A Study of the Activity Participation of Stroke Patients in Singapore using the Frenchay Activities Index

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Introduction: Stroke can lead to restriction in participation in daily activities and social roles. Although considered an important rehabilitation outcome, little is known about the activity participation patterns of stroke patients in Singapore.

Objectives: This study aimed to investigate and discuss the patterns of activity participation of stroke patients using the Frenchay Activities Index (FAI).

Description: Recruited subjects in this study were consecutive stroke patients enrolled in the Early Supported Discharge (ESD) programme in the National University Hospital, Singapore. The ESD programme consists of home-based rehabilitation conducted by an occupational therapist and a physiotherapist. The FAI was used to measure instrumental activities of daily living participation at three intervals: pre-stroke (retrospectively), immediately post-stroke, and post-ESD.

Results: A total of 174 patients (male 58%, female 42%; mean age=65.6 years) were enrolled into the ESD programme from July 2007 to October 2009. Using the FAI, there was a significant decrease in activity participation levels immediately post-stroke (P<0.001), followed by a significant increase (P<0.001) post-ESD. The 3 most commonly participated activities performed pre-stroke and post-ESD by male patients included "walking outside>15 minutes", "social occasion" and "travel outing/car rides" while it differed slightly for female patients ["walking outside>15 minutes", "washing up" and "light housework']. "Driving car/bus travel", "social occasion" and "travel outing/car rides" were the top 3 activities that had the greatest decrease post-ESD compared to pre-stroke. The least participated activities in the FAI pre-stroke were "gardening" (87.9% never participated in activity) and "reading books" (78.2% never participated in activity).

Conclusion: After rehabilitation, patients may not resume their previous level of activity participation. One possible explanation for the varying patterns of activity participation between the genders could be attributed to societal expectation and roles. Travel and social activities also appeared to be most limited post-stroke. Cultural differences in Singapore may account for the low participation in the FAI items of gardening and reading books as compared to Western countries.

Practice Implications: The FAI is a useful outcome measure for understanding the premorbid and post-stroke lifestyles of patients. Future researches on the cultural and social factors influencing participation, as well as developing a culturally adapted version of the FAI, are recommended.