



“Physical Activity in Older Adults Ages 65+” Community Outreach Project

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Pic: A Loving Touch © Allan Mestel

Introduction

- June 24th, 2022
- Hollywood Senior Center and Enhanced Resident Services
- Older Adults 65+
 - 12 attendees
 - Ages 64-88

Background/Content

Learning Objectives:

1. Benefits of physical activity.
2. Classify your current activity level.
3. At home exercises.
4. Create an exercise plan.
5. Community resources.

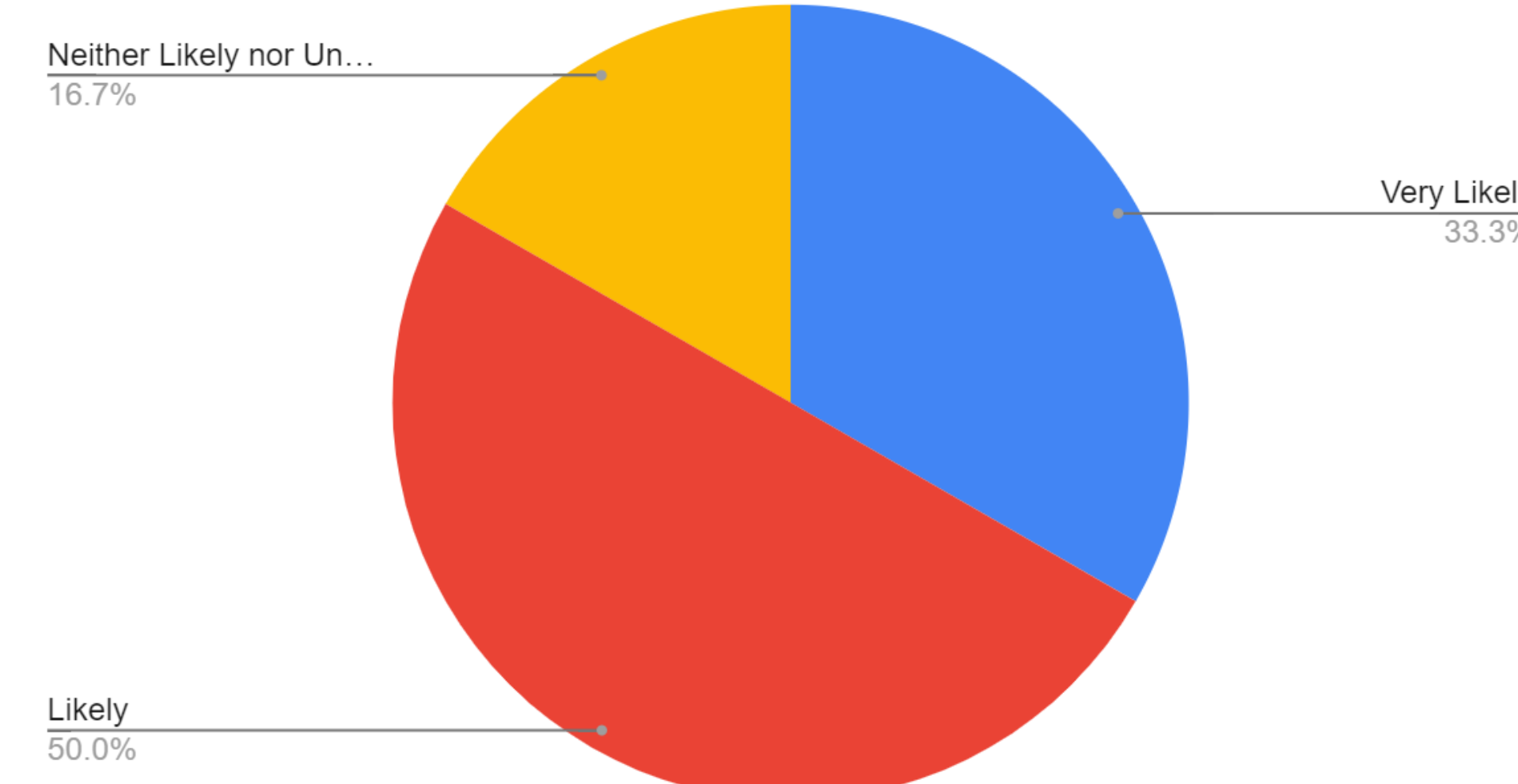
Main points:

- Older adults are the **world’s fastest growing population**.⁶
- Physical activity significantly decreases with age⁶
- Regular physical activity and increased aerobic fitness have been shown to improve a variety of health outcomes.⁴⁻⁹
- Especially in those with heart disease, history of stroke, type 2 diabetes, high blood pressure and high cholesterol. ⁹
- **Consistent activity reduces depression, improves brain function, and helps prevent falls.**⁹

Discussion

- My presentation was 30 minutes followed by 15 minutes of group discussion, an activity, and questions.
- Challenges: Participants had differing degrees of health literacy. Some people wanted more detail and others felt overwhelmed by the data.
- Opportunities: people were willing to discuss their motivation to be more active and the barriers they faced. This allowed us to brainstorm solutions.
- Evaluations:
 - Most participants were able to correctly recall the recommended level of weekly physical activity.
 - Participants stated they were more likely to incorporate different types of physical activity discussed during the talk into their daily routine.
 - Participants felt the exercise plan we made during the session was beneficial.
 - Many participants cited the local resources handout as something they found helpful to reference.

Likelihood of Behavior Change



Conclusion

A large part of my presentation discussed barriers to physical activity faced by older adults. I used the principles of intersectionality to address multiple identities that older adults carry and how that may impact their access to resources. For example, minorities and individuals with less formal education tend to be less physically active and subsequently experience worse health outcomes.⁵

We discussed specific barriers that my group experienced. They cited financial burden, lack of transportation, fear of safety (going outside in the evening) etc. Barriers such as these are impacted by one’s identity.

Another article stated that, “for health promotion to be transformative, we must strive to develop comprehensive understandings of how health behaviors are shaped and informed by social contexts.”³ I hope that I was able to increase health literacy in part by having this talk and using layman terms to translate the research.

References/Acknowledgements

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