

# Physical Activity Promotion

## Blending policy, research and practice

Bath - October 2010



# Someone Like Me!

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## Effectiveness of national initiatives targeting older adults

*And... can older (peer) volunteers  
make a difference in physical activity  
programmes and if so - how?*

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*BHF National Centre for Physical Activity and Health,  
Loughborough University*

# Summary of presentation

## ***Programming for older people***

- National initiatives, developments, effectiveness
- Recent developments in volunteering and physical activity
- Strengths, weaknesses and lessons learned
- Recommendations and key messages



# National older people initiatives, interventions and effectiveness

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- There aren't many national initiatives that target older people!
- Lead agencies (DH, DWP and Sport England) have ignored and compared with young people, scant resources
- Health lead - mainly falls prevention (exercise), disease specific, exercise referral pathways + NSF St 8 - Healthy Active Age (2001)
- **Voluntary sector - WHI (attracted older people)  
Age Concern Ageing Well**
- Football Foundation, Free Swimming (ASA) and movement and dance organisations
- **Fit as a Fiddle – the “new kid on the block”**

# The evidence base and health

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- NICE (2008) Mental health, physical activity and older people
- NICE - Falls and Stroke guidelines/strategy
- DH Prevention Packages (2009)
- Leading interventions – CHAMPS, LIFE, OTAGO, FAME
- But translating research into practice ?
  - Programme fidelity and cherry picking the evidence
  - Local development and ownership
  - Short term funding
- serious lack of rigorous evaluation (resources, skills, outcomes)

# Promotion and (short term) campaigns

- Targeting older adults
- 50+ and all to Play for? (Sport England)
- HEA Active for Life (1997)
- BHF 30 mins a day – anyway (2008)
- Change 4 Life (not above 65)
- National Falls Awareness week (Help The Aged) 2007 onwards
- Move for Health (CSP)
- Active Ageing Events (BHF NC)



# The new(?) recommendations

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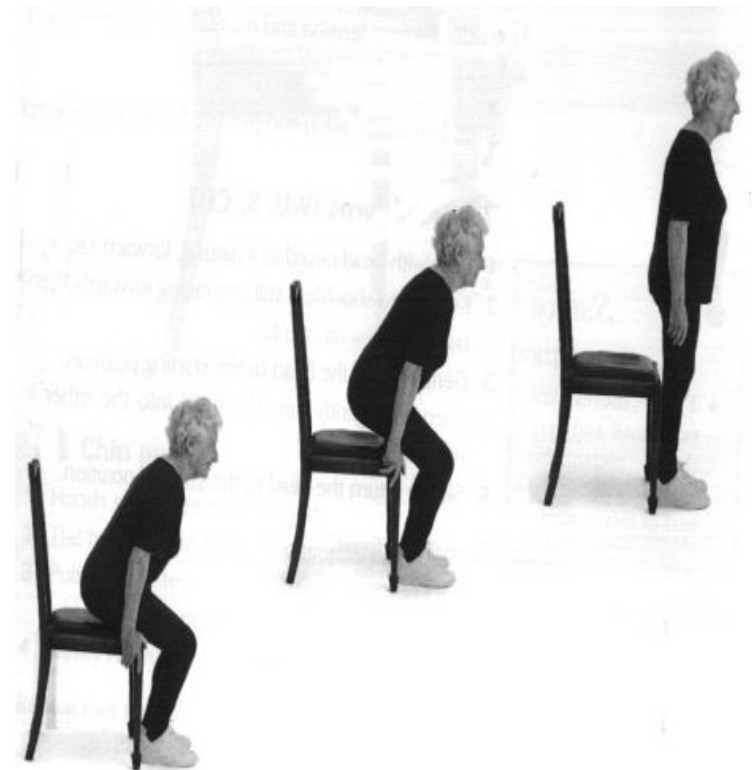
Provide a real opportunity but  
– how and will they be disseminated?

- **Reaching professionals**
- Few have background in exercise science
  - interpreting the message
  - use in programme design
  - all older adults
- The “gentle exercise mafia”
- **Reaching the public**
- History and tradition from movement and dance org.
- “Gentle” reflects the concerns of participants
  - Overdoing it!
  - Making something worse

**Chair based exercise has become the default mode**

# A new message – *Get up and go!*

- *Strength and balance have been the missing components*
- Sit to stand
- Importance increases with age
- The keys to independence and activities of daily living



# Older people and physical activity - interventions at different levels - 1

## Effective interventions

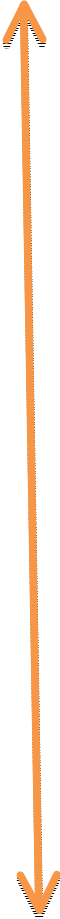
- Population wide (Campaigns, supportive environments, access, significant others)
  - Programme design (marketing and promotion, access, appropriateness, skills of leaders, social support, achievement and success)
  - One to one (engagement, motivation, lifestyle advice and counselling)
- (Ecological model s e.g. Owen. N 1994, Sallis J. 1998 NICE 2007)

## Components of good practice



# Older people and physical activity

## Interventions at different levels - 2

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- Targeted to needs
  - Entering old age  
*(Prevention - making activity choices)*
  - Transitional phase  
*(declining physical function)*
  - Frail elderly people  
*(QOL and moving more often)*
  - WHO (1997) BHF NC (2003),
- Partnerships
  - Physical activity and recreation services
  - Adult and social services
  - Care/residential services

# So where are we?

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- Everybody's interest but no-one's responsibility?
- Clarity re target populations, aims and purposes of interventions
- Evidence base not always appreciated
- Rigorous evaluation
- Promotion campaigns short term (a new opportunity)
- Reliance upon voluntary sector

# Using volunteers – a common strategy

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- The use of older volunteers (mentors) is a commonly used strategy amongst (most) services that target the older population.
- National and local programmes are increasingly making use of peer volunteers, but are varied, employ different peer leader models
- Evidence indicates that change requires interventions that reduce barriers, increase opportunities and offer social support. (Cress M. et al 2006).
- Peer volunteers can assist with these and other activities

# Volunteer and mentoring - Brief background

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- Volunteering/mentoring emerged late 1980s in US
- Beth Johnson Foundation , Stoke – 1980s
- *Age Concern - Ageing Well 1992 onwards*
- Someone Like Me - 1997 onwards
- Mentoring and Befriending Foundation – generic mentoring development
- Background of growth in volunteering “Industry”

# Applications to physical activity - 1

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- **World-wide**
- Seniors trained as leaders/instructors e.g. CHAMPS (Stewart et al 2001), Ageing Well and Healthily, (Hopman-Rock 2002) People Exercising Programme (Layne et al 2008)
- Condition specific Arthritis Care, American Lung Association
- Falls Prevention education – Australia, Canada

# Applications to Physical Activity - 2

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- Age Concern Northumberland (1996)
- Braveheart CHD RCT Paisley (2002)
- Bradford PEEPS falls prevention (Allen T 2003)
- Arthritis Care
- Walking the Way to Health - 2002 onwards
- DOH LEAP programme (2005 – 7)
- DH POPPS programme (2007-9)

# Involvement of older people

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- **Underpinning philosophy - the role model**
- I've got the T shirt (what I did was)
- I made the change (I went to my GP and was told)
- I've overcome the difficulties (I felt silly at first as well)
- I can interpret and communicate the message on your terms (F word)
- I've got the time – give me a call

## Example of practice 1. PAMs Kirklees

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- **Started in 2003**
- Supporting people making the move into referral programmes (96% remaining after 1 year)
- Buddying newcomers to programmes
- Initial group of 12, now more than 75 volunteers
- Extended to cover swimming and walk buddies, home visits

## Example 2 Nottinghamshire Activity Friends

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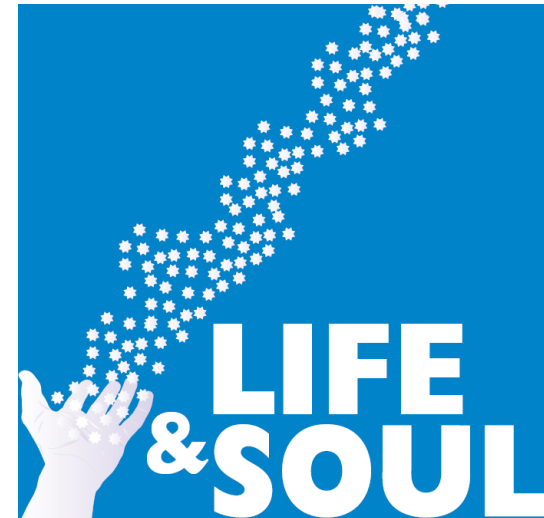
- **Started in 2005**
- Activity promotion in rural communities, small towns and villages
- High incidence of new retirees
- Welcome to new neighbourhoods
- Focus on walks and initiating new groups/activities
- Started in one district council and extended to whole county
- County wide network supported by Adult Services

# Example 3 - Fit as a Fiddle

fit<sup>as a</sup>  
fiddle

- 5 National cascade programmes
  - Nursing homes
  - Older men
  - Faith and ethnic minority
  - Residents as volunteers in Sheltered and Supported Living Settings
  - Isolated older people at home
- 9 Regional programmes

[www.fitasafiddle.org.uk](http://www.fitasafiddle.org.uk)

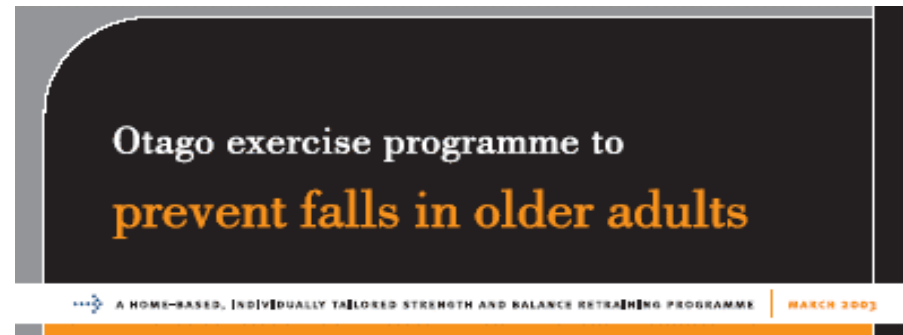


Big Lottery funded  
2007 - 2012  
Focus on wellbeing  
(Physical activity, nutrition  
and positive mental health)

# Example 4 - ProAct 65+ trial

- HTA funded RCT in Falls Prevention
- “At risk” recruited through GP in London and Nottingham
- Comparison of group (FAME) and home based (OTAGO) exercise
- Volunteers to support home based exercise (visits and telephone calls)

[www.laterlifetraining.co.uk](http://www.laterlifetraining.co.uk)



# Volunteer mentor training

## – what does it look like?

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- Their role in the programme, responsibilities, limits and opportunities, evaluation
- Knowledge and understanding of physical activity, health benefits, the message
- Motivation e.g. listening and talking skills, understanding motives and barriers, helping people make a decision
- Knowledge of local opportunities/facilities
- Confidence, readiness and action planning to take the next steps
- Diversity and equality

Leadership requires additional (and certificated/accredited) training

# Advantages, opportunities, strengths

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- Effective communication
- An alternative to the “expert”
- Reaching marginalised (or at risk) groups
- Positive role models
- Participatory benefits (empowerment, taking control)
- Benefits to volunteers (health, engagement)
- *Cost effectiveness and sustainability (resource implications)*

*(Peel and Warburton 2009)*

# Disadvantages/weaknesses

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- “Substitute” professionals, lack authority
- Recruitment, training and retention of volunteers (resource intensive)
- Overstep the mark, outside role, boundaries
- Seen as a quick fix, easy option
- Evaluation design
- *Cost effectiveness and sustainability (resource implications)*

*(Peel and Warburton 2009)*

# Lessons learned 1 – clarity of role

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- Befriending (cup of tea and chat)
- Mentoring (encouragement and signposting)
- Buddying (going with and repeated contact)
- Leading (responsibility and instruction)
- Ambassadors and Champions (promotion activities)

*Implications for training, responsibilities, boundaries and insurance*

*NB Roles evolve and people grow*

# Lessons learned 2 – Recruitment who comes, why and how?

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- Anecdotal – believers – have the message, *are active, from classes groups, do gooders?*
- Why? – transition in life, busy people (replace work) give back to the community, legacy, make a difference, interest in topic
- Word of mouth, networks, media promotion and advertising is the back drop
- Other professionals close to the ground need to understand
- From local community
  - Local competition for volunteers and protectionism*

## Lessons learned 3 – support for volunteers

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- **Specific support role required**
- Will provide and answer to the individual and specific enquiries
- Support and review meetings
- Recognise achievement and value contribution
- Identify additional personal and training support needs

*It's good/essential practice (Volunteer Compacts and good practice documents)*

# Lessons learned 4 - Evaluation

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- Where do volunteers fit and what do we require them to do?
- Research or evaluation (data collection, numbers crunching, diaries)
- Variable responses from individuals
- Early expectations (make clear) and additional training
- SNAP (FAAF)

# Lessons learned 5 – how older people learn

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- Previous educational , professional additional learning
- Our oldest volunteer 93 and many 80+ (additional considerations to support)
- Learning styles and strategies (learning over time)
- Use of materials and technologies
- Response to additional and emerging needs e.g. Routes to additional learning (internet)

# Real life programmes

## - the anomalies (be prepared)

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- The expert - opposite advice (Proact 65+)
- Super-mentors 1. Multiple engagement to change people's lives! (*240 in 12 months*)
- Super-mentors 2. Older, older volunteers (Proact 65 and FAAF with residents in sheltered supported settings)
- Relationships (wedding bells)

# Recommendations

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- Volunteer (mentors) can play ***an important part*** in the promotion of physical activity with older people
- Evidence indicates the need for support strategies to assist (older) people through change and the use of (peer) volunteers can be ***one such strategy***.
- Evidence from practice indicates the need for ***appropriate resources*** to support successful volunteering activity.



Thank you for listening  
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