



Research Brief

Barriers and facilitators to Employment: A Comparison of Participants with Multiple Sclerosis and Spinal Cord Injury

Introduction

Individuals with spinal cord injury (SCI) experience a high rate of accessing health care, including hospitalization and emergency department (ED) visits. Our objective is to compare self-reported barriers (things get in your way) and facilitators (things that help you) to employment among employed and unemployed participants with multiple sclerosis (MS) and spinal cord injury (SCI).

Key Findings

- Overall, the MS participants reported more barriers, particularly stress, cognitive issues, and fatigue, whereas those with SCI were more likely to report not having the proper education and training, resources, transportation, and attendant care issues.
- Among those employed, participants with SCI were more likely to report they could not do the same types of jobs as they could pre-SCI and those with MS were more likely to state that they did not know much about jobs for people with disabilities.
- Unemployed individuals with SCI were more likely to report that the jobs for which they were trained were not accessible.

Conclusion

Individuals with MS identified more barriers to employment, many of which related to the symptoms or complications of MS, stress management, nonwork considerations, and limited knowledge of options after disability. Participants with SCI were much more likely to identify modifiable barriers related to education and training, resources, and needs for assistance, such as attendant care and transportation.

Longitudinal research is needed to identify the changes in barriers and facilitators, and to assess if these changes are followed by an associated change in future employment outcomes. It is important to develop and test interventions that are directed at the most modifiable barriers to employment for each group. It is also important to investigate how differences in vocational rehabilitation services affect employment barriers and employment outcomes of individuals with both SCI and MS.