Fit and Fall Proof™ (FFP) Program  
Sustainability Assessment: Survey of FFP Program Participants  

Conducted by  
The Center for the Study of Aging  
Boise State University  

June 2011
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Executive Summary

The purpose of this project was to conduct a sustainability assessment of the Fit and Fall Proof™ (FFP) program based on information provided by program participants. The FFP program, implemented in Idaho in 2004, has been delivered to over 6000 older adults throughout the state. It is an exercise-based fall prevention program that focuses on enhancing functional fitness to reduce the risk of falling. Trained volunteer leaders teach community-based classes designed to improve functional fitness.

A survey, designed and pilot tested by the researchers, was used to gather information from participants in the FFP program from March – May 2011. The survey was distributed to FFP participants by the volunteer class leaders. A standardized script was used to introduce the survey and participants were encouraged to complete it during class or at home. Participants were also given a copy of the survey and a stamped envelope addressed to the Idaho Department of Health and Welfare FFP program manager for its return.

A total of 895 surveys were completed by FFP program participants with responses representing all seven (7) of Idaho’s local public health district regions. The average age of respondents was 77 years and 82% (n = 732) reported participation in the FFP Program for more than three (3) months. Ninety percent, (n = 798), had one or more chronic conditions with hypertension and arthritis/rheumatic disease being the most commonly reported.

A statistically significant difference (p=.001) between pre- and post-participation confidence levels associated with maintaining balance when getting in and out of a chair, going up and down stairs, reaching for something, and taking a bath or shower was found. In addition, over 50% of respondents reported increased stability, energy, and confidence in preventing a fall and 75% (n=694) experiencing stronger social connections as a result of participating in the FFP program. Over 90% (n=819) of the respondents indicated they would recommend the FFP program to a friend or acquaintance.

Respondents were also asked to identify strengths of the program. Themes were the social interaction and enhanced well-being associated with participation and quality of instructors. The following quote represents the sentiments shared by many of the respondents:

"This class has been great for me. I have improved my physical ability and I'm able to do so much more. I can get out of a chair and walk without having to warm up my legs and the list can go on & on. My quality of life is much improved."

Suggested improvements for the program focused primarily on curriculum and time/schedule of classes. Participants also noted the need for ongoing marketing and recruiting activities.

The findings from this study reveal high levels of satisfaction and evidence that participation has had a positive impact on maintaining balance, preventing falls, energy, and social connections. These findings are particularly important as Idaho strives to enhance community-based environments that promote physical activity, injury prevention, and “aging in place”.
Introduction
A sustainability assessment of the Fit and Fall Proof™ Program (FFP) was conducted by researchers from Boise State University’s Center for the Study of Aging at the request of the Idaho Physical Activity and Nutrition Program (IPAN), Idaho Department of Health and Welfare (IDHW). The assessment included two activities; a survey of participants in the FFP program and a survey of district coordinators. This document is a report of findings from participants in the FFP program.

The FFP program, implemented in Idaho in 2004, has been delivered to more than 6,000 older adults throughout the state. It is an exercise-based fall prevention program that focuses on enhancing functional fitness to reduce the risk of falling. The program utilizes trained volunteer leaders to teach classes in their communities that are typically held in senior centers, community centers, churches, libraries, hospitals, and other places older adults gather.

Methods
A survey, designed and pilot tested by the researchers, was used to gather information from participants in the FFP program from March – May 2011, see Appendix A for copy of survey. Participation was voluntary and anonymous and all procedures were approved by the Institutional Review Board at Boise State University.

The survey was distributed to FFP participants by the volunteer class leaders. A standardized script was used to introduce the survey and participants were encouraged to complete it during class or at home. Participants were given a copy of the survey and a stamped return envelope addressed to the Idaho Department of Health and Welfare FFP program manager.

Quantitative analysis using descriptive and inferential techniques was conducted using a statistical software package (SPSS). The qualitative information provided by the respondents was reviewed by the researcher to identify themes and trends.

Results
A total of 895 surveys were completed by FFP program participants with responses received from all seven (7) of Idaho’s local public health district regions. The average age of respondents was 77 (range 39 – 102) and the majority, 82% (n = 732), reported participation in the FFP Program for more than three (3) months, see Table 1 for respondent demographics.
Table 1. Respondent Demographic Information

<table>
<thead>
<tr>
<th></th>
<th>n</th>
<th>%</th>
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<tbody>
<tr>
<td>Age</td>
<td></td>
<td></td>
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<tr>
<td>Mean = 77.4 (39-102)</td>
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</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>137</td>
<td>15.3</td>
</tr>
<tr>
<td>Female</td>
<td>751</td>
<td>83.9</td>
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<tr>
<td>Location of Primary Residence</td>
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<tr>
<td>District 1</td>
<td>167</td>
<td>18.7</td>
</tr>
<tr>
<td>District 2</td>
<td>91</td>
<td>10.2</td>
</tr>
<tr>
<td>District 3</td>
<td>108</td>
<td>21.1</td>
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<tr>
<td>District 4</td>
<td>293</td>
<td>32.7</td>
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<tr>
<td>District 5</td>
<td>64</td>
<td>7.2</td>
</tr>
<tr>
<td>District 6</td>
<td>51</td>
<td>5.7</td>
</tr>
<tr>
<td>District 7</td>
<td>77</td>
<td>8.6</td>
</tr>
<tr>
<td>Other (non-Idaho zip code)</td>
<td>28</td>
<td>3.1</td>
</tr>
<tr>
<td>Participation in FFP Program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than 3 months</td>
<td>148</td>
<td>16.5</td>
</tr>
<tr>
<td>More than 3 months</td>
<td>732</td>
<td>81.8</td>
</tr>
</tbody>
</table>

Health Status

The majority, 90 % (n = 798), had been told by their health care provider that they had one or more chronic conditions. The most frequently identified condition was hypertension (46 %, n = 409) followed closely by arthritis/rheumatic disease (43 %, n = 382), see Table 2. Over 50 % (485/876) reported having two or more chronic health conditions. Approximately 75 % (n = 685) of the respondents indicated that they did not regularly use a cane, walker, wheel chair, or other assistive device.

Table 2. Health Status

<table>
<thead>
<tr>
<th>Chronic Condition</th>
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<th>%</th>
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<tbody>
<tr>
<td>Hypertension (i.e. High blood pressure)</td>
<td>409</td>
<td>45.7</td>
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<tr>
<td>Arthritis/Rheumatic Disease</td>
<td>382</td>
<td>42.7</td>
</tr>
<tr>
<td>Osteoporosis (i.e. Low bone density)</td>
<td>225</td>
<td>25.1</td>
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</table>
Impact of Participation in the FFP Program

A series of four retrospective survey items asked participants to indicate whether they perceived a change in their ability to maintain balance when performing the following specific activities: getting in and out of a chair, going up and down stairs, reaching for an object above their head, and taking a bath or shower since participation in the FFP program. The results of the Wilcoxon signed ranks test indicated that participants significantly increased their confidence levels related to maintaining their balance from pre to post-FFP (p = .001) for all activities, see Table 3.

Respondents were also asked about the impact of the program on more general aspects of their lives. Over 50% of respondents reported increased stability, energy, and confidence in preventing a fall. In addition, over 75% experienced stronger social connections as a result of the FFP program, see Table 4.

Finally, participants were asked if they would recommend the program to others. Over 97% (n=865) of the respondents indicated they would recommend the FFP program to a friend or acquaintance.

Table 3. Comparison of pre and post-FFP program participation confidence levels related to balance

<table>
<thead>
<tr>
<th>Perceived Confidence</th>
<th>n</th>
<th>Mean*</th>
<th>Median*</th>
<th>Standard Deviation</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Pre-FFP confidence to get in and out of a chair</strong></td>
<td>874</td>
<td>3.28</td>
<td>3.0</td>
<td>.83</td>
<td>.001</td>
</tr>
<tr>
<td><strong>Post-FFP confidence to get in and out of a chair</strong></td>
<td>865</td>
<td>3.69</td>
<td>4.0</td>
<td>.59</td>
<td></td>
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</tbody>
</table>

*Other: Parkinson’s disease, high cholesterol, kidney, spinal stenosis, thyroid, multiple sclerosis
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<thead>
<tr>
<th>Perceived Confidence</th>
<th>n</th>
<th>Mean*</th>
<th>Median*</th>
<th>Standard Deviation</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-FFP confidence to <strong>go up and down stairs</strong> without losing your balance</td>
<td>865</td>
<td>3.04</td>
<td>3.0</td>
<td>.95</td>
<td>.001</td>
</tr>
<tr>
<td>Post-FFP confidence to <strong>go up and down stairs</strong> without losing your balance</td>
<td>858</td>
<td>3.45</td>
<td>4.0</td>
<td>.77</td>
<td></td>
</tr>
<tr>
<td>Pre-FFP confidence to <strong>reach for an item above your head</strong> without losing balance</td>
<td>875</td>
<td>3.1</td>
<td>3.0</td>
<td>.88</td>
<td>.001</td>
</tr>
<tr>
<td>Post-FFP confidence to <strong>reach for an item above your head</strong> without losing balance</td>
<td>863</td>
<td>3.5</td>
<td>4.0</td>
<td>.69</td>
<td></td>
</tr>
<tr>
<td>Pre-FFP confidence to <strong>take a bath or shower</strong> without losing balance</td>
<td>873</td>
<td>3.29</td>
<td>3.0</td>
<td>.80</td>
<td>.001</td>
</tr>
<tr>
<td>Post-FFP confidence to <strong>take a bath or shower</strong> without losing balance</td>
<td>858</td>
<td>3.63</td>
<td>4.0</td>
<td>.61</td>
<td></td>
</tr>
</tbody>
</table>

* Confidence Scale: 4 = very sure to 1 = not at all sure

Table 4. Impact of Participation in FFP Program

<table>
<thead>
<tr>
<th>Impact of Participation in FFP Program</th>
<th>Very Sure n (%)</th>
<th>Pretty Sure n (%)</th>
<th>A Little Sure n (%)</th>
<th>Not Sure At All n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increased stability when walking or standing</td>
<td>564 (63 %)</td>
<td>235 (26 %)</td>
<td>43 (5 %)</td>
<td>10 (1 %)</td>
</tr>
<tr>
<td>Increased confidence in preventing a fall</td>
<td>448 (50 %)</td>
<td>338 (38 %)</td>
<td>55 (6 %)</td>
<td>15 (2 %)</td>
</tr>
<tr>
<td>Increased social interaction with others</td>
<td>694 (78 %)</td>
<td>144 (16 %)</td>
<td>13 (2 %)</td>
<td>8 (1 %)</td>
</tr>
<tr>
<td>Increased energy</td>
<td>571 (64 %)</td>
<td>224 (25 %)</td>
<td>48 (5 %)</td>
<td>19 (2 %)</td>
</tr>
</tbody>
</table>

Program strengths and suggestions for improvement

Open-ended questions were used to solicit input from participants about what they liked about the program and areas of improvement. A total of 2,248 positive comments about the program were received as compared to 592 suggestions for improvement. The general tone of the feedback was that the program and volunteers were appreciated and that the participants hoped the program would continue.
Strengths of the FFP Program

Changes participants had noticed in their physical abilities was the most commonly identified strength of the program with social interaction, enhanced well-being, quality of instructors, and curriculum also frequently noted. The following quotes from participants exemplify these attributes of the program, see Appendix B for additional comments.

*Improved physical ability.*

"Helping my aches and pains after my bad accident in 2006. I like being tested also for how fast I can get off that chair and walk around the cone."

"A wonderful program! I can tell the difference in my body when I miss a few times. It definitely helps me to keep active and balanced."

"feeling better, able to move much easier and taught how to get out of a chair- it really helped me."

"If it had not been for these classes- I'd have been a stay at home- because walking was becoming a problem."

"I can get off a chair without grabbing a hold of something."

"Fit and Fall has helped me strengthen my upper arms. I couldn't stir food for baking bread and I can now. I can carry my groceries better. I can bend down better because they have shown me the proper way to bend and squat (sp?) I am thankful for the class."

"I love the classes and I can now get in and out of a bathtub first time in six years."

"I had a hip replacement and every day I am getting better. Love the class."

"I suffer from vertigo. The class helps to make me stronger."

"This program has helped me physically and mentality [sic] beyond words can express. I walk now without dragging my leg, I trip less, I'm more aware of my balance. If I do fall I learn not to stiffen my bones so tight."

"I am getting my strength back after numerous health problems and becoming physically inactive the past few years. It is wonderful to be doing better."

"My husband had a severe stroke 2 1/2 years ago. He was totally paralysed on his right side for 3 months. When he came home (4 mos. later) he was walking without a walker or cane or wheelchair. He was also eating. He cannot use his right hand very well but Fit and Fall Proof has helped strengthen his right leg and his right arm is getting stonger. He does get a little tired sometimes but will try most of the time. He cannot speak and has difficulty writing things. His cartoid [sic] artery is clogged. I speak and write for him. I am his wife."
"This class has been great for me. I have improved my physical ability and I'm able to do so much more. I can get out of a chair and walk without having to warm up my legs and the list can go on & on. My quality of life is much improved."

"I learned exercises that I can do without special equipment or even without leaving home."

Enhanced social interaction.

"Good camaraderie and Fit and Fall Proof pushes me to much more exercise than I would have done at home"

"I think of my classmates as friends- we trade ideas, recipes, keep track of each other outside of class- The program fills emotional and social needs as well as physical. Intellectually stimulating as well."

"This is a great idea- for some it might be their only social activity- and a great way to meet with and talk to others."

"This is a very useful program. . . . Also the social contacts keeps us social and we don't get homebound and stale. It's a productive program for us elderly."

"This is such a great program for seniors. It gives them opportunity for fellowship and building friendships with others their age. And gives them a specific time to keep themselves active and involved in life."

"I am able to be with my grandchildren and know I can care for them, hold & carry them & get on the floor and play"

Enhanced well-being and self-efficacy.

"It gives you a since [sic] of well being- self worth. Makes you feel good."

"This class has helped me past emotional insecurity, given me strength despite physical limitations, and given me confidence volunteering at the school. Thank you."

“I credit almost a year of Fit and Fall Proof from a serious fall over a stool in front of our kitchen sink. I had removed our old coffee filter, turned to move along the sink to the garbage can, when I went flying over the stool toward a doorway. Somehow I caught myself without losing 1 grain of coffee grounds and ended with only a couple drops of squeezed out coffee on the floor."
"I tripped over a foot stool in my living room a few days ago. I was so afraid I couldn't get up by myself, but by using the foot stool for support I was able to get my legs under me and lift myself to my feet. I wasn't able to get on my knees (2 artificial). If I had not been going to Fit and Fall Proof I know I wouldn't have been able to get up."

"I have a history of falls because of past (leg) surgery limitations. During the last 2 years have not fallen at all. I definitely attribute that to this class."

"After a year of Fit and Fall Proof my bone density scan was greatly improved."

"My Dr. is very pleased that I am taking these classes. It has had a very positive change in my cholesterol (sp) already."

**Quality of Instructors and Curriculum.**

"The instructors: they are energetic, they make exercising so much fun."

"I learned exercises that I can do without special equipment or even without leaving home."

"I have taken many different exercise classes, but this is the only class that I never watch the clock- the time flies and I have had a pleasant, worthwhile hour. . . . It has hugely improved my balance and upper body strength, and the socialization is excellent for a lonely widow."

"Compares favorably with a professionally led program I've participated in."

"They give us strength, stamina, satisfaction in accomplishments, a lot of respect and friendship, with instructors and group."

"It is such a good program and benefits so many; I hope it continues for a long time."

**Areas of Improvement for the FFP Program**

The most frequently suggested improvements were related to the curriculum and time/schedule. Several respondents suggested expanding the curriculum to include the use of weights, more variability in activities, and tailoring the program to meet the individual needs of participants.

Comments provided about time and schedule of classes were largely related to wanting more offerings of the class and at different times during the day.

Participants also noted the need for ongoing marketing and recruiting activities as expressed by the following quote. “It was widely publicized in the beginning, but I seldom see or hear anything about it now.”
Discussion and Conclusions

The results from this sustainability assessment from the perspective of the participants in the FFP program reveal high levels of retention, satisfaction, and evidence of impact, i.e., the program is making a difference in the lives of the participants.

One of the strengths of this study is the quality of the sample; many participants responded and all regions of the state are represented. While the method used to distribute the survey makes it difficult to determine an exact response rate, an estimate can be made using attendance records from the previous year. During the second quarter of 2010-11, 1,754 individuals participated in the FFP program. Using this as an estimate of the population during the survey distribution period, a return of 895 surveys represents a 51% (895/1,754) response rate. An additional strength of the sample is that it represents all regions of the state and that the distribution represents population densities in Idaho with approximately 50% of the respondents coming from southeastern Idaho (health districts 3 and 4).

High levels of retention and satisfaction in the FFP program were evidenced with 81% (n=732) of the respondents indicating they had been participating for more than three (3) months and also through qualitative comments such as:

"After a year of Fit and Fall Proof my bone density scan was greatly improved."

"I have a history of falls because of past (leg) surgery limitations. During the last 2 years have not fallen at all. I definitely attribute that to this class."

The FFP program also appears to be reaching the intended population with the average age of the respondents being 77 and over half having two or more chronic health conditions. This evidence of successful recruitment and retention of participants is particularly important as Idaho strives to enhance community-based environments that promote injury prevention and “aging in place”.

Finally, while the design of this study does not allow for definitive conclusions about the effect of the program on participants due to the lack of a control group, the use of a retrospective survey does provide evidence that participation had a positive impact on ability to maintain balance while performing everyday activities. For example, the retrospective design asked participants to indicate their confidence in their ability to maintain balance when taking a bath or shower before and after participation in the FFP program. Statistically significant differences (p=.001) were found between pre- and post-assessment of balance for all four retrospective survey items. This suggests a strong association between participation and increased ability to maintain balance when getting in and out of a chair, going up and down stairs, reaching for an object, and taking a bath or shower.

The impact of the program on social interactions, energy level, and confidence in being able to prevent a fall were also explored and found to be positive. These outcomes are particularly significant for older adults with multiple chronic conditions who are often at risk to isolation and depression. In addition, 97% of the respondents indicated they would recommend the program to others.
In conclusion, the findings from this study reveal high levels of satisfaction and evidence that participation has had a positive impact on maintaining balance, preventing falls, energy, and social connections. These findings are particularly important as Idaho strives to enhance community-based environments that promote physical activity, injury prevention, and independent living for older adults.
Thank you for taking a few minutes to answer some questions about the Fit and Fall Proof™ (FFP) program. The information you provide will be used to enhance the program. Your input is very important to us.

Your participation is voluntary and will not impact your involvement in future programs or activities. Your responses are anonymous and will be summarized with information collected from other participants in Idaho.

If you have any questions about this survey, please ask your Class Leader, or you may call Shawn Dunnagan, Boise State University, at 208-426-2333 or Katie Lamansky, Idaho Physical Activity and Nutrition Program, at 208-334-4951.

Thank you for taking a few minutes to complete this important survey.

**Instructions:** Please answer the questions on this form. Please print clearly.

Mark your choice within the box, like this: [X]

1. What is your gender?
   - [ ] Female
   - [ ] Male

2. Has a health care provider ever told you that you have any of the following chronic conditions?
   (Please mark all that apply.)
   - [ ] Arthritis/ Rheumatic Disease
   - [ ] Breathing/ Lung Disease (e.g., Asthma, Emphysema, Bronchitis)
   - [ ] Cancer
   - [ ] Depression or Anxiety Disorders
   - [ ] Diabetes
   - [ ] Heart Disease
   - [ ] Hypertension (High Blood Pressure)
   - [ ] Stroke
   - [ ] Osteoporosis (Low Bone Density)
   - [ ] Other Chronic Condition: ___________________________
   - [ ] None (No Chronic Conditions)
3. Do you regularly use any of the following assistive devices?

- □ Cane
- □ Walker
- □ Wheelchair
- □ Other: ___________________________
- □ None (No assistive devices are used)

4. What year were you born? ____________

5. What is the zip code for your primary residence?

6. How long have you been a participant in the Fit and Fall Proof™ program?

- □ Less than 3 months
- □ More than 3 months
- □ Other, please describe: ___________________________

For each of the following questions, please put an “x” in the box that best describes your response to the following questions about the Fit and Fall Proof™ (FFP) program.

<table>
<thead>
<tr>
<th></th>
<th>Very Sure</th>
<th>Pretty Sure</th>
<th>A Little Sure</th>
<th>Not Sure at All</th>
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<tbody>
<tr>
<td>7. Before participating in the FFP program, how sure were you that you could get in and out of a chair without losing your balance?</td>
<td></td>
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<tr>
<td>8. After participating in the FFP program, how sure are you that you could get in and out of a chair without losing your balance?</td>
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<tr>
<td>9. Before participating in the FFP program, how sure were you that you could go up and down stairs without losing your balance?</td>
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<tr>
<td>10. After participating in the FFP program, how sure are you that you could go up and down stairs without losing your balance?</td>
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<tr>
<td>11. Before participating in the FFP program, how sure are you that you could reach for an item above your head without losing your balance?</td>
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</tbody>
</table>
12. After participating in the FFP program, how sure are you that you could **reach for an item above your head** without losing your balance?

13. **Before** participating in the FFP program, how sure were you that you could **take a bath or shower** without losing your balance?

14. **After** participating in the FFP program, how sure are you that you could **take a bath or shower** without losing your balance?

15. Has participating in the FFP program helped you feel **more stable when walking or standing**?

16. Has participating in the FFP program made you more confident that you could **prevent yourself from having a fall**?

17. Has participating in the FFP program helped you **remain in contact with other people**?

18. Has participating in the FFP program helped you feel like **you have more energy**?

19. Would you recommend the FFP program to a friend or acquaintance?

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<tr>
<th></th>
<th>Very Sure</th>
<th>Pretty Sure</th>
<th>A Little Sure</th>
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20. Please tell us 3 things you like about the Fit and Fall Proof™ program.

21. Please tell us 3 things you would suggest to improve the Fit and Fall Proof™ program.

Other comments or suggestions?

Please return your completed survey to the Class Leader or send it to Katie Lamansky with the Idaho Physical Activity and Nutrition Program, in the provided return envelope. Please call Katie at 208-344-4951 if you have any questions.

**Thank you for your time!**
Appendix B:
Additional Qualitative Comments by Theme

Improved physical ability

"It, Fit and Fall, leaves you with more energy."

"Without this program I would be a couch potato. It keeps my body moving."

"I can get off a chair without grabbing ahold of something."

"Fit and Fall has helped me strengthen my upper arms. I couldn't stir food for baking bread and I can now. I can carry my groceries better. I can bend down better because they have shown me the proper way to bend and squat (sp?) I am thankful for the class."

"I can see improvement in my balance. You can see improvement in people who have started after you and can't do everything when they start"

"Added strength allows me to be more active in garden and etc."

"This is an excellent program. I've had 2 hips and 1 shoulder replaced. The program has improved my range of motion, strength and balance so I can lead a normal life. Thank you."

"I gives me exercise I wouldn't get otherwise."

Enhanced social interaction

"Involves people my age and ability."

"This is a great idea- for some it might be their only social activity- and a great way to meet with and talk to others."

"Makes my day."

"I like some of the people in the class. We're like an outside family."

Enhanced well-being and self-efficacy

"I feel better about myself"

"The program in my life and others in my group."

"Thank you for donating your time and effort to help us take care of ourselves."

"Continue to identify 'what not to do to reduce injury'"

"This program has helped me so much with balance. I have not fallen or nearly fallen since I began."

This program is great to keep seniors active to do simple movements to stay in their homes and be safe not to fall."

Quality of Instructors and Curriculum

"I liked having consistent leadership and getting to know people."

"I gives me exercise I wouldn't get otherwise."
"It is free. I don’t have to spend money I don't have."

"Thank you all for inventing a program for seniors that we can afford, that helps our lives, and not giving up on us."

"It's good to have a commitment and have to get out of the house and it makes me feel good."