

Help sheet no.19

Barriers to physical activity

There are many potential barriers to participation in physical activities. Some of these were identified in a survey of Australians who live in communities, including:

- lack of time (40%)
- lack of motivation (30%)
- injury (20%)
- not being 'sporty'
- needing rest
- lack of company
- poor health
- lack of persistence
- lack of energy.

(Department of the Environment, Sport and Territories, 1995)

Other comments reported less frequently included:

- being unable to afford the activity
- lack of enjoyment
- lack of facilities
- being too old
- fear of injury
- being too fat or too thin
- being too shy
- lack of equipment.

The Hilary Commission (1998) in New Zealand reported that 56 per cent of people surveyed would like to be more active, but that there were significant barriers to achieving this. Although similar surveys have not been conducted in organised care settings, many of these parameters may be expected to play an important role in limiting participation in physical activity. Within each setting, and for each individual, it is important to identify the barriers to increased physical activity. This can then serve as the basis, in conjunction with an understanding of the interests of an individual, for the development of a program to achieve a long term improvement in physical activity.

The environment can be a major impediment to participation in physical activity. For example, polished floors, uneven paths or hilly terrain may inhibit an individual's willingness to walk. Similarly, settings with easy access outdoors, access to public transport and community resources, and plenty of windows with pleasant views may encourage residents to spend more time outdoors. Other environmental impediments may be staff performing tasks which may be of interest to residents (for example, gardening or shopping).

Other environmental barriers relate to resources – equipment, design of the residential setting, and staff. Staffing issues include the ratio of staff to residents, the amount of dedicated time for staff to facilitate physical activity participation, and the skills and training of staff. In one large nursing home study in the United States, activity staff were found to spend only 12 minutes per week on average directly interacting with each resident (Voelkl et al., 1995).

Overcoming barriers

Although some aspects of environmental design are difficult to change, it is important to review aspects that are amenable to change. For example:

- Providing additional seating, shade and shelter at strategic points around a garden may encourage increased visits to the garden.
- Providing raised garden beds, with some garden space allocated to residents, may enable those residents interested in gardening, but who cannot bend to ground level, to continue active involvement.

It may also be necessary for staff to help motivate residents to increase activity and overcome some of the barriers mentioned earlier:

- Don't call activity 'exercise' – use terms such as 'dance', 'activities' or 'games'.
- If someone is embarrassed about their ability, suggest that they begin as observers. Others may prefer to begin activities/exercises away from other residents. As the older person increases their activity levels they may become more confident and interested in doing activities with others. The key is to find the approach that each resident responds well to.
- Staff and residents may feel that residents are 'too old' to start being active. It is important that staff encourage residents to gradually increase their activity levels and overcome ageist attitudes (see **help sheet 32**).
- Use music to promote enthusiasm and an inviting atmosphere.
- Use food as a motivation, for example walking to the dining table for a meal.
- Ensure that physical activities are enjoyable so residents don't lose interest.
- Set goals for residents and provide feedback about their progress.

References

- Department of the Environment, Sport and Territories, (1995), *Active and inactive Australians: assessing and understanding levels of physical activity*, Canberra, DEST.
- Hilary Commission, (1998), Physical Activity Taskforce report, Hilary Commission for Sport, Fitness and Leisure, New Zealand.
- Voelkl, J., Fries, B., & Galecki, A. (1995). Predictors of nursing home residents' participation in activity programs. *The Gerontologist*, 35, 44–51.