

Preferences and Barriers of Healthcare Providers in Cancer Clinical Care Practices: Exercise Counseling and Referral



Kirsten Suderman
BSc Kinesiology, PhD Candidate

Background

Know/Do Gap: Literature

- ▷ Known benefit of exercise for cancer survivors¹

Lack of exercise reported by cancer survivors^{2,3}

- ▷ **20%** of cancer survivors had received education importance of exercise⁴
- ▷ Identified lack of exercise counseling and referral^{5,6}



Alberta Cancer Exercise (ACE) 5-Year Hybrid Effective-Implementation Study

- ▷ N = 1000 patients, all tumor types
- ▷ Standardized, cancer-specific, community-based exercise
- ▷ 12-week, bi-weekly
- ▷ Improved health and physical fitness outcomes for survivors



Exercise into cancer care continuum

Purpose

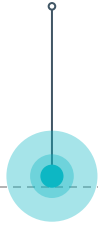
To determine Healthcare Provider:



- ▶ Preferences, barriers and facilitators towards exercise counseling and referral of cancer survivors
- ▶ ‘Actionable’ Implementation strategies

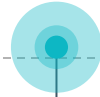
Methodology

Electronic Questionnaire



Aug 2017 - Oct 2017

N = 47



**Data
Analysis**

Focus Group: Probe

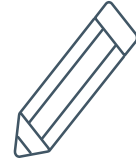


May 2018

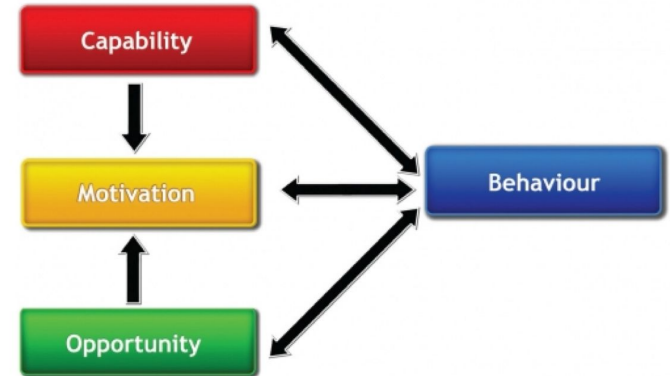
N = 7



**Data
Analysis**



- ▶ Question development based on the **Theoretical Domains Framework**⁷
- ▶ Data Analysis: mapping to the **Capability, Opportunity, Motivation Behavior Change (COM-B) Model**⁷



Exercise Counseling Practices

Do you see exercise counseling of patients with cancer as a component of care that fits within your professional role/ scope of practice?

- ☐ Not at all
- ☐ A little bit
- ☐ Somewhat
- ☐ Quite a bit
- ☐ Very much

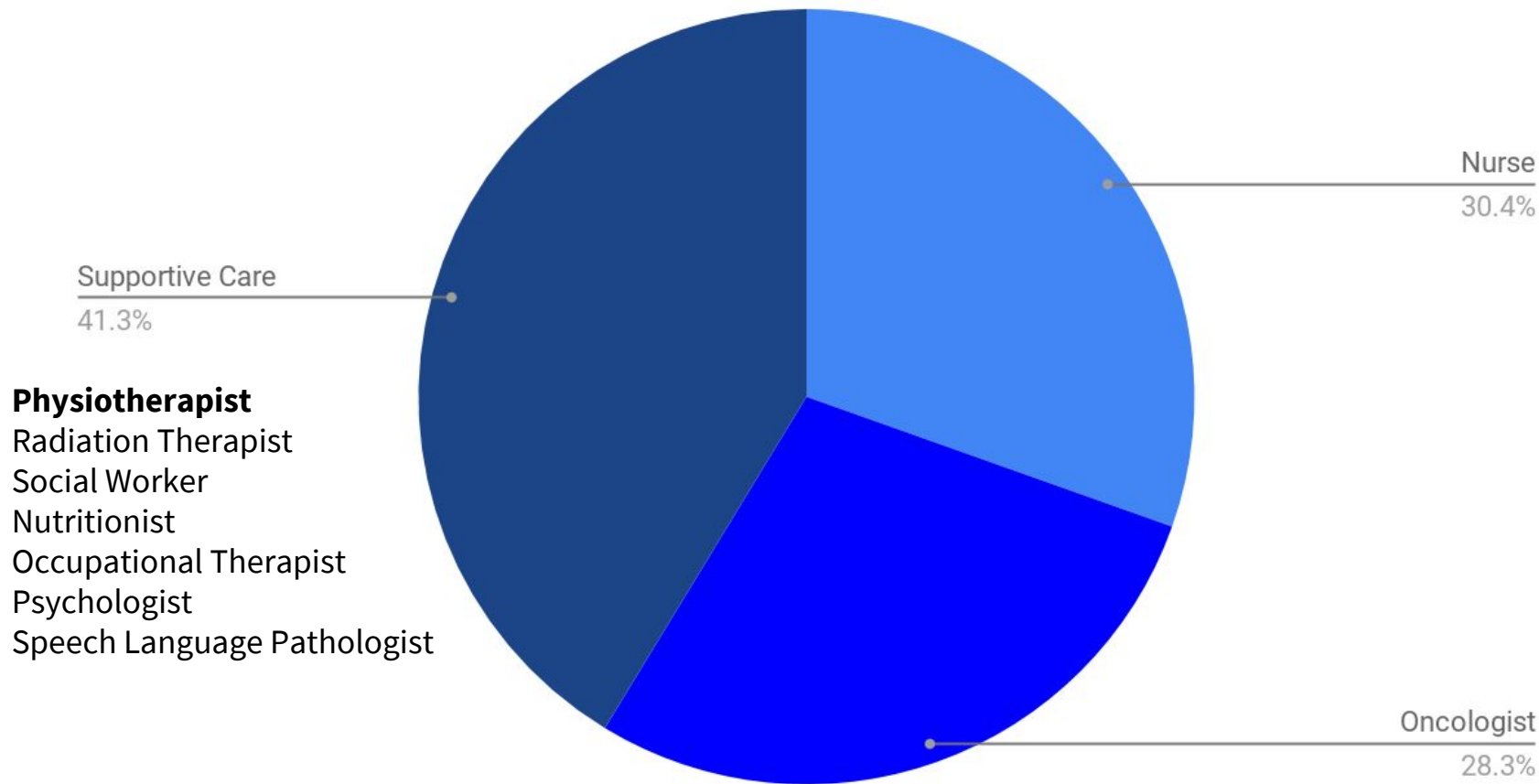
To the best of your knowledge, who would you consider responsible for counseling patients regarding exercise?

Other than yourself, who else you see responsible for counseling patients regarding exercise?

Is exercise counseling for patients with cancer something you consciously do in the clinic?

- ☐ Never
- ☐ Rarely (once per month or less)
- ☐ Occasionally (once per week OR if asked by patient)
- ☐ Often (two to four times per week)
- ☐ Very often (daily)

Healthcare Provider Disciplines N = 47



Results



72%
HCPs
“not at all” to
“somewhat”
confident
counseling in
exercise

**17% HCPs
daily
exercise
counseling**

98%
exercise
counseling
should occur
at multiple
time points

Results

Barriers:

- ▷ Time in-clinic
- ▷ Lack of knowledge regarding appropriate exercise

Preferences/ Facilitator:

- ▷ ‘Interdisciplinary team’

Actionable Implementation Strategies: Capabilities/ Opportunities

Evidence

**Exercise Screening/
In-Clinic Patient Education**

**Community
Programming**

Conclusion

- ▷ Facilitate efficient and *appropriate* exercise counseling referrals (PT vs. community exercise)
- ▷ HCP perspective to guide future strategies

Improve patient care & access to exercise



References

1. Cormie, P., E.M. Zopf, X. Zhang, and K.H. Schmitz, (2017). The Impact of Exercise on Cancer Mortality, Recurrence, and Treatment-Related Adverse Effects. *Epidemiol Rev*, 39(1), 71-92
2. Rock, C.L., C. Doyle, W. Demark-Wahnefried, et al., (2012). Nutrition and physical activity guidelines for cancer survivors. *CA: a cancer journal for clinicians*, 62(4), 243-74.
3. Boyle, T., Vallance, J. K., Ransom, E. K., & Lynch, B. M. (2016). How sedentary and physically active are breast cancer survivors, and which population subgroups have higher or lower levels of these behaviors? *Supportive Care in Cancer*, 24(5), 2181–2190.
4. Fernandez S, Franklin J, Amlani N, DeMilleVille C, Lawson D, Smith J. Physical activity and cancer: A cross-sectional study on the barriers and facilitators to exercise during cancer treatment. *Can Oncol Nurs J*. 2015;25(1):37-48. doi:10.5737/236880762513742.
5. Smith-Turchyn J, Richardson J, Tozer R, McNeely M, Thabane L. Physical Activity and Breast Cancer: A Qualitative Study on the Barriers to and Facilitators of Exercise Promotion from the Perspective of Health Care Professionals. *Physiother Canada*. 2016;68(4):383-390. doi:10.3138/ptc.2015-84.
6. Courneya KS, Jones LW. (2002). Exercise Discussions During Cancer Treatment Consultations. *Cancer Practice*. 10(2), 66-74.
7. Michie, S., Atkins, L., & West, R. (2014). *The Behaviour Change Wheel Book - A Guide To Designing Interventions*. Great Britain: Silverback Publishing.

Thank you!

Questions?

Kirsten.suderman@ualberta.ca

<https://www.albertacancerexercise.com/>



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