



Karolinska  
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# Using engaging occupations to promote health in neighborhoods characterized by low socioeconomic status

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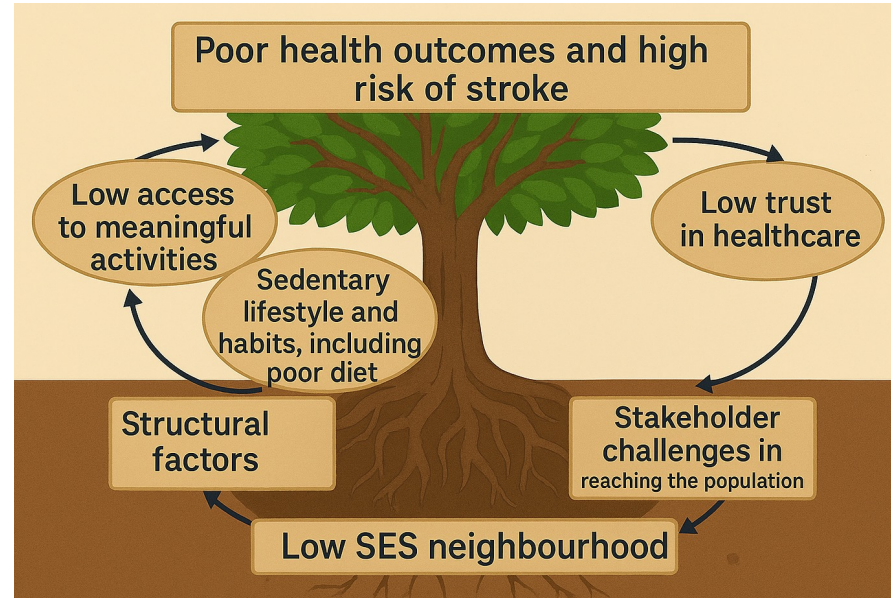
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# Challenges

A growing health divide between neighborhoods of high and low SES including stroke incidence and risk factors  
(Pantoja-Ruiz et al, 2025)

Our research has shown that stroke prevention (Make My Day) based on participation in health-promoting engaging occupations is effective in reducing risk for stroke, but does not reach all risk groups (Johnsson et al, 2025)



Johnsson, C., Asaba, E., Guidetti, S., Åkesson, E., Hagströmer, M., & Patomella, A. H. (2025). Make My Day—Stroke Prevention Grounded in Engaging Everyday Activities in Primary Healthcare—A Single-Blinded Randomised Controlled Trial. *Journal of primary care & community health*, 16.

Pantoja-Ruiz, C., Akinyemi, R., Lucumi-Cuesta, D. I., Youkee, D., Emmett, E., Soley-Bori, M., ... & Marshall, I. J. (2025). Socioeconomic status and stroke: a review of the latest evidence on inequalities and their drivers. *Stroke*, 56(3), 794-805.

# Aims- two studies

To explore experiences of people with high risk of stroke regarding their opportunities to engage in health-promoting occupations in neighborhoods with low SES

To refine a relevant and more equitable stroke prevention program(Make My Day) for people with high risk of stroke residing in neighborhoods with

low SES



# Design

## Study 1: Qualitative interviews (n=17)

Persons at high risk for stroke

- residing in areas with low SES and high stroke incidence (i.e. Skärholmen)
- between 45-65 years of age
- have high blood pressure (>140/90) and at least two modifiable stroke risk factors (smoking, diabetes, hypertension, low physical activity, or overweight)

Thematic analysis

Stockholm, Sweden  
Primary health care is tax-subsidized  
Segregation between neighbourhoods

## Study 2: Co-design workshops

Vignettes based on study 1 results

Stakeholders groups

- Persons at risk for stroke and their family members residing in areas of low SES and high stroke incidence
- Rehab professionals from primary healthcare (OT, PT, dietitians)
- Community (workers)
- Medical specialists from primary care units (Nurses, GPs and other)

Iterative analyses between and within workshops

# Study 1: Opportunities to engage in health-promoting occupations



Theme 1: Motivation Meets  
Structural Barriers



Theme 2: Caught Between Caring  
for Others and Caring for Self



Theme 3: Living in a State of  
Vigilance: Fear Restricting  
Everyday Occupations

# Theme 1: Motivation Meets Structural Barriers

' I visit the local



swimming pool often...

I just sit in the bubble

pool. I can't swim. My

children can swim, I

would swim, but I can't

swim... but the bubble

pool makes me happy.

“

I would, for example,

go and swim. But I

need money to go

there



' Very beautiful forest,

so I am out there a lot

during summers. And

when the weather

allows it...It is not that

sanded (during the

winter). It feels like

you're locked in...You

just sit at home and

watch TV...Your

activities are limited

## Theme 2: Caught Between Caring for Others and Caring for Self



“The day here is so short. I come home, and we cook, we fix lunch boxes for our son ...I don’t have time for walking or other activities. At the end of the day, we are so tired...”



“I have a mother who is seriously ill, and it has taken up an extremely large amount of my time and energy lately. She has been ill for a long time.. as well as all the responsibility myself...there are a lot of thoughts and a lot.... So this has meant that I have put myself on pause a lot.”

## Theme 3: Living in a State of Vigilance: Fear Restricting Everyday Occupations

“Yes, then there is this thing, and we live in a neighborhood with criminality, a lot of criminality. And you know, what will be of my son? What will happen to him?”

“You feel worried all the time, and you need to see what is happening, who that person is, or something. You understand. Also, in the city, they are everywhere, so there is this worry all the time.

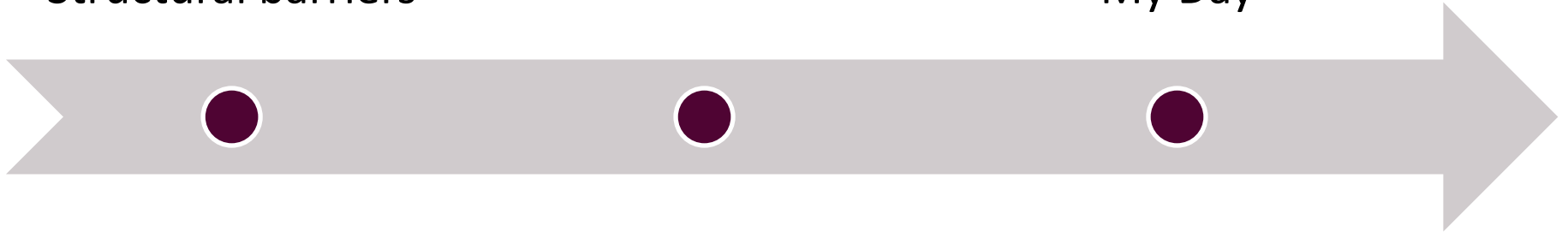
You don't feel safe

# Moving from individual experiences to stakeholder engagement

Co-design for  
adjusting Make

Structural barriers

My Day



Vignettes

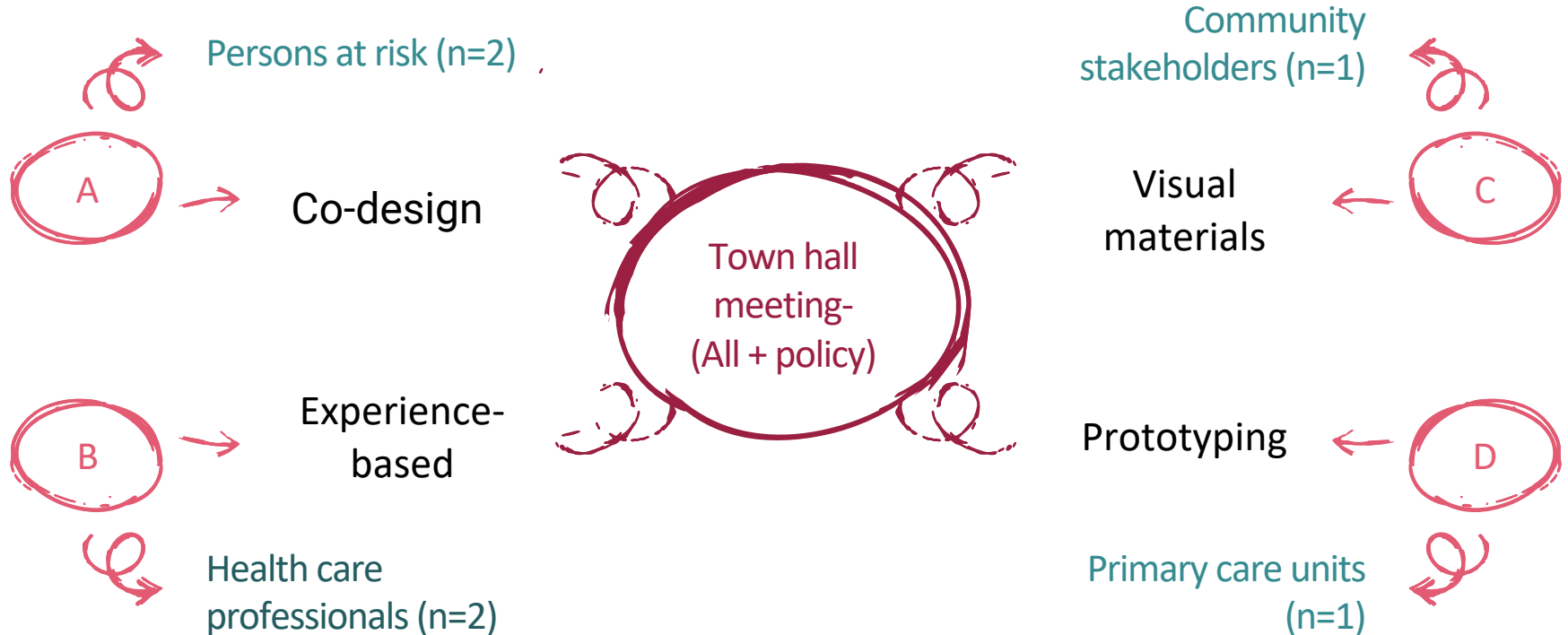
Maria is 48 years old and lives with her three children in a three-room apartment in a low SES neighbourhood. She works full-time as an assistant nurse in a nursing home

*I want to prioritize my children when I have time off from work*

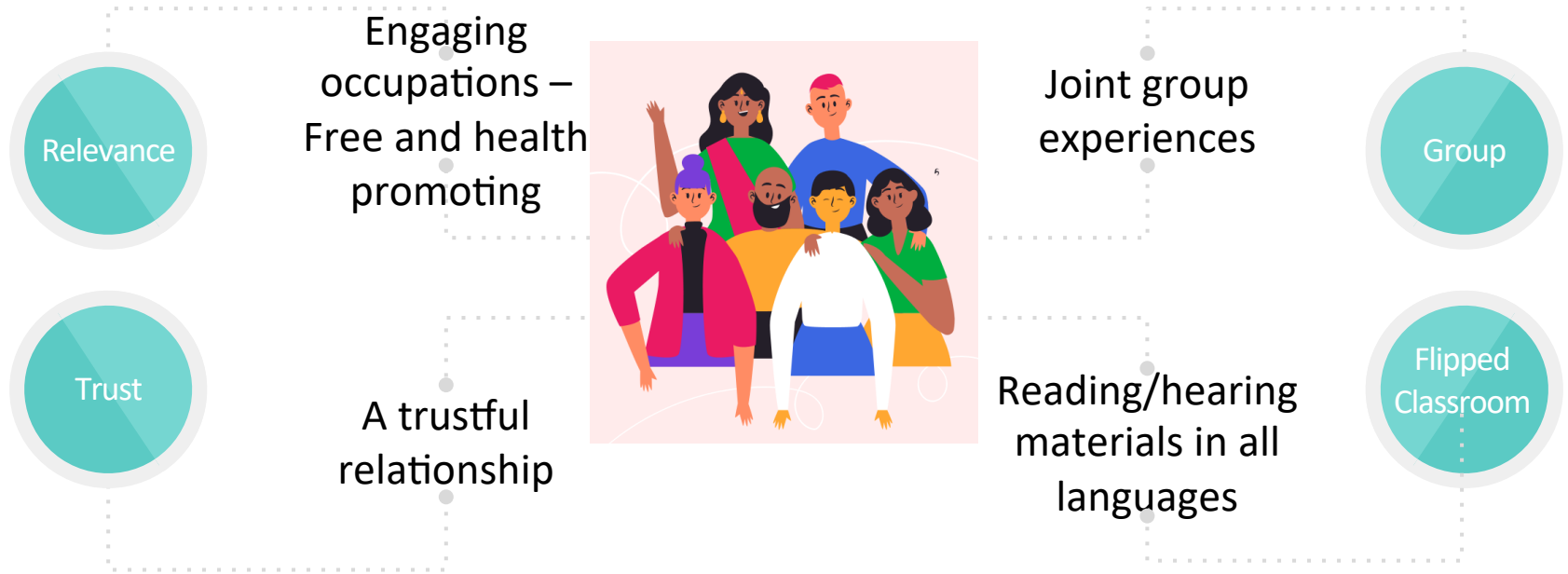
*I take walks in summer and I used to take dance classes*



# Study 2: Stakeholder workshops to refine a relevant and more equitable stroke prevention program



# Preliminary results: A collaborative approach is needed



# Conclusions- to be continued

- Structural barriers (e.g. environment, economy), responsibilities, lack of personal time, exhaustion, and neighbourhood safety restrict opportunities
- A refined stroke prevention program should be tailored to the circumstances and needs of the population

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Engage research group KI- see QR code

