

# Reaching, Preaching & Teaching

**If They Can Do It ....Then  
So Can I !**

**Demonstrations by Older Adult  
Volunteers to assist in Falls  
Prevention campaigns and other  
Health Issues Relating to  
Exercise and Physical Activity**

Sally Castell



# Ways and Means .....

Multiple strategies and a variety of graded programs need to be considered, offered & applied

## The Challenge

- Getting active
- Motivation



- Keeping 'on track'



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# Choices, Challenges and Changes

*“Getting people motivated to start exercising and then keeping them “on track” to achieve their goals is a significant challenge within any exercise program” Sally Castell*

- Motivational strategies involve assisting people to acquire the **belief, vision, desire, understanding and ability** to become and stay involved in appropriate activity according to their needs and abilities
- The motivation and /or barriers to movement and final activity involvement may depend on the individuals **functional abilities, conditions and cognitive capacity**
- To encourage and motivate people involves a creative process based on and assisted by **demonstrations, support, observation, knowledge, experience and skill.**



# Layers and Levels - Background Factors

Research evidence / theories (e.g. stages of change)

## Coming from the individual

- Many fears barriers and hurdles
- Individuals' perspectives and attitudes; many personality traits
- Language and cultural issues
- Learning styles based on literacy and educational background
- Previous experiences and perceptions

## Various methods, ways and processes.....

*Multiple strategies involving a variety of programs may need to be considered & applied*



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# Getting Started - Resistance and Rationalisation

It's too late ...I'm too old

Why do it?

Why bother?

What's in it for me?

How do I do it ?

Is it enjoyable ?

What will it cost?

Does it have a purpose?

What's the point ?

Is it safe?

Will I hurt myself?

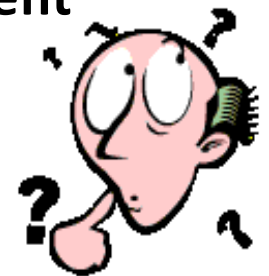
How will I benefit

Is it relevant ?

Will it be worth the effort

Will I embarrass myself ?

Can I do it?



*The motivation, barriers to movement and final activity involvement may depend on...*

*a) functional abilities and capacities*

*b) cognitive capacities and communication pathways*



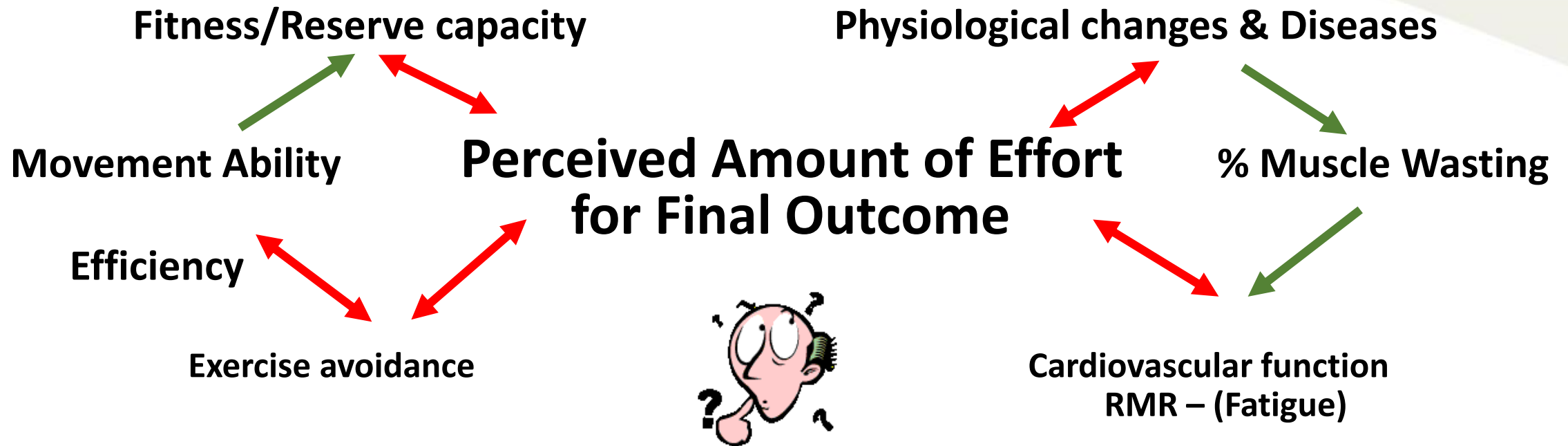
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# Exercise Compliance / Avoidance ...Sense of Effort

## *A Potential Vicious Cycle*



*As people age they may become fearful and less active causing a downward spiral of muscle weakness and bone fragility, thereby increasing the risk of falls and injuries*



# Applying - Concepts and Considerations

There are many ways to influence and support. All the different ways can & may need to be used to get people involved , “on track”, remain focused, interested & active

**Rationale .....What’s in it for me ?**

**The 4 Mat System...Different personalities ask different types of questions .....**

- **What if ?**
- **How?** - requiring usability factors
- **What?** - requiring facts and figures
- **Why?** - seek meaning / reasons for doing

*Whatever the thinking a certain trigger may be the initial reason and purpose to get started e.g. Health issue/injury from a Fall/ demonstration by peers*



# Applying – Social Marketing

## Creating some direction towards behaviour change.

*“The package of benefits must resonate among the intended audience. Perceived barriers to the desired behaviour must be alleviated or lessened, and the alternative behaviours need to provide more compelling benefits”*

*(Glanz K. et al 2008 – Health behaviour and health education :Theory , research & practice(4<sup>th</sup> edition)*

## Considering and Assessing .....

*“The advantages in current behaviour v disadvantages (negative effects) in the current behaviour. Modifying the expectancies or attitudes represents a fundamental step towards change”*

*(Glassman T. 2010)*



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# Applying - Social Marketing

Social marketing influences health behaviour through the use of marketing principles e.g. the use of 4 P

- **Product** – *what is being sold, including the behaviour and the associated benefits of that behaviour*
- **Price** - *the costs that the target adopters have to make and barriers they must overcome*
- **Placement** – *involves the channels by which the behaviour change takes place and where it is supported and encouraged*
- **Promotion** - *includes the means by which the change is delivered to the intended audience*

*Hastings 2007. Social marketing: Why should the devil have all the best tunes? Oxford , England: Elsevier Lincare House*



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# Older Adults – Models and Peers

- **Good role models**.... aiming to influence and improve knowledge, attitude or behaviour, dispelling the stereotypes of ageing more effectively than the young
- **Similarity**....having similar characteristics, experiences and issues, providing benefits from living a long life
- **Credibility** ....delivering exercise and health information on a variety of related topics from the older adults perspective
- **Acceptability** ....demonstrations may be more readily accepted from contemporaries as seen as “less biased” showing what is possible and realistic
- **An alternative** or different means of information sharing and transfer with specific health / exercise messages ... supporting professionals who provide the services



# Reaching - Have You Got It .....Do You Want It?

Stages of engagement / motivation .....

***“Human beings are powered by emotions not by reason”*** Donale Caine

***Raising awareness and communication .....it's all in the timing ..... what and how it is being presented***

**Marketing and Messages** (*exposure - once is not enough*) .....**Awareness & education**  
“the dripping tap”; “triggers”; face to face; word of mouth; local champions; media; phone calls; incentives; paper resources e.g. posters, booklets & flyers; other methods e.g. social media & networking etc. (supporting events...follow up ; partnerships)



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# “Getting the Message Across”- supporting activities / events

*To Reach People You Need To Inspire Them  
Make People Laugh And Feel Good*



Leading by Example



Champions, Models, Messengers, Peers

Key issues ....strategies, messages and  
methods are **simple, in context, relevant and  
realistic**



*Identify the most effective channels through which to reach people; ensure the  
message resonates; monitor and refine the process”*

*Older Victorians On line : A community survey exploring the usage patterns of older Victorians on line . Kate Crawshaw. COTA and Ellis Jones (2012)*



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# Older Adults – Demonstrations by Models and Peers

**“The Motivators”** Raising awareness and motivating other older adults to exercise. Demonstrating safe, simple exercises on specific health issues and events e.g. April Falls month; Seniors week; Arthritis week etc.

**Inspiring, Encouraging, Supporting**



*Demonstrations undertaken in many settings and community groups across NSW with supporting resources developed and provided concerning appropriate exercises*



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**Display teams – Role models – Familiarity – Credibility – Peer Support**





# The pluses of volunteering to demonstrate exercise ....

- **Still being part of the overall community** - remaining actively involved
- **Providing a valuable service** - **making** a difference by supporting older adults remain active, healthy and independent
- **Getting out and about** to new facilities
- **Having variety** throughout the week – a change of routine and meeting other people
- **Continual learning** concerning health / exercise issues
- **Self esteem / satisfaction** / “a sense of belonging” / mental stimulation
- **Team work and friendship**



## .....and minuses

- **Time** – practise; demonstrations; travel to venues
- **Commitment** - away from other things
- **Costs** - travel– making own way ; uniform; time
- **Ongoing support by leader** – training; on day demonstration
- Personnel; personalities; cultural appropriateness
- **Safety & legality issues** – insurance
- Venues



# Evidence

## Exercise Awareness

“Development and evaluation of “Aging Well and Healthily: A health education and exercise program for community living older adults”

Journal of Aging and Physical Activity 2002 Vol.10: 364-381

“Translating a community based motivational support program to increase physical activity among older adults with Diabetes at community clinics: A plot study of Physical Activity for Lifetime of Success (PALS)”

Preventing Chronic Disease 2008 :5:1-7

## Peer Support

“The application of peer monitoring to improve fitness in older adults”

Journal of Aging and Physical Activity Vol. 17 No. 3 :344-361 July 2009

## Peer Education

“Using senior volunteers as peer educators: What is the evidence of effectiveness in falls prevention”

Australasian Journal on Ageing. Vol 28 (1) March 2009 p 7-11



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Ida Keeling, 99  
World Record Holder

**"EAT FOR NUTRITION.  
NOT FOR TASTE. DO WHAT  
YOU NEED TO DO, NOT WHAT  
YOU WANT TO DO AND DON'T  
LEAVE OUT YOUR DAILY  
EXERCISE. LOVE  
YOURSELF."**



GrowingBolder.com



**"AS YOU GROW OLDER,  
IF YOU DON'T MOVE,  
YOU WON'T MOVE."**

Yvonne Dowlen,  
88-year-old figure skater



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# Let's do it!

We need to get out there  
and engage with the  
community

[www.movementmatters.info](http://www.movementmatters.info)

