

Cognitive work hardening stands up to rigorous new research Benefit from an evidence-based intervention!

The results are in ... Cognitive work hardening (CWH) has recently undergone rigorous scientific study to find out how well it helps people get back to healthy, productive work after depression.



Registered occupational therapist Adeena Wisenthal's newly-completed doctoral research with CWH clients found self-reported work ability, fatigue, and depression severity significantly improved after intervention.

Three months later, three-quarters of the 21 study participants were off disability and either working or engaged in other meaningful occupation. Main gains were reported in routine, work stamina, self-confidence, cognitive abilities, and coping strategies. Study participants credited the structure, work simulations, realism of simulated work environment, support, and education offered by CWH as key (Wisenthal, 2015).

This research builds on findings from a 2008 survey of 34 CWH clients in which 94% were off disability upon intervention completion. The majority remained off disability three months after intervention completion and there was a shift from part time work status to full time. Eighty-one percent of respondents reported that the CWH intervention boosted their return-to-work success and 83% said that they would recommend it to a friend.

Wisenthal has been offering CWH through ERGO-Wise (Ottawa, Ontario) since 2000 targeting a broad range of functional issues that people with depression face which are critical for resuming job duties and achieving return-to-work success (Wisenthal & Krupa, 2013).

These include the energy capacity required for overall stamina and functional ability to adopt a work routine and adhere to a work schedule (Lam et al., 2013) and the cognitive abilities to assume job duties such as sustained task concentration, planning, and sequencing (Goldner, et al., 2004; Saint-Arnaud et al., 2006).

Depression can also impact interpersonal skills, ability to handle stress, and time

[... continued page 2](#)



Adeena Wisenthal is a registered occupational therapist and founder of ERGO-Wise, specializing in helping people on mental health related disability leave get back to work.

Adeena's doctoral research confirms a clinical approach that won her the Canadian Association of Occupational Therapist's Innovative Practice Award.

Cognitive work hardening delivers!

Cognitive work hardening is provided within an occupational therapy framework and recovery paradigm.

Cognitive work hardening is grounded in 'classical' work hardening, an evidence-based intervention that prepares people to return to work typically following a physical injury and/or a musculoskeletal condition.

Cognitive work hardening is especially well-suited to the unique return-to-work issues faced by disability claimants on mental health leaves.

Claimants with medical conditions in which cognitive abilities and/or stamina may be affected (e.g., cancer survivors, post concussion) have also benefited from this intervention.

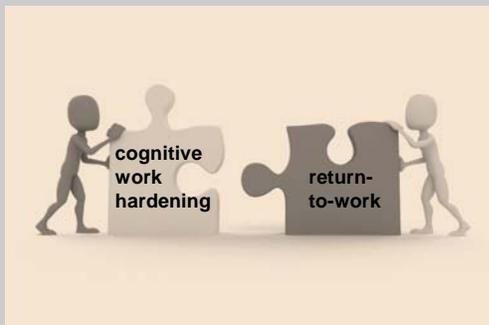
Reference: Wisenthal, 2015

Cognitive work hardening

continued from page 1

management which have been identified by researchers as negatively impacting occupational functioning (Bender & Farvolden, 2008; Lam et al., 2012). These are addressed in CWH as part of the client's overall treatment intervention and preparation for return-to-work.

CWH is often the missing link between a mental health disability and work



What clients say:

"It's given me the confidence to move forward."

"... by the end of the four weeks my stamina and fatigue had improved dramatically."

"It's the routine and structure that is most valuable."

"... the whole program recharges your batteries."

"I went back to work with self-confidence."

Reference: Wisenthal, 2015

CWH has also helped clients return to work following health conditions with cognitive sequelae such as cancer chemo fog and post concussion. Occupational functioning is targeted with a focus on addressing return-to-work barriers in order to facilitate work transition.

References

- Bender, A., & Farvolden, P. (2008). Depression and the workplace: A progress report. *Current Psychiatry Reports*, 10, 73-79.
- Goldner, E., Bilsker, D., Gilbert, M., Myette, L., Corbiere, M., & Dewa, C. (2004). Disability management, return to work and treatment. *Healthcare Papers*, 5(2), 76-90.
- Lam, R., Malhi, G., McIntyre, R., Demyttenaere, K., Gorwood, P., Michalak, E., & Hegerl, U. (2013). Fatigue and occupational functioning in major depressive disorder. *Australian & New Zealand Journal of Psychiatry*, 47(11), 989-991.
- Lam, R., Michalak, E., Bond, D., Tam, E., Axler, A., & Yatham, L. (2012). Which depressive symptoms and medication side effects are perceived by patients as interfering most with occupational functioning? *Depression Research and Treatment*, 2012, 1-6.
- Saint-Arnaud, L., Saint-Jean, M., & Damasse, J. (2006). Towards an enhanced understanding of factors involved in the return-to-work process of employees absent due to mental health problems. *Canadian Journal of Community Mental Health*, 25(2), 303-315.
- Wisenthal, A. (2015). *The effectiveness of cognitive work hardening in preparing people with depression to return to work* (Doctoral thesis, Queen's University, Kingston, Canada).
- Wisenthal, A., & Krupa, T. (2013). Cognitive work hardening: A return-to-work intervention for people with depression. *Work*, 45(4), 423-430.

ERGO-Wise specializes in workplace mental health and return-to-work preparation. Through our hallmark **cognitive work hardening program**, clients rebuild the cognitive abilities needed to meet job demands. The program's structure and work routine prepare clients to transition back to work. Addressing interpersonal issues can be part of the program as well as learning strategies for improved assertiveness, time management, and organizational skills.

Clients who are not ready for return-to-work preparation benefit from **re-activation** through working with the occupational therapist. Setting goals to increase activity and functioning pave the way for life re-engagement which can lead to readiness for return-to-work preparation.

Services are provided within a non-clinical
simulated work setting

ergo-wise.com