

# Characteristics of Local YMCAs That are Early Adopters of a Senior Exercise Program

141st APHA Annual Meeting  
Boston, MA

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## Presenter Disclosures

### **Marlana Kohn, MPH**

(1) The following personal financial relationships  
with commercial interests relevant to this  
presentation existed during the past 12 months:

No relationships to disclose

# The Objective

Describe site and participant characteristics

Model participant outcomes as a function of site type

# The Program



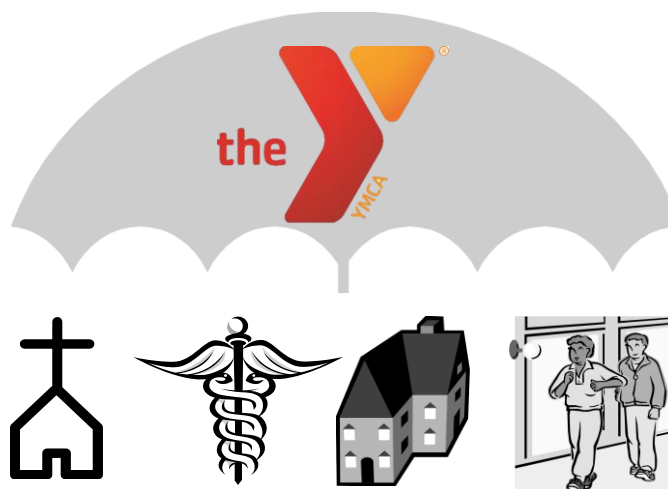
# The Reach



# The Partnership



## The YMCA



## The Methods

### Data

- Program records from 2005-2011
- Demographics and function test results

### Participants

- 2,322 participants
- 101 program sites in 16 states

### Physical Function Tests

- Chair Stand Repetitions
- Arm Curl Repetitions
- 8-Foot Timed Up-and-Go

## The Models

Outcome: Physical Function Test Result	<ul style="list-style-type: none"><li>• Baseline test result</li><li>• Follow-up test result</li><li>• Delta baseline to follow-up</li></ul>
Predictor: YMCA-Affiliated Site Type	<ul style="list-style-type: none"><li>• YMCA (ref)</li><li>• Faith-based</li><li>• Healthcare</li><li>• Residential</li><li>• Social Service</li><li>• Senior Center</li><li>• Other</li></ul>
Covariates	<ul style="list-style-type: none"><li>• Gender</li><li>• Age</li><li>• Caucasian</li><li>• Arthritis</li><li>• Comorbid Conditions</li><li>• Site Clustering</li></ul>

## The Sample

- 72 Average participant age
- 82% Female Participants
- 54% Caucasian participants
- 29% Participants with arthritis  
Participants with hypertension
- 12% Participants with diabetes

# The Results



16.5  
(baseline)  
18.1  
(follow-up)



12.1  
13.5



9.2  
8.9

Photo credit: Chair stand <http://theaerobicshealth.gov/verobandphysicalactivity/wheretostay/why/whyovercomes/magicalchairstand>  
Timed up and go [http://toolbox.tydelab.org.au/demos/assess/6/955/1\\_#/011\\_1\\_#10\\_1\\_7/0](http://toolbox.tydelab.org.au/demos/assess/6/955/1_#/011_1_#10_1_7/0)

# The Results

Test Results as a Function of Delivery-Site Type  
(b, p-value)

	YMCA	Residential Site	
		Baseline	Follow-Up
<b>Chair Stand</b>	Reference	<b>-1.40 (0.03)</b>	<b>-1.89 (0.05)</b>
<b>Arm Curls</b>	Reference	-0.10 (0.92)	0.58 (0.69)
<b>Up-And-Go</b>	Reference	<b>2.57 (0.03)</b>	<b>2.76 (0.05)</b>

# So What?

Tailoring



Fidelity



Results

# Looking Ahead

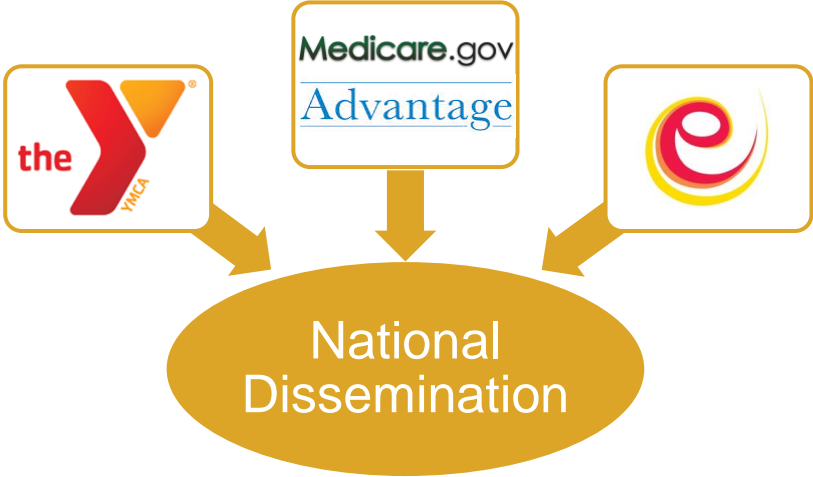


Photo credit: Medicare logo, <http://www.medicare.gov/>  
Medicare Advantage logo, <https://www.azblue.com/seniors/medicare-101/medicare-overview>

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**THANK YOU**

## References

- Ackermann, R. T., E. A. Finch, E. Brizendine, H. Zhou and D. G. Marrero (2008). "Translating the Diabetes Prevention Program into the community. The DEPLOY Pilot Study." *Am J Prev Med* **35**(4): 357-363.
- Ackermann, R. T. and D. G. Marrero (2007). "Adapting the Diabetes Prevention Program lifestyle intervention for delivery in the community: the YMCA model." *Diabetes Educ* **33**(1): 69, 74-65, 77-68.
- Ackermann, R. T., B. Williams, H. Q. Nguyen, E. M. Berke, M. L. Maciejewski and J. P. LoGerfo (2008). "Healthcare cost differences with participation in a community-based group physical activity benefit for medicare managed care health plan members." *J Am Geriatr Soc* **56**(8): 1459-1465.
- Harris JR, Cheadle A, Hannon PA, Forehand M, Lichiello P, Mahoney E, Snyder S, Yarrow J. A framework for disseminating evidence-based health promotion practices. *Prev Chronic Dis* 2012;9:110081.
- Hussein T, K. M. (2013). Using National Networks to Tackle Chronic Disease. *Stanford Social Innovation Review*: 31-35.
- Nguyen, H. Q., R. T. Ackermann, E. M. Berke, A. Cheadle, B. Williams, E. Lin, M. L. Maciejewski and J. P. LoGerfo (2007). "Impact of a managed-Medicare physical activity benefit on health care utilization and costs in older adults with diabetes." *Diabetes Care* **30**(1): 43-48.
- Ory, M. G., M. L. Smith, A. Wade, C. Mounce, A. Wilson and R. Parrish (2010). "Implementing and disseminating an evidence-based program to prevent falls in older adults, Texas, 2007-2009." *Prev Chronic Dis* **7**(6): A130.
- Rikli, R. E. and C. J. Jones (1999). "Development and validation of a functional fitness test for community-residing older adults." *Journal of aging and physical activity* **7**(2): 129-161.
- Vojta D, Koehler TB, Longjohn M, Lever JA, Caputo NF. A coordinated national model for diabetes prevention: linking health systems to an evidence-based community program. *Am J Prev Med*. 2013 Apr;44(4 Suppl 4):S301-6.
- Wallace, J. I., D. M. Buchner, L. Grothaus, S. Leveille, L. Tyll, A. Z. LaCroix and E. H. Wagner (1998). "Implementation and effectiveness of a community-based health promotion program for older adults." *J Gerontol A Biol Sci Med Sci* **53**(4): M301-306.
- Yancey, A. K., M. G. Ory and S. M. Davis (2006). "Dissemination of physical activity promotion interventions in underserved populations." *Am J Prev Med* **31**: 82-91.



## Acknowledgements and Funding

- We thank Susan Snyder and Meghan Thompson at Senior Services in Seattle, WA, for technical assistance with the data for this analysis, and Laura Farren at the UW Health Promotion Research Center for administrative and research support.
- HPRC is funded in part by the Centers for Disease Control and Prevention (CDC), Prevention Research Centers Program, through the University of Washington Health Promotion Research Centers Cooperative Agreement U48DP001911.

The contents of this work are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention.

**Table 1a: Baseline Physical Function Test Results by Site Type, Mean (SD)**

	Mean (SD) Physical Function Test Outcomes							
	All	YMCA (n=673)	Faith-Based Organization (n=141)	Healthcare Organization (n=20)	Social Services Organization (n=52)	Residential Site (n=178)	Senior Center (n=246)	Other (n=45)
Chair Stand (n=1,321)	12.06 (4.17)	12.55 (4.06)	12.29 (4.32)	9.40 (2.35)	12.84 (4.54)	10.78 (3.86)	11.29 (4.28)	13.67 (4.03)
Arm Curls (n=1,355)	16.54 (5.93)	16.73 (6.20)	16.72 (6.91)	14.10 (2.88)	16.87 (3.96)	16.32 (5.52)	15.67 (5.30)	19.53 (5.12)
Up-And-Go (n=1,323)	9.21 (6.50)	8.02 (6.31)	7.82 (3.89)	10.70 (3.06)	7.48 (4.22)	11.30 (6.56)	11.69 (7.84)	10.69 (3.92)

**Table 1b: Follow-Up Physical Function Test Results by Site Type, Mean (SD)**

	Mean (SD) Physical Function Test Outcomes							
	All	YMCA (n=248)	Faith-Based Organization (n=51)	Healthcare Organization (n=15)	Social Services Organization (n=20)	Residential Site (n=85)	Senior Center (n=128)	Other (n=21)
Chair Stand (n=564)	13.47 (4.67)	13.93 (4.13)	15.21 (4.00)	10.13 (2.59)	18.00 (4.90)	11.35 (4.91)	12.76 (4.98)	14.90 (4.25)
Arm Curls (n=567)	18.06 (5.69)	17.50 (5.63)	21.61 (5.51)	13.07 (4.06)	20.20 (4.53)	17.60 (6.10)	18.23 (5.52)	18.43 (3.36)
Up-And-Go (n=563)	8.93 (5.95)	7.73 (5.37)	6.80 (3.34)	9.27 (1.75)	5.00 (1.11)	11.09 (7.32)	10.87 (6.64)	10.81 (4.23)

**Table 2a: Regression Models of Baseline Chair Stand, Arm Curl Reps and Up-and-Go as a Function of Delivery-Site Type (b, p-value)**

	YMCA	Faith-Based Organization	Healthcare Organization	Social Services Organization	Residential Site	Senior Center	Other
<b>Chair Stand</b>							
Adjusted model with clustering	Reference	-0.22 (0.69)	-4.42 (<0.001)	-0.59 (0.65)	<b>-1.40 (0.03)</b>	-0.89 (0.20)	1.15 (0.03)
<b>Arm Curls</b>							
Adjusted model with clustering	Reference	-0.016 (0.90)	-5.04 (<0.01)	-1.26 (0.22)	-0.1 (0.92)	-0.91 (0.35)	2.75 (0.002)
<b>Up-And-Go</b>							
Adjusted model with clustering	Reference	-0.39 (0.57)	4.19 (<0.01)	0.36 (0.87)	<b>2.57 (0.03)</b>	2.88 (0.02)	2.58 (<0.01)

**Table 2b: Regression Models of Follow-Up Chair Stand, Arm Curl Reps and Up-and-Go as a Function of Delivery-Site Type (b, p-value)**

	YMCA	Faith-Based Organization	Healthcare Organization	Social Services Organization	Residential Facility	Senior Center	Other
<b>Chair Stand</b>							
Adjusted model with clustering	Reference	1.66 (0.05)	-4.69 (<0.01)	3.05 (<0.01)	<b>-1.89 (0.05)</b>	-0.03 (0.77)	1.55 (0.01)
<b>Arm Curls</b>							
Adjusted model with clustering	Reference	4.29 (0.01)	-6.12 (<0.01)	1.69 (0.22)	0.58 (0.69)	1.16 (0.38)	1.00 (0.25)
<b>Up-And-Go</b>							
Adjusted model with clustering	Reference	-1.04 (0.21)	1.85 (0.09)	-2.12 (0.02)	<b>2.76 (0.05)</b>	2.29 (0.08)	3.03 (<0.01)