Conceptualizing the Life Course in the Employment Experiences of Working-Aged Adults with Arthritis: A Qualitative Study



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Objectives

To examine life course similarities and differences in the work experiences of young-, middle-aged and older adults living with arthritis, and to identify important transitions that shape employment participation.

Introduction

- Arthritis is a commonly reported cause of work disability¹; the impact of the disease on employment varies at different ages².
- 60% of people living with arthritis are in their working years, ages 18 to 65 years³.
- Little is known about the employment participation of young- and middle-aged adults with arthritis and how work experiences compare to their older counterparts.

Life course theory

- Considers transitions (i.e., discrete changes) and broader trajectories (i.e., sequence of linked social states) within different domains of life.⁴
- Temporality examined in several ways including biopsychosocial changes, normative ordering of life events, sociohistorical position, personal agency, and changing social network.
- Theory used to identify sensitive periods when an exposure has a strong effect on the development of a subsequent outcome.

Methods

- Semi-structured focus groups/interviews were conducted with young (18 to 34 years), middle-aged (35 to 54 years), and older adults (55+ years) living with rheumatic disease.
- Participants were asked about how their age shaped employment, and probed for details on potential changes they experienced over time to their career, health or involvement in social roles.
- We inductively examined themes that emerged from the data to build an understanding of the impact of arthritis across the life course.
- Line-by-line coding of transcripts was conducted and prominent themes were extracted by two investigators.
- Emerging themes were discussed in analysis meetings, inconsistencies were resolved by consensus.

Results



Young Adult (n = 7)

86% female; 85% employed; disease duration = 18.6 years

Transition from school-to-work was prominent in shaping early work experiences.

- Attaining stable full-time employment that satisfied the need for health benefits and accommodations and would meet career goals was an important milestone.
- Need for secure employment was driven by fear of worsening disease symptoms in the future.
- Other social roles were given less priority.

"It felt that I had to get used to resigning my life and my dreams to my condition... I could see my friends being able to do a gap year, go off and do other things with their lives and just try things out ... I didn't have that luxury. I needed to just work and make sure my job was steady." **Aaron, young adult, interview**



Middle-aged adult participants (n = 13)

62% female; 92% employed; disease duration = 11.4 years

Changes to health was prominent in the ability to balance diverse important preexisting roles (e.g., parenting, marriage).

- Lived with their condition for a shorter period of time and were still learning to manage disease symptoms.
- Felt that they had a sufficiently strong work performance history that could enable them to receive support.

"I'm concerned about [how arthritis] impacts my family. Because my job can accommodate me, even if I progress and get worse, they will accommodate me the best they can. But it's my family I'm worried about. I'm in my early 40's and it's really, ...It wasn't something I was expecting." **Geoff, middle-aged, interview**

Older adults (n = 25)

60% female; 92% employed; disease duration = 14.1 years

Consideration of transitioning from work-to-retirement was predominant among older adults.

- Older participants had confidence to continue making meaningful contributions to employment.
- Value of the work experience they accrued was balanced against their declining ability to meet the physical demands of their jobs and living with arthritis.

"It's wearing me down more than it did and I'm 60 now. I just turned 60 and I'm feeling, I've been thinking far more seriously about retirement, mostly because of the chronic pain. But no, I still have a passion for my work, I still enjoy it and I don't find that my level of whatever the osteoarthritis is, is affecting me in productivity." **Elyse, older adult, interview**

Young and middle-aged vs. older adult participants

- For young and middle-aged adults, having an arthritis diagnosis at a time of life when others expected them to be healthy and free from limitations resulted in a negative response and a lack of compassion from others.
- For older adults, arthritis was perceived as being a normal part of aging that was factored into the decision to retire.

"You run into a lot of people who just don't get it. You're not old; you shouldn't have something like that. You should be healthy, you're young, you should be fine. You look healthy, you look fine, why can't you do normal things like everybody else? And you just run into a lot of pressure to live up to the standard of everybody else and a lack of understanding and compassion from people." **Tina, young adult, interview**

Study implications

- The impact of arthritis on involvement in paid work is not uniform across the life course.
- Life course theory offered a valuable framework to uncover key experiences that explain differences in the employment participation of young, middle-aged and older adult participants with arthritis.
- Related to their life phase, we identify experiences within health, career and social role life domains where individuals may be susceptible to work disability.
- Measuring personal and social perceptions of age in studies of employment can compliment chronological age and capture more nuanced information regarding differences in employment.

Key references and acknowledgment

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