

National Roundtable on Increasing Physical Activity Among Adults of Color Age 50 and Older

Findings and Recommendations

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PURPOSE

The purpose of the National Roundtable on Increasing Physical Activity Among Adults of Color Age 50 and Older was to create a forum to discuss effective cultural approaches to promote physical activity among elders of color. The Roundtable project was designed to increase the current knowledge base as well as identify gaps, challenges and opportunities for developing innovative and effective physical activity interventions for older adults of culturally diverse backgrounds.

BACKGROUND

Expanding the Work of the National Blueprint Initiative

The Roundtable originated as an offshoot of the National Blueprint for Increasing Physical Activity Among Adults 50 and Over, an initiative among national aging and physical activity organizations to better promote physical activity for elders. The Roundtable expands the work of the Blueprint by focusing attention on culturally sensitive strategies for physical activity promotion for diverse cultural groups with particularly high rates of physical inactivity and insufficient physical activity, especially African American, Latina/Latino, and American Indian elders.

Connecting Cultural Characteristics with Physical Activity Interventions

Traditionally, most physical activity interventions for older adults have not considered the unique culture features of elders of diverse cultural backgrounds. Earlier efforts at interventions for elders of color relied on transplanting programs designed for European American communities. In the past decade, there has been a growing awareness that culture is highly complex. Because of this complexity, a one-size-fits-all approach to cultural competency is not an effective strategy. Targeting or tailoring a physical activity intervention to make it appropriate for a particular cultural group necessitates careful understanding of and attention to the community's cultural characteristics and the barriers the community faces. Practitioners and researchers can work with this cultural knowledge, along with involvement from the community, to craft a cultural approach for a specific community that integrates the intervention with the cultural characteristics. The goal of relating the cultural characteristics of the community to aspects of the physical activity intervention allows the intervention to be accessible, empowering, and fit the lived reality of the cultural group.

METHODOLOGY

Composition of Roundtable Participants

We sought a diverse yet balanced mix of 18 participants for the Roundtable that would provide us with representative input in several dimensions. Because race and ethnicity were central components of the Roundtable's area of inquiry, we gave particular attention to the racial/ethnic makeup of both the whole group and the three breakout groups. Our design was intended to structure the inclusion of voices from the African American, Latina/Latino, and American Indian communities. Asian Pacific American communities were not a primary focus of the Roundtable based on the significantly higher rate of physical inactivity of the three other racial/ethnic groups. However, we felt it important to have representation of Asian Pacific American communities and included an Asian American participant who works with elders in that community. We also included participants based on their representation of women of color, who have lower rates of physical activity than men of color.

Additionally, we sought diversity in area of practice. We gathered a mix of academic and public health physical activity researchers, community physical activity practitioners, and people who work in aging organizations (national, state, or local). We recognized the value of the different perspectives that participants from these three areas of practice would contribute.

Organizations Represented by the Participants

AARP

Asian Community Services, District of Columbia
Blueprint Partners Project
Centers for Disease Control and Prevention (CDC)
Cheyenne River Sioux Tribe, South Dakota
Minnesota Board of Aging, Indian Elder Desk
National Hispanic Council on Aging
National Indian Youth Leadership Project
New Mexico Senior Olympics
Pan American Health Organization
Project Joy
Robert Wood Johnson Foundation
University of Illinois
University of Texas
White Crane Wellness Center, Chicago

Discussion Topics

Discussion took place in small groups, one focused on the African American community, a second on the Latina/Latino community, and the third on the American Indian community. The following topics were discussed:

- (1) **Cultural characteristics** particular to their respective group, bearing in mind the complexity of culture due to the effects of ethnicity, socioeconomic status, gender, age, sexual orientation, disability, urban/suburban/rural setting, region of the U.S., and other factors.
- (2) **Barriers** to participating in physical activity experienced by elders in the group, and solutions to barriers.
- (3) **Specific cultural approaches** to promoting physical activity among elders in the respective group, including factors that make a given cultural approach unique (what makes it work in its setting), and factors that make a given cultural approach universal (would this work in other culturally diverse communities?).

FINDINGS - African American Community Breakout Group

Summary

The African American community breakout group highlighted experiences that have critically shaped the community's response to studies and programs. The group stated:

- The history of institutional abuse is of particular concern
- This history has resulted in a heightened sense of mistrust and scrutiny toward research
- There have been low rates of participation in the African American community in research studies and programs
- Little research has been devoted to the experience of African American men

The group also noted:

- Older African Americans are more frail than other American racial or ethnic groups of elders
- Program materials do not need to exclusively feature African American images to be culturally appropriate

The group discussed some of the barriers to physical activity in African American communities, and highlighted a spectrum of barriers:

- Person-based factors
- Environmental factors (unfriendly environment due to barking dogs, teenagers hanging out on street corners, lack of recreation facilities, etc.)
- Social environment factors
- Program intervention factors.

The group discussed overarching themes that provide a framework for how to work with a cultural community to create physical activity interventions, including:

- The need for a menu of program choices
- Recognition of commonalities across cultural groups
- Maximization of community resources
- Innovative ways to identify and reframe barriers
- Relationship building with the community.

Lastly, the group developed a methodology to systematically evaluate the effectiveness of cultural adaptation techniques. This mediational variable analysis consists of a sequence of the following four questions that go to the heart of evidence-based inquiry:

- Is there any evidence of :
- Input from the cultural community to the program;
 - The relationship of behavior change to the culturally-adapted program elements;

- The relationship of short or long-term maintenance of the program to the culturally-adapted program elements; and
- The robustness of the culturally-adapted program elements for generalization across groups, populations, and cultures.

Analysis

The African American breakout group emphasized the community's focus on past institutional abuse and the consequences that persist from that abuse. Although the breakout group did not name the Tuskegee Syphilis Study¹ specifically, the African American community's response to it has been characterized by a heightened sense of mistrust and scrutiny toward research. The African American community's sharper focus on institutional abuse has contributed to its low rate of participation in research and little research conducted on African American men in particular. The inhumane treatment of African American men in the Tuskegee Syphilis Study continued the devaluation of human life that began for African Americans under slavery. Given the long history of disregard for the basic human rights of African Americans on the part of the U.S. government, coupled with the Tuskegee Syphilis Study's focus on health issues, it is hardly surprising that the African American community is reluctant to participate in studies.

The breakout group offered two solutions to the problem of the effects of past institutional abuse. First, it emphasized the need to build trust when working with this community. The group offered many suggestions of steps to take to establish a long-term relationship in order to engage, empower, and genuinely partner with the African American community. Second, the group suggested reframing the community's heightened sense of scrutiny toward research from a barrier to a facilitator by relating more to the community's sense of ownership. An approach of "your taxes paid for this program" might encourage the community to take part in a program and make it their own. Also, it might be possible to turn the interest of heightened scrutiny into heightened involvement, if trust and a genuine relationship with the community were initially developed.

The aftermath of Tuskegee, combined with a high rate of frailty in this community, suggests the need for physical activity promotion to demonstrate both a sincere interest in the well-being of African American elders and to recognize that this population requires interventions specially tailored to a more frail level of functional ability. Another factor

¹ The Tuskegee Syphilis Study, funded and conducted by the U.S. Government, began in 1930 to monitor the course of untreated syphilis in 399 African American men, mostly sharecroppers or poor farmers. The men and their families were told they had "bad blood" and were never treated, despite the discovery of penicillin in the mid-1940s that would have cured them. The study was periodically reviewed by the U.S. Health Service but not stopped until 1972 when it was leaked to the public. Many died or suffered the debilitating effects of syphilis including paralysis, blindness and dementia.

to consider was mentioned in one of the group's discussions: leisure-time physical activity is not a norm for the African American community, especially African American elders. Many older African American women and men performed hard physical labor throughout their lives to survive, and do not view physical activity as voluntary or beneficial. Physical activity promotion in the African American community must creatively address this factor, as well.

The African American breakout group outlined domains of barriers to physical activity, ranging from person-based factors to social, environmental and intervention-related factors.

The group also suggested that program materials don't have to exclusively feature African American images to be culturally appropriate. This type of finding may vary with the composition of the breakout group participants, and other African American discussion groups might not feel the same way.

Finally, this group developed two important frameworks: (1) how to work with a cultural community to create physical activity interventions (mentioned above in the context of building trust and establishing a long-term relationship with the African American community), and (2) how to evaluate the effectiveness of cultural adaptation techniques. Both of these methodologies are applicable to any cultural group and make a significant contribution to the overarching themes section.

This group's findings are notable because of the focus on using cultural approaches to connect with communities through a feedback loop. The African American breakout group created universal frameworks applicable to many diverse cultures by drawing on the legacy of hundreds of years of survival and acculturation. Rather than focusing exclusively on their own cultural characteristics, this group took its well-developed knowledge of them and applied it more generally, benefiting both itself and other cultural groups.

FINDINGS - American Indian Community Breakout Group

Summary

This breakout group created a broad 3-dimensional picture of American Indian culture through a comprehensive description of cultural characteristics and values common to American Indian communities. The core cultural features that the group highlighted include:

- Oral tradition
- Intergenerational activities to pass on customs and practices
- Cultural specificity and rites of passage
- Connection with holistic processes through realms such as
 - The mind-body-spirit association
 - Seasonal life styles that originated in hunting, planting and celebration
 - Orientation to health through ceremonial ways (such as medicine men)

Fundamental cultural values include:

- Respect
- Responsibility and reciprocity (contribution to community service for future generations)
- Pride (sense of belonging)
- Heritage (understanding of historical background)
- Sovereignty (self-determination)
- Strengths (both physical survival and ways of living)
- Collectivity, clan ways and the extended tribal family

The role of elder is that of teacher of shared wisdom, and elders perform this role in various ways including participation in senior foster parent programs.

The group also gave considerable thought to barriers to physical activity facing elders in American Indian communities. The barriers described can be categorized as:

- Environmental factors (limited transportation, geographic isolation in rural or relocated urban setting, lack of accessible facilities or sidewalks)
- Language issues (translation not available)
- Tribal politics and priorities (including community services)
- Lack of funding and programs (small clinics, limited access to healthcare)
- Social, intrapersonal and interpersonal issues (self-acceptance issues, family/personal dysfunctions, no time due to caregiving, gender issues, elder abuse, stereotyping and discrimination)
- Physical issues (poor nutrition due to commodity foods, limitations due to chronic diseases)
- Beliefs and perceptions about exercise (physical fitness not a priority)

The American Indian breakout group noted that there are many positive qualities in Indian Country.

Assets include:

- Group orientation
- Clan/band ways
- Tribally-run “638” health promotion programs (such as Community Health Representatives and wellness centers)
- Large hospitals and the availability of health care
- Senior citizen centers
- Transportation
- Strong historical language background
- The practice of listening to elders
- Tribal youth as leaders
- Creative or motivational ideas

Resources include:

- Team effort
- Senior citizen centers
- Hospitals and schools
- Community health programs
- Community gardens
- Entrepreneurial opportunities (casinos, industry).

Critical elements of program planning include:

- Cultural factors
 - Language/dialect
 - Social/physical environment (including family and facilities)
 - Financial or other resources.
 - Grounding in the rituals, philosophies and practices of the cultural group
 - Connecting with the culture’s music, dance and the arts
- Involving elders
 - Listening to personal concerns
 - Validating all ideas
- Establishing a menu of activities
- Adapting physical activities (so they are appropriate for the community’s elders)
- Taking small steps

Additionally, this group considered aspects of community health education efforts in American Indian communities that affect physical activity promotion for the community’s elders. Community health education can:

- Promote physical activity awareness
- Provide a safe learning environment
- Establish appropriate physical activity policy

- Coordinate programs among facilities (senior citizen centers, hospitals, schools, tribal programs, etc.)
- Clarify roles and responsibilities
- Be a cornerstone in trust and relationship building in the community

A number of the above findings of the American Indian community breakout group relate to overarching themes that may be applicable to other communities, including:

- Cultural factors and barriers to consider when planning programs
- Recognizing the community's assets and resources
- Building a relationship with the community
- Benefiting from community health education efforts
- The need for a menu of program choices

Analysis

The comprehensive cultural picture provided by this breakout group serves as an excellent starting point to fashion a cultural approach for promoting physical activity among American Indian elders. American Indian communities have broad diversity, including setting (urban/rural/reservation), region of the country, and cultural specificity of tribe or band. Exploring physical activity promotion based on the role of core cultural features (oral tradition, intergenerational activities, orientation to health through ceremonial ways, etc.) in a specific community is key to successful outcomes.

For example, American Indians pass on customs and practices through intergenerational activities. Elders take the role of teachers of knowledge and shared wisdom, and perform this role in various ways. At the same time, the breakout group noted that an asset of their communities was giving voice to tribal youth as leaders. This strong American Indian tradition of intergenerational involvement is a good starting point for a physical activity program that can provide exercise opportunities for elders and youth. It might be possible to create an intergenerational physical activity program that relates to other cultural customs or practices such as celebration or pride. These approaches will boost social support for elders and decrease isolation.

This breakout group described many barriers to overcome in order for American Indian elders to participate in physical activity interventions. These barriers, whether environmental, intra/interpersonal, social, economic, physical, or due to language or tribal politics, exist within an individual's broad cultural context and reality. Strategies to address each barrier must relate to the cultural context. A first step in this process is to work with the community to explore each barrier, determine its importance, evaluate the likelihood it can be overcome, and devise techniques to surmount it.

For example, if the community decides to start a walking group as an appropriate physical activity intervention, the planners would begin the process of investigating the barriers. The first barrier listed by the breakout group is lack of accessible facilities for exercise, and lack of sidewalks. A safe walking path is necessary in order for older adults to maintain a consistent walking program outside. The community might decide to

prioritize a campaign of sidewalk or trail creation or maintenance. Because this campaign would demand time and extensive community involvement, the community might simultaneously pursue other walking options. The next step might be to solicit the opinions of the community's elders whether they would accept other outdoor walking options such as closed roads, roads without sidewalks, parks, or urban downtown areas, or indoor alternatives such as shopping malls, schools, or recreation facilities.

A second alternative would be to develop other activities. Perhaps there is a recreation facility but no transportation for most of the community's elders. Then the barrier of limited transportation would come into play. This process will shape the intervention to make it culturally appropriate for the specific community.

All communities have assets and resources to overcome barriers and facilitate physical activity participation. Community strengths identified by the American Indian breakout group include cultural characteristics (collectivity, for example), tangible programs (Community Health Representatives), and structures (hospitals, senior citizen centers). This breakout group embodied the spirit of a positive, strengths-based approach that maximizes the assets and resources of the community.

The group identified cultural factors that are critical elements of program planning such as language or dialect, the social and physical environment, and financial resources. Other vital considerations include grounding the program in the rituals, philosophies, and practices of the cultural group, and connecting with the culture's music, dance, and the arts. These distinct cultural factors depend on the community and individual elders in the community, just as cultural characteristics, values, and barriers are similarly unique. Each cultural factor, such as the social environment, provides knowledge useful in the planning of a physical activity intervention with community elders. In this way, elements of the elders' social environment that support physical activity participation (for example, a group of neighbors who like to take walks together) will act as facilitators to participation in physical activity interventions. Creative and participatory program planning decreases or reverses the effect of social environmental barriers to physical activity participation. For example, a peer leader can motivate a group of neighbors to start talking walks together.

The breakout group recognized community health education playing a role in promoting physical activity for American Indian elders. Physical activity program planners benefit by working with community health education resources to build trust and community capacity, as well as to maximize coordination among programs and facilities.

Despite a history of loss of their lands and people, a strong American Indian cultural heritage remains manifested in ritual, celebration, and holistic practice. Drawing from the strength of this cultural reservoir, this breakout group discussed many overarching themes potentially relevant to other cultural groups outside of American Indian communities. In particular, the emphasis on incorporating intergenerational activities, cultural rituals, philosophies, practices, music, dance, and the arts into physical activity interventions has a universal application. The key cultural factors highlighted by the

American Indian breakout group (language, social/physical environment, and financial resources) and the discussion of barriers to physical activity participation play an important role in program planning in other cultural groups, as well.

A second overarching theme highlighted by this group concerns the process of relationship building with elders in culturally diverse communities. The process starts with identifying community assets and resources. It continues with including elders in program planning, recognizing their role as teachers, listening to their personal concerns, and validating all ideas. The process also involves program planners working with elders and other members of the community to establish a menu of acceptable physical activities. Take small steps and recognize they represent big changes.

FINDINGS - Latina/Latino Community Breakout Group

Summary

The Latina/Latino community breakout group findings include a description of distinctive cultural features, a discussion of barriers and solutions, and two overarching strategies: creation of a national clearinghouse to coordinate resources, and a template for a community physical activity tool kit for elders that can be “tailored” to make it universally applicable.

First, the breakout group created a cultural portrait focused on key features that identify Latina/Latino communities. Cultural characteristics include:

- Family
- Faith
- Celebration
- Language
- Little attention to personal agenda
- Physical activity viewed as a luxury

The breakout group also delineated cultural features that distinguish Latinas/Latinos from other cultural groups, including:

- Gender
- Diversity
- Multi-ethnic
- Extended family

- Perceptions of physical activity/exercise
- Fun/fiesta
- Ideal body type?²

The group examined barriers to physical activity that challenge Latina/Latino elders, including:

- Time
- Safety
- Role models
- Knowledge
- Groups?³
- Leadership needed
- Access
- Undocumented persons

In addition to looking at barriers, the breakout group explored possible solutions to barriers. These solutions encompass a wide range of possibilities, including:

- Peer leaders
- Improved networking
- Sustainability
- Access
- Faith involvement
- Community “buy in”
- Menu of activities
- Intergenerational approach
- “Boot camp” programs
- Clearinghouse for all of the above

The group then described a template for a “tool kit” that can be tailored to provide unique solutions to the identified barriers. Suggested tool kit topics include:

- Screening
- Program tips
- Ads/PSAs
- Resources/template
- Medical clearance
- Evaluation
- Recruitment
- Training

² The question mark after “ideal body type” was part of the group’s notes.

³ The question mark after “groups” was part of the group’s notes.

Finally, the group presented factors that make the tailored tool kit approach universal:

- Goals
- Flexibility
- Sustainability
- Cost

Several of the above findings of the Latina/Latino community breakout group relate to overarching themes that may be applicable to other cultural groups, including:

- Cultural factors and barriers to consider when planning programs
- Solutions to barriers
- The need for a menu of program choices
- Creation of a national clearinghouse to coordinate resources
- The “tool kit” template that can be customized to provide unique solutions to the identified barriers
- Factors that make the tailored tool kit approach universal

Analysis

The cultural portrait provided by this breakout group begins with identifying key Latina/Latino cultural characteristics such as family, faith, celebration, and language. The description then expands to cultural features that distinguish Latinas/Latinos from other cultural groups, such as gender, diversity, multi-ethnic, and extended family. The Latina/Latino population in the U.S. is extremely diverse. Elders and their families come from many countries of origin, some as immigrants while others as refugees. Their ancestry may be indigenous, Spanish, or mixed. While Spanish is the dominant language, hundreds of regional variations are spoken. Cultural life centers around the extended family, faith, and celebration (fiesta). Because of the vastness of cultural variation among and within communities, teasing out the role of cultural factors in a specific community and linking those factors to physical activity promotion is critical.

The breakout group also discussed barriers to physical activity participation among Latinas/Latinos that take many forms. For example, personal safety is an environmental barrier. Immigration status may be a legal barrier experienced by undocumented elders who are excluded from programs or feel unsafe participating. A range of social barriers exists such as lack of role models and lack of leadership. Group norms may be incompatible with exercising, such as beliefs about ideal body type or female social roles. Lack of time is an intrapersonal and/or social barrier that relates to the key cultural characteristic of paying little attention to personal agenda. Beliefs and perceptions about exercise act as barriers, such as viewing physical activity as a luxury, or lack of knowledge of types of activities. Lack of access may be an environmental, language or financial barrier, or due to other reasons.

The Latina/Latino breakout group explored strategies to overcome barriers. Developing peer exercise leaders addresses the lack of role models and leadership. “Boot camp” programs and a menu of physical activity choices can provide knowledge of types of physical activities. Offering a menu of program choices together with improving

networking and building a relationship with the community to get “buy in” will increase access to exercise programs and promote sustainability.

The group suggested two additional approaches to surmount barriers to physical activity participation: faith involvement and intergenerational activities. Faith involvement builds on the cultural characteristics of the importance of faith and family. It may be a promising model for increasing physical activity for Latina/Latino elders. Another promising model is intergenerational activities, especially activities that relate to other cultural customs or practices. Bringing these two approaches together into a faith-based, intergenerational program would strongly link physical activity to Latina/Latino cultural practices. Of course, this process must be explored with a community to get the elders’ involvement in program planning and make sure it fits with the local cultural characteristics.

Another approach in the Latina/Latino community builds on the importance of fiesta by connecting community celebrations to physical activity. Community elders can advise program planners how best to link physical activities with aspects of fiesta such as music and dance. Community fiestas attract whole families, which provides an opportunity to include physical activities for family members of all ages, including elders. Because music and dance are already part of the culture, this strategy builds on a familiar, popular activity.

Many aspects of the cultural approach to program planning mentioned above may be applicable to other cultural groups, particularly the menu of program choices. The Latina/Latino community breakout group discussed two additional overarching themes that are universally applicable: creation of a national clearinghouse to coordinate resources, and a “tool kit” template that can be customized to provide unique solutions to identified barriers and factors.

This breakout group suggested the creation of a national clearinghouse to coordinate resources on culturally appropriate physical activity interventions for elders. A clearinghouse could disseminate materials and provide technical assistance to communities and organizations. It could also identify best practices and promising programs.

The group also described a template for a community physical activity tool kit for elders that can be modified to fit a particular community’s cultural factors and barriers. The tool kit can provide basic resources on screening, program tips, publicity (ads/PSAs), physical activity resources, medical clearance, evaluation, recruitment, training, and other topics. The tool kit can also address how to build a relationship with the community’s elders, design and sustain a physical activity program, maximize community resources, and identify and overcome barriers. An integral part of the tool kit would address how to tailor it for a particular community. A customizable tool kit has universal application because of its shared goal, flexibility, low cost to use, and attention to community capacity building and program sustainability.

There are many different stories of how, why, and when elder Latinas and Latinos came to this country, and this breakout group acknowledged the ethnic and historical diversity of Latina/Latino communities. At the same time, the group highlighted the essential shared Latina/Latino cultural features such as family, faith, and celebration. The group's discussion of proposed solutions to barriers encompasses many overarching themes with relevance to other communities. Five of these have especially universal application: the development of a menu of program choices, faith-based and intergenerational approaches, a national clearinghouse, and a customizable tool kit.

OVERARCHING THEMES APPLICABLE TO MANY COMMUNITIES

These overarching themes, drawn from the African American, American Indian, and Latina/Latino community breakout group discussions, provide a starting point for future work in promoting physical activity in culturally diverse communities,

Establish a Menu of Activities and a "Tailored" Tool Kit

1. No comprehensive program will address the needs and realities of all cultural groups. Provide an array of programs and options (a "menu" of choices) instead of one template for all people in a particular cultural group. The characteristics of any particular cultural group will determine the approach to planning an effective physical activity intervention. Wide variation may exist even within a cultural group on preferences of program elements. For example: Is the activity competitive or not? Is it an individual or group activity? Is it done at home or in a class? Outside or inside? Morning, afternoon, or evening? What incentives might motivate – personal items (water bottles, key chains), or appealing to sense of community (participating in a tournament that donates the proceeds to charity)?
2. Provide a "tailored" tool kit that can be customized to develop unique solutions to a community's particular barriers. The tool kit can provide basic resources on screening, program tips, publicity (ads/PSAs), physical activity resources, medical clearance, evaluation, recruitment, training, and other topics. The tool kit can also address how to build a relationship with elders and the entire community, design and sustain a physical activity program, maximize community resources, and identify and overcome barriers. An integral part of the tool kit would be how to customize it for a particular community. A customizable tool kit has universal

application because of its shared goal, flexibility, low cost to use, and attention to sustainability.

Create a National Resource Center/Clearinghouse

3. The creation of a national resource center or clearinghouse to disseminate materials and provide technical assistance on culturally appropriate physical activity interventions for elders would maximize resources for communities and organizations nationally. A national resource center could also identify best practices and promising programs.

Recognize that Cultural Groups May Have Commonalities

4. Look for possible commonalities across different cultural groups, not just differences (example: underlying mechanisms such as self-efficacy may be similar in many different cultural groups). Recognizing commonalities may be helpful in settings such as senior centers with clientele composed of elders from several different cultural groups.

Maximize Community Resources

5. Recognize and use the resources and assets of the community to design, implement, support, and sustain the program (strengths-based, community-mapping approach)
6. Bring physical activity into the community via existing community resources (e.g., churches)
7. Use faith-based community institutions to promote physical activity in general and specific programs in particular
8. Recognize that the community has the right to self-determination
9. Identify the positive cultural beliefs, attitudes, and practices compatible with engaging in physical activity. Consider cultural features that are facilitators, not just barriers
10. Leadership: Be aware of the difference between appointed leaders and natural leaders. Natural leaders will have genuine enthusiasm and may be more respected by the community than leaders appointed by someone in authority
11. Peer leaders: The community may include elders or others who are interested in promoting or leading exercise or physical activities
12. Be aware of opportunities to connect physical activity promotion for elders in the community with other local issues such as transportation, park and recreation use, safety issues, etc.
13. Coordinate physical activity programs with existing community programs and resources (e.g. senior centers, hospitals, schools, tribal or local government programs, community health education resources, etc.)
14. Work with the community's health education resources to build trust and community capacity, promote physical activity awareness, promote a safe

- learning environment, establish appropriate physical activity policy, and clarify roles and responsibilities
15. Explore possible entrepreneurial opportunities with the community (e.g. casinos, industry) that may support or relate to physical activity promotion

Identify and Overcome Barriers

16. Approach solutions to barriers to physical activity participation with cultural awareness of the particular cultural group
17. Overcome factors that are barriers to participating in physical activity. Maximize factors that are facilitators
18. Reframe cultural beliefs that have been barriers into motivators
19. To be successful, the community must have complete access to the program in all respects
20. Recognize the complexity of the total environment and the diversity of barriers:
 - a. Environmental (limited transportation, geographic isolation in rural or relocated urban setting, lack of accessible facilities or sidewalks, personal safety issues)
 - b. Social, intrapersonal, interpersonal (self-acceptance, family/personal issues, no time due to caregiving or other reasons, gender issues, elder abuse, stereotyping and discrimination, little attention to personal agenda, group norms, lack of exercise knowledge, lack of role models, lack of leadership, beliefs and perceptions about exercise such as physical fitness not a priority or physical activity viewed as a luxury)
 - c. Physical (poor nutrition due to commodity foods, limitations due to chronic diseases)
 - d. Language or dialect (translation not available)
 - e. Financial (does the program charge a fee or require equipment?)
 - f. Lack of funding and programs (small clinics, limited access to healthcare or fitness facilities, tribal politics and priorities)
 - g. Program intervention factors (an aspect of the intervention itself that acts as a barrier to participation)
 - h. Legal issues (undocumented persons may not have access to programs or feel safe participating)
21. Barriers may affect retention as well as recruitment. (Example: older African American women dropped out of a study primarily because of conflict with caregiving responsibilities, not the program itself)

Build a Relationship with the Community

22. Develop long-term relationships with community-based organizations
23. Focus efforts to get buy-in from the community. Buy-in includes the connection between physical activity and making a stronger community (building community capacity)

24. Identify a process to engage the community in all phases of the intervention design, implementation and evaluation
25. Establish a safe learning environment in the community to build awareness of physical activity issues
26. Nurture the development of social support to build participation in the program and to strengthen the community
27. Cultural competency can be broadened to community competency, including culture, history, geography, and context
28. Take small steps and recognize they represent big changes

Design and Sustain the Program

29. Ground the program in the rituals, philosophies, and cultural practices of the community
30. Consider cultural factors when planning programs, including language/dialect, social/physical environment (family, facilities), and financial or other resources
31. Work with the community to make sure the program uses culturally appropriate music, dance, and art
32. Consult the community to determine in what language(s) or dialect(s) to conduct the program and program planning to be accessible to the target population
33. Pay attention to health literacy issues in order to effectively communicate with elders in the community; use focused, simplified messages
34. Involve elders in the planning of activities; validate their ideas and pay attention to their concerns
35. Empower the participants to have ownership of the program
36. Work with the community from the program's inception on program design (including program's name, icons/logos, etc.) and implementation
37. Sustainability: work with the community from the beginning to find ways to integrate the program or activities into existing community resources in order to provide ongoing program support
38. Determine how to adapt physical activities so that they are culturally appropriate and accessible in all aspects (location, transportation, financially, functionally, linguistically, etc.), workable for the community's elders, and supported by the community
39. Incorporate intergenerational activities into physical activity promotion, especially if intergenerational activities are a cultural characteristic
40. Develop community networking to connect elders to the program
41. Establish clear roles, responsibilities, and policies for the program with the community

Evaluate Successful Cultural Adaptation

42. The following methodology is a systematic way to evaluate the effectiveness of cultural adaptation techniques:

- a) Is there evidence that the culturally-adapted program was based on input from the target audience?
- b) Is there evidence that the culturally-adapted elements of a program were perceived as related to the change in behavior?
- c) Is there evidence that elements of a culturally-adapted program contributed to the success of short-term or long-term maintenance of the program?
- d) Is there evidence that elements of a culturally-adapted program are robust enough to generalize across groups? Across populations? Across cultures?

SUMMARY

The Roundtable was designed to identify many perspectives in order to paint a broad cultural picture of African American, Latina/Latino, and American Indian elders and their communities, explore barriers to participation in physical activity, and suggest cultural approaches to better promote physical activity. At the Roundtable discussions a diverse group of participants delved into these issues and came up with many findings and strategies that inform and clarify our understanding of each cultural group's factors that act as facilitators and barriers to participating in physical activity.

Common threads became apparent in the findings of all three breakout groups. Rooted in cultural specificity yet applicable to other cultural groups, these overarching themes center around the following issues:

1. Establish a menu of activities -- no single program will address the needs and realities of all cultural groups
2. Create a national clearinghouse to coordinate resources
3. Develop a "tailored" tool kit that can be customized to craft unique solutions to a community's particular barriers
4. Involve community elders in all aspects of program planning
5. Work with the community's elders to identify key cultural factors and barriers specific to the community
6. Ground interventions in the key cultural factors of the specific community
7. Relate solutions to barriers to the elders' cultural environment in all of its complexity
8. Appreciate that all communities have assets and resources to contribute
9. Incorporate intergenerational activities and faith-based approaches into physical activity promotion
10. Engage with a community to build trust, community capacity, and sustainability over time as a vital part of a physical activity intervention
11. Recognize that small steps can lead to big changes

The following recommendations based on the above summaries, analyses, and themes represent a wide range of opportunities to advance the development of effective cultural approaches to physical activity promotion for older adults.

RECOMMENDATIONS

Use Current Knowledge to Improve Practice

1. Support the development of intergenerational physical activity programs

Intergenerational cultural practices are a vital part of most if not all communities of color. Physical activity interventions easily lend themselves to an intergenerational structure. The Latina/Latino community breakout group discussed several examples of how to promote intergenerational physical activity: (1) community fiestas attract whole families, providing an opportunity to include physical activities for elders and family members of different ages; (2) at soccer games, elders can walk around the periphery of the field while the youth play soccer. More formal interventions based on an intergenerational design can explore ways to use cultural approaches for a specific community. In addition to developing new interventions based on intergenerational design, another approach is to add an intergenerational component to an existing program.

2. Support the development of Active Living or Active Community Environment approaches that expand “community” boundaries

Active Living/Active Community Environment approaches use “community” to represent where people live. A new approach expands the idea of community beyond geographic boundaries to where people congregate, such as senior centers. Situating an active community environment program at a senior center that serves a community of color allows development of physical activity interventions (creating the “active environment”) that are culturally targeted to the cultural group.

3. Support the development of faith-based physical activity programs

Faith based programs build on the cultural values of faith and family, which are an integral part of many communities of color. Physical activity interventions can maximize available opportunities by connecting to a faith-based structure. For example, the African American community breakout group discussed using churches to bring physical activity programs to elders, since many elders are already involved in church activities.

4. Promote culturally appropriate physical activity prescription for elders of color by health care providers

Expand current efforts to encourage exercise prescription (Active Aging Toolkit, International Council on Active Aging's call to action to the medical community, etc.) to include culturally appropriate information to promote physical activity to elders from culturally diverse communities. For example, link primary care providers with community services in culturally diverse communities, provide culturally appropriate examples of physical activities, etc.

5. Create a national clearinghouse to coordinate resources and activities

A national clearinghouse can disseminate materials, provide technical assistance to communities and organizations, and identify best practices and promising programs. A clearinghouse can also establish networks to develop and promote partnerships, collaborations, and coalitions to provide support and sharing of resources among organizations promoting culturally appropriate physical activity for elders.

6. Incorporate cultural competency into training and performance standards for physical activity instructors who work with older adults

Cultural competency includes program delivery as well as program planning. Instructors who work with older adults need to be adequately trained so that all aspects of a program are culturally appropriate. A starting point is to establish standards of basic cultural competency for physical activity instructors in senior centers, housing, and other settings.

7. Create a national campaign to promote role models among physically active elders of color

There is a lack of positive media images of physically active elders of color. Part of the process to promote physical activity is to dispel stereotypes that older adults, and elders of color in particular, are not capable of active aging.

8. Create and distribute a customizable tool kit for culturally appropriate physical activity promotion for elders

A community-based tool kit to promote physical activity for elders can be customized to fit a particular community's cultural factors and barriers. The tool kit can provide basic resources including screening, program tips, publicity (ads/PSAs), physical activity resources, medical clearance, evaluation, recruitment, training and other topics such as community capacity building.

Expand and Translate Research to Build the Evidence Base

1. Test and evaluate promising models for future interventions

Cultural approaches need to be tailored very specifically to a particular community in order to be most effective. For example, deciding what constitutes “culturally appropriate materials” for a given community can best be determined by working with the elders in that community and experiencing barriers from their perspective. One method is to test and evaluate culturally appropriate physical activity intervention approaches by creating a national initiative of demonstration projects.

2. Integrate community involvement with physical activity interventions

Incorporate community engagement, community capacity building, individual and community empowerment, and sustainability as critical elements of demonstration projects in order to genuinely partner with community elders and create lasting, positive change.

3. Develop, test, and disseminate effective messages

Develop effective messages promoting physical activity targeted to elders of color. Test the messages through focus groups and qualitative interviews. Disseminate the messages to academic, national and local organizations.