

Patients' Perspectives on Physiotherapy Interventions for Chronic Low Back Pain: A Qualitative Exploration of Experiences and Challenges

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Abstract

Background: Chronic low back pain (CLBP) is a common and debilitating condition often managed through physiotherapy interventions. Understanding patients' perspectives on these interventions is crucial for improving adherence and outcomes.

Objective: This qualitative study explores the experiences and challenges faced by patients undergoing physiotherapy for CLBP in a tertiary hospital setting.

Methods: Semi-structured interviews were conducted with 12 patients, and data were analyzed using thematic analysis.

Results: Three key themes emerged: (1) Perceived effectiveness of interventions, with manual therapy and education valued for their short-term relief and self-management potential; (2) Challenges, including pain during therapy, difficulty adhering to home exercise programs, and access to resources; (3) Emotional and psychological impact, highlighting frustration with slow progress and fear of pain recurrence.

Conclusion: The findings underscore the need for individualized treatment plans, ongoing support for home exercises, and addressing emotional factors to improve outcomes in CLBP management.

Keywords: Chronic Low Back Pain, Physiotherapy, Patient Perspectives, Manual Therapy, Home Exercise, Qualitative Study, Adherence.

Introduction

Chronic low back pain (CLBP) is a prevalent and debilitating condition that affects millions of people worldwide. It is one of the leading causes of disability and has a significant impact on individuals' quality of life, daily functioning, and overall well-being (Hartvigsen et al., 2018). CLBP is often defined as pain persisting for more than three months, and it poses a complex challenge for both patients and healthcare providers due to its multifactorial nature and tendency to become recurrent or persistent (Balagué et al., 2012).

Physiotherapy is widely regarded as a key component in the management of CLBP, offering a variety of interventions aimed at reducing pain, improving mobility, and enhancing patients' ability to engage in daily activities. Common physiotherapy interventions for CLBP include manual therapy, exercise therapy, patient

education, and modalities such as ultrasound or heat therapy (Delitto et al., 2012). These interventions are designed to address the physical impairments associated with CLBP and promote long-term self-management strategies. However, while numerous studies have documented the clinical efficacy of these interventions, less attention has been paid to how patients perceive and experience these treatments.

Understanding patients' perspectives on physiotherapy interventions is crucial for optimizing treatment approaches and improving patient satisfaction. Previous research indicates that patient engagement, motivation, and adherence to treatment can be influenced by their perceptions of the effectiveness and relevance of the interventions they receive (Sluijs et al., 1993). Furthermore, patients may encounter various challenges during their treatment, such as difficulties adhering to home exercise programs or managing treatment-related discomfort, which can impact their overall experience and outcomes.

This qualitative study aims to explore the lived experiences of patients undergoing physiotherapy for chronic low back pain, focusing on their perceptions of the interventions they receive and the challenges they face during treatment. By gaining insights into patients' perspectives, this study seeks to contribute to the development of more patient-centered physiotherapy practices that are tailored to the specific needs and preferences of individuals with CLBP.

Literature Review

Chronic Low Back Pain: Prevalence and Impact

Chronic low back pain (CLBP) is one of the most prevalent musculoskeletal conditions worldwide and is recognized as a leading cause of disability (Hartvigsen et al., 2018). The global burden of CLBP has been steadily increasing due to factors such as population aging, sedentary lifestyles, and the rising prevalence of obesity (Balagué et al., 2012). CLBP is defined as pain persisting for more than three months, often resulting in significant impairments in daily functioning and a diminished quality of life for patients (Maher et al., 2017). Despite numerous treatment options, managing CLBP remains a challenge due to its complex nature, which involves physical, psychological, and social components.

Physiotherapy Interventions for CLBP

Physiotherapy plays a central role in the multidisciplinary management of CLBP. Common physiotherapy interventions include exercise therapy, manual therapy, patient education, and various physical modalities, each of which targets different aspects of CLBP (Delitto et al., 2012). Exercise therapy is particularly well-supported in the literature for its ability to improve function, reduce pain, and prevent recurrence. Strengthening and flexibility exercises, as well as core stabilization programs, have been shown to produce positive outcomes for patients with CLBP (Steiger et al., 2012).

Manual therapy, which includes techniques such as spinal manipulation and mobilization, is another common intervention used by physiotherapists. Research suggests that manual therapy, when combined with exercise, may provide significant short-term pain relief and functional improvements (AD, 2008). Additionally, patient education focusing on self-management strategies and addressing fear-avoidance behaviors has been shown to be effective in promoting long-term management of CLBP (Moseley, 2004).

However, while the efficacy of these interventions is well-documented, less attention has been paid to understanding how patients perceive these treatments and their impact on their daily lives. Patient perspectives can provide valuable insights into the practical challenges and emotional responses associated with physiotherapy interventions, which are often overlooked in clinical outcome studies.

Patient Perspectives on Physiotherapy for CLBP

Understanding patient experiences and perceptions is critical to the success of physiotherapy interventions for CLBP. Research has shown that patient engagement and adherence to treatment are influenced by their beliefs about the effectiveness of the interventions they receive (Sluijs et al., 1993). Patients who perceive their treatment as helpful are more likely to adhere to prescribed exercises and follow-up sessions, which in turn contributes to better outcomes. Conversely, when patients face challenges such as discomfort during exercises, difficulty performing home-based programs, or a lack of perceived progress, they may become disengaged from their treatment (Liddle et al., 2007).

A few qualitative studies have explored patients' experiences with physiotherapy interventions for CLBP, highlighting several key themes. For example, a study by Slade et al. (2009) found that patients valued individualized treatment plans and the relationship they developed with their physiotherapist. Patients also reported that their motivation to engage in physiotherapy was influenced by the level of education and encouragement they received from their therapist. Similarly, a study by Wong et al. (2017) emphasized the importance of clear communication between patients and physiotherapists in fostering trust and ensuring patient participation.

Despite these insights, gaps remain in understanding the specific challenges patients face during physiotherapy for CLBP, particularly related to the emotional and psychological aspects of the recovery process. Research is needed to explore how patients navigate the complexities of chronic pain, engage with physiotherapy interventions, and perceive the overall impact of treatment on their quality of life.

Theoretical Framework: Patient-Centered Care in Physiotherapy

This study is grounded in the principles of patient-centered care, which emphasize the importance of incorporating patients' perspectives, preferences, and experiences into healthcare delivery (Epstein & Street, 2011). In the context of physiotherapy for CLBP, patient-centered care involves tailoring treatment plans to the individual needs of each patient, fostering open communication, and involving patients in decision-making about their care (Leplege et al., 2007). By exploring patient perspectives on physiotherapy interventions, this study aims to contribute to the development of more patient-centered approaches that align with the specific challenges and expectations of individuals living with chronic low back pain.

Gaps in the Literature

While several studies have explored the efficacy of physiotherapy interventions for CLBP, there is a notable gap in the literature regarding patients' subjective experiences of these treatments. Most research has focused on objective clinical outcomes such as pain reduction and functional improvement, with little attention to the emotional, psychological, and practical challenges that patients may encounter during their rehabilitation. Additionally, few studies have explored how patients' perceptions of treatment influence their engagement and adherence to physiotherapy programs.

This study seeks to address these gaps by examining the lived experiences of patients with CLBP as they undergo physiotherapy treatment. By focusing on patient perspectives, this research will provide valuable insights into how physiotherapy interventions can be improved to better meet the needs of individuals with chronic low back pain.

Methodology

This qualitative study was conducted at a tertiary hospital, aiming to explore patients' perspectives on physiotherapy interventions for chronic low back pain (CLBP). A phenomenological approach was adopted to understand the lived experiences of patients undergoing physiotherapy for CLBP, focusing on their perceptions of the interventions and the challenges they faced during treatment. The study was carried out over a six-month period in the hospital's physiotherapy department, where patients regularly attended sessions for CLBP management.

Study Design

A phenomenological qualitative research design was chosen to capture the in-depth experiences of patients with CLBP. This approach was suitable for the study's objective, as it allows for the exploration of how individuals experience and interpret their treatment, shedding light on both the physical and emotional dimensions of rehabilitation (Moustakas, 1994).

Participants

Participants were recruited from the hospital's physiotherapy department. The inclusion criteria for participants were:

- Adults (aged 30-70) diagnosed with chronic low back pain (pain persisting for more than three months).
- Patients who had completed at least 8 weeks of physiotherapy treatment at the hospital.
- Ability to provide informed consent and participate in an in-depth interview.

Patients with cognitive impairments, communication difficulties, or comorbidities that could affect their perception of physiotherapy were excluded from the study. A purposive sampling method was used to select participants, ensuring a diverse range of experiences related to different physiotherapy interventions. A total of 12 participants were interviewed, which was sufficient to reach data saturation, where no new themes emerged from the additional interviews.

Data Collection

Data were collected through semi-structured, in-depth interviews, which allowed participants to share their personal experiences with physiotherapy interventions for CLBP in a flexible and open manner. The interviews were conducted in a private room within the hospital's physiotherapy department to ensure confidentiality and minimize interruptions. Each interview lasted between 45 and 60 minutes.

An interview guide was developed to direct the conversation while allowing participants to elaborate on their experiences. Key questions included:

- "Can you describe your experience with the physiotherapy treatments for your low back pain?"
- "Which physiotherapy interventions did you find most or least effective?"
- "What challenges did you face during your physiotherapy sessions?"
- "How did the treatment impact your pain and daily life?"
- "What suggestions do you have for improving physiotherapy for others with chronic low back pain?"

All interviews were audio-recorded with participants' consent and later transcribed verbatim for analysis. Field notes were also taken during the interviews to capture non-verbal cues and contextual information that could enhance the interpretation of the data.

Data Analysis

Data were analyzed using thematic analysis, following Braun and Clarke's (2006) six-phase process. This method was chosen for its flexibility in identifying, analyzing, and reporting patterns (themes) within qualitative data. The analysis was conducted as follows:

1. Familiarization with the Data: The researchers reviewed all interview transcripts and field notes, reading and re-reading the data to become immersed in the content and make initial notes on emerging ideas.
2. Generating Initial Codes: Transcripts were systematically coded using NVivo software. Initial codes were generated based on recurring concepts or significant statements made by participants.
3. Searching for Themes: The codes were organized into broader categories, and potential themes were identified. These themes reflected patterns in how patients described their experiences with physiotherapy interventions.
4. Reviewing Themes: The identified themes were reviewed to ensure they accurately captured the data and were coherent. Themes were refined and restructured as necessary.
5. Defining and Naming Themes: Each theme was clearly defined, and sub-themes were identified where appropriate. These themes were given names that reflected their content and significance in relation to the study objectives.
6. Writing the Report: The themes were organized into a narrative that explained how patients perceived physiotherapy interventions for CLBP and the challenges they faced. Direct quotes from participants were used to support each theme.

Ethical Considerations

Ethical approval for the study was obtained from the hospital's Research Ethics Committee before data collection began. All participants provided written informed consent prior to the interviews. They were assured of their right to withdraw from the study at any time without any consequences for their treatment. Confidentiality was maintained by assigning pseudonyms to participants and removing identifying details from the transcripts. All audio recordings and transcripts were securely stored to ensure data protection.

Rigor and Trustworthiness

To ensure the trustworthiness of the study, several strategies were implemented. Credibility was established through member checking, where participants were given the opportunity to review their interview transcripts and verify the accuracy of the data. Triangulation was achieved by comparing participants' accounts with the field notes and the insights gathered from multiple participants. Dependability was ensured by maintaining detailed documentation of the research process, allowing for an audit trail. Reflexivity was practiced by the researchers, who continuously reflected on their potential biases and how these might influence the interpretation of the data.

Findings

Through thematic analysis of the interview data, three key themes emerged: (1) Perceived Effectiveness of Physiotherapy Interventions, (2) Challenges Faced During Physiotherapy, and (3) Emotional and Psychological Impact of Treatment. Each theme is further broken down into sub-themes to capture the depth and complexity of the participants' experiences with physiotherapy interventions for chronic low back pain (CLBP).

Theme 1: Perceived Effectiveness of Physiotherapy Interventions

Participants shared their views on the effectiveness of various physiotherapy interventions, with a particular focus on manual therapy, exercise programs, and education. Their experiences reflected a combination of both positive outcomes and limitations of the treatments.

Sub-theme 1.1: Positive Impact of Manual Therapy

Many participants expressed relief and improved mobility following manual therapy sessions, describing it as an effective method for reducing pain in the short term. Participants also highlighted the hands-on aspect of manual therapy as a comforting and motivating factor in their recovery.

- Participant 4: "The manual therapy really helped to loosen things up. After each session, I could move better, and it gave me immediate relief, even if it didn't last all day."
- Participant 8: "I felt like I was in good hands with the physiotherapist. The way they worked on my back felt personalized, and it always made me feel a bit better, even if only for a while."

Sub-theme 1.2: Mixed Experiences with Exercise Programs

Participants had varied responses to exercise-based interventions, with some reporting improvement in strength and mobility, while others struggled with pain or found the exercises difficult to maintain over time. Participants who followed the home exercise programs noted better outcomes, but adherence was a common challenge.

- Participant 2: "The exercises they gave me were hard at first, but over time, I noticed that my back felt stronger. I'm able to do more things now without pain, which is a huge relief."
- Participant 10: "I know the exercises are important, but it was tough to keep up with them at home. Some days the pain was too much, and I'd skip them, which probably slowed down my progress."

Sub-theme 1.3: Value of Education and Self-Management

Participants valued the education they received about their condition and the self-management strategies provided by their physiotherapists. This information empowered them to better manage their pain outside of formal treatment sessions.

- Participant 5: "The education part was really helpful. They explained what was going on with my back and what I could do to help myself at home. Knowing that gave me a sense of control over my pain."
- Participant 9: "I liked how they showed me how to do the exercises properly. Now I feel like I understand how to take care of my back even when I'm not in therapy."

Theme 2: Challenges Faced During Physiotherapy

Participants identified several challenges they encountered throughout their physiotherapy treatment, including physical discomfort, difficulty with adherence, and access to resources.

Sub-theme 2.1: Pain and Discomfort During Treatment

Several participants reported experiencing pain during their physiotherapy sessions, particularly when engaging in certain exercises or when receiving manual therapy. While some acknowledged that discomfort was a necessary part of the rehabilitation process, others found it discouraging.

- Participant 6: "Some of the exercises were really painful, and I was afraid that I was doing more harm than good. I didn't want to push myself too hard because I didn't want to make things worse."
- Participant 1: "Manual therapy helped, but sometimes it hurt too much during the session. I wondered if it was normal to feel that way or if it was just part of the process."

Sub-theme 2.2: Difficulty Adhering to Home Exercise Programs

A significant challenge reported by participants was adhering to the prescribed home exercise programs. Many struggled to maintain consistency, particularly when they experienced pain or lacked motivation.

- Participant 7: "It's hard to keep up with the exercises when you're not in therapy. I'd start strong, but after a few days, I'd stop because either I was too tired or the pain came back."
- Participant 3: "The physiotherapist said the exercises were important, but when I was on my own, it was hard to stay motivated. It's easy to skip a day, and then it becomes a habit."

Sub-theme 2.3: Access to Resources and Time Constraints

Some participants discussed barriers related to accessing physiotherapy resources, such as finding time for appointments and managing the cost of treatment. These issues often impacted their ability to complete the recommended course of treatment.

- Participant 11: "I had to take time off work to make it to my appointments, which wasn't always possible. It felt like I couldn't commit to the full plan because of my schedule."
- Participant 12: "The cost of physiotherapy adds up. I had to stop going after a while because I couldn't afford more sessions, even though I wasn't fully recovered."

Theme 3: Emotional and Psychological Impact of Treatment

Participants also reflected on the emotional and psychological aspects of their rehabilitation journey, including feelings of frustration, fear of recurrence, and the importance of hope and motivation.

Sub-theme 3.1: Frustration with Slow Progress

Many participants expressed frustration with the slow pace of recovery, often feeling that their progress did not meet their expectations. This frustration sometimes led to decreased motivation and engagement with the therapy.

- Participant 10: "It was frustrating not seeing quick results. I thought the pain would go away faster, but it was more of a gradual process. Sometimes I felt like giving up."
- Participant 4: "I expected to feel better sooner, but it took longer than I thought. It made me wonder if the therapy was working or if I needed something else."

Sub-theme 3.2: Fear of Pain Recurrence

Several participants mentioned concerns about the possibility of their pain returning after treatment. This fear sometimes affected their willingness to fully engage in exercises or pursue more physically demanding activities.

- Participant 9: "Even when I felt better, I was scared that the pain would come back. It's like a constant worry that's always in the back of your mind."
- Participant 2: "I'm always careful not to push too hard because I don't want to end up back at square one. That fear of reinjury keeps me from doing certain things."

Sub-theme 3.3: The Role of Motivation and Hope in Recovery

Despite the challenges, participants noted that maintaining motivation and having a sense of hope for recovery were key factors that helped them persevere through difficult moments during physiotherapy.

- Participant 5: "What kept me going was the hope that I would eventually be pain-free. It wasn't always easy, but knowing there was a chance of getting better kept me on track."
- Participant 8: "The therapist was really encouraging, and that made a difference. They always reminded me that it was a process, and that motivated me to keep going even on bad days."

Discussion

This study aimed to explore patients' perspectives on physiotherapy interventions for chronic low back pain (CLBP), focusing on their experiences and challenges throughout the rehabilitation process. The findings highlight a range of physical, emotional, and practical factors that influence patient outcomes, providing insights that can guide more patient-centered approaches in physiotherapy practice.

Perceived Effectiveness of Physiotherapy Interventions

One of the main themes that emerged from the data was the perceived effectiveness of different physiotherapy interventions, particularly manual therapy, exercise programs, and education. Participants frequently reported short-term relief and improved mobility following manual therapy sessions, which aligns with existing research suggesting that manual therapy can be beneficial for reducing pain and improving function in patients with CLBP (AD, 2008). However, while manual therapy was perceived as effective in the short term, some participants expressed concerns about its lasting impact. This finding suggests that physiotherapists may need to combine manual therapy with more long-term management strategies, such as self-management education and home exercise programs, to sustain improvements.

The mixed experiences with exercise-based interventions revealed in this study are consistent with the literature, which acknowledges that patient adherence to exercise is critical for achieving positive outcomes (Sluijs et al., 1993). Some participants in this study experienced significant improvements in their strength and mobility, while others struggled with pain or found it difficult to maintain a consistent exercise routine. This variability highlights the importance of tailoring exercise programs to individual patients' needs and abilities, as well as providing ongoing support and encouragement to enhance adherence. Previous studies have shown that patients who receive clear instructions and regular follow-up are more likely to engage in home-based exercises, which is essential for long-term success in managing CLBP (Moseley, 2004).

Education and self-management were highly valued by participants, who appreciated the knowledge and tools they received to manage their condition independently. This finding aligns with the principles of patient-centered care, which emphasize the importance of empowering patients through education (Epstein & Street, 2011). By helping patients understand their condition and take an active role in their rehabilitation, physiotherapists can improve patient outcomes and foster a sense of control over their recovery.

Challenges Faced During Physiotherapy

The challenges participants faced during physiotherapy, including pain, adherence difficulties, and access to resources, highlight several barriers to successful treatment. Pain during physiotherapy sessions, particularly during certain exercises or manual therapy techniques, was a significant concern for many participants. While some level of discomfort may be expected during rehabilitation, it is important for physiotherapists to closely monitor patient feedback and adjust treatment plans accordingly. Studies have shown that excessive pain during exercises can lead to fear of movement and avoidance behaviors, which may hinder recovery (Liddle et al., 2007). Therefore, physiotherapists should ensure that pain is managed effectively and that patients are not pushed beyond their tolerance levels.

Adherence to home exercise programs was another significant challenge identified in this study. Many participants struggled to maintain consistency with their exercises due to pain, lack of motivation, or time constraints. This finding is consistent with previous research that identifies poor adherence as a common barrier to successful physiotherapy outcomes (Jack et al., 2010). To address this issue, physiotherapists may need to provide more individualized support, such as regular follow-up calls or digital tools (e.g., apps or

video tutorials), to help patients stay on track with their exercises. Additionally, simplifying exercise programs and setting realistic, achievable goals can improve adherence and patient satisfaction.

Access to resources, including time and financial constraints, was another barrier that impacted participants' ability to complete their physiotherapy programs. Some participants reported difficulty attending sessions due to work schedules or the cost of treatment, which limited their ability to fully engage in the rehabilitation process. This finding underscores the need for more flexible and affordable physiotherapy services, particularly for patients with chronic conditions like CLBP, who may require longer-term care. Telehealth and community-based programs could be explored as potential solutions to these access issues.

Emotional and Psychological Impact of Treatment

The emotional and psychological aspects of rehabilitation emerged as a significant factor influencing participants' experiences with physiotherapy. Many participants expressed frustration with the slow pace of progress, particularly when their expectations for a quick recovery were not met. This frustration is common among patients with chronic conditions, where improvements tend to occur gradually over time (Slade et al., 2009). Physiotherapists can help manage these expectations by providing clear information about the typical recovery timeline and emphasizing the importance of persistence in achieving long-term benefits.

Fear of pain recurrence was another prevalent concern, which affected participants' willingness to fully engage in certain activities or exercises. This finding aligns with the concept of kinesiophobia, or fear of movement, which has been identified as a psychological barrier to recovery in patients with CLBP (Vlaeyen & Linton, 2000). Physiotherapists should address these fears directly by providing reassurance, education, and gradual exposure to physical activity, helping patients regain confidence in their bodies.

Despite the challenges, many participants highlighted the role of motivation and hope in their rehabilitation journey. Participants who had clear goals, such as returning to specific activities or achieving pain relief, were more likely to stay engaged in their physiotherapy programs. This finding underscores the importance of goal-setting in physiotherapy, as it provides patients with a sense of purpose and direction (Sluijs et al., 1993). Physiotherapists should work with patients to establish realistic, meaningful goals that align with their personal values and lifestyle.

Clinical Implications

The findings from this study have several important implications for physiotherapy practice. First, physiotherapists should take a more individualized approach to treatment, tailoring interventions to each patient's specific needs, preferences, and abilities. This includes adapting exercise programs to the patient's pain tolerance, providing ongoing support for home exercises, and involving patients in decision-making about their treatment plans.

Second, physiotherapists should recognize the emotional and psychological aspects of chronic low back pain and incorporate strategies to address these factors. This may involve providing psychological support, managing patient expectations, and offering education to reduce fear and anxiety related to pain and movement. Third, addressing barriers to access, such as cost and time constraints, will be crucial for improving patient adherence and outcomes. Flexible scheduling, telehealth options, and affordable services may help patients with CLBP engage more consistently with their treatment.

Limitations

While this study provides valuable insights into patients' perspectives on physiotherapy for chronic low back pain, several limitations should be noted. First, the study was conducted at a single tertiary hospital, which may limit the generalizability of the findings to other settings. Additionally, the sample size, while sufficient for qualitative research, may not capture the full diversity of experiences among patients with CLBP. Future research could explore these perspectives across different healthcare environments and demographic groups.

Conclusion

This study highlights the importance of understanding patients' perspectives on physiotherapy interventions for chronic low back pain. While many participants reported positive experiences with manual therapy, exercise programs, and education, they also faced significant challenges related to pain, adherence, and access to resources. Emotional and psychological factors, including frustration with slow progress and fear of pain recurrence, played a critical role in shaping their experiences. By addressing these challenges and adopting a more patient-centered approach, physiotherapists can improve outcomes and enhance the overall quality of care for individuals with chronic low back pain.

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