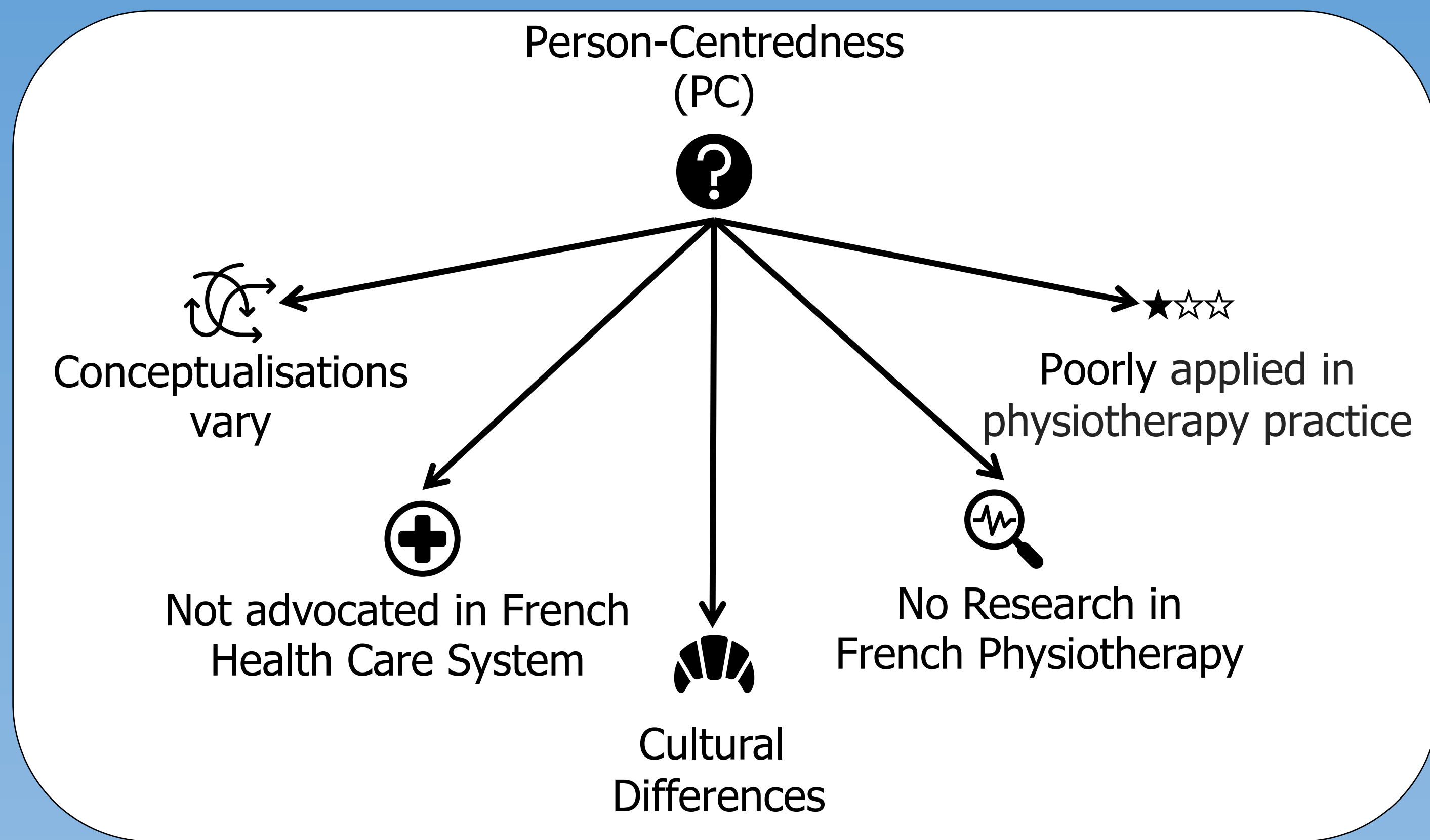


Why this study?



Explore French physiotherapists' conceptualisations of PC

How?

- Qualitative Phenomenographic study (interpretivist paradigm)
- 7 physiotherapists trained and working in France
- Purposive sample recruited via
- Online semi-structured interviews
- Transcribed + translated (English)
- Analysis by both researchers through dialogic discussion following steps of Larsson & Holmström (2007)

Findings

This study highlighted a multiplicity of perspectives. 3 categories of description were generated.

Creating a relationship

Based on trust, communication, sharing information, providing support. Influenced by Physiotherapists' emotions, prejudices & desire to help

"I tried to listen to her complaint, to say that I understood that it was difficult. I supported her and listened to her complaint." (Dagobert)

"I think that sometimes, I was less involved, in comparison to someone who would have not showed up in such a bad way during the first session" (Annie)

Adapting the rehabilitation

To the person, individual needs, preferences, biopsychosocial factors / But only to an extent

"I adapted to what she told me, and we really found solutions that were adapted to her problems and her daily life. I relied on the activities she was doing at work, at home, what she could not do anymore, what she wanted to do again." (Michel).

"I tried to dig into the psychosocial aspect of the person." (Claudine)

"Now, I'm not willing to accept this social role. I am ok to accept a psychologist role, but not a social role." (Michel)

Giving the choice

To people / But struggle to navigate the power dynamic due to the paternalistic culture that permeates physiotherapy

"She was happy not to be directed or ordered what to do during the rehabilitation process. It was more a collaboration compared to what she was used to." (Francois)

"From the very beginning, I told her that we would do active rehabilitation for her shoulder. So, I explained that I was going to work her shoulder that way." (Nicolas)

"Sometimes, when a patient is 100% in wrong beliefs with numerous biases, it is difficult to leave them at the centre and remain in a horizontal system." (Francois)

Conclusions

- All participants intended for their practice to be person-centred.
- They conceptualised person centredness as relational, collaborative and nuanced.
- There were challenges in operationalising this in practice predominantly in the struggle to relinquish power.
- Future research could study the evolution of this conceptualisation in different contexts or through time.

Impact

- Understanding the conceptualisation of different groups of physiotherapists helps to provide a more developed perspective on the challenges of implication.
- *Becoming* person-centred is part of the NHS strategy and thus these results give insights to understand the challenges of implementation.

Resources



Abstract ID: 44
Transformation and Transition

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