



Stroke survivors' experiences of Daily Functioning, one to three months after receiving Occupational Therapy Intervention as inpatients at Worcester Hospital, Cape Town, South Africa

Occupational Therapy
Stellenbosch University



Aim and objectives

Aim

- Describing stroke survivors' experiences of their daily functioning up to three months after receiving occupational therapy intervention as in-patients at Worcester Hospital.

Objective

- To provide the participants with the opportunity to share their current experience of daily functioning up to three months post discharge from Worcester Hospital.

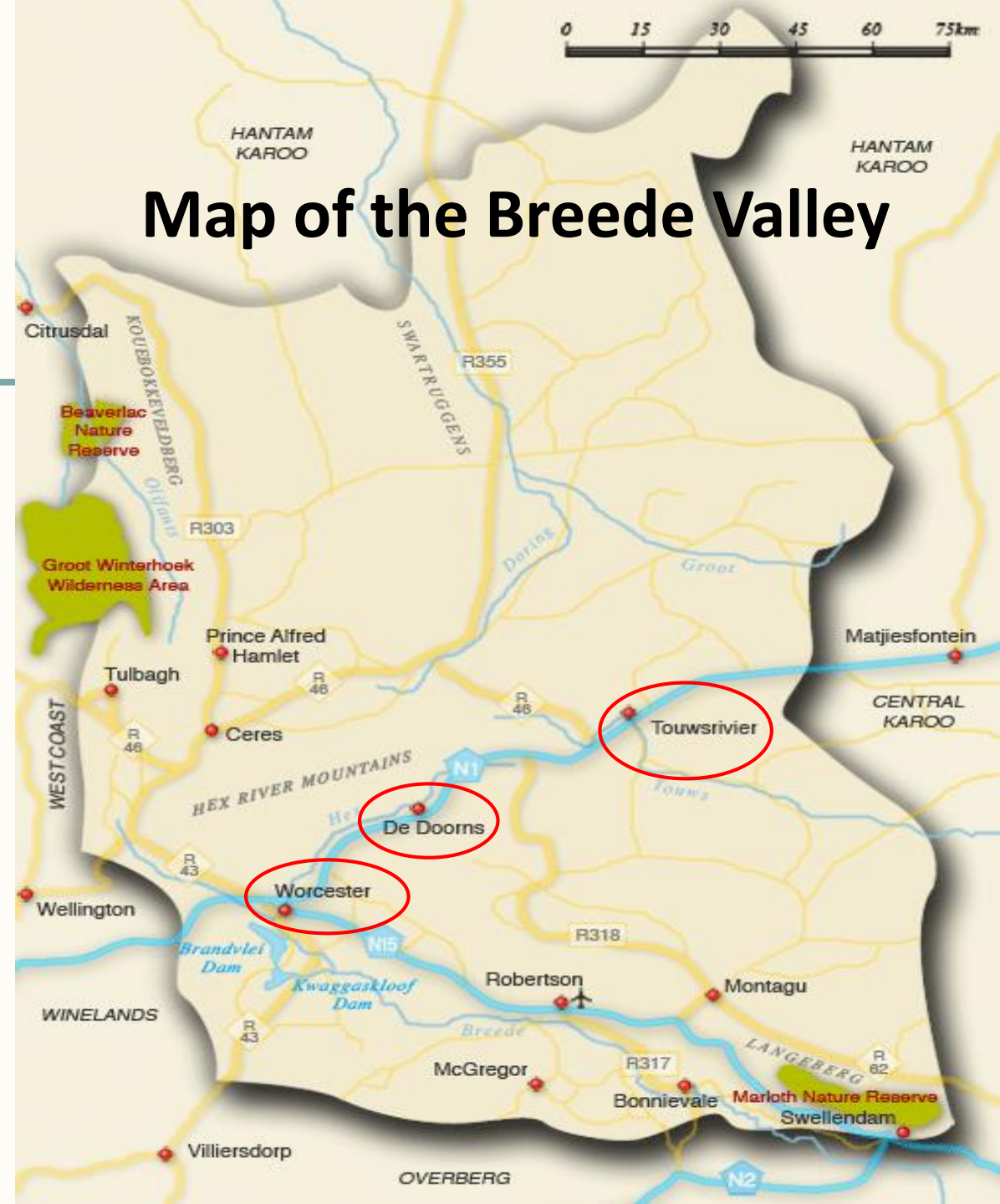
Study setting

- South Africa, Western Cape, Breede Valley, Worcester rural area

Study Setting

- Breede Valley, Western Cape, South Africa
- Rural communities
- Worcester Hospital
 - Providing secondary health services for the surrounding districts

Map of the Breede Valley





Methodology / Sampling / Selection criteria

Methodology

- Qualitative research methodology
- Holistic approach → Phenomenological approach
- Explorative nature → Inductive reasoning

Sampling

Convenience sampling was used

Selection criteria

- First ever stroke, above 18 years of age and discharged to home environment up to three months



Data collection

Data collection

- Read through medical files
- Informed consent
- Semi-structured interviews
- Reflective journals and transcribe interviews

Data analysis

- Familiarised with the findings and inductive reasoning was used
- Used Bruan & Clarke phases of thematic analysis
- ICF was used to categorize the sub-themes



Trustworthiness / Rigour / Ethical Considerations

Credibility -Triangulation; Reflexivity; Peer debriefing; Thick description;

Conformability - Audit trail

Dependability and Transferability

– Beneficence; Non-maleficence; Respect; Justice

Ethical consideration

– Approval

– Informed Consent

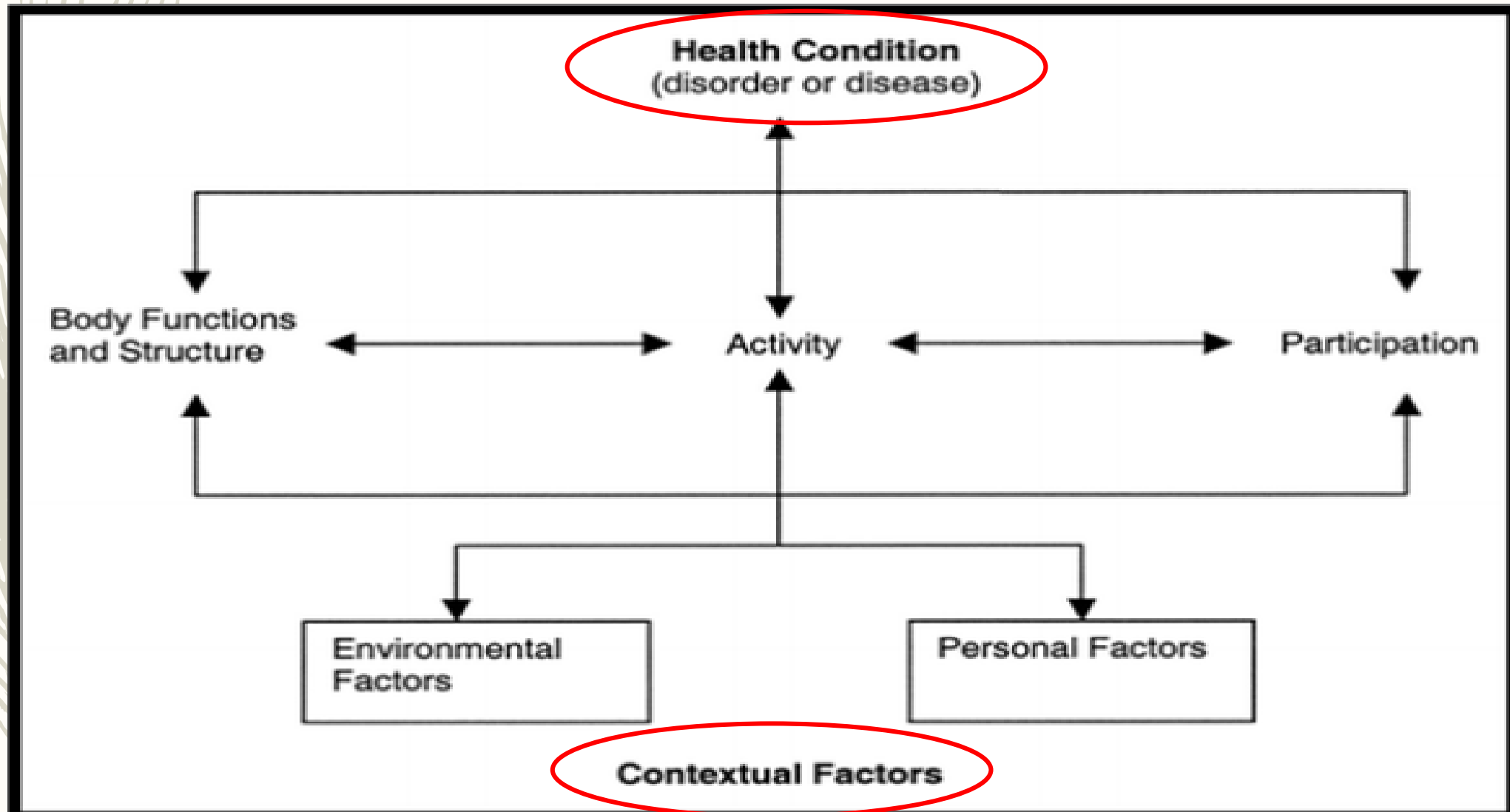
– Autonomy & Confidentiality

– Debriefing

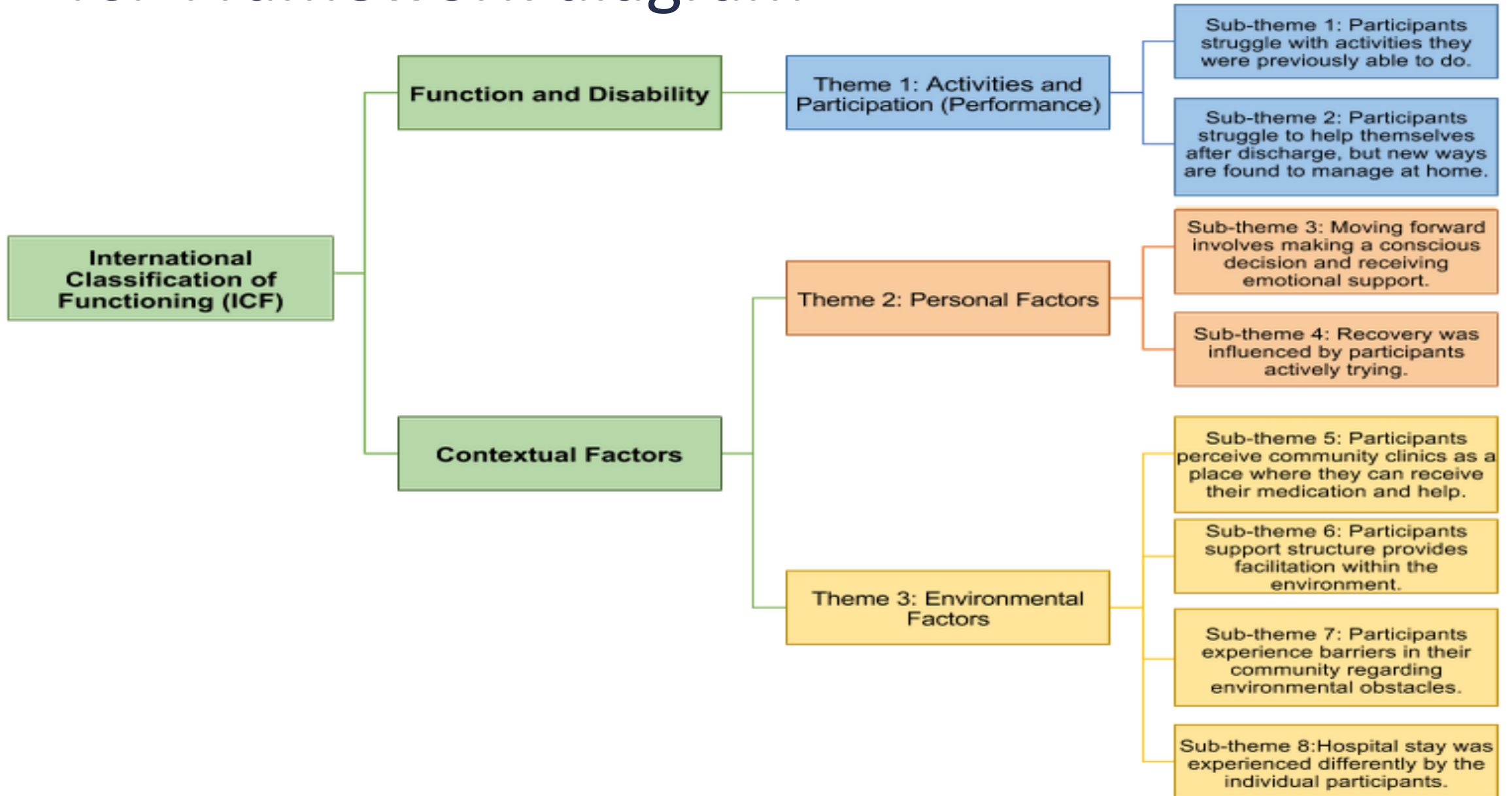
Findings



ICF Framework



ICF Framework diagram



Theme 1

Activities and Participation

- Participants struggle with activities they were previously able to do.
- Participants struggle to help themselves after discharge

“No, it’s not the same anymore, there’s a difference, it’s clear that the things that I do were done by someone who is ill.”

Theme 2

Personal Factors

- Moving forward involves making a conscious decision and receiving emotional support.
- Recovery was influenced by participants actively trying

*“...daai probeer wat in jou is, dit help jou om gouer te herstel.”
(That trying that is in you, it helps you to recover faster.)*

Theme 3

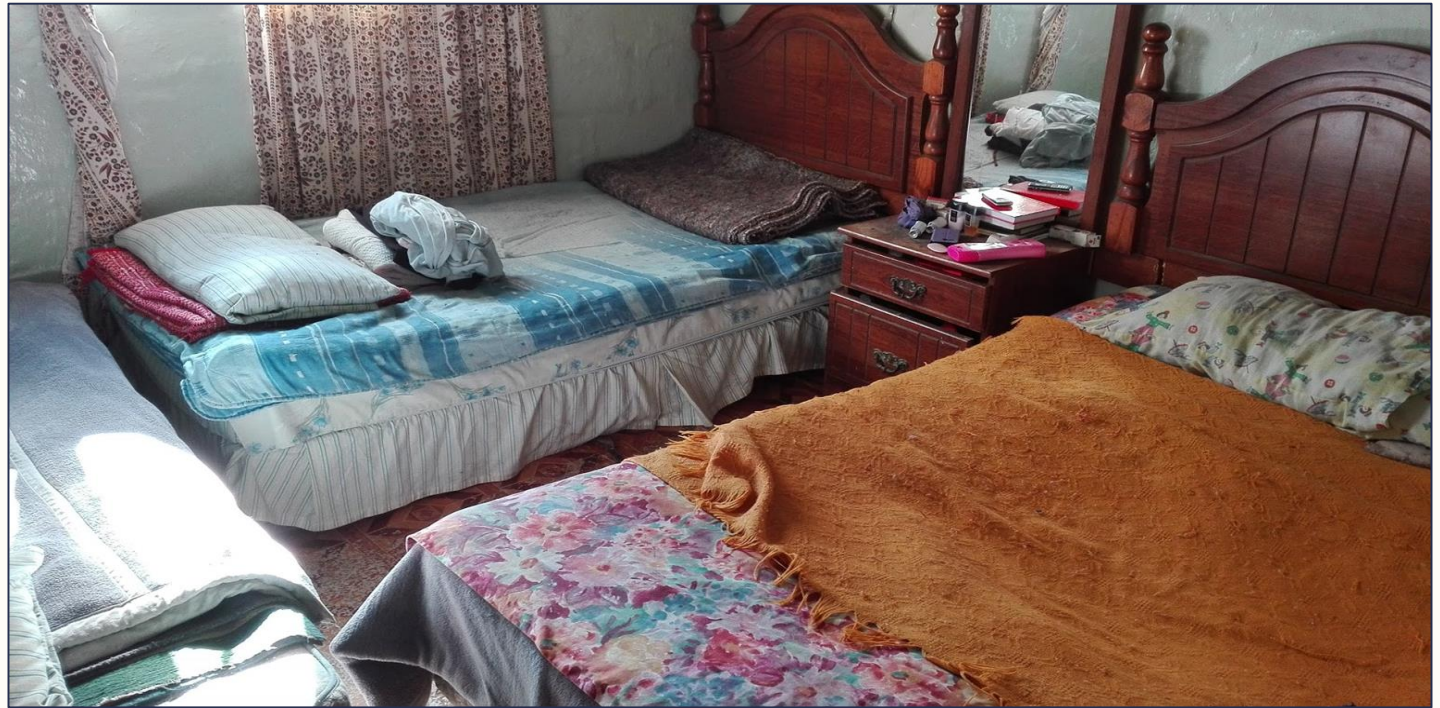
Environmental Factors

- Clinic's perceived where to receive their medication and help
- Support structure provides facilitation within the environment
- Barriers in the community regarding environmental obstacles
- Experience of hospital stay and inpatient care

Ek was nog nie uit nie, want die stoep [trap] trek my so bietjie ter.., druk my so bietjie terug hy's te hoog."

(I haven't been out yet, because the step, pulls me a bit back he is too high.)

Physical Environment





Conclusion and recommendations

Conclusion

- Quantity & quality of intervention is influenced by high turnover rates
- Reintegrating back into the community requires finding new ways
- Personal motivation & support influenced the recovery process
- Environmental facilitators and barriers impact the recovery process

Recommendations

- Difficulty in transferring skills from hospital to home
- Effectiveness of assistive devices
- Caregiver Education
- Referrals

Acknowledgement

Jerome Fredericks, Ms Mia
Duvenage, Johanine de Lange,
Chané le Roux, Emma Loubser, Lisé
Marais, Lize Meyer, Danielle
Moore, Dr Lizahn Cloete.

