

Life After Stroke: A Sensory Health Initiative

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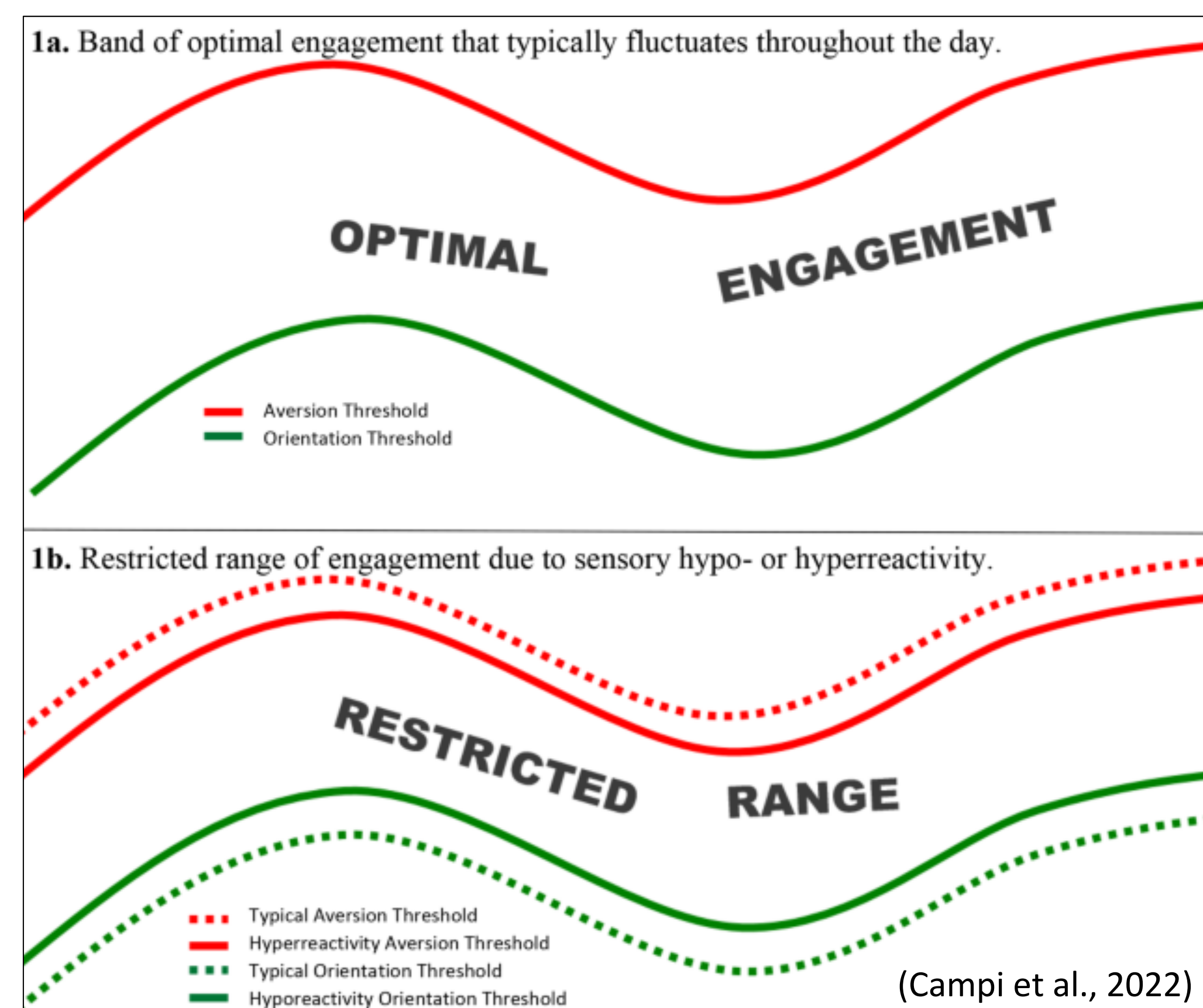
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BACKGROUND

- Every year, stroke affects over 798,000 Americans.
- 80% of individuals with stroke survive.
- Adults post stroke require interventions to support their functional independence to improve their participation in health-promoting activities.
- Stroke survivors can experience changes in sensory health that affect their ability to engage in health promoting activities of daily living.

What is sensory health?

- The fit between a person's sensory capacities and the sensory demands of their environment and their activities.
- The optimal band of sensory arousal is the range and intensity of sensory input that an individual can effectively process and integrate during an activity without becoming over- or under- stimulated
- After stroke, the optimal band can become more restricted or can shift

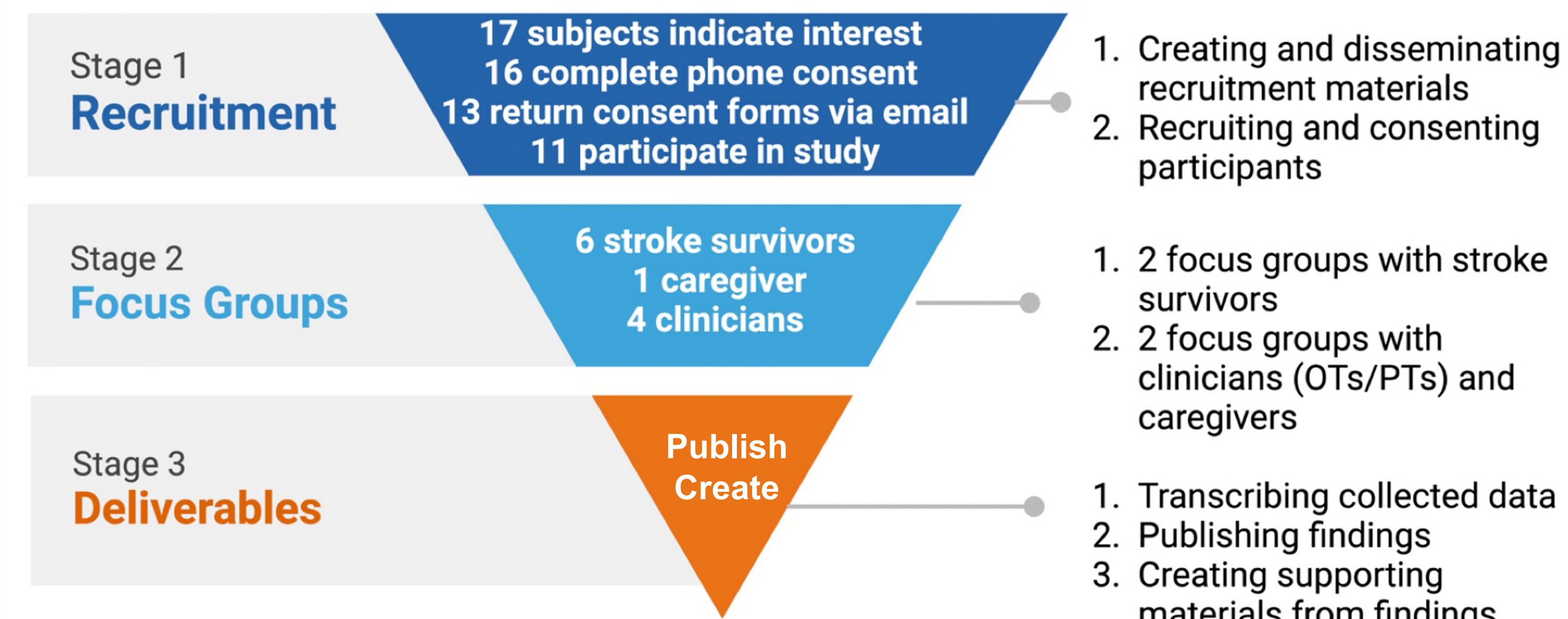


Project Goals

- Identify sensory health needs of stroke survivors
- Identify resources and supports needed to enhance the sensory health and participation in meaningful activities of daily living of adults post stroke

PHASE 1

Methods:



Implications:

- Current rehabilitation therapy post-stroke does not sufficiently address changes in sensory health
- Reduced social participation due to sensory changes contributes to poor health outcomes and decreased quality of life
- There is a need to improve assessment protocols and interventions targeting sensory health

PHASE 2

Purpose and Rationale:

- There was a lack of diversity in the cultural and racial profile of participants from Phase 1
- There was a need to recruit participants from groups that are underrepresented in research or have inequities in outcomes:

Asian Community:

- More severe ischemia
- Less likely to have PCP compared to white patients
- Longer time to reach hospital

Black Community:

- Higher average systolic blood pressure
- Higher levels of poverty and unemployment (in Durham)
- Report greater depressive symptoms post stroke

Latino Community:

- Lower access to healthcare
- Lower levels of health literacy

Findings:

All participants reported sensory changes that affected their participation in meaningful activities

3 themes were identified:

- (1) Sensory impairments were **hidden** and **invisible**. They were missed in acute care
- (2) Sensory impairments caused participants to feel **overstimulated** and **nauseous** during meaningful activities
- (3) "It's easy to stay inside": sensory impairments **reduced social participation** and **the ability to complete important activities of daily living** (e.g., grocery shopping, playing with children, eating out)

Recruitment Process:

- Forming authentic partnerships with community groups who are underrepresented in stroke research
- Going to places of worship, community centers, and other gathering locations (e.g., restaurants, ethnic grocery stores) to find prospective study participants
- Importance of personal connection: In-person contacts and in-person follow up with community partners

Next Steps:

- Submitted manuscript to *Topics in Stroke Rehabilitation*
- Building trust and rapport with underrepresented groups in stroke research or who have inequities in stroke outcomes (i.e., Black, Latino, and Asian groups)
- Repeat Phase 1 focus groups with minority cohorts to understand and address specific culturally-relevant sensory health needs. Recruitment ongoing
- Focus group with Black cohort