

Perception of the Women with Spinal Cord Lesion about their Vocational Rehabilitation Training: An Institutional Based Study

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Abstract

Objectives: The Purpose of the study was to find out the perception of the women with spinal cord lesion about their vocational training and to explore the in-depth and effective ways of decision making and coping with the utilization of the vocational training as well.

Methods: A qualitative study was conducted to explore the experience of women with spinal cord lesion about their vocational training. The convenience sampling method was chosen to select the samples and semi-structured face to face interviews were carried out to collect the data.

Results: Content analysis was used to analyze the data and several thematic factors were identified this leads that though none of their training was similar with their previous job, however, they were satisfied with their training. The main findings indicated that vocational counseling helped and ensure the participants involvement in the decision making process to choose the best possible option for their training. However, different factors such as educational status, physical status, social context and interest about the training also influenced during decision making about the training. It had been also explored that all of them had proper planning about the implementation of the training which can enhance a good quality of life. Furthermore, several factors such as increase the duration of the training and development of scope of implementation of training can improve the quality of training.

Conclusion: Spinal Cord Lesion is a devastating condition which dramatically affects the quality of life. Therefore, to ensure the good quality of life for the women with spinal cord lesion, it is also necessary to reduce the economical dependency on their family. At there, vocational training can play a great role to involve in the different paid work or to earn money. Though the trainees were satisfied with their vocational training, however, increase the duration of training and scope of implementation of training need to develop as well.

Keywords: Spinal Cord Lesion; Vocational Rehabilitation

Abbreviations

CRP: Centre for the Rehabilitation; ICF: International Classification of Functioning Disability and Health; SCL: Spinal Cord Lesion; UK: United Kingdom; WHO: World Health Organization

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Introduction

Spinal Cord Lesion is lesion of the spinal cord due to traumatic or non-traumatic cause which interrupt on motor and sensory function of the individual below the level of the lesion temporary or permanently. It has an effect on all aspects of life such as physical, psychological and social aspects [1]. Vocational rehabilitation is a process through which a person can facilitate his or her, psychological, social and cognitive functional capabilities. Throughout the vocational training it would also possible to overcome the barriers that person with disabilities have to face to assess, maintain, modify or return to the useful or suitable employment [1].

To ensure an effective rehabilitation program, reintegration in work is considered to be an important goal. According to the social aspects of rehabilitation, return of work following spinal cord lesion is one of the most important outcome in to the reintegration of the society [2]. There was a study in Netherlands which stated that the working rate of patient with spinal cord lesion is varied from 31 to 48% [2].

Vocational rehabilitation has been provided throughout the multi-professional to the individual with working age along with any impairments, activity limitation and participation restriction due to any disease, conditions or disability. The primary aim of the vocational training includes the make best use of the working ability in the relevant field and enhance the participation into the mainstream of the society. Usually vocational rehabilitation has been provided in various settings. However, it depends on the target group of people and their needs as well [3].

According to the universal conceptual framework intended by the WHO international Classification of Functioning, Disability and Health, the need of vocational rehabilitation is the universal for the people with disability [3].

As the ICF framework is an object of rehabilitation which is associated with impairments of body structures and functions, activity limitations or participation, therefore, disability has a converse effect regarding ICF. Considering the contextual factors of ICF, personal and environmental factors, vocational rehabilitation can act as an optimal intervention for the people with disabilities to achieve the good quality of life [3].

Ward and Anthony, *et al.* [4] stated that the participation of people with disability is less than the person with able bodied. According to the European Union, disabled people had 22.3% less employment comparing with the people without disability.

The socioeconomic impact on work disability would involve lost the productivity of work which will amplified the health care expenses. As a result, it would burden for the family, caregivers and co-workers as well as they have to take more responsibilities for them [5,6].

As the Centre for the Rehabilitation of the Paralysed (CRP) is the institute of rehabilitation for the person with disabilities, therefore disabled has the opportunity to do this training within free of cost including food, accommodation and training materials. However, Participants of vocational training also get the medical and assistive devices and equipment for self- employment. The able bodied person also has the eligibility to receive the services from the Vocational rehabilitation Unit with a very few cost. There are several services are providing throughout this unit. Those included tailoring and dress making, shop keeping, computer training, electronics, industrial sewing machine operator, handicrafts, farming, drawing and so on. Fundamentally the decision has been taken according to the physical ability along with the educational, psychological and social context. A buyer of UK and their Bangladeshi suppliers support the disabled peoples training cost at CRP and ensure their job offer completing the training.

Materials and Methods

Study Design: Qualitative method was used to do this study. A semi structured open ended questionnaire was used to do this study. Data had been collected by the face to face interview.

Sampling Procedure: Convenient Sampling Procedure used for the selection of the respondent.

Study Site: CRP Gonokbari and CRP Savar.

Materials: Paper, Pen, Pencil, Mobile Phone to record and computer.

Inclusion criteria:

- Patient with either traumatic or non-traumatic Spinal Cord Lesion.
- Paraplegic or tetraplegic patient selected as the participant.
- Female participants.
- Age Range 18 60 years of age.
- Patient with SCL who have been receiving vocational training.

Exclusion Criteria:

- Participants without Spinal Cord Lesion.
- Male Participants.
- Mentally retarded patients.
- Participants who are unwilling to participate.

Results and Discussion

The data had been collected from the 7 women with spinal cord lesion. All of them were paraplegic. The mean age of the respondents was 22 years. The following theme had been identified by the analysis of the data.

Theme 1: Trainees did not have the similarity with the previous job or activities

No one of the trainees had the similarity with the previous job or activities or working criteria. Among the 7 women of vocational trainees 4 were housewives, 2 were student and 1 was child attendant. However, 5 of them had taken tailoring and dress making and 2 of them had taken industrial sewing machine operation.

Conroy and McKenna [7] stated that involvement of work study or work after spinal cord lesion associated with injury related factors rather pre-injury occupation.

Theme 2: Vocational counseling of different Professionals helped the Participants to choose the best possible option

Among the 7 (seven respondents) about 5 women had taken decision to select the best possible options for them by providing the information about the different types of training throughout the different professionals. The counselor, vocational trainer along with the Physiotherapist, Occupational Therapist informed them about the various types of training such as tailoring and dress making, shop keeping, computer training, electronics, industrial sewing machine operator, handicrafts, farming, drawing and so on. They had also provided information about the facilities which would possible to get as a vocational trainee from CRP. These sorts of information and discussion helped them to take the decision about tailoring and sewing machine operation. As one respondent said that "No one enforced me rather informed me to take the right decision".

Another respondent explained that "I have taken my own decision; however, discussion with the professionals helped me to take this choice".

There was a reviewed literature in Canada about the determination of the returning of work of the patient with spinal cord lesion which stated about fourteen factors for the determination of vocational reintegration. Among those vocational counseling is one of the factors which facilitate the reintegration of the patient with spinal cord lesion [8].

Theme 3: Several factors considered during decision making about Vocational Training

Among the 7 women for all of them, several factors had been considered which include: educational level, interest about the training, level of injury, extent of injury and social context.

One respondent said that "My educational level is suitable for tailoring training. However, my physical condition influenced a lot to take this decision. For example, at first garments training had been tried to give, but as I did not have bowel/bladder control, therefore, I needed to rethink about it. It would not possible to do work at garments as I need to use catheter after 2 hours interval, therefore, I needed to rethink about the tailoring training".

There was a study regarding returning of work of patient with spinal cord lesion stated that social and demographical characteristics such as age, gender, educational level had been considered. Moreover, neurological level of injury and complete or incompleteness of lesion also influenced the re-involvement in to the employment [9].

Another study also suggested that physical strain significantly associated with the return of work. However, they have also considered the age, gender, education level, level of completeness as a confounding variable [10].

Theme 4: Vocational Rehabilitation Training can enhance the good quality of life

All the women participants explained that the vocational training facilitate them to ensure a good quality of life. Because throughout this training, it would possible to join the paid work or employment or own business. As they would earn money, so they can also establish their own dignity into the family and society. However, they can also help their family as well.

One respondent said that "I have a plan to join as a worker at nearest tailor shop of my home or will start independently tailoring practice at home".

Schonherr, *et al.* [2] stated that about 60% of respondents successfully reintegrated at their job by considering the changes of type and extent of job. In this study, it has been founded that majority of the respondents were satisfied with the lives.

Theme 5: Respondents were satisfied with the training

Among the 7 participants, 6 were satisfied with this vocational training. As one respondent said "My trainer is very cooperative and supportive. However, the training environment is very friendly to learn. In addition, as I can earn money by myself, so I will not be dependent on my family members and will not be their burden as well".

Theme 6: Opinion to improve the Vocational Rehabilitation Training services

Among the 7 respondents, 5 participants said that it would better to increases the duration of the training period. One respondent said" if I would get more time of this training, then I would be more skilled".

Another respondent asked to increase the multiplicity of the training. On the other hand another respondent argued that "It is necessary to create more scope of practice for the implementation of our training. Because more scope for the implementation of our training will influence to take more training".

Wehman Paul., et al. [11] stated that there were three things which would improve the spinal cord lesion patients employment to enhance a good quality of life. Those were, more comprehensive training according to patient's need, increased communication with the consumer along with the flexibility and availability of services.

Conclusion

Spinal Cord Lesion is a devastating condition which reduces the quality of life. Therefore, to ensure the good quality of life for the women with spinal cord lesion, it is also necessary to reduce the economical dependency on their family. Therefore, a successful vocational training can play a great role to involve in the different paid work or to earn money. Though the trainees were satisfied with the vocational training, however, increase the duration of training and scope of implementation of training need to develop to ensure the reintegration into the employment.

Conflict of Interest

There is no conflict of interest.

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