Supporting patients in using their personal strengths in chronic illness management participatory design approach

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Research Project: Incorporating Patient-Identified Personal Strengths into patient care

- Collaboration between Case Western Reserve University and SPS
- Financed by Patient-Centered Outcomes Research Institute, USA
- Project team (Norway)
 - Una Stenberg, Project Manager
 - Ólöf B. Kristjánsdóttir, Researcher
 - Jelena Mirkovic, Researcher
 - Tonje Krogseth, Patient representative
 - Cornelia Ruland, PI
- Collaborators
 - Senter for sykelig overvekt, OUS, Avdeling for smertebehandling, OUS, Enhet for lungerehabilitering, OUS, Sunnaas sykehus, poliklinikk (på Aker), Oslo kommune, Helseetaten, Samhandlingsarena Aker, OUS





Personal strengths

The characteristics people use to achieve

well-being

- Meaning
- Engagement
- Interpersonal relationships
- Communityenvironment
- Optimism
- Hope

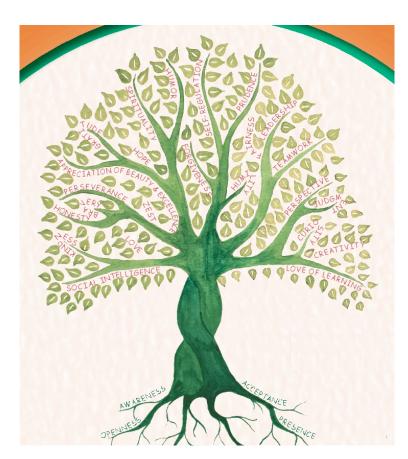






Background

 Why putting focusing on personal strengths?



Niemiec, 2013, Mindfulness and Character Strengths A Practical Guide to Flourishing





Project goals

- (1) Identify patient-identified personal strengths relevant to chronic illness management
- 2 Develop a strength-focused Patient Assessment Tool
- (3) Identify best practices for incorporating patients' personal values and strengths in collaborative care process
- 4 In a series of experiments in practice test and optimize the proposed solution





Research design

- Participatory and user-centered design
- People with different chronic conditions
 - obesity
 - chronic pain
 - pulmonary disease
- Various participatory methods
- Development through different phases





• Goal:

Identify the strengths of people with a chronic illness

• Methods:

- 15 Interviews and 7 Focus groups (39 patients)
- Both broad and open-ended and more specific questions





- Preliminary results:
 - Three main themes:
 - (1) Taking care of myself
 - (2) Knowledge and insight into my own condition
 - (3) Focus on what is good in my life





• Goals:

- Identify meaningful strengths categories
- Exploring how technology could be used to facilitate integration of personal strengths in patient-provider collaboration

Methods:

- 5 Workshops (18 participants)
- Card sorting
- Group interviews



- Results:
 - 6 main groups of strengths categories
 - 3 topics of discussion:
 - (1) Potential contexts of use (when, with who, type of device)
 - (2) User requirements (usability, functionality, barriers)
 - (3) Usefulness of the strength-based tool





• Goals:

- Selecting final category names
- Developing low-fidelity paper prototypes

Methods:

- 6 Workshops (6 patients and
- 2 patient representatives)
- Prototyping
- Prioritizing category names



• Results:

Final categories of strengths

Category	Example of strengths items
Relations and support	- I can ask my family for help - I receive help from competent health care providers
My sources of energy	- I have a hobby I am passionate about - I spend time on advancing my skills, I enjoy the feeling of managing my challenges
Knowledge about my health	- I have knowledge and insights into my condition that make me feel more secure - I have the resources and knowledge to manage my medications
Activity and rest	- I do relaxation exercises - I have a routine for exercising
Emotions and self-awareness	I do not accept being judged or talked down toI have learned to differentiate between sensible thinking and feelings
Positive thoughts and disposition	I try to look at things as challenges, not as problemsI do not perceive myself as sick even if I am in pain





Conclusion and final remarks

- Important insights into various factors
 - Users requirements
 - Values
 - Contexts of use
- New potentials of technology
 - More efficient patient-provider communication
 - Self-management interventions





Next steps

- Phase 4: Workshops with clinicians
- Phase 5: Development of high fidelity prototypes and iterative formative evaluation







Thank you for your attention ©

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