Exploring the awareness and perceptions of the Canadian 24-Hour Movement Guidelines in rural and remote communities

Executive Summary

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Current efforts to promote the Canadian 24-Hour Movement Guidelines are limited to the general public, and little research has explored integrated movement behaviours in subpopulations, such as rural and remote communities. Rural communities tend to face unique challenges to the promotion of healthy movement behaviours when compared with urban centres, which suggests that health promotion strategies may not be applicable in rural and remote contexts. Identifying the relevance of movement guideline materials and exploring strategies for effective communication in rural and remote communities can improve the applicability of guideline materials in these areas.

Objectives

This study explored the perspectives and experiences of people living in rural communities on movement guideline recommendations to improve the relevancy and impact of the Canadian 24-Hour Movement Guidelines in rural and remote communities.

Methods

Individuals living in rural and remote BC communities completed a crosssectional survey (N = 76) followed by individual interviews (N = 12) to explore what is known about the guidelines and provide recommendations to help adapt the materials to local context.

Findings

Overall, most participants were aware of the guidelines (44.7%) and had moderate knowledge of recommendations and dosages (64.5%). Although participants were considerably less knowledgeable of the recommendations for sedentary behaviour and sleep when compared with recommendations of physical activity. Many people living in rural and remote communities reported meeting recommendations for physical activity and sedentary behaviour, but few reported meeting recommendations for all three movement behaviours.





Rural-Specific Recommendations to Guidelines

Physical Activity

Providing more information on wildlife safety, exercising outdoors, being active at home, and being active as a family could help people living in rural communities be more active especially in those with limited access to exercise facilities and programs. Providing information on being active with different health conditions, such as diabetes, can improve capability to be physically active despite limited access to specialists or healthcare services. Promote the guidelines through local community leaders and organizations to increase knowledge and access to the available opportunities in the community.

Sedentary Behaviour

Providing more information discerning sedentary behaviour from physical inactivity and providing tips for goal setting, action planning, and self-monitoring can help people consciously modify and monitor their behaviour. Promoting the movement guidelines through workplaces and professional channels can help decrease sedentary time spent at work.

Sleep

Providing more information on seasonal depression, and tips to combat seasonal changes in daylight can help people living in rural and remote communities create healthier sleep habits. Providing additional information on the impacts of caffeine on sleep can help people make choices on caffeine consumption to improve sleep behaviour. Lastly, more information on the specific benefits of sleep were noted to help motivate individuals to meet recommendations on sleep.

Next Steps

Different populations in rural communities, including older adults and Indigenous peoples, may be further at risk as they may experience different challenges to meeting guideline recommendations, gain information on movement behaviours through different channels, or require additional information or material to meet recommendations. Future research should examine the promotion of movement behaviours in different populations within rural and remote communities to provide a more specific approach for different demographics.

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