

Study points to health disparities in physical fitness

June 4 2011

An Indiana University study examining disparities in physical fitness levels between older adults who are patients of safety net community health centers (CHC) and those who are members of a medically affiliated fitness center is producing stunning results.

NiCole Keith, associate professor in the Department of Physical Education at Indiana University-Purdue University Indianapolis, said she expected the study to show similar physical [fitness levels](#) between the two groups. The findings, however, show that the fitness center participants performed significantly better on each of the measures when compared to the CHC participants.

The community health centers serve vulnerable populations, including those without health insurance; the medically affiliated [fitness centers](#) serve a more affluent population. Otherwise, the age and [health literacy](#) of study participants in both groups were the same.

Further, the members of the medically affiliated fitness center were not exercising at the facility every week, much less every day. Generally, these fitness center members had sedentary jobs. Patients at the CHC who were employed spent a lot of time on their feet and moving about.

"I expected their physical fitness levels wouldn't be different, but they are so different that it is startling," Keith said. "Seven indicators of physical fitness were tested, and members of the medically affiliated fitness center scored higher than the CHC patients in every category."

Keith discussed "Disparities in Physical Fitness Between Fitness Center and Safety Net Community Health Center Members" on Saturday, June 4, at the American College of [Sports Medicine](#) meeting in Denver. Her poster session was from 9:30-11 a.m. MDT.

The overriding difference between the two groups of study participants is access to opportunities to exercise, Keith said. For patients at the CHC, there is generally no place for them to exercise. The cost of joining a fitness center is prohibitive for these patients, she added.

What is of great concern, Keith said, is that low levels of physical fitness are strongly related to negative health outcomes, including increased morbidity and mortality. The distinct differences among physical fitness levels between CHC patients and members of the medically affiliated fitness center demonstrate the clear need to identify low-cost and accessible means for vulnerable populations to improve their [physical fitness](#) levels, she said.

Access to health care for all populations is important, Keith said, but it is not enough if it doesn't include opportunities to exercise.

Provided by Indiana University

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