

FUNDED BY





...IN HEALTH POLICY (UK)

1999

Chief medical officer committed to a SM programme to address needs of people with disability **2001**

Expert Patient Programme based on the CDSMP (Lorig)

2014

Five year forward view
Empowering patients
Self-management courses
Independent peer-to-peer
communities

The NHS Plan

The NHS as a resource that people will use to help themselves

NHS Direct

Supporting self care can improve health, quality of life

NHS Long Term Plan
Empowerment
Supported self-management
Personalised care

2000

2005

2019

Self-management training for people with chronic disease: An exploratory study

C. C. Wright, J. H. Barlow*, A. P. Turner and G. V. Bancroft Interdisciplinary Research Centre in Health, School of Health and Social Sciences, Coventry University, UK

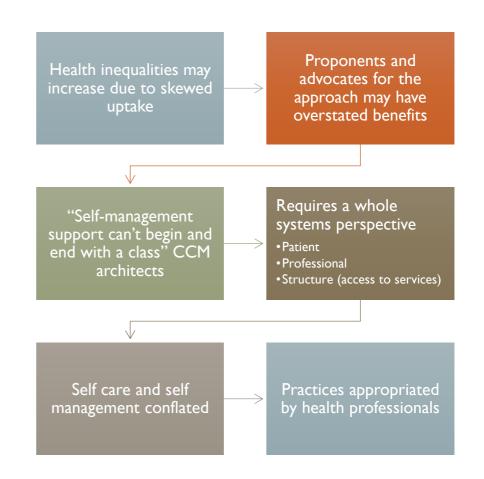
Lay-led self-management in chronic illness: a review of the evidence

JENNIFER NEWBOULD, DAVID TAYLOR and MICHAEL BURY

Department of Practice and Policy, The School of Pharmacy, University of London, 29–39 Brunswick Square, London WC1N 1AX, UK

- No or moderate changes UK vs more promising US findings
- Difficulties recruiting
- Low numbers men
- Low numbers non-English speakers
- Literacy levels important
- Underprivileged less likely to take part
- Long term benefits limited

... CRITICS



SELF MANAGEMENT OF CHRONIC PAIN

pain self management



Articles

About 2,870,000 results (0.18 sec)

Any time

Since 2020 Since 2019

Since 2016

Custom range...

Sort by relevance

Sort by date

✓ include patents

include citations

Create alert

Toward the development of a motivational model of pain self-management

MP Jensen, WR Nielson, RD Kerns - The Journal of Pain, 2003 - Elsevier

Adaptive **management** of chronic **pain** depends to a large degree on how patients choose to cope with **pain** and its impact. Consequently, patient motivation is an important factor in determining how well patients learn to manage **pain**. However, the role of patient motivation ...

☆ 99 Cited by 240 Related articles All 11 versions

Optimized antidepressant therapy and **pain self-management** in primary care patients with depression and musculoskeletal **pain**: a randomized controlled trial

K Kroenke, MJ Bair, TM Damush, J Wu, S Hoke... - Jama, 2009 - jamanetwork.com Context **Pain** and depression are the most common physical and psychological symptoms in primary care, respectively. Moreover, they co-occur 30% to 50% of the time and have adverse effects on quality of life, disability, and health care costs. Objective To determine if a ...

☆ 55 Cited by 424 Related articles All 10 versions

A randomized controlled evaluation of an online chronic **pain self management** program

LS Ruehlman, P Karoly, C Enders - Pain, 2012 - Elsevier

Internet-based educational and therapeutic programs (e-health applications) are becoming increasingly popular for a variety of psychological and physical disorders. We tested the efficacy of an online Chronic **Pain Management** Program, a comprehensive, fully **self** ...

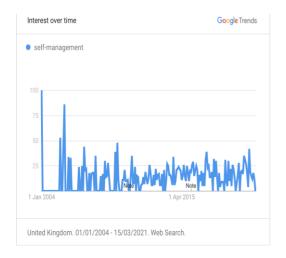
☆ ワワ Cited by 123 Related articles All 15 versions

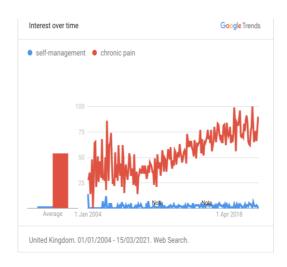
Barriers and facilitators to chronic **pain self-management**: a qualitative study of primary care patients with comorbid musculoskeletal **pain** and depression

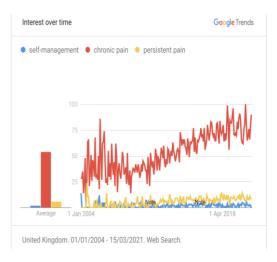
 $\underline{\mathsf{MJ}}$ Bair, $\underline{\mathsf{MS}}$ Matthias, KA Nyland, MA Huffman... - Pain ..., 2009 - academic.oup.com

Objective. To identify barriers and facilitators to **self-management** of chronic musculoskeletal **pain** among patients with comorbid **pain** and depression. Design. A qualitative study using focus group methodology. Setting. Veteran Affairs (VA) and University primary care clinics ...

☆ 💯 Cited by 204 Related articles All 10 versions 🕸







TRENDS

INTERPRETIVE QUALITATIVE CASE STUDY

Particular

- Insider outsider
- Deep insight
- Complexity
- Relational
- Material objects
- Technology
- · Actors and networks

Mapping services - location, comparison

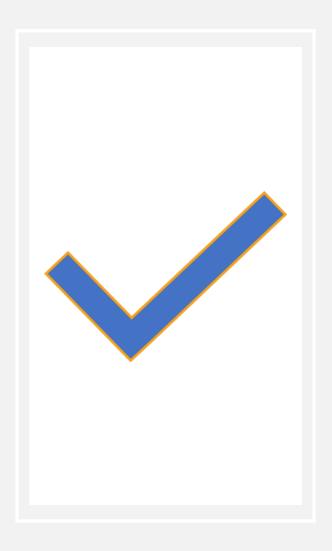
- NHS hospitals
- Private hospitals
- General Practices
- Voluntary sector
- NHS contracted private
- Community venues
- Referral & access

Hermeneutic literature review - discourse analysis

- SM of chronic pain understood/portrayed in policy and research literature by different actors?
- What form of knowledge supports these assumptions?
- Metaphors, buzzwords, narratives and storylines

SELF-MANAGEMENT IS...

- A desirable behaviour
- An *intervention* in form of e.g. Pain Programmes
- The intended **outcome** of other (complex) interventions
- · A practice done by people with pain
- A cost containment measure
- NOT biomedicine
- Widely accepted as important, valid and necessary
- Not well described
- Assumptions of a consensus view
- "self-evident" "received wisdom" "taken for granted"



RESEARCH PAPER

Self-managing versus self-management: reinvigorating the socio-political dimensions of self-management

ELIZABETH KENDALL, CAROLYN EHRLICH, NAOMI SUNDERLAND, HEIDI MUENCHBERGER and CAROLE RUSHTON

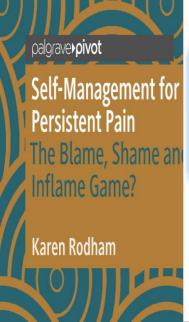
- Early SM: Mutual aid, social embeddedness and citizen emancipation from dominant socio-political systems. Then in 80's and 90s cost containment and self monitoring
- Self-Management as cost-cutting mechanism
- Self-management as the Domain of Health Professional Experts
- Self-management as Emancipation

"I mean pain is very scary and I think doctors find pain scary because they can't do anything about it a lot of the time. It faces us with our inadequacy, unless you actually, you know, stop and really think about it." (GP)



"There is no story that is not true, [...]
The world has no end, and what is good
among one people is an abomination with
others."

— Chinua Achebe, Things Fall Apart



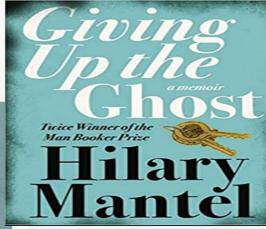


THE BODY IN PAIN



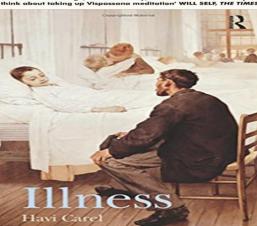
The Making and Unmaking of the Worl

ELAINE SCARRY





A Sceptic's Search for Health and Healing



KEITH

WAILOO



From Prayer to **Painkillers**

JOANNA BOURKE

PAIN AS HUMAN EXPERIENCE



MARY-JO DELVECCHIO GOOD

PAUL E. BRODWIN

BYRON J. GOOD

ARTHUR KLEINMAN

Encountering Pain

Hearing, seeing, speaking



Edited by Deborah Padfield and Joanna M. Zakrzewska

*UCLPRESS

ALL THE QUESTIONS...

- Does this default, unchallenged view of self-management in pain management prevent other approaches from being explored, discussed, practiced?
- Does the associated tendency of assuming personal responsibility and individual choice detract from wider discourses on cultural and social systems in pain management?
- Does this dominant discourse serve to offer up legitimacy to practitioners who do not deviate from the state sponsored narrative of self-management
- And in doing so
- Delegitimise practitioners who have adopted different ways of thinking and doing self-management
- And does this disenfranchise people who choose to 'self-manage' in different ways?







With thanks to:

Associate Professor Sara Shaw (Oxford)
Professor Deborah Swinglehurst (QMUL)
Professor Alan Silman (Oxford)

