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Canadian Disability Participation Project

The CDPP is an alliance of university, public, private and government sector partners working together to enhance community participation among Canadians with physical disabilities. The research team for this project has expertise in exercise psychology, the design and implementation of exercise interventions for people with disabilities, qualitative research and synthesis methods.



Seven Themes of Successful Physical Activity Programs for People with Disabilities

What strategies result in lasting participation increases in physical activity (PA) programs designed for people with disabilities? This is the question that the Canadian Disability Participation Project (CDPP) set out to find answers to during a recent meta-synthesis of existing research¹.

A meta-synthesis begins with identification of all of the published research on a particular topic, and continues with sifting through the research to highlight key themes and messages. In this case, our CDPP review, led by Dr. Toni Williams and completed in 2017, sought to explore research participants' experiences and perceptions of interventions or programs that had been designed with the goal of increasing PA participation among adults with physical disabilities.

What we found were seven clear themes of all successful recreational and exercise programs designed for people with physical disabilities. We further determined strategies that all PA and recreation specialists can employ to ensure each theme is incorporated in their programs offered to people with disabilities.

Defining the Problem

Previous research has clearly demonstrated that people with physical disabilities face multiple personal, environmental and social barriers that prevent them from leading a physically active lifestyle². The result is that people with physical disabilities are less likely to participate in physical activities such as sports or exercise. For example, a British national survey³ revealed that just 18 percent of adults with disabilities took part in at least one session per week of sport or exercise, compared to 41% of non-disabled adults. A similar finding has been found in the USA— 57 percent of disabled adults were found to be completely inactive, compared to 26 percent of non-disabled adults⁴. Clearly, there is an urgent need for strategies to increase physical activity participation for people with physical disabilities.

Themes and Recommendations

The following table lists the seven common themes that emerged from the meta-synthesis, and offers recommendations on how to ensure each of these themes is reflected in the design of programs offered to people with physical disabilities.



| Theme | Recommendations and Insights for Programmers |
|--|--|
| Programmers must recognize that "one size does not fit all." | Programs should be flexible and adapted to individual needs (e.g., exercises should not be too easy or too hard) Suitable PA options and choices should be provided |
| | Participants should be given a sense of autonomy and control over their PA options |
| | Environments should be open, honest, and supportive, and accepting of differences and limitations |
| Communication is important. | Consider what participants' preferred channels of communication are (e.g., phone, email, text, face-to-face) |
| | Evidence-based information provides trust, reliability and confidence in the intervention |
| | Employ narrative (i.e., personal stories) as it can be an effective behaviour change tool |
| | Utilize both peers and health care professionals as messengers, as they have been identified as suitable and credible |
| | PA information should be offered at the onset of rehab and made available in a range of organizations |
| Participants need social support. | Perceived social support from health professionals, peers, family and friends is crucial to engagement in PA intervention |
| | Informational support from health professionals (e.g., physiotherapists, personal trainers) is also highly valued |
| | Professionals with caring and non-judgmental attitudes who offer physical assistance are highly effective |
| | • Peer support should be a component of programming, it can create a sense |

| Theme | Recommendations and Insights for Programmers |
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| | of belonging and community |
| | Access to support services (e.g., social services, psychological counselling) is important for long-term PA engagement |
| Programs need to teach behavioural strategies for managing physical activity. | Action planning and goal setting are important for maintaining and increasing PA |
| | Self-regulation skills are also important to encourage—routinely scheduling time for exercise, planning ahead and setting meaningful goals are among these skills |
| | Longer-term interventions help exercise become more habitual |
| | It's important to encourage participants to reflect upon their own goals and adjust their action plans accordingly |
| Participants are eager for knowledge on exercise and disability. | Participants benefit from knowledge about how to be active with a disability and how to adapt exercises |
| | Knowledge gained through resources such as group-taught sessions, pamphlets and stories is also important |
| | Advice from health professionals on benefits of PA to control pain and manage impairments also motivates participants |
| Programs can provide opportunities for participants to re- frame thoughts about exercise and the self. | Programmers should consider encouraging participants to re-frame their thoughts on what constitutes PA |
| | Encourage participants to reappraise exercise as something that is fun, rewarding, worth paying for, and a life priority |
| | This type of re-framing also seems to decrease fear and anxiety about exercise |
| | Participants who are encouraged to re-frame their own beliefs are able to re-evaluate and change thoughts about their physical capabilities—being active can create positive changes in self-image and can allow one to develop a new physically active identity |
| Programs provide important benefits for health and well-being. | Programmers need to remember that improvements on health and well- being lead to a positive feedback loop that instills an ongoing physically active lifestyle—and reinforce this to participants |
| | Benefits include reductions in mobility limitations, weight, fatigue, pain and reliance on medication. They also result in increased strength, function, and ability |
| | Health benefits are accompanied by perceived improvements in happiness |

| Theme | Recommendations and Insights for Programmers |
|-------|---|
| | and life satisfaction Participant enjoyment and perceived increase in exercise self-efficacy, self-determination and independence also result Keep in mind that, for some, unpredictability of impairments inhibits their ability to engage with the intervention |

Summary

Our meta-synthesis identified published research that describes successful PA and exercise programs designed for people with disabilities. It went on to determine seven key thematic areas (as identified by the participants in these studies) that should be important to reflect when developing programs to increase PA in people with disabilities.

These themes require programmers to consider adoption of various types of intervention strategies, including the provision of information and social support, the teaching of behavioural self-management strategies, and the adoption of policies that foster the tailoring of interventions to people's individual needs.

References

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