

Views on Exercise and Physical Activity Among Rural-Dwelling Senior Citizens

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Abstract:

Context: This study was conducted with senior citizens in the 2 rural communities of Ada and Lindsay, Oklahoma. These communities are both predominantly white, with the largest minority population being American Indian. Both communities are more than 60 miles from a metropolitan area and have a history of farming and ranching.

Purpose: The purpose of this study was to explore contextual factors related to physical activity among senior citizens living in rural communities.

Methods: Two focus groups were conducted. The groups were conducted in mixed-sex sessions and were audiotaped and transcribed verbatim for the purpose of analysis.

Findings: Themes from the focus groups included the following: (1) the types of daily activities engaged in by seniors; (2) the meaning and connotation of the words exercise and physical activity, with physical activity connoting for some the negative imagery of physical labor; and (3) the availability and suitability of settings for physical activity. For seniors living in rural settings in Oklahoma, the lack of indoor facilities and the sometimes extreme climatic conditions serve as significant barriers to physical activity. **Conclusion:** This study suggests that programs seeking to encourage physical activity among seniors in rural areas could benefit from an assessment of resources and settings for physical activity and the avoidance of language that may have negative connotations for this population.

Article:

During the past several decades, substantial research has investigated the relationship between physical activity and health. The results strongly support the importance of participation in regular physical activity as an effective behavior for health promotion and disease prevention.¹⁻³ Numerous studies also have been conducted in an effort to increase the number of individuals who are regularly physically active. However, most adults remain sedentary or underactive.^{4,5} A population that could particularly benefit from increased physical activity is older adults. Older adults are less active compared with the general population and can likely benefit the most of any age group from the health-promoting capabilities of physical activity.⁶ Furthermore, little is known about the physical activity behavior of rural-dwelling adults other than that they are even less active compared with urban dwellers.⁷

The authors of this brief conducted an ethnographic study in preparation for submitting a proposal to the National Institutes of Health for a study/intervention related to physical activity among rural-dwelling senior citizens in Oklahoma. To effectively plan an intervention with this population, the investigators determined that preliminary ethnographic research was necessary to better understand contextual factors related to physical activity from the perspective of community residents. This brief describes the findings from the research.

Methods

Focus groups are useful for exploring a range of issues that might influence people's behavior in their community. The focus group format allows an exploration of the breadth and complexity of meaning within a single cognitive

construct or cultural domain (eg, the meaning of exercise, physical activity, or health) of which onetime interviews of single individuals (as in the case of most surveys) are less capable.⁸

Physical activity in populations is a clear example of a behavioral category that may be greatly influenced by contextual factors. Physical features of the environment (such as climate, air quality, traffic, and availability of sidewalks, trails, or indoor areas to walk) could influence the nature and pattern of physical activity of populations. Social factors, such as crime, safety issues, and feelings of attachment and identity to community, may also have an influence. Furthermore, cultural factors pertaining to the meanings and norms around specific behaviors (such as exercise, health, physical fitness, and physical activity) must be considered when trying to understand or influence behaviors. Therefore, to better design the specific content of the proposed intervention, exploratory ethnographic research was conducted to understand, from the perspective of community residents, what some of these contextual factors might be in the intervention communities.

Two focus groups were conducted in 2 of the 5 rural communities proposed for the intervention. The 2 communities were Ada and Lindsay, Oklahoma, with populations of approximately 15,000 and 3,000, respectively. The population of Lindsay is predominantly white (90.9%), with the largest racial minority group being American Indian (4.9%). The population of Ada is also predominantly white (73.9%), with American Indians representing 15.1% of the population. Hispanics represent less than 3% of the population in both communities. Both communities are more than 60 miles from the nearest major metropolitan area and have economies dependent on small-business manufacturing, health care, retail trade, farming, and ranching.

The focus group guide was produced with input from the entire research team. Focus groups were arranged with the assistance of the Southern Oklahoma Nutrition Program (SONP) staff. The SONP site staff recruited the participants and arranged for space to conduct the groups. The groups were conducted in mixed-sex sessions and were audiotaped and transcribed verbatim for the purpose of analysis. Relevant themes and issues from within and across the sites were summarized. Findings from the focus groups will be used to refine the research and intervention protocols for the planned proposal.

The purpose of the focus groups was to (1) identify important barriers and facilitators to physical activity that are context specific and barriers and facilitators that otherwise may have been unanticipated and (2) inform the health communication intervention strategies in regard to the older adults' perceptions of concepts such as health, physical activity, exercise, and physical fitness.

Results

One focus group, consisting of 14 senior citizens, was conducted in a meeting room in the Ada public library. An additional focus group, consisting of 12 senior citizens, was conducted at the Lindsay nutrition site. Both groups were tape recorded and transcribed verbatim for content analysis. The following represents the major themes and insights gained from the focus groups.

Activities of Daily Living. Focus group participants described fairly active lives, with personal hobbies and activities that kept them moving. Overall, people expressed the importance of staying active for physical and mental health reasons. Some also spoke about their concern with not being able to perform the same activities that were once an important part of their lives. Some of the most common physical activities that participants discussed included yard work and gardening, home maintenance and cleaning, and caring for grandchildren. Participants also saw other activities as important because they kept their minds active or kept them in touch with other people. These included quilting, traveling, sewing, playing dominoes or cards, studying the bible and reading, and doing other crafts.

Meanings of Exercise and Physical Activity. In the field of health promotion, it is generally believed that people will respond better to programs described as promoting physical activity, since the word exercise may conjure up images of intense aerobic exercise or calisthenics. Although focus group participants in both groups listed similar types of activities for both exercise and physical activity, when asked to describe how the 2 terms differ they

provided some surprising insights and some conflicting images. When pressed to distinguish between physical activity and exercise, participants used language in describing physical activity that gave a sense of more strenuous work (as in physical labor): “Physical activity is like work, it’s harder.” “Physical activity is like hauling hay.” “Mowing the yard. Yeah, Mowing. Boy, that’s physical activity, I know.” When the facilitator sensed that participants were perceiving physical activity to be more strenuous than exercise, he probed further: “Physical activity is harder than exercise? Is that what you are saying?” One response to this probe was “I think so.” To further clarify what others thought about this, the facilitator probed once again: “Do all of you feel the same way?” Responses to this probe revealed a high level of agreement: “Yeah, [physical activity] is harder.” “Physical activity is harder.” “Well, it involves all the body parts, you know.” “Physical activity is more strenuous. It sounds more strenuous to me.” Despite this apparent agreement, at times the distinction was contradictory, not readily apparent, or may not have existed for some participants.

Opportunities and Impediments to Physical Activity in the Community. Both focus groups reported numerous outdoor opportunities to engage in exercise and physical activity but reported limited opportunities for indoor activities. People actively participated in outdoor activities, such as walking, golfing, and swimming, but also indicated that outdoor activities were limited by such things as: weather, traffic, safety/security, and dogs: “Not safe at night, too hot in day ... too cold in winter.” “Not many sidewalks.” “Have to watch for dogs ... and traffic.” Current health status was also described as a factor that may influence a person’s ability to stay physically active: “And your heart doctor ... and you have a heart attack, they say walk. Well, I was walking a mile, a mile and a half, 2 miles a day. Then I got my hip all messed up and couldn’t walk. Well, they’re hollering, do something about that hip so you can walk.” Some participants with diabetes mentioned the need to avoid exertion in the sun to maintain their blood sugar levels. For these people, lack of access to indoor facilities was described as an important impediment to physical activity. Since the participants reside in rural communities, indoor shopping malls are not accessible. Walking indoors at the local Wal-Mart and the church gymnasium were cited as possible options used by some of the participants. Participants were in agreement that more needed to be done to encourage seniors to be more physically active. Planned programs, transportation, and dedicated buildings for seniors were cited among the issues that needed to be addressed to get seniors more active.

Discussion

The goals of this study were to identify (1) barriers and facilitators to physical activity and (2) culturally salient and appropriate language to promote participation in physical activity by rural-dwelling, older adults. The results of the focus group study suggest that important characteristics of the rural environment need to be considered when planning interventions to promote physical activity among senior citizens in these settings. These characteristics can be summarized as (1) features of the available settings for physical activity that discourage physical activity for seniors and (2) the scarcity of indoor facilities where seniors can engage in physical activity.

Although open space and outdoor settings and facilities are available for seniors who wish to engage in physical activity, issues related to personal health and safety may discourage seniors from regular outdoor physical activity. The issue of safety and its effect on participation in physical activity by the general population has been reported previously^{9,10}; however, the current study increases our understanding of the safety issue. Safety due to crime is a typical reason cited by urban dwellers for not engaging in physical activity. Safety due to crime was also a concern for this study’s participants, but the major safety concern was related to threats to health from personal injury or exposure to harsh conditions. The possibility of injury during outdoor physical activity was discussed in relation to the presence of dogs and traffic, uneven road surfaces, and the lack of sidewalks. The risk for injury was perceived to be greater at dusk and at other times of diminished visibility. Another important feature of the outdoor setting that was seen as a threat to the health of seniors was the climate. In addition to discouraging seniors from outdoor physical activity, harsh summer and winter weather conditions may exacerbate health problems such as diabetes.

Another problem associated with outdoor opportunities for physical activity is that rural settings often have a scarcity of appropriate indoor facilities. Many rural communities lack indoor shopping malls, large stores such as Wal-Mart, or indoor recreation centers. Seniors seeking to walk or exercise indoors must make do with what is available or find a means of transportation to an appropriate facility outside their immediate community. Making

do with facilities that are available may include exercising in one's own home or with small groups in rooms at churches or senior centers.

The language used in efforts to promote increased levels of activity with seniors is also important. This study suggests that for seniors in these rural communities, it will be important to avoid conveying images of physical labor or strenuous work, because these will likely discourage participation. The use of the term physical activity rather than softening the image conveyed when using the term exercise may convey something that is more strenuous and taxing. Perhaps this relates to the nature of work experienced by many of the seniors in these communities. Physical activity may be associated with physical labor, something they know intimately from their work on farms and ranches or other physically demanding jobs. It may be useful to examine this theme in other communities, particularly in rural communities with a history of farming and strenuous physical labor, before designing intervention programs and messages to encourage exercise and physical activity.

Conclusions

In conclusion, the findings described in this brief have 2 primary implications for projects that seek to promote physical activity among older adults living in rural areas. First, an assessment of resources and settings available for appropriate individual and group physical activities should be conducted. This might include an inventory of indoor and outdoor settings for physical activity and an assessment of their appropriateness to seniors (including access, safety, and other health considerations). The assessment will have implications for the types of planned activities to offer, where and when they are offered, and possibly the need for transportation to these resources and settings. Second, the language used by program staff should be examined in regard to the meaning that keywords or phrases convey to seniors living in rural settings. For example, in a misplaced effort to be more positive, project staff may inadvertently conjure images of demanding physical labor by choosing to talk about physical activity rather than exercise.

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