

Community physiotherapists' experiences of working with patients with persistent pain from diverse cultural backgrounds in London

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Purpose:

Patients with long-term pain are better managed when their expectations are met. Additionally, it is important to address value-based goals with this cohort. However, the experiences and beliefs of patients from ethnic minorities are not well understood, therefore physiotherapists have identified this patient population as challenging.

To explore:

- 1) Physiotherapists' experiences of working with patients from culturally diverse backgrounds with persistent pain in the community, and
- 2) their beliefs about the reasons for lack of adherence to exercise in this patient population.

Results:

Participants

- ❖ 32 physiotherapists (63% female) were interviewed.
- ❖ All worked for the NHS within Greater London
- ❖ n=9 (28%) also worked in private practice.
- ❖ The average time since qualification was 11.8 years



Methods:

Recruitment

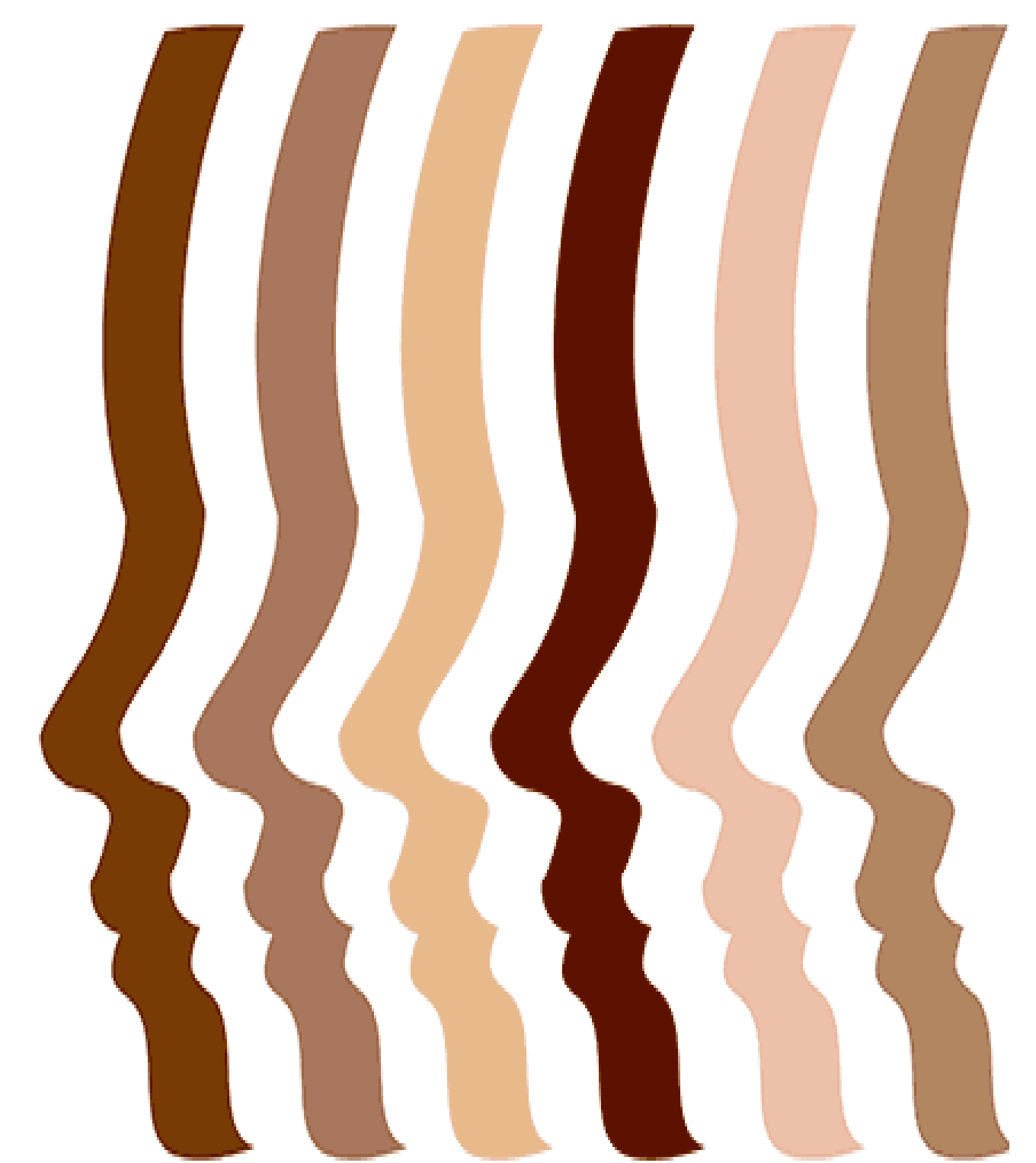
- ❖ Physiotherapists working in community settings in the Greater London area
- ❖ Manage patients from ethnic minorities with persistent musculoskeletal pain (>3 months)
- ❖ Informed consent and socio-demographic information collected prior to interview
- ❖ Online recruitment campaigns via iCSP and social media
- ❖ In-depth one-to-one interviews, face to face or via virtual platforms
- ❖ Approved by the College of Health and Life Sciences Research Ethics Committee, at Brunel University London.

In-depth one-to-one interviews

- ❖ They were asked about working with patients they considered culturally diverse and different to them
- ❖ They were asked to reflect on their support systems

Data collection and analysis

- ❖ Conventional content analysis was undertaken by a team of three researchers, all physiotherapists with academic and/or clinical experience.
- ❖ Divergent cases are presented as part of the analysis, to improve validity.
- ❖ Findings are presented as a thematic framework.



Communication and comprehension were key to successful patient management.

"we're doing an assessment in English with these words and these words have no meaning in their own language"

"... there are concerns around whether I'm getting a true picture or whether I am getting the family member's version of-of events of history of there, their belief systems, their interpretation of the patient's symptoms..."

physiotherapists who spoke different languages found that improved communication

Clinician's felt support and resources were limited for effective management of patients with persistent pain in the community.

"you know if they've come over here and they've got no family here at all; they are very isolated so... that's difficult you know if you're on your own"

"you don't always feel that you've got erm, the sort of places that you can refer somebody onto"

<< Divergent Cases >>

newly qualified physiotherapists reporting difficulties with most patients with persistent pain

Clinicians identified gaps in their knowledge.

"I'm probably unaware of most of the services that probably do exist and probably should be better at that."

"when you asked for... my thoughts, behind why they are not attending, I personally don't have any idea"

A few clinicians were unaware of the possible positive role community services / activities could play

Conclusions:

- ❖ Findings show that managing persistent pain patients in the community is challenging, and effective communication (assessment, education and joint decision making) with patients of ethnic minorities is a further challenge clinicians face.
- ❖ Overcoming language barriers is an important ingredient to success.
- ❖ Physiotherapists also identified gaps in their knowledge such as effective management of persistent pain, improving cultural sensitivity and awareness of services and options in the community.

Implications:

- 1) Overall, the findings support training physiotherapists in London's community settings to improve their cultural competence.
 - ❖ Physiotherapists in the community struggle to manage patients with persistent pain, let alone patients from a variety of cultural backgrounds with language barriers, and different cultural beliefs and values.
- 2) Evidence based practice encourages the use of value-based goals to help manage patients with persistent pain.
 - ❖ Therefore, an understanding of culturally diverse patients' needs and values need to be explored further.
- 3) Physiotherapists identified the need to improve communication methods with this patient cohort.
 - ❖ Therefore, there is a need to identify trusted printed and online resources for such patients.
- 4) Evidence suggests that the integration of patients with persistent pain in the community is one of the best forms of managing long-term pain.
 - ❖ Therefore physiotherapist need to be aware of services and/or activities in the community to refer on.
 - ❖ Physiotherapists should collaborate further with community services to ensure smooth transition for this patient cohort.

Acknowledgments: Thank you for Brunel University London's Public Engagement Fund for funding this project

Key references:

- Burton, A. E., and R. L. Shaw. "Pain management programmes for non-English-speaking black and minority ethnic groups with long-term or chronic pain." *Musculoskeletal Care* 13.4 (2015):187-203.
- Chabane, Sabrina Morin, et al. "Outpatient physiotherapists' attitudes and beliefs toward patients with chronic pain: A qualitative study." *Physiotherapy Theory and Practice* (2018).
- Darlow, Ben, et al. "The association between health care professional attitudes and beliefs and the attitudes and beliefs, clinical management, and outcomes of patients with low back pain: a systematic review." *European Journal of Pain* 16.1 (2012): 3-17
- Hunt, Matthew. "Taking culture seriously: considerations for physiotherapists." *Physiotherapy* 93.3(2007): 229-232

