# **Unit 3 presentation**

"How can we create gaming concepts to develop motivation and encouragement during the recovery process for stroke survivors?"



Fig 1: (Vector stock, n.d.)

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### Introduction (identified gap and rationale)

#### What ? (topic):

Exploring gaming tools and techniques for stroke survivors to encourage motivation during the recovery stages

#### Why is it needed ?:

-I identified a gap in the market: gaming tools on a modern-day basis to motivate stroke survivors in their recovery phase (Denslow, E., 2022)

-17 million people are affected by a stroke every year worldwide according to Safe Stroke EU, in England alone there are 85,000 people (Hurst, L., 2022)

-Which is a striking amount of patients and rationale to develop and upgrade existing tools in order to benefit their live

-Currently there is a lack of contemporary and low budget tools and methods to support stroke patients mentally and physically



Fig 2: (Neuro X, 2022)

# Research question and connection with my observation and gap

- Gap in tools for the recovery stages, such as portable games and every-day objects to support and motivate patients

- Encouragement is required which could be infused with gaming techniques

- Focus of my research question is to work with creatives and recovery professionals who propose methods that can be used as gaming options (on a low-budget basis)

-> Goal: improving sensory reactions and reducing emotional isolation within the demographic

-In support to this alternative non-eurocentric well-being practices are investigated to support mental development as there is a gap to consider the possibility of these well-being techniques.



Fig 3: (Health times, 2022)



Fig 4: (Knapp, S., n.d.)

# **Target audience and stakeholders**

### Which demographic would benefit from it?

 Patients in their early 20's, and 45-60 yrs lack motivation the most (according to my primary research with a physiotherapist)

- Stakeholders also include people engaging with stroke survivors or who are close to them, i.e. physiotherapists and medical professionals, such as doctors



Fig 5: (Stephenson, B., 2021)

# **Overview of research methodology - Double Diamond**

Double Diamond Methodology - DISCOVER, DEFINE, DEVELOP, DELIVER (Elmansy, 2023):

My methodology involved the first 2 stages of the Double Diamond:

### **DISCOVERING -**

- 1. Primary research Qualitative data/Quantitative Interviews, surveys, exhibitions
- 2. Secondary research -, Podcasts, YouTube, websites, journals
- 3. Auto ethnographic Plant study using vastu science, sensory ball, tactile art and underwater bike

### **DEFINING-**

1. Considering gaming solutions based on data collected through AI experimentation

# DISCOVERY (Research) Primary research

Qualitative research (Interviews):

Vastu Shastra expert, Feng Shui expert, Physiotherapist, Doctor, Light Artist, Chromo therapist, Individual who has lived with a stroke survivor, Chinese student on colour and mandalas, Elderly patient who has experienced long stay in hospital, Stakeholder- peer from class, CSM, Stroke Survivor

Quantitative (Survey):

Exhibitions:

Yayoi Kusama exhibition, Tate Modern - experience dark/light rooms

London Tottenham Court Road Station - light display show - influence of mandala

### Interview with Vastu and Feng-shui experts: (Balancing Nature in space - air, water, wind, fire)

### Main findings:

Vastu, Interview 1:

-Exact placements of items and furniture needs to be taken into consideration in any room, as well as hospital rooms (e.g. no beams above patients' bed)

Vastu, Interview 2: -Relaxing and calming environment for employees and patients in hospitals -Quicker recovery

Feng-shui interview: -Moving furniture in correct space -Does not require any investments usually -Decluttering spaces

->Similar practices from different countries

### Primary research, Qualitative research Overview from Interviews:



Fig 6: (Flipkart, n.d.)

Bagua Map (Feng-shui)

Vastu Shastra

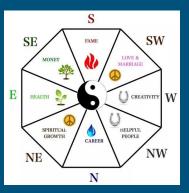


Fig 7: (magicbricks, 2023)

# **Interview with Light Artist**

### Main findings:

-Was not too interested in healing, but understood the effects of mood with lighting (e.g. visitors found art calming)

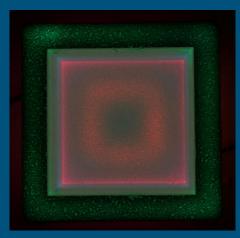


Fig 8: (Mark Boot, n.d.)



#### Fig 9: (Mark Boot, n.d.)



Fig 10: (Mark Boot, n.d.)

# Interview with the chromo therapist

### Main findings:

-Chromo therapist had no connection with stroke patients, however worked as a healthcare professional and was aware of benefits for healing and calm with other patients.

- Benefits include: anti inflammatory effect, regulation of blood pressure, improving self esteem.



Fig 11: (Tripadvisor, n.d.)



Fig 12: (iStock, n.d.)

### Interview with doctor

### Main findings:

- -Adequate tools and therapies exist (overall)
- -Physiotherapy, speech therapy, occupational therapy are the most efficient
- -Drug therapy is mostly ineffective in improving the patient's health
- -Strokes often come with depression, motivation really depends on the patient
- -Financing the patient's therapy is often an issue by the health insurance companies



Fig 13: (SHS Strands for College, n.d.)

### Interview with a stroke survivor

### Main findings:

-Card games, memory games and sensory games were most beneficial in their healing process

-Repetition of same game or exercise is a huge win

-Recording/documenting the healing process was crucial



Fig 14: Tran, A. (2022)

# Interview with a physiotherapist

### <u>Main findings:</u>

-More motivation from patients by working with physio and when training in groups

-Difficult and less motivated are the age groups in the early 20's and around 45-60 years

-Patients generally barely train at home by themselves

-If games or programs were connected digitally, the therapist would be able to track the progress

-Digital training groups via teams or zoom could boost motivation

-Classic training tools like skittles, balls and thera bands have lost their contemporary appeal



Fig 15: (My health career, 2022)

### **Primary research, Quantitative (Survey):**

### Rationale for creating the survey:

-Currently patients suffer from depression, which can often make patient's stay longer at hospitals (Department of Public Health and Primary Care, 2012)

-Long stay has led to a bed crisis in the NHS (Edwards, 2023)

-Based on this, I created a survey on hospital environments as stroke patients begin their recovery process within these spaces <a href="https://www.surveymonkey.co.uk/r/ZND6PZ8">https://www.surveymonkey.co.uk/r/ZND6PZ8</a>

-Focus of the survey was to highlight alternative well-being practices and whether this could encourage patients.

### Survey responses

### Weaknesses:

- I could not find stroke patients for this survey
- 20% claimed it would not be a good idea to integrate alternative healing spaces into hospitals

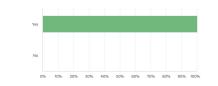
### Strengths:

 Nevertheless, results proved that alternative well-being approaches are considered effective in general for majority of the questions

#### Q6:

Do you feel staff would be more relaxed and positive if patients were calmer with the effects of alternative healing methods?

Answered: 10 Skipped: 0



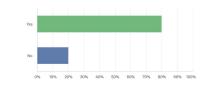
ANSWER CHOICES	<ul> <li>RESPONSES</li> </ul>	*
▼ Yes	100.00%	10
▼ No	0.00%	0
TOTAL		10

#### Fig 16: (von Thun, 2023)

#### Q5:

Do you feel that these methods could be introduced into hospital spaces to have a positive impact on the healing stages?

Answered: 10 Skipped: 0



ANSWER CHOICES	<ul> <li>RESPONSES</li> </ul>	*
▼ Yes	80.00%	8
▼ No	20.00%	2
TOTAL		10

Fig 17: (von Thun, 2023)

# Primary Research, Exhibitions (Tate Modern & Tottenham Court Road)





Fig 19: (Instagram, 2022)



Fig 20: (von Thun, 2023)

Fig 18: (von Thun, 2023)

# **Auto - Ethnographic/ Self-observation**

I was struggling to find relevant stakeholders during the holiday period for interviews, hence I decided to also test methods using self-observation

#### Underwater bike



Tactile art



#### Vastu healing plant



#### Sensory training ball



Fig 23: (von Thun, 2023)

Fig 24: (von Thun, 2023)

# Secondary Research (examples): art for healing, tactile, sensory

Podcast

Ana Marinho



Fig 25: (Marie, C., n.d.)

Psychoanalyst Carl Jung referenced Mandalas as 'a representation of the unconscious self', (Team, A.T., 2012)



Fig 26: (Spotify, n.d.)

MIND AND SOUL

# key points for using a mirror box

illusion must be complete

sit comfortably

relaxed atmosphere

put the injured hand in the box & forget about it

IMPORTANT! remove jewellery including rings and watches, also roll up sleeves



**Be Healthy with Ana Podcast** 



Fig 28: (Shopping, n.d.)



Fig 29: (Amazon, n.d.)



#### Fig 30: (Amazon, n.d.)

Neuro Orthopaedic Institute NOI (2009)

Be healthy with Ana podcast (2021)

# What did I learn from my research?

### Main findings:

- Stroke survivors require more attention to sensory responses connected to everyday items
- Tactile qualities need to be considered in gaming concepts
- Working in groups (online/offline) to motivate users
- Repetition, recording and timing are essential for tracking progress and need to be integrated into gaming
- Low-budget and accessible items which are portable are required

# DEFINING: Possible solutions for tools/games for stakeholders

Al Generated imagery: Prompt used for Al system: "Stroke patients playing motivating games to improve their exercising abilities"



Fig 31: (OpenAl, Dall.E2, 2023)



Fig 32: (OpenAI, Dall.E2, 2023)



Fig 33: (OpenAl, Dall.E2, 2023)



Fig 34: (OpenAI, Dall.E2, 2023)



Fig 35: (OpenAl, Dall.E2, 2023)

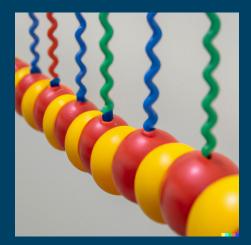


Fig 36: (OpenAI, Dall.E2, 2023)

Press it as often as you can whenever a light comes on

->Light changes and the more you press a scale goes up, similar to the "strong man game" that can be found on fairs Press down every time a light comes on

(can be made in a bigger version and with different materials of buttons)

->Similar to the catch the light game but in a small version

This could be larger and light up, every time it does the patients has to grab it and pull it down

->Each ball could have a different strength and also different textures to feel

# Surrealism influence for tactile qualities



Fig 37: (Gotthardt, 2018)

#### Fig 38: (OpenAl, Dall.E2, 2023)



#### Fig 39: (OpenAl, Dall.E2, 2023)





Fig 40: (OpenAI, Dall.E2, 2023)

Fig 41: (OpenAl, Dall.E2, 2023)

# Existing gaming concepts which can be developed for stroke survivors

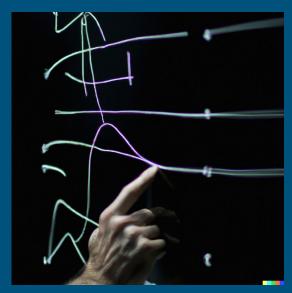


Fig 42: (OpenAI, Dall.E2, 2023)

Inspired by surrealism game "Automatic drawing" Stroke survivor is following lines instead



Fig 43: (OpenAI, Dall.E2, 2023)

Developing shape game, that could have different surfaces, materials, textures and sensory heating



Fig 44: (Weisinger, 2020)

Pac-Man inspired game using joystick (Hand and eye-coordination could be trained at the same time)

# **Interventions (description and rationale)**

Intervention 1: Mandalas for positive well-being

Observing emotional responses to mandalas with music



Fig 45: (Posterlounge, n.d.)



Fig 46: (Adobe Stock, n.d.)



Fig 47: (Freepik, n.d.)



Fig 48: (iStock, n.d.)

https://docs.google.com/presentation/d/11XMoKD0AZIY0cPAE4YUZY0YhrVay1v2MhmKH7xeXI0M/edit?pli=1#slide=i d.g252db150383\_0\_77

### Intervention 2: Your ideal hospital space

#### Envisaging how healing and hospital spaces can be improved

#### Participant 1

I would love to listen to calming sounds such as nature and see projections (e.g. moving clouds) on the ceiling if my mobility was limited to a hospital bed. This would distract my mind if I was feeling low or in pain.

Colour consideration such as healing greens and natural elements like plants for oxygen would stimulate the energies of the room, and offer fresh scent.

Blues can be cool but for the healing process feel too cold for healing.

Having another room in the ward dedicated to art forms and visuals would be great to break away from the confinement of a single room if isolated or ward if too noisy.

Images and symbols associated with love for more delicate patients would be encouraging with related softer colours e.g. pink



Fig 49: (von Thun, 2023) https://docs.google.com/presentation/d/1albHFynEdG7qqdfGOm6IWfkvfW8LK5mVadLXAByic5Q /edit#slide=id.q2553db98e4c\_0\_2

#### Participant 4

I would provide the patient some lovely and customized cushions or artefacts as their companions, which make them feel like they are not alone and help with their emotions and spiritual comfort. The artefact could be any shapes, but they should all match with the medical device testing standards.

Based on the patient's preference for the type of room environment, there will be a light projector in the room for them to choose the environment they would like to immerse with. Even though some patients are not able to go outside to relieve boredom, they can still have the opportunity to engage with a different environment with the digital effects.



### Intervention 3: Mobility in water for stroke survivors

Suggestions for water and gaming exercises

#### Participant 1

Alongside walking in water, stimulation of arms and movements, some fun context could be added if patient is physically able and to take away the focus on exercise by creating a revised version of a watergun. This pumping action and moving of fingers could be incorporated into games for the pool such as aiming at a target or through rings



Fig 51: (von Thun, 2023)

https://docs.google.com/presentation/d/1P3tc\_4D\_fepWtpY4x2XVXITEYpkQfgrvm85N 5zC4ZvM/edit#slide=id.g259ac49357a\_0\_2

### Intervention 4: Sensory Responses

Intervention was specifically for the physiotherapist to gain feedback and insight on tactile and sensory responses Surrealist inspiration (teacup) was again applied to this intervention

### Main findings:

- -For development of gaming concepts further consider:
- ->Hot/cold, vibrations (to reach deep muscles)& diverse structures
- ->Adding levels to games
- ->Working with music (like the "Simon game" does)



Fig 52: (Fun Stuff, n.d.)

https://docs.google.com/presentation/d/198uJv7O\_ktfOBLIH6hbVM8HCM2IaVYwqUny9mP70hoc/edit?hl=de#s lide=id.g2757e86b1d6\_0\_3

### Conclusion

#### Strengths:

-Intervention 4 was most valuable for my direction

->Rationale: confirmed my ideation and research stages

-Physio and stroke survivor gave the most valid feedback to build on the solution for the research question

-Low budget gaming concepts have been considered as starting points for development

#### Weaknesses:

-It was difficult to find all existing games in order to avoid repetition

-Intervention were digital based, which was good for the time, but needs to be more developed now

#### Going forward:

-Finalize gaming instructions, develop 3D prototypes e.g. everyday objects

- Consider how to include repetition in gaming instruction and documentation of progress (feedback from stroke survivor)

#### How will games be more motivational?

Through repetitions, recording, sharing work with physio and though reaching levels

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