




Shift Learning

because learning
keeps changing

**Highlight Report: CSP | Concept
Testing**

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Attitudes to exercise and activity | Findings from phase 1

We identified 3 different attitudinal types within the groups

- It is important to note that all respondents met the following criteria during screening:

All had been diagnosed with a long term health condition

All considered physical activity to be important

All carried out some form of physical activity each week but did not meet the 150 recommended minutes

Current physical activities were cardiovascular rather than strengthening

- Despite these commonalities several distinctive group types became evident, some of which impacted on their feedback regarding the concepts. Where this is the case the attitudinal group has been highlighted.

The worrier

- This respondent type was often led by fear. While they could stretch themselves further physically they were intimidated by what the consequences of pushing themselves may be. They are crippled not by ability but fear of harm and we suggest that they should be a target group for physiotherapists as they do require encouragement and advice.
- They do carry out physical activity (namely walking or gentle exercise) but it is important to bear in mind that this group is likely to embellish on 'how little' activity they carry out to help others to understand their fears. This can also change on a day to day basis.

The persistent

- Many in the groups spoke about the limitations that their condition had on their ability to carry out physical activity but still persevered with some type of physical activity while they felt able.
- They tended to plan out their activity and were often frustrated at the fact that they didn't have the capacity to carry out as much physical activity.

The confident

- A couple of respondents felt much more confident regarding their current level of activity although they did reflect on the fact that their diagnosis had had some impact on this, meaning they had to think more carefully than previously before carrying out an activity.
- They were much more likely to be at the younger end of the demographic and clearly aimed to distinguish themselves from the worriers in the group.



There was a mixed reaction to whether physical activity was more strenuous than exercise

- There were contrasting opinions regarding how physical activity differed to exercise. There were two camps of thought:

1: Physical activity covers a range of activity types (including physical labour / work and house work). Sounds a little more fun and structured than exercise which requires mental preparation.

2: Physical activity is more strenuous than exercise, pushing the body beyond its limits



- Physical activity was therefore considered a broader term than exercise. Generally it did however evoke the same type of feelings, with respondents describing feelings of wellbeing and energy but also pain and frustration as limitations prevented them from carrying out the physical activity that they may have done previously.

DJ: They're not just gentle because exercise you do at your own limit, and it's to your own ability, whereas physical activity, for me I perceive it to be pushing yourself beyond.
NY: I think of it the other way round. I think of exercise as mentally having to get up and do whatever the exercises are.

Pain and fear were the two greatest barriers to physical activity

- All respondents claimed that they were not currently meeting the recommended 150 minutes of exercise per week, but all also highlighted that they did to some extent participate in physical activity whether that was walking, swimming or participating in a cardio exercise class. With all having been diagnosed with long term health conditions each stated that this condition had impacted the amount of physical activity that they currently undertook.
- Barriers to physical activity mentioned within the groups were very similar.

Medical barriers

- Pain
- Fatigue
- Stiffness
- Fear that too much activity can result in difficulties the following day or later in the evening

Other barriers

- Cost of gym membership
- Lack of motivation
- Age

- The main barriers for the persistent and the worriers surrounded their medical conditions. Fear of pain and fatigue were highest on the list, even for those who managed to participate in physical activities beyond walking.
- It is important to remember that for some LTC sufferers the level of pain and anxiety change day by day, to the extent which those who actually did feel capable of carrying out short walks and had reflected this prior to the group, noted that on some days they also struggled to walk two steps.
- Other barriers were also noted as a secondary concern for some. With some talking of the expense of gyms as a barrier demonstrating that offering advice on alternative ways to exercise for patients is important for physiotherapists.

NQ: I have to judge how I feel on a daily basis, I can't just say 'right, I'm going swimming today...I think it's scary when it's so unpredictable, real pain I just don't have that... it doesn't come on slowly, it's sudden and you can't do anything. It's that as well. It's unpredictable.

London Group 2, Persistent



Attitudes to exercise and activity | Findings from phase 2

Respondents were motivated to get active in order to maintain their mobility, keep fit, treat their conditions and combat depression, but some feared the pain that may result from exercise

Respondents mentioned the following types of activities and exercises and highlighted some motivators and barriers to achieving them:

Gentle walking	Physio-recommended exercises
Exercises found through the internet related to condition	Climbing the stairs
Swimming	Cycling
Gym (e.g. treadmill, spin)	Running short distances

- ### Motivators
- 'Getting back to normal' and 'pushing back' against diagnosis
 - Combating the 'victim' mentality following diagnosis
 - Maintaining current mobility - 'If you don't use it, you lose it'
 - Losing weight
 - Combatting depression
 - Enjoyment – try to go out with a partner or friend, one was thinking of buying a dog to help motivation
 - Keeping fit for children
 - Encouraged by NHS physio

- ### Barriers
- Fear of pain following exercise and the uncertainty of whether they would feel better or worse afterwards
 - The weather – if it's cold or raining that is a de-motivator to getting out; cold weather also has an impact on the condition, e.g. back pain, or increased difficulty breathing
 - Feeling the pain more on particular days or over certain periods
 - Time – fitting activity into schedules
 - Lethargy – not feeling that physio exercises will necessarily help

- Attitudes to activity and exercise did tend to change day to day depending on internal factors (level of pain, fatigue, mood) and external factors (the weather, short of time). In addition motivation could decline across a week.
- Differences in motivators and barriers were seen not necessarily between age or condition but by personality type. Some were fearful of exercise, some actively disliked it while others pushed themselves strongly as a way of overcoming their condition. This reflected the three types of respondent in phase 1, The 'Worriers', the 'Persistents' and the 'Confidants'.

Note that their long-term health conditions notwithstanding, Group 3 was generally highly motivated in terms of the exercise they took within the 150 hours and could be seen to be largely made up of the 'Persistent' and 'Confident' personas. While other groups focused mainly on gentle exercise/activities such as walking and gardening, this group had a more structured approach and included short periods of running, swimming and cycling as a way of maintaining and controlling their symptoms.





Perceived role of the physiotherapist for getting active

Physiotherapists were viewed in a supportive, reassuring role

- When asked what they felt the role of the physiotherapist was in regards to getting active, respondents in each group offered similar opinions.

The advisor

- Generally respondents saw the role of the physiotherapist as an advisor in this area, directing them in regards to what type of exercise they should be doing taking into account their different health conditions. They were seen as a group of professionals who could be trusted to provide clear advice for getting active that wouldn't result in any further pain or injury for those with long term health conditions.

The reassurer

- Additionally they frequently mentioned the role of reassuring patients, understanding the fears that patients may have surrounding physical activity and helping to allay these fears.

The referrer

- A couple of those who had visited physiotherapists more recently spoke of the gym referral programme and their role in this respect.

The pain reliever

- Helping to strengthen muscles and manage the pain.

IF: I think advice is the most important thing they can give at the start, and then encouragement for you to fund out your own limits and what you can do and their advice is the best thing they can do at the very first stage when you need it.

London group 1, persistent

OA: I look to a physio for reassurance, that I can do something and it won't cause injury or an exacerbation of my symptoms.

Online group 1, persistent



The physio was seen as an advisor and motivator, giving treatment and providing exercises for self-treatment; the personal relationship was key

- The majority of respondents had visited a physiotherapist at some point in their lives. Some had built up a strong relationship and saw their physio visits as well as the improvements they gained from them as a key role in helping manage or improve their condition. However feelings were also mixed as illustrated below:

The physio was seen as an expert advisor and a motivator

- Offering non pharmaceutical ways to relieve pain through exercises that you can do at home
- Reassurance that the exercises they recommend fit the condition and will improve it
- Ensuring exercises are done correctly without making conditions worse
- Showing alternative ways of doing day to day tasks and activities and increasing independence
- Gently encouraging patients to keep disciplined and active
- Others preferred a firmer and more assertive approach to make you realise that you have to 'work through the pain' or you won't get better, understanding the psychology of pain, fear and motivation
- There was some surprise and a perception that physios didn't do so much hands on manipulation as they used to - there was a feeling that the approach had changed to become less hands-on and more focused on self-treatment through exercise.

Some negative views were expressed based on previous experiences

- Can set unrealistic goals which end up being demotivating
- Conversely some were too gentle and not assertive enough in emphasising that you wouldn't get better if you didn't do the exercises
- Some feared that a trip to the physio will make pain worse and some had experienced this in the past
- Perceptions could be strongly dependent on personal relationship with an individual physio



"What do you miss?"

- Respondents were asked how they would react if their physio asked them this question. For some the question felt negative - it may just make them feel sad to remember the things they could no longer do. However it was generally accepted that it would be welcomed as part of a way of building up a more personal relationship with the physio and asking, 'what can I do to help you towards recovering those things you miss?' showing they understand their individual needs. For some it also signalled a more 'holistic' approach, understanding the 'whole person'.





Response to Love Activity Hate Exercise Phase 1

While 'hate' was considered too strong a word by some the slogan 'Hate exercise / love activity' did resonate with others



Hate exercise / love activity

- Seems negative
- Thought-provoking
- Contradictory (exercise and activity are the same to some)
- Woolly
- Inclusive

OA: That strapline is good, it's positive, makes me feel inclusive.

...

OU: It makes me feel like if the exercise is too daunting the activity will be enjoyable.

Online group 1, persistent

- The first slogan tested with respondents, 'Hate exercise, love activity' received mixed feedback from the groups. In general the word 'hate' was seen as a little too negative as respondents claimed that while they may sometimes struggle with exercise, it wasn't something that they hated.
- At the same time it was also viewed positively by others classed as both worriers and the persistent. They considered it to be inclusive and thought-provoking encouraging people to think of what they could be doing rather than concentrating only on what they couldn't. For this reason they claimed that it would encourage them to find out more – clicking through to a link if it was online. Others felt that it wasn't for them, particularly those who considered themselves slightly fitter than their group counterparts – claiming that it was perhaps aimed at the overweight or elderly who may have a stronger dislike of exercise.
- For those for which exercise was seen as a chore, the campaign was seen to offer an alternative as they considered activity to be something that they would choose to do, that could take many forms.

Hate is a strong word

- The most negative reactions to the statement revolved around the use of the word 'hate'. With many agreeing that they didn't necessarily 'hate exercise' they viewed it as a campaign with a less than positive tone
- Suggestions made to improve this tone by respondents included switching round the order to Love activity / hate exercise or using one of the following phrases:
 - love activity fear exercise
 - love activity, would love to exercise
 - Love activity / ☹ exercise



So what happens to the impact when the order is switched? Most see a more positive campaign



Love activity / hate exercise



- Much more positive
- Highlights there is a more pleasurable alternative to exercise
- Shows that there is a solution for those who struggle to carry out exercise.
- 'Hate' still a little too harsh

Where would they expect it to be seen?

- **Medical specific:** Doctor's surgery, hospital, physio ward, outpatients ward
- **Exercise / activity related:** Sports /leisure centre, gym, dance class
- **Other:** schools, television adverts, social media, billboards, on the tube, side of a bus, weightwatchers session

- In addition to Hate exercise / love activity the CSP were keen to test what the impact would be if the word order were switched to Love activity / hate exercise.
- Immediately the majority of respondents in three groups reacted much more positively to the concept, commenting on how the tone suddenly changed once 'hate' no longer led the phrase. They considered it to be more positive in tone and therefore more encouraging. In leading with 'love activity' they explained that it gave more concentration to the activity itself and becoming involved rather than focusing on the negative.
- Interestingly, the first online group had a different reaction with a couple of respondents claiming that they noticed the word 'hate' more in this instance. In fact one even questioned that the word hate had even featured in the first campaign despite the fact that they had liked what they had seen.
- Generally however respondents were positive about this slogan, with both worriers and the persistent attitudinal groups highlighting how it implied that there was a more pleasurable alternative to exercise that they could discover in future.

OP: Switching it round makes it seem more positive

LP: That's a hook for many folk...most will associate with that

UT: And make 'love' BOLD.

Online group 2

DJ: It tells you there's alternatives to exercise. You can still be active without having to do exercise, so that's your alternative and you can love being active, even if you don't like exercise.

...

YF: It gives the positive first. It's always the best.

London group 1





Response to Love Activity Hate Exercise? | Phase 2

Response to campaign 2: Love Activity Hate Exercise?

Taking into account the initial reaction to the campaign from the first phase of research, a question mark was added in a second round of testing.

Love Activity Hate Exercise?

- Many liked this headline – aimed at getting you moving, showing you can be active without doing a sport or formal exercise, and you have other options
- Context matches the strapline well
- Some humour acknowledged – ‘it’s talking about me!’
- Broad audience and appeal, including overweight and those who didn’t like the idea of the gym – some perception that this targeted a younger audience
- Use of ‘hate’ too negative for some
- Would prefer a question mark after ‘Love Activity’
- Need for the strapline to be linked to physiotherapy, otherwise it’s far too general
- It looked too much like an advertisement for a gym with similarities to ‘this girl can.’
- ‘Activity’ too vague it could be ‘going to the bingo.’
- Could be seen as condescending by some

What would they do if they saw this?

- Some thought they’d be encouraged to see a physio after seeing this
- The use of the question mark can make you question your own approach in a motivating way
- Could have inverse effect of making people think they didn’t have to do exercise to stay healthy (note a perceived view, not personal)

Resonated with:

- ‘Worrier’ / ‘Persistent’
- Spans ages
- Less active or less interested in exercise for its own sake



Contextual differences reflecting nature of reactions to the headline

- This headline appealed more to those who were demotivated by the idea of exercise and sport or less active overall. Those who had an established approach to activity and exercise and took part in more formal exercise were a little affronted – they didn’t ‘hate exercise’ at all and wanted to be encouraged to do it.





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