

Increasing Physical Activity for those Already Active

Purpose

To determine whether providing strategies for already active people with SCI would increase the amount of physical activity they do in their spare time.

Summary

- Participants who were already participating in a structured exercise program 2-3 times per week attended group sessions where a "toolbox" of strategies such as planning and self-monitoring, were taught
- There was a significant increase in the amount of time participants spent being physically active in their spare time, that is outside of the structured exercise program

Possible Applications

 By using a group-based skill development approach, it is possible for active people with SCI to move beyond the minimum physical activity recommendations for this population

Research Abstract

<u>Developing physical activity interventions for adults with spinal cord injury. Part 3:</u>
A pilot feasibility study of an intervention to increase self-managed physical activity

Objective: The purpose of this pilot study was to test the efficacy and feasibility of a group-mediated cognitive-behavioral training (GMCB) intervention for increasing self-managed leisure time physical activity (LTPA) among people with spinal cord injury (SCI) who are already somewhat active.

Methods: Participants were 13 members of a supervised exercise program for adults with SCI. They took part in a 9-week, evidence-based, theoretically framed, GMCB intervention designed to promote self-regulatory skills and to increase the amount of time spent on self-managed LTPA, outside of the supervised program. Minutes/week of self-managed and supervised LTPA were measured pre- and postintervention, along with measures of social–cognitive variables. Participants' and the interventionist's perceptions of the intervention were also assessed. *Results:* Participants nearly doubled their total min/week of LTPA, as the result of a significant increase in self-managed LTPA from baseline (M=42.00 \pm 69.57 min/week) to postintervention (M=197.50 \pm 270.86 min/week; p<.05), at no cost

to supervised LTPA. Consistent with the GMCB and counseling of self-regulatory skills, self-regulatory efficacy was sustained and action planning increased from pre- $(M = \Box 4.63 \pm 3.25)$ to postintervention $(M = 6.83 \pm 2.40; p = .06)$. The intervention materials and protocol were perceived as usable by interventionists and participants and had good intervention fidelity.

Conclusions: Persons with SCI can voluntarily increase their *self-managed* LTPA after learning and practicing self-regulatory skills. GMCB training interventions are a feasible approach for teaching these skills.

Impact

- This pilot feasibility intervention study is the first to demonstrate that, when exposed to a group-mediated cognitive-behavioral (GMCB) intervention, people with spinal cord injury (SCI) who are already somewhat active (i.e., "actors") can be motivated to increase their self-managed leisure-time physical activity substantially, without adverse effect.
- The study confirms that an leisure time physical activity (LTPA)- enhancing GMCB intervention for actors with SCI is feasible to conduct, has intervention materials and protocol that are perceived as usable by interventionists and participants, and has good intervention fidelity.
- This pilot GMCB intervention is cautiously suggested as a potentially effective means of sustaining and increasing key self-regulatory cognitions in the Health Action Process Approach (HAPA) model thought to influence behavior change.

Brawley LR, Arbour-Nicitopoulos KP, Martin Ginis KA. (in press). Developing physical activity interventions for adults with spinal cord injury. Part 3: A pilot feasibility study of an intervention to increase self-managed physical activity. *Rehabilitation Psychology*.