

PRIAE *Policy Research Institute on Ageing & Ethnicity*

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‘Get Active Today’

A Culturally Sensitive Physical Activity Programme for BME Elders

End of Project Report
(abridged version)
March 2008

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Background

On 22nd July 2004, 120 BME elders and managers gathered at PRIAE's residential conference in Harrogate. Seeing the elders fully engage and have tremendous fun in activities to promote physical well being (Tai Chi run by an elder; Chairobics by a facilitator) showed that BME elders can too engage with such activities if they are organised and well managed. Some began to talk of their specific exercise as part of daily routine. A 92 year old Sikh elder successfully completed the marathon and made the headlines, helping to change young and old people's perception of what is possible in old age.

Increasingly BME elders from different communities are making greater use of day care and residential care. Some are BME managed and do very well in responding to BME elders' needs, developing an active vibrant cultural programme, organising performances, with good management and volunteer support. Some are too small to develop beyond a luncheon club. There are several BME elder housing providers. And they are well regarded in meeting cultural requirements. This usually means food, language, practises of the home respecting family visits, faith based activity and occasional visits to the seaside/temples/mosques/churches.

However, many of these organisations fall short on physical active programme where BME women and men elders with various physical capacity can still take part, enjoy and be satisfied mentally and physically. Many BME elders within such settings are known to do their own individual activity, including chair exercises.

Managers of BME organisations face many challenges and are so limited in their scope and ability to develop a good range of BME active programme. But, they are supportive of PRIAE to produce a national programme which reaches BME elders by ethnicity, physical capacity and gender – which may also bring younger members of the family with elders.

Physical active life is part of BME elders' cultural philosophy and tradition but like so many things, not all can practice for various reasons. Changing behaviour through this project may well help a wide range of health agendas, e.g. preventing falls, tackling diabetes, reducing obesity, or forging better mental health by acknowledging the benefits of being active in one's lifestyle where walking, dancing, Yoga may have been practiced.

The development of a culturally diverse physical programme is a major innovation in reaching BME elders, and through this help BME elders as well as younger family members to join in and increase physical well being and independence. Showcasing good examples of work is an important way of recognising existing practice while helping to exchange and increase opportunities for a wider audience and from build further practices. This also reduces duplication and investment and development costs.

Funding

In 2005, PRIAE successfully obtained three years of funding from the Department of Health (Section 64) to deliver the Ageing Actively in Minority Ethnic Communities Project to **A**ctivate, **I**nspire and **M**otivate BME elders to be more active. The overall aim was to develop a culturally sensitive physical activity programme that would identify the benefits of BME elders being active, barriers for BME accessing physical activities and examples of good practice.

Year One: Barriers and Benefits

In March 2006, PRIAE held two consultation events in Leeds and London with managers, planners, development workers and service users¹ to identify motives and barriers to physical activity of BME elders. Attendees were asked a series of questions to inform the development of the AIM Project. Key comments related to the relationship between the voluntary sector and statutory agencies:

- BME age organisations felt that professionals were often unwilling to learn from the voluntary and community organisations
- Statutory providers don't recognise the complexities and differences within faiths and cultures and that culture and faith are two very different issues.
- Professionals are often unwilling to learn about culturally appropriate services often feeling that they knew all they need to or having preconceived ideas – Information is often built on stereotypes and needs to be more appropriate an example of this is that some statutory providers visit Muslim elders in their own homes. Often the men and women will sit separately particularly if there are strangers in the house but the service providers see this as the men oppressing the women and will insist that everyone sits together. This only serves to further the views of the community that the service providers don't understand their culture and faith and furthers the argument to not access mainstream services
- Statutory bodies need to work in partnership with the voluntary sector and include more local representatives who understand their local community. It was felt that all too often the representatives at strategic level were just tokenistic and although strategic planning boards often included ethnic minorities this didn't necessarily mean that they represented their communities
- All organisations were keen to expand their range of services and the numbers they catered for if funding allowed this but felt strongly there should be more signposting of activities available to BME elders in places such as GP surgeries

It was agreed that a culturally sensitive physical activity programme needs to:

- identify and highlight the barriers to physical activity of BME elders
- identify and design appropriate forms of physical activity for male members of the community
- give information relating to adaptation of activities to take into account culture and faith
- provide information to older people produced by older people that is appropriate and not patronising.

¹ For further information, please refer to the PRIAE Benefits and Barriers report (2006)

- utilise peer education in persuading elders to take up physical activity
- fully utilise local amenities and facilities within organisations

The attendees also felt mainstream services could learn a lot from the voluntary sectors experience.

Year Two: Good Practice

PRIAE established links with a significant number of statutory, community and private sector partners who deliver physical activity programmes to people over 55. However, none of the twelve national active ageing/falls prevention programmes focused primarily on the needs of BME elders.

The World Health Organisation states

“Culture which surrounds all individuals and populations, shapes the way in which we age because it influences all of the other determinants of active ageing”

PRIAE only found three visual resources that are available on audiotape or DVD, which link to or have reference to the BME communities. They are:

- **‘Step to the Future’** – a video/DVD created by Help the Aged with support from Mars Foods UK Ltd. This video/DVD is available in English and Hindi but is not BME specific. It contains a programme of exercises devised specifically for older people to keep strong and active into later life. An enthusiastic team of older people perform the exercises to music.
- **‘Be Strong, Be Steady’** – a video/DVD created by Help the Aged with support from Marks and Spencers. The exercises focus on reducing risk of fall and have been devised by postural stability experts. It is endorsed by Consultant Geriatrician and there are safety messages explained at the beginning. Subtitles are available in some languages including Hindi, Gujarati & Punjabi but the exercises demonstrated are not BME specific
- **‘Matters to the Heart’** – a DVD created by South Asian Health Foundation in association with Pink Sequin Productions, sponsored by Pfizer UK Foundation. There is a strong educational focus and produced as part of a story in a Bollywood style movie. It outlines the story of a father having a heart attack and subsequent life style changes to stay healthy, shows a family attending a health class on nutrition and highlights issues around CHD with the people from South Asian background. There is also advice on safety given by a doctor.

Consequently, PRIAE recognised that it needed to draw on the barriers and benefits identified in Year One as well as fill a gap in the market by creating a visual resource that outlines the benefits, barriers and good practice of culturally sensitive physical activities for BME elders.

Year Three: Get Active Today DVD

PRIAE commissioned True North Productions to produce the 'Get Active Today' DVD, which involved the help and support of 10 key BME community-based physical activity projects and 60 elders from different black and minority ethnic communities.

Filming took place during a week long residential as well as visiting specific BME community-based organizations that deliver culturally sensitive physical activity services.

During the residential, and with the assistance of two facilitators from the Leeds Metropolitan University (Centre of Healthy Lifestyles), 40 active ageing champions and 10 managers from community-based BME organisations (that deliver physical activities to BME elders) stated the emotional, psychological, physical and spiritual benefits of being active such as:

- "Being active has revived my zest for life"
- "Improved my back pain"
- "Helps me to relax"
- "A walk a day keeps the doctor away"

They also identified the barriers for BME elders accessing physical activities such as:

- Communication and language barriers following an illness, e.g. following a stroke and what language is the class conducted in?
- Lack of information about the activities that are available locally
- Lack of education about the benefits of exercise
- Lack of access to appropriate facilities
- Lack of support from the family, peers, friends and health professionals to be active
- Overweight and feel uncomfortable – embarrassed
- Lack of or low self esteem, loneliness or depression
- Lack of confidence, e.g. a fear of falling and breaking bones
- Lack of transport or mobility to get to venues

Their suggestions to overcome these barriers included:

- Educate elders, professionals, carers and families - offering help and support to change the habits of BME elders

- Provide easily accessible information on all relevant activities
- Consider the needs of different faiths and cultures as well as engage people in a friendly atmosphere
- Have champions from the community who can activate, inspire and motivate elders, professionals, carers and families

Elders from the South Asian, African, African Caribbean and Chinese communities demonstrate a range of culturally sensitive physical activities, which are appropriate for older people in their communities and they highlight the benefits of being active.

Professor Jim McKenna of Leeds Metropolitan University, Carnegie Research Institute, Centre for Active Lifestyles provided the voice over and his team helped to shape the DVD.

Next Steps

The funding for the project ended in March 2008. However, 100 complimentary copies of the DVD have been given to:

- **AIM Project Champions** (BME Elders who have been involved with the AIM Project) who will use the DVD to activate, inspire and motivate their families, friends, peers and networks to be more active
- **Voluntary Sector Organisations** that have been involved with the AIM Project will show potential funders to obtain additional funding to continue delivering culturally sensitive physical activities
- **Age, BME, Health Sector partners** to activate, inspire and motivate their staff to activate, inspire and motivate BME communities to be more active
- **Department of Health, e.g. Leads for Obesity, Health Inequality, Active Ageing** to inform commissioners on good practice for delivering culturally sensitive physical activities to BME elders
- **Associated Organisations** such as the UK Public Health Association, National Heart Forum, NHS Confederation, Local Government Chronicle to inform their members of the availability of the 'Get Active Today' resource.

Copies of the DVD are available by completing an order form, which is available from the PRIAE website: www.priae.org/projects/aim.htm.