

Treatment and assessment tools for stroke patients with and without visuo-spatial neglect

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Propositions

accompanying the thesis entitled

Treatment and assessment tools for stroke patients with and without visuo-spatial neglect

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1. For a valid translation of study intervention programs to clinical practice, participants' adherence to the intervention should be taken into account (this thesis).
2. Virtual Reality is a feasible, safe and promising technique for the future of stroke rehabilitation (this thesis).
3. Involving feedback from both end users (patients) and experts (therapists) is crucial to develop acceptable and user-friendly Virtual Reality game-based rehabilitation methods (this thesis).
4. Health professionals should adopt a multimodal, client-centered treatment approach to stroke recovery that fits the patient's current stage of recovery (this thesis).
5. Qualitative research provides a more comprehensive picture of the consequences of stroke, grounded in the experiences of affected persons, which is essential in the development of interventions that are relevant to the individual patient (research area).
6. It is impossible to design game-based rehabilitation programs that appeal to all service users (patients and health professionals) (research area).
7. Use of virtual reality environments in cognitive rehabilitation offers the possibility to replicate real-life situations, thus producing more ecologically valid exercises, which, unlike traditional pen-and-paper exercises, promote the generalization of learning strategies to the real world (research area).
8. Reality exists in the human mind, and nowhere else (George Orwell, 1903-1950)
9. Rehabilitation games cannot work as stand-alone applications but must be included into a broader program involving patients, therapists, clinicians, hospitals, and institutions.
10. If the pieces do not fit into your puzzle... Try a different picture (Cass van Krah, artist, UK).