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Analysis of natural locomotor behaviors at home using a sensitive floor.

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*Averaged daily values per person (extracted from 40 months of occupancy)

 $\approx 0.82 \text{ km}$

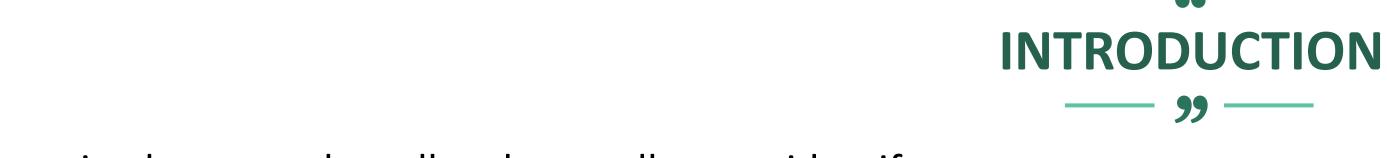
TIME

 $\approx 1520 \, \mathrm{s}$

 $\approx 25 \text{min } 20 \text{s}$

STEPS

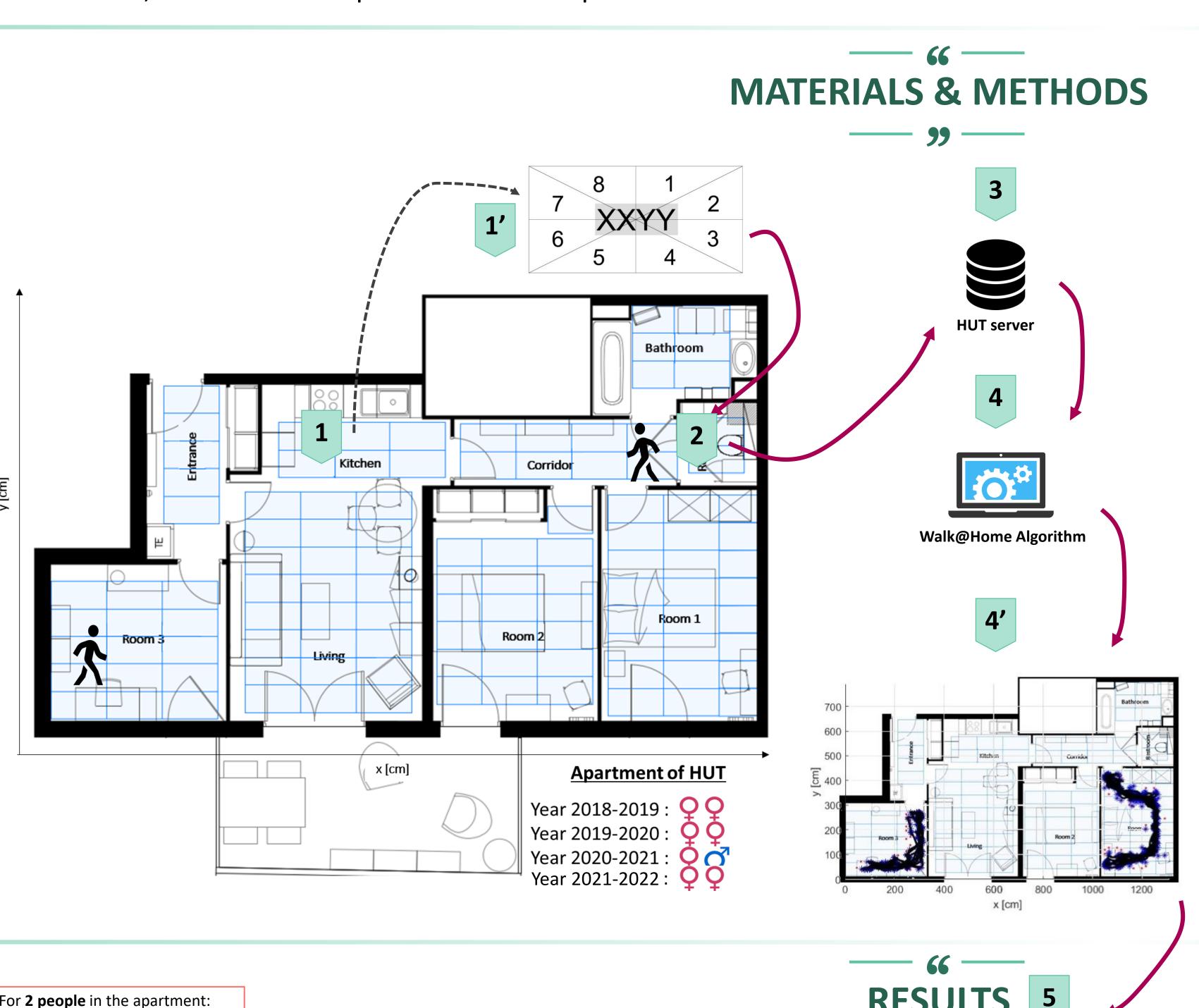
 ≈ 2050



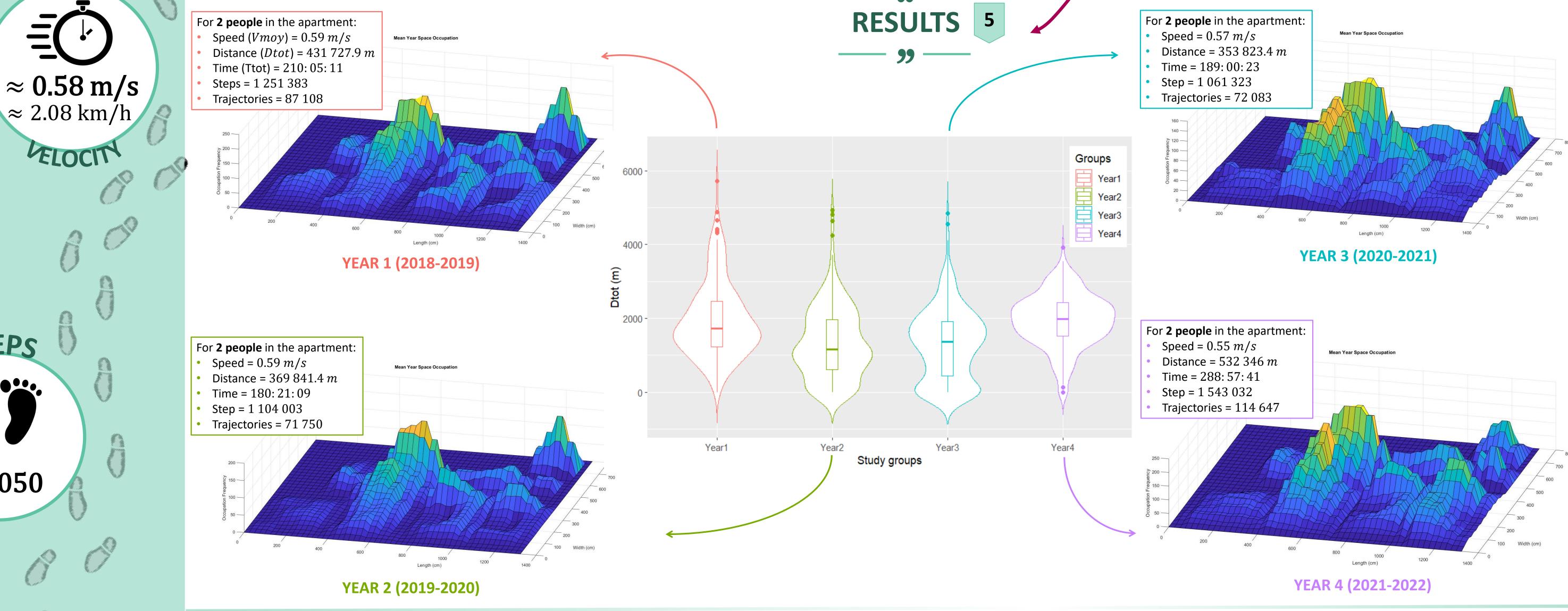
Documenting how people walk at home allows to identify:

- Indoor locomotor efficiency \rightarrow Speed (v) in m/s, distance (d) in m, time (t) in s, number of steps, trajectories [1].
- → Occupation of a restricted space encumbered with obstacles (attractors-repulsors) [2]. Indoor space occupancy
- Markers of wellness \rightarrow Physical and psychological well-being (influences of mood and personality on walking pattern) [3,4].

Our objective was to investigate the evolution of locomotor trajectories performed at home, captured by a capacitive proximity sensor, the SensFloor, installed in an apartment in Montpellier.



- 1: Installation of the SensFloor in the Human at home projecT apartment (72m²)
- 1': SensFloor composed of 109 x 8 capacitive proximity sensors
- 2: Continuous recording of locomotion from four successive dyads living naturally in their home for 1 year
- **3** : Storage of the data from the continuously captured ground
- Data cleaning with the Walk@Home algorithm
- 4': Reconstruction of locomotor trajectories performed at home by the algorithm
- 5: Data analysis and results visualization





This study shows that we walk every day at home approximately 25 minutes, taking 2050 steps over a distance of 822 meters with an average speed of $0.58 \, m.\, s^{-1}$. It also suggests a variable locomotor behavior (increase in distance and travel time) according to temporal moments (weekends, vacations, seasons) associated with a constant walking velocity. The extraction of this locomotor information over 4 years (1 year for each of the four dyads) allows us to document natural walking at home. This research also allows us to consider a motor signature of wellbeing at home that could serve as a health indicator for the recognition and prevention of psychomotor disorders.

CONCLUSION

ACKNOWLEDGMENTS

This research has been conducted as part of the Human at home projecT (HUT) co-financed by the European Regional Development Fund (ERDF) and the Occitanie Region. This acknowledgment extends to the support given by Montpellier Méditerranée Métropole.

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