

COMPARISON OF TEACHING STRATEGIES ON KNOWLEDGE AND HEALTH BEHAVIOR IN INDEPENDENT COMMUNITY DWELLING OLDER ADULTS

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Purpose: Healthy People 2010 national agenda Objective 7 aims to improve availability, quality, and effectiveness of educational programs designed to prevent disease and improve health. A challenge to meeting Objective 7 is the effective presentation of health information to older adults considering the normative physical and cognitive aging changes that may affect learning and health behavior. The purpose of this study was to determine if health education presentations modified to accommodate normal aging changes, significantly increased knowledge and resulted in positive health behavior changes.

Method: The study used an experimental pretest-posttest two-group control design. A convenience sample of 111 independent community dwelling older adults was randomly assigned to either the control or intervention group and each received a type 2 diabetes and colorectal cancer prevention presentation. The control group received a traditional lecture while the intervention group received a presentation modified to accommodate normal aging changes. Knowledge was assessed as the difference in pretest and posttest scores on the Diabetic Prevention Knowledge Test (DPKT) and the Colorectal Cancer Knowledge Questionnaire (CCKQ). Health behavior change was assessed as the difference between pre and posttest scores on the Health Promoting Lifestyle Profile II Physical Activity and Nutrition subscale scores and completion of the fasting blood glucose (FBG) and fecal occult blood test (FOBT).

Findings: There was no significant difference between the control and intervention groups on the DPKT ($t = -.43, p = .67$) or the CCKQ ($t = .58, p = .56$), although each group significantly improved mean posttest scores on the tests. While there was not a significant difference between the control and intervention groups on the Physical Activity ($t = -.92, p = .36$) and Nutrition ($t = .62, p = .54$) subscales, mean posttest scores on the Physical Activity subscale were significantly higher for both groups. Although a greater percentage of participants completed the FBG than the FOBT in each group, completion of the FBG ($\chi^2 = 25.82, p > .05$) and FOBT ($\chi^2 = 2.80, p > .05$) did not significantly differ between groups.

Discussion: For this profile of independent community dwelling older adults, modifications in teaching to accommodate normal aging changes did not result in greater knowledge or behavior change; however, this conclusion may not apply to other groups.