



Analysis Guidelines for the CAREA Measure Your DuoPody[®] Reflexology and Wellbeing[®] MYDRaW[®]

By collecting before and after responses to a treatment, or a set of treatments, you will collate qualitative data. You can use this information to analyse the seven health and wellbeing-related concerns that your client provides answers for pre- and post-treatment. These responses will help you understand the impact that your treatments may, or may not, be eliciting and provide sound, methodological research data analysis.

The **CAREA MYDRaW[®]** qualitative analysis was developed after students and graduates had previously used both MYMOP and MYCAW, which are generalised health and wellbeing measurements. Recognising that the **CAREA Matrix[®]** and other techniques taught on the OTHM Level 5 Diploma in Applied Reflexology for Integrated Medicine required a profession-specific measurement tool, MYDRaW[®] was developed. During its development, other validated health and wellbeing outcome tools were referred to, including the Likert Scale, the Warwick-Edinburgh Mental Well-being Scale (WEMWBS), and the SF-36.

Research methodologies and measurement tools were previously investigated when Sue Alma Evans - a Director of CAREA and the founder of Level 5 reflexology qualifications - was involved in a research project in collaboration with consultants at the Pain Clinic in the University Hospital of Wales. This project investigated whether DuoPody[®] reflexology would be effective in controlling long-term chronic back pain and reducing the long-term use of opioid medication. This was the first non-NHS bid for funding ever to be accepted; sadly, it occurred at the time of the Covid-19 pandemic and had to be shelved as applications for funding were withdrawn. The application and all the details of the research are available from your CAREA Academy Tutor; these include details of how the research was to be conducted at GP surgeries, how the treatments were to be performed (using a protocol specific to chronic back pain), the relevant research papers, and the validated outcome tools to measure responses.

There are two MYDRaW[®] forms.

- **Form (1)** should be used before the first treatment begins and should be part of the consultation process so that you are on hand for support. You can fill the form in for your client if requested, but it must be in the client's own words and their responses must not be influenced by you.
- **Form (2)** can be used after each treatment, but is best completed after an agreed number of treatments (e.g. 4 to 6). The information can then become a database; should research be of interest to you, you will immediately have a measuring tool for qualitative research data. If you wish to use MYDRaW[®] for anything other than your personal clinic after qualifying, please contact CAREA for permission to use, as it is copyrighted.

P.S. Students: please remember to delete identifying names before submission for marking.



MYDRaW[®]: Form (1)

Pre-treatment

CLIENT INFORMATION	
Name	
Date of Birth	
Age	
Treatment 1 and QDA form (1) date:	
Number of treatments	
Date of QDA form (2) <i>added later</i>	

CONSENT AND SIGNATURE	
Duopodist / Reflexologist Name:	
Client Signature	Duopodist / Reflexologist Signature
Date:	Date:

Qualitative Data Analysis form (1).

There are four questions which request that you write two answers. These will be identifying various areas of your health and wellbeing and how concerned you are about them. Although we ask for two identifying concerns, a single concern is ok and if none apply then please leave blank.

If you prefer, your Duopodist can write your answers, but they must be your own words. After writing your answers, you will be asked to rate the response and/or importance to you of each identified area by circling a number e.g. Not a concern 0 1 2 3 4 5 6 7 8 9 significant concern. There are a further three questions and nothing to identify or write and you simply circle the number e.g. Not relevant 0 1 2 3 4 5 6 7 8 9 significant relevance. The two pages should not take long to complete!

Qualitative Data Analysis form (2).

At the end of a treatment, which may be one treatment or a set of pre- agreed treatments (usually between 4 + 6 treatments), you will be asked to revisit this form and on Form (2) you will again circle the relevant numbers and a comparison will be made to the Form (1) responses.

No rights or wrongs! This form is to help prioritise your concerns (health and others) and assists in providing bespoke and focussed treatments. Your Duopodist Reflexologist is collecting this information to assess how All effective (or not!) their treatments are and will be used for qualitative data research purposes only. identifying personal information will be removed

Duopodists have an Integrated Medicine approach to your treatment which means they will take an overview of your life to help them and you identify areas that may be affecting your wellbeing. Their Integrated Medicine approach also means that they recognise that sometimes other Health Professionals may be helpful to you as well as their treatments of course!

Thank you so much for helping your Duopodist / Reflexologist with research by filling out this form.



MYDRaW[®]: Qualitative Data Analysis form (QDA 1.1)

Pre-treatment

a) Please identify your two main physical health-related concerns:

1.

Not a concern

0 1 2 3 4 5 6 7 8 9

Significant concern

2.

Not a concern

0 1 2 3 4 5 6 7 8 9

Significant concern

Do you expect that your Duopodist Reflexor treatment may be able to help with them?
Yes / No / Maybe

b) For these two physical health concerns, please identify and score your main symptom for each physical health concern below:

1.

Not a concern

0 1 2 3 4 5 6 7 8 9

Significant concern

2.

Not a concern

0 1 2 3 4 5 6 7 8 9

Significant concern

Do you expect that your Duopodist Reflexor treatment may be able to help with them?
Yes / No / Maybe

Please circle the number that feels most relevant to you – again no right or wrong answers just how you are feeling **today**:

c) What best reflects your current sense of **self-worth / self-esteem**:

Good sense of self-worth / self-esteem

0 1 2 3 4 5 6 7 8 9

Poor sense of self-worth / self-esteem

d) What best reflects your day-to-day sense of **contentment / happiness**:

Good sense of contentment / happiness

0 1 2 3 4 5 6 7 8 9

Poor sense of contentment / happiness



MYDRaW[®]: Qualitative Data Analysis form (QDA 1.2)

Pre-treatment

e) Please identify your two main emotional / psychological concerns:

1.

Not a concern

0 1 2 3 4 5 6 7 8 9

Significant concern

2.

Not a concern

0 1 2 3 4 5 6 7 8 9

Significant concern

Do you expect that your Duopodist Reflexor treatment may be able to help with them?
Yes / No / Maybe

f) Please identify two areas in your life that you would like more control over and/or be able to manage better:

1.

Not a concern

0 1 2 3 4 5 6 7 8 9

Significant concern

2.

Not a concern

0 1 2 3 4 5 6 7 8 9

Significant concern

Do you expect that your Duopodist Reflexor treatment may be able to help with them?
Yes / No / Maybe

Please circle the number that feels most relevant to you – again no right or wrong answers just how you are feeling **today**:

g) What best reflects your current **sense of connection to others**:

Good sense of connection with others

0 1 2 3 4 5 6 7 8 9

Poor sense of connection with others

h) How would you score your sense of how you **function generally**:

Function well generally

0 1 2 3 4 5 6 7 8 9

Do not function well generally



MYDRaW[®]: Qualitative Data Analysis form (QDA 2)

Post Treatment

You will now have had either one, or a set of treatments with your Duopody Reflexologist. Please will you answer the same questions by circling the number you feel is most appropriate today. Revisit your written answers on the QDA form (1).

Remember ... there are no right or wrong answers!

a) You identified your two main **physical health** related concerns

2. Not a concern 0 1 2 3 4 5 6 7 8 9 Significant concern

1. Not a concern 0 1 2 3 4 5 6 7 8 9 Significant concern

Do you feel that your Duopodist Reflexor treatments have helped? **Yes / No / Maybe**

b) You identified one main symptom for each of your **physical health** concerns:

2. Not a concern 0 1 2 3 4 5 6 7 8 9 Significant concern

1. Not a concern 0 1 2 3 4 5 6 7 8 9 Significant concern

Do you feel that your Duopodist Reflexor treatments have helped? **Yes / No / Maybe**

Please circle the number that feels most relevant to you **today**:

c) What best reflects your current sense of **self-worth / self-esteem**

Good sense of selfworth / self esteem 0 1 2 3 4 5 6 7 8 9 Poor sense of conneciton with others

Do you feel that your Duopodist Reflexor treatments have helped? **Yes / No / Maybe**

d) What best reflects your day-to-day sense of **contentment / happiness**

Good sense of contentment/ happiness 0 1 2 3 4 5 6 7 8 9 Poor sense of contentment/ happiness

Do you feel that your Duopodist Reflexor treatments have helped? **Yes / No / Maybe**

g) What best reflects your current **sense of connection to others**:

Good sense of connection with others 0 1 2 3 4 5 6 7 8 9 Poor sense of conneciton with others

Do you feel that your Duopodist Reflexor treatments have helped? **Yes / No / Maybe**

h) How would you score your sense of how you **function generally**:

Function well generally 0 1 2 3 4 5 6 7 8 9 Do not function well generally

Do you feel that your Duopodist Reflexor treatments have helped? **Yes / No / Maybe**

