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EXPLORING THE FEASIBILITY OF THE ASTHMA SELF-MANAGEMENT BOOKLET TO EMPOWER ADULTS WITH ASTHMA AMONG FAMILY MEDICINE PHYSICIANS

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INTRODUCTION

The development of a user-centered healthcare intervention tool would require feasibility testing to evaluate the acceptability, usability, strengths, and weaknesses of the tool. Feasibility testing evaluates the intervention's potential for success; therefore, exploring the user's experience, acceptability, opinion, and motivation is an important factor in the evaluation process [1]. To ensure that the Asthma Self-Management Booklet© is acceptable and useful to physicians in managing adults with asthma, there is a need to systematically evaluate the feasibility of these tools in supporting and empowering self-management of their patient's asthma symptoms [2]. Therefore, the objectives of this project are to explore the feasibility of the Asthma Self-Management Booklet© in empowering patients in asthma self-management and to refine the booklet based on the feasibility assessment findings. A qualitative research design using focus group methodology will be employed to explore the acceptability, usability, strengths, and weaknesses of the Asthma Self-Management Booklet©.

MATERIAL AND METHOD

A purposive sampling strategy is used to generate a heterogeneous group that captures the perspectives of Primary Care Physicians (PCP) with varied experiences. A sample size of 2 focus group discussions (FGD) consisting of 5 participants in each group is estimated to achieve saturation of themes and to generate sufficient feedback to refine the booklet [3]. Focus group sessions will employ semi-structured interview guides based on the Knowledge to Action framework [4] developed by team members with knowledge translation and qualitative research expertise [5]. The face and content validity of the Asthma Self-Management Booklet© will be assessed by team members and will be refined as needed. All focus group interviews are digitally audio-recorded and field notes are kept. The responses from the FGD were transcribed verbatim, coded and analyzed thematically. Atlas.ti version 8 was used for data management.

RESULTS AND DISCUSSION

Ten family medicine physicians participated in two FGDs between December 2018 to April 2019. Most were females (n=8, 80%) and postgraduate trainees (n=8, 80%). Three themes were found: user experience; perceived appropriateness and intent to continue use. For user experience, participants expressed convenience as the booklet facilitates assessment of symptom control using asthma control test (ACT) scoring and asthma diary. However, the book is under-utilized by patients due to a lack of awareness of self-monitoring. Participants found the booklet useful for monitoring symptoms, and an essential and relevant resource for asthma. However, lack of training affects its usage among physicians. Participants expressed that having a supportive system in the clinics and the involvement of nurses would help in the continued usage of the booklet.

CONCLUSION

The Asthma Self-Management Booklet is acceptable amongst family medicine physicians. However, the uptake and its continued usage can be improved via patient awareness, physician training and support from the nurses.

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