



## Target groups of elderly people and fitting exercise programs in sport-clubs and sport-federations



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Example 2: Programs for elderly in the Finish Gymnastic Fed.

Example 3: Programs for elderly in the German Gymnastic Fed.

Example 4: Programs for elderly in Spain



### Conclusions

# Introduction

## Why exercise:

- Exercise means well structured, fitness enhancing physical activity (WHO)!
- Exercise has been shown to be effective for health promotion in all ages of adults.
- Exercise is a key point for all health promoting interventions!

## Why exercise in sport-clubs and as task for sport federations:

- Sport-clubs and sport-federations take responsibility for high quality in health enhancing physical activity – and this means exercise

## Important questions:

- What are relevant target groups for exercise within the elderly population?
- What can we recommend concerning the planning and description of fitting exercise programs?



# Recommendations for differentiating target groups

## 1. Active and fit older people

**Activity behavior:** Exercising habitual – in a group or alone - at least once a week by straining systematically most of the fitness factors. Additional extra everyday life activities (e.g. using stairs instead of elevator).

**Physiological preconditions:** Be able to cope with everyday life physical requirements, e.g. walking quickly, climbing stairs over several floors, gardening, and to exercise (in groups) without problems. No or few health-risk factors.

**Psycho-social preconditions:** Especially able to manage mood, being confident to keep fit till the old age, integrated in social networks.

**Exercise programs:** Especially from the fields of fitness-activities and nature sports / activities.



## 2. Older sedentary people, often with health problems and health risks

**Activity behavior:** No or unsteady exercising, often for many years. No or very few extra everyday life activities.

**Physiological preconditions:** Have some problems to cope with everyday life physical requirements, e.g. breathlessness when walking quickly or climbing stairs. Some problems with simple exercises for strengthening or flexibility. Mostly several health risk factors.

**Psycho-social preconditions:** low self-confidence to keep oneself in a good shape. Often bad mood. Sometimes also problems to integrate in social networks.

**Exercise programs:** Especially health enhancing exercise programs promoting the new behavior – some with special aims concerning the health and/or social situation of older people (e.g. fall-prevention, brain-training)



### 3. Old-old people with activity restrictions

**Activity behavior:** Problems with any activity behavior.

**Physiological preconditions:** Have severe problems to cope with everyday life physical requirements, e.g. bringing shopping goods to their home, walking restrictions. Often restriction when exercising in a standing position.

**Psycho-social preconditions:** Very different.

**Health enhancing exercise programs** – aligning with the preconditions (e.g. health, social) of the old-old people, e.g. chair gymnastics.



# Recommendations for the planning and description of exercise programs

## **Name of program**

The name of the exercise program should give a first idea about the type of activities, maybe also the target group. The name should also be somewhat motivating to participate.

## **Documentation/Publication**

An exercise program on a national or federation level should be documented in a way, that it can be the basis for the training of instructors and for a high standard in realization on the club level.

## **Description of target group**

The target group of the exercise program should be described carefully and it should be clear in the documentation how the activities of the program are fitting with the preconditions of the target group.

## **Preconditions for program**

For example the social situation of the exercise program or the requirements concerning room, material and so on should be described.

## **Goals of the program**

A clear defining of goals is very important – on the one hand the goals for an improvement of fitness factors, on the other hand goals for the promotion of psycho-social health resources (e.g. self-concept, group building) and behavior development.

## **Sessions/Units & Sequences**

The description of the sessions/units of the exercise programs should have a clear structure (e.g. sequences). An often used structuring of fitness programs is:

# Warm-Up; # Stimulus or Conditioning Phase; # Recreational activities; Cool-Down.

## Contents & Methods

The contents and the methods of the sessions should on the one hand fit with the goals of the exercise program and the preconditions of the target group. On the other hand especially the contents are standing for a special type of program (e.g. when many games are integrated, when music is used for underlying the activities and making good mood).

## Evaluation within the program (e.g. tests), external scientific evaluation

Hints should be given how the instructor can evaluate the success of his exercise program (e.g. testing fitness improvement, evaluating satisfaction of the participants). For a high quality of an exercise programs it is necessary to have a scientific evaluation, researching if the goals of the program can be reached in reality.

## Qualification of instructor

The standards for the qualification of the instructor should be defined clearly

## Further hints/needs for implementation in the club (or in another organization)

Implementation processes most also be planed for exercise programs, e.g. time, room, material, information for the target groups, advertising.



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## Preliminary Conclusions

- Concepts for differentiating target groups for exercising within the elderly population are rare!
- Active and fit older people often seem to be integrated in the “normal” exercise programs for adults.
- There are few well documented (published) and evaluated exercise programs especially for the group of sedentary older people.
- For the old-old people “programs” often concentrate on (the important) aspect how to reach and integrate these people. The exercise itself is often a minor point.