

Look beyond the obvious

Exercise After Stroke

Practise the movement you want to improve but look beyond the movement itself.

Victoria Jones
Stroke Rehab Support

Look beyond the obvious

Recovery doesn't have an expiry date.

One of the biggest misconceptions about recovery after stroke is that it follows a set pattern or ends after a certain amount of time, but it doesn’t. The brain can continue to form new connections, strengthen existing ones and even shift responsibilities from one area to another months and even years after stroke.

Sometimes progress can feel like it has slowed or even stopped, but that doesn't always mean there is nothing more to work on. Sometimes we need to **look beyond the obvious** and find a different way in.

When a movement becomes difficult after stroke, it is understandable that we focus on the movement we want to improve.

If standing from a chair is difficult, we practise standing from a chair.

If reaching is difficult, we practise reaching.

If walking is difficult, we practise walking.

And practising the movement itself can be useful **but it isn't the only thing you can work on**.

Most everyday movements rely on a combination of strength, balance, co-ordination, weight shift and movement through different parts of the body.

Sometimes finding your starting point means b**reaking the bigger movement down and looking at the individual pieces that help make it possible.**



SIT TO STAND

Look beyond standing up

Standing up from a chair might look like one simple movement but there is actually a lot going on. You need enough **strength through your legs, hips and glutes** to lift your body, the ability to **shift your weight** forwards before you stand and enough **balance and control** to move from sitting to standing and back down again.

If standing from a chair is difficult, practising sit-to-stand itself can be useful but **it isn't the only thing you can work on**. Building leg strength, practising weight shift and working on balance and control can all help build the individual pieces that contribute to the bigger movement.

But before we think about strengthening, we need to think about **movement**. After stroke, sometimes the first step is simply finding the movement you can work with. That might mean moving a little further, a little smoother or with a little less support or guidance.

You can't strengthen a movement that isn't there yet. Strength and movement work together and as movement improves, there is more possibility to rebuild strength.

Seated Knee Extension

Start with the movement you have.

You might be able to fully straighten your knee, you might only have part of that movement or you might need some help to begin the movement at all. Wherever the movement is today, that's what you have to work with.

As the movement becomes easier, you can work towards a little more range, a little less assistance or more control. And if that gets easy, that's when we can begin thinking about adding resistance and building more strength.





If that gets easy...





[click here to see a video of this move]

or scan the QR code

¼ Hip Circle





If that gets easy...





[click here to see a video of this move]

or scan the QR code

Standing UP is only half of the movement

We spend a lot of time thinking about getting up from a chair but **how you sit back down matters too**.

Lowering yourself back into the chair **with** control requires the muscles through your thighs, hips and glutes to keep working as you lower your body.

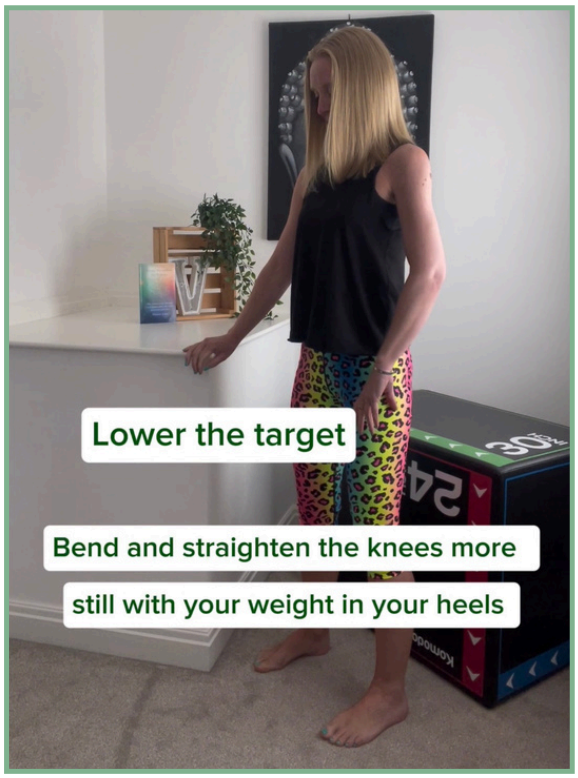
If you tend to drop back into the chair, working towards a slower, more controlled sit gives you another way to work on the strength and control that contribute to the bigger movement.

Controlled Stand to Sit





If that gets easy...





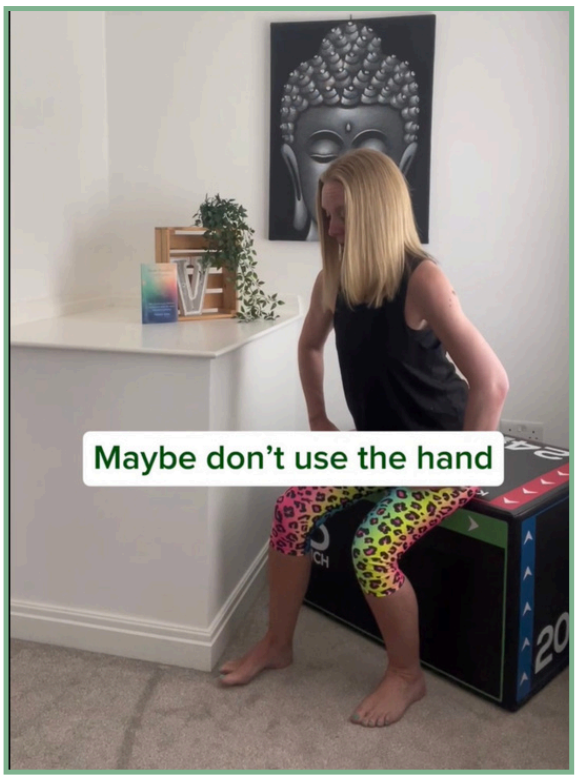
If that gets easy...





If that gets easy...





[click here to see a video of this move]

or scan the QR code

Look beyond strength

You can have the strength to stand but still find the movement difficult if you aren't able to shift and control your body weight.

Before we stand, we need to bring our weight forwards. Once we're standing, being able to **shift our weight** from one side to the other and from one leg to the other becomes important for balance and movement too.

Practising weight shift in different positions and directions gives us another piece of the bigger movement to work on.

Reach and Push





If that gets easy...





[click here to see a video of this move]

or scan the QR code

STEPPING

Look beyond the step

Taking a step might look like simply moving one foot forwards but, just like standing from a chair, there is actually a lot going on.

Before one foot can move, we need to be able to **shift our weight onto the other leg**, maintain our balance and have enough strength and control through the hips, glutes and legs.

Shifting more of your body weight onto one leg gives the other leg more freedom to move.

If stepping is difficult, practising the step itself can be useful but it isn't the only thing you can work on.

Working on **weight shift, balance, strength** and **control** can all help build the individual pieces that make stepping possible.

Look beyond the affected leg

When you lift one leg, the other leg has an important job too. While one leg moves, the leg you're standing on needs to support more of your weight and help you stay balanced.

After stroke, it is understandable that so much of the focus is on the weaker side of the body and of course working on that is incredibly important **but that doesn't mean we should forget about the stronger side**.

The stronger side can end up doing a lot of extra work after stroke — helping with balance, transfers and movements that have become more difficult. Research also suggests that strengthening the unaffected side may even help improve strength on the weaker side through something known as cross-education.

So don't only think about the leg you're lifting — think about the one you're standing on too.



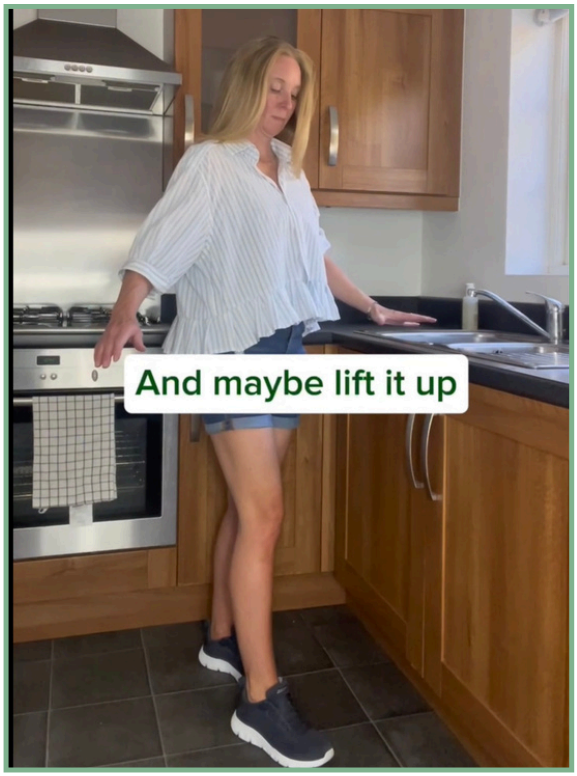
Step Forward and Back





If that gets easy...





click here to see a video of this move

or scan the QR code

Knee Lift





If that gets easy...





[click here to see a video of this move]

or scan the QR code

Step Over / Hurdle





If that gets easy...





[click here to see a video of this move]

or scan the QR code

If that gets easy...





[click here to see a video of this move]

or scan the QR code

Multi-directional Stepping

We step in different directions every day — forwards, backwards and out to the side — and each one asks us to shift our weight, balance and control where the foot goes.





If that gets easy...





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STRENGTHENING THE AFFECTED ARM

Look beyond the arm

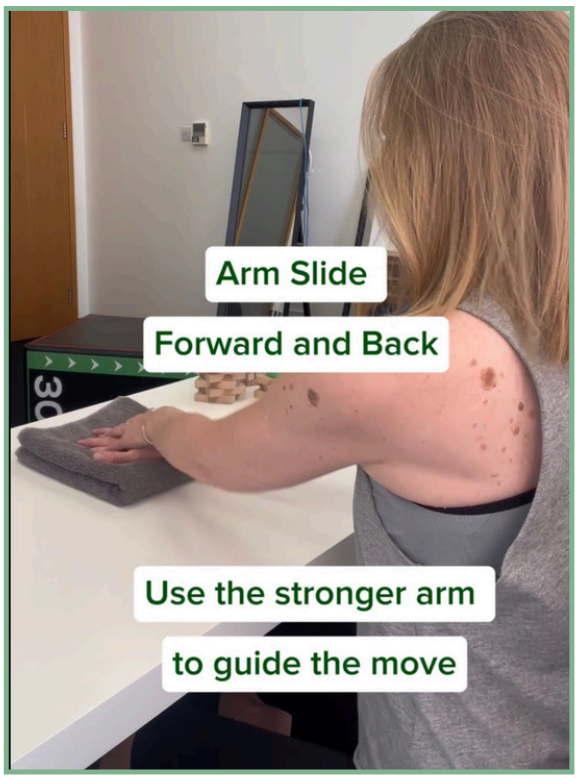
After stroke, it is understandable that so much attention goes to the affected arm, particularly when using it has become difficult.

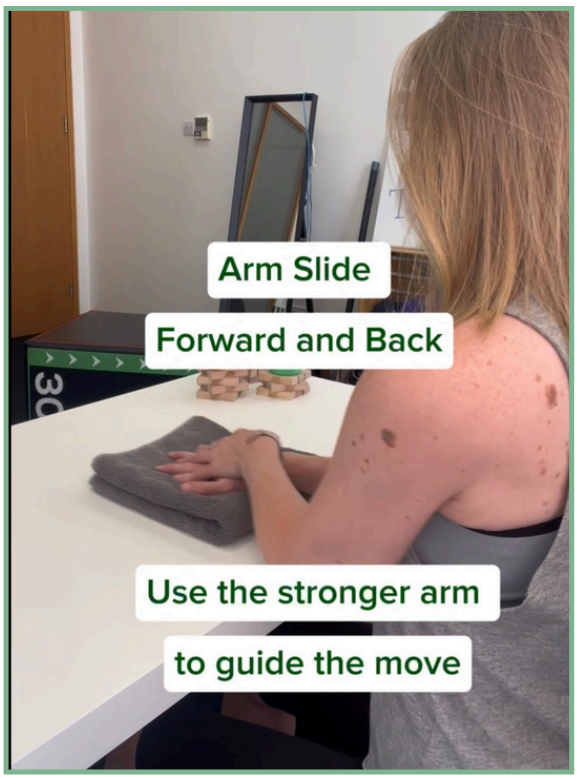
But using the arm can involve more than the arm itself. **Strengthening the shoulder, movement through the trunk, balance and the ability to shift your weight** can all play a part in how you use the arm.

If using the affected arm is difficult, working directly on it can be useful but it isn't the only thing you can work on.

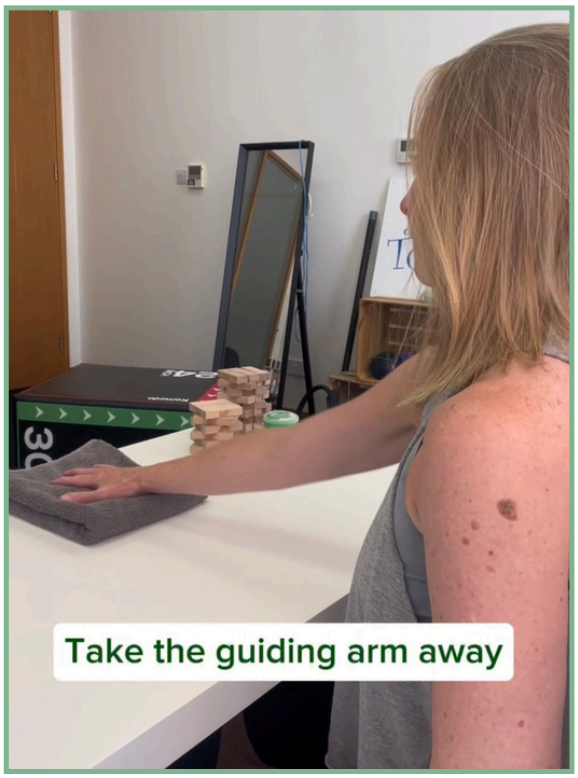
Arm Slide

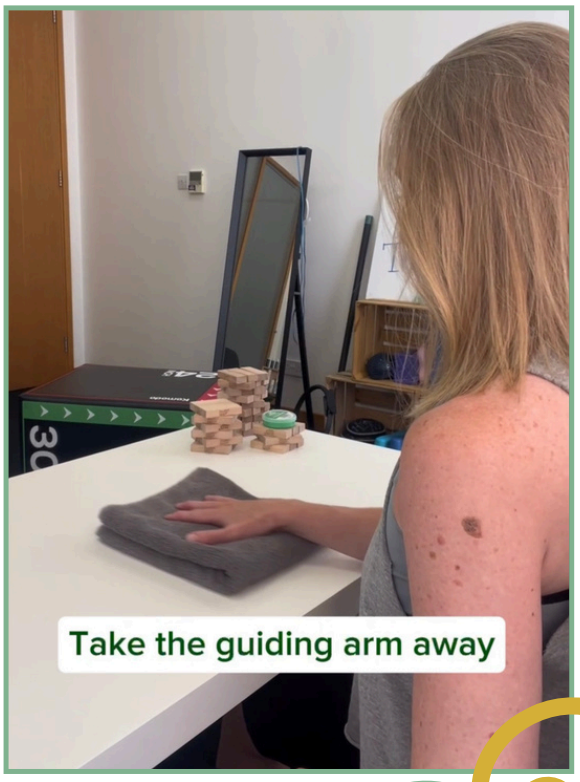
You can't strengthen a movement that isn't there yet. After stroke, sometimes the first step is working on moving a little further, a little smoother or with a little less support or guidance.





If that gets easy...





[click here to see a video of this move]

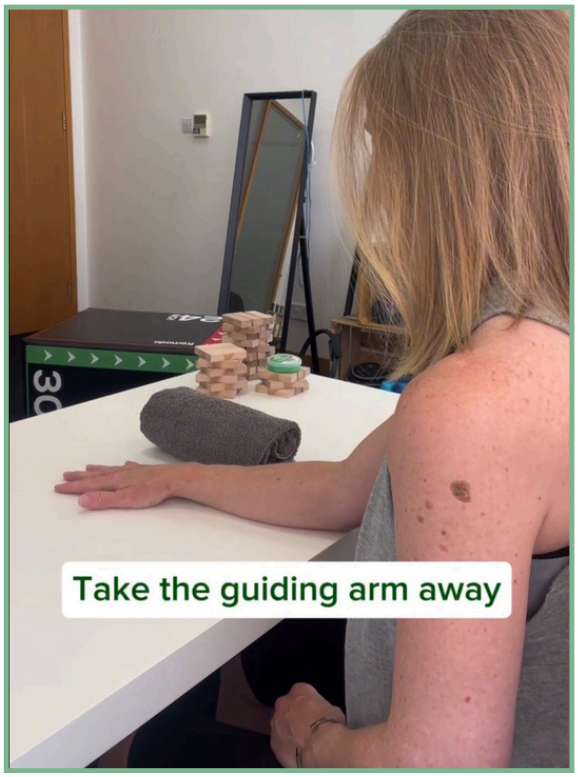
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Arm Hurdle





If that gets easy...





click here to see a video of this move

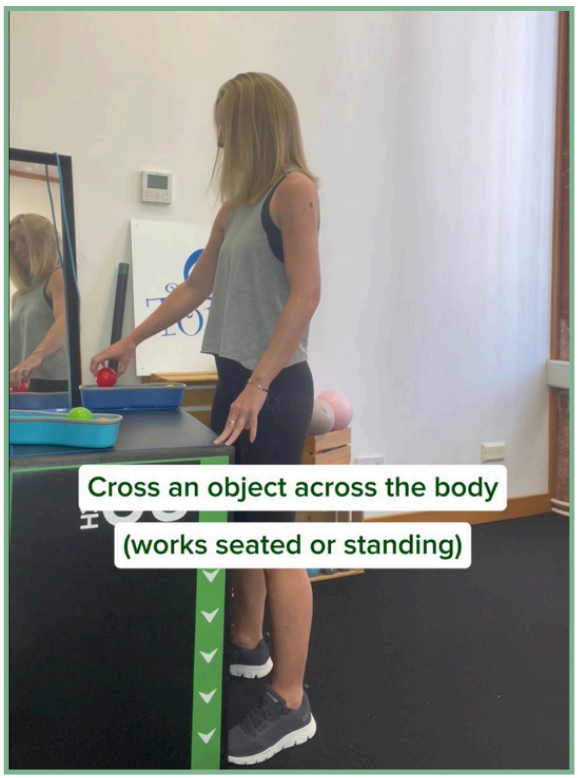
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Reach and Tap





If that gets easy...





[click here to see a video of this move]

or scan the QR code

Look beyond the affected arm

After stroke, it is understandable that so much attention goes to the affected arm but the unaffected arm still needs attention too as it can end up doing a lot more than it did before — helping with everyday tasks, supporting the affected arm and compensating for things that have become more difficult.

Working the unaffected arm doesn't take anything away from the affected side and may actually bring additional benefits. Research suggests that strengthening one side of the body can sometimes help improve strength on the other side too through something known as cross-education.

click here to see some exercises for the upper body using the unaffected arm

or scan the QR code

BUT I CAN'T USE MY HAND...

If opening your fingers, gripping or holding something is difficult after stroke, it can feel as though this limits what you can do with the whole arm.

But what the hand can do doesn't necessarily determine what the rest of the arm can do. Even if gripping isn't possible, there may still be ways to work the arm that don't rely on the hand. A supported arm slide is one example.

Stretching the hand can be useful if spasticity makes it feel tight, stiff or difficult to control but working on movement through the hand can be important too.

Towel Scrunch





If that gets easy...





[click here to see a video of this move]

or scan the QR code

*Every stroke is different, every recovery journey is different so progress is not always predictable, but it is **always** possible.*

WHERE YOU START DOESN'T DETERMINE WHERE YOU FINISH

Regular exercise can play an important role in stroke recovery but because **every stroke is different, every starting point is different** and the exercises you do and the way they progress should be individual to you.

The exercises in this guide are examples of ways you can **look beyond the obvious** and find different things to work on when a bigger movement or goal feels difficult. They aren't a one-size-fits-all exercise programme and not every exercise will be right for everyone.

If you experience **any** pain, significant weakness, spasticity, changes in muscle tone, problems with your shoulder, dizziness or difficulties with balance, please seek personalised advice from an appropriately qualified healthcare professional.

Wherever you are in your recovery journey, **never give up hope on what might still be possible**. Recovery **doesn't** have an expiry date and where you start does not determine where you finish.



Hi, I'm Victoria,

A stroke rehabilitation and prevention educator here to help bridge the gap between clinical therapy and the practical, ongoing support many stroke survivors and their families need as they continue their recovery beyond formal rehabilitation.

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