

# The acceptability of training paraprofessionals to deliver Acceptance and Commitment Therapy (ACT) to stroke survivors - a work-in-progress qualitative study



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## Background

- Mental health issues are common after stroke
- Lack of adequate services to meet needs, with limited access to clinical psychologists.
- This study is part of a process evaluation for the Wellbeing After Stroke study (WATERs) (<https://bit.ly/2WZwl1g>).
- WATERs aims to:
  - develop and test a remote, group ACT intervention
  - train paraprofessionals (Stroke Association staff) to deliver this ACT intervention

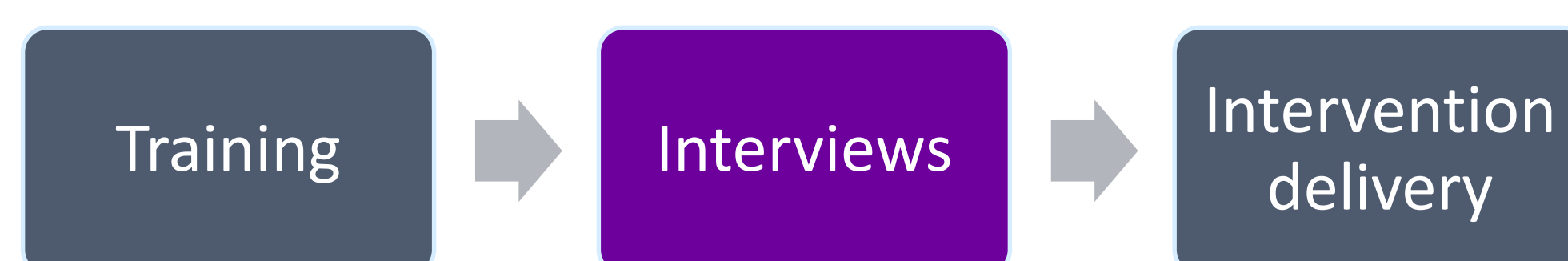
## Study aims

To explore paraprofessional views on:

- 1) the acceptability of the WATERs training
- 2) the prospective acceptability of the ACT intervention and perceived readiness to deliver the intervention

## Methods

- Qualitative individual interview study
- Participants were consenting paraprofessionals from WATERs
- Two paraprofessional roles:
  - Lead (trained counsellors, experienced in stroke)
  - Support (experience in running stroke groups)
- Interviews took place after training and prior to intervention delivery.



- Semi-structured interviews, guided by the Theoretical Framework of Acceptability (TFA)<sup>[1]</sup>. The TFA consists of seven components (see results table).
- Interviews approx. 45 minutes in length, on Zoom.
- Data is being thematically analysed using template analysis<sup>[2]</sup>
- Template analysis allows for *a priori* selection of themes, as well as the exploration of emergent themes.
- TFA components are the *a priori* themes

## Progress to date

- All WATERs paraprofessionals (n=8) recruited
- Interviews completed (July 2021)
- Transcripts returned and data cleaned (August 2021)
- Feedback gathered during interviews resulted in further guidance given to paraprofessionals on:
  - time-management
  - supporting emotional distress in online group sessions
  - negotiating lead and supporting roles

## Results - preliminary findings

### Results may change following formal data analysis.

The following codes are developing in relation to the TFA components:

TFA components	Preliminary codes
<b>Affective attitude</b> (how a person feels about the intervention)	High enjoyment of the training. Positive about the intervention.
<b>Burden</b> (perceived effort in participating)	Big commitment and effort, but a choice. Script and handbook reduces burden. Technology adds burden.
<b>Ethicality</b> (good fit with value system)	ACT and the intervention in line with values.
<b>Intervention coherence</b> (understanding of intervention)	Training and intervention understandable. Dependent on previous experience.
<b>Opportunity costs</b> (what must be given up to engage)	Different dependent on role/circumstances. Juggling priorities seen as part of job role. Impact on personal time for some.
<b>Perceived effectiveness</b> (perception of whether it will achieve purpose)	Paraprofessionals valued training for own well-being. Additional independent preparation needed. Hopeful about effectiveness of intervention
<b>Self-efficacy</b> (confidence in performing required behaviours)	Linked to previous experience and amount of additional time available to prepare. Dependent on personal levels of confidence.

## Future actions and conclusions

- Formal data analysis is underway (to be completed by 12/21)
- Initial findings indicate staff understood and enjoyed the training.
- Possible future improvements to training:
  - Increasing duration
  - Including more practical guidance
  - Differentiating training for lead/support staff
  - Ring-fencing time for independent preparation prior to delivery

## Next steps

- WATERs process evaluation will also include:
  - Further interviews with paraprofessionals and stroke survivors, following ACT intervention
  - Exploration of fidelity and ACT-congruence
- These studies will provide learning for the future development of the WATERs training and intervention

## References

- <sup>[1]</sup>Sekhon, M., Cartwright, M., & Francis, J. J. (2017). <https://doi.org/10.1186/s12913-017-2031-8>  
<sup>[2]</sup>Brooks, J., McCluskey, S., Turley, E., & King, N. (2015). <https://doi.org/10.1080/14780887.2014.955224>

