





Get Healthy, Get Active: Prevention is better than Care

















Background – Get Healthy Get Active

- 1 of 16 nationwide projects funded by Sport England (£398,654)
- Based on local insight, consultation, local need and strategic relevance
- A key aspect is the project evaluation and learning in partnership with Edge Hill University
- Aim of the programme is to;

"Support the most vulnerable and inactive residents of Sefton Borough who are deemed to be at risk of requiring long term health or social care. The identified target groups are adults with intellectual disabilities (over 18 years of age) and older adults (over 65 years of age) with or at risk of dementia."

Get Healthy, Get Active Project Summary

Adults with Intellectual Disabilities (ID) and Older Adults

Programme aims:

- To engage INACTIVE adults ID and older adults in at least 1x moderate-vigorous PA per week.
- To evaluate the main PA-related outcomes of the GHGA programme.

Design:

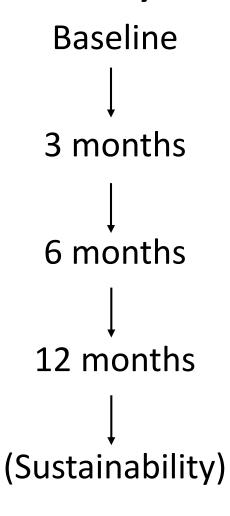
- 12-week blocks of activity.
- Baseline and three subsequent follow-up data collection points at 3, 6 and 12-months.

Follow-up Data Collection Points

Participant Entry in GHGA











Sport England Core Measures - Adults with ID

Baseline

Demographics - Age, sex, ethnicity, disability, socio-economic status

Primary - Single Item PA Question, The International PA Questionnaire Short Form (IPAQ-S)

Follow-up 1 (3-months post baseline)

Primary - The International PA Questionnaire Short Form (IPAQ-S)

Follow-up 2 (6-months post baseline)

Primary - The International PA Questionnaire Short Form (IPAQ-S)

Follow-up 3 (12-months post baseline)

Primary - The International PA Questionnaire Short Form (IPAQ-S)





Measures - Older adults

Baseline

Demographics - Age, sex, ethnicity, disability, socio-economic status

Primary - Single Item PA Question, The International Physical Activity Questionnaire for the elderly (IPAQ-E), Wrist-worn Accelerometer (GENEActiv)

Secondary - Quality of Life Questionnaire, Self-Rated Health Questionnaire, Self-Assessment of Physical Fitness in the Elderly, Self-Efficacy for Exercise Scale

Anthropometrics - Height, Weight

Follow-up 1 (3-months post baseline)

Primary - The International PA Questionnaire for the elderly (IPAQ-E), Wrist-worn Accelerometer (GENEActiv)

Secondary - Quality of Life Questionnaire, Self-Rated Health Questionnaire, Self-Assessment of Physical Fitness in the Elderly, Self-Efficacy for Exercise Scale, Programme Fidelity Questionnaire

Follow-up 2 (6-months post baseline)

Primary - Single Item PA Question, The International PA Questionnaire for the elderly (IPAQ-E), Wrist-worn Accelerometer (GENEActiv)

Secondary - Quality of Life Questionnaire, Self-Rated Health Questionnaire, Self-Assessment of Physical Fitness in the Elderly, Self-Efficacy for Exercise Scale

Follow-up 3 (12-months post baseline)

Primary - Single Item PA Question, The International PA Questionnaire for the elderly (IPAQ-E), Wrist-worn Accelerometer (GENEActiv)

Secondary - Quality of Life Questionnaire, Self-Rated Health Questionnaire, Self-Assessment of Physical Fitness in the Elderly, Self-Efficacy for Exercise Scale

Barriers - Dissemination

Barrier	Action to overcome barrier
Informed Consent	Written informed consent is required for all participants to be entered into the research element of the programme.
Easy read questionnaires	In order to give every participant the greatest chance of providing written informed consent, all questionnaires were re-written and presented in easy read form.
Programme duration	Due to knowledge and feedback obtained from previous literature, <i>Get Healthy Get Active</i> deliverers, and the participants themselves, the <i>Get Healthy Get Active</i> programme was increased from 6 to 12 weeks.
Sustainability	With the aim of providing sustainable exit routes for participants after the initial 12-week programme, paid maintenance sessions have been set up.

Barriers - Participants

Barrier to PA	Example Quote
Motivation	"It's (<i>lack of physical activity</i>) apathy, just apathy, people can't be bothered."
Loneliness and Isolation	"It's so easy to get trapped inside and not go out. You get into a routine of watching the television all day and it's hard to break that routine."
Age	"People often think that exercise is not good for you when you get past a certain age. They think they will injure themselves and fall."
Lack of advertising	"I didn't know anything about this fitness class until my friend told me about it. I think it (<i>Get Healthy Get Active</i>) should be advertised in the local paper."
Cost	"I think all physical activity sessions for older adults should be subsidised by the government. Once you factor in paying for the session and then transport there as well, it is too expensive for many people. I would like to go to the baths (swimming pool) sometime but it's difficult to get there and get back so I just don't bother."
Location	"Where I live the roads are really busy during the day so it is too dangerous for me to walk anywhere."

Statistical Impact - Adults with ID

Quantitative	
Summary	Total number of participants = 183
	Total number of participants INACTIVE + INFORMED CONSENT = 32%
Baseline	AVERAGE time SITTING (THOSE INACTIVE + INFORMED CONSENT) = 8 hours
	Total number engaged in WALKING = 51%
	Total number engaged in MODERATE Physical Activity (PA) = 29%
3-months	AVERAGE time SITTING = 6 hours 59 minutes
	Total number engaged in WALKING = 66%
	Total number engaged in MODERATE PA = 54%
	Total number engaged in VIGOROUS PA = 46%
	AVERAGE GHGA programme satisfaction score /10 = 8.8
6-months	AVERAGE time SITTING = 7 hours 11 minutes
	Total number engaged in WALKING = 79%
	Total number engaged in MODERATE PA = 65%
	Total number engaged in VIGOROUS PA = 29%
	AVERAGE time SITTING = 7 hours 48 minutes
12-months	Total number engaged in WALKING = 86%
	Total number engaged in MODERATE PA = 31%
	Total number engaged in VIGOROUS PA = 17%

Statistical Impact - Older Adults

Quantitative	
Summary	Total number of participants = 342
Baseline	Total number of participants INACTIVE + INFORMED CONSENT = 45%
	AVERAGE time SITTING = 9 hours
	Total number engaged in WALKING = 70%
	Total number engaged in MODERATE Physical Activity (PA) = 33%
	AVERAGE time SITTING = 7 ¾ hours
3-months	Total number engaged in WALKING = 76%
	Total number engaged in MODERATE PA = 66%
	Total number engaged in VIGOROUS PA = 40%
	AVERAGE GHGA programme satisfaction score /10 = 8.5
6-months	AVERAGE time SITTING = 8 ½ hours
	Total number engaged in WALKING = 95%
	Total number engaged in MODERATE PA = 63%
	Total number engaged in VIGOROUS PA = 40%
12-months	AVERAGE time SITTING = 8 ½ hours
	Total number engaged in WALKING = 94%
	Total number engaged in MODERATE PA = 62%
	Total number engaged in VIGOROUS PA = 32%

Impact - Participant and Deliverer Testimonials

Participant (P)/ Deliverer (D)	Example Quote
P	"I think these sessions are great as we can all go at our own pace during the session and the exercises are suitable for all as you can push yourself more or less depending on your ability and how you feel. It really is brilliant and I think that everyone our age should give it a try as it really does help."
D	"Oh yes I've noticed participants improving their walking and their balance and I think is a brilliant example as when he first came he could barely walk unaided and had difficulty with his balance and he can now do the walking balance exercises unaided and is trying to pick up the heaviest weights in the box!"
Р	"I've got to know everybody in the class now and I've made some brilliant friends. I look forward to the tea and coffee at the end of each session as it gives us all time to catch up. This session is the first thing I put in my diary each week!"
D	"I absolutely love delivering the sessions and the fast that they are so beneficial for the participants as well is an added bonus. There are endless exercises we can introduce as participants progress so no session is ever the same. I think this variety is another reason that participants love coming."





Questions?







