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**“Being busy is the only way to  
recover”: occupation and  
employment influence in drug misuse  
recovery**

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OCCUPATION AND EMPLOYMENT INFLUENCE IN DRUG MISUSE  
RECOVERY**

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## Resumo

A literatura tem identificado a importância do contexto na experiência de recuperação de uma adição. Assim, é crucial considerar fatores socio-ambientais como influenciadores da recuperação, como por exemplo a ocupação, que previne a recaída. Esta investigação está inserida no projeto europeu D.U.R.E.S.S. (Drug Use Recovery, Environment and Social Subjectivity), financiado pelo SICAD (Serviço de Intervenção nos Comportamentos Aditivos e nas Dependências) e emergiu do projeto europeu do ERANID. Pretende compreender qual a influência da ocupação na recuperação do abuso de drogas, quais as ocupações mais úteis na recuperação e quais as maiores dificuldades e benefícios de ter uma ocupação. Cada um dos dezanove participantes em programa de metadona manteve um diário de saúde durante, aproximadamente, seis meses, onde registaram as suas ideias acerca da ocupação. Os dados foram analisados através de uma análise de conteúdo temática. Os resultados sugerem que a ocupação influencia muito a recuperação de abuso de drogas. As mais importantes são o emprego, os cursos e as atividades ocupacionais, que permitem que os utilizadores de drogas estejam ocupados e não pensem em drogas, tornando a recuperação mais fácil. Elas dão-lhes estabilidade, aumento de responsabilidade, autorrealização e contacto social, enquanto permitem a aprendizagem e integração na sociedade. Eles sentem algumas dificuldades como a relação com colegas, cansaço, stress e injustiças, nomeadamente no que toca ao horário. As ocupações devem ser interessantes e adequadas às suas necessidades, sendo que os centros de tratamento deveriam criá-las, permitindo o desenvolvimento de competências.

**Palavras-chave:** ocupação; emprego; recuperação; reabilitação; droga.

## **Abstract**

Literature has identified the importance of social context in drug misuse recovery process. So, it's crucial to consider factors related to socio-environmental conditions, such occupation that is essential for a successful recovery. This research is inserted in an european project, D.U.R.E.S.S. (Drug Use Recovery, Environment and Social Subjectivity), funded by SICAD (General Directorate for Intervention on Addictive Behaviours and Dependencies) and emerged in the ambit of ERANID European project. It pretends to understand the influence occupation has in drug misuse recovery, what are the useful occupations on recovery and what are the main difficulties and benefits of having an occupation. Each of the nineteen participants on the methadone program kept a health diary for approximately six months, where they registered all the ideas they had about occupation. Data were analyzed through thematic content analysis. The results suggest that occupation is a very important influence in drug misuse recovery. The most important ones were employment, courses and occupation activities. These eases recovery, allowing drug users to be busy and don't think about drugs. On top of that, they also provide stability to people who use drugs, increasing their responsibility, self-realization and social contact, while they can learn and feel integrated in society. During the same process they felt some difficulties, such as the relationship with colleagues, tiredness, stress and lived injustices, namely related to schedule. Occupations should be interesting and aligned with their need, while treatment centers should create them to develop competences and skills on people who use drugs.

**Key words:** occupations; employment; recovery; rehabilitation; drug misuse.

## Introduction

Current research in Portugal continues to prioritise the epidemiology and the consequences of drug misuse. Portugal comes first regarding prevalence issues, but it should be noted that closer attention is being paid to the consequences, mechanisms and determinants of drug use. However, treatment issues are little considered whereas this rarely happens in other countries. A medical view is still dominant and most social sciences are very much neglected (ERANID, s.d.).

ERANID (s.d.) has conducted a study which provides an overview of recent developments in illicit drug research at European level with six participating countries, including Portugal, during the period 2010 to 2013. It worked in cooperation with the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) and the Pompidou Group to strengthen cross-border drug-related research. This detailed research searched for all the relevant aspects on illicit drugs, using a cooperative methodology and focused on most important needs. This study (ERANID, s.d.) shows the central place of the epidemiology of drug use, its consequences, risk and biological factors as well as individual susceptibilities demonstrated in a vast number of researches.

From the information collected, ERANID has funded some projects to study measures that should be implemented to improve policy decisions and conditions for people who use psychoactive substances (PWUPS). The D.U.R.E.S.S. project, in which this research takes part, was one of the chosen for this purpose, since it has a methodology that meets the identified needs. In fact, there are few studies about the role of socio-environmental factors in drug misuse recovery and users' reintegration in society, as well as the impact of context and individual characteristics. However, the opposite doesn't happen, and such investigation shows that environmental factors have the same importance, or maybe even more than treatment, in drug use recovery (UKDPC, 2008).

There are a lot of researches done in this area that focus on the impact that substance use has on employment, workplace or performance (Bellair, Vuolo, & LaPlant, 2017; Siegal et al., 1996), forgetting the role that employment has reintegrating PWUPS (Lin, Wu, & Detels, 2011; Nosyk, Anglin, Brecht, Lima, & Hser, 2013; Verthein, Schafer, & Degkwitz, 2013).

However, there is a lot of information from the found scientific literature with a few years and the PWUPS's profile have changed since then. Nowadays, the prevalence of heroin

use in Portugal isn't on young people or young adults, but on people over 35 years old (SICAD, 2018). It's important to question about the relevance of occupation and employment in current days and on investigation. According to what is said informally by PWUPS, this is one of the factors with more influence in the recovery process. However, scientific literature doesn't reveal such need, despite this being mentioned several years ago. So, maybe it's showing that this is a neglected aspect of conventional approaches to deal with drug misuse, or perhaps it has failed to investigate this topic ever since.

## 1. Occupation/Employment

Recovery from drug misuse is a complex and multifaceted phenomenon and, over the years, numerous researchers have sought to understand the nature and dynamics of the processes involved (Prins, 1994). General health and well-being, drug-misuse behaviours and drug-related outcomes are affected in several ways by individual and socio-economic factors, both with and without treatment (De Maeyer, Vanderplasschen, & Broekaert, 2009). Thus, it's essential to consider issues not only related to the treatment, but also factors related to health, social support, housing and working conditions, among others (Lin et al., 2011; Spooner & Hetherington, 2004). Initially, rehabilitation was only an abstinence issue, but nowadays it makes more and more sense to talk about harm reduction strategies in which recovery, being an elastic concept, means not only no drug use, but also integrating PWUPS in society (Alam-Mehrjerdi et al., 2016).

To move away from drug use, it's not enough to change one's lifestyle. It usually means some effort to find new interests, new social networks or a new occupation, filling days that in the past would have been spent sourcing and using psychoactive substances (APDES, 2014; UKDPC, 2008). Occupation concept includes regular activities that bring structure, value and meaning for individuals (Polatajko et al., 2007). It could be informal activities such as physical exercise or formal ones such as employment (Best et al., 2012; Silvestre & Fernandes, 2014; Waddel & Burton, 2006). Also, PWUPS can occupy their time, enjoying life and, in some cases, contributing to society (Law, Polatajko, Baptiste, & Townsend, 2002).

Professionals recognize the importance of having a job for sustained positive outcomes before and after a substance abuse intervention, because it assumes several important roles in recovery (Alam-Mehrjerdi, et al., 2016; Lorenzoni, et al., 2013; Nosyk et

al., 2013; Vogel, et al., 2016). Being employed facilitates the socialization with others, which is positive to personal growth, self-esteem and self-concept, making people feel useful (Ló, 2007; López-Goni, Fernández-Montalvo, & Arteaga, 2012; McIntosh, Bloor, & Robertson, 2008; Storti, De Grauwe, Sabadash, & Montanari, 2011). Being able to achieve an employed status acts as an important symbol to the individual, families and society, enhancing the ability to return successfully to a conventional life (APDES, 2014; Goffman, 1959; McIntosh et al., 2008; Storti et al., 2011). Work provides structure and stability to people's life, making them economically independents (Lorenzoni, et al., 2013; Schifano, et al., 2012; Storti et al., 2011; Vogel, et al., 2016), having an integrating and organizing role in PWUPS' life (Silvestre & Fernandes, 2014). Also, employment provides responsibility and a legal source of income (López-Goni et al., 2012; UKDPC, 2008). According to Silvestre (2004), the amount and frequency of use don't depend only on the needs created by substances, but also on the money available. Work can be a mechanism to discipline drug use, because the routine helps to regulate it and to establish priorities for other life dimensions. However, the income can deregulate it (Manita & Silvestre, 2008).

PWUPS improve when their relationship with work and other aspects of their environment improves too, and sometimes this allows them to quit drugs without any treatment (McIntosh & McKeganey, 2001; Walford, 1983). For that reason, makes sense to improve the relationship between PWUPS and occupation, before treatment. For a long time, the authors mention the importance of this in drug misuse recovery, although it's not the mainstream perspective. The primary concern of employment-related studies are heroin users, which are the context of methadone maintenance program (Platt, 1995), since about half of them are unemployed (SICAD, 2018). This research has an inductive approach and focus on occupation and employment, since these are relevant factors for PWUPS' rehabilitation, as their formal and informal speech show (Etheridge, Craddock, Dunteman, & Hubbard, 1995; Wolf & Colyer, 1999).

## 2. Employment Difficulties

Contrary to the popular image of PWUPS, some of them held steady jobs before their drug misuse and many remained employed during dependency, even though they experienced a host of problems (Granfield & Cloud, 2001). In fact, to integrate PWUPS it's



necessary to assume that the use of psychoactive substances doesn't imply a rupture with the labor market and the possibility to have a professional activity (APDES, 2014).

PWUPS feel anxiety at work, so, it's important to have adequate problem-solving skills, because the workplace intensifies stress and anxiety. Thus, a lack of skills and emotional stress may result in work failure and impair the recovery (Godley, Passetti, & White, 2006).

Furthermore, many employers are reluctant to recruit people who admit using psychoactive substances or those who have a history of drug misuse problems, forcing workers to be abstinent for some time before hiring them. Also, most employers know little about the impact of substitute medication, as methadone, and the types of activities that people on such medication should or should not do. This motivates PWUPS to lie about their treatment (Lin et al., 2011), when employers could help them, by facilitating the process of methadone intake, for example (APDES, 2014). Prescribing substitute medication such as methadone for heroin use, is recognized as important for stabilizing many PWUPS, and once stabilized, it's easier to create contact with labor market. Despite the side effects of methadone, like those of many other types of medication, people stabilized on methadone are quite capable of working in a wide range of jobs (UKDPC, 2008). In various studies, many employers who knowingly hired recovering PWUPS reported positive experiences, saying that PWUPS are good employees. Employers' attitudes are largely based on general knowledge and perceptions rather than actual experience, and there is evidence in the existing literature of many employers holding negative stereotypical views about PWUPS (APDES, 2014; UKDPC, 2008).

This is an example of structural unemployment, i.e. the level of unemployment that is due to rigidities in the labor market or other economic, regulatory or cultural impediments (Storti et al., 2011). Because of that, employment seems to be, today, a symbol of uncertainty and disorder, being also a powerful mechanism for generating inequality and social marginalization (Silvestre & Fernandes, 2014).

### 3. Employment-related interventions

There is some evidence that people who receive employment-related support as part of their treatment are more likely to find work later, since the capacity of getting out of drugs is bigger when PWUPS possess resources and options to help them (McIntosh et al., 2008;

Platt, 1995). However, treatment isn't completed without social integration, which is society responsibility and prevents relapse (Lin et al., 2011; Ló, 2007). A sustained recovery requires more than medication or psychotherapy. It calls for social support systems such as employment, which seems to be a good alternative (Asabigi, 2009; UKDPC, 2008; Waldorf, 1983), even if in part-time (McIntosh et al., 2008).

Conventional approaches such as reflection and balance about the individuals' lives trajectory, or as the creation of a personal project, are considered to be ineffective and inadequate to this population (APDES, 2014). The same happens with interventions that establish many criteria for entering and staying on treatment (UKDPC, 2008; Waldorf, 1983). These problems may impact the ability to maintain a job, so it's important these are recognized and adequately addressed (APDES, 2014; UKDPC, 2008). Instead, it's important to work according to short-term goals and always alongside the more concrete spheres of life, presenting concrete proposals for jobs that fit the individuals' immediate needs (APDES, 2014). Also, some PWUPS have never worked before and need support in a range of physical problems resulting from the misuse of psychoactive substances (APDES, 2014; UKDPC, 2008).

Treatment processes must include elements that facilitate the individual's ability to secure some form of paid employment, like formal education or training, to help with the development of skills as literacy, numeracy and communication (Alam-Mehrjerdi, et al., 2016; Lin et al., 2011; McIntosh et al., 2008). Professional courses are some examples to do that, because they provide personal valorization and integration on the labor market. However, aspects as the provision of monetary compensation or the adequacy to people's characteristics need to change (APDES, 2014; McIntosh et al., 2008).

Many researchers advocate that treatment may be more effective if not focused on PWUPS, but rather directed at enhancing their social skills with work done at the environmental level (Alam-Mehrjerdi, et al., 2016; Granfield & Cloud, 2001). In fact, only structural improvements in labor market conditions lead to an improved long-term employment outlook and give enough incentives to PWUPS to look for treatment (Storti et al., 2011). Sometimes, there is no need for a long intervention, but providing opportunities to undertake meaningful activities can provide structure while also develop skills and a positive attitude to work (UKDPC, 2008).

There is a lack of research to understand the recovery process as seen from the PWUPS' own perspective (McIntosh & McKeganey, 2001). For that reason, this research

focuses on them and gathers their perceptions and opinions about the influence of employment on recovery.

#### 4. Aims and research questions

##### 4.1. Aims

There is a discrepancy between the willingness to launch an evidence-based policy and efforts to promote such studies, in order to conduct good policy responses (Garretsen, Brouwers, & van de Goor, 2010). Therefore, this research pretends to break this paradigm and give voice to the real needs of PWUPS, making recommendations to policymakers, so that the necessary measures can be taken.

This is an exploratory and longitudinal study that pretends to understand the role that socio-environmental factors might have in drug misuse recovery. Specifically, we pretend to explore the influence of occupation in people that had developed a dysfunctional relationship with illicit drugs, namely opiates. We paid special attention to the role of occupation on therapeutic recovery processes and to the burden of occupation in well-being.

##### 4.2. Research questions

The research questions arise from the use of the acronym PCC (Population, Concept and Context), when applied to qualitative methodologies: (1) Is there, in the perspective of people in opiate substitution programs, a relation between recovery from heroin misuse and occupational activities? If so, what are the psychosocial processes involved in that relation, according to people in recovery? (2) If so, what would be the factors to consider while offering those occupational activities? (3) Are there (and which) obstacles, according to PWUPS' perspective, to overcome when it comes to develop an occupational activity during the recovery process? What are the reported benefits of occupational activities, in the PWUPS' point of view?

## Method

The existing literature has revealed, through quantitative approach, which socio-environmental factors may be relevant on recovery pathways. In this research, we pretend to explore this knowledge, which is possible when we use qualitative approaches like the perspectives of the protagonists of the phenomena. We pretend to learn with the participants direct speech, know their perspectives and explain the interaction between environmental, cultural and social factors, and this is fundamental in social sciences (Rhodes, Stimson, Moore, & Bourgois, 2010). To do that, each participant was accompanied for a long period of time, so that the events in their lives were studied in real time. This allows a reflection of the impact and influence of each event on recovery. Furthermore, the qualitative approach can understand the meanings of PWUPS' experiences, through their own perspectives and once they are the specialists of this theme, because of their life experience on drug use. Also, qualitative research has been the best way to have access to hidden populations as PWUPS, so it's the best option to know emergent tendencies on this area (Nichter et al., 2004).

The D.U.R.E.S.S. project is a longitudinal, exploratory and international study that pretends to produce scientific knowledge about the relevance that social-environmental factors have in recovery and (re)integration of people who use opiates. It had many valences as focus groups, in-depth interviews with PWUPS, families and professionals on drug misuse, and health diaries with recovering people who misuse opiates. The project also conducted a scoping review (Ramos et al., 2018), and this research will explore one of the social factors that scientific literature proved to be most relevant in drug misuse recovery. D.U.R.E.S.S. mets ERANID's needs, since it's an interdisciplinary study, which is fundamental for research on drugs. Also, it's capable of increasing the interaction between knowledge, decision and intervention, which is identified as a research priority. In Portugal, treatment issues are little considered, and D.U.R.E.S.S. is able to collect information about socio-environmental factors to improve its responses (ERANID, s.d.).

### 1. Participants

There were recruited 25 participants for this research, but only 22 people participated in it. Nineteen mentioned the theme of occupation, being 15 men and 4 women, between

ages 30 and 53. The contact was made first of all with the institutions Centro de Respostas Integradas (CRI) in Porto Oriental, Casa da Vila Nova of Norte Vida – Associação para a Promoção da Saúde and Projeto Incluir of Asas de Ramalde, who later mediated recruitment and selected people with the indicated profile to participate in the study. Professionals looked for people with stability, discursive and reflection capacities and generosity to share what they think. We didn't look for representativeness of the sample, but rather depth and rich data, as the qualitative approaches claim. With this, it's possible to access to the procedural elements and the rich speeches of the participants.

All participants were from Oporto district and were in opiate substitution programs, although some of them use other drugs too. We intend people in this program to increase the rate of adherence over time, not only because heroin misuse is the main cause for treatment (SICAD, 2018), but also because the frequent presence in institutions will motivate them to not quit the project.

## 2. Procedure

This research consisted of keeping a health diary for six months. In this diary, the participants wrote about events, reflections, processes, difficulties and interactions, over time, which have influence in drug use recovery. They wrote about themselves, but also about their peers. In 15 cases, the participants didn't write in their diaries by themselves, but the researchers wrote what has been told by them. This happens because some participants have no capacity to write for themselves or didn't want to, but it was their desire to participate and contribute to this research. In 2 cases, the participants have opted for both methods. The diaries were updated weekly or fortnightly. In 6 cases, participants dropped out of the study, so they wrote in their diary only once. In the remaining cases, the participants continued in the study until the end, and the maximum time spent was 10 months.

Individuals with severe mental, physical or somatic comorbidity weren't eligible for inclusion. The confidentiality and anonymity were maintained throughout all the process. Each diary had an individual code, personal information about the participants (name, address...) was never written and the diary was always kept in a safe place. In the end of this research, every diary will be destroyed.

This study was approved by the Ethics Committee of the Regional Health Public Services, by Ethics Committee of the School of Psychology and Science Education of University of Porto and by National Commission for Data Protection.

Data were analyzed through thematic content analysis (Bardin, 2011) using NVivo 12 software, where several categories emerged (Table 1 on Appendix). Data were quoted simultaneously by four different researchers. The research team met regularly to discuss the researchers' role in data collection, receive specific training to don't induce participants' opinions and to clarify possible doubts, in order to minimize errors.

## Results

Of the 22 participants, 19 mentioned that having an occupation is an influencer in drug use recovery, with most of the references being made around the issue of employment, with only 1 of these 19 not mentioning it. Professional courses and other occupational activities seem to be relevant too, and were referred by 8 and 7 participants, respectively. Being occupied is seen as a strategy to avoid thinking of drug use (“With much time to think, one only thinks about bad things. Or about good things, as drugs” JD35).

According to those participants, having a job is fundamental on drug use recovery (“Employment is an occupation and keeps people away from drugs” FU62) as well as professional courses (“The formation (...) helps me to manage the craving” OQ53), bringing a lot of advantages. The feeling of self-fulfillment, knowing that they can achieve their goals and find their vocation are very important for both employment and professional courses (6 and 3 participants respectively) (“the course was over (...), but during that time I felt very good and fulfilled” TQ30). Employment offer the sense of appreciation (8 participants), either coming from others (“I think that my colleagues are appreciating me” BD75), and from themselves (“I’m proud, even if others don’t recognize my work” IO99). It also offers stability (9 participants) because they were able to establish a daily routine (“You wake up in the morning, you go to work, you’re busy, you have tasks to do...” JD52) and with a salary, they can stabilize their lives, chase a new direction and build new goals (“When you have money to go for a coffee, life goes on in another way, and with other parameters” K59). Professional courses offer this too (“The course is good because it will make me feel good and make money” TQ30) (4 participants).

Employment and professional courses promote social contact (4 and 1 participants, respectively), because they meet new people and make friends (“at my workplace I was able to meet people that don’t use drugs and that is good. I’m more distracted and the companionship is different” KT65). One participant mentioned the evolution that employment may provide (“I like (...) to feel that I had learn and evolved” IO99), 5 that it makes them feel useful to society (“getting a job or an occupation to feel like a useful and valuable person and don’t be a burden to society” JD35) and 1 referred responsibility (“[the job gives me] responsibility” IO99) (1). Also, 4 participants referred the increased schooling on professionals courses (“I’m anxious to start geriatrics training that will allow me to have a high school diploma” OQ53) and 3 that it allow them to learn (“[the professional courses]

were great to me, because besides being occupied, I added something to my portfolio, to my knowledge” BD75).

Most participants referred various difficulties that they lived at work and at professional courses, such injustices. Problems with people management (“The older workers have all the rights and they [the bosses] take away from me the few that I have” BD75) and schedule are common (“For some companies that I went through, I often did overtime that wasn’t paid as provided by law” UN01) (4). Particularly the work overtime (“One thing I can say that didn’t help me with drugs before was having to work too many hours” UN01) (3) and the lack of availability to go to getting methadone and for themselves (“and also the question of having time to come here [treatment center]” BD75) (3). The same happens on professional courses, since, sometimes, it leaves no availability for personal matters (“I can’t combine everything I have to do, with the course” IO99) (1). Also, they feel tricked and harmed by the professionals (“and they [professionals] don’t like this and they make things difficult for us [becoming more demanding.]” JD35) (2). In fact, participants wish for more interest on the professionals’ side (“What matters for them is filling the vacancies” JD35). Furthermore, stress and worries are another obstacle that can make them relapse (“The stress is increasingly and it’s increasingly complicated to manage it. I already thought about taking drugs, I’m honest” BD75) (5). The same happens with the psychological and physical fatigue at work (“the environment completely wears me out. That’s why I’m increasingly convinced that I have to search for alternatives” BD75) (4) and at professional courses (“Of course I get tired too, and it’s harder to pay attention in class” IO99) (3).

Money is another complication, since on one hand, when participants have late salary, their stability is compromised, but on the other hand, they stated that having money could be a disadvantage because they feel tempted to spend it on drugs (“They make money and it can be a temptation to spend it on drugs, because they are in recovery and have money at the same time (...) At the end of the month, they will use drugs” JD52) (4). The same happens on professional courses, since participants said it’s not enough money to survive (“With the course I can’t get enough money for this” IO99) (3). Relationship with colleagues, sometimes, causes conflicts due to the existence of competition at work, a lack of mutual help and little respect (“there is a lot of dirty competition, and it’s difficult to deal with that” IO99) (5) and because they don’t struggle to pass the professional course (“This is ending, there is not much to finish and they don’t care, they don’t even try” IO99) (1). Those are colleagues of varying socioeconomic status, who don’t always have a history of



drug use. Other complaints about professional courses are their functioning, stating that they should be more practical and allowed hiring (“in the internship I had, I only worked one day, instead fifteen days. And it was only to help passing some tools. I didn’t learn anything” JD35) and that they miss out more variety (“There should be more variety of formations” JD52) (5).

Having a weakened health is also seen as a challenge and prevents them from getting an employment (“unfortunately, for healthy reasons, I can’t work. I wish I was healthy to work, but I am not” JD52) (6). So, the adequacy of job to what people need should be considered, since some employments are physically hard to support (“A part-time would be a good option to me, but it’s difficult because of my health” JD35) (3). Also, it’s important that they like the job, because it helps to spend time and to feel less frustrated (“For me, there are only advantages, as long as I like the job” KN56) (6) and to consider the adequate timing to start working during treatment, because at the beginning of recovery, employment may not be beneficial (“Employment should be at a later stage (...) if it’s at the beginning, it’s bad, because having money can give you the temptation [of using drugs]” BD75) (1). Lastly, looking for a job is also a problem, since labor market require specialized people and participants feel they don’t have enough competences (“These were my major difficulties, mainly in the search for a job” OK54) (3).

Two participants referred the existence of projects that promote employment, which are beneficial, because employers knew that they were in recovery process, so they had nothing to hide. However, employers only kept them while the company didn’t have to pay their salaries (“While the company did not pay, our evaluations were great, then when they had to pay us, it was bad (...) they just wanted to have an employee for free” JD35) (2).

Participants referred various occupational activities that influence drug use recovery (“[I knew that] occupying my free time could help a lot, as it really helped” UN01). They highlight recreation options (4), because considered that they helped to interact with new people (“A person who gives up from drugs must be prepared to interact with other groups” BD75), and they add cultural habits (“Make the habit of reading the newspaper to be informed” IO99). Reading or learn how to play a musical instrument is seen as a good occupation too.

Other mentioned factor is the need of improving management competences (2), about house (“Learn how to manage your home is important” IO99), money (“People who used drugs are giving the first steps in money management” BD75), and time (“and time management too, have to take this into account” BD75). Physical activity is seen as a project

that helps in abstracting from bad thoughts (“exercise and sports groups would be a good initiative to many people (...) It did well to the mind and to the body” OQ53) (3) as well as walks in nature (“whenever I have the chance to hike or just to take a walk in the hills, I do it. It’s something that makes me forget about drugs” UN01) (2). Participants explained it’s crucial that these occupational activities be interesting to them, and had the main goal of helping, once they consider them as a therapy (“Therapy is not making dolls or playing cards (...). It must be interesting and useful things for life” IO99) (3).

## Discussion

The main three mentioned occupations were employment, professional courses and occupation activities. However, according to the scoping review made by D.U.R.E.S.S. project (Ramos et al., 2018) and the scientific literature explored in this research, only employment was referred as a socio-environmental factor with impact on drug use recovery. They don't refer the influence of professional courses or occupational activities.

Changing lifestyle is an environmental strategy for the recovery process, but this change has to offer participants satisfaction and social identity. PWUPS need to find new interests and occupations to fill the days (APDES, 2014; UKDPC, 2008). The participants referred that being occupied is a good option to do that, because they avoid thinking about drugs.

As similarly as in scientific literature, participants refer the feeling of self-fulfillment, the proud on themselves and knowing they can achieve their goals is important to their self-concept (Ló, 2007; López-Goni et al., 2012; McIntosh et al., 2008; Storti et al., 2011). Other benefits such as responsibility (López-Goni et al., 2012; UKDPC, 2008), social contact (Storti et al., 2011) and evolution are referred by participants as an important part of recovery too. These factors contribute to participants well-being, which is a central issue for a better recovery (De Maeyer et al., 2009).

The importance of stability is mentioned in literature, but only because employment makes PWUPS economically independents (Lorenzoni, et al., 2013; Schifano, et al., 2012; Storti et al., 2011; Vogel, et al., 2016). However, participants mentioned that more than earning a salary, employment permitted them to have a daily routine. This oriented them, because they know what to do and when, which allows them to have a sense of normative life and of social belonging, integrated in society. In fact, occupations and employment can be mechanisms to discipline use, since they establish priorities in PWUPS' lives (Manita & Silvestre, 2008), without the need of giving up of the use of psychoactive substances. Although participants recognize money as a benefit of employment, one of them concluded that it could be a disadvantage too, because they feel tempted to spend money on drugs. This happens because the frequency of drug use depends of the money available, and not only the needs created by substances (Silvestre, 2004).

It's evident for participants that employment makes them feel useful and they don't feel like a burden to society. They feel really integrated and feel like a "normal" person,

because it gives them a new licit and conventional social identity. In fact, having a job acts as an individual symbol, because it allows PWUPS to have a normative life and being successful (APDES, 2014; Goffman, 1959; McIntosh et al., 2008; Storti et al., 2011). Employment seems to be an important factor to give up drugs, even before starting treatment. However, one participant referred that employment should be only offered at a later state. However, each person has their own timing, and this should be considered, since employment can contribute for abstinence but also for relapse. Participants also defend that employment should be adequate to the individual and socio-environmental characteristics of each person. It would be more efficient if there was an increase in social skills with the provision of employment (Alam-Mehrjerdi, et al., 2016; Granfield & Cloud, 2001).

Also, job should be interesting to PWUPS and have their health in consideration. In fact, one difficulty referred by participants was at a health level. PWUPS frequently have physical health problems (APDES, 2014; UKDPC, 2008). Participants recognized psychological and physical fatigue as a challenge to work, so once again, there's the need to consider how suitable is the job. This can be a solution for these issues.

There aren't many employment difficulties referred in scientific literature. In fact, studies only appointed to a possible stress environment at work that may result in relapse (Godley et al., 2006). Participants felt this anxiety and refer it as the second most important complication, because they feel that using drugs may alleviate their stress and make it disappear. Furthermore, participants mentioned many other problems that deserve attention. Namely, the injustices they feel to be submitted they live at work, which makes them want to use drugs. These injustices didn't happen because they were PWUPS, but this condition makes them more sensible to deal with it, once they have a vulnerable position (Keane, 2007). The same happens with other topics, such as the relationship with colleagues at work, the schedule and the lack of availability to go getting methadone or for themselves. This medicine is an important response to stabilize many people who use heroin, giving them capability to recover and to keep a job. The long-standing treatment with methadone was endorsed in 2004 by World Health Organization (WHO), UNODC (United Nations Office on Drugs and Crime) and UNAIDS (Joint United Nations Programme on HIV/AIDS) in a joint position paper (WHO, 2004). However, most employers know little about its impact on recovery, forcing people to be abstinent (UKDPC, 2008). This is a challenge too, because they need to tell their bosses about treatment and employers' attitude is largely based on general knowledge rather than experience. This origins stigma, social exclusion (APDES, 2014; UKDPC, 2008) and structural unemployment (Storti et al., 2011).

Looking for a job is another adversity felt by participants, because they don't have enough qualifications to find one. Sometimes it's due to their drug usage in the past. Participants considered that projects that promote employment are beneficial. One reason for that is because they didn't have to lie to their bosses about their drug use recovery. According to various research studies, many employers who knowingly hired recovering PWUPS reported positive experiences, saying that people who use drugs are good employees (UKDPC, 2008). However, participants refer that employers only keep them while the company didn't have to pay their salaries. These complicates the reintegration process.

The professional courses are the second most referred occupation by the participants, but it's little mentioned in literature as the response to improve drug use recovery. However, most of what is mentioned is similar to employment. In what concerns the benefits of professional courses, social contact, self-fulfillment and getting money are also appointed by participants, as they did for employment (De Maeyer et al., 2009; Granfield & Cloud, 2001; López-Goni et al., 2012; McIntosh et al., 2008; Storti et al., 2011). So, these factors are extremely important to improve drug use recovery, since they are referred on more than one occupational activity. Other benefits mentioned were the possibility to learn and the increased schooling. These permit them to have a job, which is their final goal. So, on one hand, participants occupied their time, and on the other hand they got more chances to find a new employment.

Regarding the difficulties felt by participants, most of them are very similar to the ones appointed in employment too, such as schedule, tiredness, money, relationship with colleagues and injustices. The only one different is money. Participants defend that all professional courses should be paid, to encourage them to recover and to stabilize their lives. All the other challenges are explained in a very similar way to the employment case. However, none of these factors are explored in scientific literature. Once again, it evidences the urgency to consider these difficulties during recovery.

Furthermore, participants made some complaints about the functioning of the professional courses. They think that professional courses should be more practical, because if it doesn't, participants don't learn anything and aren't able to work. Moreover, they miss out more variety, because they are looking for something that should be interesting for them, as the job should too. This way, it can be more motivational and allows them to quit drugs easily (APDES, 2014; McIntosh et al., 2008).

Finally, occupational activities aren't mentioned in scientific literature, but according to participants, they are an important part of recovery. There are many options, considering

they have interest in them. As employment and professional courses, these activities give participants the opportunity to interact with new people and to improve other cognitive competences. Participants agreed that while they are occupied, they don't think about drugs and are able to recover with less difficulty. They can do all the activities that make sense to them, as recreation or physical activities. Other options are nature walks and either house, money or time management. It was stated above, professional courses and employment are also excellent options. This is gets new useful competences and accept strategies to live their new life without drugs.

## Conclusion

Professional courses and occupational activities should be explored as an intentional response to drug use recovery, since they are part of the most effective methods. This way, it's possible to invest and promote it with people who need it. However, it's necessary to study which are the effective activities to improve recovery, even though we had already some suggestions.

A wider range of occupational activities should be created, in order to help PWUPS, because these activities help them to develop new competences and with their integration in society. Treatment services would offer PWUPS the opportunity to do these activities or to educate them finding the best one for each person. These should include the best options of professional courses or part-times, which wouldn't only be practical, but would also teach them how to work. Occupational activities should be seen as a strategy to prepare them to find a job and not only as a way to occupy time. Although, it's necessary to spend time doing this evaluation, to be sure of what is the best option for each person.

Drug treatment programs need to provide employment services, particularly considering the importance of employment in the social (re)integration of PWUPS. Also, we suggest that treatment services could offer spaces, with professionals ready to work with recovering PWUPS. In this space, they could learn how to find a job and how to manage their money and their house. Also, professionals could help them identify personal barriers to employment and develop personal skills and competences to overcome such barriers. For example, improve social skills to interact with people or learn how to deal with work stress and tiredness. This work must be adequate to each person context, identifying changing opportunities.

Social context is very important to recovery. There are people that can recover by themselves without any treatment, but they likely have favorable social conditions supporting them. So, it's not enough to intervene on PWUPS, but socio-environmental conditions should also be considered. To be successful, employers need to be willing to consider hiring suitable candidates, despite of their history with drug. So, providing support for employers is mandatory. This could be done by helping them with their concerns and educating them in how to deal with PWUPS. It would be important to explain the complexity of the recovery process, what is the role of methadone and what is a drug addiction. Thus, it

would be possible to demystify drug abuse and reduce social exclusion and structural unemployment.

Another suggestion is to involve local employers in the recovery process, as mentioned by several researchers recently. Rehabilitation services would develop more effective strategies for engaging with employers, while the government should consider what support they can provide. One good example in Portugal was “Programa Vida-Emprego” which offered professional internships to PWUPS, employers support or self-employment support. Unfortunately, it ended because of the country’s economic crisis, but it had strong principles.

These are some suggestions made by the research team and the participants, in order to improve treatment services. However, all of them should be considered and studied for an ideal choice for each case.

For future researches, we suggest to distinguish the needs of employed and unemployed PWUPS, since we couldn’t do this with our data, due to the limited space. Other aspects that need to be explored are the challenges felt during employment and professional courses, because there is a gap in scientific literature about this, and we can’t fight them if we don’t know which are the most relevant ones.

## 1. Strengths and limitations

This research is strong on its methodological capacity to produce understanding and depth about the socio-environmental dynamics involved in drug recovery process. This was a demanding study, but we got rich and detailed data about the role of occupation and employment in drug use recovery. Also, the longitudinal aspect permitted the creation of greater confidence with the participants, reducing the effect of social desirability.

One limitation of the study was having only heroin misusers in opiate substitution program in our sample. However, several participants had other substances misuse pathways too, which gives us more comprehensiveness of the substance abuse phenomenon.

Another limitation was that the data were collected in different ways, since some participants had written by themselves and others had the help of different researchers. The context and places of the data collection were different too. However, despite the influence of these factors, we obtained very rich and depth diaries with a lot of useful information. Moreover, the research team met regularly to discuss the researchers’ role in data collection,



emotional issues and other relevant topics, in order to minimize researchers' influence and data contamination. This care throughout the data collection process, together with the awareness that it was a subjective topic, had permitted to obtain rich data. Furthermore, there was a constant concern to link what was being said with the recovery process.

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## Appendix

Table 1

*Categories emerged of data analysis*

<b>1 Occupation</b>	<b>1.1 Occupational Activities</b>	<b>1.1.1 Physical activity</b>		
		<b>1.1.2 Recreation activities</b>		
		<b>1.1.3 Management</b>	<b>1.1.3.1 House</b>	
			<b>1.1.3.2 Money</b>	
			<b>1.1.3.3 Time</b>	
		<b>1.1.4 Interest</b>		
		<b>1.1.5 Walks in nature</b>		
	<b>1.2 Courses</b>	<b>1.2.1 Learning</b>		
		<b>1.2.2 Fatigue</b>		
		<b>1.2.3 Social contact</b>		
		<b>1.2.4 Criticism</b>	<b>1.2.4.1 Colleagues</b>	
			<b>1.2.4.2 Money</b>	
			<b>1.2.4.3 Operation</b>	
			<b>1.2.4.4 Schedule</b>	
			<b>1.2.4.5 Injustices</b>	
			<b>1.2.5 Money</b>	
			<b>1.2.6 Schooling</b>	
		<b>1.2.7 Self-fulfillment</b>		
	<b>1.3 Employment</b>	<b>1.3.1 Adequacy</b>	<b>1.3.1.1 Interest</b>	
<b>1.3.1.2 Health</b>				
<b>1.3.1.3 Recovery time</b>				
<b>1.3.2 Social contact</b>				
<b>1.3.3 Difficulties</b>		<b>1.3.3.1 Fatigue</b>		
		<b>1.3.3.2 Money</b>		
		<b>1.3.3.3 Schedule</b>		
			<b>1.3.3.4 Injustices</b>	
			<b>1.3.3.5 Search</b>	
			<b>1.3.3.6 Relationship with colleagues</b>	
			<b>1.3.3.7 Health</b>	
		<b>1.3.3.8 Stress and worries</b>		

<b>1.3.4</b> Employers	
<b>1.3.5</b> Stability	<b>1.3.5.1</b> Money
	<b>1.3.5.2</b> Routine
<b>1.3.6</b> Evolution	
<b>1.3.7</b> Self-fulfillment	
<b>1.3.8</b> Responsibility	
<b>1.3.9</b> Usefulness to society	
<b>1.3.10</b> Appreciation	<b>1.3.10.1</b> Appreciation from others
	<b>1.3.10.2</b> Self-worth