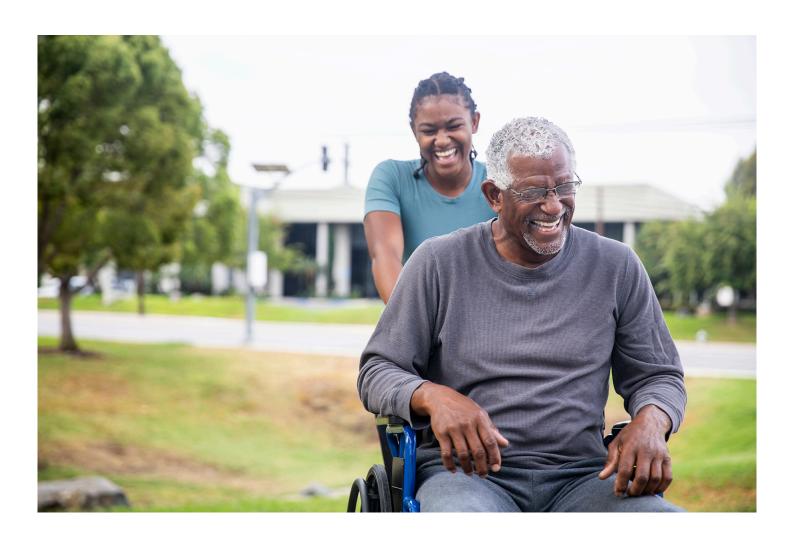
OpenLearn



Physical activity for health and wellbeing in the caring role



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Introduction and overview

Introduction and overview

The focus of this free course, *Physical activity for health and wellbeing in the caring role*, will be on understanding the physical and mental health implications of the caring role and examining how physical activity can be used to promote health and wellbeing for carers. Please note that although there is a focus on data from the United Kingdom, the worldwide picture is not dissimilar and the advice and guidance can be applied regardless of where you live.

The course is made up of two sessions. In the first half of the course, you will consider the physical and psychological/emotional demands of the caring role and explore the potential implications that these demands can have on physical and mental health. To do this you will reflect on the role of a carer – using yourself, someone you know or a given example as a case study. You will consider the provision of care by unpaid family carers, who they are and what their role looks like. In the second half of the course, you will investigate why physical activity can benefit the carer and how, given the demands of the caring role, a carer can find opportunities to be active within their daily routine, both with their care recipient and/or as a respite break.

Both sessions will end with a quiz to check your understanding. By passing the quiz at the end of Session 2 you will also have the opportunity to earn a digital badge as evidence of your learning. You can read more on how to study the course and about badges in the next sections.

After studying this course, you should be able to:

- understand the physical, psychological and emotional demands of the caring role, and the associated implications to physical and mental health
- describe the benefits of participation in regular physical activity on the health and wellbeing of carers
- identify a range of physical activity examples to improve, support and maintain individual health and wellbeing.



Moving around the course

In the 'Summary' at the end of each session, you will find a link to the next session. If at any time you want to return to the start of the course, click on 'Full course description'. From here you can navigate to any part of the course.

It's also good practice, if you access a link from within a course page, to open it in a new window or tab. That way you can easily return to where you've come from without having to use the back button on your browser.



What is a badged course?

While studying *Physical activity for health and wellbeing in the caring role* you have the option to work towards gaining a digital badge.

Badged courses are available on The Open University's <u>OpenLearn</u> website and do not cost anything to study. They differ from Open University courses because you do not receive support from a tutor, but you do get useful feedback from the interactive quizzes. You can share your achievement with friends, family and employers, and on social media. Badges are a great motivation, helping you to reach the end of the course.

How to get a badge

Getting a badge is straightforward! Here's what you have to do:

- · read both sessions of the course
- score 50% or more in the badge guiz in Session 2.

For both the Session 1 and Session 2 quizzes, you can have three attempts at most of the questions (for true or false type questions you usually only get one attempt). If you get the answer right first time you will get more marks than for a correct answer the second or third time. Therefore, please be aware that for the badge quiz at the end of Session 2 it is possible to get all the questions right but not score 50% and be eligible for the badge on that attempt. If one of your answers is incorrect you will often receive helpful feedback and suggestions about how to work out the correct answer.

For the badge quiz, if you're not successful in getting 50% the first time, after 24 hours you can attempt the whole quiz again, and come back as many times as you like.

We hope that as many people as possible will gain an Open University badge – so you should see getting a badge as an opportunity to reflect on what you have learned rather than as a test.

If you need more guidance on getting a badge and what you can do with it, take a look at the <u>OpenLearn FAQs</u>. When you gain your badge you will receive an email to notify you and you will be able to view and manage all your badges in <u>My OpenLearn</u> within 24 hours of completing the criteria to gain a badge.

You can now go to Session 1.

Introduction and overview What is a badged course?





Session 1: Understanding the demands of the caring role

Introduction

In this session you will first consider what is meant by the term 'carer' and what their role might look like. To support your study, and to help you reflect upon the session content, you will be introduced to a number of case studies. The second part of the session will examine the physical and psychological/emotional demands of the caring role and you'll explore the implications that these demands can have on physical and mental health.



It is important to note that many carers don't see themselves as carers, often due to the difficulty of making the distinction between the relationship with the relative/friend and the caring role. But what is meant by the term carer?

A carer is anyone, including children and adults, who looks after a family member, partner or friend who needs help because of their illness, frailty, disability, a mental health problem or an addiction and cannot cope without their support. The care they give is unpaid.

(National Health Service [NHS], n.d)

Using the definition above is helpful, but the phrase 'looks after' can include a variety of roles and responsibilities, ranging from helping with everyday tasks, such as personal care, to emotional support to help with symptoms of mental illness. You will explore this is more detail in the first half of this session.



1 Carers and the demand for care

The global COVID-19 pandemic of 2020 resulted in an unexpected and dramatic rise in the number of carers, with an additional 4.5 million people in the United Kingdom (UK) providing unpaid care, resulting in a total estimated at 13.6 million people (Carers UK, 2020a). Furthermore, 81% of those providing pre-pandemic unpaid care reported an increase in care responsibilities, with the majority unable to take breaks and citing negative impacts on their physical and mental health (Carers UK, 2020b).

Three in every five people in the UK will, at some point in their lives, become an unpaid carer (Carers UK, 2019a; Figure 1). It is important to remember that the carer population is not static (Carers UK, 2019b) and a growing number of people are now experiencing more than one period of care-giving in their lifetime, e.g. caring for a parent and subsequently a spouse (Hirst, 2014).



Figure 1 The chance of providing care in their adult life, for people in the UK (Carers UK, 2019a)

Here you can see the increasing demand for the caring role, but what is it that these carers do? You will examine the role of the carer in the next section.



2 The role of the carer

One of the main determinants of the hours spent caring are the health conditions of those being cared for; over half (58%) have a physical disability, one fifth (20%) have a sensory impairment; 13% have a mental health problem; and 10% have dementia (Carers UK, 2019b). Further analysis of these figures shows that a significant proportion (70%) of the cared-for population are parents/in law or spouses/partners who are over 65 with agerelated physical disabilities or chronic physical and mental health conditions. Common age-related problems include sensory impairments, dementia, and/or mobility issues. Other key health issues or conditions that require carer input amongst younger adults are learning disabilities, mental health problems, a terminal illness such as cancer, alcohol or drug dependency, and diabetes (Carers UK, 2019b; Public Health England, 2021).

The Family Resources Survey (Department for Work and Pensions, DWP, 2020), interviewing over 19,000 families, found that family members were the main recipients of informal care, as illustrated in Figure 2. Note also the percentage of carers who are caring from inside and outside of the household.

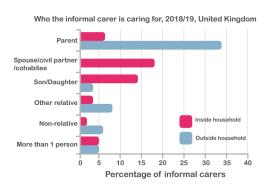


Figure 2 Recipients of informal care (DWP, 2020)

Some of the most common types of care provision offered by carers in England include:

- 82% provide practical help such as preparing meals, doing laundry or shopping.
- 76% keep an eye on the person they care for.
- 68% keep them company.
- 62% take the person they care for out.
- 49% help the person they care for with financial matters.
- 47% help the person they care for deal with care services and benefits.
- 38% help with aspects of personal care.
- 38% provide physical help.

(NHS Information Centre, 2010)

As illustrated in Figure 3, the majority of carers provide up to 19 hours of care per week, but there are over 15% of carers providing care for over 35 hours per week. Census data between 2001 and 2011, identifies the growth in unpaid care was highest in the 50 hours or more of caring (Office of National Statistics, 2013). Furthermore, in 2016-17 data, over a third of carers (35.7%) provided over 100 hours a week of care (Adult Social Care Statistics Team, 2017). A focus on the health and wellbeing of carers needs to be



emphasised as caring for even a small amount of time each week can affect a carer's ability to consider their own health and wellbeing.

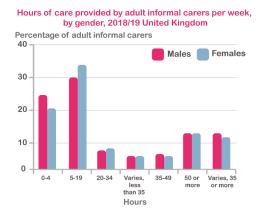


Figure 3 Hours of care provided by adult carers per week, by gender (DWP, 2020)

Activity 1

Allow approximately 10 minutes.

- 1. Reflect on your role, or that of a known carer. Do you/they identify as a carer? What are your/their main tasks? Has this role changed over time?
- 2. Does any of the information presented in these opening sections surprise you?

Provide your answer...

Discussion

It can take up to two years to identify as a carer (NHS, n.d.). As an informal carer you might provide help and support to a spouse, child, parent, sibling, other relative or a friend. The role that you reflected on might have included domestic duties, physical/manual help, aspects of personal care and provision of medication. The level, duration or intensity of such a caring role will depend upon the care needs of the person that you support.

If you are not a carer, you might have been surprised to learn that approximately 3 in 5 adults in the UK will be a carer at some point. This role could be anything from helping with the weekly shop to providing daily personal care.

You will now explore who these carers are.



3 Who are the carers?

In Section 1, you saw how the number of carers in the UK is increasing. It is important to look more closely at the demographics of those who are caring in order to consider their health and wellbeing needs. Table 1 presents data from the Carers Week Research Report in 2020 that captured information of those who were caring before the COVID-19 pandemic and those who found themselves in this new role after the start of the outbreak.

Table 1 Demographics of unpaid carers (Carers UK, 2020a)

	All unpaid carers	Unpaid carers already providing unpaid care before the coronavirus outbreak	Unpaid carers who have started caring since the start of the coronavirus outbreak
Female	58%	57%	59%
Male	42%	43%	41%
Working	53%	48%	62%
Parent or guardian for someone under 18	28%	25%	35%
Aged over 65	20%	23%	14%
Aged 55-64	21%	23%	17%
Aged 45-54	22%	22%	22%
Aged 35-44	17%	16%	21%
Aged 25-34	11%	9%	16%
Aged 18-24	8%	7%	10%

Source: Carers Week/ YouGov polling

You might be surprised to see that 53% of carers were working alongside their caring role. You will also note the clear gender gradient; with almost 60% of carers reported being female. Not only do a larger proportion of women provide care, but women provide more hours of care too: 45% of female carers provide 10 or more hours of care per week, compared to 40% of male carers (Petrie & Kirkup, 2018).

In 2018/2019, over 25% of female carers and over 40% of male carers were in full time employment, but a higher proportion of female carers were in part-time work (Figure 4). There was also over 20% of carers who were retired and those identified as 'economically inactive' (DWP, 2020).



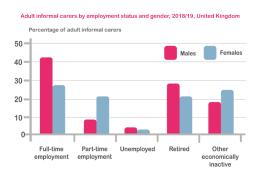


Figure 4 Adult carers employment status and gender (DWP, 2020)

While it is helpful to look at data and statistics to gain an understanding of the caring population, it is of greater importance that individual carer's voices are heard, particularly to ensure that their health and wellbeing needs are met. You will do this in the next section.

3.1 Introducing our case studies

In Activity 2 you will meet three carers – all with differing roles. You will revisit these case studies throughout the remaining sections of Session 1 to help you to understand and apply the content.

Activity 2

Allow approximately 30 minutes.

Please be aware that in this activity – in Video 2 – there is reference made to suicide. You might like to check in with yourself about whether you feel comfortable viewing this material at the moment, or whether you would prefer to come back to this section another time. It is still possible to work through the questions of the activity by watching only Video 1.

Watch the two videos below where you meet Jaiden, a young carer, and two adult carers, who care for their spouse and their child respectively.

As you watch the clips, consider the demographics of each carer, their caring role and the potential impact that this role might have on them.

View at: youtube:6bZ5hneos24



Video 1 A day in the life of Jaiden, a young carer

Video content is not available in this format.

Video 2 Carers' stories



CARERS TRUST

Provide your answer...

Discussion

In the first video you meet Jaiden, a 13 year old, who provides care for his mum. His role includes household chores, getting the groceries, and feeding the cat. You hear that Jaiden provides care for his mum day and night and finds it overwhelming to balance this with school. He is able to take breaks from his caring role through the support of a charity, Honeypot, which you can read more about in the Further Reading section at the end of the course.

In the second video you meet two carers, the first who cares for her husband, the second who cares for her daughter. Both roles differ in terms of the care required but both women have had to change their lives in order to provide the care required. The carers talk of the significant challenges they have faced but both have successfully accessed support from Carers Trust (please see the Further Reading section at the end of the course for more detail on this organisation).

You will refer back to these case studies as you move through the two sessions.

You will now examine the demands of the caring role and the potential impact on health and wellbeing.



4 The physical demands of the caring role

As outlined in the previous sections, a carer provides help and support to a relative or friend with duties ranging from the delivery of domestic chores to physical/manual help and different aspects of personal care. The level or intensity of such duties will depend upon the care needs of the person being supported and can have implications for a carer's health and wellbeing (Milne & Larkin, 2015).



Caring for a relative or friend can be incredibly rewarding but, as you have seen, it can be a significant time commitment. This can result in additional demands being placed on a carer's physical and emotional capacities, as you saw with the two adult carer case studies in Activity 2. There is extensive evidence that caring for others can have a major impact on a person's health and wellbeing, in addition to social life, employment and finances (Larkin *et al.*, 2019). Indeed, if you are a carer, you are more likely to be in poor health – both physically and mentally – than people without caring responsibilities (Carers UK, 2019c). Research identified 61% of carers said their physical health had worsened as a result of caring, with a leading concern regarding health and wellbeing being reported as not getting enough sleep (Carers UK, 2018).

Research tells us that caring can impact on sleep quality and duration (McCann *et al.*, 2015; Wade *et al.*, 2020). BUPA (2015) offer

guidance on how to achieve a good night's sleep and suggest using a sleep diary to support making improvements to sleep patterns. A link to a sleep diary is available in the Further Reading section at the end of the course.

In the next section you will consider the physical demands of the caring role in more detail.

4.1 The impact of caring on physical health

Read the quote from Martin, a carer, in Figure 5.



"I know that the role of the immune system is to protect the body from illness and allergies by providing a line of defence. However, with the stressors associated with full time caring, I was more susceptible to infection and illness, as I found out when I contracted Scarlet Fever.

This severely reduced my capacity to provide care, resulting in the extremely reluctant decision of Mum being moved to respite while I recovered. I still feel guilt from finding myself in that position."

(Martin, carer)

Figure 5 Martin reflects on the impact of caring on his health

In the quote, Martin highlights the impact the stress of caring had on his immune system, making him vulnerable to contracting illness. Carers also report many other physical health symptoms such as those illustrated in Figure 6.



Figure 6 Physical health symptoms reported by carers, associated with their caring role (Sandford, Johnson, & Townsend-Rocchiccioli, 2005; National Alliance for Caring, 2012; Hayes, Chapman, Young, and Rittman, 2009; Hartke, King, Heinemann, and Semik, 2006)

Figure 6 indicates that musculoskeletal health (e.g. muscle strains, backache) is particularly prevalent amongst carers. It is likely that caring responsibilities such as repositioning, bathing and dressing can increase the potential risk of this type of musculoskeletal injury. Research suggests that there are three key factors that influence the musculoskeletal health of a carer: the person – the characteristics of the carer and the care recipient; the environment and the physical requirements of the caring activities (Darragh *et al.*, 2015; Figure 7).



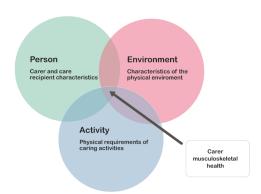


Figure 7 Factors influencing the musculoskeletal health of carers (adapted from Darragh *et al.*, 2015, p.748)

Research by Darragh *et al.* (2015), which examined the health of 46 carers of adults with a physical disability, reported that approximately 94% of carers reported musculoskeletal discomfort in at least one body part during the preceding four weeks and 79% perceived that caring either caused or made their symptoms worse. Eighty-two percent of the carers experienced musculoskeletal discomfort in more than one body part in the preceding four weeks, with the lower back being the site of most discomfort, and over half indicated that their symptoms affected work (54.1%), caring (56.4%), and other life activities (66.7%).

Activity 3

Allow approximately 20 minutes.

If you are a carer, can you relate to any of the symptoms discussed? Can you relate to the injuries and sites of musculoskeletal discomfort? If so, what has been the impact on your caring role, and your life outside of this role?

If you are not a carer, consider how these symptoms could impact on the carers that you were introduced to in Activity 2.

Provide your answer...

Discussion

If you are a carer you will likely recognise some of the symptoms discussed earlier such as backache and fatigue, either in yourself or carers you know, and will understand the impact these can have. Alternatively, you might have reflected on how these symptoms could impact on the case studies from Activity 2 and how the carers might have been affected. If you have experienced back pain, Carers UK has a useful resource, which is listed in the Further reading section of this course that might be of interest, and it might be that you could seek support on lifting/repositioning etc.

Having considered the physical demands of the caring role, you will now examine the psychological and emotional demands.



5 The psychological and emotional demands of the caring role

To examine the psychological and emotional demands of the caring role on mental health, it is important to examine the concept of mental health, which is often less well understood than physical health. In Activity 4 you are presented with a brief overview of mental health and are asked to reflect on how the caring role might impact on this.



Activity 4

Allow approximately 20 minutes.

Watch Video 3 and reflect on the information presented in this session so far. Consider why the caring role might impact on the mental health of carers.

Video content is not available in this format.

Video 3 What is mental health?





Provide your answer...

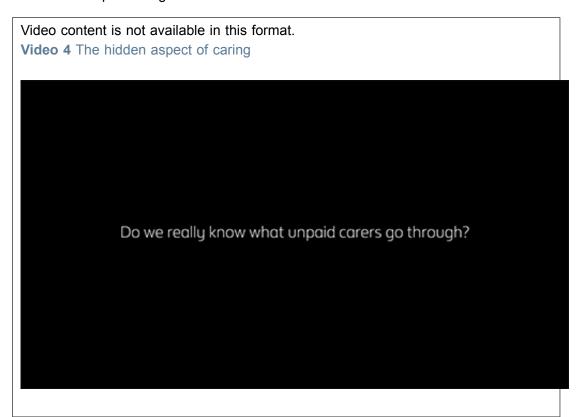
Discussion

The video shows mental health as a continuum, with one end of the continuum being where someone is thriving and the other end of the continuum being where someone experiences mental ill health, for example depression. You are shown that mental health can be affected by several factors, including stressors, which can impact where someone might be on the continuum on a given day. This, for example, might be where a carer's mental health is impacted by the demands of the caring role. You will explore this further in the next section.

You will now consider the challenges of the caring role and reflect how these might impact on the mental health of a carer.

5.1 Challenges of the caring role

In the introduction to this session, it was highlighted that often carers do not identify as being a carer. Video 4 illustrates this 'hidden' aspect of caring and also offers an important view of the caring role, in that often what is seen from the outside is not a reflection of what the carer is experiencing.



Examining the challenges faced by carers in more detail, The Carers Week Research Report (Carers UK, 2020a) – reporting on survey findings from of over 4500 carers over the age of 18 – found that carers face the following difficulties:

- managing the stress and responsibility (71%)
- the negative impacts on their physical and mental health (70%)



- not being able to take time away from caring (66%)
- the impact it has on other personal relationships (e.g. with family, friends, partners etc.) (63%)
- the negative impact it has on their ability to do paid work (55%)
- the financial impact of the additional care costs (e.g. home adaptations) (53%)
- not having anyone to talk to about the challenges of caring (50%).

Whilst the majority of carers are adults, the Children's Society (2021) reports that there are approximately 800,000 young carers and they may face different challenges due to their age. It is important to remember that each carer will face varying challenges and enjoy differing aspects of their caring role, so it is crucial that each is taken as an individual when considering their needs.

Activity 5

Allow approximately 20 minutes.

Reflect back to Jaiden's case study (Activity 2) and watch Video 5. As you do so, consider the challenges faced by young carers. How are the challenges similar or different to those identified by the adult carers in the bulleted list above?

View at: youtube:YaF8cHCkiXo



Video 5 What is a young carer?

Provide your answer...

Discussion

You might have reflected that young carers experience similar challenges, and fulfilment, to adult carers, including not being able to take time away from the caring role and the impact on relationships, such as friends. One difference between young and adult carers might be the impact on their ability to do paid work, although one of the young carers talked about the impact on her school work, which is perhaps a direct comparison of role conflict.

You have examined some of the challenges faced by carers but what are the impact of these on their mental health? In the final section of Session 1 you will explore the implications of these challenges on mental health and hear from one of the UK's leading researchers on caring, Professor Mary Larkin.



6 Implications of the caring role on mental health

Data from Carers UK in 2019 and 2020 paints a concerning picture for the mental health of carers, which is perhaps not a surprise when you consider the list of challenges outlined in the previous section. Carers UK (2020a) identified that 70% of carers report negative effects on their physical and mental health, with carers rating their levels of anxiety at an average of 5.4 out of 10 compared with a population average of 2.9 out of 10 (Carers UK, 2019c). Indeed, carers looking after disabled children under the age of 18 years reported significantly poorer mental health, with 36% describing their mental health as bad or very bad (Carers UK, 2019d).



In the final activity in this session, you hear from Professor Mary Larkin who discusses the demands of caring and why these might make carers vulnerable to poor mental health.

Activity 6

Allow approximately 25 minutes.

First, listen to Audio 1 where Mary Larkin, Professor of Care, Carers and Caring from The Open University, discusses the factors that can impact on the mental health of carers, and what research tells us about it.

Audio content is not available in this format.



Audio 1

Can you relate to any of the factors related to caring that are discussed? If you are not a carer, can you identify any of the factors that might impact on the carers from Activity 2?

Provide your answer...



Discussion

Professor Larkin discusses a number of factors that can impact on a carer's mental health including those shown in Figure 8. You might have personally related to several of these, or have identified where there was the potential for them.



Figure 8 Factors impacting on a carer's mental health

Now listen to Audio 2 where Professor Larkin explains what could be done to support wellbeing in the caring role. As you listen, reflect on the content and consider how the mental health of carers, such as the case studies in Activity 2, can be supported.

Audio content is not available in this format.



Audio 2

Provide your answer...

Discussion

Professor Larkin made several suggestions that could support the three carers from Activity 2 including:

- joining a carer group to share experiences
- taking a break from caring even if for a couple of hours
- accessing online support from caring organisations
- · talking to family and friends
- using interventions such as psychotherapy, counselling and mindfulness
- accessing specific support where applicable, such as the Strategies for Relatives for carers of those with dementia (see the Further reading at the end of the course for the link to this initiative).
- developing resilience.

One key feature of support for carers was the importance of carers having a 'package of strategies' that works for them.

Professor Larkin highlighted the use of physical activity as one mechanism to promote health and wellbeing in the caring role. This will be the focus of Session 2.



Much research and associated narrative has focused on the negative consequences of caring. It is important, however, to consider these views alongside the co-existing satisfactions and intrinsic benefits of caring (Larkin *et al.*, 2019). For example, the relationship can be beneficial to both parties, the carer and the care recipient, by providing an opportunity to celebrate the small things, resolve any past conflicts, develop personal strength and experience the cared person's life more fully, by engaging with them on a deeper level than before (Hogstel, Curry & Walker, 2005).



7 Session 1 quiz

You can now check what you've learned this session by taking the end-of-session quiz. Open the quiz in a new tab or window by holding down Ctrl (or Cmd on a Mac) when you click on the link. Return here when you have finished.

Session 1 quiz



8 Summary of Session 1

Having completed this first session 'Understanding the demands of the caring role' you should now have more of an understanding of the duties provided by carers, together with the potential impact of caring on physical and mental health. Furthermore, you have considered how these factors might impact upon the caring role, and on the carer's life more widely.

In Session 2, you will explore how physical activity can provide the carer with improved physical and mental health as an effective, individualised and flexible strategy to support carers in their role.

You can now go to Session 2 when you are ready.





Session 2: Using physical activity to support the caring role

Introduction

In this session you will investigate why physical activity can offer benefits to the health and wellbeing of carers and how, given the demands of the caring role, a carer may find opportunities to be active within their daily routine. As with Session 1, you will reflect on a case study to support your understanding of the content.

Before you examine why physical activity is important, however, you should first understand what it is. The World Health Organisation (WHO, 2020) posits that physical activity refers to all movement including during leisure time, for transport to get to and from places, or as part of a person's work. To break this down further, Biddle *et al.* (2021, p.20) cite the seminal work of Caspersen *et al.* (1985) who define physical activity in terms of three elements:

- movement of the body produced by the skeletal muscles
- resulting energy expenditure, which varies from low to high
- a positive correlation with physical fitness.

It is important to note that physical activity and exercise are not quite the same thing. Unlike occupational and household physical activity, exercise is a form of leisure physical activity that is undertaken to achieve a particular objective, such as improved fitness and improved appearance (Lox *et al.*, 2014). The two constructs often overlap and in the resources that you examine in the session, you will see both referred to.

Having considered the key terms, you will examine the importance of being physically active.



1 Why should you be physically active?

The 5 Ways to Wellbeing (Figure 1) are a set of evidence-based public mental health messages aimed at improving the mental health and wellbeing of the whole population. Being active is one of the five messages, with guidance to enjoy physical activity that is suited to individual needs, such as mobility and fitness, given.



Figure 1 Five Ways to Wellbeing

When looking across the five messages, it is possible to see how being active can also play a role in the other factors that contribute to wellbeing, such as connecting with those around you. You will notice these crossovers as you work through the session.

But why be active? Lox et al. (2014, p. 9) presents a list of common benefits of physical activity:

- lowers morbidity and mortality rates
- reduces the risk of developing diabetes, hypertension, colon cancer and heart disease
- helps reduce blood pressure in those with hypertension
- reduces feelings of depression, anxiety, and general negative mood
- enhances general positive mood
- improves body images, self-esteem, and self-concept



- helps control weight
- enhances cognitive function
- helps build and maintain healthy bones, muscles and joints
- enhances ability to perform activities of daily living
- provides opportunities to develop social contacts, relationships, and support groups.

Of importance to carers is that many of the listed benefits can address and support the physical and mental health implications of the caring role discussed in Session 1.

Furthermore, evidence suggests that some carers live with multiple long-term conditions and will thus have their own health needs (Public Health England, 2021). Physical activity can be beneficial for those with chronic health conditions, such as cardiovascular and pulmonary disease (Emery, Long & Olson, 2013) and severe mental illness, such as schizophrenia (Faulkner *et al.*, 2013). Indeed, Biddle *et al.* (2021, p.10) argues that there are few lifestyle choices that can 'both prevent and help so many ailments'.

This is explored further in Activity 1 where you examine the benefits of gardening as a form of therapeutic physical activity for carers that can be done at home or in the community, such as the Live Well initiative in Barnsley (see Further Reading for more information).

Activity 1

Allow approximately 30 minutes.

Read <u>'The health benefits of gardening' article</u> (Westcott, 2019) that considers the benefits of gardening for health and for those with existing health conditions. As you read, identify how gardening could be used to reduce some of the <u>physical</u> and <u>mental health implications of caring</u>, which you considered in Session 1, and support carers in their role.

Provide your answer...

Discussion

You might have been surprised by just how many benefits there are to gardening, both to physical and mental health. According to the article, research suggests that those who garden experience less fatigue and stress, two symptoms commonly found in carers. Furthermore, gardening can boost physical fitness, including building strength. This could support the carer in the physical aspects of their caring role.

In the next section you will explore the benefits of physical activity to both physical and mental health in more detail.



2 The benefits of physical activity to physical and mental health

In this section you will complete two activities to gain a greater understanding of the benefits of physical activity. In Activity 2 you will examine what happens in the body when you are physically active that allows you to reap the benefits of participation. In Activity 3 you will hear from Dr Florence Kinnafick, an exercise psychologist, who explains the benefits of physical activity to mental health in more detail.

Activity 2

Allow approximately 20 minutes.

You have seen that there are a number of benefits of physical activity, but what is it that happens in the body for this to occur? Watch Video 1, which provides a useful overview and then complete the sentences below, using the words provided. (You can type into the gap or copy and paste from the list of words.)

Video content is not available in this format.

Video 1 What happens inside your body when you exercise?



Missing words: anxiety • capillaries • endorphins • increases • insulin • lowering • memory • muscle • oxygen • positive • weight

Interactive content is not available in this format.





Discussion

In addition to the benefits outlined in the video, regular physical activity throughout life can reduce the risk of many musculoskeletal conditions, including arthritis, back pain, neck pain, falls and fractures (Fenton, 2016). This addresses the reported implications of caring for adults with physical disabilities discussed in Session 1.

Activity 3

Allow approximately 20 minutes.

In the following interview Dr Florence Kinnafick, Senior Lecturer in Psychology from Loughborough University, discusses the benefits of physical activity to mental health. Listen to Audio 1 and note down the key benefits of physical activity to mental health. Reflect on how these are of particular importance to carers, given the mental health implications from the caring role discussed in Session 1.

Audio content is not available in this format.



Audio 1

Provide your answer...

Discussion

One point that Dr Kinnafick emphasised was that there is not a simple linear relationship between physical activity and exercise and its benefits to mental health, i.e. taking part in physical activity makes you feel better. She describes a more complex relationship with a number of mediating factors that we need to consider, such as the type and context of the physical activity participated in.

In terms of benefits of physical activity and exercise to mental health, Dr Kinnafick discussed the following:

- 1. Reduced stress and anxiety whether as a release or a period of time during which the individual is not thinking about their worries and so can relax.
- 2. Improved energy levels (and reduced fatigue) helping to improve symptoms linked to depression.
- 3. Improved happiness.
- 4. Improved sleep.
- 5. Reduced loneliness if exercising with others.
- 6. Improved body image and self-perception.

You might have reflected that, through these benefits, physical activity and exercise could offer carers relief to the symptoms associated with the caring role, such as poor sleep and increased stress and anxiety.



Now listen to Audio 2 and reflect on the amount of physical activity that carers might need to participate in to access the benefits discussed above.

Audio content is not available in this format.



Audio 2

Provide your answer...

Discussion

While Dr Kinnafick noted that there were no current guidelines for the required amount of physical activity to offer optimum benefits to mental health, she discussed that due to the likely inactivity of those with poor mental health, any increase in activity levels will offer some benefit. You might recall the information from Session 1 where evidence for the higher incidence of poor mental health in the caring population was presented. As such, you might have reflected that carers, a population with poor mental health and thus the potential to be more sedentary, would gain from even small amounts of physical activity to access the benefits listed above.

In the next section, you will consider in more detail exactly how much physical activity is needed to achieve the benefits Dr Florence Kinnafick mentions.

2.1 How much physical activity do you need?

Figure 2 offers a useful overview of the benefits of being physically active for different age groups and presents guidelines on the recommended amount of physical activity per week to achieve optimum health (UK Chief Medical Officers' Physical Activity Guidelines, 2019). Recommendations include 60 minutes of physical activity per day for children between 5 and 18 years old, and 150 minutes per week for adults and older adults. There are also similar infographics supporting physical activity for disabled adults, and during and after pregnancy, which you can find in the Further reading section at the end of this session.



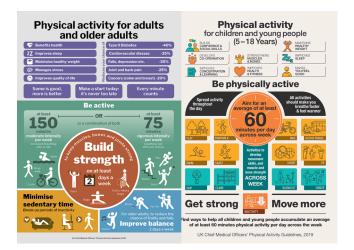


Figure 2 Physical activity guidelines for adults and older adults, and for children and young people (5–18 years)

Now you have explored the benefits of physical activity to physical and mental health, and considered how much physical activity is required, you will examine physical activity in the caring role.



3 Physical activity in the caring role

Despite the known benefits of physical activity to physical and mental health, in the 12 months to November 2019, almost 1 in 4 women and 1 in 5 men were classified as 'inactive' (i.e. being physically active for less than 30 minutes on average per week) in the UK (NHS Digital, 2020). Furthermore, physical inactivity has been cited as the fourth largest cause of disease and disability in the UK (Public Health England, 2014).

At the time of writing, no research reports on the actual prevalence of physical activity across the caring population in the UK (Horne *et al.*, 2021), although 54% of carers report to have reduced the amount of exercise they do because of caring (Carers UK, 2017). Data examining carers over the age of 55 years indicates a concerning picture with a clear difference evident between the physical activity levels of the caring and non-caring population in this age group (Carers UK, 2020; Figure 3).

Activity levels by caring status

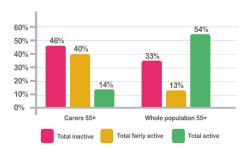


Figure 3 Comparative physical activity data of over 55-year-old carers to the whole population (Carers UK, 2020)

It should be highlighted that the inactivity levels shown in Figure 3 are not the result of carers not wanting to be physically active. 81% of carers of all ages report that they are not able to do as much physical activity as they would like (Carers UK, 2019). However, given the physical and mental health impacts of caring discussed in Session 1, Activity 2 and the proven benefits of physical activity, it is particularly important for carers to be physically active, making it vital to explore any potential barriers to this.

Activity 4

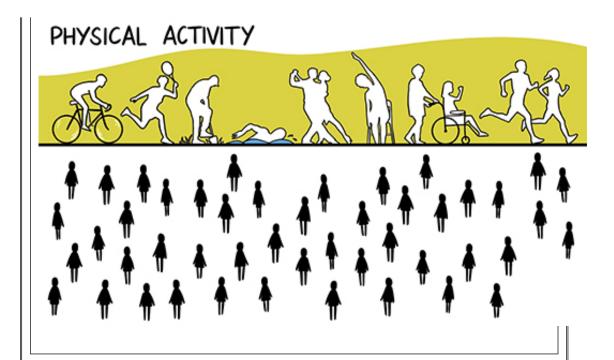
Allow approximately 20 minutes.

Watch Video 2 below. As you watch, consider your own physical activity levels and the correlates that might influence this. If you are a carer, reflect on any barriers that you face. If you are not a carer, think back to the case studies in Session 1 – what might be the barriers to physical activity that they face?

Video content is not available in this format.

Video 2





Provide your answer...

Discussion

When reflecting on your own physical activity levels and influencing correlates, you might have identified a number of barriers that you, or one of the case study carers, might face. For example, when considering social correlates, it might be that those around you (or the carer) might not be physically active which might not encourage you (or the carer) to be physically active.

Dr Jo Horne (who narrated Video 2) and colleagues (2021) reviewed the research literature to examine the barriers and facilitators to physical activity of carers based in the UK. The findings of the review highlighted the following barriers:

- increasing age
- not wanting to leave the caree alone
- the caree being unable to take part in activities
- health conditions
- fatigue
- lack of time
- difficulties in changing the routine for the caree.

You might have identified some of the barriers on this list when reflecting on your own physical activity levels or that of the case studies from Activity 2 in Session 1.

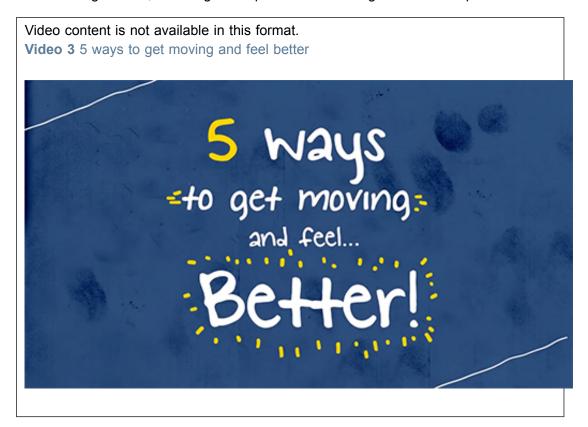
The facilitators to physical activity in carers found in the research are discussed in the next section.

Despite the challenges that a carer could face to be physically active, the evidence of the benefits for being active is strong. The next section looks at considerations for carers to become more physically active.



4 How to become a physically active carer

As you have seen, physical inactivity is a national issue, with evidence suggesting that carers are less active than they would like to be. As you saw in Session 1, this increases their risk of poor mental and physical health outcomes. What then can be done to help carers be more physically active? The video below from mental health charity Mind offers some initial guidance, including the importance of starting with small steps.



The NHS (2019a) further advocates the use of low-impact exercises and suggests yoga, walking, swimming and many more (see the Further reading section for a link to their guidance). Sport England's Join the Movement campaign also offers guidance on how to get started with exercise. Click on each button in the Figure 4 interactive to learn more.

Interactive content is not available in this format.



Figure 4 Sport England's Join the Movement campaign

What can help carers take part in physical activity? Horne *et al.* (2021), in an examination of facilitators to physical activity in carers in the UK, identified that carers are more likely to engage in physical activity if they have an appreciation of the benefits of engaging in exercise, have previously participated in activities, utilise group activities with similar people and have some free time.

Time is a key factor for carers, with Horne et al. (2021) identifying too little time as a barrier, and sufficient time as a facilitator. However, evidence suggests that breaking the



daily recommended minutes of physical activity into bitesize pieces was also of benefit to health, as you will see in Activity 5.

Activity 5

Allow approximately 20 minutes.

Read this <u>article</u> from the BBC programme 'Trust me I'm a Doctor' and watch the embedded video. Reflect on the small study findings and consider how this might support you, or our case study carers to complete 30 minutes of physical activity a day. Open the article in a new tab or window by holding down Ctrl (or Cmd on a Mac) when you click on the link. Return here when you have finished.

Provide your answer...

Discussion

The study found that 5-minute 'snacking' of physical activity was as beneficial as completing a 30-minute session for the small sample used. You might have reflected that having this choice of approach to physical activity (either a block or a snack) is helpful to you and the case study carers. You might also have considered that the 5-minute snacking might be more manageable for carers who are restricted in their free time or have the opportunity to do this at work.

One of the study participants in the research suggested that the 5-minute snacking approach to physical activity would suit her during the working day. To facilitate this you might, for example, reduce sitting time at the desk, take a short walk at lunchtime, park further away in the car park or get off at an earlier bus stop. Guidance on how to exercise during the workday can be found in the Further reading section at the end of this session.

4.1 Martin's story

In this section you will consider the case study of Martin, co-author of this course, and hear about his experiences of being a carer. Martin's story – as a lifelong exerciser, sport science and public health graduate and qualified Physical Education (PE) teacher – offers a unique opportunity to understand a carer's relationship with physical activity.

Activity 6

Allow approximately 20 minutes.

Listen to Audio 3 in which Martin discusses how his relationship with physical activity changed once he became a carer to his mum. Does Martin's experience resonate with you?

Audio content is not available in this format.



Audio 3



Discussion

You will have heard Martin describing how physical activity was a significant part of his life prior to his caring role. He considered his relationship with physical activity a positive one and chose a career in the field, in addition to taking part in sport and exercise in his leisure time. He reflected on a noteworthy shift in his priorities following his mum's stroke, when his relationship with physical activity became secondary to his caring role.

If you are a carer, or if you reflected on carers that you know, you might have seen how your (or their) priorities changed upon being a carer. This might be with respect to physical activity and/or other areas of the carer's life.

Now listen to Audio 4. What were the main barriers that Martin faced that impacted on his relationship with physical activity?

Audio content is not available in this format.



Audio 4

Discussion

The main barriers Martin faced to being physically active were:

- Shifting of priorities away from himself and fully focused on his mum.
- Lack of motivation and not having the right mindset.
- Levels of fatigue and lack of time.

You might recognise these barriers from Activity 4 when you examined research by Horne *et al.* (2021) and considered your own relationship with physical activity.

Now listen to Audio 5. What advice does Martin give to carers looking to become more physically active?

Audio content is not available in this format.



Audio 5

Discussion

Martin acknowledged that 'one size doesn't fit all' and that the demands on carers, and so their ability to be physically active, would be dependent on the demands of their care recipient. Despite these known challenges, Martin urged carers to listen to their bodies and to champion their own health and wellbeing. He encouraged carers to seek friends and family, or to find the monies, to support them to take respite care so that they could be active on a regular basis. When choosing an activity, Martin emphasised the need to find one that was enjoyable for the carers, and if possible to return to a previously enjoyed activity. He listed walking, swimming, cycling and gardening as suggestions.

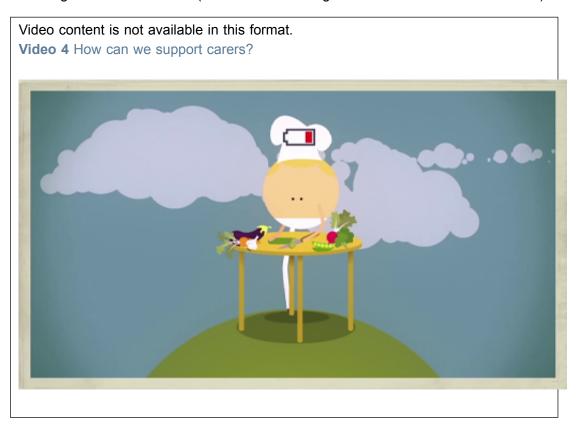


Martin was able to be active as respite from his caring role, but also with his mum which she enjoyed. With this in mind, the next two sections look at these two options for carers: first using physical activity as respite and secondly being active with their care recipient.



5 Physical activity as respite

As outlined in Session 1, caring for someone can be relentless and exhausting so taking a break, or using respite care, is vital for a carer's wellbeing (Carers UK, 2021). Video 4 uses a helpful analogy to allow carers to see why it is so important to prioritise their own wellbeing and value self-care (see Further Reading for more information on self-care).



As highlighted in the video, and from what you have learnt in this session so far, physical activity can provide self-care opportunities for carers with both physical and mental health benefits. This time away for adult carers can be spent alone, or with company, and be used to enjoy being physically active through activities such as gardening, going for a walk, or using the facilities in a local park, all of which can be enjoyed alongside the benefits of being outdoors (Methley *et al.*, 2020). As well as the physical and mental health benefits, these are all activities that can be completed at no cost. The NHS (2019b) provides guidance to 'get fit for free', which you can access via the link given in Further reading.





For young carers, being physically active independently could be more challenging and they might need to be part of organised, supervised activities. Indeed, carers of any age might prefer to be part of a social group, such as a group yoga class, for their active respite, as evidence highlights that carers can often become isolated (Carers UK, 2019; Carers Trust, 2021). You might recall that being active and connecting with others combines two of the Five Ways of Wellbeing mentioned in Section 1.

There are, however, carers who might feel less comfortable leaving their care recipient. In addition, Madruga *et al.* (2020) argues that there can be access issues for carers, particularly for those in rural areas, and identifies that home-based exercises can be more convenient for the caring population. One outcome of the 2020 COVID-19 pandemic, and the resulting movement restrictions put in place, was a shift to individuals seeking physical activity and exercise opportunities at home and in an online format. This has resulted in an increase in home-based exercise options becoming available and organisations such as Sport England have provided guidance (see Further Reading). It is important to remember, however, that it is the motivation to be active that must also be supported, as you will explore in Activity 7.

Activity 7

Allow approximately 20 minutes.

Listen to the short audio clip of the BBC 5Live radio interview with Candice Lingam-Willgoss, Senior Lecturer in Sport and Fitness at The Open University, as she talks about exercising during the pandemic and how we might be facilitated to be active. As you listen, consider how what was recommended during the winter lockdown of January 2021 might be applied to carers.

Audio content is not available in this format.



Audio 6

Provide your answer...

Discussion

Candice offers her top tips to get people active and recommends individuals can be more motivated to exercise if they create an exercise space, have the right kit and listen to music, among other top tips. Taking part in a variety of activities was



suggested to avoid boredom and perhaps the key aspect that was emphasised was setting goals (see Further Reading for more information).

You might have reflected that setting physical activity goals can be helpful to carers to support their motivation to be active. Candice's comment that physical activity 'always makes you feel better' might also have interested you. In the previous sections, you considered the barriers that carers face to being physically active, but with the knowledge that in spite of fatigue and tiredness, physical activity will help carers to feel better, it might be the boost that you need.

You will now examine how a carer can be active with their care recipient.



6 Being physically active with a care recipient



In Session 1 Video 2, you saw the younger adult carer exercising outdoors with her two daughters. Indeed, being active with family and care recipients is an effective way that a carer can incorporate physical activity into their daily and weekly routines. This can serve to alleviate the negative feelings of guilt reported by carers taking a break (Britton, 2021), while offering both the carer and their care recipient opportunities to benefit their health and wellbeing.

It is, however, important to take an individualised approach when seeking to increase physical activity levels of carers and their care recipients as a joint venture. Research examining exercise interventions for individuals with Alzheimer's disease and their spousal carers recommended that health professionals should work with them both to set goals and targets that fit with routines, preferred forms of exercise and functional activities, such as walking, shopping, housework and gardening (Malthouse & Fox, 2014). Interestingly, research by Horne *et al.* (under review) observed the engagement of individuals with dementia and their carers in a group walking programme and noted that the structure allowed some respite for the carers during the sessions. The research highlighted that the programme allowed the carers to chat with volunteers, while their care recipients were taking part in activities. In Activity 8 you will see a further example of an activity session where a care recipient and their carer can be active and seek the company of others.

Activity 8

Allow approximately 15 minutes.

Watch Video 5, which introduces you to the Memory Lane Café. Consider the benefits to both the carer and care recipient from attending such sessions.

View at: youtube:Id23jn7k26E



Video 5



Provide your answer...

Discussion

The video shows how Café organisers opened up the sessions to not only individuals with dementia and their carers, but to others too, to create an inclusive environment. You might have reflected on the social benefits for the attendees – both the carers and care recipients – in addition to the physical and mental health benefits from taking part in physical activities such as dance.



7 End-of-course quiz

It is now time to take the end-of-course quiz which will enable you to earn a digital badge. Remember, if you're not successful the first time, you can attempt the quiz again in 24 hours.

Open the quiz in a new tab or window by holding down Ctrl (or Cmd on a Mac) when you click on the link. Return here when you have finished.

End-of-course quiz



8 Summary of Session 2

In this course, by examining the demands, both physically and mentally, of the caring role, it is hoped that you now have a greater appreciation of how physical activity can have a positive influence on the health and wellbeing of carers. By reflecting on case studies, and on your own experiences or that of carers you know, you will have gained an understanding of how physical activity, even in small amounts, both as respite for carers and alongside their care recipients, can have benefits to physical and mental health to those involved.

To recap on the learning outcomes, you should now be able to:

- understand the physical, psychological and emotional demands of the caring role, and the associated implications to physical and mental health
- describe the benefits of participation in regular physical activity on the health and wellbeing of carers
- identify a range of physical activity examples to improve, support and maintain individual health and wellbeing.



Further reading

Charities and organisations supporting carers

In Session 1 you met three carers who were able to access support from the charities Honeypot and Carers Trust. Find out more about each at the links below.

- Honeypot a children's charity supporting young carers by providing respite breaks and outreach support.
- <u>Carers Trust</u> a UK-based charity which works to raise awareness of unpaid carers by campaigning and influencing change.

Managing the demands of the caring role

There is lots of advice and guidance available online on how to manage the demands of being a carer. Some of the support, which was referred to in the course, is listed below.

- <u>Daily sleep diary and rules for improved sleep hygiene</u> tips on how to improve sleep patterns
- Caring for your back advice on how to look after your back as a carer
- Five tips on how to plan new self-care routines information on self-care, what is it and how can you introduce it into your life?
- START (STrAtegies for RelaTives) a set of manuals supporting the development of coping strategies for carers of people with dementia.

Physical activity guidance and support

In Session 2 several organisations were highlighted as offering support and guidance for physical activity participation. The links listed below offer further detail on this:

- Physical activity guidelines (infographics) for:
 - a. disabled adults,
 - b. pregnant women and,
 - c. to support being physically active after childbirth.
- Information and ideas for physical activity participation:
 - Easy exercise suggestions from the NHS ideas to get started with low level, more gentle forms of physical activity
 - b. <u>Being active during your working hours</u>- information on how, and why, you can incorporate physical activity into the working day
 - c. <u>Physical activity with other carers</u> an example of a carers' community gardening initiative
 - d. Get fit for free suggestions from the NHS on fee physical activity options



- Accessing physical activity from your home a selection of online exercise options from Sport England
- f. Setting open goals for being physically active try a different way of setting goals to help you to stay engaged in physical activity

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