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Barriers to engagement with rehabilitative services: A scoping review

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Abstract

Purpose: Engagement with healthcare services in general can present an ongoing challenge for rehabilitation teams. Poor engagement with services often leads to unsuccessful treatments and the need to re-refer for further intervention. Despite engagement and non-attendance from a primary care perspective being regularly discussed in research, the issue has received less attention within the secondary/tertiary care sectors around the multitude of different rehabilitative teams. Whilst the impact of poor engagement is well known, there are inconsistencies. The aim of this review was to map the current understanding around the issues which influence engagement with rehabilitation services, with the hope of identifying areas for more detailed onward investigation.

Methods: This scoping review searched Medline (via Ebsco), CINAHL (via Ebsco), Science Direct, Cochrane database, ProQuest and Sport Discus with the key phrase "barriers to engagement with rehabilitation". Only primary sources published in English and investigating engagement with rehabilitative services were eligible for inclusion. All papers discussing rehabilitation of any description were included" 279 papers were retrieved, and, after screening, 13 final papers were taken forwards for analysis. Analysis was conducted using a 6-step Reflexive Thematic Analysis approach.

Results: The thematic analysis of the final papers identified 3 overarching themes, (with several subthemes beneath each), which were identified as barriers to engagement. 1: Psychological factors, 2: Physiological factors and 3 Social factors. Of the 3 themes psychological factors were the most prominent, with sub themes surrounding motivation, emotions and patient perceptions of and degree of understanding regarding their involvement with services. In addition, several studies identified existing mental health conditions that were perceived as barriers. The second theme was, physical factors and referred to existing health conditions which

physically limited the patient's ability to engage. The final theme, external factors was associated with external influences such as the role of others within the process ranging from peers to therapists, however, in most cases these were seen as an enabler to engagement as opposed to a barrier.

Conclusion(s): The review indicated that the challenges impacting full and productive engagement are multifaceted. Some issues are more easily controllable than others. For example, psychological elements may require involvement of specialist services to improve engagement with behavioural change approaches. While the role and behaviour of therapists may be easier to control, this also emphasizes therapists need to recognise the impact their behaviour can have on others. Reassuringly throughout this work some identified areas presented as enablers showing that positive influence can be made to improve engagement. A more detailed investigation into the individual themes is warranted to determine the extent of the individual challenges and the potential solutions which can be offered. While the reported results offer some insight, it must be acknowledged that all included studies were not exclusively physiotherapy or UK specific meaning that further investigation into these areas is required to determine if identified trends are transferable.

Impact: By gaining a greater understanding of patient engagement, the hope is that we can improve the likelihood of its occurrence, thus allowing physiotherapy services to work more productively.