

GALM & SCALA

Groningen Active Living Model & Sport-Stimulating Strategy for people with a Chronic disease: Life-long Activity

INTRODUCTION

The Netherlands has about 3.5 million inhabitants older than 55. The numbers of this population group will grow in coming years, and its life expectancy will increase. These data have an important social meaning, which policymakers should anticipate. Integration, participation and prevention are slogans that are translated into concrete projects through GALM and SCALA. These projects are aimed at stimulating sports activity of non-active or insufficiently active healthy and medically-afflicted seniors. Research shows that only 45% of seniors between the ages of 55 and 65 in the Netherlands is sufficiently active. GALM and SCALA combat these poor activity habits by introducing sports-stimulating projects at a local level.

In the context of sickness prevention, GALM and SCALA focus primarily on the 55-65 age category. Sufficient movement through sports activities benefits fitness and contributes to prevent and stabilize conditions such as cardiovascular disease and bone and joint disorders, etc. In addition, participation in sports activities is pleasurable, stimulates social contacts and influences mental health in a positive way.

GOAL

The goal of GALM and SCALA is to get non-active or insufficiently active seniors aged 55-65 to become and stay active. The orientation is towards healthy seniors as well as those suffering from a chronic disease and/or physical handicap.

BACKGROUND

To increase the physical activity level of seniors, a strategy for general application has been developed that makes sure this group becomes and stays active. It involves a *behavioral change process*. This process requires taking certain aspects into account, such as:

- a. lowering the barriers to arrive at a physically active lifestyle; to this end, seniors are approached directly and personally with an offer that integrates a physically active lifestyle into everyday life gradually. The offer takes place in the living surroundings of the participants.
- b. going along with the sports and movement preferences of the target group; offering a variation of sports, taking into account the preferences as well as the possibilities of the participants, will ensure (re)gaining pleasure in physical activity.
- c. taking into consideration the time frame needed for behavioral change to sink in; long-term and intensive assistance is necessary to maintain the newly acquired physically

active behavior. For this reason, participants have to be assisted intensively for at least 6 months during the process of becoming physically active.

It is important that the GALM-SCALA strategy be organized in a cyclical fashion. By offering continuous and recurring sports-stimulating activities, new cohorts of seniors, seniors who initially waived participation and participants who stopped can (re-)enter the project.

METHOD

GALM and SCALA are carried out together in one project. A separate GALM project can also be organized by request. The following phases are covered in an 18-month period for a GALM or GALM-SCALA project:

1. Approaching the target group (mailing + home visit)
2. Fitness test 1
3. Introductory exercise program (12 weeks)
4. Physical activity advice
5. Continued exercise program (30 weeks)
6. Fitness test 2
7. Continuation of physical activity

EXPLANATION OF THE VARIOUS PHASES

1. Approaching the target group

Using the municipal registers, a written invitation is sent to 800-1000 persons aged 55-65 (single project). Individuals are asked whether they would want to participate in a fitness test and exercise program especially designed for seniors who are not physically active. Two weeks later, a project staff member makes a personal visit to answer questions or dispel doubts. For example, people who do not want to participate alone are encouraged to bring someone along. The staff member then receives the registration forms. In a double project, about 1600-2000 seniors are approached.

2. Fitness test 1

Seniors who have registered (12% of the approached population) are invited for the first fitness test. Motor fitness is assessed using the GFE (Groningen Fitness Test for the Elderly). This test has been especially developed for healthy seniors aged 55 and older. The results are processed into a fitness profile, based on which a customized physical activity advice is given. For seniors with chronic diseases there is a test that measures functional skills, the GFCT (Groningen Functional Capacity Test). By using the measured functional level, participants are advised to participate in either a low- or high-intensity group.

In addition to offering a first step towards a physically active lifestyle (stimulation function), the fitness test also has a feedback function: the values of the second fitness test (see item 6) are compared with those of the first. Finally, physical problems can be identified by the test physician, present during the test (screening).

3. *Introductory exercise program (12 weeks)*

After the fitness test, seniors will have the opportunity to enroll in this 12-week program. A different sports or recreational activity is offered every week for 1 hour (plus a 15-minute coffee break). Examples of activities are indoor tennis, hockey, korfbal, moving to music, circuit training.

The emphasis lies on (re)gaining pleasure in physical activity. The activities are adjusted to the level of the group and the individual participants. Instructors trained especially for GALM and SCALA assist the groups.

4. *Physical activity advice*

In the last class there is a discussion with the participants about the continued program. The results of the test and the personal experience gained by now form the basis for this discussion. Participants are offered to join the 30-week continued exercise program. In addition, a number of participants chooses a specific activity at a sports club.

5. *Continued exercise program (30 weeks)*

About 80% of the seniors who participate in the introductory program carry on with this 30-week continued program. This program also offers a varied package of sports and recreational activities on a weekly basis for 1 hour (plus a 15-minute coffee break).

Besides pleasure in physical activity, the emphasis now also lies on increasing functional skills and improving physical condition. Excursions to sports clubs with a suitable offer for seniors are possible. Here too, the classes are given by specially-trained instructors, whenever possible the same ones as in the introductory program.

6. *Fitness test 2*

To conclude the project, the participants are measured for a second time with the Groningen Fitness Test for the Elderly (for GALM participants) and the Groningen Functional Capacity Test (for SCALA participants). A comparison can be made between the first and the second fitness profiles.

7. *Continuation of physical activity*

About two-thirds of the participants stay active in the original GALM or SCALA group after the second fitness test. The varied sports and recreational program is continued in the group. The GALM and SCALA groups are incorporated into a new or existing sports club or in an organization for the well-being of the elderly. Some participants will branch out to sports-specific clubs.

RESULTS AND EFFECTS

1.212.345 seniors in 240 municipalities in the Netherlands have been approached (31-12-'14) using the GALM method, 78.671 seniors participated in the project.

With regard to the effects of the GALM program, it has been established in a thesis research that several aspects of motor fitness improve after participation. GALM participants feel fitter.

ORGANIZATION AND FINANCING

The Netherlands has 15 GALM-SCALA regions: the 12 provinces and the major cities of Amsterdam, Rotterdam and The Hague. The regional project group consists of the provincial or major-city sports consultant (for older adults) and/or a More Exercise for Seniors consultant, and a delegate of the national GALM-SCALA team.

At a national level, quality-monitoring of the projects and coordination of the training programs for GALM and SCALA instructors are taken care of. The national-level coordination of the GALM-SCALA project is done by the Netherlands Institute for Sport and Physical Activity in Arnhem, the University Center Pro Motion in Groningen, and the Institute for Human Movement Sciences of the University of Groningen. There is a cooperation with the Royal Dutch Gymnastics Association (KNGU) in Beekbergen and the Netherlands Sport Organization for people with a disability (NebasNsg) in Bunnik.

Before a project gets started, a local project group is founded in a municipality. The municipality as well as various sports, health and senior-oriented organizations are represented here (e.g. organizations for the well-being of the elderly, the umbrella sports federation, the Senior Citizens' League, the Municipal Health Services). A delegate of the corresponding regional GALM-SCALA project group also has a seat on this local project group.

A GALM-SCALA project can often be excellently integrated into the local sports, seniors, well-being and health policies. By now, many municipalities have incorporated or implemented the project in their official extensive sports plans. The costs of the introductory and continued exercise program are covered thanks to a participant contribution of € 2 to € 3 per activity. Extra financing is needed for the approach process and the fitness tests.

SPIN-OFFS OF GALM

Implementing the GALM method has led since 1998 to further adjustment and development of the method. SCALA was the first spin-off that emanated from the GALM method, and is by now implemented on a large scale and linked to GALM. Pilots have now been started of the following innovations:

a. GALM COACH (changed to “SMALL”, a strategy to stimulate older people in small communities to adopt a physical active lifestyle by means of coaching with a stepcounter)

The COACH method is a new way to stimulate insufficiently active people with or without chronic diseases to move more. The starting premise is the Dutch Public Health Recommendations, derived from the criteria of the American College of Sports Medicine. The COACH method is characterized by three important aspects:

1. stimulating physical activities by means of *lifestyle activities*. In this way, participants can meet the criteria of the Dutch Public Health Recommendations through increased movement in their everyday life.
2. the use of *exercise counseling*. Participants are stimulated to move more by means of counseling during the behavioral change process. By setting personal goals and by using a personal plan of action (developed together with the exercise counselor) to realize these goals and adjust them where necessary, increased movement can be expected to integrate itself better into a person's lifestyle.
3. the use of an *accelerometer or pedometer*. With these instruments participants can measure their daily energy use. By downloading the score into a corresponding website, participants can gain insight into their physical activity pattern, they receive feedback on the degree to which they have attained their goals, and they can choose the physical activity pattern that fits them best.

COACH can be applied to various target groups, including sedentary seniors aged 55-65. Seniors can be stimulated to do more sports activities outside the GALM class. In addition, seniors who want to exercise individually are motivated to do so.

b. GALLOM (changed to “GROSSO”, a 3 year program aimed at health and physical activity in people with a low social economic status)

In the last 5 years it has become clear that immigrant seniors (hardly) participated in GALM projects, despite the fact that their numbers in the Netherlands are very high. By developing a method, GALLOM, that fits this target group, they can also become and stay physically active.

Since 2002 a couple of pilots got started. As these pilots proved to be successful, GALLOM projects are now implemented at a national level.

The project is oriented toward sedentary immigrants aged 45-65. Just like GALM, GALLOM is subdivided into 7 phases. The contents of these phases is different in several aspects and is aimed at the target group. The target group is approached and recruited via existing networks, like mosques and community centers. It is important to map out the existing networks and their key figures in advance.

The fitness test makes use of an adjusted form of the Groningen Fitness Test for the Elderly. Just like GALM, the program consists of a varied sports and recreational selection of activities. Classes are given as much as possible by instructors with the same ethnic background.

This reduces barriers for many immigrant seniors due to language, culture and custom factors. The program also focuses on specific preferences like swimming, walking and cycling. The GALLOM groups can be incorporated into sports clubs, organizations for the well-being of the elderly or private organizations.

c. GALM⁺

Until now, there has been no systematic national recruitment campaign for increased physical activity among seniors aged 65 and older. Furthermore, in existing GALM projects the number of participants aged 65 and older is on the increase. For these older groups the existing GALM program is not suitable anymore. Both aspects have led to the development of the GALM⁺ program. GALM⁺ is a program for seniors aged 65 and older who are not yet physically active as well as for those seniors from existing and aging GALM groups.

Just like GALM-SCALA projects, GALM⁺ projects last 18 months and are phased in the same way. The two parts of the project that are adjusted to the age of GALM⁺ participants are the fitness test and the contents of the exercise program.

Next to the versatile and varied sports and recreational selection of activities offered, the GALM⁺ program includes ADL training elements (endurance, strength and balance). These elements have been added so that seniors can perform and keep up ADL (Activities of Daily Living) independently for as long as possible.

The GALM⁺ fitness test incorporates some parts of the Groningen Fitness Test for the Elderly, the Groningen Functional Capacity Test and the Senior Fitness Test (Rikli & Jones, 2001). By using the GALM⁺ fitness test score, it is possible to classify participants into functional levels and refer them to a GALM⁺ group that fits their possibilities. They can also be referred to existing activities for seniors aged 65-75.

INFORMATION

For additional information, you can consult the following websites: www.galm.nl

If you have any questions, please mail or call the national GALM-SCALA secretariat at:
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