



Evidence-Based Community Programs

Help Your Patients Take Charge



Managing chronic health problems can be complex and frustrating—for you and your patients. Even after patients have completed treatment with you, symptoms like joint pain and fatigue can linger. Finding the right physical activity program can extend the benefits of your treatment and help your patients maintain their mobility and independence.

However, not all programs are evidence-based. The **Centers for Disease Control and Prevention (CDC)** has reviewed the evidence and identified several physical activity programs that are available in the community and proven to help people manage arthritis and related chronic conditions outside a therapeutic setting. Recommend these evidence-based programs to your patients and help them take charge of their health.

What physical activity programs should I look for?

The CDC Arthritis Program has found that the physical activity programs listed below are appropriate for arthritis and related conditions limiting mobility, have adequate evidence to support their use, and can be easily implemented in community settings. The **American Physical Therapy Association (APTA)** also supports the use of these programs.

- ✓ Active Living Every Day
- ✓ Arthritis Foundation Aquatic Program
- ✓ Arthritis Foundation Exercise Program
- ✓ EnhanceFitness
- ✓ Fit & Strong!
- ✓ Walk With Ease

For more information about each of these programs, see www.apta.org/Arthritis.

Why should I recommend these physical activity programs?

CDC has assessed each program according to a predetermined set of criteria and found that they:

- **Are appropriate** for people with arthritis and related conditions limiting mobility. Program activities are not high-impact or competitive, and instruction is hands-off. Participants can control the intensity, frequency, and duration of activities. The programs have been tested on adult populations with no safety concerns reported.
- **Have an adequate evidence base** from published journal articles or written evaluation reports. Evidence includes studies with at least 75 participants in the treatment group and at least a 6-month follow-up period. Evidence shows consistent trends in relieving pain, improving function, and/or increasing physical activity levels.
- **Can be easily implemented** in a community setting. They require no special or expensive equipment, generally cost participants less than \$50 to take, and have appropriate support mechanisms for program implementation in place (e.g., training and technical assistance).



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What do these evidence-based physical activity programs have in common?

- **They are safe and effective.** The evidence shows that these programs:
 - ✓ Reduce pain and fatigue
 - ✓ Improve range of motion
 - ✓ Increase physical activity
 - ✓ Elevate mood
 - ✓ Improve psychological well-being
 - ✓ Increase self confidence for managing one's own health
- **Benefits are long-lasting.** The effects of these programs can last well after the last class—up to 12 months or more.
- **Instructors are trained and experienced.** Instructors receive formalized training in how to deliver the programs; some programs require specific certifications. Many instructors are experienced working with patients who have joint pain and limited mobility from arthritis or other chronic conditions.
- **People learn how to exercise safely.** Exercises taught in the programs are sufficient to help meet current physical activity guidelines for adult Americans and can be modified to accommodate different skill and disability levels. Exercises include balancing and stretching techniques, endurance and strength training, and low-impact aerobics. Participants may also learn behavioral skills like goal-setting, problem-solving, and overcoming barriers.
- **Programs are low-cost and widely available.** Fees typically run \$2–\$3 per session. Programs are offered one to three times per week for 8–12 weeks or on an ongoing basis. They meet in communities across the country, in convenient locations such as recreational facilities and community centers.

Selected References

Brady TJ, Jernick SL, Hootman JM, et al. Public health interventions for arthritis: expanding the toolbox of evidence-based interventions. *Journal of Women's Health*. 2009;18(12):1905–1917.

Centers for Disease Control and Prevention Arthritis Program. Arthritis Appropriate Physical Activity and Self-Management Education Interventions: A Compendium of Implementation Information. August 2012.

For More Information

Learn more about these programs, the evidence base, and where to find programs in your area.

American Physical Therapy Association

www.apta.org/Arthritis

Centers for Disease Control and Prevention

www.cdc.gov/arthritis/interventions.htm