

The injured worker's role in the recovery process

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The injured worker himself is provides the most powerful of all healing and recovery forces, and yet is the most ignored in contemporary disability management practice. The well-meaning attempts to assist the worker return to work by health professionals may actually be prolonging his disability. It's very difficult for most health professionals to step outside the health professional paradigm and remember that the injured worker is the entity most capable of recovery, and most responsible for it. If the health professional is “working harder than the injured worker”, the chances of a successful outcome are minimised. Associating with other professionals by way of referrals, team management practices make it even harder to step outside the health professional paradigm of “we know what's best for you.” The advantage of “encouraging”, “allowing”, “permitting” the injured worker to take the lead role in his own recovery is that the worker can resume the central place in his own life and not become beholden to others. Self-determination in recovery is the principal method whereby an injured worker offsets the psycho-social elements of the cause of, and the recovery from, any workplace injury. Psycho-social reasons are the principal reasons why a person becomes injured in the first place and takes longer to recover than he might otherwise do. Without placing the psycho-social element in a place of prominence, much input by Rehabilitation Providers, Physiotherapists, Physicians and other health professionals is not only ineffective, but contributing to the very psycho-social elements which caused the problem in the first place. Allowing the injured worker to take responsibility for his own recovery is vital to this recovery and preventing injury in the future. Health professionals need to be constantly vigilant that their input is contributing to the injured worker helping himself, and not usurping that role.