

Master of Public Health
Integrative Learning Experience Report

***MOVE MORE DOUGLAS COUNTY:
MOVING THROUGH STAGES OF CHANGE TOWARD
DIABETES PREVENTION & MANAGEMENT***

by

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submitted in partial fulfillment of the requirements for the degree

MASTER OF PUBLIC HEALTH

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Summary

Type 2 diabetes is a major public health issue affecting millions in the United States, with many more at risk due to prediabetes. If left unaddressed, prediabetes often progresses to type 2 diabetes, further exacerbating this trend. In Kansas, the prevalence of type 2 diabetes and prediabetes highlights the urgent need for intervention. Symptoms, such as excessive thirst, hunger, dry skin, slow wound healing, and blurry vision, can develop gradually over years, often going unnoticed and leading to worse health outcomes. Regular screening is crucial for early detection and management to prevent serious complications, including heart disease, stroke, nerve damage, kidney disease, and vision loss. Beyond physical health, unmanaged diabetes can reduce quality of life and social well-being. However, with proper management through medication adherence, healthy dietary habits, and regular physical activity, individuals can lead full, healthy lives.

Move More Douglas County, launched by LiveWell Douglas County in 2024, leverages the power of exercise in diabetes management. Guided by the Transtheoretical Model of Behavior Change (TTM), the program increases access to physical activity opportunities for individuals with prediabetes and type 2 diabetes. Through a physical activity prescription from their healthcare provider, participants gain access to group fitness classes and personal training at local recreation centers at no additional cost. They also receive educational resources to support them through behavior change, habit formation, and progression through the stages of the TTM. By fostering sustainable physical activity habits, Move More Douglas County aims to improve diabetes management and overall health outcomes in the community.

Subject Keywords: Prediabetes; Type 2 Diabetes; Physical Activity, Transtheoretical Model (TTM); Douglas County; Public Health.

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Chapter 1 - Literature Review

Introduction

Diabetes is a major public health issue in the U.S., affecting millions and imposing significant financial and personal burdens. The economic costs are substantial at both national and individual levels, while the impact on quality of life extends far beyond financial strain. Although it is possible to live a healthy and fulfilling life with diabetes, doing so requires consistent, intentional daily management. This review focuses specifically on prediabetes and type 2 diabetes, exploring their financial and personal costs, the key components of effective management, and the consequences of leaving them unmanaged. Particular emphasis is placed on the role of physical activity as a powerful tool for diabetes control. Finally, this review examines the Move More Douglas County program, a physical activity prescription initiative, and its use of the Transtheoretical Model of Behavior Change (TTM) as a guiding framework.

Defining Prediabetes & Type 2 Diabetes

Type 2 diabetes is a chronic condition that affects how the body processes food, specifically by altering insulin function (Centers for Disease Control and Prevention [CDC], 2024b). Insulin is the hormone responsible for allowing glucose, the body's preferred energy source, to enter cells for energy production (CDC, 2024b; Rahman et al., 2021). In individuals without diabetes, insulin efficiently facilitates this process, helping intracellular glucose enter insulin dependent tissues such as muscle, liver, and adipose (National Institute of Diabetes and Digestive and Kidney Diseases [NIDDKD], 2017; Rahman et al., 2021). However, those with prediabetes or type 2 diabetes experience insulin resistance or reduced insulin production, leading to glucose buildup in the bloodstream rather than being taken up by tissue cells for energy (NIDDKD, 2017, 2018; Rahman et al., 2021).

Type 2 diabetes symptoms develop gradually over many years and may go unnoticed; the main symptoms include excessive thirst and hunger, fatigue, blurry vision, dry skin, slow wound healing, and frequent infections (CDC, 2024f). Due to their gradual onset, routine blood glucose testing is critical for early detection. Diabetes can be diagnosed through three tests: the hemoglobin A1C (HbA1c) test, which measures average blood glucose over two to three months; the fasting plasma glucose (FPG) test, which measures blood glucose after at least eight hours of fasting; and the oral glucose tolerance test (OGTT), which assesses the body's response to a high-glucose drink (American Diabetes Association [ADA], n.d.b). Type 2 diabetes is diagnosed when HbA1c is 6.5% or higher, FPG is 126 mg/dL or higher, or OGTT

results are 200 mg/dL or higher (ADA, n.d.b). Prediabetes is identified when blood glucose levels are elevated but not yet in the diabetic range: HbA1c between 5.7% and 6.4%, FPG between 100 and 125 mg/dL, or OGTT results between 140 and 199 mg/dL (ADA, n.d.b; CDC, 2024e; NIDDKD, 2018).

Risk Factors for Type 2 Diabetes

Type 2 diabetes can develop at any age but is more common in middle-aged and older adults. Key risk factors include being over 45, family history, obesity, and physical inactivity (CDC, 2024c; NIDDKD, 2017, 2018). Certain ethnic groups, including African American, Hispanic/Latino, American Indian, Asian American, and Pacific Islander populations, also face a higher risk (CDC, 2024c; NIDDKD, 2018). Environmental factors, such as urbanization, exposure to air and chemical pollutants, low socioeconomic status, limited access to green spaces, and unwalkable neighborhoods, further contribute to diabetes risk (Beulens et al., 2022).

Diabetes Trends & Prevalence

Diabetes is a significant public health threat, affecting 1 in 10 individuals in the U.S., with over 90% of cases classified as type 2 diabetes (CDC, 2024b). This issue continues to grow, as diabetes cases have steadily risen over the past 20 years (CDC, 2024a). As shown in Figure 1, type 2 diabetes cases in the U.S. increased by 3% from 2001 to 2020, and this trend is expected to continue, given that 38% of the U.S. population currently has prediabetes (CDC, 2024d).

Diabetes rates are also high at the local level. As illustrated in Figure 2, 11% of Kansas adults (244,977 individuals) have been diagnosed with diabetes, while an additional 3% (66,000 individuals) remain undiagnosed, increasing their health risks (ADA, 2023a). Additionally, 35% of adults (782,000 individuals) have prediabetes, and approximately 17,329 Kansans are diagnosed with diabetes each year (ADA, 2023a). These alarming figures highlight the urgent need for sustainable solutions to address this growing epidemic.

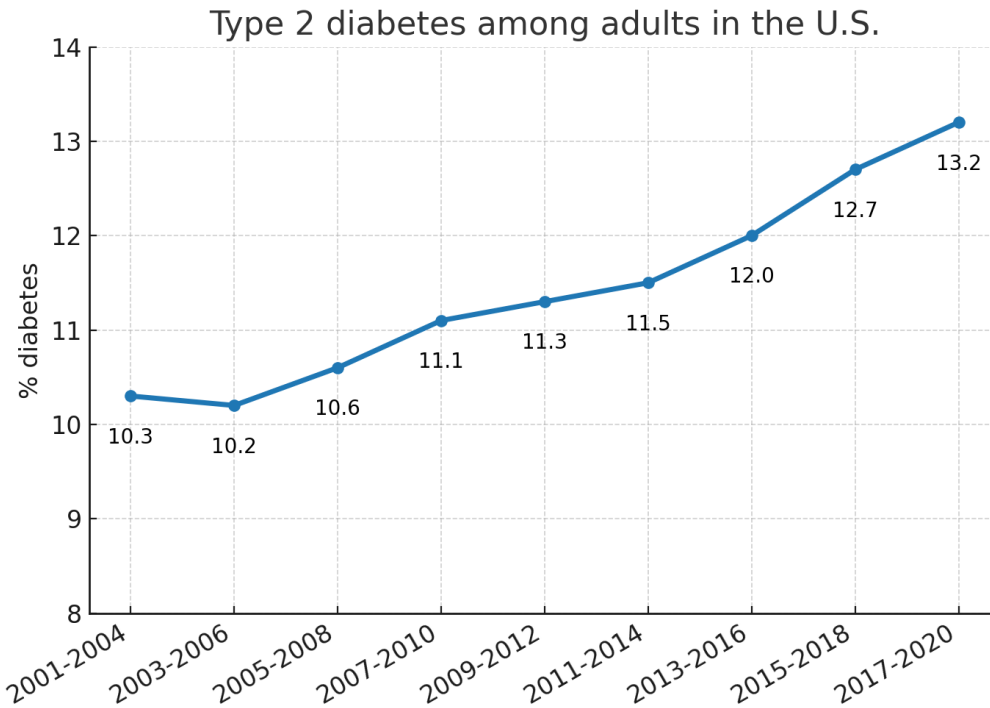


Figure 1 - Diabetes in the U.S. years 2001 through 2020 (CDC, 2024a)

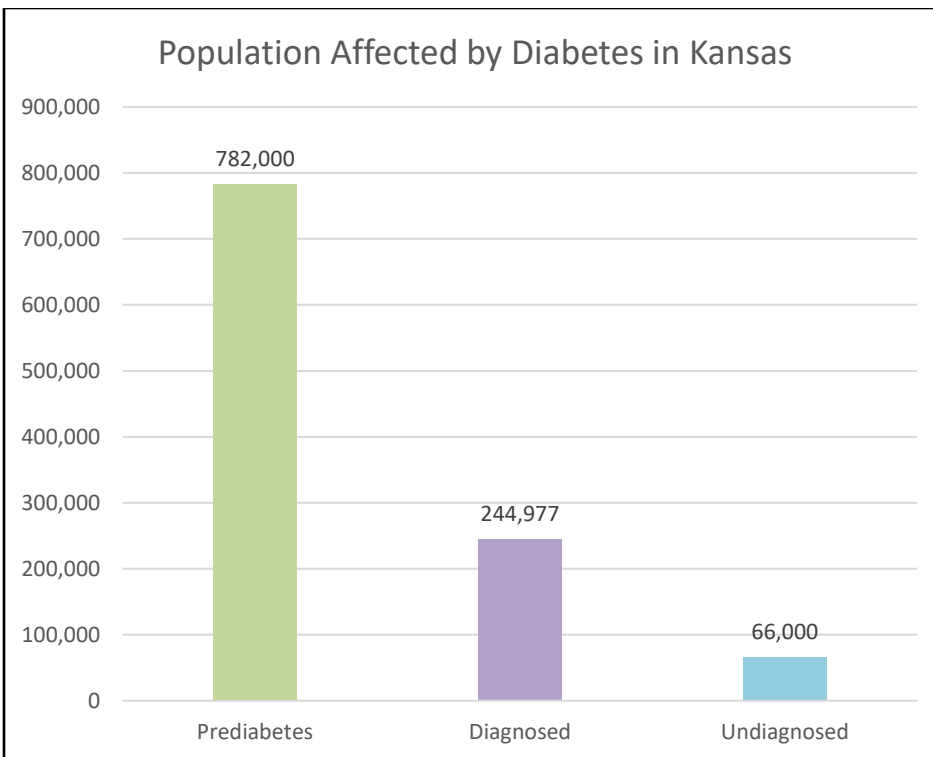


Figure 2 - Population affected by diabetes in Kansas (ADA, 2023a)

Financial Burden of Diabetes

Diabetes imposes significant health, quality of life, and financial burdens at both the national and individual levels. In 2022, diabetes care in the United States cost an estimated \$413 billion, primarily driven by medical expenses for insulin and other glucose-lowering medications (ADA, 2023b; Parker et al., 2024). Medical care for individuals with diabetes accounts for one out of every four healthcare dollars (Parker et al., 2024). On average, diabetes patients spend over \$12,000 annually exclusively on diabetes-related care, with their medical expenses being at least 2.3 times higher than those without the condition (ADA, 2023a; Parker et al., 2024). Beyond direct costs, diabetes also leads to indirect expenses, including disability, lost productivity, and premature death (O'Connell & Manson, 2019; Parker et al., 2024).

Given these rising costs, there is a growing need to emphasize non-pharmacologic methods for managing the disease. In addition to medication adherence, lifestyle changes such as improved diet and physical activity can help manage prediabetes and type 2 diabetes (NIDDKD, 2017; NIDDKD, 2018; Cavallo et al., 2023; Yeh et al., 2023).

Consequences Unmanaged Prediabetes & Type 2 Diabetes

Ignoring a diagnosis of prediabetes or type 2 diabetes can have serious health repercussions. If left untreated, prediabetes often progresses to type 2 diabetes (CDC, 2024e; NIDDKD, 2018). Without proper management, type 2 diabetes increases the risk of severe complications, including heart disease, stroke, nerve damage, and kidney, eye, and oral diseases (Farmaki et al., 2020; NIDDKD, 2017). It can also lead to foot problems, sexual and bladder dysfunction, and, in severe cases, premature death (ADA, 2023a; Farmaki et al., 2020; NIDDKD, 2017; O'Connell & Manson, 2019; Parker et al., 2024). Beyond physical health, unmanaged diabetes can diminish social connections and significantly reduce quality of life (O'Connell & Manson, 2019; Parker et al., 2024).

Physical Activity & Diabetes

Physical activity plays a crucial role in managing type 2 diabetes by improving blood glucose control and reducing HbA1C levels (Davies et al., 2022; Kanaley et al., 2022; Yeh et al., 2023). Regular exercise can also help individuals with type 2 diabetes address common comorbidities such as overweight, obesity, cardiovascular disease, and nerve damage (Davies et al., 2022; Kanaley et al., 2022; Yeh et al., 2023). Exercise enhances the body's ability to use insulin, helping muscles take up glucose during and after activity, which can lower blood sugar for up to 24 hours (ADA, n.d.a; Gillen & Govette, 2021). This highlights the need to engage in some form of physical activity in a consistent manner.

A systematic review and meta-analysis by Zhao et al. (2021) analyzed 10 randomized controlled trials (RCTs) with a total of 978 participants and found that combining aerobic and resistance exercise significantly improved blood glucose control and promoted weight loss. The intervention group showed a significant reduction in HbA1C (MD = -0.16%, 95% CI: -0.28 to -0.05, $p = 0.006$) and a decrease in body mass index (BMI) (MD = -0.98 kg/m², 95% CI: -1.41 to -0.56, $p < 0.001$) compared to the control group, which did not engage in physical activity. Similarly, another systematic review and meta-analysis by Shah et al. (2021) examined 32 RCTs and found significant improvements in HbA1C, fasting blood glucose (FBG), BMI, and waist circumference in intervention groups. The reduction in HbA1C ($p = 0.0001$), FBG ($p = 0.03$), and BMI ($p = 0.04$) were all statistically significant, further supporting the benefits of regular exercise in type 2 diabetes management. The findings on the articles by Zhao et al. (2021) and Shah et al. (2021) both underscore the importance of incorporating exercise into a diabetes management routine.

Barriers to Physical Activity

Despite the well-documented benefits of physical activity, only 1 in 4 adults nationwide, and just 1 in 5 in Kansas, meet aerobic and muscle-strengthening guidelines (Office of Disease Prevention & Health Promotion [ODPHP], n.d.a; United Health Foundation, 2023). Among adults with type 2 diabetes, physical inactivity is even more pronounced as they tend to expend less energy and take fewer steps than non-diabetic individuals (Moggetti et al., 2020), with about 38% engaging in less than 10 minutes of weekly physical activity (Mukherji et al., 2022).

Several factors contribute to these low activity levels among individuals with and without type 2 diabetes. Time constraints are a major barrier, as work, childcare, and household tasks often take priority over exercise (Cavallo et al., 2023; Deslippe et al., 2023; Ross & Melzer, 2016). Psychological factors, such as low self-efficacy and beliefs in external health control, also hinder participation (Kanaley et al., 2022; Ross & Melzer, 2016). Simply understanding the benefits of physical activity is not enough; people need confidence in their ability to stay active and overcome obstacles (Ross & Melzer, 2016).

Older adults with chronic diseases and higher BMIs face greater motivational challenges (Cavallo et al., 2023; Vilafranca Cartagena et al., 2021). Social support plays a critical role, yet many lack the physical, practical, or emotional encouragement needed to sustain activity (Deslippe et al., 2023). While family support is often strong early in a diabetes diagnosis, it tends to decline over time (Vilafranca Cartagena et al., 2021). Practical barriers, including

facility access, cost, safety concerns, and unfavorable weather, further limit participation (Cavallo et al., 2023; Deslippe et al., 2023; Ross & Melzer, 2016).

To address some of these barriers, Move More Douglas County has worked to improve affordability, facility access, and social support.

Move More Douglas County

Move More Douglas County is a project created by LiveWell Douglas County and designed by its Executive Director, Ginny Barnard, MPH. LiveWell Douglas County aims to build communities that support the health and well-being of all residents (LiveWell Douglas County, n.d.). Initially, the organization focused on two key contributors to chronic disease: limited access to nutritious food and opportunities for physical activity (LiveWell Douglas County, n.d.). Over time, its mission expanded to include tobacco prevention, youth-focused initiatives, and other health concerns such as domestic violence (LiveWell Douglas County, n.d.).

To address physical inactivity, the organization launched Move More Douglas County in 2024, a program that provides scholarships for local gyms and recreation centers (Barnard, 2023). The program first partnered with LMH Health and Heartland Community Health Center in Lawrence, where qualifying patients with prediabetes or type 2 diabetes receive physical activity prescriptions (Barnard, 2023). These prescriptions can then be redeemed at the Lawrence Parks and Recreation Department for group fitness classes or personal training sessions (Barnard, 2023).

Move More Douglas County provides scholarships for qualifying patients to use toward group fitness classes or personal training at the four local recreation centers: Community Building, Holcom Center, East Lawrence Recreation Center, and Lawrence Sports Pavilion® (Lawrence Parks and Recreation Department, n.d.). While Douglas County residents can access these recreation centers for free, fitness classes and personal training require an additional fee (City of Lawrence, 2025; City of Lawrence, n.d.).

To receive a scholarship, patients must first visit a medical provider for a physical activity readiness assessment, which is guided by the TTM. This model outlines five stages: precontemplation, contemplation, preparation, action, and maintenance (de Freitas et al., 2020). Figure 3 illustrates the reference diagram providers use during these assessments to determine a patient's stage of readiness for physical activity. Patients in the contemplation, preparation, or action stages—highlighted in the diagram—are eligible to receive a physical activity prescription.

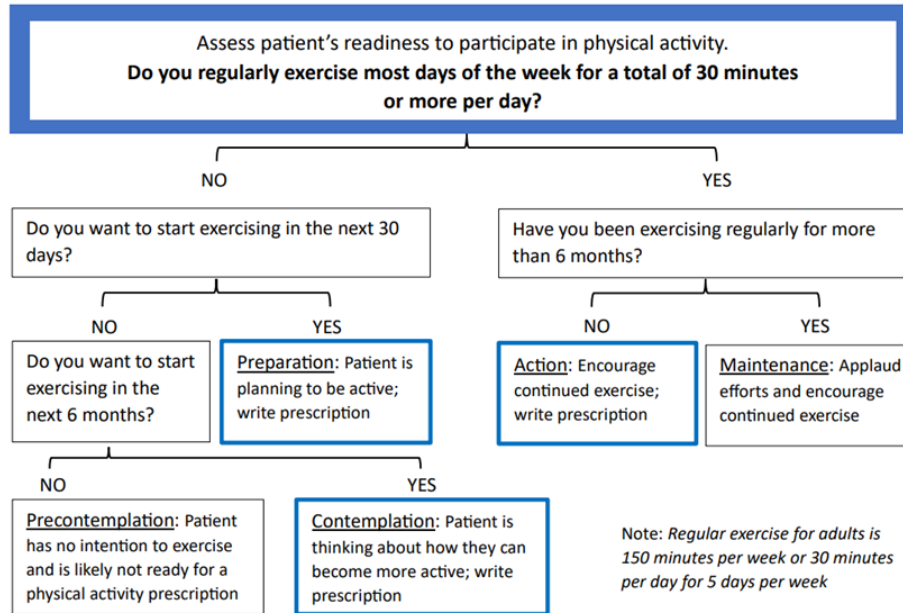


Figure 3 - Diagram used to assess patient physical activity readiness (Move More Douglas County, 2024)

While no program can fully eliminate all barriers to physical activity, the Move More Douglas County program can target several key obstacles. By covering the cost of fitness classes and personal training, it addresses financial obstacles while improving accessibility through increased awareness of local recreation centers, parks, and at-home exercise options. The program also builds self-efficacy, as connecting with fitness professionals and engaging in community-based activities fosters social support, which boosts confidence and increases adherence to an active lifestyle (Zhang et al., 2023). Social support, coupled with guidance and instruction from qualified professionals, enhances the safety and consistency of physical activity, as these experts provide accurate information and practical advice. Without this guidance, individuals may turn to unreliable internet sources, which can be overwhelming and confusing (Chen et al., 2024). In addition, the involvement of healthcare providers in promoting physical activity is essential. Effective doctor-patient communication, including task-oriented behavior and shared decision-making, plays a crucial role in health-behavior adherence (Nwosu et al., 2023).

Transtheoretical Model of Behavior Change (TTM)

The program uses a diagram based on the TTM to assess participants' readiness for physical activity. It categorizes individuals into TTM stages (precontemplation, contemplation, preparation, action, maintenance, and termination) based on their motivation and readiness to adopt regular exercise (de Freitas et al., 2020; Raihan & Cogburn, 2023; Ren et al., 2021). A prescription is given to those in the contemplation, preparation, or action stages. Figure 4 illustrates these stages, along with associated processes of change (e.g., consciousness raising, self-reevaluation, environmental reevaluation, stimulus control, reinforcement management, helping relationships and social liberation) and two key factors, decisional balance and self-efficacy, that influence progression through the stages.

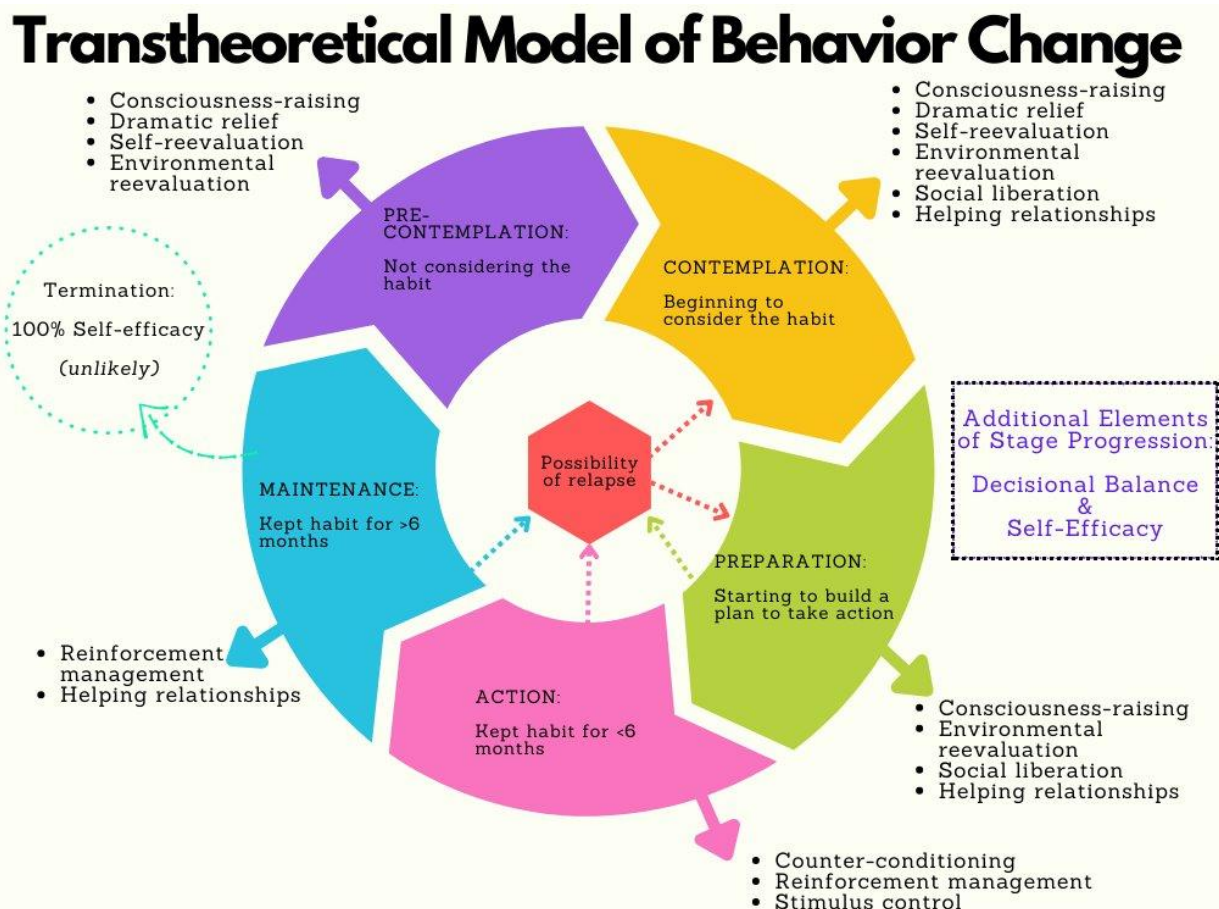


Figure 4 - Transtheoretical Model of Change (Adapted and created by Cristina Alamos based on Raihan & Cogburn, 2023; Ren et al., 2021)

In the pre-contemplation stage, individuals are unmotivated and have no intention of engaging in physical activity (de Freitas et al., 2020; Raihan & Cogburn, 2023). They may be in denial about how their behaviors affect their health, which is why the primary strategy at this stage is “consciousness raising”; helping individuals become aware of the issue (Raihan & Cogburn, 2023). In the contemplation stage, individuals begin to recognize that their lack of physical activity contributes to health issues, but they have not yet taken action (de Freitas et al., 2020; Raihan & Cogburn, 2023). They may feel indecisive about how to address the problem or question whether it is worth addressing at all (Raihan & Cogburn, 2023). At this stage, people are more receptive to information, so offering resources that encourage physical activity is a key strategy (Raihan & Cogburn, 2023).

In the preparation stage, individuals have acknowledged their physical inactivity as a problem and are committed to making a change (Raihan & Cogburn, 2023). Key strategies at this stage include “environmental reevaluation,” which involves assessing how the physical environment supports a new activity plan, and “social liberation,” which focuses on building a supportive social network (Ren et al., 2021). It is also helpful to continue providing information and resources to reinforce the goal, while identifying potential obstacles and developing strategies to overcome them (Ren et al., 2021).

In the action stage, individuals actively engage in physical activity, maintaining it for under six months, while gaining confidence in their ability to continue (de Freitas et al., 2020; Raihan & Cogburn, 2023; Ren et al., 2021). Key strategies to support this stage include “counter-conditioning,” where sedentary behaviors are replaced by more physical movement, “reinforcement management,” which involves rewarding the behavior (e.g., feeling better or achieving better blood glucose control after exercise), and “stimulus control,” which refers to creating an environment that supports physical activity (de Freitas et al., 2020; Raihan & Cogburn, 2023; Ren et al., 2021). In the action stage, it is also essential to remind individuals of the importance of consistency, even when faced with barriers such as tiredness, busy schedules, or other factors that may impede physical activity; exploring alternative exercise options and locations can help address these challenges (Ren et al., 2021). At the action stage, individuals are also more receptive to support, making provider involvement critical (Raihan & Cogburn, 2023). Additionally, two factors that influence progression at all stages are self-efficacy, the confidence in performing a behavior, and decisional balance, the weighing of pros and cons related to the behavior (University of Pennsylvania, n.d.).

Without adequate planning in the preparation and action stages, relapse is likely (Raihan & Cogburn, 2023). In the maintenance stage, self-efficacy and a strategy for overcoming

obstacles are critical to prevent relapse (Raihan & Cogburn, 2023). However, relapse does not equate to losing all progress; 85% of individuals who relapse from the action, or maintenance stages return to contemplation or preparation (depicted in the center of figure 4), as they have developed awareness of the importance of physical activity and gained tools to reengage (Raihan & Cogburn, 2023). Those who relapse to pre-contemplation often do so due to attempting to suppress the memory of failure (Raihan & Cogburn, 2023). Research shows that individuals in later stages, such as action and maintenance, tend to have higher self-efficacy and experience greater benefits from physical activity (Jiménez-Zazo et al., 2020). For those in earlier stages, healthcare providers can help them weigh the pros and cons of exercise, address barriers, and encourage small steps toward increased activity (Ren et al., 2021). A study with bariatric patients found that those who received TTM-based interventions had better transitions into later stages, higher self-efficacy, and greater adherence to physical activity (Ren et al., 2021). Also, self-efficacy is positively correlated with stage of change, with individuals in later stages showing greater confidence in their ability to be active (Jiménez-Zazo et al., 2020).

While the TTM offers a straightforward framework for public health researchers, it has some limitations. For instance, although health is influenced by multiple behaviors beyond physical activity, the TTM is difficult to apply when targeting several behaviors simultaneously (Raihan & Cogburn, 2023). A program aimed at addressing prediabetes and type 2 diabetes through habits such as nutrition, physical activity, and blood glucose self-monitoring may benefit more from a broader framework, such as the Socioecological Model of Behavior Change (SEM). The SEM supports multi-layered interventions and encourages consideration of cultural and social influences in an individual's life (Caperon et al., 2022).

That said, the TTM's specificity can still be valuable for targeted programs like Move More Douglas County. Another limitation, from my perspective, is the fixed timeline of the model. The TTM assumes a six-month period for stage progression, which may not reflect real-world variability; some individuals may take much longer or shorter to move through stages. This makes it challenging to apply the model universally. Despite these limitations, the TTM is a useful and straightforward tool for public health researchers and professionals such as healthcare providers when applied with flexibility and awareness of its constraints.

In conclusion, while managing type 2 diabetes and pre-diabetes can be challenging, especially when barriers to physical activity persist, programs like Move More Douglas County can play a pivotal role in helping individuals overcome these obstacles. By addressing financial, logistical, and motivational barriers, such programs can increase access to physical activity and

enhance self-efficacy, ultimately improving health outcomes for individuals with type 2 diabetes and pre-diabetes.

Chapter 2 - Learning Objectives and Project Description

1. Create evidence-based educational and informational sources on physical activity.

When the project began, implementation was in its early stages, with uncertainty about large-scale impacts. The initial plan involved testing with a small group, gathering feedback, and refining as needed. My primary role was to develop educational resources to help participants integrate physical activity into their routines.

To support this, an educational PowerPoint was created to simplify the Physical Activity Guidelines for Americans, making them more accessible and less intimidating. These research-based guidelines offer recommendations for incorporating movement into daily life to support health (ODPHP, n.d.c). Presenting them in a clear, practical format could help participants understand and apply them effectively.

Additionally, a resource listing beginner-friendly fitness classes offered at local recreation centers was developed. This tool included evidence-based information on the benefits of various physical activities, helping participants make informed decisions that aligned with their interests, health needs, and fitness goals.

2. Understand how structural bias, social inequities, and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels

The Move More Douglas County program seeks to eliminate barriers to exercise for individuals of all income levels, races, and fitness backgrounds, providing inclusive and personalized support. Recognizing that lower-income individuals often face transportation challenges (Breitenbach, 2022), program materials were developed to highlight parks accessible via public transportation and offer at-home workout alternatives. In addition to that, the program addresses social inequities by connecting participants with reputable fitness professionals. This approach is essential, as individuals of lower socioeconomic status are more likely to experience challenges with health literacy and less likely to engage in healthy behaviors (Ma et al., 2021). By facilitating access to qualified professionals, the program helps bridge these gaps.

To expand the program's reach, bilingual resources in English and Spanish were created, acknowledging that language barriers can hinder individuals with limited English proficiency from accessing health-related information (ODPHP, n.d.b). The program targets individuals with prediabetes or type 2 diabetes, regardless of income, thereby allowing those

visiting low-income health centers to participate, many of whom are members of minority communities (Noël, 2018).

While low-income health centers provide vital access to care, implicit bias within patient-provider interactions can impede progress, particularly when providers hold biased beliefs about the health outcomes of minority groups (Vela et al., 2022). Research also demonstrates that certain racial and ethnic communities often live in under-resourced environments, contributing to poor health outcomes and reinforcing provider bias (Vela et al., 2022). To address these challenges, the program encourages medical providers at low-income health centers to assume the role of coaches, thereby fostering improved communication, reducing biases, and assisting patients in taking actionable steps toward establishing a consistent physical activity routine.

3. Consider cultural values and practices during the implementation of public health programs

Resources were created in various formats to provide individuals with multiple options for engaging in physical activity. While some may prefer exercising at a gym or recreation center, others might feel more comfortable with alternatives, such as hiking or walking in a park, or performing workouts at home. This approach considers cultural values and individual preferences, recognizing and respecting diverse needs and barriers to physical activity.

4. Be able to communicate effectively and appropriately to a variety of audiences. Considering cultural and background differences in both written and spoken (oral presentations) public health content

This was accomplished by creating resources in both written formats, such as the "YouTube for beginners guide," and audio-visual formats, such as the "Educational presentations for target audience" project. Additionally, a Spanish version of several resources was developed to broaden accessibility. Clear and straightforward language was used throughout to ensure the information was easily understood by a wide range of audiences.

5. Further awareness of importance of cultural competence in communicating public health content

In creating the resources, careful attention was given to using language that would be easily understood by individuals from diverse backgrounds. Information was presented in a way that could be applied to various personal circumstances, emphasizing that there are multiple approaches to physical activity and no one-size-fits-all solution for incorporating daily

movement. Although bilingual and fluent in both English and Spanish, I recognized that the Spanish spoken in my home may differ from that of other regions or countries. To address this, a Spanish-speaking staff member at Live Well Douglas County reviewed the resources to ensure they would be accessible and clear to a broad range of Spanish speakers.

6. Effectively and professionally communicate with stakeholders and partners on public health programs and policies

While designing the List of fitness classes for beginners resource, I maintained communication with the Recreation Facility Operations Supervisor at Sports Pavilion Lawrence. Collaboration with this supervisor ensured that the information provided, based on the recreation center's website, was accurate. This approach guaranteed that the resource would become a reliable guide for reference when needed.

7. Use qualitative data collection methods (i.e., phone interviews) and utilize this data to draw conclusions about community needs and produce suggested improvements

While one of the learning objectives during the experience at Move More Douglas County was to gather qualitative data, this was not achieved, as the initial implementation process took longer than expected. When I began working with the Move More Douglas County Exercise Prescription Program, it was still in its early stages, with very few participants who had not been involved long enough to provide meaningful qualitative data.

However, this learning objective was met during the KIN 805 – Physical Activity and Human Behavior course, where I worked on designing a physical activity program for older adults in Wamego. As part of this project, in-person interviews were conducted to assess the community's needs. This experience emphasized the importance of engaging with community members to understand what they believe would be effective measures for improving their lives, rather than assuming their needs. It also provided valuable lessons in asking better questions to obtain more relevant information and gain a deeper understanding of a group's situation. If given the opportunity to work with participants in the Move More Douglas County program, these lessons would have been applied to enhance the data collection process.

Chapter 3 - Results

List of beginner-friendly fitness classes offered at Lawrence's recreational centers (Appendix A)

The first project I discussed with my preceptor involved developing a resource to help individuals navigate the recreation centers in Lawrence and select fitness classes that aligned with their interests. This resource was particularly relevant for participants, as those who received an exercise prescription from their medical provider were eligible to redeem a scholarship covering the cost of fitness classes or personal training at local recreation centers. The goal was to provide recipients with guidance in exploring available options, navigating the sign-up process, and gaining confidence in participating in group fitness classes, or alternatively, working with a personal trainer.

The initial step in the process involved visiting the Lawrence recreation center website and navigating to the adult fitness section, where all group fitness classes are listed. While the recreation center offers a variety of activities, including programs for children, seasonal sports, and community events, the focus was on identifying relevant group fitness classes for the target population: adults living with prediabetes or type 2 diabetes. The website provides filters to narrow down the options, making it easier to locate suitable classes. These filters were used specifically to search for group fitness classes that participants in the exercise prescription program could be interested in attending as beginners.

During the review of available options, several key aspects were considered: the recommended participant level of experience (e.g., beginner, intermediate, or advanced), class intensity (e.g., low, medium, high), the need for personal equipment (e.g., bringing a personal mat), and whether exercises were performed on the floor. Prioritizing the participant level of experience was essential to ensure the recommendations were accessible and not overwhelming for new participants. Classes featuring overly complex movements, fast pacing, or a lack of modifications could increase the risk of injury and discourage future participation. For classes without explicit experience level recommendations, descriptions were examined for indications of modifications or low-risk options, such as gentle yoga. It is important to acknowledge that, while physical activity carries some inherent risk of injury, the health benefits—especially for individuals with chronic conditions like type 2 diabetes—outweigh these risks (Reid et al., 2022).

Class intensity was another critical factor, as higher-intensity exercise may reduce adherence to a program, and allowing participants to self-select their intensity level fosters

autonomy, increases exercise tolerance, and may support exercise adherence (Ekkekakis et al., 2011; Teixeira et al., 2024). The need for personal equipment was also noted to help participants prepare adequately for their chosen classes. Additionally, the inclusion of floor exercises was considered, as such exercises can present challenges for individuals with limited mobility, highlighting the importance of accessibility.

After compiling a list of classes with the relevant details, a brief guide was included on how to locate each class on the website using its identifying code. A description was also added, emphasizing the importance of selecting an activity that participants enjoy, as enjoyment has been shown to increase the likelihood of adhering to regular physical activity (Ekkekakis et al., 2011; Shin & Kim, 2021).

To further support informed decision-making, a brief section outlining the benefits of various types of exercise, such as dancing, strength training, Pilates, and yoga, was included. This addition aimed to help individuals better understand how each activity aligns with their personal preferences and fitness goals.

The beginner-friendly fitness class guide was designed to be clear and practical, aligning with the contemplation and preparation stages of the TTM (see appendix A). During these stages, individuals are more receptive to information and resources that support their efforts toward behavior change. Both stages also emphasize the importance of “helping relationships,” meaning individuals are likely to seek social support. This guide encourages participants to visit the recreation center and connect with qualified fitness professionals and peers who are also beginning their fitness journey, offering valuable sources of support.

The task was successfully completed, and the resource was prepared for publication and use by participants. In the future, this tool could be distributed as a printout for participants upon enrollment in the exercise prescription program or uploaded to a community website designed specifically as a go-to resource for participants. While such a website does not currently exist, discussions were held with the preceptor about the possibility of creating one to ensure continued access to these tools for individuals in the program or including it as part of an email-based newsletter for new participants.

Educational presentations for target audience in English and Spanish. Topics covered: physical activity guidelines and personal training (Appendices B, C, D, E)

To create a PowerPoint presentation explaining the Physical Activity Guidelines for Americans, the most recent edition, published in 2018, was used. A key recommendation from these guidelines is that adults engage in at least 150 minutes of moderate-intensity aerobic physical activity per week (U.S. Department of Health and Human Services, 2018). To make this information more practical, specific examples of moderate-intensity activities were provided, including brisk walking, casual dancing, and gardening (American Heart Association, n.d.).

To support participants in monitoring their physical activity intensity, two tools were included: the Rate of Perceived Exertion (RPE) scale and the Talk Test. The RPE scale, a simple self-monitoring tool, ranges from 1 (rest) to 10 (maximum effort) (Mahaffey, 2022). The Talk Test is another tool: at moderate intensity, participants should be able to talk but not sing; at vigorous intensity, they should only be able to speak a few words at a time without pausing to breathe (CDC, 2022).

Strategies for integrating physical activity into a busy lifestyle were also included. For example, participants were encouraged to break the recommended 150 minutes into smaller sessions, such as 30 minutes or shorter bouts, spread throughout the week. Emphasis was placed on starting with small, consistent amounts of activity, such as 10 minutes, three days per week, if longer sessions were not attainable at first. This approach aims to help individuals build a habit and gradually increase their confidence in exercising regularly. For details on this presentation, see Appendix D.

In a separate PowerPoint presentation on the benefits of hiring a personal trainer as part of an exercise prescription program, I reflected on my experience as a certified personal trainer. The goal was to highlight the value that personal trainers offer in providing support, guidance, and education to help individuals safely and confidently work toward their fitness goals. Key reasons for hiring a personal trainer were listed, including their ability to create personalized exercise programs, correct exercise form and technique, and build a client's confidence to eventually exercise independently.

To help participants identify qualified trainers, examples of accredited personal training certifications were provided, such as such as National Academy of Sports Medicine (NASM), American Council on Exercise (ACE), National Strength and Conditioning Association (NSCA), National Council on Strength and Fitness (NCSF), and International Sports Science Association (ISSA), which demonstrate that a trainer meets the minimum education requirements to lead individuals safely through exercise. The presentation also explained what clients can expect when working with a personal trainer, including the types of questions trainers may ask and fitness assessments they may use to establish a baseline. Additionally, the scope of practice for

personal trainers was clarified, emphasizing that trainers are not qualified to provide medical advice, diagnose illnesses, treat injuries, or prescribe nutrition plans. The goal of this educational presentation was to help participants feel comfortable reaching out to a personal trainer and present them as a valuable resource for achieving fitness goals. For details on this presentation, see Appendix B.

The presentations, which were recorded in both English and Spanish, align with the contemplation, preparation, and action stages of behavior change. In the contemplation and preparation stages, individuals are open to information that supports the implementation of a new routine, while in the action stage, consistency becomes crucial. The physical activity guidelines presentation supports consistency by offering manageable strategies for incorporating physical activity into a weekly schedule and creating sustainable routines. For versions in Spanish, see Appendices C and E.

The task was completed successfully, with the presentations prepared and recorded in both languages. In the future, these presentations could be used as part of a series of introductory videos for new participants.

Physical activity journal example page (Appendix F)

The objective of this task was to develop an interactive resource that encouraged participants to reflect on the various physical activities they engaged in throughout the program, for example, group fitness classes, personal training sessions at the recreation center, outdoor exercise in local parks, and home workouts. The journal questions were designed to help participants evaluate their experiences, identify preferences, and make informed adjustments to align activities with their interests. Journaling has been shown to support self-monitoring and self-awareness, both of which are associated with developing a consistent physical activity habit and enhancing self-efficacy (Urzi et al., 2016).

The physical activity journal primarily aligns with the action stage, as it assumes individuals have already begun incorporating physical activity into their routines. However, it also supports aspects of the preparation stage. For those in the action stage, the journal facilitates self-reflection by prompting participants to assess their enjoyment of various activities and consider modifications to enhance their experience. This aligns with the “reinforcement management” component of behavior change. Moreover, since relapse from the action stage into the preparation stage is possible, the journal serves as a proactive tool, helping individuals develop strategies to overcome setbacks and maintain engagement in physical activity.

This task was successfully completed. As a future step, the tool could be expanded into a full journal by printing multiple pages and binding them to create a structured resource. Providing participants with a journal at the start of the program could encourage regular reflection on their fitness activities, ultimately supporting long-term adherence and enjoyment.

YouTube Channels for Beginners (English and Spanish) – List (Appendices G and H)

YouTube can be a great resource for health and fitness content, but it can be difficult to distinguish between reputable sources from those spreading inaccurate or potentially dangerous information. This tool was developed to help participants navigate these challenges by providing an initial list of beginner-friendly YouTube fitness channels. These channels offer options for modifications, cues tailored to various experience levels, and reliable advice suitable for the general public. Also, the tool includes tips on identifying online creators who may lack credibility or share misleading content. This resource is particularly practical for individuals who lack the time, resources, or simply do not feel like going to a park or the gym, offering accessible fitness options at home. This product can be found in English in Appendix G, and in Spanish in Appendix H.

The tool was created through an initial search for popular fitness channels, including those the developer had personally used, was familiar with, or had not previously encountered. Multiple videos from each channel were reviewed to assess their suitability for beginners. Key criteria included the presence of modifications, encouragement of body awareness, options for varying impact and intensity, and a pace that minimized the risk of participants feeling rushed or overwhelmed. Additional health-related content, such as promotion of eating habits or other topics, was evaluated to ensure appropriateness for the general population. Furthermore, the credentials of online trainers were examined to verify relevant certifications, such as personal trainer, group fitness instructor, or yoga instructor qualifications, ensuring their expertise in leading fitness programs.

This resource primarily supports individuals in the preparation and action stages. For those in the preparation stage, the structured list of beginner-friendly YouTube channels facilitates access to reputable, safe online fitness instruction, aligning with the “environmental reevaluation” component by encouraging individuals to view their home as a viable space for exercise. For those in the action stage, it reinforces stimulus control by helping individuals associate available screens (e.g., televisions, computers, or smartphones) with exercise opportunities, which can be particularly useful when faced with time constraints, inclement weather, or limited transportation.

This task was successfully completed. As a future step, this resource could be distributed to participants as a reference for home workout options and as a source for motivation for maintaining physical activity despite barriers such as limited time or uncooperative weather.

Parks in Lawrence, Kansas – List (Appendix I)

This guide was developed to encourage individuals to explore and prepare for visits to outdoor spaces in Lawrence. It provides detailed information about each park, helping visitors plan their trips by outlining key amenities such as public transportation access, parking, walking path types, resting areas, bathrooms, and water fountains. This project was inspired by topics explored in KIN 612 – Policy, Built Environment, and Physical Activity, and the items assessed were based on those included in the Community Park Audit Tool (CPAT) by Kaczynski et al. (2012).

The guide was created through a process that involved identifying parks across various neighborhoods and conducting in-person visits. During these visits, several key factors were assessed, including the availability of bathrooms, parking, lighting, and public transportation access. Walking paths were evaluated for material (e.g., concrete or dirt) and potential hazards, while resting areas, shaded spots, water fountains, and garbage receptacles were documented. Additional observations included overall cleanliness, aesthetics, and the presence of trail maps.

Beyond describing park amenities, the guide provides practical recommendations to enhance visitors' experiences. It advises on time considerations for exploring larger parks and suggests essential items such as sunscreen, bug spray, water, snacks, and appropriate footwear. To aid navigation, visitors are encouraged to take photos of available trail maps, and each park's location and exact address are included for easy access.

This resource primarily supports individuals in the preparation and action stages of behavior change. In the preparation stage, it facilitates planning by offering essential logistical details and aligns with “environmental reevaluation” by increasing awareness of local parks, encouraging individuals to view their community as a space for physical activity. For those in the action stage, it introduces variety and novelty to outdoor exercise, which can help sustain motivation and engagement toward physical activity.

This project was successfully completed and formatted for printing and distribution. In the future, this resource could be provided to program participants to assist in planning outdoor activities, particularly for those who prefer exercising in natural environments or seek variety in their physical activity routines.

Program and Product Results

All project materials have been completed and are ready for distribution. However, at this time, no feedback has been received regarding the use or effectiveness of the products. As for the Move More Douglas County program, Table 3.1 presents data collected between June 2024 and March 2025, including prescription redemption rates, the most popular program, and outcomes from pre- and post-surveys administered by the program.

To date, 25 prescriptions have been redeemed (17 at Lawrence Memorial Hospital and 8 at Heartland Community Health Center). While prescription redemption is tracked by Lawrence Parks and Recreation, data regarding participants' frequency of attendance at local recreation centers following redemption is unavailable.

A total of 25 pre-surveys and 19 post-surveys have been completed (see Appendix J for a sample survey). Based on the available data, participants reported positive outcomes three months after redeeming their prescriptions. These outcomes include reductions in A1C levels, improved balance and flexibility, and better mood.

Table 3.1 Participant and Prescription Data; June 2024 through March 2025

Prescriptions redeemed at Lawrence Parks and Rec	25 (LMH → 17; Heartland → 8)
Most popular program	Personal Training
Pre-surveys done	25
Post-surveys done	19
Improvements reported by participants	Lowered A1C Better balance Better flexibility Feel better/improved mood Improved strength

Chapter 4 - Discussion

Type 2 diabetes is a significant public health issue that imposes substantial costs at both the societal and individual levels. In addition to increasing medical expenses, it reduces overall quality of life and heightens the risk of other health conditions. Effective management of type 2 diabetes requires not only medication adherence but also comprehensive lifestyle modifications, particularly in diet and physical activity. However, implementing these changes can be challenging due to various barriers.

Common obstacles to physical activity among individuals with type 2 diabetes include low self-efficacy, lack of motivation, limited transportation, busy schedules, and insufficient social support. To address these challenges, LiveWell Douglas County launched Move More Douglas County, a physical activity prescription program designed to improve accessibility and adherence to exercise. This initiative effectively targets barriers related to transportation, cost, facility access, and guidance from qualified professionals.

During the Applied Practical Experience (APE), the focus was on developing educational materials to support participants in the program. These resources aimed to increase awareness of available exercise opportunities and provide practical tools to help individuals establish and sustain an active lifestyle.

Lessons Learned

One key lesson from this experience is the critical role of primary care providers in promoting preventive and health-supporting lifestyle habits, encouraging doctors to take more of a coaching role, rather than simply that of a medication prescriber. One effective approach is connecting patients with health-promoting community organizations, such as local recreation centers, to facilitate physical activity. Providing a physical activity prescription exemplifies interdisciplinary collaboration, offering a more holistic approach to diabetes care (Grgurevic et al., 2024).

Despite the benefits of provider involvement, barriers such as time constraints and concerns about increased workload often limit physician participation in additional projects such as physical activity prescription programs (Millar et al., 2022). While providers are generally willing to engage if they perceive the initiative as valuable, incorporating facilitators can increase participation involvement (Millar et al., 2022). In Move More Douglas County, one such facilitator was a concise diagram based on the TTM, providing a structured guide for assessing patients' readiness for behavior change.

Another key insight gained was a deeper understanding of the role of community health centers in expanding access to health services and information. Move More Douglas County was launched in partnership with Heartland Community Health Center and LMH Health, formerly known as Lawrence Memorial Hospital, both of which provide medical services regardless of income. Community health centers collectively serve approximately 30 million patients nationwide, offering essential care to underserved populations (Quiñones et al., 2022). However, patients in these settings often experience unmet needs and poorer health outcomes compared to those receiving care outside of safety-net systems (Quiñones et al., 2022).

Community health centers form a network of over 1,300 safety-net primary care providers (Pillai et al., 2025). In 2023, 90% of their patients had incomes at or below 200% of the federal poverty level, with the majority being Hispanic (Pillai et al., 2025). While patient experiences at these centers are generally positive, disparities persist in provider-patient communication (Pillai et al., 2025). Black and Hispanic patients were less likely than White patients to report that health professionals explained information in an understandable manner, underscoring the need for accessible, practical health education materials (Pillai et al., 2025).

Notably, patients of Heartland Community Health Center have demonstrated higher adherence to the Move More Douglas County program. According to a discussion with the preceptor, this trend may be attributed to the presence of community health workers at Heartland, who offer prescription reminders and additional support for health-promoting behaviors. These workers at Heartland Community Health Center receive basic training in coaching techniques, including motivational interviewing, which research has shown to be effective in fostering positive behavior change among individuals with chronic conditions (An & Song, 2020).

Strengths & Weaknesses

One of the program's key strengths is its foundation in scientific principles, particularly the TTM. This model, widely applied in behavior change interventions, has been utilized in addressing weight management, smoking cessation, alcohol use, and dietary habits (de Freitas et al., 2020; Raihan & Cogburn, 2023). Moreover, program materials, including educational presentations for the target population, were developed using peer-reviewed research and governmental guidelines. For instance, the physical activity guidelines are established by a policy-writing committee composed of external experts in physical activity and health, who review current scientific literature before the U.S. Department of Health and Human Services

approves and releases the recommendations (U.S. Department of Health and Human Services, 2021).

Another strength lies in the practical implementation of the TTM within medical appointments. The program's structured diagram allows providers to efficiently assess a patient's readiness for physical activity, mitigating barriers such as time constraints and workload concerns. Educational materials were also designed to align with different stages of behavior change, ensuring their relevance to patients at various levels of readiness. For example, the beginner-friendly fitness class guide targets individuals in the contemplation and preparation stages by providing practical information on class selection and fostering social support through recreation centers. Educational presentations on physical activity guidelines and personal training serve multiple stages by introducing foundational knowledge (contemplation and preparation) and reinforcing sustainable routines (action). The physical activity journal encourages self-reflection and proactive planning for potential setbacks, supporting individuals in the action stage. Additionally, the guide of YouTube channels for beginners tool and the Parks in Lawrence resource assist those in the preparation and action stages by promoting accessibility and variety in physical activity options. In addition, while each product aligns best with a specific stage, they all also apply to components of other stages, enhancing their overall practicality and accessibility. This overlap reflects the dynamic and non-linear nature of behavior change in real-world community settings, where individuals may fluctuate between stages or show characteristics of multiple stages simultaneously.

Another notable strength is the inclusion of Spanish-language materials to better serve the Hispanic population, a significant demographic within community health centers. Since the 1980s, the U.S. Hispanic/Latino population has increased by 77%, highlighting the growing need for culturally and linguistically tailored health resources (Borrell & Lebron, 2024). Hispanic populations experience lower physical activity levels and higher rates of obesity and diabetes due to barriers such as limited social support, lack of childcare, environmental constraints, and competing priorities (Murillo et al., 2021). Also, low health literacy significantly influences health disparities, as the ability to obtain, understand, and use health information directly affects decision-making and outcomes (Hernandez et al., 2024). Limited English proficiency further reduces healthcare quality, and a shortage of bilingual resources exacerbates disparities (Hernandez et al., 2024). By offering Spanish-language materials, the program aims to bridge these gaps and improve access to vital health information.

Despite its strengths, the program has limitations that present opportunities for growth. While it helps mitigate transportation barriers by identifying multiple physical activity locations

and promoting home-based options, it does not address financial constraints that limit access to transportation. Also, the initial scholarship amount for recreation center classes was insufficient, requiring an increase from \$75 to \$100. This adjustment underscores the broader issue of cost as a barrier to sustained physical activity.

Another limitation is the absence of a structured support group, either virtual or in-person. Peer support, where individuals with shared experiences assist others in managing similar conditions, has been shown to enhance program adherence by fostering social connection and motivation (Thompson et al., 2022). Establishing such a component could further strengthen participant engagement.

Finally, most program materials are primarily educational and informational, which, while valuable, does not guarantee behavior change. Effective adherence to physical activity involves not only acquiring knowledge but also self-monitoring, goal setting, activity familiarity, and resilience in overcoming setbacks (Cavallo et al., 2023; Steca et al., 2024). Addressing these factors would require more interactive strategies that promote self-reflection, proactive planning, and sustained engagement in physical activity.

Next Steps

Move More Douglas County is a new program with promising potential. While securing funding remains a key factor in its growth, several steps can enhance its impact and sustainability.

Although the organization has collected some survey data, it is not yet enough to draw clear conclusions. Expanding feedback efforts from both participants and providers will be essential for effective program evaluation and for identifying strengths and areas for improvement. Participant input can offer valuable insight into community needs, while provider feedback can highlight factors that influence their engagement. Two key considerations for providers are whether the intervention benefits patient health and whether it fits into their already busy schedules (Millar et al., 2022). Including interviews and feedback sessions with both groups will therefore be crucial.

For product evaluation, knowledge checks before and after the program could help assess effectiveness. For example, interviews could be scheduled to ask participants what they know about physical activity guidelines, how they monitor exercise intensity, what at-home alternatives they use when unable to access parks or recreation centers, and whether they feel comfortable performing exercises like squats independently. These questions would help determine knowledge acquisition and practical readiness. Additionally, knowledge checks could

help researchers understand what language and terminology is best understood by different populations, further increasing access to health communication and making more effective interventions (Li et al., 2018).

Product delivery is an ongoing effort. For example, new participants could receive printouts when redeeming their prescription at Lawrence Parks and Rec, or the materials could be uploaded to a dedicated website for program participants (a potential future project). Alternatively, the products could be adapted into a weekly newsletter or broken into excerpts for automated text messages, which participants could opt into when redeeming their prescription. This approach would allow participants to receive relevant content in manageable portions, reducing the risk of information overload (Medical College of Wisconsin, 2022).

While knowledge (i.e., knowing what to do) is crucial for creating new habits, with more time, I would have liked to develop more interactive resources focused on self-efficacy skills such as goal setting, progress tracking, and proactive planning (Raihan & Cogburn, 2023). For example, tools could encourage individuals to monitor their blood sugar, track their steps, and create backup plans for staying active during busy periods or inclement weather. Encouraging individuals to form social connections by meeting others at the recreation center and establishing an “accountability buddy system”, could also increase engagement. Additionally, simplifying current resources, which may currently be too lengthy and verbose, could make them more concise and accessible to a broader audience (Coughlin et al., 2020).

Also, integrating a peer support component, either in person or online, could enhance engagement (Zhang et al., 2023). In-person support groups could meet at participating community health centers or recreation centers, while an online option, such as a Facebook group, could serve as a more convenient or supplementary alternative. These groups would offer participants a space to share experiences related to managing their condition through physical activity. To ensure discussions remain relevant and beneficial, a moderator would be essential. Potential moderators could include local community health workers, future MPH students completing their Applied Practical Experiences (APE), or staff from Live Well Douglas County.

Building on Heartland Community Health Center’s success with community health workers serving as coaches, expanding this model to other health centers could enhance motivation and long-term adherence (An & Song, 2020). Increasing the number of community health workers or adding individuals to serve as health coaches would offer participants additional support and encouragement. A key benefit of involving these roles more frequently is their ability to bridge the communication gap between providers and patients. Providers often

have limited time during appointments, and while a patient may receive a physical activity prescription, they may remain unclear on how to interpret or follow it. Health coaches can play a critical role in helping patients understand and apply these recommendations, supporting ongoing engagement and better health outcomes (An & Song, 2020).

Another area for growth is enhancing the program's personalization (Ren et al., 2021). Currently, providers can customize prescriptions by selecting exercise intensity (low, moderate, vigorous), type (e.g., cardiovascular, strength, aquatic, balance/flexibility), duration, and frequency. While this is a strong foundation, it may be helpful to more clearly align prescriptions with a patient's stage of change. It would also be valuable to include individuals in the pre-contemplation and maintenance stages, who are currently excluded from the original program design.

For those in pre-contemplation or contemplation, where resistance to adopting physical activity is more likely, prescriptions could include more frequent check-ins with a community health worker or health coach with a focus on navigating habit resistance or ambivalence, as well as recommendations for low-barrier activities. For example, instead of suggesting a gym visit, providers could recommend accessible activities like a 10-minute neighborhood walk, taking the stairs or elevator, parking farther from buildings, or incorporating short movement breaks at home or the office.

For individuals in preparation or action stages, visits to recreation centers could be encouraged, along with coaching sessions focused on planning and overcoming setbacks. Those in action and maintenance stages could benefit from personalized coaching on monitoring intensity, adapting to obstacles, and exploring new activities to maintain engagement and enjoyment.

In alignment with the stages of change, it may also be beneficial to reassess how an individual's stage is evaluated. Currently, stages are determined based on set timelines (e.g., "Do you want to start exercising in the next 30 days?" or "in the next 6 months?"), which may not always reflect real-life circumstances. Modifying these questions to better assess self-efficacy, a key component of the TTM, could improve accuracy, as self-efficacy is associated with progression through stages of change (Jiménez-Zazo et al., 2020). For example, providers might ask, "Think of a recent setback you experienced while trying to manage your health. How did you respond?" While this is just one example, questions could be simplified as needed. When refining these questions, it is important to consider how they can enhance understanding of the patient without adding time burdens for providers. Once again, participant and provider feedback will be essential in guiding these improvements.

Strengthening partnerships and engaging stakeholders is essential to broadening the program's reach. Establishing long-term collaborative relationships between organizations with shared goals and values is essential for both program effectiveness and community impact (Nkimbeng et al., 2022). Progress is already underway, with Haskell Indian Health Center in Lawrence joining as a participating health center, and efforts are ongoing to identify additional recreation and fitness facilities to enhance exercise opportunities. Another opportunity for growth lies in collaborating with health departments. By establishing communication with local health departments, the program could be better tailored to the population, improve communication methods, and gain more support.

Other Notable Experiences

I engaged in various experiences that deepened my understanding of public health work, the value of interdisciplinary collaboration, and the many factors influencing health and well-being.

One such experience was participating in a presentation on diabetes in the Hispanic community, delivered in March 2024. This presentation aimed to educate future pharmacy students attending the Student National Pharmaceutical Association (SNPhA) conference. It focused on the impact of diabetes within the Hispanic community, highlighting cultural values that may not align with conventional U.S. healthcare approaches, the role of socioeconomic status in health outcomes, and the importance of addressing health literacy to improve care and guidance for this population.

Another valuable experience was working in the Physical Activity Research in Community Settings (PARCS) laboratory with Dr. Gina Besenyi. As part of this role, I contributed to a study examining the effects of physical activity on reducing cardiometabolic risk in adults with serious mental illness. My responsibilities included leading exercise sessions for community members and collecting and entering data. This hands-on experience, which involved direct interaction with both community members and staff from mental health organizations, helped me develop as a public health professional.

Additional valuable opportunities included the Frontier Field Trips (FFT) to Council Grove, Kansas. During these trips, students came together to revisit real public health crises, explore and learn from significant moments in public health history, and engage in critical discussions with industry experts. This experience offered the chance to view public health issues from multiple perspectives. Another meaningful experience was the International Mobility of Veterinary Students & Food Biotechnologists (iMOVES) trip to Padova, Italy, where students

attended courses at the University of Padova. During iMOVES, students connected with experts from collaborating universities worldwide, met students from the University of Padova, and interacted with peers from various U.S. universities. Topics covered included animal welfare, food technology, food microbiology, and more. The iMOVES trip was especially valuable, as it allowed students to establish professional connections, forge new friendships, broaden their worldview, and explore additional opportunities within the field.

These hands-on experiences were important in shaping me as a public health professional, providing opportunities for personal and professional growth beyond the classroom. Through direct interaction with communities, conversations with experts, and participation in international initiatives, I gained a deeper understanding of the multifaceted nature of public health. These experiences gave me an opportunity to enhance my academic knowledge, and essential skills in collaboration and communication. By actively participating in real-world public health experiences, I developed a well-rounded perspective that will serve as a strong foundation for my future work in the field, ultimately preparing me to address public health issues as part of an interdisciplinary team.

Chapter 5 - Competencies

Table 5.1 Summary of MPH Foundational Competencies

Number and Competency		Description
8	Apply awareness of cultural values and practices to the design, implementation, or critique of public health policies or programs.	Bilingual educational resources (English and Spanish) and presented in both written and oral formats. Physical activity journal example page. Completion of course MPH 818.
9	Design a population-based policy, program, project, or intervention.	Parks in Lawrence, KS written resource. Completion of course MPH 754.
19	Communicate audience-appropriate (i.e., non-academic, non-peer audience) public health content, both in writing and through oral presentation.	Bilingual educational resources (English and Spanish) and presented in both written and oral formats. YouTube Fitness for Beginners guide. Completion of course KIN 890.
21	Integrate perspectives from other sectors and/or professions to promote and advance population health.	Collaboration and communication with team members and stakeholders to ensure the accuracy and appropriateness of the information. Completion of courses MPH 720 and MPH 818.
22	Apply a systems thinking tool to visually represent a public health issue in a format other than a standard narrative.	Parks in Lawrence, KS written resource. Completion of courses MPH 754 and MPH 802.

Competency #8: Apply awareness of cultural values and practices to the design, implementation, or critique of public health policies or programs. This competency was attained through various tasks done throughout the experience. Educational and informational presentations were developed in both written and oral formats, ensuring clear and concise language, offered in both English and Spanish. The presentations covered the topics of the national physical activity guidelines and personal training. To ensure adequacy for Spanish speakers of diverse backgrounds, the Spanish version was reviewed by a Spanish-speaking member of Live Well Douglas County. Also, a sample physical activity journal page was developed and designed to encourage self-reflection. This tool helps individuals evaluate whether a particular activity aligns with their values and preferences, empowering them to

choose an option they feel comfortable with. This competency was also achieved through the completion of MPH 818 – Social and Behavioral Bases of Public Health.

Competency #9: Design a population-based policy, program, project, or intervention.

This competency was achieved through the creation of the Parks in Lawrence, KS written resource, an informational project designed to provide residents and visitors with details about the parks available in Lawrence. The goal was to reduce barriers to outdoor activities by increasing awareness of existing options. This resource highlights different parks and their features, helping individuals find outdoor activities that align with their fitness and mobility levels as well as their access to transportation. This competency was also attained through the completion of the course MPH 754 – Introduction to Epidemiology.

Competency #19: Communicate audience-appropriate (i.e., non-academic, non-peer audience) public health content, both in writing and through oral presentation.

This competency was achieved through the development of bilingual educational and informational presentations in both written and oral formats. The presentations covered the basics of the physical activity guidelines and what to expect during an individual's first personal training session. The slides were designed to be easily understood without requiring the accompanying video recording, allowing others to present the material if needed. However, both presentations also have a video format that can be shown to target audiences if necessary. To broaden the reach of the content, each presentation was created in both English and Spanish.

Moreover, a YouTube Fitness for Beginners written guide was developed to help individuals make informed decisions when choosing an online fitness personality to follow. This guide provides clear and concise advice on what to look for, what to be cautious of, and encourages individuals to be mindful of how they feel during at-home workouts. It emphasizes the importance of making modifications or taking breaks as needed, especially since a trained professional is not present to monitor for safety.

This competency was also attained through the completion of the course KIN 890 – Graduate Seminar in Kinesiology.

Competency #21: Integrate perspectives from other sectors and/or professions to promote and advance population health. This was accomplished by working with the Facility Operations Supervisor at Lawrence Sports Pavilion® by collaborating with and gathering information from him to ensure that the “Fitness Classes for Beginners” resource was accurate

for participants. There was one in-person meeting with the Facility Operations Supervisor at Lawrence Sports Pavilion®, and all other communications were done via email. The Spanish version of the educational presentations on physical activity guidelines and personal training was reviewed by a Spanish-speaking staff member at Live Well Douglas County. This facilitated collaboration with a team member and ensured the materials were culturally appropriate. All communications with this Spanish-speaking team member were relayed through the Executive Director of Live Well Douglas County, who acted as an intermediary. This competency was also attained through the courses MPH 720 – Healthcare Administration and MPH 818 – Social and Behavioral Bases of Public Health.

Competency #22: Apply a systems thinking tool to visually represent a public health issue in a format other than a standard narrative. The Parks in Lawrence resource satisfies this competency as various components that could impact the use of a park were considered. Another factor taken into account was the type of individual that would use a park depending on fitness and mobility levels. This can be shown in a diagram by organizing park elements and illustrating how they influence park use by community members, as shown in figure 5. This competency was also attained through the courses MPH – 754 Introduction to Epidemiology and MPH 802 – Environmental Health.

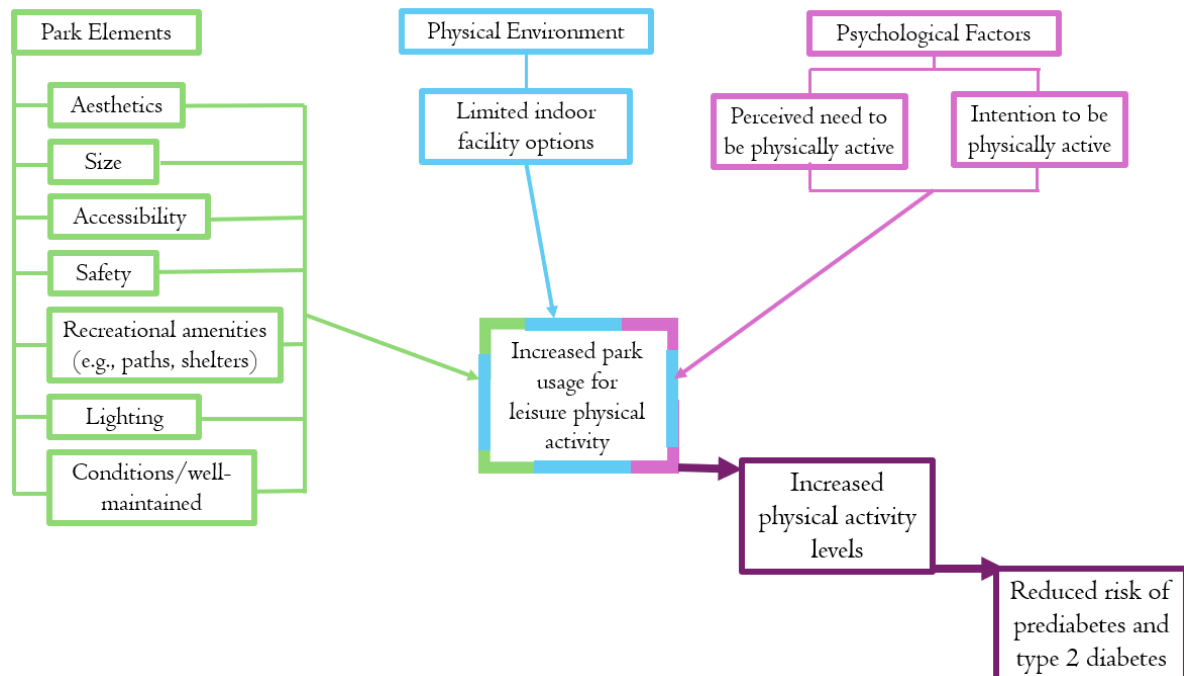


Figure 5 - Systems Thinking Tool. Flow chart of part usage, physical activity, and impact on prediabetes and type 2 diabetes. Created by Cristina Alamos based on articles by Bedimo-Rung et al., 2005 and McCormack et al., 2023.

Table 5.2 MPH Foundational Competencies and Course Taught In

22 Public Health Foundational Competencies Course Mapping	MPH 701	MPH 720	MPH 754	MPH 802	MPH 818
Evidence-based Approaches to Public Health					
1. Apply epidemiological methods to settings and situations in public health practice	x		x		
2. Select quantitative and qualitative data collection methods appropriate for a given public health context	x	x	x		
3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate	x	x	x		
4. Interpret results of data analysis for public health research, policy or practice	x		x		
Public Health and Health Care Systems					
5. Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings		x			
6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and systemic levels					x
Planning and Management to Promote Health					

7. Assess population needs, assets and capacities that affect communities' health		x		x	
8. Apply awareness of cultural values and practices to the design, implementation, or critique of public health policies or programs					x
9. Design a population-based policy, program, project or intervention			x		
10. Explain basic principles and tools of budget and resource management		x	x		
11. Select methods to evaluate public health programs	x	x	x		
Policy in Public Health					
12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence		x	x	x	
13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes		x		x	x
14. Advocate for political, social or economic policies and programs that will improve health in diverse populations		x			x
15. Evaluate policies for their impact on public health and health equity		x		x	
Leadership					
16. Apply leadership and/or management principles to address a relevant issue		x			x
17. Apply negotiation and mediation skills to address organizational or community challenges		x			
Communication					
18. Select communication strategies for different audiences and sectors	DMP 815, FNDH 880 or KIN 796				
19. Communicate audience-appropriate (i.e., non-academic, non-peer audience) public health content, both in writing and through oral presentation	DMP 815, FNDH 880 or KIN 796				
20. Describe the importance of cultural competence in communicating public health content		x			x
Interprofessional Practice					
21. Integrate perspectives from other sectors and/or professions to promote and advance population health		x			x
Systems Thinking					
22. Apply a systems thinking tool to visually represent a public health issue in a format other than a standard narrative			x	x	

Student Attainment of MPH Emphasis Area Competencies

Table 5.3 Summary of MPH Emphasis Area Competencies

MPH Emphasis Area:		
Number and Competency		Description
1	Population health	Investigate the impact of physical activity on population health and disease outcomes.
2	Social, behavioral and environmental influences	Investigate social, behavioral and environmental factors that contribute to participation in physical activity.
3	Theory application	Examine and select social and behavioral theories and frameworks for physical activity programs in community settings.
4	Developing and evaluating physical activities interventions	Develop and evaluate physical activity interventions in diverse community settings.
5	Support evidence-based practice	Create evidence-based strategies to promote physical activity and communicate them to community stakeholders.

1. Population health

This emphasis area competency was achieved through the completion of the course KIN 612 – Policy, Built Environment, and Physical Activity. The course explored the influence of policy, neighborhoods, and infrastructure on physical activity and, in turn, the health of a community. Students were encouraged to assess their physical surroundings and evaluate how these environments either facilitate or hinder physical activity, impacting overall health. For example, tools such as the Active Neighborhood Checklist (Hoehner & Brownson, 2011) and the Neighborhood Environment Walkability Scale (National Cancer Institute, 2002) were used to evaluate the walkability and quality of outdoor environments in specific neighborhoods.

The course also examined how policies and environments impact various age groups, encouraged using reputable and legitimate sources for gathering information on public health issues, and students learned to find and analyze evidence both supporting and opposing different perspectives. A field trip to Meadowlark Hills Retirement Community provided insight into aging in a setting designed for older adults that provided consistent support from qualified professionals.

2. Social, behavioral and environmental influences

This competency was achieved through the completion of KIN 610 – Program Planning and Evaluation and KIN 805 – Physical Activity and Human Behavior, both of which offered practice in researching legitimate, updated, and reputable scientific information to understand behaviors and influences towards physical activity. In both courses, a needs assessment was conducted to better understand what elements impact target populations and their access to physical activity.

In KIN 610, the specific program design was focused on increasing access to and self-efficacy in healthy behaviors related to diet and physical activity for low-income individuals with pre-diabetes and type 2 diabetes. The needs assessment primarily relied on secondary data, and the program planning phase involved setting specific goals and objectives.

In KIN 805, the program developed aimed to connect older adults in Wamego, KS, with K-State undergraduate students through a "Walking Buddy System" to promote physical activity and support active aging. During the needs assessment, both secondary and primary data were collected. Primary data was qualitative and gathered through interviews with community members and assisted living facility staff.

3. Theory application

This emphasis area competency was achieved through the completion of KIN 610 – Program Planning and Evaluation and KIN 805 – Physical Activity and Human Behavior. Both courses emphasized foundational behavioral theories and models, including the Social Cognitive Theory, TTM, and Health Belief Model, and explored their practical applications.

In both courses, the requirement was to select a behavior model and apply it to the intervention they designed. KIN 805, more specifically, had an assignment of developing a new model, integrating elements from existing theories to create a unique framework for behavior change, and applying it to a public health intervention.

4. Developing and evaluating physical activities interventions

This competency was achieved through the completion of KIN 610 – Program Planning and Evaluation and KIN 805 – Physical Activity and Human Behavior, both of which offered practice in designing a science-based intervention. In both courses, a public intervention was designed by identifying a target market, conducting a needs assessment, creating a program plan and timeline, and developing a program evaluation.

In KIN 610, the intervention created was focused on increasing access to and self-efficacy in healthy behaviors related to diet and physical activity for low-income individuals with pre-diabetes and type 2 diabetes. The goal was to have a thorough final portfolio that would be essentially ready to be presented to stakeholders that may be interested in the intervention.

In KIN 805, the program developed aimed to connect older adults in Wamego, KS, with K-State undergraduate students through a "Walking Buddy System" to promote physical activity and support active aging. During the needs assessment, both secondary and primary data were collected. There was encouragement and guidance to think about details that would influence the success and sustainability of the intervention.

5. Support evidence-based practice

This competency was met by completing the course KIN 612 – Policy, Built Environment, and Physical Activity. The course examined how policies and environments impact various age groups, encouraged using reputable and legitimate sources for gathering information on public health issues, and students learned to find and analyze evidence both supporting and opposing different perspectives. For example, an assignment involving a debate on whether individuals should remain in their homes or transition to retirement or assisted living facilities encouraged critical thinking on this topic.

KIN 612 offered practical experience in research and plan development techniques to better prepare to engage with policymakers to discuss potential changes and initiatives that could benefit communities. One task involved contacting a policymaker to propose a health-focused community initiative aimed at encouraging physical activity.

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AI Disclaimer: ChatGPT was used to improve flow and conciseness of some paragraphs. Prompt used:
“Please give me suggestions to improve the flow and conciseness of this paragraph”

Appendix

Appendix A - List of beginner-friendly fitness classes offered at Lawrence's recreation centers



LOCAL OPPORTUNITIES TO BE ACTIVE



Physical activity is a big part in diabetes management. Check out these beginner friendly exercise options offered at:

- Sports Pavilion Lawrence®
- East Lawrence Recreation Center
- Holcom Park Recreation Center
- Community Building

If you are interested in trying any of these classes, visit lprd.org/activity and use the filters to find out about availability, location and the schedule that works for you

Find the class by either typing it in the "Keyword Search" or looking it up by "Activity Number"

A screenshot of the "Activity Search" web interface. On the left, there are several search filters: "Keyword Search" (with a red circle around its input field), "Activity Number" (with a red circle around its input field), "Category (0)", "Type (0)", "Instructor (0)", and "Location (0)". Each filter has a dropdown arrow. At the bottom of these filters is a blue "Search" button. On the right, the "Activity Search" header is followed by "Search Results" and a "Display Option: Detail" dropdown. Below this is a "Begin Search" section with a paragraph of text and a blue "Search Now" button.

CLASS / ACTIVITY #	DESCRIPTION	LEVEL	INTENSITY	EQUIPMENT	OTHER CONSIDERATIONS
Personal Training	Best option for a beginner. A personal trainer can tailor workouts to your specific needs, goals and current abilities. Scheduling a session with a trainer means that you will have the undivided attention of an exercise professional to ensure you learn how to safely move through exercises, allowing you to build confidence while improving your fitness	All levels	Depends on client needs	Depends on client needs	Depends on client needs
Slow Flow Yoga / 315016	Mindful, slow paced floor poses, seated postures, spinal twisting, standing postures, gentle back bends, and deep breathing. This class starts slow and ends with a long savasana. This is an ideal class for those new to yoga, as well experienced students looking for a gentle practice	All levels	Low	Props will be provided in class. BRING PERSONAL MAT	Floor exercise
Yoga Flow / 315040	Suitable for beginners as well as experienced students who enjoy a gentler class. Develop body awareness, learn basic postures, and proper alignment. Learn how to pair breath with movement and become familiar with the connection to your physical and energetic body	All levels	Low	BRING PERSONAL MAT	Floor exercise
Yoga Restorative / 315046	This class is all about relaxation, relieving pain and tension, and connecting body and mind through breath and meditation. Stabilizing postures will help strengthen muscle groups in a low-impact way. You will leave this class feeling renewed and restored	All levels	Low	BRING PERSONAL MAT	Floor exercise

CLASS / ACTIVITY #	DESCRIPTION	LEVEL	INTENSITY	EQUIPMENT	OTHER CONSIDERATIONS
Beginner Yoga / 315015	This is an introduction to the Yoga. Class is slower paced and focused on developing clear and safe alignment in foundational poses. Come to learn, play, and maybe even break a sweat in a supportive environment. You don't need to be able to touch your toes; you just have to be willing to try	All levels	Low	BRING PERSONAL MAT	Floor exercises
Yoga Stretch / 315017	A unique class that combines Yoga and stretching for flexibility and relaxation of yoga flow. Focus on coordination, balance and increasing your range of motion.	All levels	Low	BRING PERSONAL MAT	Floor exercise
Yogilates / 315121	Fusion of core strengthening Pilates combined with the flexibility and relaxation of a yoga flow. Focus on coordination, increased range of motion and balance for a complete workout	All levels	Low/Moderate	BRING PERSONAL MAT	Floor exercises
POP Pilates® / 315032	Mix of Pilates inspired moves with rhythm and choreography for a fun workout that targets every muscle. Focuses on proper breathing, alignment, and balance. Options and modifications to fit individual needs	All levels	Low/Moderate	BRING PERSONAL MAT	Floor exercises

CLASS / ACTIVITY #	DESCRIPTION	LEVEL	INTENSITY	EQUIPMENT	OTHER CONSIDERATIONS
Essentrics / 315027	Full body workout focused on rebalancing muscles and joints and increasing ease of movement through a dynamic combination of strengthening and stretching. The technique develops lean, strong and flexible muscles with immediate changes to your posture. This class combines ballet strengthening, tai chi fluidity and physiotherapy techniques	All levels	Low/Moderate	BRING PERSONAL MAT	Floor exercises
Barrelates / 315030	Fusion of Barre and Pilates for a full-body strength training workout. Combining the dynamic, dance-inspired movements of barre with lengthening and strengthening exercises of Pilates, you will hit multiple muscle groups at once. This class will incorporate music and will be both challenging and fun	All levels	Moderate	BRING PERSONAL MAT	May have floor exercises
Universal Groovy Dance / 315004	UGD combines the latest moves from African, Colombian, American and Latin dances! This class focuses on fun and easy to follow dancing! You'll be moving during the entire class, and you will SWEAT!	All levels	Moderate/High	None	None
Dance Fitness / 327250	Full body cardio workout with a variety of easy-to-follow dance routines set to old and new favorites. Class will alternate between a long non-stop cardio dance segment followed by strength/core exercises or an interval style class with cardio dances interspersed with strength training. Simple enough for beginners, yet challenging for advanced students	All levels	Moderate/High	BRING PERSONAL MAT	May have floor exercises

CLASS / ACTIVITY #	DESCRIPTION	LEVEL	INTENSITY	EQUIPMENT	OTHER CONSIDERATIONS
Zumba® / 315000	A class that combines Latin and International music with dance moves. While this is a fitness class that combines low- and high intensity moves, this will feel less like a workout and more like a dance party. In Zumba you'll work cardio, muscle conditioning, balance and flexibility and will leave feeling energized and awesome	All levels. (Learning curve when learning the moves)	Moderate/High	None	None
TRX® FIT / 315112	In this class will help you improve your cardio, build muscular endurance, and strengthen your core. This is a great well-rounded way to improve your fitness	All levels	Moderate/High	Equipment provided in class. BRING PERSONAL MAT	May have floor exercises
Pumped / 315008	This class changes a bit every week with a different focus. Classes include kickboxing, upper and lower body strengthening, yoga, abs and cardio. Beginners welcome, you can modify anything we do, but this will challenge a fitness junkie	All levels	High	BRING PERSONAL MAT	May have floor exercises

As You Explore these
Classes, Consider the
Following:



Aim to get 150 mins of moderate-intensity aerobic physical activity every week. It is best to break this up into smaller bouts of exercise spread throughout the week¹



Aim to do muscle-strengthening activities at least 2x per week¹. If you have the time, this can be done as a separate session. If you are short on time, this can be mixed into your 150 mins of moderate activity by doing circuit style training or participating in fitness classes that include some strength training



Personal Training: If you are unsure about how to incorporate circuit training or any other exercise related concerns, a personal trainer is a great resource that can help you with this

As You Explore
these Classes, Consider
the Following:



Enjoyment is strongly connected to consistent physical activity², so try new things to find what you like! The best workout is the one that you like and will stick to. Don't worry about trendy or overcomplicated workouts. Instead, find activities that you truly enjoy so that you do them long term



Don't forget to rest. Remember that you are building up your fitness, so if you do a workout that feels very intense, rest during your session as needed. Also, incorporate some lighter physical activity days in which you do light stretching, light walking, or other gentle movements to promote an effective recovery after a hard exercise session³

Benefits of Dance Workouts

Dancing can improve balance, strength, flexibility, posture, and aerobic endurance. Additionally, it is a great way to meet new people and cultivate positive emotions⁴



Benefits of Pilates

Pilates incorporates principles of core stability, postural alignment, balance, and muscular strength and endurance. Movements are completed with precision, fluidity and control while doing full, rhythmic breathing⁵

Pilates is a low impact exercise that may improve flexibility, balance, and cardiovascular health⁵



Benefits of Strength Training

Strength training can improve muscle strength, endurance and power; it can support bone density and increase durability of connective tissue; it helps support blood glucose regulation and increases aerobic fitness⁶. Lastly, it can help improve mind-muscle connection⁶



Benefits of Yoga

Yoga provides benefits such as reduced blood pressure, feelings of relaxation and lowered stress, improved digestion, better posture, increased strength, flexibility and balance. Yoga can also benefit individuals with chronic diseases and disabilities through improved body awareness and orientation, the development of focus and concentration, the encouragement of learning and creativity⁷



Benefits of Balance and Flexibility Training

Balance is associated with a reduced risk of falling, improved quality of life, increased lower limb strength, and improved posture⁸

Flexibility training may also improve walking ability, mobility, as well as balance⁸



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Appendix B - Educational presentation for target audience in English. Topic covered:
Personal training



Your First Personal Training Session

What to Expect



Why Should You Consider Getting a Personal Trainer?

- A personal trainer will:
 - Focus on you to help correct any form issues, helping you get fitter while staying safe
 - Personalize workouts based on your goals, needs, current abilities and time constraints
 - Can modify workouts on the spot if there is a movement that does not feel right
 - Give you clear instructions and cues suited for your learning style, allowing you to build confidence while getting fitter
- **Main goal of a personal trainer: To get you comfortable and confident with exercise, so that eventually you will not need a trainer to guide you**





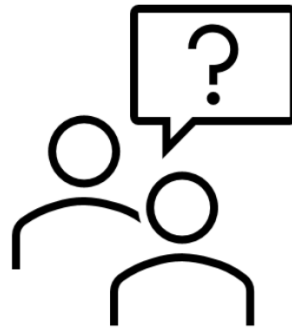
Personal Trainer Certifications

- NASM (National Academy of Sports Medicine)
- ACSM (American College of Sports Medicine)
- ACE (American Council on Exercise)
- NCSF (National Council on Strength and Fitness)
- ISSA (International Sports Science Association)
- Among others...

A certification shows that a personal trainer has met the educational requirements to safely coach and lead individuals through exercise

Questions a Personal Trainer Might Ask You

- Do you currently have any injuries? Or have you had any injuries in the past?
 - This provides some information about potential muscle or joint weaknesses, awareness when doing exercises at a certain range of motion, or determining at what intensity or impact to work at
- What does a normal day look for you? What is your daily routine? What do you do for work?
 - These questions provide information on your daily activity level, what movements you usually do at work or home and what muscles to focus on that might be tight or weak



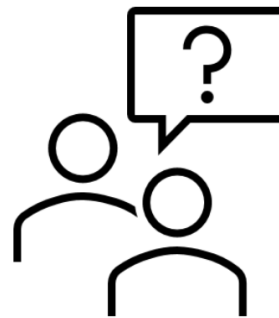
Questions a Personal Trainer Might Ask You

- What hobbies do you have?
 - This also gives some insight into things that might be affecting your strength, and which muscles you should emphasize during your workouts. For example, if you spend a lot of time drawing which might cause you to slouch and look down, your trainer might suggest back strengthening exercises and chest stretches. If you play golf, your trainer might include some core exercises that involve controlled twisting to strengthen your core muscles and improve your spine mobility
- How are you feeling today? Do you have any aches or pains bothering you?
 - This should come at the beginning of any sessions. This lets the personal trainer know whether they need to modify or eliminate certain exercises based on how you feel that day



Questions a Personal Trainer Might Ask You

- What are your goals?
 - This question is critical. Whether it's to improve aerobic endurance, strength, mobility, or simply all-around fitter, your trainer should give you a program that will get you closer to these goals
- Do you have any questions?
 - Even if a trainer does not ask you this, ask all the questions you need to. Clarifying your concerns will make a session go much smoother for both you and the trainer by helping you feel more comfortable and build a connection with your trainer



What Might Happen at the Start of Your Session?

- Assessments:
 - Postural Assessments
 - Squat Assessment
 - Plank Assessment
 - Walking Assessment
 - Flexibility Assessment
 - Biometric Measurements



What Personal Trainers CAN Do

- Personal trainers work under what is called a "Scope of Practice", which specifies what they can do for their clients:
 - Personal trainers use an individualized approach to assess, motivate, educate and train clients regarding their health and fitness needs. They design safe and effective exercise programs, provide the guidance to help clients achieve their personal health/fitness goals and respond appropriately in emergency situations¹

What Personal Trainers CANNOT Do

- These are things that a personal trainer cannot do for you, as they fall outside of their scope of practice²:
 - Diagnose/treat injury or disease
 - Give prescriptions
 - Prescribe diets or recommend supplements
 - Monitoring medical progress

A personal trainer can coach a client through behavior change. If needed, they can refer the client to the appropriate medical professional, report progress to the client's doctor (with client's permission) and provide general nutrition information based on publicly available information such as ChooseMyPlate.gov or the Dietary Guidelines for Americans²



A Personal Trainer Is There to Help You

- Getting a personal trainer might feel intimidating at first. We might think of the stereotype of an angry, ultra-muscular person yelling at you to run faster or to do 50 pushups
- In reality, most trainers are far from this stereotype
- They entered their career to help, coach, and support people
- They are there to listen to your concerns and give you a program that fits your needs and preferences



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1. Waryasz GR, Daniels AH, Gil JA, Suric V, Eberson CP. Personal Trainer Demographics, Current Practice Trends and Common Trainee Injuries. *Orthop Rev (Pavia)*. 2016;8(3):6600. doi:[10.4081/or.2016.6600](https://doi.org/10.4081/or.2016.6600)
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Appendix C - Educational presentation for target audience in Spanish. Topic covered:
Personal training



Tu Primera Sesión con un Entrenador Personal

Qué Esperar



Por Qué Deberías Considerar Un Entrenador Personal

- Un entrenador personal:
 - Se enfocará en ti y te ayudará a corregir movimientos incorrectos. De esta manera, te puedes poner en forma mientras te mantienes seguro
 - Te dará un entrenamiento basado en tus objetivos, necesidades personales, capacidades actuales y tu tiempo disponible
 - Puede modificar ejercicios durante la sesión en el caso de que haya algo que no se sienta bien o que cause dolor
 - Te dará instrucciones claras basadas en tu estilo de aprendizaje. Esto te permitirá sentirte seguro en ti mismo mientras mejoras tu estado físico
- Objetivo principal de un entrenador personal: Hacerte sentir cómodo y seguro de ti mismo con el ejercicio. De esta manera, eventualmente no necesitarás un entrenador





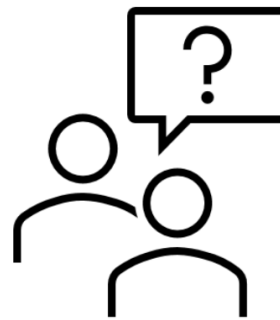
Certificaciones Típicas de Entrenadores Personales:

- NASM (National Academy of Sports Medicine)
- ACSM (American College of Sports Medicine)
- ACE (American Council on Exercise)
- NCSF (National Council on Strength and Fitness)
- ISSA (International Sports Science Association)
- Entre otras...

Una certificación demuestra que un entrenador personal ha cumplido con los requisitos educativos para entrenar y guiar a personas de manera segura durante entrenamientos físicos.

Cosas Que un Entrenador Personal te Preguntará

- ¿Tienes alguna lesión? ¿O te has lesionado alguna vez?
 - Esto da información sobre músculos o articulaciones que podrían estar débiles. Esto ayudará a tu entrenador a estar consciente en cuanto a hacer ejercicios con un cierto rango de movilidad, nivel de intensidad o de impacto
- ¿Qué es un día normal para ti? ¿Cual es tu rutina diaria? ¿En qué trabajas?
 - Estas preguntas proveen información sobre tu nivel de actividad física, qué tipo de movimientos generalmente haces en casa or en el trabajo, y qué musculos podrían estar tensos o débiles



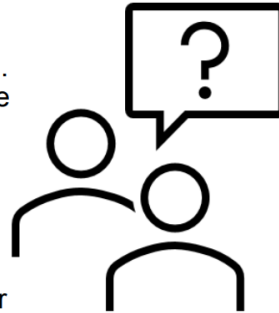
Cosas Que un Entrenador Personal te Preguntará

- ¿Qué pasatiempos tienes?
 - Esto puede darle pistas a tu entrenador para determinar qué cosas pueden estar afectando tu fuerza, y en qué músculos enfocarse más durante tus entrenamientos. Por ejemplo, te gusta mucho dibujar, es posible que pases mucho tiempo sentado o con la espalda encorvada hacia adelante. Con esta información, tu entrenador te dará ejercicios para fortalecer la espalda y elongar los musculos del pecho. Si te gusta jugar golf, es posible que hagas ejercicios de torsión controlada para fortalecer tus abdominales y proteger tu columna



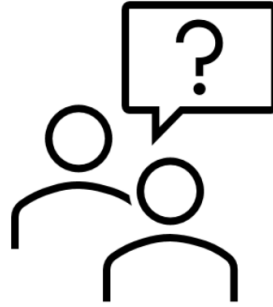
Cosas Que un Entrenador Personal te Preguntará

- ¿Cómo te sientes hoy? ¿Tienes dolor o alguna molestia?
 - Esta pregunta debería estar al principio de cada sesión. De esta manera, el entrenador puede saber si tiene que modificar o eliminar ciertos ejercicios que tenía planificados basado en tu respuesta
- ¿Cuales son tus metas?
 - Esta pregunta es muy importante. Ya sea mejorar tu resistencia aerobica, fuerza, movilidad o simplemente mejorar tu estado físico en general, un buen entrenador te dará un plan de ejercicio que te aproxime a tus metas



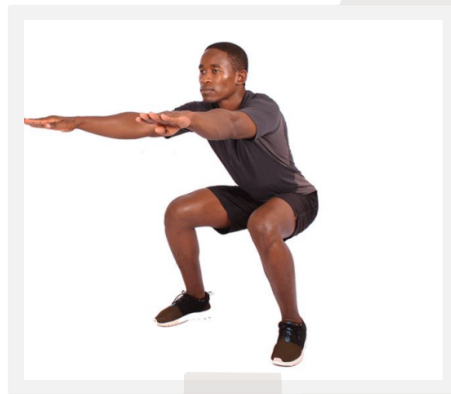
Cosas Que un Entrenador Personal te Preguntará

- ¿Tienes alguna pregunta?
 - Hasta si un entrenador no te pregunta esto, deberías hacer todas las preguntas que necesites. Clarificar cualquier duda hará que tu sesión vaya de manera mas armoniosa para ti y para el entrenador. Esto tambien ayudará a establecer confianza con tu entrenador



Evaluaciones

- Evaluaciones:
 - Posturales
 - Sentadilla
 - Plancha
 - Caminata
 - Flexibilidad
 - Peso, estatura, etc.





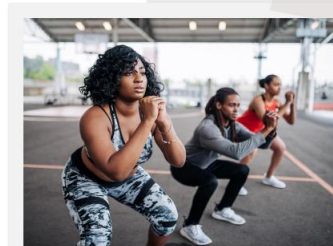
Lo que el Entrenador Sí Puede Hacer

- Los entrenadores personales trabajan bajo lo que se llama "Alcance de Profesión", que especifica lo que pueden hacer por sus clientes:
 - Los entrenadores personales utilizan un enfoque individualizado para evaluar, motivar, educar, y entrenar a los clientes en relación a sus necesidades de salud y estado físico. Diseñan programas de ejercicio seguros y eficaces, brindan la orientación para ayudar a los clientes a alcanzar sus metas personales de salud y estado físico y reaccionan de manera adecuada en situaciones de emergencia¹

Lo que el Entrenador NO Puede Hacer

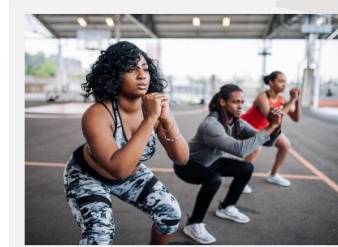
Estas son cosas que un entrenador personal no puede hacer por ti, ya que están fuera del alcance de profesión²:

- Diagnosticar/tratar lesiones o enfermedades
- Dar recetas para medicamentos
- Prescribir dietas o recomendar suplementos
- Monitorear progreso médico



Lo que el Entrenador Puede Hacer en Situaciones Fuera de su Alcance de Profesión

Un entrenador personal puede ayudar al cliente a cambiar hábitos a unos mas saludables. Si es necesario, el entrenador puede derivar al cliente al profesional médico adecuado, informar (con el permiso del cliente) al médico sobre el progreso del cliente. El entrenador tambien puede explicar al cliente información nutricional que ya esta disponible en fuentes disponibles para el público general tales como ChooseMyPlate.gov y las Guías Alimentarias para los Estadounidenses (Dietary Guidelines for Americans)²



Un Entrenador Personal Esta Ahí Para Ayudarte

- Contratar un entrenador personal puede parecer intimidante. A lo mejor estamos pensando en el estereotipo de una persona enojada y muy musculosa gritando que corramos más rápido o que hagamos 50 flexiones
- En realidad, la mayoría de los entrenadores no se parecen nada a este estereotipo
- Está en esta profesión para guiar, asesorar, ayudar y apoyar a personas
- Está ahí para aliviar tus inquietudes y darte un programa que satisfaga lo que tú necesitas y prefieres



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Appendix D - Educational presentation for target audience in English. Topic covered:
Physical Activity Guidelines



Physical Activity Guidelines



Key Physical Activity Guidelines for Adults

Adults should aim to get at least 150 minutes of moderate-intensity exercise

Adults with chronic conditions or disabilities, who are able, should get at least 150 of moderate-intensity exercise

What is Moderate Intensity?



What is Moderate Intensity?



Brisk walking



Casual dancing



Gardening



Water aerobics



Doubles tennis



Biking slower than
10 mph



**Okay, but how do I know if I'm working at
a moderate intensity?**



Rate of Perceived Exertion (RPE)

Talk Test

Rate of Perceived Exertion (RPE)

RPE SCALE

Rating	Perceived Exertion Level
0	No exertion, at rest
1	Very light
2-3	Light
4-5	Moderate, somewhat hard
6-7	High, vigorous
8-9	Very hard
10	Maximum effort, highest possible

NASM – The Rate of Perceived Exertion (RPE)

Explained <https://blog.nasm.org/rate-of-perceived-exertion>

Talk Test

- **Moderate Intensity: You can talk but not sing.**
 - For example: Being out on a walk and easily talking to a family member or friend.
 - **RPE 0-10:** Between 4 and 5
- **Vigorous Intensity: You can only say a few words at a time.**
 - For example: Going very fast on an elliptical machine, bicycle, or rushing up the stairs.
 - **RPE 0-10:** Between 6 and 8

<https://www.cdc.gov/physicalactivity/basics/measuring/index.html>

150 minutes sounds like a lot!

- Spread it out throughout the week
- Example:

Day	Time
Monday	30 minutes
Tuesday	30 minutes
Wednesday	20 minutes
Thursday	20 minutes
Friday	25 minutes
Saturday	25 minutes
Sunday	Rest
Total	150 minutes

Start Small

- Example goal: 30 minutes per week

Day	Time
Monday	10 minutes
Tuesday	Rest
Wednesday	10 minutes
Thursday	Rest
Friday	10 minutes
Saturday	Rest
Sunday	Rest
Total	30 minutes

Key to Consistency

Set yourself a very small goal

A small goal helps you build confidence

Remember:

This is not a race. Start small and
build up slowly

**Appendix E - Educational presentation for target audience in Spanish. Topic covered:
Physical Activity Guidelines**



Directrices de Actividad Física



Directrices de Actividad Física Claves Para Adultos

Los adultos deberían tratar de realizar al menos
150 minutos de ejercicio de intensidad moderada

Los adultos con condiciones crónicas o
discapacidades, si tienen la capacidad, deberían
realizar al menos 150 minutos de ejercicio de
intensidad moderada

¿Qué es intensidad moderada?



¿Qué es intensidad moderada?



Caminata rápida



Baile casual



Jardinería



Ejercicio aeróbico acuático



Tenis a dobles



Bicicleta a menos de 10 millas por hora/16 km por hora



¿Cómo sé si estoy trabajando a una intensidad moderada?



Grado de Esfuerzo Percibido (GEP)
Inglés: RPE

Prueba del Habla

Grado de Esfuerzo Percibido

Grado de Esfuerzo Percibido

Grado	Esfuerzo Percibido
0	Ningún esfuerzo/descanso
1	Muy ligero
2-3	Ligero
4-5	Moderado/esfuerzo algo duro
6-7	Alta intensidad/duro esfuerzo
8-9	Muy duro esfuerzo
10	Máximo esfuerzo/mayor esfuerzo posible

NASM – The Rate of Perceived Exertion (RPE)

Prueba del Habla

- **Intensidad Moderada: Puedes hablar pero no cantar.**
 - Por ejemplo: Salir a caminar y fácilmente poder conversar con un amigo or familiar
 - **RPE 0-10:** Entre 4 y 5
- **Intensidad Vigorosa: Puedes decir unas pocas palabras a la vez.**
 - Por ejemplo: Trabajar muy duro en una maquina de ejercicio como la elíptica, trotadora, o correr mientras subes las escaleras
 - **RPE 0-10:** Entre 6 y 8

<https://www.cdc.gov/physicalactivity/basics/measuring/index.html>

¡150 minutos suena como demasiado tiempo!

- Distribúyelo a lo largo de la semana
- Ejemplo:

Día	Tiempo
Lunes	30 minutos
Martes	30 minutos
Miércoles	20 minutos
Jueves	20 minutos
Viernes	25 minutos
Sábado	25 minutos
Domingo	Descanso
Total	150 minutos

Empieza con Metas Pequeñas

- Por ejemplo: 30 minutos cada semana

Día	Tiempo
Lunes	10 minutos
Martes	Descanso
Miércoles	10 minutos
Jueves	Descanso
Viernes	10 minutos
Sábado	Descanso
Domingo	Descanso
Total	30 minutos

Clave Para la Consistencia

Establece metas muy pequeñas
Las metas pequeñas te ayudan a
sentirte seguro/a de ti mismo/a

Recuerda:

Esto no es una carrera. Empieza de
manera lenta, y de a poco puedes añadir
a tu rutina

Appendix F - Physical activity journal example page



PHYSICAL ACTIVITY JOURNAL

Type of Activity	
Duration	
How hard did you work? (0-10)	
Enjoyment during the activity (0-10)	
Did you do the activity with anyone else?	
How did you feel after the workout?	
What did you enjoy about the activity?	
What did you not enjoy about the activity? How could you change this next time?	
Are you planning on doing this again? If not, what other activity would you like to do next time?	

How hard did you work: 0 = Little to no effort; 10 = Highest effort possible

Enjoyment during activity: 0 = No enjoyment during activity; 10 = Enjoyed this activity very much



YOUTUBE FITNESS CHANNELS FOR BEGINNERS

Consult with your healthcare provider before starting a
physical activity program



IMPORTANT REMINDER

YouTube workouts can help you stay consistent because you can find workouts as short as 5 minutes and you can do them whenever it fits your schedule

However, with online workouts there is no one there to correct your form, so you must be VERY AWARE of how your body feels and know when to take breaks or modify exercises

Also, be aware of online trainers making extreme promises such as fast weight loss, as these are usually unrealistic and unsafe

Choose to follow people who offer objective information who aren't trying to sell you quick fixes

FitnessBlender: Includes cardio, strength training, stretching, and high intensity interval training (HIIT) with clear instructions for a variety of levels

Yoga with Adriene: Yoga perfect for beginners and shows you that you do not have to be flexible to start doing yoga

POPSUGAR Fitness: Includes cardio, strength training, dance, Pilates, and many other options! Taught by a variety of trainers for a variety of levels

BodyProject: Offers low impact workouts that are perfect for beginners

Walk at Home by Leslie Sansone: Walking workouts that are perfect for beginners with easy-to-follow, low-impact routines that can be done in small spaces

Up to the Beat Fit: Dance-based and walking workouts that are fun and easy to follow



CANALES DE YOUTUBE EN ESPAÑOL PARA PRINCIPIANTES

Consulte con su médico antes de comenzar un programa
de actividad física



RECORDATORIO IMPORTANTE

Los entrenamientos en YouTube pueden ayudarte a mantenerte constante, ya que puedes encontrar rutinas de tan solo 5 minutos y las puedes hacer de acuerdo a tu horario

Sin embargo, con los entrenamientos en línea no hay nadie que pueda corregir tu forma, por lo que debes estar **MUY CONSCIENTE** de cómo se siente tu cuerpo y saber cuándo tomar descansos o modificar los ejercicios

También ten cuidado con los entrenadores en línea que hacen promesas extremas, como la pérdida rápida de peso, ya que suelen ser poco realistas y peligrosas

Elige seguir a personas que ofrecen información objetiva y que no intentan venderte soluciones rápidas

Fausto Murillo: Incluye una variedad de entrenamientos, incluyendo cardio, fuerza y HIIT

Malova Elena: Ofrece yoga, Pilates, y ejercicios de flexibilidad. Da instrucciones claras y te alenta a fijarte cómo te sientes durante las rutinas, haciendo sus videos perfectos para principiantes

Xuan Lan Yoga: Ofrece clases de yoga con distintos enfoques, tales como relajación, fuerza, y flexibilidad. Da instrucciones claras con distintas alternativas, lo cual hace su canal adecuado para principiantes

Entrenando con Sergio Peinado: Tiene una variedad de rutinas de fuerza, cardio y HIIT



Opportunities to Enjoy Nature in Lawrence, KS





Overlook Park by Clinton Lake

800 N. 1402 Rd Lawrence, KS 66049

Overlook Park by Clinton Lake is perfect for getting outside and enjoying nature without having to drive too far. It is open from 8:00 am to 10:00 pm and has free parking with plenty of space.

There are picnic and shelter areas, trash cans that make it easy to keep the place tidy, and a variety of trails for biking and hiking. If you are exploring the trails, take a picture of a map of the area, located at the trailheads—it can get a bit confusing in the woods! But, if you do not have much else to do that day, maybe you will be in the mood to do some wandering in this nature park. Plus, there are bike repair stations for minor upkeep and maintenance. There are also restrooms and water fountains near the parking area.

The trails are shaded but have no rest areas or water fountains, so bring good shoes, water, and snacks. Watch out for rocks and roots that can be tripping hazards; you can also stick to the paved paths near the parking area if balance is a concern. Lighting is limited in the area, so it is best to visit while the sun is up.

There is no public transportation near this park, so you will want to use your own car to get there, or perhaps carpool with a friend or family member for a fun day in nature.

Do not forget to enjoy the lovely view of Clinton Lake while you are there!

Things you may want to pack for a trip to Overlook Park:

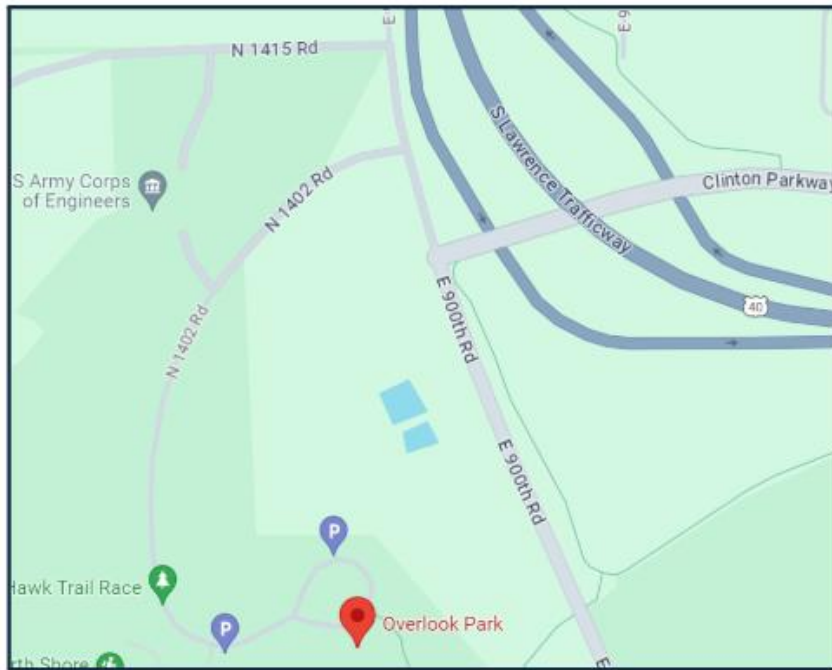
- Good walking shoes that you do not mind getting dirty if you run into muddy spots along the trails
- A phone to take a picture of the map
- Bug spray
- Sunscreen
- Snacks
- Water

More information: <https://www.recreation.gov/camping/campgrounds/233577?tab=info>

Overlook Park by Clinton Lake

800 N. 1402 Rd Lawrence, KS 66049

****See red pin for location****





Lawrence Nature Park

201 N Folks Rd LAWRENCE, KS 66049

This is a hidden gem that is worth exploring. If you are heading north on E 1100 Rd, you will find it on your left. It has free parking, though the parking lot is small, and there is no public transportation nearby.

There are no restrooms or water fountains, so prepare with that in mind. There is a bench at the trailhead and one or two sparse benches along the trail, so resting areas are extremely limited. The park is densely wooded, providing lots of shade, but also plenty of bugs, so bug spray is a convenient item to bring along. Also, please note that this area has no lighting, so it is best to visit while the sun is up.

The dirt trails offer a variety of distances, marked with color-coded trees and maps posted along the way to guide you. Watch out for tripping hazards like roots, rocks, and uneven ground, and wear shoes you do not mind getting dirty, as there are some muddy spots.

The hike is gentle and makes you feel like you have escaped the city. The natural sounds of creaking trees, rustling leaves, and singing birds are a treat, so consider leaving the headphones at home. Enjoy the beautiful scenery and the peaceful, tucked-away feeling of this lovely park.

Things you may want to pack for a visit to Lawrence nature park:

- Good walking shoes that you are okay with getting a bit dirty if you run into muddy spots in the trails
- Bug spray
- Sunscreen
- Snacks
- Water

More information:

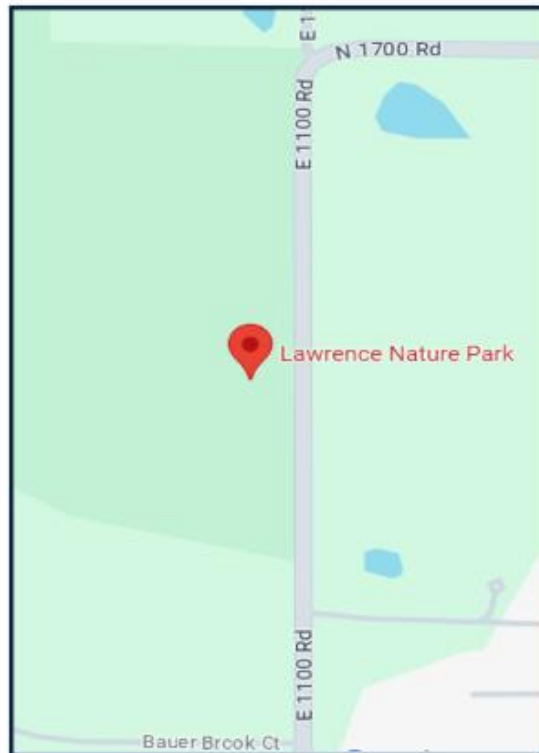
<https://flatks.org/get-out-there-lawrence-nature-park/>

<https://lawrenceks.org/lprd/parks/kansaslandtrust/>

Lawrence Nature Park

201 N Folks Rd LAWRENCE, KS 66049

****See red Pin for Location****



Buford M. Watson Park

727 Kentucky St, Lawrence, KS 66044

This is a great spot near downtown Lawrence if you want to do some walking that is not too strenuous or does not require a large time commitment. You can park at the Vermont Parking Garage nearby (725 Vermont St), which offers 2-hour free parking. There is also street parking available, and public transportation serves the area.

This well-kept inner-city park has shaded areas, sitting areas, a shelter, and trashcans to keep it clean. The park is easily accessible with crosswalks and stoplights. Keep in mind that there are no restrooms or water fountains.

The park features paved paths with no major tripping hazards, making it a safe choice for walking or jogging. However, it does not have good lighting in the evening, so it is best to visit during daylight hours.

Lastly, it is located near the Lawrence Outdoor Aquatic Center and Constant Park, so this area is worth exploring!

Things you may want to pack for a visit to Buford M. Watson Park:

Since this park is small and in an urban area, you do not need to prepare too much. But, if you are planning on spending time exploring the vicinity, consider the following items:

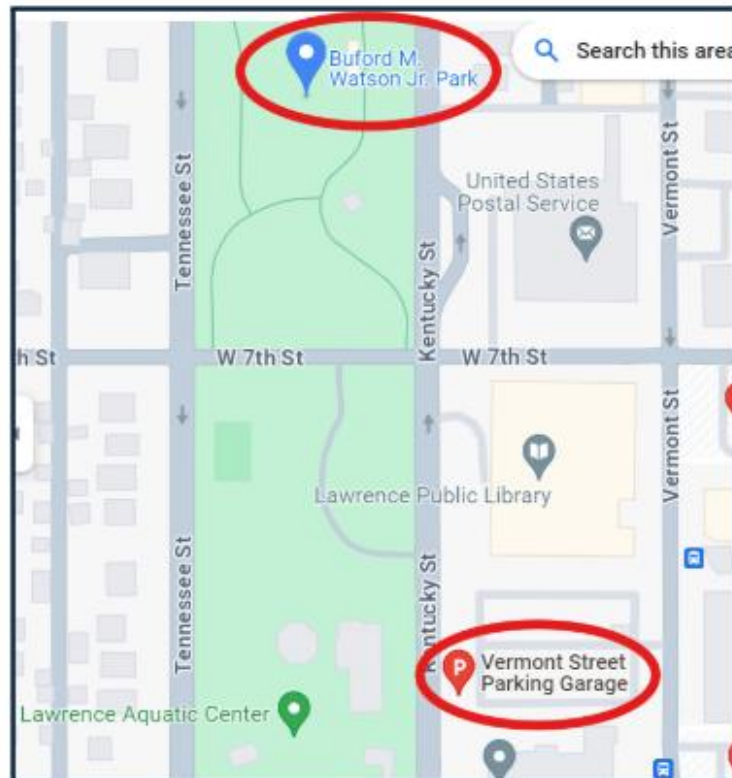
- Good walking shoes
- Sunscreen
- Water
- Snacks

More information: <https://lawrenceks.org/lprd/parks/watsonpark/>

Buford M. Watson Park

727 Kentucky St, Lawrence, KS 66044

****Location of park and parking garage circled in red****



Burcham Park

By KU Boathouse (see image below for red pin showing specific location)

Burcham Park has a long, unobstructed paved path by the Kansas River. The address itself is a bit vague, so the suggestion is to GPS to the KU Boathouse, and you will see a parking lot before arriving at the boathouse. This parking is free. There is no public transportation nearby.

Near the parking area there is a swing set. The park is well-maintained and there are trees on the path to provide some shade, but some areas are very exposed to the sun, so bring along some sunscreen! Along the path, you will find some seating areas if you need a break or just want to enjoy the view. There are no restrooms, but there is one portable toilet in the parking lot. Also, there are no water fountains. Lighting is limited, so try to visit during daylight hours. Also, there are not many trashcans, so if you bring snacks and you end up with any wrappers, these will have to be properly disposed in a trashcan elsewhere.

This is a great place for a walk, jog, or bike ride!

Things you may want to pack for a visit to Burcham Park:

- Good walking shoes
- Bug spray
- Sunscreen
- Snacks
- Water

More information: <https://lawrenceks.org/lprd/parks/burchampark/>

Burcham Park

By KU Boathouse (see image below for red pin showing specific location)



Rock Chalk Park

To get to the area, GPS Sports Pavilion Lawrence at: 100 Rock Chalk Lane
Lawrence, KS 66049

This is a great spot for walkers and joggers of all levels. Located by the Sports Pavilion Lawrence, it has a large, free parking lot and crosswalks in an area without heavy traffic to get around the park safely.

The park features a large, paved walking path around the parking lot with some open green spaces, and a dirt path connects the parking lot to the Sports Pavilion. If you get deeper into the unpaved paths, you may encounter more tripping hazards such as rocks, roots, some steep areas, or muddy spots. There is a mix of shaded areas and some more exposed to the sun.

While there's not much nighttime lighting except in the parking lot, and there are no resting areas, restrooms, or water fountains along the trails, it is still a fantastic place to get moving. Enjoy the spacious and pleasant paths at Rock Chalk Park!

Things you may want to pack for a visit to Burcham Park:

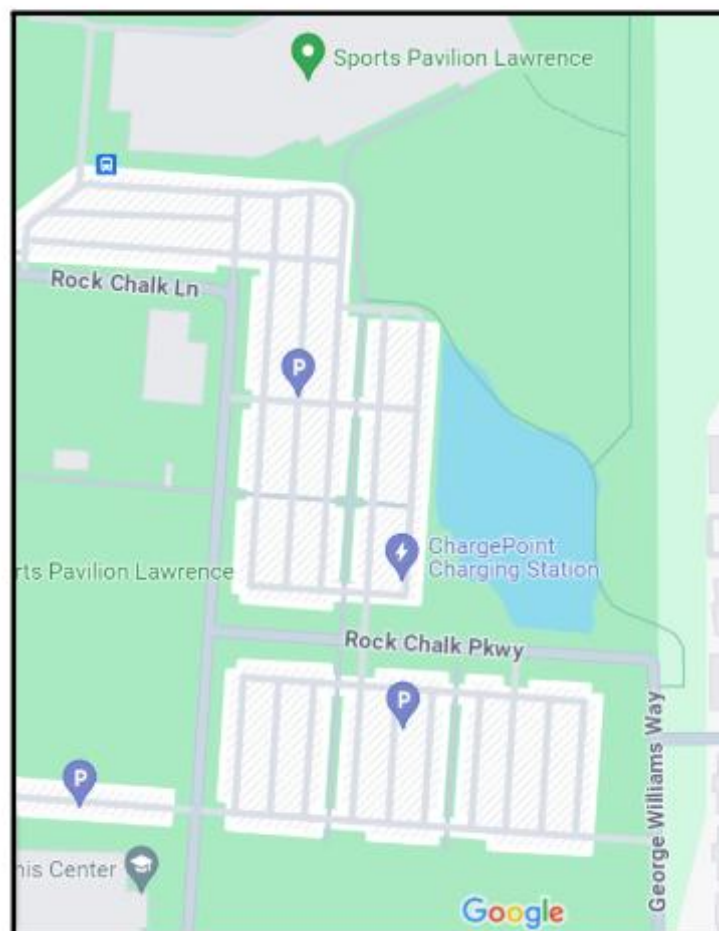
- Good walking shoes that you do not mind getting dirty if you get into the unpaved trails
- Bug spray
- Sunscreen
- Snacks
- Water

More Information:

<https://www.explorelawrence.com/listing/sports-pavilion-lawrence/3009/>

Rock Chalk Park

To get to the area, go to Sports Pavilion Lawrence at: 100
Rock Chalk Lane Lawrence, KS 66049
General area around parking lot has paved paths and
there are connecting trails





Prairie Park & Mary's Lake

2730 Harper St, Lawrence, KS 66046 (parking and location of nature center)

2811 S Kensington Rd, Lawrence, KS 66046 (More parking)

Prairie Park is a fantastic spot to explore, especially if you are looking for a nature area with some winding trails. The paths are mostly paved, but you will run into a few dirt trails there. One of the highlights is Mary's Lake, which you will likely pass by on your walk.

The trails do have lots of twists and turns, but there are signs along the way to keep you on track. With all the trees around, there is also plenty of shade, making it a great place to escape the sun.

If you are planning to stay a while, there are shelters where you can have a picnic or just sit and enjoy the scenery. Plus, there is lots of free parking, so no need to worry about finding a spot.

You might want to visit the Prairie Park Nature Center while you are there! It has some nature-themed exhibits that are worth checking out. There are also restrooms available. The Prairie Park Nature Center is open from Tuesday to Saturday, 9am to 5pm.

Things you may want to pack for a visit to prairie Park & Mary's Lake:

- Good walking shoes that you do not mind getting dirty if you get into the unpaved trails
- Bug spray
- Sunscreen
- Snacks
- Water

More Information:

Prairie Park: <https://lawrenceks.org/lprd/parks/prairiepark/>

Prairie Park Nature Center: <https://lawrenceks.org/lprd/ppnc/>

Prairie Park and Mary's Lake

**2730 Harper St, Lawrence, KS 66046 (parking and
location of nature center)**

**2811 S Kensington Rd, Lawrence, KS 66046 (More
parking)**



ID # _____
Date: _____

Move More Douglas County

Physical Activity Prescription Pre-Survey

Congratulations! You are taking a big step to improve your health and wellbeing!

Please complete the following questions.

1. What community do you live in?

☒ Lawrence
☐ Eudora
☐ Baldwin City
☐ Leocompton
☐ Other _____

2. During the past week, circle the number that best describes how much **energy** you have had.

0 1 2 3 4 5 6 7 8 9 10
No energy Full of energy

3. During the past week, circle the number that best describes how much **physical pain** you have had.

0 1 2 3 4 5 6 7 8 9 10
No pain Worst pain possible

4. Thinking about your current health, which of the following activities can you do?

Activity	Never	Sometimes	Always
Lifting heavy objects	☐	☒	☐
Push a vacuum cleaner	☐	☐	☒
Lift or carry groceries	☐	☐	☒
Climb stairs	☐	☐	☒
Bend or kneel to pick something up	☐	☐	☒
Walk a mile (about 12 city blocks)	☐	☐	☒
Gardening or yard work	☐	☒	☐
Reach for something above your head	☐	☐	☒
Ride a bicycle or swim	☐	☐	☒

5. During a typical day, how much awake time do you spend **sitting or reclining** at home or at work?

☐ Less than 2 hours ☐ 2 – 4 hours ☐ 5 - 7 hours ☒ More than 8 hours

ID # _____
Date: _____

6. In a typical week, how many **days** do you exercise?

☐ 0 days ☒ 1 day ☐ 2 days ☐ 3 days ☐ 4 days ☐ 5 – 7 days

7. In a typical week, how many **minutes** of exercise do you get?

☐ Less than 10 minutes ☐ 10 – 15 minutes ☒ 15 – 30 minutes
☐ 30 – 45 minutes ☐ 45 – 60 minutes ☐ _____

8. What do you want exercise to do for you?

Benefit	Not Important	Somewhat Important	Extremely Important
Sleep better	☐	☐	☒
More energy	☐	☐	☒
Improve strength	☐	☒	☐
Feel better/Improve moods	☐	☐	☒
Increase flexibility	☐	☒	☐
Manage weight	☐	☒	☐
Improve heart health	☐	☒	☐
Breathe easier	☐	☒	☐
Improve blood sugar control	☐	☒	☐
Better balance	☐	☒	☐

9. What will be your biggest challenge to exercise or increasing your physical activity?

☒ Lack of time ☐ Too much work ☐ No support from family or friends
☐ Transportation ☐ Fear of injury ☐ No energy/motivation
☐ Other: _____

10. On a scale of 0 to 10, how confident are you that you can be more physically active?

0 1 2 3 4 5 6 7 (8) 9 10
Not Confident Very Confident



Move More Douglas County Physical Activity Prescription Program is a partnership between LiveWell Douglas County, Heartland Community Health Center and LMH Health. Funded by a Blue Cross Blue Shield of Kansas Pathways to a Healthy Kansas Grant.

ID #

Date: 10-24-24

Move More Douglas County

Physical Activity Prescription Post-Survey

Keep it up! You are improving your health and wellbeing! Please complete the following questions.

1. During the past week, circle the number that best describes how much **energy** you have had.

0 1 2 3 4 5 6 7 8 9 10
No energy Full of energy

2. During the past week, circle the number that best describes how much **physical pain** you have had.

0 1 2 3 4 5 6 7 8 9 10
No pain Worst pain possible

3. Thinking about your current health, which of the following activities can you do?

Activity	Never	Sometimes	Always
Lifting heavy objects	☐	☒	☐
Push a vacuum cleaner	☐	☐	☒
Lift or carry groceries	☐	☐	☒
Climb stairs	☐	☐	☒
Bend or kneel to pick something up	☐	☐	☒
Walk a mile (about 12 city blocks)	☐	☐	☒
Gardening or yard work	☐	☐	☒
Reach for something above your head	☐	☐	☒
Ride a bicycle or swim	☐	☐	☒

4. During a typical day, how much awake time do you spend **sitting or reclining** at home or at work?

☐ Less than 2 hours ☐ 2-4 hours ☐ 5-7 hours ☒ More than 8 hours

5. In a typical week, how many **days** do you exercise?

☐ 0 days ☐ 1 day ☐ 2 days ☒ 3 days ☐ 4 days ☐ 5 – 7 days

6. In a typical week, how many **minutes** of exercise do you get?

☐ Less than 10 minutes ☐ 10 – 15 minutes ☐ 15 – 30 minutes
☐ 30 – 45 minutes ☐ 45 – 60 minutes ☒ 60+ minutes

