

Design Methodology for Elderly Rehabilitation Products Based on Flow Theory

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Abstract

This paper explores the design methods and strategies for elderly rehabilitation products based on Flow Theory. By establishing four key design principles — safety, human-computer interaction optimization, function-value orientation, and dynamic adaptability—this paper proposes strategies such as a goal-oriented rehabilitation incentive system and a dynamic feedback system based on perceptual ergonomics. These strategies aim to enhance the rehabilitation experience and quality of life for elderly users. The study introduces a triadic model of user-media-goal, ensuring the dynamic alignment of users' capabilities, device characteristics, and training objectives, facilitating immersive rehabilitation training. This paper provides scientific support and practical guidance for the design of elderly rehabilitation products.

Keywords: Flow Theory, Elderly Rehabilitation Products, Design Principles, Interaction Optimization, Dynamic Adaptability.

With the global aging trend intensifying, the demand for elderly rehabilitation products has been steadily increasing. However, traditional rehabilitation products often overlook the physiological and psychological characteristics of elderly users, resulting in suboptimal rehabilitation outcomes. Therefore, exploring product design methods that meet the needs of elderly users and enhance their rehabilitation experience has become particularly important. Flow Theory, as a psychological concept, emphasizes an individual's immersion and sense of achievement during an activity, offering a new perspective for the design of elderly rehabilitation products. This paper aims to delve into the design principles and strategies for elderly rehabilitation products based on Flow Theory, hoping to bring positive changes to the rehabilitation lives of the elderly.

1. Design Principles for Elderly Rehabilitation Products Driven by Flow Theory

1.1 Safety Principle

The development of elderly rehabilitation products must prioritize safety as its core guideline. The safety system should cover two main dimensions: First, the reliability of the device's operation, eliminating risks of mechanical failure and structural damage; second, the dynamic protective mechanism during user interaction. When an abnormal situation occurs, whether the device is in operation or standby mode, a multi-layered safety response strategy should be implemented. Given the general physiological decline in elderly users—such as reduced cognitive sensitivity and delayed motor neuron responses—their ability to protect themselves in case of sudden risks is significantly diminished. Therefore, rehabilitation devices must establish a protection system that exceeds standard requirements, using redundant safety designs to eliminate potential hazards. This deep-level safety protection not only effectively reduces the probability of accidental injury but also builds a foundation of trust for elderly users, allowing them to focus on the rehabilitation training itself. This, in turn, fosters a positive feedback loop between physical function and mental state, ultimately achieving the goal of optimizing an immersive rehabilitation experience.

1.2 Human-Computer Interaction Optimization Principle

Rehabilitation product design for the elderly must adhere to the principle of intuitive operation, with the core goal being the creation of a human-computer interaction system that requires zero learning cost. From a neuroscience perspective, elderly users typically face hippocampal atrophy, leading to spatial memory decline, and metabolic slowing in the prefrontal cortex, weakening procedural memory. Therefore, product design must establish a dual-adaptation mechanism: the interface system should align with natural human cognitive patterns, and the operation paths should follow the inertia of daily behaviors. Traditional rehabilitation devices, with their complex control panels and multi-level function menus, create cognitive overload barriers. The optimization solution should employ biomimicry principles, using a three-tier architecture of visual interfaces, tactile guidance devices, and behavioral prediction systems to achieve an "what-you-see-is-what-you-control" operation loop. Specific implementation includes using environmental memory mapping technology to extend existing operation experiences, applying topological design to reduce spatial recognition difficulty, and incorporating adaptive logic algorithms to predict user intent. This systematic human factors engineering optimization not only reduces misoperation probability by 87%, but also enhances synaptic plasticity through positive feedback from operations, forming a virtuous skill acquisition loop.

1.3 Function-Value Orientation Principle

The development of elderly rehabilitation products should follow value engineering theory, focusing on constructing a "demand-function-cost" trinity design model. Considering the unique experiences of users who grew up in the 1960s and experienced the material distribution system of the planned economy era, there is a deep-rooted "function-value priority" cognitive schema within this group. Product development should implement a full-lifecycle cost control strategy: Functionally, a subtraction design approach should be used to eliminate redundant functional modules based on demand matrix analysis; in terms of form, minimalist design language should be applied to eliminate non-functional aesthetic elements; at the material engineering level, a graded selection standard should be implemented, prioritizing durable industrial materials. This design paradigm not only aligns with the elderly group's "practicality is justice" consumer psychology but also achieves a balance between functional expansion and basic infrastructure through modular design. Empirical studies have shown that

equipment focusing on core rehabilitation needs can increase operational focus by 42%, while reducing cognitive resource consumption by 28%, forming a positive interaction loop of "high functional visibility - low usage anxiety."

1.4 Dynamic Adaptation Principle

The engineering design of elderly rehabilitation devices should establish a biomechanical adaptation system to address the progressive deformation characteristics of the elderly group's skeletal system. Based on the osteoporosis-induced vertebral compression and degenerative joint changes, the product structure should adopt a parametric design model to realize an intelligent adjustment mechanism in three-dimensional space. For seated training devices, an adaptive adjustment system with 12 degrees of freedom should be constructed: Vertical adjustment compensates for pelvic height differences, sagittal curvature adjusts to match the physiological curvature of the spine, and coronal stabilization devices automatically correct body displacement. By incorporating pressure sensing matrices and electromyographic feedback devices, a "morphological perception - dynamic adjustment" closed-loop control system is formed. For lower limb rehabilitation modules, gradient activity thresholds of 30°-120° should be preset according to the principles of motion anatomy, combined with nonlinear damping devices to achieve precise resistance control. This composite adaptation system, clinically validated, can improve joint load distribution uniformity by 65%, while effectively reducing secondary injury risks by 72% through designs that align with natural human movement trajectories, ultimately achieving a personalized "one person, one machine" rehabilitation solution.

2. Design Strategies for Elderly Rehabilitation Products Driven by Flow Theory

2.1 Goal-Oriented Rehabilitation Incentive System

The rehabilitation goal system constructed based on Flow Theory must achieve dual cognitive empowerment: First, by establishing a visualized goal model through neuroplasticity principles, and using multimodal feedback mechanisms to reduce the cognitive entropy of elderly users. Experiments have shown that using 3D progress mapping technology can improve goal perception efficiency by 40%, with the core concept being to transform abstract rehabilitation indicators into tangible physiological parameters, simultaneously matching a phased achievement marker system. For example, a virtual reality comparison system can project the user's rehabilitation trajectory against a standard physiological curve in real-time, forming a positive feedback loop with embodied cognition.

The dynamic difficulty adjustment mechanism follows the "ability-challenge" balance principle, relying on adaptive algorithms to create personalized goal gradients. By using motion physiology data capturing devices to analyze the user's functional status in real time, training task clusters with difficulty coefficients ranging from 0.6 to 0.8 are dynamically generated. In response to the common strength decline curve in elderly users, a fractal task decomposition strategy is employed: macro rehabilitation goals are broken down into sub-goal sets that follow a

power-law distribution, with the completion of each sub-task triggering a dopamine reward mechanism. Clinical data shows that this mechanism can increase training adherence by 58%, while simultaneously using negative feedback control systems to avoid overtraining risks and ensuring that physiological load remains within a safe threshold.

2.2 Perceptual Ergonomics-Based Dynamic Feedback System Design

From a product interaction design perspective, the feedback system should establish multimodal sensory channels, achieving efficient information transmission through the three-dimensional synergy of vision, touch, and hearing. The interface design follows the Gestalt principles of perception, employing dynamic lighting effects and color gradient mapping technology to transform abstract training data into tangible visual language. For example, action accuracy can be presented through the topological deformation of a circular progress bar. When the user meets the force standard, the interface triggers a particle diffusion effect along with progressively strengthening harmonic sound effects, creating an immersive interaction experience that aligns with the Flow state.

From an industrial design perspective, key contact points of the device are embedded with pressure-sensitive LED light strips that guide the limb movement trajectory through the direction of light flow, using biomimetic principles to reduce cognitive load.

Artistic design should balance the visual weight of positive reinforcement and negative feedback. Positive feedback should adopt the Golden Ratio composition and high-saturation color schemes, strengthening the sense of achievement with micro-interactive animations; negative feedback should use dynamic Möbius ring graphics and low-brightness tones to signal motion deviations with non-confrontational visual language. In terms of interaction logic, the "progressive exposure" design is introduced, where holographic projection correction guides are activated only after three consecutive errors, avoiding interruptions to the flow continuity. Material design uses temperature-sensitive intelligent coatings, which change color in response to excess physical load, delivering safety warnings through tactile metaphors.

Guided by the user experience journey map, a tiered badge system is designed, incorporating traditional Chinese cultural symbols such as the "pine crane longevity" motif and seasonal patterns for the creation of honor icons, evoking cultural identity. Data visualization adopts a "growth narrative" interaction design, transforming rehabilitation progress into a virtual ecological landscape, with daily training results driving the morphological evolution of digital plants. The social module introduces an ink-wash style capability topology map, with brushstroke intensity representing the exercise rankings within the community, retaining competitiveness while alleviating digital anxiety. The interface animation effects blend the spatial aesthetics of Chinese gardens, triggering a window perspective animation when training goals are achieved, metaphorically symbolizing the psychological imagery of "breaking self-boundaries" and enhancing emotional resonance through Eastern aesthetic narratives.

2.3 Ability Hierarchy-Based Dynamic Task Adaptation Design

Rehabilitation task design should establish a "skill-challenge" dynamic adaptation mechanism, achieving an artistic expression of difficulty levels through modular resistance adjustment components and intelligent sensing systems. The product adopts a gradient resistance knob, with a surface transitioning from cool tones to warm tones,

intuitively mapping strength levels. Users can seamlessly transition from basic to advanced levels through rotational interaction. The interface design uses a nested circular progress structure, with the inner circle displaying real-time user muscle strength data and the outer circle dynamically matching goal thresholds. When the difference between the two falls within the motivational range, particle light effect feedback is triggered.

The task progression system decomposes macro goals into sub-task modules that follow the Golden Ratio based on periodic ability assessments. Completing each module unlocks traditional dynamic pattern badges, enhancing the perception of growth through visual metaphors. The resistance adjustment mechanism adopts a biomimetic curved surface design, with the handle shape optimized according to the hand mechanics of elderly users in the Asian demographic. The tactile resistance sensation of the knob changes with intensity levels, creating a tangible difficulty gradient feedback.

2.4 Elderly-Friendly Product Aesthetic Design

Based on the visual perception characteristics of elderly users, color design should follow the principle of low stimulation, using desaturated natural color schemes to construct a visual environment. The primary color scheme of the interface should be limited to three colors, with subtle gradient transitions to create depth and avoid visual fatigue caused by high-contrast color blocks. Studies have shown that incorporating gray tones from traditional Chinese ink paintings can effectively alleviate cognitive stress in elderly users, while strategically adding soft warm tones to enhance the product's affinity.

The design language should adhere to the "non-aggressive" design philosophy, with all exposed structures adopting rounded corners, and key contact surfaces employing hyperbolic transitions. The functional component layout follows the ergonomic Golden Triangle rule, ensuring that the device can be naturally accessed in a seated posture. Grip areas are designed using biomimetic principles, optimizing cross-sectional shapes based on the hand size database of elderly Asian users, and surface textures are added with micro-protrusions to improve grip stability.

The material combination should create a multi-level tactile experience: The main frame uses matte spray-coated metal, while key interaction interfaces are covered with medical-grade silicone, and self-lubricating engineering plastics are used in the movable joints. Surface treatments follow the "visual-tactile consistency" principle, with cool-toned areas corresponding to smooth textures, and warm-toned areas featuring subtle matte textures, reducing cognitive load through cross-modal perception synergy.

The design semantics should convey clear functional metaphors; for example, the rotation adjustment mechanism uses a spiral line relief texture, and sliding components are visually guided by a wind vane-style design. The functional zones are divided into three visual hierarchies: the core operation area adopts a raised shape with high-contrast color bands, the auxiliary function area uses recessed designs with low-reflectivity materials, and the emergency braking system is wrapped in red silicone with a honeycomb texture to enhance tactile recognition. This layered design allows elderly users to locate the function within 3 seconds, significantly improving operational confidence.

3. Rehabilitation Product Design Model for the Elderly Driven by Flow Theory

A triadic structure model of user-medium-goal is established based on the PAT theory framework, adapted for elderly rehabilitation scenarios. This model includes three core dimensions: (1) the user level requires the establishment of a physiological function grading system; (2) the product medium should integrate a progressive feedback mechanism; (3) rehabilitation goals should adopt a modular task decomposition strategy. By calibrating the dynamic matching relationships between user capabilities, device characteristics, and training goals, a closed-loop driving system of "ability enhancement - device adaptation - goal progression" is constructed, ensuring that these three elements always maintain a balanced state in the flow channel.

3.1 "Person" – User Grading

The user grading system proposed by Alan Cooper, a pioneer in interaction design, presents dynamic adaptability in the elderly rehabilitation product scenario. For novice users, the core characteristics are "first contact - cognitive reconstruction," with behavior patterns such as hesitant operations and a strong dependence on functional exploration. It is necessary to establish basic human-machine interaction cognition through stepped task guidance (e.g., modular tutorials, dynamic visual feedback). Elite users, who form the backbone of the product ecosystem, have developed "pattern recognition - behavior consolidation" abilities, enabling them to efficiently complete standard rehabilitation training processes. However, they face skill improvement bottlenecks and need the implantation of progressive challenge mechanisms (e.g., variable parameter adjustments, achievement badge incentives) to maintain flow continuity. Expert users exhibit "autonomous optimization - innovative application" traits, and their operations tend toward unconscious automation. Creative restructuring of rehabilitation programs can be activated through open task editors and multimodal data cross-analysis tools.

The normal distribution pattern of user groups reveals the key path for product iteration—real-time capture of elite user behavior data through intelligent algorithms to feedback and optimize the novice guidance and expert systems.

The dynamic balance rule of Csikszentmihalyi's Flow Theory must be transformed into a quantifiable difficulty adjustment model in the elderly rehabilitation field. In response to cognitive decline characteristics, the system needs to be equipped with three layers of adaptive engines: The basic layer uses fuzzy logic algorithms to automatically adjust hint strength based on novice user error rates; the core layer applies reinforcement learning technology to dynamically generate challenge gradients based on elite users' task completion data; the advanced layer integrates physiological signal monitoring (e.g., electromyography, EEG data) to create biofeedback challenge levels for expert users. This multi-layer architecture not only achieves real-time skill-challenge balancing but also creates a spiraling ability-building path—when users surpass their current level, the system automatically unlocks hidden functional modules, forming a positive cycle of "breakthrough-reward-breakthrough." It is important to emphasize that the risk of skill decline in elderly users requires the system to include a decline warning module. When the user's capability threshold continues to decrease, it automatically triggers a difficulty reduction mechanism to ensure the sustainability of the flow experience.

3.2 "Tool" – Product Characteristics

As the core carrier of user-task interaction, rehabilitation tools should stimulate flow experiences through both physical characteristics and emotional design. Based on Norman's emotional design theory, the visceral layer design focuses on the intuitive perception of the product's appearance, including the shape's affinity (e.g., rounded corners to reduce the coldness of the device), color visual guidance (low-saturation colors to reduce anxiety), and tactile feedback from materials (temperature-sensitive silicone to improve grip comfort). These biological sensory features directly affect the user's initial judgment of the product. For instance, children's toys inspire curiosity through exaggerated shapes, while rehabilitation devices should mitigate medical resistance by adopting a homely appearance, thus creating an instinctive drive to "want to use" the product.

The behavioral layer of the tool design needs to achieve a balance between physical adaptation and smooth operation. The product should be structurally customized based on human size parameters (e.g., grip diameter suited to the hand size of elderly users), reduce operational load through ergonomic weight distribution (e.g., equipment center of gravity offset $\leq 5^\circ$), and meet differentiated rehabilitation needs using modular components (adjustable stands, elastic resistance bands). This dual optimization of "form-function" ensures that training movements flow naturally while maintaining user focus through progressive challenge mechanisms (e.g., resistance level gradation), ultimately forming a stable flow-triggering environment.

3.3 "Task" – Task Staging

The phased flow experience of task design requires a systematic integration of the three elements of conditions, experience, and results. The condition element, as the foundation of flow triggers, emphasizes the dynamic balance between task difficulty and elderly users' physical capabilities. For example, the strength of rehabilitation movements is dynamically adjusted through muscle strength detection, while real-time visual feedback (e.g., motion trajectory projection) helps establish clear achievement expectations. The experience element focuses on shaping immersion during the operation process, using multimodal interactions (voice guidance + tactile cues) to maintain attention focus, and applying progressive challenge mechanisms (e.g., 8% difficulty increment per week) to minimize time perception, making a 30-minute training session subjectively feel like 20 minutes. The result element forms a continuous participation loop through phased ability assessments (e.g., joint range of motion, balance index) and emotional incentives (e.g., virtual badge unlocking), transforming a single flow experience into long-term rehabilitation adherence.

The design model based on Flow Theory should encompass four stages of practical paths. In the problem discovery stage, the design objectives are clarified by physiological decline data (e.g., decline in grip strength gradient) and product functionality gaps (e.g., existing device error rate $> 40\%$); the user research stage integrates behavioral observations (e.g., average daily training duration of 25 minutes) and in-depth interviews to identify flow-triggering elements such as gamified guidance and social incentives; the strategy construction stage implants adaptive algorithms within the "person-tool-task" dimensions, such as adjusting training pace based on real-time heart rate and guiding standard movements with intelligent resistance devices (error $\leq 5^\circ$); the practical validation stage completes the transition from theoretical model to product implementation using three-dimensional metrics—operational smoothness (e.g., less than 2 action interruptions per cycle), emotional enjoyment (e.g.,

score > 4.5/5), and functional effectiveness (e.g., 15% improvement in gait stability)—to ensure the scientific and practical validity of the flow-driven mechanism.

4. Conclusion

In the context of an increasingly aging society, the design of elderly rehabilitation products faces unprecedented challenges and opportunities. This paper, based on Flow Theory, deeply explores the design principles, strategies, and models for elderly rehabilitation products, aiming to provide scientific guidance for enhancing the rehabilitation experience and quality of life for the elderly. By establishing four major design principles—safety, human-machine interaction optimization, functionality-driven value, and dynamic adaptation—we have laid a solid foundation for the development of elderly rehabilitation products. These principles not only emphasize the operational reliability of the device itself and dynamic protection mechanisms during user interaction but also focus on intuitive operation and the fulfillment of personalized needs, ensuring that elderly users can safely and efficiently undergo rehabilitation training.

Furthermore, this paper proposes strategies such as a goal-oriented rehabilitation incentive system, dynamic feedback system design based on perceptual engineering, dynamic task adaptation based on capability levels, and elderly-friendly product aesthetic design. The implementation of these strategies enables elderly rehabilitation products to accurately align with users' rehabilitation goals, achieving efficient information transmission through multimodal perception channels while creating personalized rehabilitation solutions that conform to the natural movement trajectories of the human body. In terms of aesthetic design, integrating the gray-tone color ratios of traditional Chinese ink painting and the "non-aggressive" design concept not only effectively alleviates the cognitive pressure of elderly users but also enhances the product's appeal and user confidence.

It is noteworthy that the application of the Flow Theory-based design model in elderly rehabilitation products has bridged the gap between theory and practice. By integrating the three elements of "person-tool-task," the model constructs a closed-loop driving system of "ability enhancement - device adaptation - goal progression." In this process, the dynamic adaptability of user grading ensures that elderly users at different ability levels can experience personalized rehabilitation. At the same time, the optimization of product features and the phased flow experiences in task design together create a stable flow-triggering environment, allowing elderly users to continuously improve their physical functions in an immersive rehabilitation training process.

Conflicts of Interest

The author declares that there is no conflict of interest regarding the publication of this article.

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