

Policy changes needed for promoting physical activity in group home settings

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Increased physical activity for group home residents and the potentially huge health care savings that could come with it hinge on people who run the homes making health-promoting behaviors a priority.

Physical inactivity and high rates of chronic conditions are public health concerns for people with <u>intellectual disabilities</u>, said postdoctoral scholar Alicia Dixon-Ibarra of the Oregon State University College of Public Health and Human Sciences. Few health promotion programs, she added, target residential settings like group homes, where many individuals with intellectual disabilities live.

Obesity is rising steadily among people with intellectual disabilities, with prevalence at least 1.5 times higher than that of the general population. Addressing weight-related health issues through <u>physical activity</u> promotion is the focal point of multiple national initiatives, but despite that only 30 percent of adults with intellectual disabilities meet physical activity guidelines.

Dixon-Ibarra studied 18 <u>residents</u>, 22 staff members and 14 program coordinators from five different group homes in the Pacific Northwest. Each home was given a program designed to help residents and staff work together to set physical activity goals and include time in their schedules for trying to reach them.

The study showed that when a home's top leadership allowed the program to be an option rather than a requirement, staff did not regularly



make the effort to work with residents to create possibilities for physical activity.

Results were recently published in Evaluation and Program Planning.

In Dixon-Ibarra's research, each group home was provided with a health-promotion program called "Menu-Choice," designed to assist staff in including physical activity goals in residents' schedules.

The program included weekly scheduling sheets, plus a calendar on which residents could display images depicting their activities. There was also a binder of resources for staff to learn about physical activity; to get examples of activities for residents with different abilities; to gather information about goal setting; and to gain knowledge about guidelines relating to specific disabilities.

"The overall intent of the program was to intervene at an environmental level," Dixon-Ibarra said. "It's evident that policy-level change in the group home setting is needed to promote active lifestyles."

That's because the staff members, who play a huge role in how residents spend their time, often looked at working with residents on Menu-Choice as an extra, optional duty. Staff turnover and lack of time were other barriers to Menu-Choice implementation, as was the fact that 79 percent of the program coordinators were themselves overweight or obese and not exercise oriented.

"One of the main goals is that health education can be part of staff orientation training," Dixon-Ibarra said. "When you apply for the job you know that encouraging physical activity and nutrition is part of the job description, and you have that direction from the agency level and the coordinator level. I would also promote that group home agencies mandate the use of health-promotion programs and allocate resources to



help staff and residents pursue physical activity and other healthpromoting behaviors."

With that direction, staff turnover and/or indifference to physical activity won't be able to negatively affect health-promotion programs nearly as much.

"Success definitely depends on staff involvement," Dixon-Ibarra said.
"Staff being motivated to pursue physical activity with residents is so important. Every <u>staff</u> member needs to be trained in how to incorporate activity in residents' schedules and how to encourage residents. You can't make someone be physically active, but you can make it a health-promoting environment where residents are encouraged to choose to be active if they want to be."

More information: Alicia Dixon-Ibarra et al, Formative evaluation on a physical activity health promotion program for the group home setting, *Evaluation and Program Planning* (2017). DOI: 10.1016/j.evalprogplan.2016.09.005

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