

A controlled feasibility study of a mobile phone supported client-centered ADL-intervention F@ce™ after stroke in Uganda.

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Introduction: In Uganda access to rehabilitation interventions is scarce, due to poor infrastructure, lack of effective public transportation system, poor social economic situations of people, and inadequate numbers of rehabilitation professionals, and furthermore, evidence based rehabilitation interventions are lacking. Mobile phones have been integrated in Uganda with a penetration rate of 52%.

The aim of this study was to develop a mobile phone supported client-centred intervention called F@ce™ and evaluate the; i) feasibility of the study design, ii) evaluate the outcomes on the perceived impact of stroke and iii) evaluate the perceived participation in everyday life among persons with stroke and their families in Uganda.

Method: A Randomized Controlled Trial (RCT) design was conducted with an intervention group (IG) receiving the F@ce™ and a control group (CG). 30 persons with stroke and their family members who met the inclusion criteria were recruited between March 2015- March 2016 from five different sites in Kampala. The mobile phone client-centred intervention involved clients setting targets using the Canadian Occupational Performance Measure (COPM), use of SMS reminders and calls for eight weeks.

Results: 13 participants received F@ce™ intervention (two dropouts) and 15 in CG. The feasibility of the design, method were reached in most aspects. There was a difference between the IG and CG groups between baseline and follow-up in COPM and self-efficacy in favour of the F@ce™ intervention.

Conclusion: The study confirms the acceptability of F@ce™ in Uganda and support the need of conducting a full powered RCT.