

# Home settings and post stroke - development of a methodology of investigation

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# State of art

- ✓ Care chain from hospital to patients' home
- ✓ Early support discharge can contribute to patients health and well-being
- ✓ Evidence-based architecture in the field of rehabilitation is lacking - **what about the physical environment?**

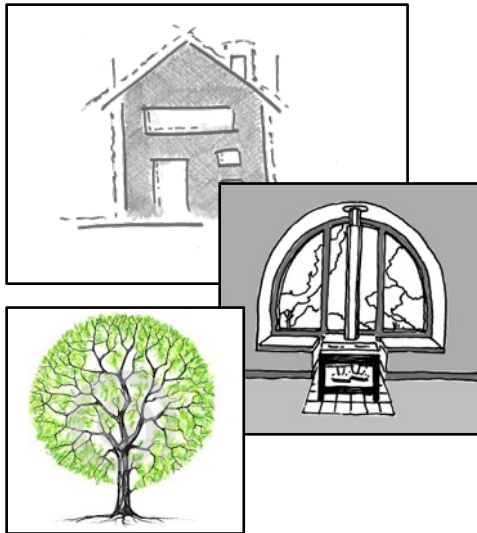
# Aim

Increase knowledge about the interaction between the **physical environment of home settings** and stroke survivors **experience** of it

## How?

Through the development of a transdisciplinary methodology that acknowledge the centrality of the individual with stroke

# Why is this important?



*Experiences  
Behavior  
Well-being*

# Systematic review



## Post stroke

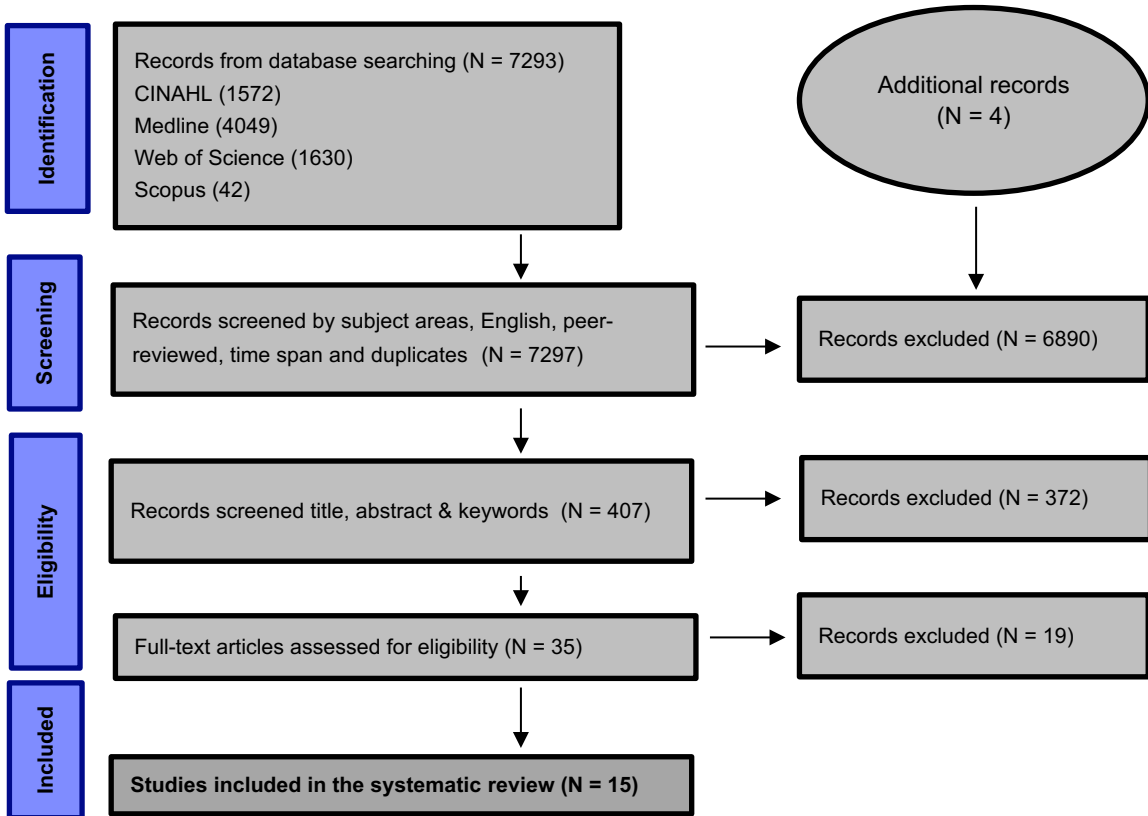
- ✓ Individuals after stroke episode(s)

## Home

- ✓ Setting of investigation

## Physical environment

- ✓ Architectural, interior design and ambient features (Harris, 2002)
- ✓ Facilitators and barriers (ICF) (WHO, 2015)



# Systematic review results

Articles (N= 15)

## **Physical environment dimension(s):**

- ✓ All 3 dimensions of the environment (N = 4) (25%)
- ✓ Architectural & interior design features (N = 11) (65%)

## **Physical environment – post stroke focus**

- ✓ Activity and Mobility (N = 15)
- ✓ Psychological/emotional experience of place (N = 1)
- ✓ Time issue (missing)

# Transdisciplinary approach

**Architecture** – focus on the built environment

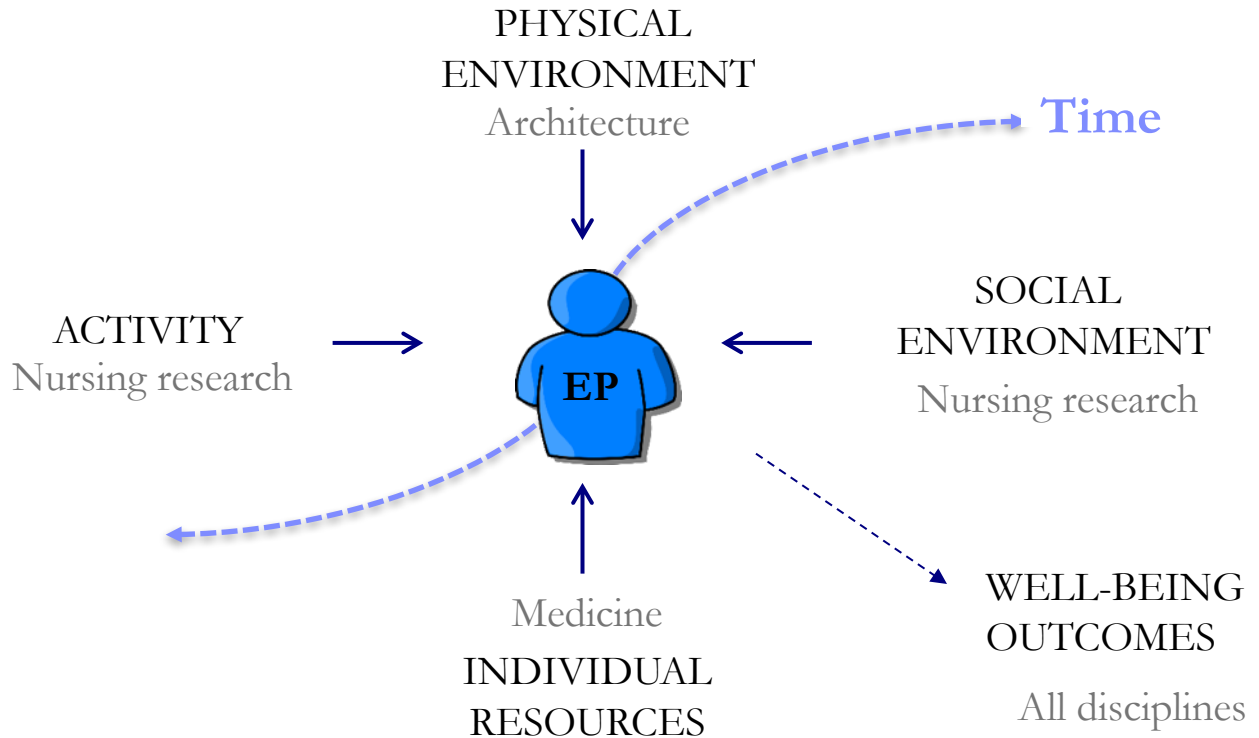
**Nursing research** – focus on the individual rehabilitation processes

**Medicine** – focus on the individual medical condition & rehabilitation

**Environmental psychology (EP)** – focus on the interplay between people and the environment and investigates the underlying psychosocial processes that intercede between each human-environment interaction.



# Merging together the different disciplines



# Methodology

Mix method

Multi-perspective

Physical environment

Social environment

Activity

Individual resources

Well-being outcomes

Interview & observation

Patients, nurses, family

Perceived quality of

Home & neighborhood (facilitators vs barriers)

Social support (family and social services)

Daily life activity link to the environment

Medical condition (mild stroke) background info

Rehabilitation and health

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Place attachment  
Self-efficacy



1 and 6 months  
after stroke

# Behavioral mapping



# How far have we got?

## Testing the methodology

- ✓ 1st month after stroke data collection
- ✓ Sample = People with mild stroke conditions (N = 15)
- ✓ Setting = home (Malmö, Sweden)

## Next step

- 6 months after stroke data collection
- Same sample
- Data coding and analysis
- Discussion of results (facilitators vs barriers)

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