emotional  
How we feel
- \* Behavioral  
How we act
- \* Social  
Our family and friends
- \* Work  
Our ability to earn money
- \* Economic  
Our finances

### Examples of Major Life Events

- \* People acting contrary to what we want
- \* Changes and transitions
- \* Unfair or unjust treatment
- \* Losing someone or something very important
- \* Difficulties or hardships
- \* Dangerous or threatening situations
- \* Not getting something we want

### Activity 3: My Disability as a Major Life Event

#### How I see my Disability

My description of my disability:

My disability affects my ... (Check all that apply.)

- |                                           |                                                           |
|-------------------------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> Use of arms      | <input type="checkbox"/> Memory                           |
| <input type="checkbox"/> Use of hands     | <input type="checkbox"/> Ability to understand speech     |
| <input type="checkbox"/> Ability to walk  | <input type="checkbox"/> Vision                           |
| <input type="checkbox"/> Ability to stand | <input type="checkbox"/> Hearing                          |
| <input type="checkbox"/> Ability to sit   | <input type="checkbox"/> Speaking                         |
| <input type="checkbox"/> Strength         | <input type="checkbox"/> Moods/Emotions                   |
| <input type="checkbox"/> Endurance        | <input type="checkbox"/> Ability to get along with others |
| <input type="checkbox"/> Learning         | <input type="checkbox"/> Judgment                         |
| <input type="checkbox"/> Reading          | <input type="checkbox"/> Problem-solving ability          |
| <input type="checkbox"/> Writing          | <input type="checkbox"/> Desire to work                   |

## Activity 4: Typical Reactions to Disability

### Typical Feelings (Emotional Reactions)

- I just feel numb and empty. This is all unreal. (SHOCK)
- I don't know what to do. I am so scared I can't think. (FEAR)
- I feel worthless; I don't care what happens. What's the use? (DEPRESSION)
- I hurt deep down. All I can think about is the way things used to be. (GRIEF)
- I feel guilty; I must have done something to deserve this. (GUILT)
- I'm mad. It's not fair. This should not have happened to me. (ANGER)

### Typical Actions (Behavioral Reactions)

- I just sit and watch television. (IMMOBILIZATION)
- I don't talk about it. I am going back to my regular routine. (DENIAL)
- I often cry. I remember how good things used to be. (MOURNING)
- I stay home. I don't see anybody or do anything. (WITHDRAWAL)
- I take my medicine off schedule. I don't take care of myself. I just don't  
care. (SELF-ABUSE)
- I argue. I tell people their ideas are stupid. I do what I want to do.  
(AGGRESSION)
- I throw things at people. (HOSTILE ACTING OUT)

## Activity 5: My Reaction to my Disability

Reaction



Feelings/  
Emotions

Numb  
Anxious  
Indifferent  
Angry  
Depressed  
Bitter  
Guilty  
Hostile



Actions/  
Behavior

Strike others  
Stay silent  
Refuse to participate  
Say mean things  
Argue with others  
Make no decisions  
Try to do everything  
Hurt myself

### My Reaction

When I think about my disability and my situation, I usually feel (list feelings) and I usually act (list actions):

List Feelings

List Actions

### Activity 6: Changes in Major Life Areas

My disability affects my ... (check all that apply)	My General Reactions to Disability Feelings/Actions
<input type="checkbox"/> Physical functioning  <input type="checkbox"/> Emotional functioning  <input type="checkbox"/> Family life  <input type="checkbox"/> Educational plans  <input type="checkbox"/> Employment status  <input type="checkbox"/> Economic situation  <input type="checkbox"/> Social/Leisure activities	

## Activity 7: Determining if Emotions (Feelings) and Behaviors (Actions) are in My Best Interest

Reactions that are in our best interest help us ...

1. See things clearly.
2. Think clearly.
3. Have helpful feelings.
4. Make creative and realistic plans.
5. Act in productive ways.
6. Achieve our goals.
7. Maintain good interpersonal relationships.
8. Maintain our safety and health.

Reactions that are not in our best interest ...

1. Interfere with seeing things clearly.
2. Confuse us.
3. Lead to destructive feelings.
4. Block creative and realistic plans.
5. Lead to further self-defeating actions.
6. Block goal achievement.
7. Result in interpersonal conflict.
8. Harm our safety and health.

## Activity 8: My Reactions: Are They in my Best Interest?

Yes    No    (Check your answer.)

- |                          |                          |                                                                            |
|--------------------------|--------------------------|----------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. My feelings and actions help me see the situation clearly.              |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. My feelings and actions help me think clearly.                          |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. My feelings and actions help me experience helpful feelings.            |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. My feelings and actions help me set realistic goals and plans.          |
| <input type="checkbox"/> | <input type="checkbox"/> | 6. My feelings and actions help me behave productively.                    |
| <input type="checkbox"/> | <input type="checkbox"/> | 7. My feelings and actions help me achieve my goals.                       |
| <input type="checkbox"/> | <input type="checkbox"/> | 8. My feelings and actions help me avoid negative conflict with others.    |
| <input type="checkbox"/> | <input type="checkbox"/> | 9. My feelings and actions help me maintain my personal safety and health. |

Overall:

- |                          |                          |                                                                               |
|--------------------------|--------------------------|-------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | My feelings and actions are helpful, productive, and serve a useful function. |
|--------------------------|--------------------------|-------------------------------------------------------------------------------|

## Activity 9: Understanding Feelings and Actions

<b>Events</b>	<b>Reactions: Feelings/Actions</b>
Not getting what I want	Denial
Others behaving contrary to what I want	Anger
Losing something important	Depression
Experiencing changes or threatening situations	Fear
Unfair or unjust treatment	Arguing
Experiencing difficulties or disabilities	Withdrawing

<b>Event</b>	<b>Causes</b>	<b>Reaction</b>
Disability		Denial
Dangerous situation		Fear
Losing something important		Depression
Not getting what I want		Anger

We think that the event directly causes the reaction. But is that the case?



## Activity 10: The Role of Beliefs

<u>Same Event</u>	<u>Different Reactions</u>
Losing a job	Depressed Afraid Angry Happy
<u>Why?</u>	

Event	Your Beliefs about the Event	Reactions: Feelings/Actions
-------	---------------------------------	--------------------------------

## Activity 11: Major Beliefs About Events

1. Our beliefs about what we want the situation to be; our goal for the situation.
2. Our evaluation of the negative aspects of the situation.
3. Our beliefs about the difficulty of the situation and our ability to cope with it.
4. Our evaluation of our worth and that of others.

### Beliefs that Control our Reactions

#### 1. What we want the situation to be:

<u>Irrational</u>	<u>Rational</u>
Demanding _____	Preferring
demand	desire
insist	want
have to/must	wish
require	prefer

#### 2. Negative aspects of the situation

Awfulizing _____	Adjusting
awful	bad
terrible	undesirable
horrible	unfortunate
catastrophic	inconvenient

#### 3. Ability to cope

Moping _____	Coping
can't	can
impossible	possible
too hard	difficult
too difficult	manageable

#### 4. Worth

Condemning _____	Valuing
rotten	worth
sorry	talented
worthless	able
useless	skilled

**Activity 12: Understanding Personal Reactions to Disability and Related Life Changes**

**A Your Perception of the Event**

**B Your Beliefs About the Event**

**C Your Reactions: Feelings and Actions**

## Activity 13: How to Change Beliefs

### **Step One: Challenge and dispute self-defeating beliefs ...**

- Does evidence exist to support my beliefs?     \_\_\_Yes     \_\_\_No  
Do my beliefs lead to helpful feelings?        \_\_\_Yes     \_\_\_No  
Do my beliefs lead to productive action?        \_\_\_Yes     \_\_\_No  
Do my beliefs help me avoid negative conflict   \_\_\_Yes     \_\_\_No  
with others?  
Do my beliefs help me maintain my health?     \_\_\_Yes     \_\_\_No

### **Step Two: Learn rational self-statements that stress ...**

1. Preferring: state your desires as preferences, not requirements.
2. Adjusting: acknowledge the negative aspects of the situation, but don't exaggerate them.
3. Coping: recognize the difficulty but acknowledge your ability to cope; don't deny your capabilities.
4. Valuing: stress your self-worth and value.

### **Step Three: Practice your ...**

1. Rational self-statements
2. Self-enhancing feelings and actions

## Activity 14: Learning Rational Self-Statements

### GUIDELINES

- Change demanding to preferring  
“I want, wish, or prefer” instead of “must,” “should,” or “do.”
- Change awfulizing to adjusting  
Use “unfortunate” instead of “awful” or “terrible.”
- Change moping to coping  
“I can, although it might be hard” instead of “I can’t; it’s impossible.”
- Change self-condemning to valuing  
“I am a person of worth. I have many valuable skills.”

### EXAMPLES

An irrational statement: \_\_\_\_\_

---

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A rational alternative: \_\_\_\_\_

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**Activity 15: Practicing New Beliefs**

**A Your Perception of the Event**

**B Your Beliefs About the Event**

**C Your Reactions: Feelings and Actions**

## Activity 16: Taking Control

Areas

Goals

Physical well-being: Your health and strength	
Emotional well-being: Your self-image and mental health	
Social relationships: Family and friends	
Educational development: Training and skills	
Employment: Satisfying work	
Economic: Financial well-being	
Leisure/Recreation: Hobbies and relaxation	

### Important Questions

1. What exactly do I want to achieve?
2. When do I want to achieve it?
3. What information and help do I need?
4. What are the costs/benefits to me and others?
5. How can I improve my chances of succeeding?

## Activity 17: Considerations in Preparing for Work

Check items that are important in your employment planning.

- 1. Disability or health problems.
- 2. Need for marketable skills and/or training.
- 3. Loss of certain benefits or insurance payments such as medical benefits, Social Security, Workers' Compensation, disability insurance, etc.
- 4. Lack of child care.
- 5. Lack of attendant care.
- 6. Lack of affordable and accessible transportation to and/or from work.
- 7. Unavailability of affordable and accessible housing.
- 8. Need for special equipment or devices to do my work or to get around at work.
- 9. Need for medical treatment or therapy.
- 10. Lack of suitable work or difficulties finding suitable work.
- 11. Employers who do not recognize that I am capable of working.
- 12. Costs of looking for work (printing resumes, travel expenses to get to interviews, etc.)
- 13. Lack of family support.
- 14. Start up costs for self-employment.

List and check other personally important items.

- 15. \_\_\_\_\_
- 16. \_\_\_\_\_



## Activity 18A: Benefit Systems

Check the benefit systems that apply to you.

Some types of disability related benefits:

- 1. Social Security Disability Insurance
- 2. Supplemental Security Income
- 3. Workers' Compensation
- 4. Long-term disability benefits
- 5. Medicaid/Medicare coverage
- 6. Medical benefits - health care benefits
- 7. Disabled veterans' benefits
- 8. Disability retirement
- 9. Other private insurance
- 10. Public assistance

Activity 18B: Planning Inventory

1. What is (are) your present source(s) of income?

<u>Monthly Amount</u>	<u>Source</u>
_____	Self (savings, work)
_____	Family/spouse
_____	Social Security (SSI/SSDI)
_____	Disability insurance
_____	Public assistance
_____	Other (list) _____

2. How much money do you need to cover your living expenses and any debts you may have?

\_\_\_\_\_ per week or \_\_\_\_\_ per month

3. Do you currently have any judgments or legal actions pending against you?  Yes  No

4. Are you receiving any legal advice or assistance?  
 Yes  No

5. Are you in need of any legal advice or assistance?  
 Yes  No

6. List any other social service agencies or organizations that are assisting you.

7. Are you responsible for the care/well-being of any minor children, disabled or elderly individuals?  Yes  No (If yes, please indicate name, age, and relationship)

Name	Age	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____

Are present arrangements adequate to meet these demands?

Yes  No

8. Are your family members or the people you live with helpful or supportive of you in trying to find work or obtain training?

Yes  No

**Information Needs:** Review your answers to Questions 1-7. List items that indicate areas in which you need help. State your information needs for each item.

Item #      Question or Comment

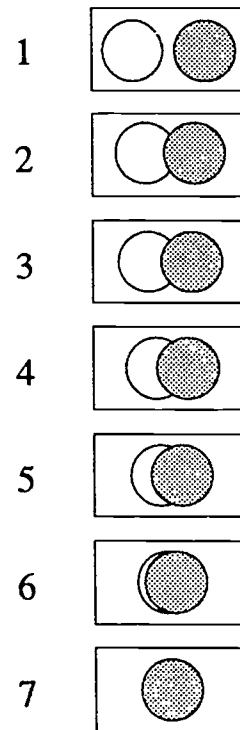
_____	_____
_____	_____
_____	_____
_____	_____

Financial Concerns	Resources	Plan of Action
1.		
2.		
3.		
4.		
5.		

## Activity 19: Employment: How Ready Are You?

### Instructions

How ready are you to return to work? Imagine that the shaded circle represents ready to work and the other circle represents you.\* In Box 1, the two circles are separate, indicating that you are completely unready to return to work. In Box 7, the two circles overlap totally, indicating that you are ready to return to work today. Circle the number of the box that shows how ready you are to return to work, considering your skills and disability.



List two reasons for the rating you selected.

1.

2.

\*Kanungo, R. (1982). *Work alienation*. New York: Praeger. Reprinted with permission.

## Activity 20: Work Meets Many Needs

Two attractive job choices:

1. \_\_\_\_\_

2. \_\_\_\_\_

Will this job help you ...

	Job 1		Job 2	
	Yes	No	Yes	No
Make enough money?	___	___	___	___
Gain the respect of others?	___	___	___	___
Use your talents?	___	___	___	___
Make new friends?	___	___	___	___
Help other people?	___	___	___	___
Improve your skills?	___	___	___	___
Get control of your life?	___	___	___	___

## Activity 21: Matching Job Requirements and Abilities

Job 1: \_\_\_\_\_ Job 2: \_\_\_\_\_

<u>Abilities</u>	Any limitations? (Check if a limitation.)	Job Requirement? (Check if a requirement.)	Job Requirement? (Check if a requirement.)
Learn quickly	___	___	___
Read/Write English	___	___	___
Remember facts/ figures	___	___	___
Look at things without confusion	___	___	___
See	___	___	___
Hear	___	___	___
Speak	___	___	___
Understand what others say	___	___	___
Use arms	___	___	___
Use legs	___	___	___
Get around	___	___	___
Sit for long periods	___	___	___
Stand for long periods	___	___	___

✓ ✓ indicates an area in which you may need a reasonable accommodation.  
List reasonable accommodations that you may need to return to work.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

## Activity 22: Getting Started

My goal: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Obstacles

1. \_\_\_\_\_

Who can help?/How can they help? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_

Who can help?/How can they help? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_

Who can help?/How can they help? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Activity 23: Writing a Goal Plan

My goal: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Important Areas (check all that apply)

- |                                                                |                                                            |
|----------------------------------------------------------------|------------------------------------------------------------|
| <input type="checkbox"/> Physical (medical)                    | <input type="checkbox"/> Attendant services                |
| <input type="checkbox"/> Emotional (counseling)                | <input type="checkbox"/> Financial & health benefits       |
| <input type="checkbox"/> Training (educational/<br>vocational) | <input type="checkbox"/> Housing                           |
| <input type="checkbox"/> Family (child care)                   | <input type="checkbox"/> Transportation                    |
| <input type="checkbox"/> Other (specify) _____                 | <input type="checkbox"/> Employer (training/modifications) |

My Goal Plan

Area 1: \_\_\_\_\_

Brainstorm all steps that apply:

List steps in order:



Area 2: \_\_\_\_\_

Brainstorm all steps that apply:

List steps in order:

Area 3: \_\_\_\_\_

Brainstorm all steps that apply:

List steps in order:

Area 4: \_\_\_\_\_

Brainstorm all steps that apply:

List steps in order:

Area 5: \_\_\_\_\_

Brainstorm all steps that apply:

List steps in order:

## My Goal Plan

Goal: \_\_\_\_\_

\_\_\_\_\_

Area:

Steps:

Area:

Steps:

Area:

Steps:

Area:

Steps:

Area:

Steps:

I will achieve my goal by \_\_\_\_\_

## Activity 24: Reviewing our Goal Plans

My goal \_\_\_\_\_

### New Ideas for my Goal Plan

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

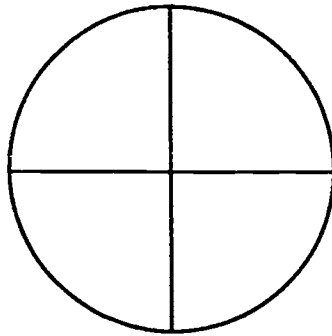
### Expected Employment Outcomes

	3 mos.	6 mos.	1 year
Employed full-time	_____	_____	_____
Employed part-time	_____	_____	_____
Self-employed	_____	_____	_____
In vocational training or school	_____	_____	_____
Unemployed	_____	_____	_____

## Activity 25: Following Up

Describe your progress on your goal plan.

How do you feel about your progress toward your goal? Write a feeling word in each quadrant.



What concerns/problems have you encountered in returning to work or achieving your goal?

How will you deal with each of those concerns?

What changes do you need to make in your goal plan?

Do you feel in control of your life? Why or why not?

A Small Group  
Counseling Program to Enhance  
Coping with Disability  
Goal Setting  
Employment Planning

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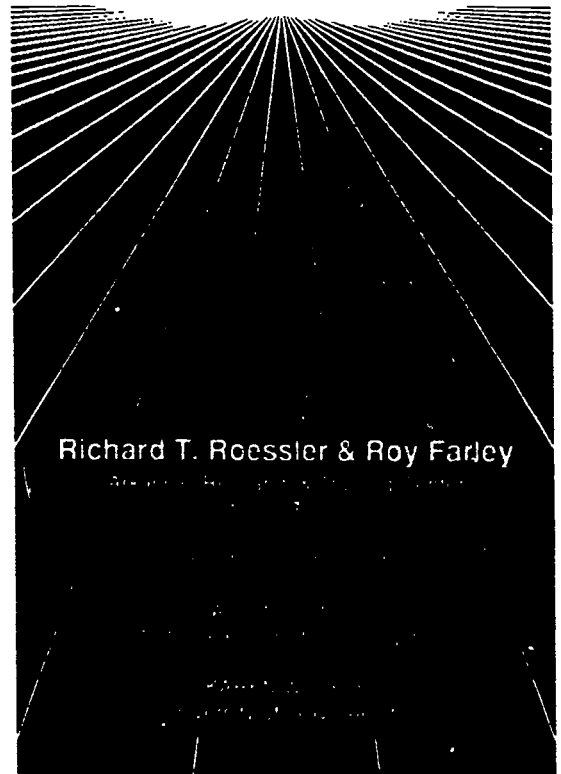
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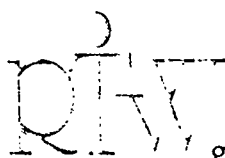
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Return-to-Work (RTW) is a small group counseling program designed to help people cope with mid-career disabilities. The program is divided into three modules:

- Module 1**  
*Coping with disability and related life changes*
- Module 2**  
*Life and benefits planning*
- Module 3**  
*Return to work*

The program requires 20-30 hours of class sessions with minimal homework assignments. RTW was tested with individuals in rehabilitation hospitals and facilities who had experienced a variety of physical disabilities.

Program materials include a Trainer's Manual and Participant's Manual available from the Arkansas Research and Training Center in Vocational Rehabilitation. Supplementary materials are suggested that are available from the Social Security Administration and the Easter Seals Society.

## **Module 1**

### *Coping with disability and related life changes*

Module 1 orients participants to RTW and to their emotional and behavioral reactions to disability. Participants learn to apply the fundamentals of rational behavior problem-solving in their daily lives.

## **Module 2**

### *Life and benefits planning*

In Module 2 participants explore a variety of goals for their lives and examine the impact of work resumption on their financial benefits. The life planning activities in Module 2 prepare the person for a more indepth review of vocational options in Module 3.

## **Module 3**

### *Return to Work*

Module 3 concentrates on work remotivation. Participants discuss how ready they are to resume work, the personal needs met through employment, and the types of jobs they would like to do. Job choices are made followed by consideration of the types of reasonable accommodations that would enhance job / person compatibility. Module 3 closes with the development of an employment plan.

**ADDITIONAL COPIES**

**Return to Work**

#60-1636	Trainer's Manual .....	15.00
#60-1637	Participant's Manual.....	7.50

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