Barriers and enablers to behaviour change in clinicians participating and leading research: A qualitative exploration

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Background

AHPs participating in & leading research

Behaviour Changes

Screening for participants

Using new systems

New communication pathways for collaboration

Learning new processes

Writing a journal article

Problem:
How can we best support clinicians to make necessary behaviour changes to undertake research?

What we know:

Several enablers and barriers to general research engagement in Allied Health
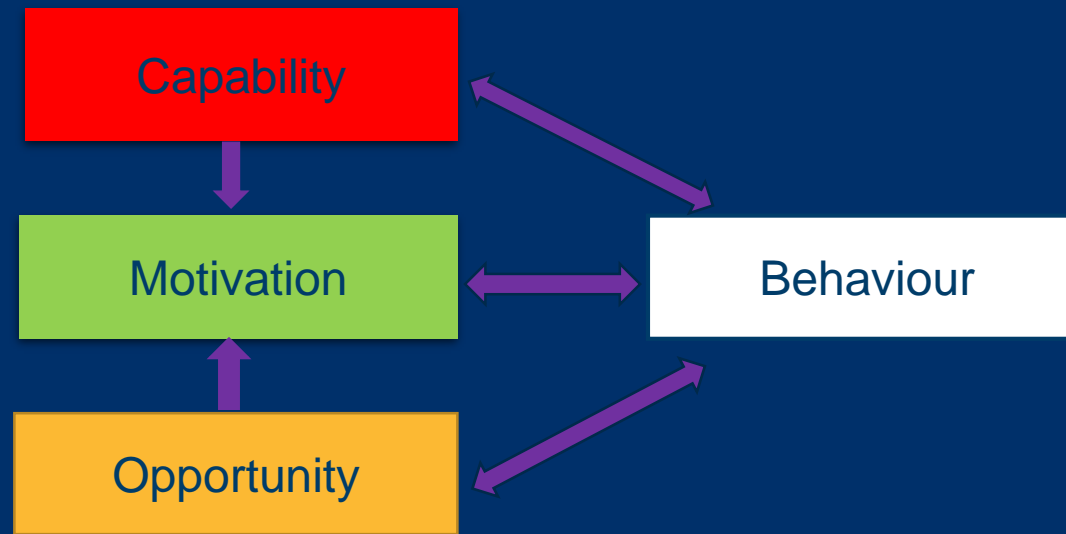(Borkowski et al., 2016)

What we don't know:
How do enablers and barriers *influence* the *behaviour changes* required to participate and lead research?

Behaviour change

The COM-B system: Behaviour occurs as an interaction between three necessary conditions
(Michie et al., 2011)

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- Theoretical Domains Framework (Michie et al., 2005) 14 domains used to further explore influences on Capability, Opportunity & Motivation

- Not yet applied when exploring barriers and enablers to behaviour change in clinicians undertaking research

TDF domain

Capability	Knowledge
	Skills
	Behaviour Regulation
	Memory/Decision Processes
Opportunity	Environmental context/resources
	Social Influences
Motivation	Beliefs about capabilities
	Beliefs about Consequences
	Social Professional Role Identity
	Optimism
	Intentions and Goals
	Emotion
	Reinforcement

Research Question

What are the barriers and enablers to behaviour change in allied health professionals (AHPs) participating and leading research?
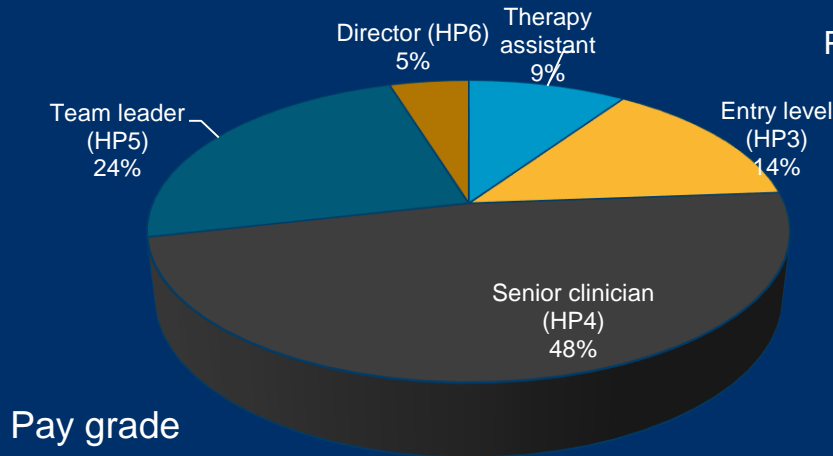
Design & Methods

- Qualitative research design informed by behaviour change theory

- 14 semi-structured individual or group interviews with AHPs employed by Gold Coast Health who had identified as wanting to participate and/or lead research.

- Interview questions asked clinicians barriers and enablers to research engagement across 14 domains of the Theoretical Domains Framework (TDF).
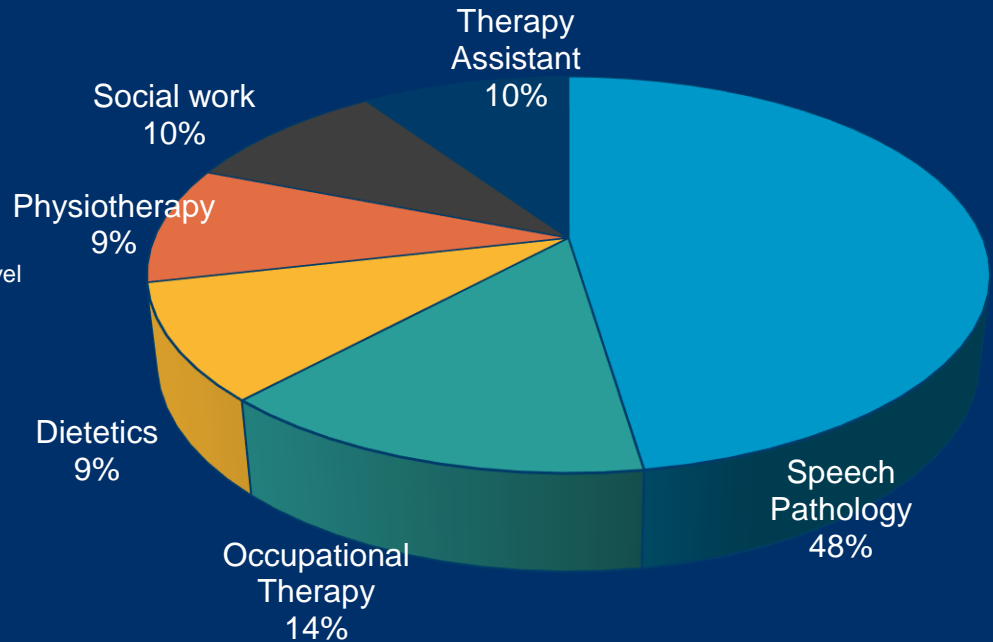
Data analyses

- Barriers and enablers from transcribed interviews were mapped to the TDF using deductive coding in NVivo and inductive coding was used to form subcategories within these domains.
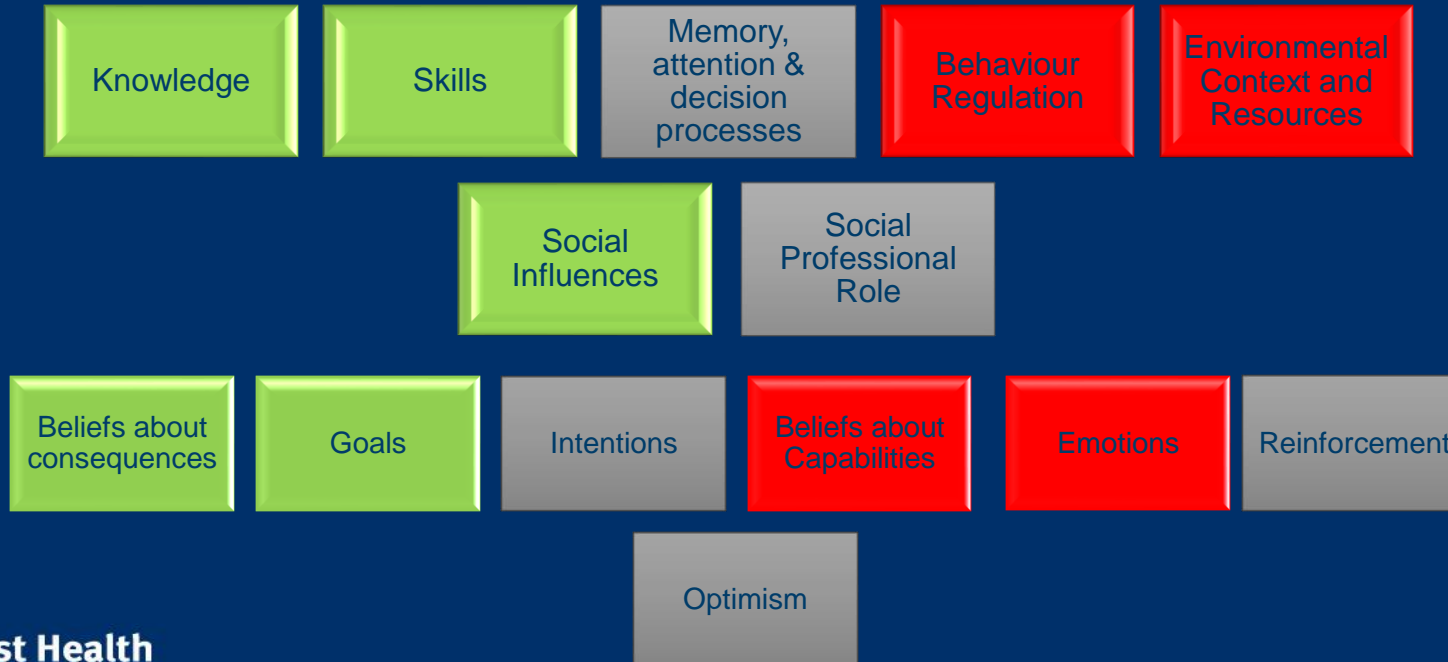
Results: Participants

- 21 participants

Pay grade

- Director (HP6) 5%
- Therapy assistant 9%
- Team leader (HP5) 24%
- Entry level (HP3) 14%
- Senior clinician (HP4) 48%

Professional Background

- Therapy Assistant 10%
- Social work 10%
- Physiotherapy 9%
- Dietetics 9%
- Occupational Therapy 14%
- Speech Pathology 48%

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Results:

Twice as many mentions of enablers reported compared to barriers

Knowledge	Skills	Memory, attention & decision processes	Behaviour Regulation	Environmental Context and Resources

Social Influences	Social Professional Role

Beliefs about consequences	Goals	Intentions	Beliefs about Capabilities	Emotions	Reinforcement

Optimism

Barriers- Environmental Context Resources
(104 mentions)

- Time or funding pressures
- Coordinating activity with staff or service changes
- Competing clinical or research priorities

> We've both had very busy caseloads which makes it difficult to…fit much in on non-research days. I think we're both well aware that if we need more time it won't come during work time, it will come at home. (P04)

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Barriers- Emotions
(40 mentions)

- Feeling overwhelmed or nervous and intimidated
- Fear of getting things wrong

..fear of failing, fear of … public humiliation…I think is it like the imposter's syndrome, you know where people are going to all find out that you're not actually legit [laughs]. (P11)

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Enablers

- ## Social influences (156 mentions)
  - Positive influences and support within team
  - Line manager and organisational influence
  - Other staff support and value research
  - Access to expert guidance (e.g., research fellow)

I think when people do research all the time, you're around those people, it starts to feel like more like something you should be doing and it feels more natural…
(P11)

I'm really lucky that because my manager is very supportive of our team undertaking research, I don't really think having time offline or any of that sort of thing would be as much of an issue (P15)

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Enablers- Beliefs about Consequences

(135 mentions)

Belief that research will:

- Inform practice & patient care
- Enhance knowledge, skills, attitudes in research and professionally as clinician and supporting others
- Promote visibility/reputation within organisation

I know that it's going to have potential impacts on how the service is going to be delivered and how to make clinical practice better - more efficient, more coordinated. (P04)

..it will just continue to…improve our profile. Because we are a really small profession … but we're starting to get a bit of traction (P15)

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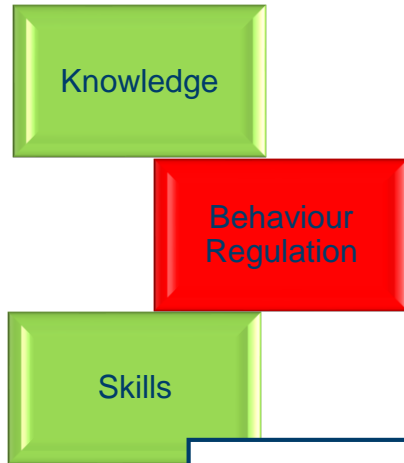Queensland Government

Enablers- Skills
(76 mentions)

- Having previous skills, training or experience
- Learning through doing
- Having external support or right team
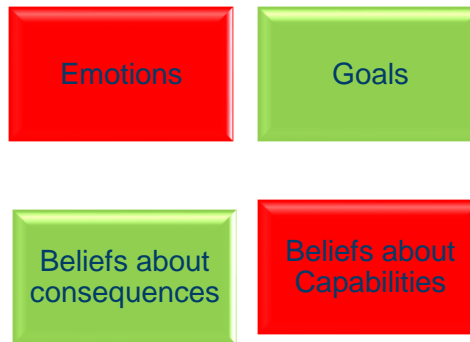- Step by step approach

But each time we meet and work a little bit closer towards it and sort of break it down a little bit more, it's beginning to feel a lot less overwhelming. (P04)

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Discussion

Capability
- Knowledge
- Behaviour Regulation
- Skills

Motivation
- Emotions
- Goals
- Beliefs about consequences
- Beliefs about Capabilities

Opportunity
- Environmental Context and Resources
- Social Influences

Most research capacity building interventions focus on capability and opportunity rather than **motivation**
(Cooke et al., 2018)

change

Implications: How we can influence behaviour change of clinicians participating or leading research?

Motivation	• Acknowledge sense of fear and overwhelm is normal response • Support clinician's emotional responses by structuring activities and expectations using a step by step approach and valuing and recognizing effort • Reinforce beliefs research will inform practice & increase skills and team profile
Opportunity	• Support clinicians doing research in proximity to other clinician-researchers • Promote networking with other clinicians doing research • Advocate for financial and physical resources for ongoing participation and completion of research activities • Ensure access to research mentors

Take home messages

- Use of theory-informed frameworks such as the COM-B system and TDF are valuable in helping to understand and address barriers to research participation in clinicians

- Utilise social influences to empower clinicians and role-model behaviours

- Consider impact of emotional responses on research participation and how these may be mitigated through "step by step guidance" and "learning through doing"

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Implications: How we can influence behaviour change in clinicians participating and leading research?

Capability

- Draw upon previous skills
- Learn through doing
- Access external support with the right team
- Step by step engagement
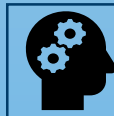
Opportunity

- undertake research in proximity/ and or network with other researchers to role model behaviours and offer peer support
- Provide financial and physical resources where able
- Ensure access to research mentors

Motivation

- Reinforce beliefs that research will inform practice, & increase skills and team profile
- Reduce sense of overwhelm and fear of failure through providing supportive guidance,

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