

## APPENDIX C INFORMED CONSENT

### VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY

#### INFORMED CONSENT FORM FOR PARTICIPANTS OF INVESTIGATIVE PROJECT

Title of Project: Understanding older adult's perceptions of participation in lifelong exercise: A life course approach

Investigators: Jennifer M. Scanlon, M.S. Candidate, Virginia Tech  
Dr. Karen A. Roberto, Advisor, Virginia Tech

**I. Purpose of this Research/Project**

The purpose of this study is to examine your participation in physical exercise over the life course. Together, we will try to understand how societal processes and opportunities, life course roles and transitions, and individual meanings of physical exercise have affected your participation in physical exercise throughout the life course.

**II. Procedures**

You are among approximately 20 individuals being invited to participate in this study. By signing this consent form, you are agreeing to participate in an interview with me, which will take between 45 and 60 minutes to complete. During the interview you will be asked several questions about your participation in physical exercise during early adolescence, middle adulthood, and in late life. For example, you will be asked questions that involve societal opportunities to physical exercise, roles and transitions that may have affected participation, and personal definitions of physical exercise. Finally, at the end of the interview you will be asked to fill out a background and demographic questionnaire (i.e., education, age, occupation).

**III. Benefits of Participation**

Your participation in this study will help us better understand lifelong participation in physical exercise. You may leave the interview with a better understanding and appreciation for your participation in physical exercise over the life course. You may also leave the interview feeling that you have been physically active according to the definition being used in this study, for a lot longer than you may have initially thought.

**IV. Risks of Participation**

There are no known risks to participating in this study. You will be asked to give some thought to your participation in physical exercise at definite stages of the life course. Your health and/or mental well being will not be in jeopardy as a result of this research project.

**V. Extent of Anonymity and Confidentiality**

All the information from the interview will be kept strictly confidential. In any written reports you will be identified by a code number or a pseudonym. Any names of people or

places that you mention will be changed. The interview tapes will be transcribed verbatim and will be kept in a locked filing cabinet when they are not being used for transcription or analyses. The information that is provided during the interview process will be kept confidential and used for research purposes only. After all of the interviews are conducted, data is recorded, and my thesis is successfully defended, all the tapes will be destroyed.

**VI. Compensation**

You will not be receiving any monetary compensation for participating in this interview.

**VII. Freedom to Withdraw**

Participation in this study is voluntary. If there is a question that you feel uncomfortable answering, you have the right to skip it and continue on with the interview. In addition, you have the right to terminate the interview at anytime without any type of penalty.

**VIII. Approval of Research**

This research project has been approved, as required, by the Institutional Review Board for Research Involving Human Subjects at Virginia Polytechnic Institute and State University, by the Director of the Wellness Center, and by the Department of Human Nutrition, Foods, and Exercise .

**IX. Subject's Responsibilities**

I voluntarily agree to participate in this study. My responsibilities include answering interview questions.

**X. Subject's Approval**

I have read and understood the Informed Consent and conditions of this project. I have had all my questions answered. I hereby acknowledge the above and give my voluntary consent for participation in this project.

If I choose to participate in this research study, I may withdraw at anytime without penalty. I agree to abide by the procedures of this study.

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Signature

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Date

Should I have any questions about this research or its conduct, I may contact:

Jennifer M. Scanlon – Investigator	540-633-6315
Dr. Karen A. Roberto, Ph.D– Investigator's Advisor	540-231-7657
Dr. H.T. Hurd, Ph.D – Chair, Institutional Review Board	540-231-5281
Research Division, Virginia Tech	

## APPENDIX D INTERVIEW GUIDE

### **Introductory Comments:**

How long have you been a member of the Wellness Center?

What is a typical day like for you here at the Wellness Center?  
(probe: when you come in do you have a routine, what do you do, how long does it take you, who helps you)

What types of physical exercise are you currently participating in on a regular basis?  
(probe: walking on the treadmill, weigh training, yoga)

### **Societal Processes and Opportunities**

When you think about yourself as a child, and through your teenage years, were you very active?

Can you tell me about the types of opportunities that you had to participate in exercise while growing up?

Were these opportunities limited at all because of you were a boy or girl?  
(probe: were there certain expectations concerning physical activity for boys or girls)

Were these opportunities limited at all because of your geographical location?  
(probe: urban vs. rural)

Who encouraged you from participating in physical activities as a child, if anyone?  
(probe: how? who said you should participate, or you could not participate, you weren't good enough)

Who discouraged you from participating in physical activities as a child, if anyone?  
(probe: who? how?)

Do you believe that these early experiences have influenced your participation in physical exercise throughout your life?  
(probe: organized sport participation, family encouragement)

Can you tell me where you exercised before the health club days were in existence?  
(probe: outdoors, organized sport)

### **Life Course Roles and Transitions**

Have specific life roles influenced your participation in physical exercise?  
(probe: parenthood, early life involvement, how have they influenced? what was it like? was it your decision?)

Do you perceive your participation in physical exercise as changing or remaining the same due to specific life transitions?  
(probe: empty nest, retirement, widowhood)

Did family responsibilities reduce your time available to participate in exercise? **HOW?**  
(probe: how did it affect participation, what did you do to supplement exercise)

Can you think of any other barriers or things that have prevented you to participate in exercise?

With that in mind can you think of opportunities that have increased your participation in exercise? (probe: retirement, empty nest)

### **Types/Definitions of Physical Exercise**

Throughout your life, have you always participated in some form of physical activity?  
(probe: what types, why)

What is your definition of physical exercise?  
(probe: during adolescence, young adulthood, middle adulthood, late adulthood; has it changed)

Is there a relationship between adolescence, young adulthood, middle adulthood, and late life participation in physical exercise?

Can you tell me how exercise has changed throughout your life?  
(probe: unstructured to structured and/or informal to formal)

### **General Exercise Questions**

**\*Based on previous responses ask about life stresses or health difficulties**

What (if any) life stresses and health difficulties have you encountered in your life that have prevented or decreased your participation in physical exercise?  
(probe: heart attack, caregiving situation)

How would you categorize the people that you interact with here at the Wellness Center?  
(probe: friends, family, acquaintances, and why would you categorize them this way)

Do you believe that exercising here at the Wellness Center (as opposed to outdoors) has been an effective way for you to meet people?

(probe: why, how)

Do you foresee a time in the future when you will stop exercising?

(probe: why, what would make you stop)

Do you believe that your participation in exercise has improved your quality of life?

(probe: how)

Finally, if you could offer any advice to the Baby Boomers or Generation X about continuous participation in exercise throughout the life course, what would it be?

## SOCIODEMOGRAPHIC QUESTIONS

**Please answer the following questions by placing a checkmark on all answers that may apply to you.**

Code # \_\_\_\_\_

1. Please rate your present health?

Excellent    Good    Fair    Poor    Bad

2. Is your health now better, about the same, or worse than it was 5 years ago?

Worse    About the same    Better

3. Have you had any surgery (major or minor) or been hospitalized in the last 3 years?

Yes    No   **If yes, please specify** \_\_\_\_\_

4. Are you currently receiving physical therapy?  Yes  No

**If yes, for what condition?** \_\_\_\_\_

5. Were you ever involved in the cardiac rehabilitation program at the Wellness Center, or any where else?

Yes    No   **If yes, when?** \_\_\_\_\_   **How long?** \_\_\_\_\_

6. Do you have any of the following conditions at the present time?

**(please check all that apply)**

<input type="checkbox"/> Chronic Pain	<input type="checkbox"/> Arthritis
<input type="checkbox"/> Osteoporosis	<input type="checkbox"/> High Blood Pressure
<input type="checkbox"/> Circulation Problems	<input type="checkbox"/> Respiratory Problems
<input type="checkbox"/> Digestive Problems	<input type="checkbox"/> Diabetes
<input type="checkbox"/> Vision Problems	<input type="checkbox"/> Hearing Problems

**If others, please list** \_\_\_\_\_

7. How much do your health problems stand in the way of your doing the things that you want to do?

Not at all    A little    A great deal

8. Do any of the following conditions limit your physical activity?  
(please check all that apply)

- |   |  |
|---|--|
| <input type="checkbox"/> Arm/Elbow Injury         | <input type="checkbox"/> Hip/Pelvic Injury |
| <input type="checkbox"/> Shoulder/Clavicle Injury | <input type="checkbox"/> Tennis Elbow      |
| <input type="checkbox"/> Ankle/Foot Injury        | <input type="checkbox"/> Head/Neck Injury  |
| <input type="checkbox"/> Bone Fracture            | <input type="checkbox"/> Upper Back Injury |
| <input type="checkbox"/> Lower Back Pain          | <input type="checkbox"/> Knee/Thigh Injury |
| <input type="checkbox"/> Arthritis                | <input type="checkbox"/> Groin Injury      |
| <input type="checkbox"/> Calcium Deposits         | <input type="checkbox"/> Hamstring Strain  |
| <input type="checkbox"/> Nerve damage             | <input type="checkbox"/> Bone Spurs        |
| <input type="checkbox"/> Wrist/Hand Injury        | <input type="checkbox"/> Joint Disease     |
| <input type="checkbox"/> Abdominal Pain           | <input type="checkbox"/> Dizziness/Faint   |
| <input type="checkbox"/> Chest Pain               |  |

**If other, please explain** \_\_\_\_\_

9. Has your physician ever advised you against exercise?  Yes  No

**If yes, why?** \_\_\_\_\_

10. Has your physician ever advised you to exercise?  Yes  No

**If yes, why?** \_\_\_\_\_

11. What are your personal exercise program goals? (please check all that apply)

- |  |   |
|--|---|
| <input type="checkbox"/> Weight Control/Loss         | <input type="checkbox"/> Sports Conditioning  |
| <input type="checkbox"/> Cardiovascular Conditioning | <input type="checkbox"/> Maintain Health      |
| <input type="checkbox"/> Stress reduction            | <input type="checkbox"/> Motivation           |
| <input type="checkbox"/> Increase Strength           | <input type="checkbox"/> Increase Flexibility |

**If others, please list** \_\_\_\_\_

12. Do you have a personal trainer at the Wellness Center or someone who works with you?

Yes  No **If yes, who?** \_\_\_\_\_

13. On a scale between 1 and 10, please rate your current level of motivation towards exercise.

1  2  3  4  5  6  7  8  9  10  
(Hardly Motivated) (Motivated) (Extremely Motivated)

**The following 8 questions pertain to specific demographic information. Please place a checkmark on the correct responses or fill in the correct answer in the space marked other.**

14. Age: \_\_\_\_\_

15. Birthdate: \_\_\_\_\_

16. Gender: \_\_\_Male \_\_\_Female

17. Current Marital Status:

\_\_\_married/partner \_\_\_widowed \_\_\_divorced \_\_\_single, never married

18. Race/Ethnic Group:

\_\_\_White \_\_\_Black or African American \_\_\_Asian \_\_\_Hispanic

\_\_\_Native American \_\_\_Asian or Pacific Islander \_\_\_\_\_Other

19. Occupation \_\_\_\_\_

**(\*If retired, please list your last or most recent occupation)**

20. Education:

\_\_\_did not complete elementary school \_\_\_some college or post high school  
education

\_\_\_elementary school \_\_\_associates degree / bachelors degree

\_\_\_junior high school \_\_\_graduate or advanced degree

\_\_\_high school

21. Which best describes your present yearly income?

\_\_\_\$5,000-15,999 \_\_\_\$38,000-48,999

\_\_\_\$16,000-26,999 \_\_\_\$49,000-59,999

\_\_\_\$27,000-37,999 \_\_\_\$60,000 +



## APPENDIX E CODING SCHEME

### **100 Meanings, Definitions, Types and Perceptions of Exercise**

- 101 Exercise changed or remained the same
- 102 Relationship b/t ad, ya, ma, and la
- 103 Types of activities done for exercise (Play, Games, Chores, Work)
- 104 How exercise has changed
- 105 Change in perception of exercise then and exercise now

### **200 Life Course Influences**

- 201 Early Socialization Processes (gender, opportunities, recess, phys.ed, sports, childhood creativity/imagination )
- 202 Roles (marriage, career, parenthood, caregiver)
- 203 Transitions (retirement, empty nest)
- 204 Family Responsibilities

### **300 Barriers & Motivators**

- 301 Health problems
- 302 Geographical location
- 303 Transportation
- 304 Cardiac Rehab group
- 305 More Opportunities

### **400 Quality of life**

- 401 Physical well-being
- 402 Mental well-being
- 403 Social well-being
- 404 Where they would be without exercise
- 405 Advice to Baby Boomers and Generation X
- 406 Future outlook on exercise

## CURRICULUM VITAE

Jennifer M. Scanlon

Virginia Polytechnic Institute & State University

### EDUCATION:

- M.S. 1999** Virginia Polytechnic Institute & State University  
Department of Human Development  
Major area: Adult Development & Aging  
Graduate Certificate in Gerontology
- B.A. 1997** State University College of New York at Cortland  
Department of Sociology and Anthropology  
Major area: Sociology  
Dual Minors: Criminology & Gerontology

### PROFESSIONAL AND WORK RELATED EXPERIENCE:

- 1998-1999** Graduate Research Assistant, Center for Gerontology  
Virginia Polytechnic Institute & State University
- 1998-1999** Graduate Student Employee, Adult Day Services  
Virginia Polytechnic Institute & State University
- 1998** Administrative and Marketing Intern, Successful Aging Consulting Services  
Richmond, Virginia
- 1997-1998** Graduate Teachers Assistant, Department of Human Development  
Virginia Polytechnic Institute & State University
- 1996** Program Specialist Intern, Area Agency on Aging  
Cortland, New York

### AWARDS:

- 1998** *Outstanding Master Student of the Year Award*, Virginia Association on Aging
- 1997-1999** Recipient of Department of Human Development Assistantship, Virginia Polytechnic Institute & State University

## **RESEARCH EXPERIENCE:**

***ReachOut Grant, An Initiative on Elder Abuse Education*** ~ assisted principal investigator in editing and producing a videotaped play (on elder abuse) entitled “Lucy is Still Home” to be used by human service agencies, Extension, and university classes. I designed a pre and posttest evaluation of the play to be administered to attendees at the Virginia’s Family First Conference. I also designed a database using SPSS to evaluate all pre and posttest and follow-up scores. An educational unit was also developed to accompany the video.

***Sexual Abuse Research Project*** ~ assisted principal investigator in collecting information and data to be used in a grant proposal. Conducted library research on the subject area and designed a reference list and available resources on the topic.

***Chronic Pain Research Project*** ~ assisted principal investigator in collecting and condensing information in current journal articles that discussed the challenges of chronic pain faced by older adults. I also completed the transcriptions of a Chronic Pain Focus Group tape that was utilized in a related study.

***Family Diversity Project*** ~ assisted researchers in proofreading transcriptions of 45 in-depth interviews with a diverse sample of older Virginians regarding their experiences of family diversity in their own lives and in the lives of their children and grandchildren.

## **PRESENTATION AT A NATIONAL MEETING:**

**Scanlon, J.M. (February 1997). Developing an elder abuse training program for use in senior centers and community settings. Association for Gerontology in Higher Education. Paper selected as one of the Sigma Phi Omega Student Papers.**

## **AUTHORSHIP OF TECHNICAL REPORT:**

Teaster, P.B., Roberto, K.A., Duke, J.O., & Scanlon, J.M. (1999). Elder Abuse: An evaluation of a Reader's Theatre as an Educational Tool. Final report on file at the Center for Gerontology.

**NATIONAL AGING CONFERENCES ATTENDED:**

Virginia Association on Aging (1998)

Virginia Coalition for the Prevention of Elder Abuse (1998)

Gerontological Society on Aging (1997)

Association of Gerontology in Higher Education (1997)

Albany State Society on Aging (1996)

**PROFESSIONAL AFFILIATIONS:**

Virginia Association on Aging

New York State Society on Aging

American Association of Retired Persons

The International Association of Physical Activity, Aging and Sports

American Society on Aging

Beta Sigma Chapter, Sigma Phi Omega – Gerontological Honor Society