Update and Preliminary Evaluation of the Canadian Paralympic Committee’s Changing Minds, Changing Lives Program

Purpose

- To update a health care provider (HCP) education program about exercise advice for people with physical disabilities
- To determine if the updated program was accepted and used by those trained to run it.

Summary

- The education program (Changing Minds, Changing Lives):
  - was updated using evidence
  - had positive feedback from those who were trained to run it and the HCPs who completed the program
  - raised the thoughts, feelings and confidence about the updated program information for those trained to run the program

Possible Applications

- Gaining the acceptance and adoption of those trained to run the program was the first step in studying the impact of the program
- The Changing Minds, Changing Lives program may help encourage and support HCPs to give exercise advice more often to people with physical disabilities

Research Abstract

Purpose: The purposes of the current study were to (1) describe the restructuring and dissemination of a Canada-wide intervention curriculum designed to enhance health care professionals’ prescription of physical activity to patients with physical disabilities, and (2) examine interventionists’ social cognitions for, and their acceptance and adoption of, the new curriculum.

Methods: A participatory curriculum development process was utilized, resulting in a theory- and evidence-based curriculum. Interventionists (N = 28) were trained in curriculum delivery and most (n = 22) completed measures of Theory of Planned Behavior (TPB) constructs assessing their cognitions for delivering the new curriculum at pre- and post-training and at 6-month follow-up. Interventionists also completed a Diffusion of Innovations (DOI) measure assessing their opinion of whether the new curriculum met characteristics that would facilitate its adoption
and use.

**Results:** Interventionists reported strong TPB cognitions for curriculum use before training. Significant increases emerged for some TPB constructs (ps ≤ 0.025) from pre- to post- training, and significant decreases were seen in some TPB constructs (ps ≤ 0.024) between post-training and 6-month follow-up. The interventionists rated the new curriculum as high on all the DOI characteristics.

**Conclusion:** The theory-driven, participatory development process facilitated interventionists’ social cognitions towards and adoption of the new curriculum. Positive increases in TPB cognitions from pre- to post-training were not maintained at follow-up. Further research is needed to determine if these changes in cognitions are indicative of a curriculum “reinvention” process that facilitates long-term curriculum use. Understanding curriculum adoption and implementation is a crucial step to determining the potential population impact of the intervention.