

Identification of Barriers and Facilitators towards Cerebral Palsy Patients' Rehabilitation Accessibility: A Step-wise Qualitative Feasibility Analysis

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ABSTRACT

Introduction: Perceived barriers and facilitators represent the individual's subjective perspective that limit or support adherence to physiotherapy intervention. Individuals with chronic disabilities like Cerebral Palsy (CP) often necessitate consistent physiotherapy care. But it has been noticed that many of these patients are non-adherent to a sustained rehabilitation programme. There is insufficient research on how patients' lived experiences and views affect their adherence to long-term care.

Aim: The primary aim was to identify perceived barriers and enablers to getting physiotherapy care among CP patients. The secondary aim was to create patient-centred rehabilitation techniques.

Materials and Methods: Adults aged 18–36 years with clinically diagnosed CP (GMFCS I, II), either non-adherent to physiotherapy or had never accessed physiotherapy services, were included in the study. An in-depth semi-structured interview was conducted using open-ended questions by the principal investigator. All interviews were audio-recorded with participants' consent and transcribed verbatim for analysis. Data were analysed using Braun and Clarke's

thematic analysis framework, involving systematic coding and theme development. Specific perceived barriers and facilitators were analysed using both an inductive and deductive approach.

Results: Two female participants (mean±SD: 25±2 years) were interviewed (mean±SD: 11±5 min). Qualitative analysis revealed that pain, low endurance, and poor energy expenditure serve as key biological barriers. Psychologically, poor motivation of caregivers, anxiety, poor understanding of long-term benefits, and patients' dependency contributed to discontinuation. Facilitators include therapist support and vocational participation. However, Financial constraints, transportation difficulties, social stigma, cultural beliefs, poor transition from paediatric to adult care, and inadequate policy implementation act as barriers, while supportive public policies facilitated sustained participation

Conclusion: The findings may provide a focused framework for the most frequently encountered barriers and facilitators by CP patients. This might help in developing a more appropriate rehabilitation strategy.

Keywords: Permanent disorder, Physical disability, Young adults.

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