

# Research identifies how doctor-patient interactions can increase physical activity

23 July 2020



Credit: CC0 Public Domain

Patients are open to have conversations about physical activity programs in the community to improve their health, if recommended by their doctor, new research led by the University of St. Andrews has found.

The research, funded by the NHS Fife Endowment Fund, investigated the views of both primary care [health](#) professionals and patients on potential methods to connect patients to community-based exercise programs. It also examined potential barriers to such exercise, and what might help patients connect to groups.

The study focused on Scotland's recreational running network, [jogscotland](#), which is part of [scottishathletics](#), the national governing body for athletics in Scotland. Jogscotland runs jogging sessions in the community, led by mostly volunteer jog leaders.

Connecting primary care patients to such groups fits within the social prescribing initiative which aims to refer patients to a link worker who can connect them to possibilities in the community to

improve [health outcomes](#) and tackle issues such as obesity.

The research, published in *BJGP Open*, found three methods of connection: informal passive signposting, informal active signposting and formal prescribing/ referral.

Informal passive signposting involved leaflets, posters and short informational videos about the physical activity opportunities in the general practice for patients' easy access, with little effort from them and health professionals.

Informal active signposting, on the other hand, could involve health professionals having a conversation about physical activity opportunities in the community and giving a leaflet for the patient to follow-up.

Health professionals also described a method where they would refer the patient to an intermediary who could then work with the patient to identify the method of physical activity opportunities that could work for them. Each of these methods involved a different workload either for the patient or the health professional or both.

The study also found that for health professionals, access to resources advising what physical activity options are available in the community and time to seek out this information was a critical barrier for them to have a conversation with their patients.

Lead investigator of the study, Dr. Gozde Ozakinci, senior lecturer in Health Psychology in the School of Medicine at the University of St. Andrews, said: "This study shows the potential of connecting people with physical activity opportunities in the community. There are many programs run in the community and jogscotland groups are a great example that calls for investigating and trying different methods of connection co-produced with patients, health professionals, and community

groups. We also showed that patients when they visit their general practice are receptive to the idea of talking about getting more physical activity. This needs to be done in a manner that respects their autonomy to make the decision but also provides a source of motivation if done in the appropriate manner. Health professionals need up-to-date and accurate information about community-based programs that they can signpost their patients to. We established that there are different workloads associated with these methods."

Many [health professionals](#) wondered about whether the patient that they are seeing would be receptive to the idea of jogging groups and this was a major consideration when deciding on raising the issue during a consultation. They also wanted to share the responsibility of promoting physical activity opportunities with wider society and to avoid medicalising these opportunities.

For patients, on the other hand, a conversation with their doctor could be really motivating and provide a "push" to try physical activity in the community. Although there was a dislike about "being dictated to," [patients](#) reported appreciating the opportunity to be linked to tangible opportunities instead of being told 'you should get more active'.

**More information:** Sharon Ann Carstairs et al. Connecting primary care patients to community-based physical activity: a qualitative study of health professional and patient views, *BJGP Open* (2020). [DOI: 10.3399/bjgpopen20X101100](https://doi.org/10.3399/bjgpopen20X101100)

Provided by University of St Andrews

APA citation: Research identifies how doctor-patient interactions can increase physical activity (2020, July 23) retrieved 22 October 2020 from <https://medicalxpress.com/news/2020-07-doctor-patient-interactions-physical.html>

*This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.*