

6.6 Leisure and Social Activities

There are many considerations that are crucial to promoting safety and optimizing recovery when working with people who have had a stroke. The TACLS Quick Reference Guides were developed from the TACLS resource and can be used as quick reference to help *support healthcare providers* and informal caregivers who may not typically work with and care for people who have had a stroke.

We recommend reviewing the full **TACLS resource** for more complete information:
strokebestpractices.ca/resources/professional-resources/tacsl

Quick reference guide highlights

- **Always follow the current care plan for the person that you are working with.**
- Following stroke, people should be screened for pre-stroke and current leisure goals, interests, and social participation.
- Meaningful leisure and social activities post-stroke are very important as they give people a positive sense of self, offers meaning to their life and enhances their quality of life.
- Leisure must be meaningful for the person you are working with and not just a “time-filler”. Meaningful leisure activities play an important role in helping someone who has had a stroke occupy their time in a meaningful way, structure their day, and maintain physical and mental well-being.
- Leisure can help meet the person’s needs for: social connection, fitness, sense of accomplishment and control, intellectual stimulation, creative expression and stress relief.
- Getting to know the person you are working with can help with identifying and planning appropriate leisure activities.
- After a stroke, a person may be able to return to their previous leisure activities however, they may also need some modifications to support the previously enjoyed activity (please see ‘assistive devices’ below for examples). A person may also take up new leisure activities.



How you can help

- Learn more about the person you are working with and their interests by asking if they enjoy leisure activities, if so, what kind, with whom, when, and where.
- If a person is unable to describe their leisure interests due to communication or cognitive difficulties, you can:
 - Work with your team to create a resource list that includes activity ideas.
 - Show pictures of various leisure activities and ask the person to point to options that they might enjoy.
 - Speak with family members or have family members bring items related to previous interests or hobbies.
 - Consult with the team speech-language pathologist regarding strategies to support communication related to leisure activities.

- Look for community and online resources. Community organizations offer many activities; check the community newspaper, leisure guides, recreation centre brochures and websites for information on local organizations to identify options and see what may be coming up.
- If you are unsure whether an activity is safe or appropriate, want to know how to modify an activity, or would like to receive recommendation(s) on assistive devices, consult the recreational therapist or occupational therapist (OT) on the care team.
- **Assistive devices** are available to help people with impairments (such as vision loss, decreased mobility, and/or the use of only one hand) take part in leisure activities. Consult with the OT for additional assistive devices to support leisure activities. Assistive devices are available to aid with leisure activities such as:
 - Games (e.g., card holder for one-handed playing, automatic card shuffler, large-piece jigsaw puzzles, pool cue holder).
 - Reading and writing (e.g., book holder, audiobooks or eBooks, large print crosswords, Sudoku, word search puzzles).
 - Computers (e.g., modified keyboard, voice recognition software, narrator which can read out loud what is displayed on a computer screen).
 - Arts, crafts and music (e.g., enlarged grips for pens, pencils, paint brushes, and other tools, one-handed knitting and crochet, needle threader, online tutorials).
 - Outdoor activities (e.g., three-wheeled bicycle, fishing rod holder that secures the rod to a body vest, the wheelchair or side of the boat, raised garden/ flower beds).
 - Sports (e.g., pool noodles and life jackets for swimming, wheelchair based sports, stick curling, bowling ball ramp or bowling ball pusher).

Note: This information represents some of the priorities of care related to leisure and social activities; consult the occupational therapist or recreational therapist for any questions or concerns regarding leisure and social activities.

References:

1. Canadian Stroke Best Practice Recommendations: www.strokebestpractices.ca; **Transitions and Community Participation Following Stroke**, 6th Edition, Section 4.5
2. Taking Action for Optimal Community and Long-Term Stroke Care (TACLS) – **Leisure and Social Activities**

Taking Action for Optimal Community and Long-Term Stroke Care is for informational and educational purposes only and is not intended to be considered or relied upon as medical advice or a substitute for medical advice, a medical diagnosis or treatment from a physician or qualified healthcare professional. Healthcare providers and other users of this TACLS content are responsible for adhering to their professional college standards of practice, their organizational standards and policies, and for obtaining appropriate medical advice from a physician or other qualified healthcare professional prior to acting upon any information available through this publication.