

Understanding therapeutic alliance and self-management in the community from the perspectives of stroke survivors and healthcare professionals.

Lauren Lucas ^{1,2}, Sarah Peters ¹, Sarah Cotterill ¹, Audrey Bowen ^{1,2}

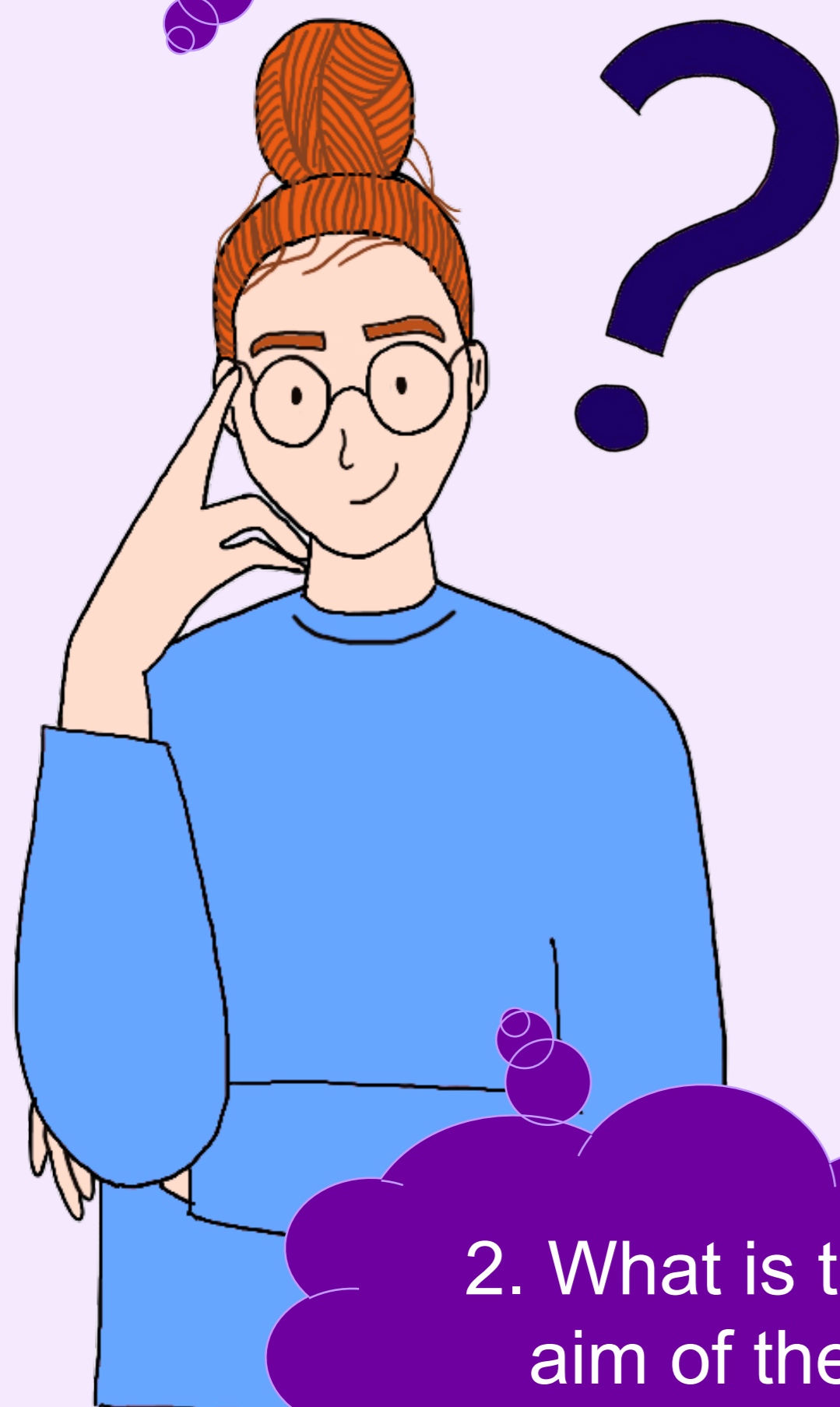
School of Health Sciences, University of Manchester ¹,
Geoffrey Jefferson Brain Research Centre, The Manchester Academic Health Science Centre, Northern Care Alliance & University of Manchester ²

Email: lauren.lucas-3@postgrad.Manchester.ac.uk

Twitter: @Physio_Loz

WORK IN
PROGRESS

1. Why is this research needed?



1

Forming a patient-provider relationship, or therapeutic alliance, is one of five core self-management skills.

In stroke rehab the alliance between a stroke survivor and healthcare professional is important for engagement and motivation. In other clinical settings therapeutic alliance has been shown to influence readiness to initiate change in self-management behaviours.

However, in community stroke rehabilitation therapeutic alliance is not well understood. We know even less about its effects on a stroke survivors' ability to self-manage, or clinicians' ability to support self-management

Therapeutic Alliance is "the collaborative and effective bond between a therapist and patient." It features collaboration and agreement on goals, the formation of a positive bond, and accepting that ruptures and strains are normal.

Self-management relates to the tasks and behaviours that patients can do to live well with one or more chronic conditions.

Supported self-management is the means by which healthcare professionals support patients in the methodological exercise of self-management.

2. What is the aim of the research?

2

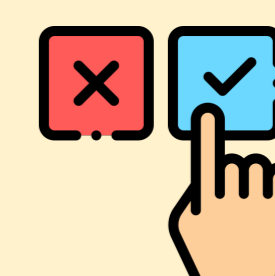
The research has three aims.



1. To understand how alliances are developed, maintained and repaired in the community



2. To identify the core alliance components that are perceived to help or hinder self-management



3. To identify barriers and facilitators to a) self-management and b) adopting an alliance based approach to supporting self-management

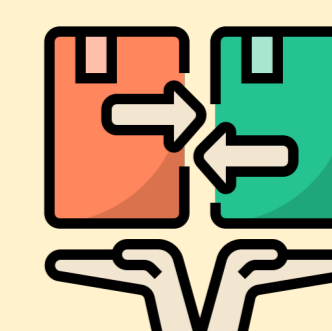
3. How will we answer the research questions?

3



We will interview around 30 stroke survivors, and around 30 healthcare professionals working in community stroke rehab in Greater Manchester.

Data analysis will begin following the first participant interview. Early insights will shape further data collection and emerging ideas explored in subsequent interviews.



The analysis will also look at similarities and differences between the views of healthcare professionals and stroke survivors.



4. Where are we up to?

4



Our Patient, Carer and Public Involvement Group has been invaluable in helping to develop accessible study documentation.



The group has been particularly helpful in navigating complex, often jargon laden, terminology and language to make it more understandable for stroke survivors and healthcare professionals.



We have obtained a favourable ethics decision from the North of Scotland Research Ethics Committee. It is expected that data collection will begin in October, starting with interviewing healthcare professionals.