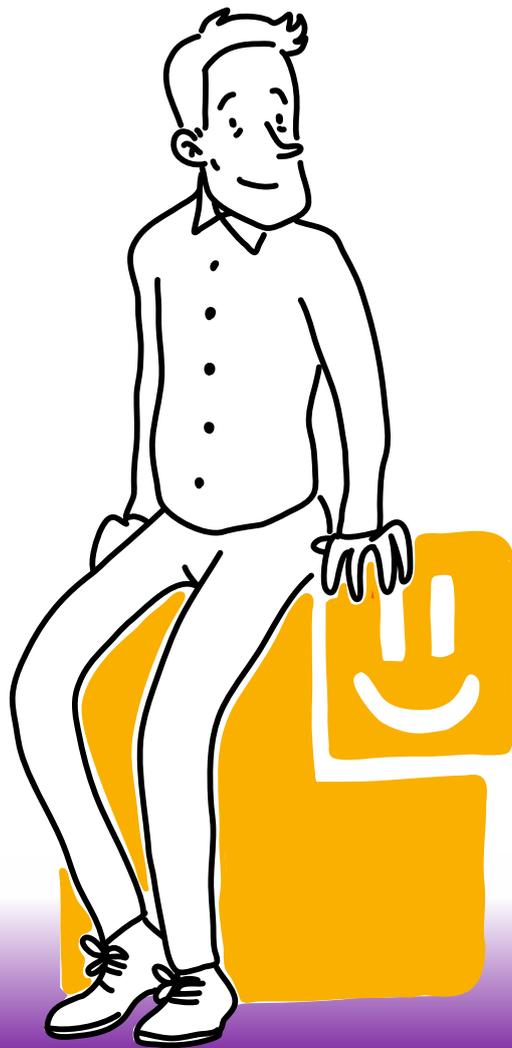


Finnish Institute of
Occupational Health

Abilitator

Method for the self-assessment of Work Ability and Functioning

User manual



Leverage from
the EU
2014–2020





Leverage from
the EU
2014–2020

Finnish Institute of
Occupational Health



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Work Ability and Capacity (Solmu) project 2019
Funded by: European Social Fund

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Glossary for the User manual

Personal Abilitator code

A personal code comprising a maximum of six digits (000001-999999) that the service professional creates for the Abilitator respondent.

Self-assessment method

A method based on the respondent's own assessment.

Inclusion

Inclusion arises from the feeling that one belongs to a community. In society, the opportunity for health, education, work and livelihood are signs of inclusion. Inclusion is also evident in the right to have a say in matters that relate to oneself and society.

Administrator

The person in the organisation authorised to apply for user rights for the Abilitator online service and able to add other employees in the organisation as users of the Abilitator as required. It is the administrator's responsibility that the Abilitator is used in the organisation according to the terms of use.

Social Inclusion and the Change of One's Work Ability and Capacity (Solmu) project 5

Social Inclusion and the Change of One's Work Ability and Capacity (Solmu) Coordination Project (1 October 2014 - 30 September 2020) is a project funded by the European Social Fund (ESF) and conducted by the Finnish Institute of Occupational Health.

Service provider

In this manual, service provider refers to a body that uses the Abilitator (such as association, company, municipality or foundation).

Service provider code

A code created for each service provider by the Finnish Institute of Occupational Health and used to distinguish between organisations in the Abilitator online service.

Functioning

An individual's capacity to cope with everyday challenges and tasks. Functioning can be divided into mental, social, cognitive and physical dimension.

Work ability

Is the result of the relationship between an individual's resources and the relationship between the individual's resources and the requirements of their work. An individual's resources include functioning, health, motivation and competence knowledge. An individual's operating environment and the immediate community affect the work ability.

Service professional/Contact worker

A professional working with the Abilitator respondent in different services.

Respondent

The working-age person (aged 15-65) completing the Abilitator.

1. What is the Abilitator?

The Abilitator is a method for the self-assessment of work ability and functioning for all people of working age, and it's also suitable for those not currently employed. The Abilitator enables respondents to assess their work ability and functioning and any needs for change in them. The Abilitator is an indicative assessment method that allows respondents to explore their situation, key strengths and development targets, and to identify changes in their work ability and functioning.

The Abilitator is a user-friendly, empowering and equal questionnaire. The Abilitator gives respondents personal feedback and, if necessary, proposes further action to maintain or improve their welfare. The Abilitator can be used in various services to assess the respondents' perceived work ability and functioning, to examine their life situation and to set goals for any objectives for change. The Abilitator can also be used as a tool for guiding and opening discussions when working with clients. In addition, the Abilitator will help service professionals to assess and report the occurred changes in terms of the goals set.

The Abilitator was developed in the Social Inclusion and the Change of One's Work Ability and Capacity (Solmu) project (1 October 2014 - 30 September 2020) run by the Finnish Institute of Occupational Health and funded by the European Social Fund (ESF). The development work was done between 2014 and 2019 in collaboration with the Finnish Priority 5 projects funded by the European Social Fund (ESF). The target group of these projects' activities was working-age people in a weak position in the labour market.

For more information, please visit:
www.kykyviisari.fi

Enquiries:
kykyviisari@ttl.fi

2. Using the Abilitator

2.1 Before you use the Abilitator

Setting up the Abilitator is easy, once you have planned a few matters carefully:

1. Select the activity or activities on which to use the Abilitator.
2. Consider your service process:
 - At which point can you use the Abilitator, e.g. the initial survey?
 - At which point would it be most natural to assess the change?
3. If your service process is unclear or undergoing changes, you can think about 1) what the process should be like and 2) at which point of the process the Abilitator would best be suited. For example, could the Abilitator replace some phase in the process entirely, should a new phase be introduced to the process, or should the whole process be changed? For tips on the service process, please visit: www.kykyviisari.fi
4. Read the terms of use of the Abilitator online service at www.kykyviisari.fi and select a person in your organisation as the Abilitator network administrator.
5. Obtain the Abilitator user ID for your administrator at www.kykyviisari.fi
6. Select the employees in your organisation who will use the Abilitator. The administrator will create Abilitator user IDs also for them.
7. Agree on a procedure for issuing the personal Abilitator numbers and on the location for storing each person's Abilitator number. One example of the procedure is that each employee will create the personal numbers for their clients starting with a specific number. This makes it easier to select specific clients for reporting.
8. Before processing any personal data, please ensure that your data protection matters are in order.
9. Visit the website at www.kykyviisari.fi for instructions on how to use the Abilitator and for support materials.
10. Prepare clear, specific instructions for your organisation on how to use the Abilitator.

2.2 Implementation

You must agree on the use of the Abilitator with the Solmu project of the Finnish Institute of Occupational Health at www.kykyviisari.fi

The person authorised in your organisation will obtain the administrator Abilitator user ID at www.kykyviisari.fi

It is the administrator's responsibility that the online service is used in the organisation according to the terms of use. The administrator will receive the user ID and password for accessing the Abilitator online service at www.kykyviisari.fi/solmu-admin in a secure email message. The administrator can add other employees as users to the online service as required. The administrator can also act as an employee working with clients, i.e. manage questionnaires.

The essential functions of the online service and the other service professionals' key tasks when using the Abilitator are described on page 12. There is also a user manual for the online service. You can download it at www.kykyviisari.fi.

It is the service professional's task to tell the respondents how they can complete the questionnaire. They can discuss the most appropriate method for completing the questionnaire. It is possible to complete the questionnaire either independently or together with another person.

The other person can be a service professional or a friend or relative. The service professional can also complete the questionnaire by interviewing the respondent. It is also possible to complete the Abilitator in a group, with more than one respondent completing the form independently in the group. In such cases, the service professional should be present and help the respondents if necessary. Current language options for the Abilitator include Finnish, Swedish, English, simplified Finnish, Arabic, Somali, Kurdish Sorani, Russian and Dutch.

It is possible to complete the Abilitator online or on paper. Respondents can access the online questionnaire via a link provided by the service professional.

It is also possible to complete the online questionnaire together with the service professional on the service professional's computer. If the respondent completes the questionnaire independently, it will take 10-30 minutes. If the Abilitator is completed through an interview, you should allow 1-1.5 hours for the process. If the respondent fills out a paper form, the service professional will transfer the replies from the form to the Abilitator online service. It takes less than 10 minutes to transfer one form.

Important considerations when using the Abilitator:

- Make sure that you store the completed Abilitator forms and/or lists of personal numbers in a safe manner in terms of data protection, i.e. in a locked cupboard or on a password-protected computer. Abilitator paper forms successfully transferred to the Abilitator online service can be destroyed or given back to the respondent.
- Service professional – help the respondent to complete the Abilitator form as required.
- If you have a problem, contact kykyviisari@ttl.fi.

2.3 Creating a personal Abilitator code and consent

The service professional will create a personal Abilitator code for the respondent for completing the Abilitator. It is a code comprising a maximum of six digits (000001-999999) determined by the service professional before completing the questionnaire for the first time (e.g. John Doe 3001).

The respondent's personal Abilitator code will remain the same whenever they complete the Abilitator. The service professional is responsible for data protection and the safe storage of the lists that connect the respondent's personal Abilitator code and the respondent's identity. The personal Abilitator code is used to identify the respondent on the Abilitator online service.

If questionnaires are completed on paper, the service professional will enter the respondent's personal Abilitator code and the service provider code, i.e. the code beginning with 90000 or 80000, created for the organisation by the Finnish Institute of Occupational Health.

By completing the Abilitator, respondents consent to the use of their answers in an unidentifiable format in the activities of the Finnish Institute of Occupational Health (see Chapter 4).

2.4 Ways of using the Abilitator

It is possible to utilise the Abilitator in several ways, depending on your need. Each respondent can complete the questionnaire according to their resources and the available tools. Possible ways of completing the Abilitator:

- Interview a client in a meeting, either on paper or directly online.
- Send the paper form of the Abilitator to the respondent in advance.
- The respondent completes the questionnaire in the meeting either on paper or directly online.
- After receiving instructions in a group, the respondent completes the questionnaire independently (e.g. in group activities).
- Respondents complete the questionnaire at home using the Abilitator link received via email.

Regardless of how the Abilitator was completed, it is essential to enter the responses in the Abilitator online service. It is the only way for the respondent to receive personal feedback and for the data to be saved. It is important to remember that the results and feedback from the Abilitator are discussed with each respondent.

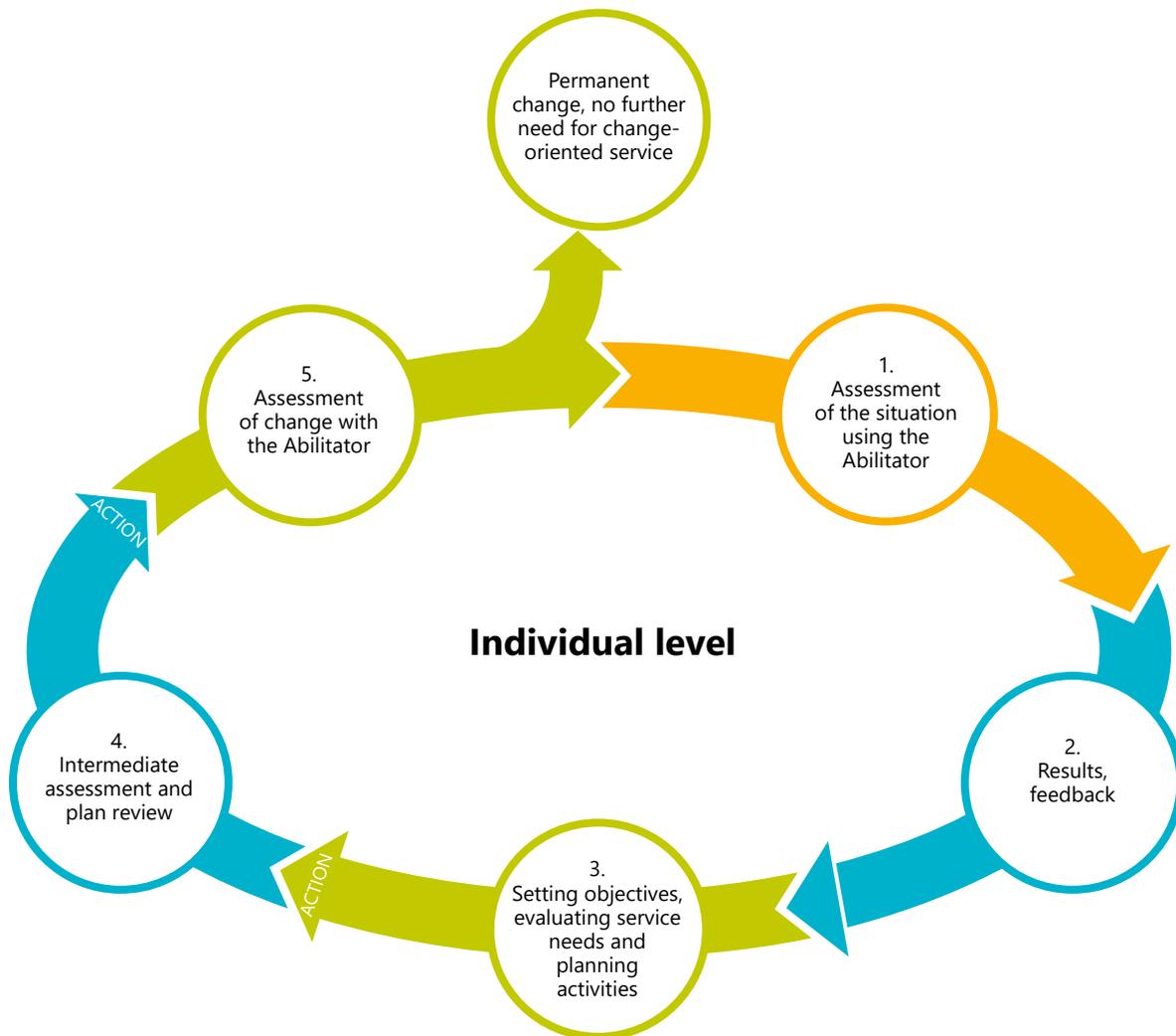


Image 1. The image shows a simplified model of how to utilise the Abilitator when working with a client.

1. **Initial assessment of the situation.** The respondent will complete the Abilitator in a suitable manner.
2. **Results and feedback.** It is important to go through and interpret the feedback and questions together with the client. The feedback should be discussed in this meeting: In a positive but honest manner, asking about the challenges that have appeared, seeking solutions and more information.
3. **Setting objectives, planning activities and implementation.** After discussing the Abilitator results, it is a good time to together set personal objectives for change. The objectives are then used to agree on the required services and activities. Together with the client, consider the type of a service package that would best improve their situation and support them in achieving their objectives.
4. **Intermediate assessment and plan review.** The Abilitator should be used to conduct an intermediate assessment if the service provided for the respondent is long term (6-12 months). The results can be used to determine whether things are moving in the right direction, whether the activities or service should remain unchanged, or whether there is a need to change the activities.
5. **Assessment of change with the Abilitator.** At the end of the activities, assess the changes with the Abilitator. By comparing the initial and final results of the cycle of activities, we can assess the change in the work ability and functioning at an individual level. The respondent will also receive visual feedback on the change.

Examples of using the Abilitator when working with clients:

- To survey the current work ability and functioning
- As a guidance tool
- To set objectives for change
- To monitor the changes in the work ability and functioning
- To monitor the impact of work at an individual level

Operating model level	Purpose		
	Assessment of the situation	Need for services	Monitoring of change
Individual level	identify the situation of the individual, a tool for broaching a topic, a tool for individual guidance	set objectives, plan activities and content	monitor the changes in the individual's work ability and functioning, assess the impact of services, monitor the impact of personal work
Group level	survey the situation in the client group, profile client groups, a tool for group guidance	set objectives, plan activities/services and their content at group level	monitor the changes in the work ability and functioning and the impact of activities/services, monitor the impact of personal work
Decision-making level	determine the situation of the clients in the organisation	set objectives, plan activities/services and their content at organisational level	monitor the changes in the work ability and functioning and the impact of activities/services

There are several ways of utilising the Abilitator operating model in the client process. The table above shows examples of how service professionals can use the Abilitator in their work at different levels, depending on the need of the service professional or organisation.

For more information on the operating models related to the Abilitator, please visit www.kykyviisari.fi

2.5 Language versions and their use

At the moment, the Abilitator is available in eight different languages: Finnish, plain Finnish, Swedish, English, Arabic, Somali, Kurdish (Sorani), Russian and Dutch. Translations of all the language versions are based on the Finnish form. You can check the language on the top right-hand corner of the form (e.g. Work ability and functioning assessment questionnaire in Arabic). Online, you can select the language on the first page. The respondent will also receive personal feedback in the language chosen on the form.

The Arabic and Kurdish language questionnaires are read from right to left. The electronic online form reads in the same direction; for example, the "Next" button is on the left-hand side and "Previous" is on the right. In all the forms, numbers from 0 to 10 are used, but in the Arabic and Kurdish-language forms, the scale for answering runs from right to left. Certain clarifications are included in the language versions, such as specifications that the assessment applies to the situation in Finland. Some questions include specifications for the language for which the assessment should be made, for example *"Assess your ability to concentrate in the language you know best"* or *"I am able to say my piece in different situations using a language I know"*. In addition, certain culture-specific concepts or concepts that may be difficult to understand have been clarified, for example *"Loneliness refers to a sad feeling. It should not be confused with solitude that may be welcomed."*

Culturally sensitive assessment always requires an appropriate assessment method in terms of language and culture, but also appreciative interaction and encounters between the professional and the client. In the assessment situation, unnecessary cultural explanations and prejudices should be avoided. Clients' responses are always affected by the context in which the assessment takes place, rather than culture. For practical instructions on culturally sensitive work, please refer to the [PALOMA handbook](#) (Chapter 4.2.).

In a cross-cultural assessment, the respondent should be given the opportunity to open and expand their responses with a professional. The importance of dialogue is further emphasised by the fact that the topics in the Abilitator do not cover all areas of life that are known to be significant at, for example, the integration phase. In particular, for people with refugee backgrounds these may include anxiety and issues related to difficult experiences. To assess these issues, you should seek indicators and recommendations in the [TOIMIA database](#), for example.

**The Arabic, Somali and Kurdish forms were translated and tested in the mobiTARMO project of the Finnish Institute for Health and Welfare that was funded by the Asylum and Migration Fund of the European Union. More information: link and www.thl.fi/mobitarmo*

3. The Abilitator checklist

Before you start using the Abilitator

- Obtain the administrator's user ID at www.kykyviisari.fi
- Create user IDs for other employees who have access to the Abilitator
- Plan a procedure for issuing personal Abilitator codes (see Section 2.3)
- Plan why and at which point of the client process you will use the Abilitator
- Add using the Abilitator to your general client registration and consent document

Before the respondent completes the Abilitator, tell him or her

- What the Abilitator is and why it is used
- What information about the Abilitator will be given to him/her
- How the accumulated information about him/her will be used, reported and stored
- That completing the questionnaire is voluntary

Competing the questionnaire

- Together with the respondent, select the most appropriate way to complete the Abilitator and agree on how, where and when you will go through the results together
- Assign the respondent a personal Abilitator number. Remember that the responses are retained and can be located on the Abilitator online service with the personal Abilitator number, so take good care of the numbers in terms of data protection
- If the respondent completes the Abilitator on paper, make sure that you transfer the responses to the Abilitator online service using his or her personal Abilitator number
- When you ask the respondent to complete the Abilitator again, use the same personal Abilitator number

After completing the questionnaire

- Go through the results and feedback with the respondent as you agreed
- When interpreting the results, make use of the interpretation instructions in the Abilitator user guide. Discuss the feedback with the respondent, set objectives and agree on services.
- Agree on follow-up

4. Ethical questions, consent form and data protection

Ethical issues and data protection issues related to data collection and the Abilitator were addressed by the management team responsible for solutions client at the Finnish Institute of Occupational Health (28 September 2015 and the ethics working group of the Institute 14 June 2017). The Abilitator is a questionnaire that respondents can complete themselves or through an interview (a non-medical study), which does not interfere with the physical or psychological integrity of the individual involved.

Data processing complies with the General Data Protection Regulation (GDPR) of the EU that took effect on 25 May 2018, and with the new Finnish Data Protection Act.

An organisation that uses the Abilitator online service is a data controller referred to in legislation and, thus, responsible for its obligations prescribed in legislation, such as data protection and provision of information related to its customers. The Finnish Institute of Occupational Health is a data processor referred to in legislation that processes personal data on behalf of and for its customer organisation. The processing of personal data is agreed upon when the customer organisation accepts the terms of use of the Abilitator online service as it applies for user IDs. Information on the processing of personal data and complementing terms and conditions are available online at kykyviisari.fi.

Responses to the Abilitator are accumulated in the Abilitator database maintained by the Finnish Institute of Occupational Health (FIOH). Materials are stored, processed and analysed in accordance with the principles of data protection of FIOH. A more detailed description of the data protection principles can be found online at kykyviisari.fi.

The Finnish Institute of Occupational Health reports on the Abilitator results in national and international scientific and popularised publications and publishes statistics on working life and Finnish society openly. Before publishing or sharing, the information is processed in a way that makes it impossible to identify an individual person or organisation, even indirectly.

The Finnish Institute of Occupational Health is not able to connect the Abilitator data to an individual person, and the Institute does not have access to identifiable personal data. Only the customer organisation providing the service can connect personal Abilitator code on the system to an individual person. At the end of the contractual term, the Finnish Institute of Occupational Health will destroy the personal Abilitator code in the service. After this, it will be impossible to connect a person to any responses. The Finnish Institute of Occupational Health will retain the information it gathers and continue to use it in its statutory activities in a manner that makes it impossible to identify an individual even indirectly. The Finnish Institute of Occupational Health may, at its discretion, also share this unidentifiable data with third parties for scientific research purposes, for example.

By completing the Abilitator, the person consents to the use of the data in an unidentified form in the statutory activities of the Finnish Institute of Occupational Health. No separate written consent is required.

In the role of the data controller, the service provider employees of the organisation must inform the participants/respondents about the processing of personal data as required by law and the General Data Protection Regulation of the EU. For more information on the processing of personal data and the provision of information to customers, please visit the website of the Office of the Data Protection Ombudsman at www.tietosuoja.fi

5. Abilitator's questions and how to interpret them

Sections of the Abilitator:

A. PERSONAL DETAILS

(age, gender, personal Abilitator code, project information)

B. WELL-BEING

(satisfaction with life, overall functioning perceived work ability and health, relationship to employment)

C. INCLUSION

(social functioning and social interaction)

D. MIND

(psychological functioning)

E. EVERYDAY LIFE

(coping with everyday life and caring for oneself)

F. SKILLS

(cognitive functioning, competence, attitude towards the future)

G. BODY

(physical functioning)

H. BACKGROUND INFORMATION

(household situation, economic livelihood, educational background)

I. WORK AND THE FUTURE

(employment situation, faith in finding employment, wishes for changes in one's life)

The user manual will go through the questions of all sections of the Abilitator. The interpretation and additional information related to each question is provided in a separate box next to the question. The purpose of some questions is to provide the service professional with more information in order to gain a better picture of the respondent's life situation. There are no interpretation instructions for these questions.

Questions that are taken into account in the feedback given by the Abilitator:

- Work ability and functioning : B3-B4
- Inclusion: C1-C8 and C14-C17
- Mind: D1-D9
- Everyday life: E1-E11
- Skills: F1-F3, F5-F10 and E4
- Body: G1, G8 and alternatively G4 & G6 or G5 & G7
- Overall situation: The average of the total percentages in sections C-G (0-100 %)

In this guide, these questions are also marked with an asterisk (*) next to each question number.

A. Personal details

(A1) Personal Abilitator code = personal code issued by the service professional to each respondent (000001 – 999999). Do not use letters! The personal Abilitator code is not the same as the respondent's personal identity code.

The service professional must record the personal Abilitator code on file in order to make it possible to connect the respondent to the correct Abilitator code.. The personal Abilitator code will remain the same every time the person completes the questionnaire. The personal Abilitator code is used to identify the respondent on the Abilitator online service.

(A1) **Personal Abilitator code** (0000)

(A2) **Today's date (ddmmyy)** (e.g. 010816)

(A3) **S number of the project** (S00000)

(A4) **Name of project**

(A5) **Are you:**

Male

Female

Other

(A6) **Age in years at the time of completing the form**

B. Well-being

(B1) **How satisfied are you with your life at this moment?** Assess your general satisfaction with life.

Very satisfied

Fairly satisfied

Not satisfied, but not dissatisfied either

Fairly dissatisfied

Very dissatisfied

(B1) Response options "very satisfied" and "satisfied" do not require any special measures. If the response falls in categories from "very dissatisfied" to "not satisfied but not dissatisfied either", the service professional should discuss with the respondent the factors that contribute to the poor satisfaction with life and how the situation could be improved.

(B2) **In your opinion, is your health currently?** Assess your health as a whole.

Good

Fairly good

Average

Fairly poor

Poor

(B2) Response options "good" and "pretty good" do not require any special measures. If the response falls in categories from "poor" to "average", the service professional should discuss with the respondent the factors that contribute to poor health and how the situation could be improved.

(B3)* **How well do you cope with your everyday activities and tasks?** Choose the number that best matches your situation. Assess your everyday life in general, and how you cope with it.

0 1 2 3 4 5 6 7 8 9 10

0 = I cope
very poorly

10 = I cope very well

(B3) Response options 8–10 do not require any special measures. If the response is in the categories 0–7, the service professional should discuss with the respondent the factors that contribute to the ability to cope, and which factors should be addressed in order to improve the situation.

(B4)* **Let's assume that your work ability would receive a score of 10 points at its best. What score would you give your current work ability?** If you do not currently work, give your assessment in relation to your last job, or the demands of your current occupation. If you have no profession, assess your situation in relation to the work you would like to do.

0 1 2 3 4 5 6 7 8 9 10

0 = Completely
unable to work

10 = Work ability
at its best

(B4) If the work ability is excellent (10), discuss with the respondent the factors in his/her lifestyle that help maintain the work ability and the factors that impair the work ability. Instruct the respondent to continue to avoid or reduce the factors that impair work ability. Support the promotion of good work ability (8–9) and evaluate whether the lifestyle includes adequate factors that improve work ability or too many factors that threaten work ability. Focus on the factors that maintain and improve work ability.

If the response is in the categories 0–7, the service professional should discuss with the respondent the factors that contribute to poor perceived work ability, and which factors should be addressed in order to improve the situation. If work ability is moderate (6–7) or poor (0–5), the aim is to encourage the respondent to take initiative in order to improve their ability to ie. nutrition, exercise, sleep and rest, social activity, other hobbies and studies. In addition, medical rehabilitation may be required. Often, there is also a need for measures that develop the respondent's professional competence and improve and diversify his/her work skills. Other issues that should be reviewed and addressed include occupational hazards and risks in the working environment, and problems in the organisation and supervision of work, if the respondent is working.

(B5) **How do you feel in relation to work life at the moment?** Select the number that best describes your situation.

0 1 2 3 4 5 6 7 8 9 10

0 = Work life or employment does not currently apply to me.	1 – 3 = I don't have a job. I'm poorly equipped for work life. I need support in order to obtain employment.	4 – 5 = I don't have a job, but I am equipped for work life. I may need support in order to obtain employment.	6 – 8 = I have a job. I am equipped for work life. I may however need support in order to stay in employment.	9 – 10 = I have a job. I am well-equipped to continue in employment.
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B5 The question comprises three dimensions: the working situation, the preconditions for participation in work life, and the need for support. Direct the respondent to consider the situation one dimension at a time in order, i.e. 1) Is the respondent working or not, 2) what are the respondent's preconditions for participating in work life, 3) does the respondent feel the need for support for participating in work life.

- Here, work refers to paid employment.
- The preconditions are, for example, an adequately good life situation, education, competences, adequate health, or job-seeking skills.
- Support may include help in a difficult life situation, help with health problems, with finding a job or finding a suitable occupation, or with seeking wage subsidies.

Discuss the factors that affect the choices in more detail with the respondent. Each person's situation is unique, and various factors may affect the responses, including age, life situation, work situation or health status. Highlight the fact that the current situation may not necessarily be permanent; that change is possible in one way or another. Make use of the responses in Section. I Work and the future as additional support.

- **Option 0** = Participation in working life may be very far away. The respondent's primary service requirement is for non-employment-related activities.
- **Option 1–3** = There are challenges in participation in work life. The respondent may have a need for cross-sectoral support prior to actual employment-related support measures.
- **Option 4–5** = Participation in work life may be close, but the respondent may need tailored measures to promote the transition to employment.
- **Option 6–8** = The respondent is working, at least occasionally, but finds it challenging to continue to work. The respondent may need tailored measures to improve the work or personal situation.
- **Option 9–10** = The respondent is working and has no need for employment-related support currently.

C. Inclusion

Which of the following describe your situation?

Choose a number from a scale of 1 = Completely disagree to 5 = Completely agree. Select a number.

	Completely disagree			Completely agree	
	1	2	3	4	5
(C1)* I get help when I need it	1	2	3	4	5
(C2)* I am needed by others	1	2	3	4	5
(C3)* I am allowed to express my opinions and they are taken into account	1	2	3	4	5
(C4)* I am appreciated	1	2	3	4	5
(C5)* I have experienced success	1	2	3	4	5
(C6)* I follow my own path	1	2	3	4	5
(C7)* I feel part of society	1	2	3	4	5
(C8)* I am happy with my relationships	1	2	3	4	5

(C1-C8) Statements: Response options 4 and 5 do not require any special measures. If the response is in categories 1, 2 or 3, the service professional should discuss with the respondent the factors that affect the situation or experience, and consider measures to improve the situation.

(C9) Do you feel lonely?

- Never
- Very seldom
- Sometimes
- Fairly often
- All the time

(D1 – D9) Responses 4 and 5 do not require specific measures, but the service professional should encourage the respondent to carry on in the same manner. If the response falls in categories 1 to 3, the service professional should discuss with the respondent the factors that affect the way the respondent is thinking/feeling, and consider measures to improve the situation.

(C10) **Do you have someone with whom you can openly discuss personal issues and problems?**

Yes

No

I don't know

(C11) **Do you have a pet or animal you care for, that makes you happy?**

Yes

No

I don't know

(C12) **Do you have hobbies, or something activity that you enjoy?**

Yes

No

I don't know

(C10 – C12) Response “yes” does not require any measures, but the respondent should be encouraged to continue in the same manner. If the response is “no” or “I don’t know” (with the exception of a pet), the service professional should discuss with the respondent the cause for the situation or the factors that affect the matter, and consider measures to improve the situation.

(C13) **How often do you meet or are you in contact with friends, relatives or acquaintances, with whom you do not live?**

Daily or almost daily

1-2 times a week

1-3 times a month,

Less than once a month

Never

(C13) If the respondent has no contact with friends, relatives or acquaintances, the service professional should discuss with the respondent the factors that affect the matter. The service professional and the respondent may also discuss whether the respondent wishes there was more contact and what the respondent could do to change the situation.

When interpreting this response, the service professional should consider the needs of each individual. Some people are happy to meet friends less often than once a month, while others feel that once or twice a week is not adequate.

Which of the following describe your situation?

Choose a number from a scale of 1 = Completely disagree to 5 = Completely agree. Select a number.

	Completely disagree			Completely agree	
(C14)* I get on well with those close to me	1	2	3	4	5
(C15)* I find it easy to maintain my friendships	1	2	3	4	5
(C16)* I find it easy to get to know new people	1	2	3	4	5
(C17)* I find it easy to socialize with people I do not know	1	2	3	4	5

If the response in questions C14–C17 falls in categories 1–3, the respondent may find social situations and making friends challenging. The underlying reason may be that the respondent is nervous about social situations. If this is the case, the service professional should discuss the underlying factors with the respondent and consider together, whether there is a need to improve the situation and discuss the measures.

D. Mind

The following are statements about thoughts and feelings. For each one, choose the response that best describes your situation **over the last month**.

	Never	Seldom	Some-times	Often	All the time
(D1)* I've been feeling optimistic about the future	1	2	3	4	5
(D2)* I've been feeling useful	1	2	3	4	5
(D3)* I've been feeling relaxed	1	2	3	4	5
(D4)* I've been dealing with problems well I've thought of solutions and considered different options for moving forward.	1	2	3	4	5
(D5)* I've been thinking clearly I've been able to separate my feelings and my actions. My thoughts have stayed clear.	1	2	3	4	5
(D6)* I've been feeling close to other people	1	2	3	4	5
(D7)* I've been able to make up my own mind about things	1	2	3	4	5
(D8)* I've been active and feeling motivated to do things	1	2	3	4	5
(D9)* I've taken pleasure in things that are important to me	1	2	3	4	5

(D1 – D9) Responses 4 and 5 do not require specific measures, but the service professional should encourage the respondent to carry on in the same manner. If the response falls in categories 1 to 3, the service professional should discuss with the respondent the factors that affect the way the respondent is thinking/feeling, and consider measures to improve the situation.

E. Everyday life

How well do you cope with the following everyday tasks?

Please respond even if the services or equipment in questions are not easily available or if the issue is not relevant to you at the moment.

	I am unable to cope	I have a lot of trouble coping	I have some trouble coping	I have very little trouble coping	I cope well
(E1)* Housework such as cooking, cleaning, laundry	1	2	3	4	5
(E2)* Shopping for example, for food, clothes, and personal hygiene products	1	2	3	4	5
(E3)* Using public services for example, bank, social insurance office, pharmacy, employment office, social services	1	2	3	4	5
(E4)* Using the internet and searching for information For example, internet banking, filling in forms, consulting timetables	1	2	3	4	5
(E5)* Managing personal finances for example, budgeting, paying bills on time	1	2	3	4	5
(E6)* Looking after your own health and well-being for example, eating a healthy diet, exercise, taking prescription medication	1	2	3	4	5
(E7)* Maintaining a regular daily routine and sufficient sleep for example, functioning during the daytime, feeling alert during the day	1	2	3	4	5
(E8)* Taking care of personal hygiene for example, having a wash, wearing clean clothes	1	2	3	4	5
(E9)* Using healthcare services for example, doctor's and dentist's appointments, laboratory tests	1	2	3	4	5
(E10)* Going to places outside your home for example, public transport, driving your car, cycling, taking taxis, on foot	1	2	3	4	5
(E11)* Caring for others for example, children, parents and pets	1	2	3	4	5

(E1–E11) Difficulties in coping with everyday tasks may cause problems in social inclusion, health and functioning. Such problems may also be caused by problems with health or functioning. Another potential underlying cause may be a social anxiety condition. Response 4 or 5 does not require any action, but the respondent should be encouraged to carry on in the same manner. If the response is in categories 1 to 3, the service professional should discuss with the respondent the cause of the difficulties and ways to improve the situation.

F. Skills

(F1)* **Are you normally able to concentrate on things?** For example, reading a book or newspaper, listening to others, filling in forms

Very well

Well

Well enough

Poorly

Very poorly

(F2)* **Are you able to take in new knowledge and learn new skills?**

Very well

Well

Well enough

Poorly

Very poorly

(F3)* **How would you currently rate your memory? Is it:**

Very good

Good

Satisfactory

Poor

Very poor

(F1-F3) Responses "very well/very good" and "well/good" require no specific measures, but the respondent should be encouraged to carry on in the same manner. If the response falls in categories "well enough/satisfactory" - "very poorly/very poor", the service professional should discuss with the respondent the factors that affect the matter and consider measures to improve the situation.

(F4) Have you been diagnosed with a learning, concentration or perception difficulty?

Yes

No

I don't know

(F4) If the response is "yes", the service professional should discuss with the respondent the ways in which the difficulty affects everyday life, the type of support the respondent has received before, and the type of support he/she feels he/she will need in the future. If the response is "I don't know", the service professional should discuss with the respondent what this response is based on and whether the respondent thinks that he/she might have a difficulty, or whether this has already been investigated. After this, the service professional and the respondent can discuss more accurate investigations or testing. If the response is "no", no specific measures are required.

How well do the following statements reflect how you feel about the future and your skills?

Select a number on a scale of 1 = completely disagree to 5 = completely agree. Select a number.

	Completely disagree			Completely agree	
(F5)* I feel positive about the future	1	2	3	4	5
(F6)* I have dreams and hopes for the future for example, finding a daily routine, sobriety, education, entering work life	1	2	3	4	5
(F7)* I am ready to make an effort and take action in order to make my dreams come true	1	2	3	4	5
(F8)* I have skills that I can use in work life	1	2	3	4	5
(F9)* I am able to express myself verbally in different situations for example, make my point, participate in conversations	1	2	3	4	5
(F10)* I am able to express myself in different situations writing for example, write a job application or a presentation	1	2	3	4	5

(F5–F10) Responses 4 and 5 do not require specific measures, but the service professional should encourage the respondent to carry on in the same manner. If the response falls in categories 1-3, the service professional should discuss with the respondent the factors that affect the way the respondent is thinking/feeling, and consider measures to improve the situation. Note! Feedback given to the respondent is also based on question E4.

G. Body

(G1)* **In your opinion, is your level of physical fitness:**

- Good
- Fairly good
- Average
- Fairly poor
- Poor

(G1) Responses from "average" to "good" require no specific measures, but the respondent should be encouraged to carry on in the same manner. If the response falls in categories "poor" or "fairly poor", the service professional should discuss with the respondent the factors that affect the respondents perception of poor physical fitness, and consider measures to improve the situation.

It is important for the service professional to determine whether the perception of poor physical fitness is due to an illness, symptom or disability, or too little physical activity. Here, it is a good idea to use the responses to questions G2 and G8-G12.

(G2) **Do you exercise?**

Exercise includes all leisure-time physical activity, general physical movement or other physical effort that causes breathlessness and sweating.

- I exercise at least three times a week
- I exercise once or twice a week
- I exercise, but not every week
- I exercise less than once a month
- I don't exercise

(G2) If the respondent exercises less than three times a week, it would be worthwhile to discuss the possibilities of increasing physical activity to maintain or improve the respondent's health and physical functioning . The service professional can use the feedback from the Abilitator and the attached recommendations for physical exercise in the discussion.

Physical activity recommendations for working-age people in Finland (UKK-Physical Activity Pie):

- Improve aerobic fitness by being active several days a week for a total of at least 2 h 30 min of moderate activity OR 1 h 15 min vigorous activity.
- Increase muscular strength and improve balance at least two times a week.

(G3) **Do you regularly use any aids or equipment for moving around, for example a wheelchair or a walking stick?**

Yes No

(G3) If the response is Yes, the respondent should go to questions G5 and G7, that are intended for someone using an aid or equipment for moving around. If the response is No, the respondent should go to questions G4 and G6. In the online questionnaire, the respondent will automatically be directed to the correct questions.

(G4)* **Are you able to walk about a kilometre without having to rest?**

Yes, with no difficulties
Yes, but with some difficulties
Yes, but it is very difficult
I can't do this at all

(G6)* **Can you run a reasonably short distance (about a hundred meters)?**

Yes, with no difficulties
Yes, but with some difficulties
Yes, but it is very difficult
I can't do this at all

(G4, G6) Response "Yes, with no difficulties" requires no specific measures, but the respondent should be encouraged to carry on in the same manner. If the response falls in categories from "I can't do this at all" to "Yes, but with some difficulties", the service professional should discuss with the respondent the factors that cause difficulties in walking or running and ways of improving the situation. However, it is important that the service professional determines whether the difficulty is caused by an illness, symptom or disability, or too little physical activity. Here, it is a good idea to use the responses to questions G2 and G8-G12.

(G5)* **If you use a manual wheelchair or other aid, are you able to spin this or walk about a kilometre without having to rest?**

Yes, with no difficulties

Yes, but with some difficulties

Yes, but it is very difficult

I can't do this at all

(G7)* **If you use a manual wheelchair or other aid, are you able to spin this or walk fast for a short distance?**

Yes, with no difficulties

Yes, but with some difficulties

Yes, but it is very difficult

I can't do this at all

(G5, G7) Response "Yes, with no difficulties" requires no specific measures, but the respondent should be encouraged to carry on in the same manner. If the response falls in categories from "I can't do this at all" to "Yes, but with some difficulties", the service professional should discuss with the respondent the factors that cause difficulties in moving, ways of improving the situation and bodies that should be contacted. However, it is important for the service professional to find out the severity of the possible illness, symptom, or disability and how it affects everyday life and physical activity. Here, it is a good idea to use the responses to questions G2 and G8-G12.

(G8)* **Do you suffer from one or more prolonged physical or psychological illness, symptom or injury?** By prolonged we mean lasting at least six months.

No

Yes

If you answered Yes:

Assess how much of an impediment these illnesses, symptoms or injuries are. Select the number that best describes the extent of this impediment.

(G9) Impediment in recreational activities

0 1 2 3 4 5 6 7 8 9 10

0 = no impediment

10 = worst possible impediment or huge impediment

(G10) Impediment in doing housework

0 1 2 3 4 5 6 7 8 9 10

0 = no impediment

10 = worst possible impediment or huge impediment

(G11) Impediment at work or at potential work

0 1 2 3 4 5 6 7 8 9 10

0 = no impediment

10 = worst possible impediment or huge impediment

(G12) Impediment in personal relationships

0 1 2 3 4 5 6 7 8 9 10

0 = no impediment

10 = worst possible impediment or huge impediment

(G8) If the respondent has an illness, symptom or disability, this should be taken into account when interpreting the responses to other questions in the Abilitator.

(G9-G12) Responses 0–3 do not require any specific measures.

If the response falls in categories 4–10, the service professional should discuss with the respondent the factors that affect the perception of impediment, whether the impediment is the same in different activities, and whether the situation could be improved.

H. Background information

(H1) **What is your personal status? You may choose more than one option. Please reply in accordance with your true situation.**

I live alone

I live with my parent/parents

I am a single parent

I have joint custody of my children

Married or co-habiting, no children

Married or co-habiting with children

I live in a household with several other adults, e.g. house-sharing or student accommodation

I live in a group home or an institution

I live in a reception centre

I live in a sheltered housing unit

I don't have a permanent address

(H2) **Looking at the total income of your household, is covering the expenses with this income:**

Very easy

Easy

Fairly easy

Fairly difficult

Difficult

Very difficult

What is your educational background?

(H3) **Basic education:**

Comprehensive school, primary school

I am currently at comprehensive school

I dropped out of comprehensive school

I have no basic education

(H4) **Post-comprehensive education:**
You may choose more than one option.

No education after comprehensive school

High school/matriculation

Preparatory education for upper secondary vocational education and training (VALMA) or other such courses (e.g. education for immigrants)

Course-based vocational training, further vocational qualification module

Vocational school or college qualification, also competence-based qualification

Bachelor's degree

Master's degree

Licentiate or PhD

I dropped out of further education

(H1-H4) These questions explore the respondent's household situation, economic livelihoods and educational background. It is a good idea to go through the background questions if you need more information about the respondent's family situation. Using these questions, particularly with questions in Section E. Everyday life, will provide a deeper understanding of the respondent's situation.

I. Work & the future

- (I1) **Which of the following best describes your current work situation? You may choose more than one option.**

Trainee

Workshop work or rehabilitative work

Work trial

Unemployed (jobseeker at employment office)

Unemployed (not a jobseeker at employment office)

Non-paid work, for example voluntary or charity work

Community service

Student or apprentice

At home (stay-at-home parent or carer)

On sick leave or partial sick leave

Retired (work disability pension, partial work disability, rehabilitation allowance or partial rehabilitation allowance, survivor's pension)

Paid employee (full-time, part-time, work with pay subsidy)

Entrepreneur or farmer

Self-employed or freelancer

Work supported by a grant or scholarship

- (I2) **How long has your current period of unemployment lasted? If you are in rehabilitation etc., consider the duration of your unemployment before this.**

Less than a year

1–2 years

3–4 years

5–7 years

8–10 years

Over 10 years

I have never worked in employment

I am not currently unemployed

How difficult do the following make it for you to participate in work life?

	Very difficult	Difficult	Difficult to some extent	A little difficult	Not at all	I don't know
(I3) Lack of job opportunities	1	2	3	4	5	6
(I4) Commuting difficulties for example, difficult transport connections, long distances	1	2	3	4	5	6
(I5) Lack of training and skills for example, language skills, lack of professional qualifications or outdated qualifications	1	2	3	4	5	6
(I6) Diminished work motivation or desire to work	1	2	3	4	5	6
(I7) Problems connected to health or functioning	1	2	3	4	5	6
(I8) Personal life situation for example, family, relatives, friends	1	2	3	4	5	6
(I9) Substance dependence and other addictions	1	2	3	4	5	6
(I10) Criminal or drugs record	1	2	3	4	5	6
(I11) Financial situation for example, debts, enforcement orders	1	2	3	4	5	6

(I12) Do you believe you will find paid work?

Yes, definitely

Yes, fairly sure

Maybe, maybe not

No

This question isn't relevant to me at the moment

(I13) **Do you believe you will find a meaningful study programme or a training course?**

Yes, definitely

Yes, fairly sure

Maybe, maybe not

No

This question isn't relevant to me at the moment

Questions I1-I2 help you determine the respondent's work situation and unemployment history. Questions I3-I11 address the respondent's perceived barriers to employment, while questions I12-I13 address their faith in finding employment. The service professional can use these responses when discussing the respondent's life situation, as well as needs for change, objectives and preparedness for possible changes.

(I14) **Which areas of your life do you wish to change?**

You may choose more than one option.

My work or employment situation

My competence and professional skills

My financial situation

My health

My sleep and body clock rhythm

My diet

My physical fitness

Management of everyday life

My emotional well-being

My personal relationship

My hobbies and general ability to participate

My use of alcohol/drugs or other addictions

I don't know

I feel no need for improvements

(I14) The question can be used to discuss the person's needs for change, objectives and preparedness for possible changes. As changes can be achieved step-by-step, the immediate objectives should be very concrete and achievable.

6. Results and discussing the feedback

The Abilitator helps to form an overview of the respondent's self-assessed work ability and functioning, as well as the occurred changes in them. Here, the service professional can use the automatic feedback given to the respondent by the Abilitator and the individual change report which can be formed in the Abilitator online service.

The results of the Abilitator are indicative, as the section-specific feedback given does not take into account all the questions in the section. The questions taken into account in the feedback are marked with an asterisk (*) in this manual. This means that the feedback received by the **respondent** may be more positive or negative than the section overall percentage value (0-100 %). Therefore, it is also important for the service professional to go through the individual questions in each section.

After completing the Abilitator, it is important to:

- Discuss the results and feedback with the respondent.
- If required, look at individual questions in more detail in order to better understand a situation.
- Interpret and reflect on the situation together with the respondent.
- Think about objectives and agree on possible measures to achieve them.

7. Reporting on the results of the Abilitator

At group level, service professionals can view the questionnaire results of their clients and the automatic feedback given to them, as well as cross-section and change reports on the Abilitator online service. In addition, service professionals can download as Excel files all queries saved during use from the online service, and thus analyse and report on the results of the Abilitator in the manner of their choice. It is important to ensure that the data protection of respondents is not compromised. Therefore, the material must not be used to produce public reports or partial group analyses, if the results include fewer than ten respondents. More information on how to utilise the results of the Abilitator can be found in Chapter 2.4.

Appendix 1. Information for the respondent

What is the Abilitator?

- The Abilitator is a user-friendly questionnaire that is used to give you information about your work ability and functioning.
- You can complete the questionnaire on paper or electronically.
- You can complete the questionnaire on your own or with someone.
- The other person can be your service professional or a friend or relative.
- If you complete the Abilitator at least twice, you will receive information about changes in your work ability and functioning.
- The Abilitator gives you personal feedback and, if necessary, proposes further action to maintain or improve your welfare.
- The Abilitator helps to make your situation visible. This can make it easier to plan your way forward.
- The Abilitator was developed in the Social Inclusion and the Change of One's Work Ability and Capacity (Solmu) coordination project. Solmu is a project funded by the European Social Fund and implemented by the Finnish Institute of Occupational Health.

For more information, please visit: www.kykyviisari.fi

Appendix 2. Information for the service professional

The Abilitator

Social Inclusion and the Change of One's Work Ability and Capacity (Solmu) project coordination project 2014–2020

The Solmu coordination project of the Finnish Institute of Occupational Health developed the Abilitator, a tool for assessing social inclusion, work ability and Functioning . Initially, the Abilitator was developed for the Priority 5 projects of the ESF, but in March 2018, it was made available to all service providers . The Abilitator was co-developed together with volunteer service actors of the Priority 5 projects, project participants and stakeholders.

The Abilitator is suitable for service actors engaged in assessing the work ability and functioning of working-age people. The Abilitator can be completed several times to indicate changes in work ability and functioning .

The topics of the Abilitator and question content samples:

- A. **PERSONAL DETAILS** (age, gender, service professional details)
- B. **WELL-BEING** (life satisfaction, overall functioning , perceived work ability, health, relationship to work life)
- C. **INCLUSION** (social capacity and social interaction)
- D. **MIND** (psychological capacity)
- E. **EVERYDAY LIFE** (coping with everyday life, caring for oneself)
- F. **SKILLS** (cognitive capacity, competence, attitude towards the future)
- G. **BODY** (physical capacity)
- H. **BACKGROUND INFORMATION** (household situation, educational background)
- I. **WORK AND THE FUTURE** (employment situation, faith in finding employment, wishes for change)

The Abilitator questionnaire can be completed

- on paper or online
- by the respondent, either alone or with a service professional, relative or friend, or in a situation
- in eight languages: Finnish, plain Finnish, English, Swedish, Somali, Kurdish Sorani, Arabic, Russian and Dutch

The objective of the assessment is to provide the respondent with an overview of his or her work ability, functioning and social inclusion, as well as indicating strengths and potential areas to be developed. When completed online, the Abilitator gives the respondent personal feedback.

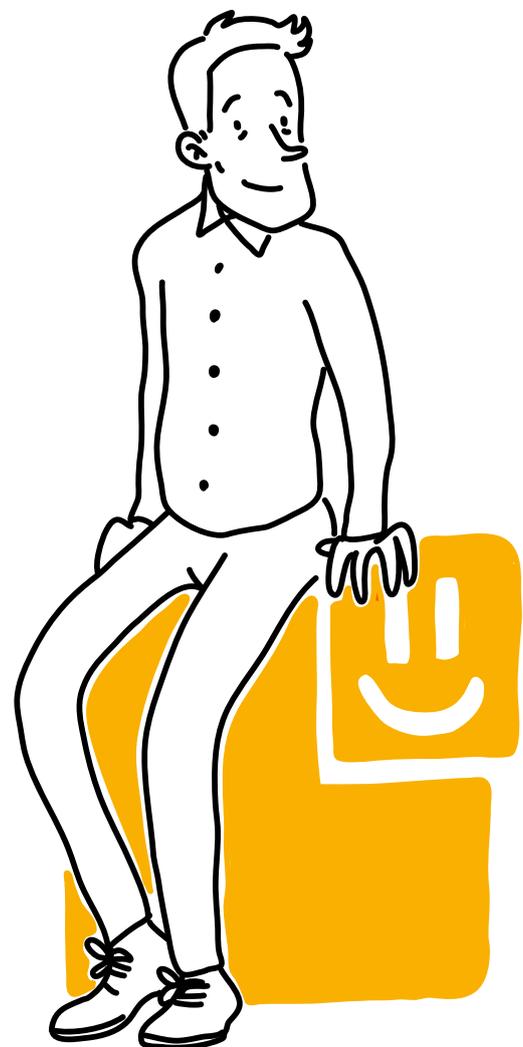
Service professionals have access to the Abilitator results, and they can be used in monitoring, allocating and reporting on project objectives and measures.

Responses to the Abilitator are accumulated in the Abilitator database maintained by the Finnish Institute of Occupational Health (FIOH). Materials are stored, processed and analysed in accordance with the principles of data protection of FIOH the Institute. A more detailed description of the data protection principles can be found online at kykyviisari.fi.

The Finnish Institute of Occupational Health reports on the Abilitator results in national and international scientific and popularised publications and publishes statistics on working life and Finnish society openly. Before publishing or sharing, the information is processed in a way that makes it impossible to identify an individual person or organisation, even indirectly.

The Finnish Institute of Occupational Health is not able to connect the Abilitator data to an individual person, and the Institute does not have access to identifiable personal data. Only the customer organisation providing the service can connect personal Abilitator code on the system to an individual person. At the end of the contractual term, the Finnish Institute of Occupational Health will destroy the personal Abilitator code in the service. After this, it will be impossible to connect a person to any responses. The Finnish Institute of Occupational Health will retain the information it gathers and continue to use it in its statutory activities in a manner that makes it impossible to identify an individual even indirectly. The Finnish Institute of Occupational Health may, at its discretion, also share this unidentifiable data with third parties for scientific research purposes, for example.

For more information, please visit: www.kykyviisari.fi



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