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Author Biography

Lindsey Barker, Clinical Specialist Occupational Therapist at Harold Wood Long Term Conditions Centre since 2001 and prosthetic occupational representative on the national executive committee, COT specialist section trauma and orthopaedics.

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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 focus that may complement existing services and show how occupational therapy could enable improved diabetes management for those who require it.

References

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Contact E-mail Addresses

bel.youngson@btinternet.com

Author Biographies

Bel Youngson is completing her doctoral research at the University of Cumbria in to the role of occupational therapy in diabetes self-management. Her interests include health promotion and putting theory into practice.

Helen Wilby is a Senior Lecturer in Occupational Therapy at the University of Cumbria with interests in research capacity, assessment and clinical reasoning.

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 strategies 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

- Clarke, C., Ryan, C., and Martin D. (2011) Pain neurophysiology education for the management of individuals with chronic low back pain: A systematic review and meta-analysis. *Manual Therapy* 16(6) p 544–549

Keywords

Long term conditions, Practice development, Innovative practice, NHS