

# “None of Us Are Lying”: An Interpretive Description of the Journey to Access Quality Rehabilitation by Individuals Living with Long COVID



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## Introduction

Little is known about the experiences of individuals living with Long COVID with regards to access to healthcare services.

## Objective

To better understand the need for, access to, and quality of Long COVID rehabilitation services in Alberta, Canada.

## Methods

**Interpretive Description:** A practice-oriented qualitative approach partly aimed at informed clinical decisions



- One-on-one qualitative interviews lasting ~45-60 min
- Conducted via Zoom or by phone
- Semi-structured interview guide
- Inductive and iterative analytic approach
- Used Braun and Clarke’s reflexive thematic analysis
- Interview synopses facilitated team analysis

## Results

### THEMES

**Theme 1: The Burden of Searching for Guidance to Address Challenges with Functioning and Disability**

- Impact of physical symptoms on functioning triggered the search
- Lack of clarity puts the onus on the patient (to find services)
- Flying solo – A trial and error process at their own expense

**Theme 2: Supportive Relationships Promote Engagement in Rehabilitation**

- Patient-provider relationships were pivotal – validating experiences was essential
- Integrating peer support into rehabilitation

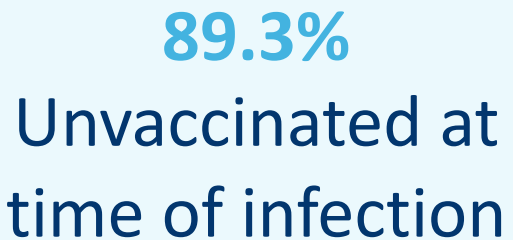
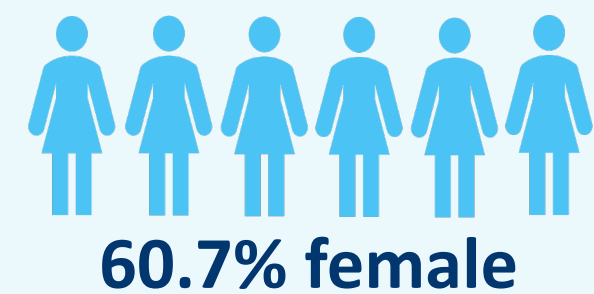
**Theme 3: Conditions for Participation in Safe Rehabilitation**

- Flexible care delivery
- Ability to self-monitor symptoms during and after rehabilitation

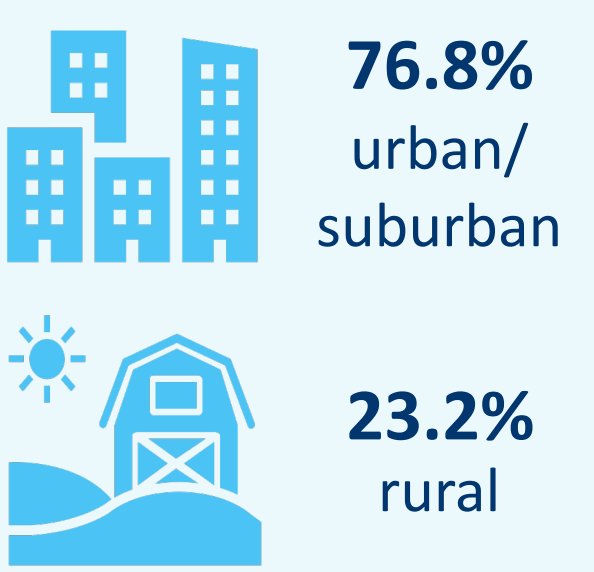
**Theme 4: Looking Forward: Provision of Appropriate Interventions at the Right Time**

- Early education on pacing, rest, and energy management
- Coordinated care that can address multiple symptoms
- Communication of local information about safe rehabilitation

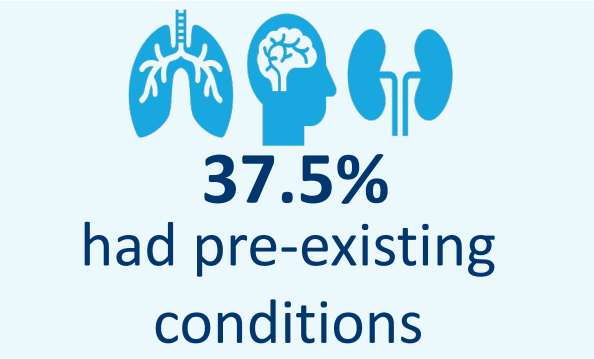
## DEMOGRAPHICS



|           |           |
|-----------|-----------|
| 12 WAVE 1 | 33 WAVE 2 |
| 10 WAVE 3 | 1 WAVE 4  |



| MIN AGE  | MEAN AGE    | MAX AGE  |
|----------|-------------|----------|
| 20 years | 49.29 years | 74 years |



## Practical Implications and Conclusions

- Educate providers** on Long COVID services, referral pathways, self-management resources, and emerging evidence
- Encourage providers to listen, reassure, and validate** patients’ experiences and support development of local peer support networks
- Develop accessible multidisciplinary clinics** in urban and rural areas
- Offer psychological resources** to help alleviate the distress associated with having a chronic illness
- Provide clear and simple information** about the importance of pacing and energy or activity management earlier
- Ensure flexibility** in appointment scheduling and delivery format (i.e., in-person versus virtual)
- Exercise caution when prescribing exercise** or conducting physical testing to avoid post-exertional symptom exacerbation

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