



ADAPT study - collaborative and creative approaches to developing support for stroke survivors to stand and move more

Funded through the [National Institute for Health and Care Research \(NIHR\) Applied Research Collaboration Yorkshire & Humber](#), Dr Jess Johansson is leading the ADAPT study which focuses on adapting the existing Get Set Go intervention, originally developed and tested as part of the [RECREATE study](#). Get Set Go aims to encourage stroke survivors to stand and move more in both the inpatient hospital setting and at home. [The ADAPT study](#) uses an ideal type approach as part of a secondary analysis of RECREATE's patient interview data. In this process, we establish different "types" based on individuals' characteristics, attitudes, beliefs, and behaviours around standing and moving.

Workshops are conducted with stroke survivors, carers, and NHS professionals from Bradford and Leeds inpatient and community stroke services. There is also outreach work to gain a more diverse range of voices in addition to the structured workshops. Mark Chappell, one of the stroke survivors who attends the workshops, is a lead for the stroke charity Say Aphasia, alongside his wife. He has a keen interest in the arts and taught himself to create art with his non-dominant hand after his stroke. Given his personal story and passion, he was invited to produce art for the project to communicate the different "types" identified in the study. This creative process also aims to elicit creative thinking in the workshops, encouraging participants to explore and engage with the material in new and innovative ways.

The ADAPT study offers a new way of working around policy making in the West Yorkshire region by integrating creative methods and collaborative engagement into the process of adapting healthcare interventions. Traditionally, policy making and intervention development can rely heavily on quantitative data and clinical expertise. However, by using an ideal type approach to analyse qualitative data from stroke survivors and NHS professionals, and incorporating workshops that include creative art as a communication tool, this study introduces a more holistic, person-centered, and community-driven model of influencing policy. In particular, the involvement of stroke survivors, carers, and NHS professionals from Bradford and Leeds in co-designing the intervention fosters greater local ownership of the process. This collaborative approach not only provides a deeper understanding of the lived experiences of stroke survivors but also ensures that the intervention recommendations reflect the realities and needs of the local community. As part of

the project, we are also planning an exhibition of the artwork produced by stroke survivors, which will be accessible to the public. This exhibition aims to engage a more diverse audience, offering the broader community an opportunity to interact with the study's findings and the personal stories of stroke survivors through art. By creating a space for local voices and creative thinking, the ADAPT study promotes a shift towards more inclusive, dynamic, and community-based approaches in healthcare policy and intervention development, making it a new way of working in the West Yorkshire region.

Balancing the diverse perspectives of stroke survivors, carers, NHS professionals, and community organisations is a complex process, requiring careful management to ensure all voices are heard and reflected in the ongoing findings. The use of the ideal type approach has also presented challenges, as categorising individuals based on their unique characteristics, attitudes, and behaviours can oversimplify real-world complexities. Reaching a broader audience beyond the workshops has been another challenge, as identifying and connecting with diverse groups, especially those not directly involved in the healthcare system, requires ongoing effort and outreach. It has been particularly difficult to reach out to individuals from ethnic minority backgrounds despite working with our community engagement worker at ASR and reaching out to large stroke organisations. We are working on this and very keen to find ways around this. It is a challenge among the stroke research community and is something we want to be able to achieve. Additionally, managing the study's timeline and resources to ensure all aspects of the project are completed within the set timeframe and budget is of importance. These challenges have provided valuable lessons in refining the study's approach and ensuring the intervention remains inclusive, person-centered, and community-driven.

So far, the ADAPT study has highlighted several valuable lessons. First, the importance of collaborative engagement has become clear, as involving a wide range of stakeholders including stroke survivors, carers, NHS professionals, and community organisations has enriched the study by ensuring that diverse perspectives are integrated into the suggestions for intervention refinement. Additionally, the use of creative methods, particularly the involvement of a stroke survivor with a passion for art has proven to be a powerful tool in fostering engagement and generating new ideas that may not emerge through traditional methods. The workshops have also underscored the value of inclusive communication, where art can bridge gaps between clinical expertise and lived experience, making complex ideas more accessible.

Furthermore, reaching out to a broader community beyond the workshops has reinforced the need to ensure that the intervention is adaptable and relevant to a wide range of people, ensuring that no voice is left unheard.

Another significant lesson has been from using an innovative approach like the ideal type method. This approach allows us to move away from a one-size-fits-all model by recognising and categorising the diverse characteristics, attitudes, and behaviours of stroke survivors, which should lead to more tailored interventions. However, this approach is not without its challenges, as it requires careful balancing and interpretation to ensure that the resulting types are both meaningful, sensitive and provide a basis for staff to take appropriate action and support around standing and moving. These lessons emphasise the need for flexibility, creativity, and community-driven approaches in healthcare research.

- Get in touch with [Dr Jessica Johansson](#) for further information.
- Keep up to date with the study through their [Facebook page](#).