17. Promoting independence in daily living activities

17.1 Introduction

The ultimate goal of rehabilitation is to help someone to do as much as possible for himself/herself within the limitations of any residual disability. If this aim is to be achieved, there must be no delay in starting self-care activities. **From the onset of the stroke every activity of daily living can and must be incorporated into the treatment plan.**

Rolling in bed, bridging, double arm elevation, rolling to reach for articles on a bed table, rolling to sit up, sitting to standing and standing to sit have all been shown as necessary steps in the rehabilitation programme. These are also steps towards self-care. In addition, someone who has had a stroke must learn to dress and undress, wash and feed himself/herself and to be independent in personal hygiene. In practising these activities normal patterns of movement will be adopted. Furthermore, these activities are also important for recovery of the sensory loss.

All self-care movements will be active-assisted in the beginning and with the improvement of the individual’s motor function should become active-voluntary movements. Again, it is important to **avoid the frustration of failure thus any progress forward** in the rehabilitation programme must be made **within the person’s capability.**

**For further information See the WHO manual Training Package No 14**

**How to assist someone during daily activities**

- Encourage the person to carry out daily activities using normal patterns of movement whilst also stimulating the person’s senses

- Work with the person to try to solve the different problems that may be present (on the following pages there is advice on how to carry out different activities of daily living)

- Ensure that the individual is involved in meaningful activities

- You can assist the person when she handles an object. Guide her hand with your own hand placed on it.

- You can guide and control the whole body of the person from her affected side
17.2 Undressing

- the person sits with his feet flat on the floor
- the affected arm is hanging down between his knees
- he pulls the garment over his head with the unaffected hand
- he pulls the unaffected arm out the sleeve first
- then with his unaffected hand he takes out the sleeve from the affected arm

Fig. 95
You can control the person’s balance in the sitting position, keeping her affected shoulder forward and the elbow straightened

17.3 Washing

If the person you are training cannot stand to wash himself, he can sit on a plastic stool or a chair.

**How to wash the face, trunk and the affected arm with the unaffected hand**

- a washmitt can be made by cutting two pieces of towel to fit the hand size and then sewing them together
- you can guide his affected hand in holding the washmitt while he puts the unaffected hand into the mitt
- he can then wash himself (with assistance from you if needed)

Fig. 96

Fig. 96.1

the affected arm in a wash-basin or other small basin paced on a table
**How to wash the unaffected arm with the affected hand**

- the person wears the washmitt on the affected hand keeping the arm hanging down between the two legs
- the unaffected hand pulls the washmitt up
- the unaffected arm is kept forwards, placed on the wash-basin

- you can guide the affected arm, supporting it from the elbow and keeping the shoulder forward

**How to wash the lower limbs**

**Fig. 98**

- the person brings the affected leg onto the unaffected one using both hands

**Fig. 98.1**

You can assist in washing the leg by providing shoulder support

**Fig. 98.2**

- she washes her affected leg with both hands
Personal hygiene

- the person stands in front of a wash-basin, affected hand placed on it (see fig. 41.1)
- he washes himself with a washmitt using the unaffected hand
- control the person’s position, ensuring an equal weight-bearing on both legs

17.4 Using the toilet

Some adaptation may be needed to the toilet especially when used by someone who has had a stroke in the last few months.

A rail beside the toilet or handles on the wall may be needed to help with moving onto and off it

or

a walking frame may be used for this purpose

Fig. 99
(the same position can be used for hair combing, tooth brushing, applying cosmetics etc.)

Fig. 99.1

Fig. 99.2
When using a squatting toilet, a toilet seat can be made from wood

**Fig. 99.3**
everything the person needs should be in easy reach beside the toilet

or

a commode can be made from a wooden chair (the chair is placed over the toilet)

**Fig. 99.4**

- Cleaning and washing the bottom area after defecating

**Fig. 99.5**

**Fig. 99.6**
Again, it is important to transfer weight from one side to the other in the use of both arms
17.5 Self-dressing

Self-dressing should be part of the self-care plan as early as possible. This means it should be tackled as soon as it can be approached in a therapeutic way using the development patterns of movement in the correct sequence.

How to put on a T-shirt

- Put the T-shirt on the unaffected thigh
- Keep the affected arm hanging down relaxed
- With the unaffected hand put the T-shirt on the affected arm above the elbow
- Put the unaffected arm through
- Then the T-shirt is brought over the head with the unaffected arm

Fig. 100

in the beginning, when pulling the T-shirt on completely, lean the trunk forward slightly

Fig. 100.1

When putting a blouse on, the person should dress the affected side first.

He should wear loose-fitting clothes that open easily in front (e.g. with press buttons – also known as “press studs”, “snaps”, “poppers”).

If a woman has difficulty in fastening a bra:

- she can fasten the bra in front, pull it around the neck, then put her arms through the straps or
- the opening can be made in the front part using a press button or velcro
How to put on trousers or a skirt

The starting position is illustrated in fig. 98. Those individuals who have problems in balancing may sit in front of a table or the bed.

Fig. 101
Help the person by guiding his hands

Fig. 102
You can control weight-bearing on the person’s affected foot

• ask him to cross his legs
• with the unaffected hand he puts the trousers on the affected leg first
• then he puts his foot down, heel in contact with the floor

Fig. 103

• he reaches the standing position,
• he pulls up the trousers using his unaffected hand
• then he sits down to button or zip them up

How to put socks and shoes on
• The starting position is illustrated in fig. 98. If the person is unable to cross his affected leg, he can use his clasped hands for help. This solution is important as it also keeps the affected shoulder forward.

**Fig. 104**
• he puts the sock on with his unaffected hand. The sock is kept open with the thumb, index and middle finger.

**Fig. 104. 3**
how to lace shoes using one hand

• using the position illustrated in fig. 104
• the person puts the shoe on the front of the foot with the unaffected hand
• with the foot on the floor, press down from the affected knee to introduce the heel into the shoe

**Fig. 104.1**

**Fig. 104.4**
if the person wears sandals, tie it onto the affected foot with a strap

**Fig. 104.2**
Shoe-horn with a longer handle
17.6 Eating and drinking

Sometimes someone may have difficulty in chewing and swallowing food because of motor loss in the neck, face and tongue muscles on the side affected by the stroke. If the muscles are very weak start with small pieces of food (or mashed food). Encourage the person who has had a stroke to use the affected side of her mouth when eating. This will promote bilateral movements of the mouth and face, strengthening the weaker muscles.

If necessary assist with jaw control; this will help the person to keep her mouth closed while chewing and swallowing (see WHO Manual, TP 25).

Do not let her eat or drink while lying down because this makes it very difficult for her to swallow. A correct sitting position with the trunk upright helps chewing and swallowing.

**Fig. 105**
- the person leans forward over the table, trunk upright
- the affected arm is straightened, the shoulder forward, elbow on the table

A non-shifting surface (i.e. a rubber mat or a wet cloth) may be placed on the table to prevent movement of the plate.

When the individual reaches an advanced enough stage to begin using both hands for feeding, or when a right-handed person begins using her right hand again, cutlery with various sizes of grip may be useful.

**Fig. 105.1**

The equipment must be adapted to suit the person’s handgrip. Foam rubber, cloth or other material can be wrapped around the handles. When it is difficult to reach the mouth, the handle can be bent.

**Fig. 105.2**

in the early stages you may need to guide the person in feeding herself

**Fig. 105.3**
correct position

**Fig. 105.4**
wrong position
when a right-handed person reaches an advanced stage he may begin using his right hand

if the affected hand is too weak to hold the cup, the person can drink from a straw or she can use a cup with two handles

17.7 Household activities
See WHO Manual, training package 29

After a stroke, the person must learn to use the affected arm as much as possible when carrying out all household activities. For example when dusting furniture the cloth should be used with both hands (the unaffected hand guiding the affected one). The affected hand may be used in washing up, doing the washing, cooking, etc.

Fig. 106
Washing up

These activities are important not only for the recovery of movement but also for the improvement of tactile sensation

Fig. 107
doing the washing

Fig. 108
Preparing food

17.8 Keeping active

See WHO Manual, training packages 28 and 30
Those who have recovered from a stroke must still take part in family life, play, go to work and remain involved with their community. Some assistance or some equipment may be needed to do some of these activities. With the support and encouragement of their family, friends and the community they can become active and useful members of society again.

17.9 Other aids and suggestions for self care
• different ways to lace up shoes using one hand

• sequence showing how someone can tie his tie using one hand

**Velcro**

• *Velcro* strips may be used instead of buttons to fasten trousers, skirt other garments.
• A handle can be made thicker and easier to hold by pushing it into a piece of foam

• shanks may be bent to fit the different grips

• a removable handle, which the hand slips under, may be used to hold a cup with the affected hand

• other solutions

the edge of a plate can be made higher
• using a clip and a small stripe of plastic or tin-plate

• moulding thermo-plastic material

• different supports can be made to fix a pot on the stove/fire when cooking