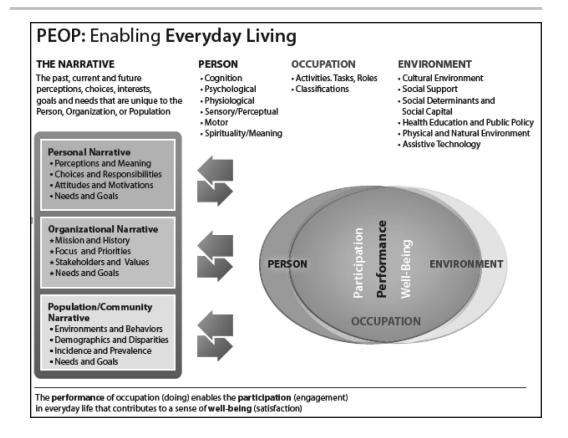
Figure 11-1. PEOP.



an extended period of time, he or she may have difficulty integrating work back into daily life. The occupational therapist can help an individual make the paradigm shift from patient to worker. Occupational therapists working with clients with a new injury/illness or clients with progression of an existing health condition can prevent them from losing touch with their worker role by addressing work during the initial evaluation and weaving work performance throughout treatment. Work can be a powerful motivator for many people, and lack of work can trigger a stream of negative consequences, resulting in occupational deprivation and poor quality of life.

Many aging Americans are choosing to work long past the traditional retirement age of 65 years. The labor force participation rate of people ages 65 to 74 years increased from 16.3 in 1992 to 26.8 in 2012, and it is projected to increase to 31.9 by 2022. <sup>11</sup> Participation of people over age 75 in the labor force is expected to rise to 10.5% in 2022. Remaining in the workforce is often a financial decision fueled by the increased retirement age for social security, the need for health insurance, financial stressors due to the recent economic recession, and decreased prevalence of retirement pensions through employers. However, many people are choosing to work longer in order to maintain occupational engagement and well-being.

Occupational therapists will encounter clients who aspire to return to work in most treatment and community settings, including hospitals, schools, outpatient rehabilitation centers, day programs, day treatment centers, community programs, or the workplace. Unemployment

is nearly twice as high for individuals with disabilities compared with those without disabilities (http://www. dol.gov/odep/), which can result in poverty, a poor living situation, and lack of health care. When clients identify work as a meaningful occupation in which they want to participate, it is important to expand the evaluation beyond traditional assessment measures in the facility's protocol. Helping a client return to work is part of community reintegration, a service provided by occupational therapists in a wide array of treatment settings. In order to deliver client-centered care, we must focus on the occupations of primary importance to our clients, which may not necessarily be those occupations that are the traditional focus of the facilities where we encounter our clients. All occupational therapists have been prepared to address the occupation of work with their clients.

## Understanding the Narrative and the Person

Understanding a client's narrative begins with the occupational profile. When assessing work performance, the occupational profile also focuses on education and training, work history, work capabilities and limitations prior to injury/illness, and the client's return-to-work goal. As with all initial evaluations, the therapist must understand the client's diagnoses, medical treatment, and physician-imposed restrictions prior to the assessment. The