Physiotherapy

Reducing the Risk of Inactivity among Office Workers: A Round Table Discussion – Part 2

Dr. Laran Chetty^{1*}

¹Senior Physiotherapist, Occupational Health and Wellbeing Centre, National Health Service, London, United Kingdom

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*Corresponding author: Dr. Laran Chetty

Senior Physiotherapist, Occupational Health and Wellbeing Centre, National Health Service, London, United Kingdom

Abstract Original Research Article

Background: Walking is a popular leisure activity for maintaining the physical and psychological health for all age groups. There is a paucity of published research exploring the views and experiences of office workers towards walking schemes at work. **Objective:** The purpose of this project was therefore to explore the views and experiences of officer workers with a workday steps programme at a North London National Health Service Foundation Trust in the United Kingdom. **Materials and Methods:** All office staff that were part of the workday steps programme were invited by email to take part in a Round Table discussion to explore their views and experiences with the programme. A reminder email was sent two weeks later to those that did not respond. **Results:** Most officer workers reported that the workday steps programme also contributed to their overall health and wellbeing. **Conclusion:** The Round Table discussion highlighted that the weekly health coaching and self-monitoring sessions contributed towards increasing workday steps and provided strategies to overcome barriers.

Keywords: Inactivity, Risk, Office Workers, Occupational Health, Health Promotion, Round Table Discussion.

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INTRODUCTION

Walking is the most popular leisure activity in the United Kingdom (UK) and is considered to be an appropriate exercise for maintaining the physical and psychological health for all age groups [1]. It is a fundamental part of human development and is also felt to be highly therapeutic by providing a range of physiological and psychological health benefits [2]. These benefits are particularly important as the working population gets older and their range of leisure pursuits declines. As a population people tend to walk less than they used to and more than half of the adults in England are not meeting the minimum recommendations for physical activity [3]. This is exacerbated by the fact that many healthy walking initiatives have failed because of its passive approach towards tackling inactivity [4]. This is particularly the case for office workers, whose relative lack of engagement with walking is likely to be influenced by a limited understanding of the negative impacts of prolonged sitting such as an increased risk of obesity, some cancers and diabetes [5]. Given the undoubted benefits of walking, this project is the second part of the occupational health promotion project in the National Health Service in reducing the risk of inactivity

among office workers, with the first part being previously reported [6]. There is a paucity of published research exploring the views and experiences of office workers towards walking schemes at work. The purpose of this project was therefore to explore the views and experiences of officer workers with a workday steps programme at a North London National Health Service Foundation Trust in the United Kingdom.

MATERIALS AND METHODS

All office staff that were part of the workday steps programme were invited by email to take part in a Round Table discussion to explore their views and experiences with the programme. A reminder email was sent two weeks later to those that did not respond. A Round Table discussion is a feature that uses a conversational round table format to address select issues important to the occupational health professional. The aim of the discussion is to present views, experiences, opinions and ideas on the topic and specific strategies to solve any issues. The goal of the discussion is to present topical information in a highly animated and interaction manner [7]. The Round Table discussion undertaken as part of this project involved asking office workers about

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the factors that motivated or hindered their participation in the programme, the factors that contributed towards making the programme sustainable and their perceived influence of the programme on health and wellbeing. Officer workers were also asked to contribute their views and experiences regarding the barriers and facilitators of the programme and its impact on reducing their risk of inactivity in the workplace. This occupational challenge is applicable to any setting where healthcare is delivered. A confidential room was secured for the Round Table discussion and data was recorded using a tape recorder and analysed and presented descriptively using verbatim quotes. The tape recorder was stored in a locked filing cabinet and the recording was deleted at the completion of the project. This project was classified as a service improvement initiative and therefore ethical approval was not required [8].

RESULTS

A total of five office workers (41.7%) accepted the invitation and constituted the Round Table discussion. Elite bias refers to the over-representation of data from participants who may be better informed or able to articulate their experiences more clearly [9]. In an attempt to overcome the risk of elite bias quotes were used from all office workers taking part in the Round Table discussion.

What factors motivated or hindered your participation in the workday steps programme?

BF: 'I found it motivating that the challenge fitted in with my working commitments and did not add to my workload.'

OA: 'I enjoyed the challenge and it did keep me motivated.'

BM: 'Since the walking programme I have increased my activity levels. I attend my local gym twice a week for classes. I will definitely continue with the walking challenge.'

BL: 'I am already very active and it didn't improve what I do ... but I did enjoy it.'

CL: 'I found the walking challenge very motivating and it made me realise how little exercise I do ... it made you realise that doing 10,000 steps a day did require more effort.'

What factors contributed towards making the workday steps programme sustainable?

BF: 'Definitely the weekly coaching sessions ... otherwise I would have just quit in the first couple of weeks.' **OA:** 'I don't think I would have continued without you ... it's those little weekly sessions that remind me of what to do ... it helps with motivation.'

BM: 'This programme was supportive ... I didn't want to see the same thing again ... it gets boring.'

BL: 'If I was not in the walking programme ... I think I'll lose motivation completely to stay active ... I don't think I would continue walking if I wasn't in this programme.'

CL: 'I really liked the fact that we talked every week ... that's the main reason I took part.'

Overall, what do you think are the perceived influence of the workday steps programme on health and wellbeing? BF: 'We appreciate everything that the occupational health and wellbeing service is trying to achieve ... putting things on like the steps programme and trying to get people interested and involved.'

OA: 'I absolutely loved this challenge ... it refreshed my mind ... gave me an energy boost ... made me not sit still for too long.'

BM: 'If you have done activity during the working day then it helps you feel you can fit physical activity into your daily life.'

BL: 'This programme gave me the support to just get active again ... that's all I always wanted to be active again ... I just needed a push from someone who cared.'

CL: 'The thing is that you may not have full control with your work ... which impacts on various aspects of your own wellbeing ... this programme gave you control over your physical activity and ultimately your health.'

DISCUSSION

The purpose of this project was to explore the views and experiences of officer workers with a workday steps programme. Most officer workers reported that the workday steps programme gave them the motivation to continue to be physically active. This is important because being physically active have demonstrated improvements in musculoskeletal injuries, stress, absenteeism, work culture, employee motivation and organisational image [10, 11]. Furthermore, employees that are physically active are overall healthier and work more productively. It was also acknowledged that in order to increase workday steps more effort than initially

anticipated was required and that the interventional nature of the project was instrumental in providing the support and motivation, through the weekly health coaching and self-monitoring sessions, towards increasing workday steps and discussing strategies to overcome barriers. Integrative health coaching is an invaluable tool for clinicians seeking to achieve behaviour changes for improved health, particularly in the areas of physical activity and exercise [12]. This approach allows the worker to be actively engaged in the decision-making process of developing a plan of action while establishing a trusting relationship with the healthcare professional, both of which are critical for

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maximizing adherence and the overall success of the intervention plan [13]. The programme also contributed to overall health and wellbeing with the programme being given credit for decreasing the amount of overall sitting, providing an energy boost and being convenient to undertake. Thus, this programme aligns with the whole heath systems approach that empowers and equips people to take charge of their health and wellbeing and improve their quality of life [14].

CONCLUSION

The majority of office workers that participated in the Round Table discussion found that the workday steps programme supported them to be physically active. They also reported that the interventional nature of the project was instrumental in providing them with the motivation to continue with the programme. The programme also contributed to their overall health and wellbeing. The Round Table discussion highlighted that the weekly health coaching and self-monitoring sessions contributed towards increasing workday steps and provided strategies to overcome barriers.

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