

Assessing Food, Nutrition, and Fitness Resources for Group Home Residents

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Introduction

Individuals with varying abilities, including intellectual, physical, and developmental disabilities, make meaningful contributions to each community of which they are a part.

Individuals with intellectual disabilities (ID) are twice as likely to develop obesity, type 1 diabetes, cardiovascular disease, and many other health risks due to the nature of the disability (Kuijken et al., 2015)

For many individuals with ID, their education and life experiences are gained while in the group home in which they reside. Thus, the responsibility to educate these individuals about overall health and wellness often falls on caregivers.

Purpose

To determine if and how food, nutrition, and/or fitness education are currently being incorporated into group homes in North Dakota and Minnesota, and if there is a need for additional food, nutrition, and/or fitness education resources in these settings

Materials and Methods

Participants

- Group home caregivers advocated on behalf of the residents as it is not appropriate to survey the residents directly due to the vulnerability of the population
- Participating group home facilities included Creative Care for Reaching Independence Inc. (CCRI), Catholic Health Initiatives (CHI) Friendship, Fraser Ltd., St. David's Center, and Red River Human Services

Survey

- Created using Qualtrics Survey Software
- Included questions about demographics
- Featured 29 questions used to assess food, nutrition and fitness knowledge, food and fitness resource accessibility, the desire for increased knowledge, preferred form of education, and if facilities would be willing to pay for services
- Data collection period: October 14, 2020 to January 14, 2021

Procedures

- Approved by Concordia College Institutional Review Board
- Survey distributed via email to program coordinators of five group home facilities, who then distributed the survey to group home residential caregivers
- Data analyzed using Microsoft Excel

Results

Demographics

- Out of 65 possible responses, a total of 10 responses were viable, offering a 17% response rate
- Three additional responses were submitted with only 30% survey completion; data from those submissions were not analyzed
- Average number of residents living in the group homes was 14 residents per facility, with the maximum residency being 46 and the lowest being 5
- On average, group homes included 17 female and 6 male residents, with ages ranging from under 18 to over 50 years-old
- Exact ages of residents and name of group home in which they resided was not asked in order to maintain anonymity

Figure 1

Frequency with which nutrition education programs are offered to group home residents

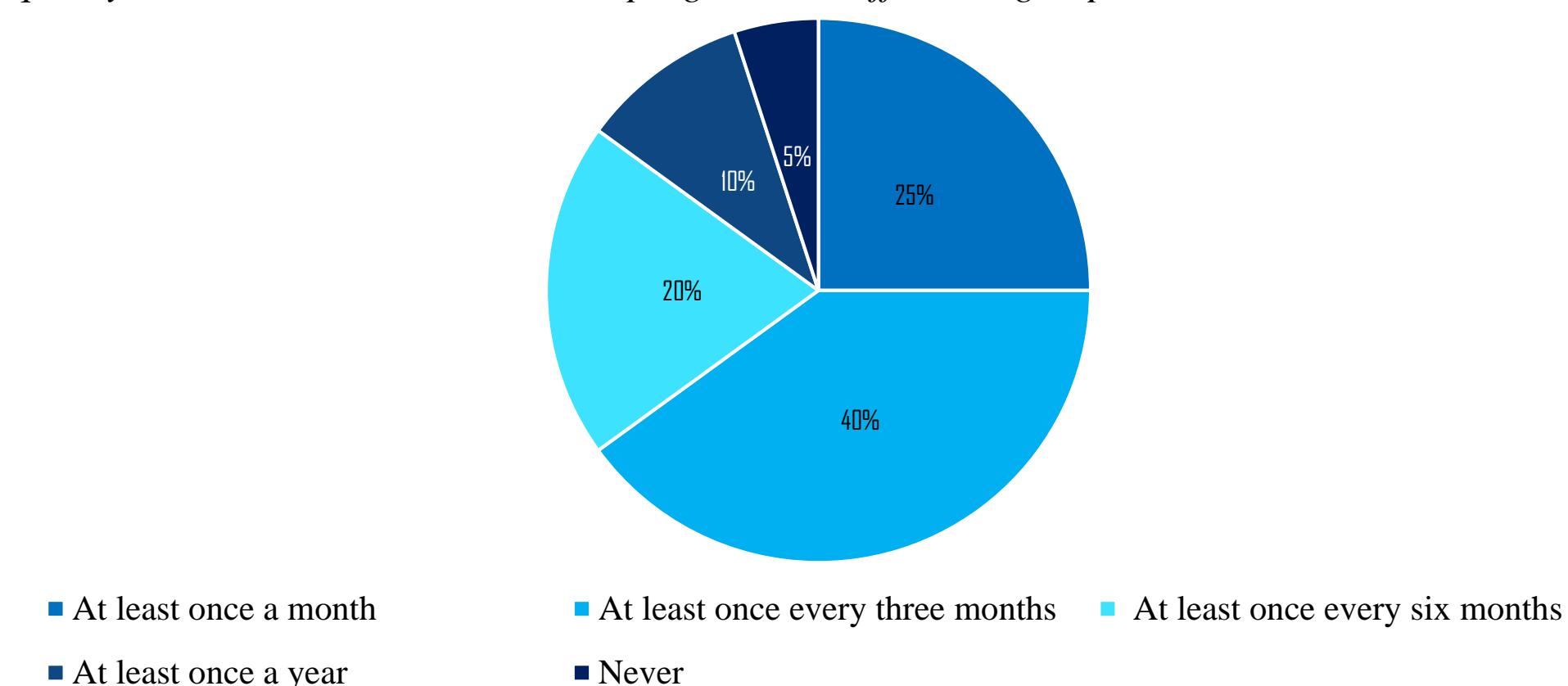


Figure 2.

Preferred type of physical activity among group home residents

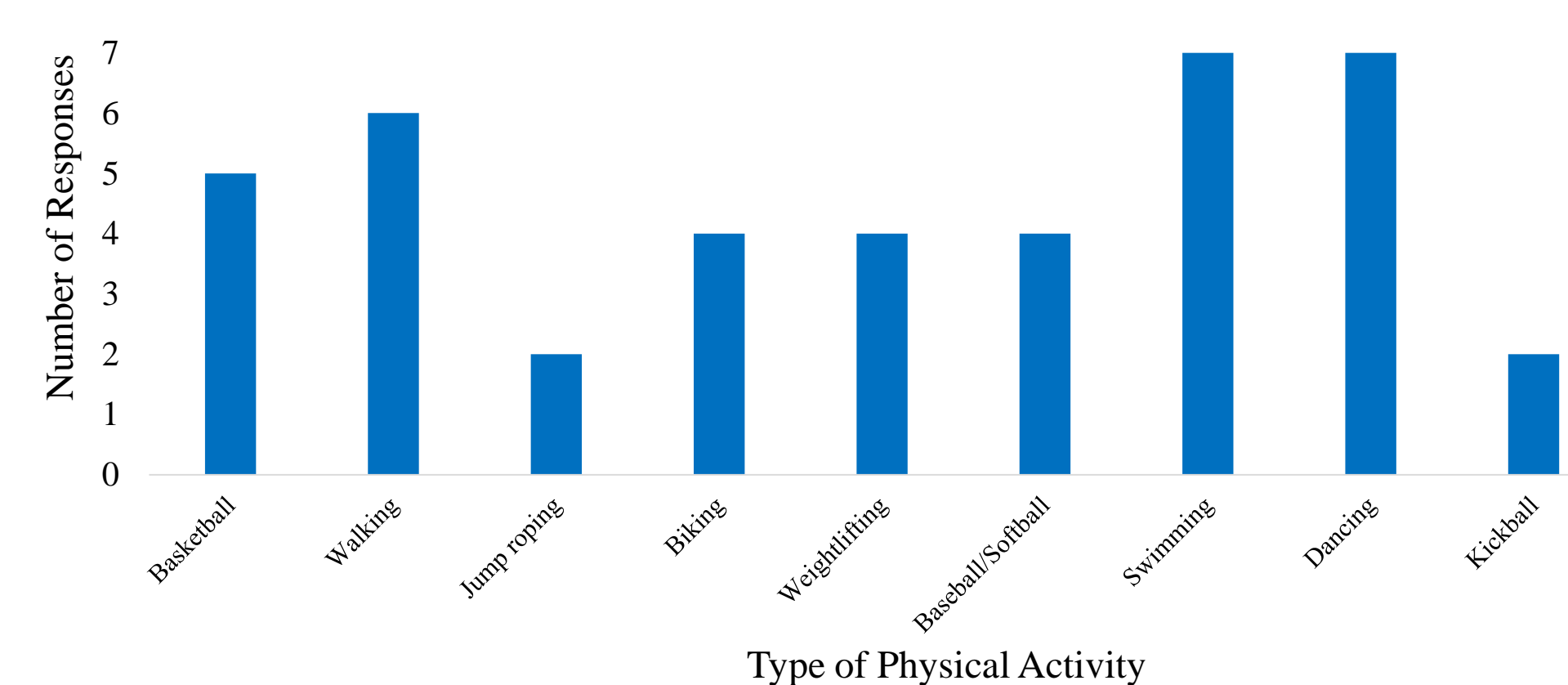


Figure 3

Appliances and utensil available in group homes

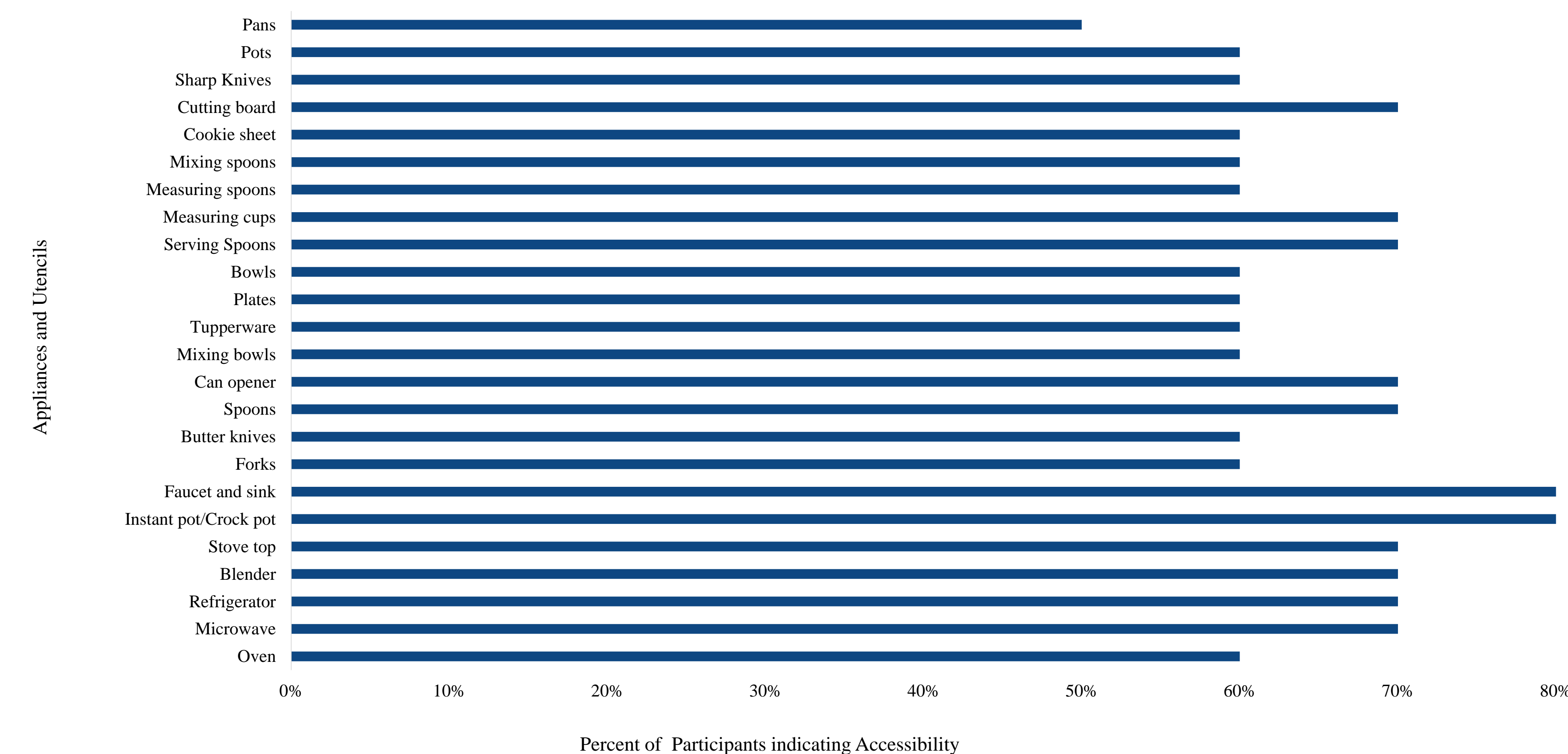


Figure 4

Interest in more food, nutrition and fitness education

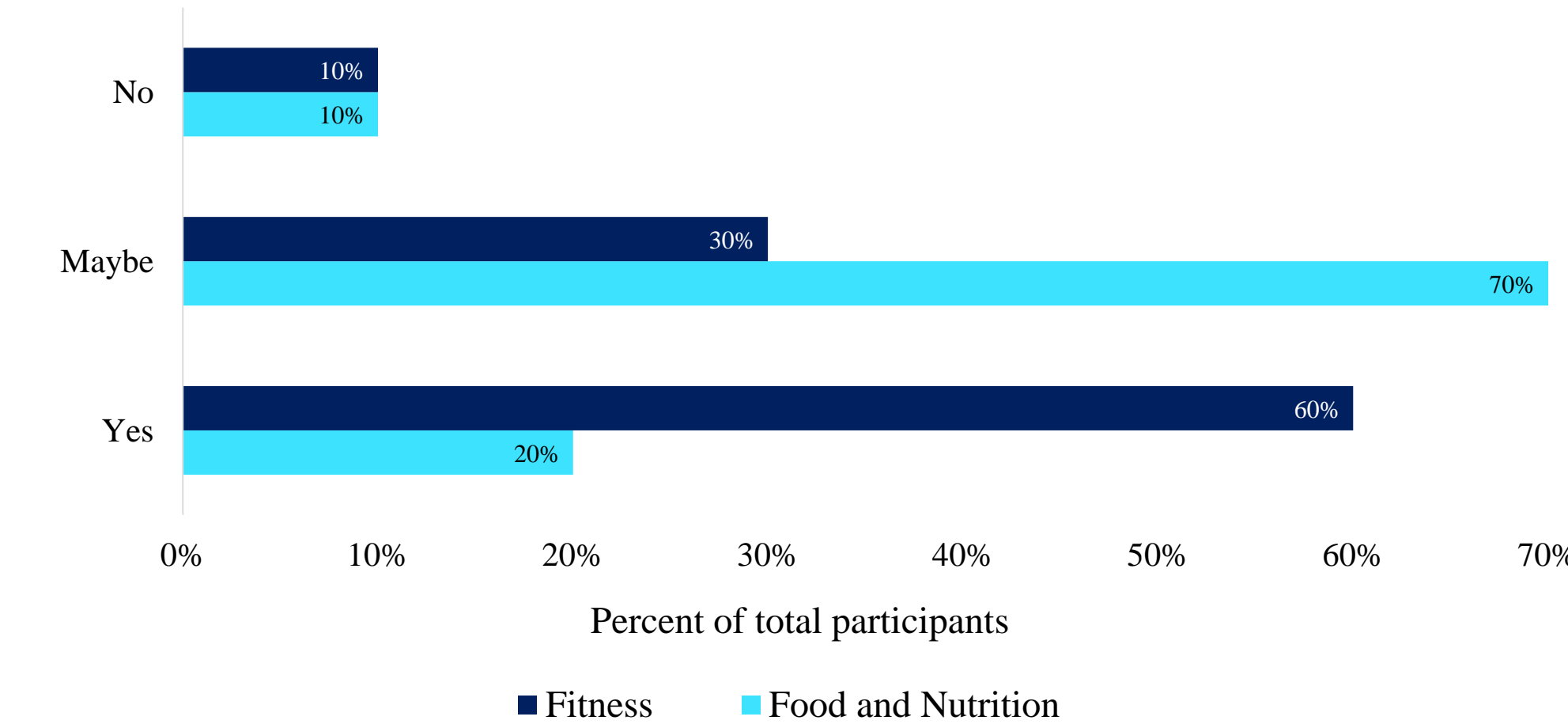
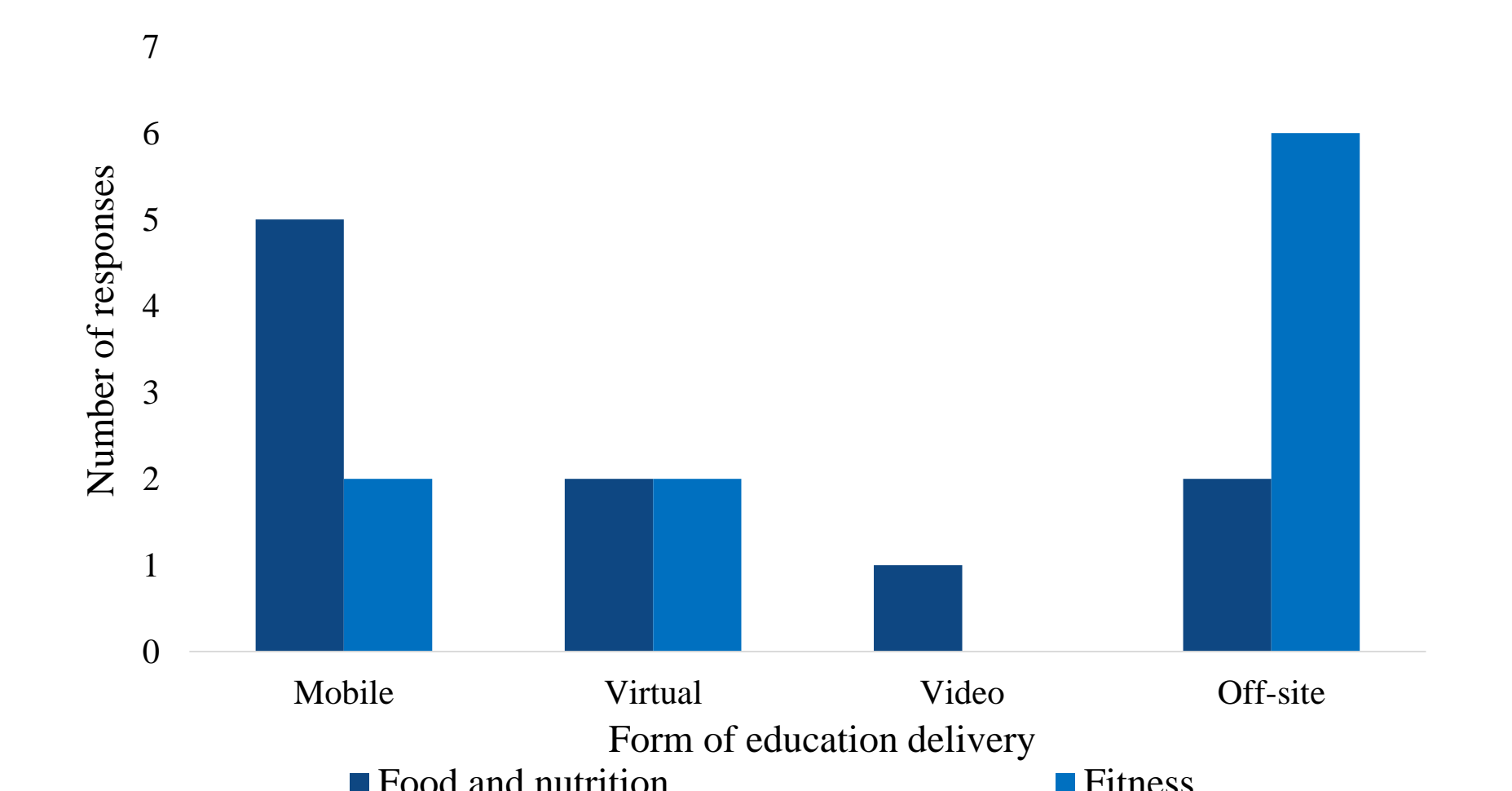


Figure 5

Preferred form of food, nutrition and fitness education delivery



Discussion

Knowledge

- Additional food and nutrition knowledge, in areas such as food safety, continuing to educate on different ways to prepare foods, and continuing to expose residents to new foods, is warranted
- Participants report adequate knowledge of how to engage in physical activity; thus, additional fitness knowledge is unnecessary, unless it is introducing new activities to residents more frequently

Accessibility

- With access to such a wide variety of cookware there is opportunity to educate residents on how to use the resources offered to them a variety of ways
- While access to fitness facilities and/or outdoor physical activity opportunities is adequate, physical activity among residents does not meet recommendations, which suggests education about different ways to get activity in each day is needed

Interest

- Most participants indicated interest in receiving more food, nutrition and fitness education
- Majority preferred food and nutrition education to be brought to facilities in a mobile form with a nutrition professional bringing their own equipment and food to the facility

Conclusions

North Dakota and Minnesota group home residents have adequate access to indoor fitness facilities to partake in physical activity, as well as adequate access to food preparation appliances and utensils. A mobile form of educating residents on food and nutrition is preferred, while off-site education about fitness in either one-on-one or group settings is desired. Increasing education about overall health and wellness for group home residents has the potential to increase quality and duration of life.

References

Kuijken, N. M., Naaldenberg, J., Sanden, M. W., & H. M. J. Van Schroyensteyn-Lantman DeValk. (2015). Healthy living according to adults with intellectual disabilities: Towards tailoring health promotion initiatives. *Journal of Intellectual Disability Research*, 60(3), 228-241. doi:10.1111/jir.12243

Acknowledgements

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For Further Information

Please contact Megan Cowan at mcowan@cord.edu with questions, comments, or suggestions.