

STUDY OF THE IDENTITY CHANGES OF A GROUP OF PHYSIOTHERAPIST WHO PRACTISE FASCIATHERAPY

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Introduction and objectives

This doctoral research investigates the existence of identity changes of French physiotherapists who practise Fasciatherapy (Danis Bois Method) – a manual therapy that is taught in the context of continued professional development. Quantitative research was conducted amongst the largest possible population of practitioners who had completed the training, with a view to:

- report the presence of impacts and changes resulting from the practice of this approach
- show the existence of different identity profiles (three profiles being hypothesized : physiotherapist, physio-fasciatherapist, fasciatherapist)

Material and method

We used a self-administered customised questionnaire consisting of 80 questions querying the 5 dimensions that concern the research question : professional characteristics, professional identity features, Fasciatherapy practice method, changes occurring in the professional practice and impacts on professional and private life (Figure 1). The questionnaire was forwarded to a population of 446 physiotherapists trained in Fasciatherapy (DBM) (Empirical sampling using rational choice).

Data analysis was done using the Modalisa software. An in-depth descriptive analysis revealed the diversity of the impacts and changes that the respondents associate to their practice of Fasciatherapy. We carried out a multivariate analysis to study the existence of varying identity profiles.

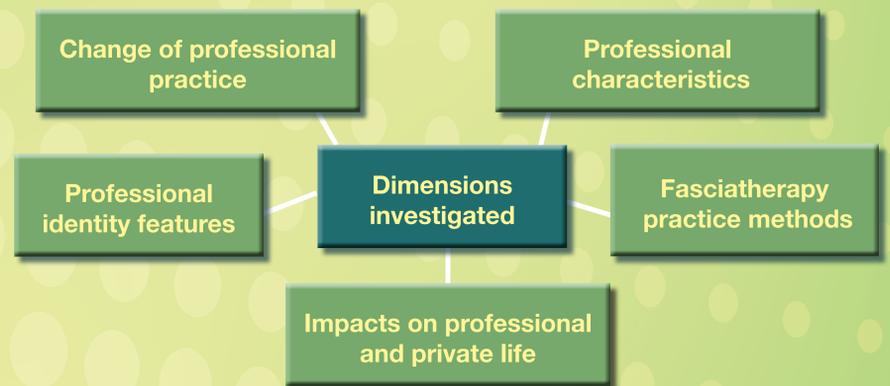


Figure 1 : Dimensions investigated by the research questionnaire

Results

238 questionnaires were completed (ie 53% of the population surveyed).

General characteristics of the population

- **Population profile** : mainly female (65%), between 30 and 44 years old (44%), self-employed (92.4%), registered with the social security (62.6%), using mostly manual therapy techniques (70.2% having a speciality in that field). They have experience in the practice of physiotherapy (20 years, +/-11) and Fasciatherapy (10 years, +/-8);
- **Practice of Fasciatherapy** : 63% of the respondents devote most or all of their physiotherapy activity to the practice of Fasciatherapy, 50.4% practise Fasciatherapy outside of the physiotherapy session, 79% have sessions longer than 30mins and 73.1% practise Fasciatherapy exclusively (without resorting to other techniques).

Main impacts and changes made to be able to practise Fasciatherapy

- 45% of the respondents have started their own practice
- 75.6% see their patient base change
- 85.8% have changed how they approach treatment for their patients (more holistic and educative)
- 54.6% have broadened their patient intake (chronic conditions)
- 91.6% include Fasciatherapy in the definition of their professional identity (physio-fasciatherapist or fasciatherapist).

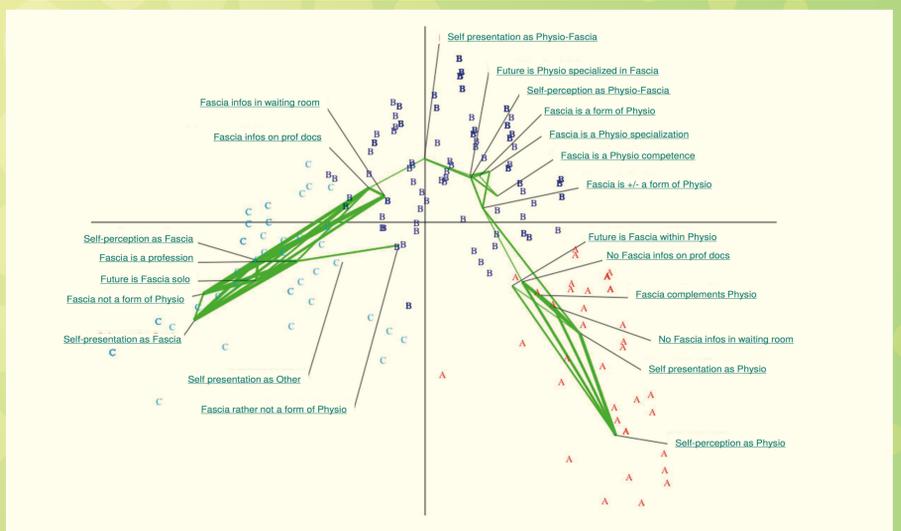
Identity profiles revealed

Figure 2 illustrates the results of a Correspondence Factor Analysis (CFA), followed by the k-means method on 7 identity variables (parameters of perceived identity, presented identity, projected identity and displayed identity)

In view of the distribution of the modalities across the two factors of the CFA (axis 1 horizontal and axis 2 vertical) and of the statistical strength that opposes them to one another, the typology of the individuals that emerges from the k-means method seems to fit 3 identity profiles :

- Type A : Physiotherapist profile (42 respondents, ie 17.6% of the sample)
- Type B : Physio-fasciatherapist profile (132 respondents, ie 55.5% of the sample)
- Type C : Fasciatherapist profile (64 respondents, ie 26.9 % of the sample)

Figure 2: Correspondence factor analysis and application of the k-means method from which three types of practitioners appear (A = Physiotherapists; B = Physio-fasciatherapists; C = Fasciatherapists)



Discussion

These results confirm that our sample is well adapted to provide answers to our research question, particularly as the surveyed population is experienced in physiotherapy and in Fasciatherapy.

They allow us to clarify some of the specific characteristics of our population:

- With regards to the peer physiotherapy population in France, it includes more women, exclusively self-employed, aged between 30 and 44, who are experts in the field of manual therapies.
- With regards to their practice of Fasciatherapy, they devote to it a large part of their physiotherapy activity, generally exclusively, in part outside of the physiotherapy session and of the regulated consultation time.

They also show that practising Fasciatherapy has an impact on their professional practice (practice setting and mode of operation – exclusive and individualised) and identity features.

The initial hypothesis that three distinct identity profiles exist (physiotherapists, physio-fasciatherapists and fasciatherapists) is confirmed. The k-means method shows that a significant proportion of the practitioners combine the identities of physiotherapist and fasciatherapist, and that few of them remain physiotherapists. Further analyses need to be carried out to establish how these profiles are defined with regards to the statutory, professional and practical characteristics of Fasciatherapy revealed by the descriptive analysis.