
Downloaded from: http://insight.cumbria.ac.uk/id/eprint/4992/

Usage of any items from the University of Cumbria’s institutional repository ‘Insight’ must conform to the following fair usage guidelines.

Any item and its associated metadata held in the University of Cumbria’s institutional repository Insight (unless stated otherwise on the metadata record) may be copied, displayed or performed, and stored in line with the JISC fair dealing guidelines (available here) for educational and not-for-profit activities provided that

- the authors, title and full bibliographic details of the item are cited clearly when any part of the work is referred to verbally or in the written form
- a hyperlink/URL to the original Insight record of that item is included in any citations of the work
- the content is not changed in any way
- all files required for usage of the item are kept together with the main item file.

You may not

- sell any part of an item
- refer to any part of an item without citation
- amend any item or contextualise it in a way that will impugn the creator’s reputation
- remove or alter the copyright statement on an item.

The full policy can be found here. Alternatively contact the University of Cumbria Repository Editor by emailing insight@cumbria.ac.uk.
Session 14.1

Conceptualising diabetes self-management as an occupation

Youngson A, Wilby H, Cole F, Cox D, University of Cumbria

Diabetes self-management requires the ability to cope with the symptoms of diabetes, manage testing and medication, deal with psychosocial consequences and make lifestyle changes. Approaches to self-management are typically medical, although occupational therapists have recently started to recognise the opportunities for the profession in understanding self-management in terms of an individual's life context, roles and routines (Fritz 2014 Pyatak 2011 Thompson 2014).

Following ethical approval from the University of Cumbria, a total of 22 participants with type 1, type 2, gestational or pre-diabetes were recruited in three separate stages to the first author's doctoral study exploring the role of occupational therapy in diabetes self-management. Following initial analysis of digitally recorded semi-structured interviews on the lived experience of diabetes, the findings were taken as a whole to conceptualise the experience of diabetes self-management as an occupation, using the Model of Human Occupation (MOHO) (Kielhofner 2008).

The presentation will discuss the occupational forms of the occupation of diabetes self-management, the impact of other occupations on diabetes self-management, and the impact of diabetes on other occupations. Using MOHO and examples from the participants, it will illustrate the interaction between occupational identity, volition, habituation and the environment on diabetes self-management.

This research adds to the growing literature on an occupational therapy approach to diabetes. Understanding diabetes self-management as an occupation brings a particular non-medical therapy approach to diabetes. Understanding diabetes self-management.

This research adds to the growing literature on an occupational therapy approach to diabetes. Understanding diabetes self-management as an occupation brings a particular non-medical therapy approach to diabetes. Understanding diabetes self-management.

The presentation will discuss the occupational forms of the occupation of diabetes self-management, the impact of other occupations on diabetes self-management, and the impact of diabetes on other occupations. Using MOHO and examples from the participants, it will illustrate the interaction between occupational identity, volition, habituation and the environment on diabetes self-management.

This research adds to the growing literature on an occupational therapy approach to diabetes. Understanding diabetes self-management as an occupation brings a particular non-medical therapy approach to diabetes. Understanding diabetes self-management.

This research adds to the growing literature on an occupational therapy approach to diabetes. Understanding diabetes self-management as an occupation brings a particular non-medical therapy approach to diabetes. Understanding diabetes self-management.

References

Keywords
Long term conditions, Research, Occupational therapy models and theory, Other

Contact E-mail Addresses
bel.youngson@btinternet.com

Session 14.2

Reconceptualising pain empowers patients to identify meaningful self-management strategies

Chanter J, Sheffield Teaching Hospitals

Introduction: Pain is normally understood as a symptom of damage or disease that is diagnosed and treated. Persistent pain rarely fits such a medical model. However, without an alternative understanding, those who experience long term pain will continue to seek a medical resolution, leading to frustration, disability and suffering.

A novel four hour Pain Management Programme (PMP), facilitated by an Occupational Therapist and Physiotherapist, aimed to reconceptualise pain, in order to challenge the dominant understanding that ongoing pain equates to ongoing damage.

Objectives: To identify changes in the way that group participants understood their pain and how they applied the reconceptualisation of pain to identity, role and function (Clarke et al 2011).

Methods: A pre and post PMP questionnaire completed by participants explored how they understood their pain. A Content Analysis methodology was used to study the content and effect of communication on pain cognitions and self-management intention within an interactive group session.

The Evaluation was registered with and approved by Sheffield Teaching Hospitals Service Review Panel.

Results: The results showed a significant shift in beliefs and intentions (n=69)

Percentage of participants who:
• understood pain as a chemical vicious cycle pre PMP 1%, post PMP 71%
• identified self management startegies pre PMP 38%, post PMP 87%

Conclusion: The findings provide a very different dimension to our understanding of how reconceptualisation of pain results in changes to self-management. Importantly for Occupational Therapy the outcomes demonstrate changes in how participants perceive their pain and therefore influences their ability to identify self-management strategies that are meaningful to them. The group process provides validation and shared experience that supports the change in pain cognitions.

References

Keywords
Long term conditions, Practice development, Innovative practice, NHS