

Applying the Necessity-Concerns Framework in Rehabilitation: Physical Activity Engagement for People With Long Term Conditions Nicola Kayes, Robin Leaton, Tioke Pryor, Christine Cummins

Background

- Growing evidence for benefits of physical activity for people living with a long term condition^{1,2}
- Low levels of engagement reported^{3,4}
- Increasing body of research exploring strategies to tackle this⁵
- Necessity Concerns Framework well researched in relation to medication adherence but not applied to other health behaviours⁶

Aim

To explore the application of the Necessity-Concerns Framework to physical activity engagement for people living with long term conditions.

Method

- Qualitative Descriptive Methodology⁷
- Secondary analysis
- Directed Content Analysis⁸ informed by operational definitions of key theoretical constructs of the Necessity Concerns Framework

Data sources

- Data was purposefully selected from three primary studies
- Qualitative descriptive studies exploring perceived barriers and facilitators to physical activity engagement for people living with
 - I.Multiple Sclerosis (n=5 transcripts)
 - 2.Stroke (n=5 transcripts)

3.Cancer survivors (n=10 transcripts) Sought diversity in time since diagnosis, gender, ethnicity, clinical course (Multiple Sclerosis only), and type (Cancer only).

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"Exercise will help me to get back to some sort of resemblance of how I used to be before" (45, Female, Cancer)

"I do it [walking] so I do not lose the use of my legs" (53, Female, Multiple Sclerosis)

Symptom Management Preventing further complications Re-establishing a sense of normality Physical & mental health and well-being Social engagement

"I believe it's [exercise] keeping it [cancer] at bay" (67, Male, Cancer)

Conclusions

lings support potential application of the Necessity-Concerns framework. There are some conceptual differences in the application to physical activity engagement when compared to prior work—most notably in the perceived necessity of physical activity for broader health and well-being, such as emotional well-being, social engagement and return to engagement in meaningful activities. • Drawing on this framework to underpin rehabilitation strategies may have practical use for rehabilitation practitioners.

bilitation settings.

References

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Physical Activity Engagement

Necessity Beliefs

Concerns

Safety Risk of harm, injury or exacerbation Fatigue Negative self-image Lack of ability Lack of knowledge

General Beliefs about Physical Activity

• Future research is needed to explore whether this framework has predictive value as well as application to other reha-

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"I can sometimes see people looking at me in the swimming pool cause I will hold on to everything" (41, Female, Multiple Sclerosis)

> "There is this sort of shadow that you carry with you, this fear that you could end up in a worse state than you were the first time. [....] It's what we don't know as stroke victims always, is the limits to which we can go in physical activity" (66, Male, Stroke)

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