Demonstrating How Collaborative Efforts Positively Impact Consumer Health

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The health of our nation is an urgent issue that lies at the forefront of discussions regarding health care. Based on the tremendous response we received to the call for this special issue on collaborative practices and physical activity, it appears that therapeutic recreation practitioners are actively engaged in collaborative relationships that address healthy behaviors. It is well documented that collaborative partnerships enhance the delivery of therapeutic services throughout the continuum of care and also improve outcome based research (Shank, Coyle, Boyd, & Kinney, 1996). In hospital and rehabilitative settings partners may include treatment team members, administrators, patients, and family members. In community settings partners may include social service agencies, schools, community recreation providers, and family (Scholl, Dieser, & Davidson, 2005). Establishing a collaborative relationship implies that two or more parties share a common goal such as delivery of physical activity programs and each has a vital role in accomplishing that goal. Inherent in this relationship is the need for clear communication, shared decision-making, mutual respect, and pooling of resources (Klitzing, 2002). If successful, all parties can accomplish more than they could individually and the result is enhanced outcomes for our clients. Contributors to this special issue share how collaborative practices have positively impacted service delivery and resulted in innovative programs and research relevant to the field of therapeutic recreation.

In this first of a two-part special issue, we will learn how researchers and practitioners are discovering the emotions and experiences individuals ascribe to collaborative programs and research. In Photovoice: A collaborative methodology giving voice to underserved populations seeking community inclusion, Walton, Schleien, Brake,
Trova, and Oakes describe an innovative research project that empowered individuals with intellectual and developmental disabilities (ID/DD). As a result of a collaborative partnership between a university and a traditional self-advocacy group, the ARC, the authors engaged individuals with ID/DD in participatory action research that taught them how to use photographs to tell stories about the people, places and activities that were important to them. These integrated stories were then exhibited at the city’s downtown Chamber of Commerce and a local coffee shop, resulting in the empowerment of this historically marginalized and “voiceless” group.

McCormick, Snethen, Smith, and Lysaker use Experience Sampling Methods to discover the emotional experiences associated with leisure. In the manuscript entitled: Active leisure in the emotional experience of people with schizophrenia, the authors discover that individuals who attended a psychiatric day-treatment program mostly engage in sedentary and unhealthy leisure activity. However, the majority of non-leisure activity (such as activities of daily living) was active. Although there was considerable difference between individuals, the findings provide preliminary evidence to suggest that individuals with schizophrenia who engage in active leisure experience fewer negative emotional experiences and improved subjective well-being. The authors go on to present arguments for the inclusion of leisure time physical activity in rehabilitation programs for individuals with schizophrenia.

The delivery of wellness and prevention services that utilize existing community programs is a strategic way to address the increasing demands of our aging nation. An economical and practical approach to reduce the cost of health care for older adults is presented in the manuscript: B-Active: An interdisciplinary approach to healthy aging. Dattilo, Martire and Proctor describe how a therapeutic recreation specialist, psychologist, and a kinesiologist, teamed up to create an innovative volunteer based program designed to increase physical activity and reduce the risk of falling in older adults. The results of the pilot study revealed that not only was it feasible to deliver these types of services, but these services resulted in important health benefits including increased fitness, strength, balance, flexibility and self-efficacy.

Lastly in the article, Promoting a collaborative approach with recreational therapy to improve physical activity engagement in type 2 diabetes, Porter, Shank and Iwasaki explore the meaning ascribed to leisure time physical activity (LTPA) for individuals with this significant health issue. In this exploratory study, therapeutic recreation specialists partnered with a diabetes counseling center to determine the personal meanings that individuals ascribe to LTPA. The author found evidence to support that individuals with Type II diabetes who engaged in more LTPA derived greater personal meaning from the experiences such as connecting with others, building identity, feeling a sense of control, and experiencing competency. Increased LTPA also coincided with increased feelings of positive emotions and well-being.

The articles that comprise this first issue of a two part series focused on collaborative practices and physical activities, present the reader with an
array of methodologies and strategies to facilitate innovative and efficacious services. The next issue will continue this important discussion and take a closer look at physical fitness and sport based interventions and outcomes of collaborative programs.

References

