



**University
of Victoria**

Graduate Studies

Notice of the Final Oral Examination
for the Degree of Master of Arts

of

MELODY BURGOYNE

BSc (University of Victoria, 2001)

**“Experiences of Physical Activity Engagement Among Older Adults
Following Discharge From a Medically Supervised Exercise Program:
Facilitators, Barriers, and Suggestions”**

Social Dimensions of Health Program

Friday, June 26, 2015
12:00pm

Halpern Centre for Graduate Students
Room 108

Supervisory Committee:

Dr. Sandra Hundza, School of Exercise Science, Physical & Health Education, University of Victoria
(Co-Supervisor)

Dr. Joan Wharf Higgins, School of Exercise Science, Physical & Health Education, UVic (Co-Supervisor)

External Examiner:

Dr. Debra Sheets, School of Nursing, UVic

Chair of Oral Examination:

Dr. Feng Xu, Department of Political Science, UVic

Dr. David Capson, Dean, Faculty of Graduate Studies

Abstract

The purpose of this study was to investigate physical activity (PA) engagement among older adults (OA) following discharge from a medically supervised group exercise program and to explore the facilitators and barriers that influenced maintained PA engagement. While facilitators and barriers to PA among OA in general have been well documented, facilitators and barriers particular to maintaining PA after discharge from a supervised exercise program have not been widely explored with qualitative methods or a mixed method design.

Data for this mixed method, case study approach were collected in two phases. In Phase I, questionnaires were used to investigate PA engagement as well as semi-structured qualitative interviews were completed (n = 12; *Mean* = 80.0 years) to explore facilitators and barriers that influenced PA engagement. In Phase II, reviews of medical charts were conducted retrospectively to gather further information on PA engagement and barriers (n = 12).

All 12 individuals in Phase I remained engaged in PA activity 2 – 48 months post completion of the medically supervised exercise program. This particular group of OA identified facilitators for and barriers to maintaining PA that were personally-, socially-, and program-based, and also provided suggestions to alleviate cited barriers. Four themes identified in regards to PA engagement were: (1) Personal drive: highly aware of the need to keep moving; (2) Social connections and support: we all need people; (3) Program components matter; and, (4) Convenient, Affordable, Relevant: suggestions to improve program access.

The power of multi-level, multi-sector approaches that consider the broader determinants of health was highlighted in this study. Participants identified the need for health care providers (HCP) and PA instructors to continue to communicate the benefits of PA, the importance of ongoing HCP support, and the necessity of working across sectors to reduce program related barriers to promote PA engagement among OA discharged from a medically supervised exercise program.