

Older adults concern for personal health linked to walking difficulty

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Older adults who worry about their health engage in less physical activity, and those who participate in less activity are more likely to report having difficulty walking, according to a new study.

The research, featured in the current issue of *Research Quarterly for Exercise and Sport*, was conducted by lead author Kin-Kit Li of The University of Hong Kong when he was a doctoral student at Oregon State University, and coauthored by Bradley Cardinal and Samuel Vuchinich, faculty members at OSU.

Mobility, which declines with aging, has been identified as one of the key topics in aging research, as <u>walking difficulty</u> reduces quality of life. Most studies have emphasized the behavioral or physiological mechanisms that lead to walking difficulty among <u>older adults</u>. Not until recently have researchers started to look at possible <u>psychological effects</u>

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Health worry has been suggested to have an interesting mix of effects on health behaviors and outcomes. Some studies have suggested health worry may be considered a protective mechanism, which motivates people to engage in health behaviors such as regular physical activity. However, this study showed the opposite relationship. In a representative sample of older adults in the United States, people with a high degree of health worry engaged in less physical activity.

Health worry, physical inactivity, and walking difficulty may actually



combine to have a negative effect on each other, the researchers say.

"Our research shows that a key component to avoid walking difficulty in older adults is to resolve health worry issues earlier in life," said Cardinal, a professor in the Department of Nutrition and Exercise Science at OSU.

Health professionals often use warnings of diseases and premature death to promote physical activity. The authors suggest that health-related information should include appropriate self-regulation and coping strategies for health worry. Instead of using health threat as a motivator, evidence-based programs for behavior change should be implemented.

"Using threats and fear-tactics to encourage physical activity in older adults will not work," Cardinal said.

Cardinal's past studies have shown that matching various behavioral change strategies with participants' readiness for change is effective. In addition, implementing screening tools, such as the revised Physical Activity Readiness Questionnaire prior to initiating a physical activity program, should be considered for use more widely among older adults.

These strategies would ease concerns about the associated risks of participating in physical activity, the authors note, and as a result older adults could benefit from increased physical activity participation.

Source: Oregon State University (<u>news</u>: <u>web</u>)

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