

Champions of an Older Adult Exercise Program: Believers, Promoters, and Recruiters

Christina E. Miyawaki¹, Basia Belza²,
Marlana J. Kohn², and Miruna Petrescu-Prahova²

Abstract

Champions, who support, market, and promote programs, are a vital part of successful program adoption, implementation, and maintenance. Enhance®Fitness (EF) is an evidence-based, community-delivered group exercise program for older adults. Using semistructured phone interviews with 20 participants, 17 instructors, and 15 staff, we explored the roles of champions in adopting, implementing, and maintaining EF at YMCA-affiliated sites. Interviews revealed EF champions play critical roles in program dissemination. Champions are outgoing, passionate, and enthusiastic about EF. They believe in the program and its benefits (believers), are “walking advertisements” (promoters), and have magnetic personalities, persuading newcomers to join (recruiters). EF champions were not purposefully selected but naturally arose during the course of program delivery. Community sites adopting evidence-based programs can foster and support champions by engaging with them, and capitalizing on their energy as an emerging resource throughout the adoption, implementation, and maintenance of programs.

Manuscript received: November 15, 2015; **final revision received:** March 28, 2016;
accepted: April 2, 2016.

¹University of Houston, Houston, TX, USA

²University of Washington, Seattle, WA, USA

Corresponding Author:

Christina E. Miyawaki, Graduate College of Social Work, University of Houston, 3511 Cullen Boulevard, Room 110HA, Houston, TX 77204-4013, USA.

Email: cemiyawaki@uh.edu

Keywords

adoption, champions, implementation and maintenance, evidence-based, physical exercise

Health benefits of physical activity for older adults are well documented (Blake, Mo, Malik, & Thomas, 2009; Herring, O'Connor, & Dishman, 2010; Sun, Norman, & While, 2013). However, as many older adults aged 65 and above tend to be less physically active compared with younger age groups and not to meet physical activity recommendations (Schiller, Ward, & Freeman, 2014; U.S. Department of Health and Human Services, 2014), communities have introduced evidence-based physical activity programs targeting middle-aged and older adults (Ory et al., 2010). Champions, defined as "charismatic advocates of a belief, practice, program, policy and/or technology" (National Collaborating Centre for Methods and Tools, 2011, p. 1), play an important role when adopting, implementing, and maintaining these programs. For example, champions promote new and existing programs (Damschroder et al., 2009; Satterlund, Cassady, Treiber, & Lemp, 2011; Taylor, 2013), influence adoption (Kuehl, Mabry, Elliot, Kuehl, & Favorite, 2013), assist implementation (National Council on Aging, 2012), and try to maintain support from multiple levels within the organization (Cheadle, Egger, LoGerfo, Schwartz, & Harris, 2010; Howell, Shea, & Higgins, 2005). Champions can be catalysts who become the site contact and advocate for adoption, and wellness enthusiasts who work relentlessly without expectation of recognition or compensation for their efforts (Edmunds & Clow, 2015; Kuehl et al., 2013; National Collaborating Centre for Methods and Tools, 2011). However, champions in these physical activity and wellness programs tend to take place in work environments such as a fire fighters wellness program (Kuehl et al., 2013) and workplace tobacco control policy campaigns (Satterlund et al., 2011), or in a peer-led individualized disease self-management program (Lorig, Hurwicz, Sobel, Hobbs, & Ritter, 2005). These programs are also more focused on younger adults (Edmunds & Clow, 2015). The literature is scarce about the roles of champions in health promotion programs for older adults. Woodall, Kinsella, South, and White (2012) discuss the importance of community health champions for older adults, and older adults' roles as champions among their peer group in existing health promotion programs. However, less is known about the roles of champions in initial program adoption or evidence-based programs.

Enhance®Fitness (EF) is an evidence-based group exercise program for older adults (Wallace et al., 1998). Group Health Cooperative, Sound Generations (formerly known as Senior Services), and the University of

Washington Health Promotion Research Center collectively developed EF. Since 1993, Sound Generations, a nonprofit organization in King County, Washington, has licensed EF to community-based agencies and has trained EF instructors across the United States, including at many YMCAs. In 2014, EF was active in 439 sites in 30 states, and a total of 11,529 older adults participated (Kohn, Belza, Petrescu-Prahova, Miyawaki, & Hohman, 2014). Classes convene 3 times per week for 60 minutes, focusing on cardiovascular endurance, strength, balance, posture, and flexibility for participants at varying levels of fitness. Participants who completed 16-week EF sessions showed significant improvement in their upper and lower extremity strength, enhancing their ability to climb stairs, bend, and kneel, compared with when they started the class (Belza et al., 2006; Wallace et al., 1998), as measured by functional fitness tests (Rikli & Jones, 1999). EF participants also incurred US\$945 less per year in medical costs compared with nonparticipating counterparts (Centers for Medicare & Medicaid Services, 2013).

To better understand the EF program's successful dissemination throughout the United States and to propose recommendations for organizations interested in offering evidence-based physical activity programs in their communities, we explored the role of champions at YMCA (Y)-affiliated sites. The study objectives were to (a) describe the characteristics and roles of EF champions, and (b) discuss how champions can be utilized when disseminating evidence-based programs.

Method

We conducted 52 semistructured individual phone interviews with three groups: EF participants ($n = 20$), instructors ($n = 17$), and program staff ($n = 15$). These individuals were recruited from 27 Y-affiliated sites that offered EF between January 2005 and June 2012. We developed interview guides for each of the three groups based on the Reach, Effectiveness, Adoption, Implementation, and Maintenance (RE-AIM) framework (Glasgow, Vogt, & Boles, 1999). RE-AIM has been used for the translation of evidence-based programs, and this study focused on the adoption, implementation, and maintenance dimensions within the RE-AIM framework. Adoption refers to the absolute number, proportion, and representativeness of settings and intervention agents who are willing to initiate a program. Implementation, at the user-organization level, refers to the program agents' fidelity to the elements of a program's protocol, including consistency of delivery as intended, and the time and cost of the program. Maintenance refers to the extent to which a program or policy becomes institutionalized or part of the routine organizational practices and policies (RE-AIM website, n.d.).

The guides contained 29 questions for participants, 36 questions for instructor/master trainers, and 40 questions for staff members. These questions included participants' reasons of participation, benefits of EF, staff and instructor professional experience and responsibility, experience with EF including barriers and facilitators, participant recruitment strategies, instructor recruitment strategies (staff only), fitness checks (participants and instructors only), and instructor performance evaluation (instructors only). We also collected basic demographic information such as age, educational attainment level, job title, and duration of involvement with EF. This article summarizes responses to three questions seeking information about champions: Is there someone at your YMCA/site who is a champion for EF? Can you describe some of the things this person does to champion EF? Did someone specific recruit you to participate in EF? Findings related to other interview guide items are reported elsewhere (Belza et al., 2015; Kohn, Belza, Petrescu-Prahova, & Miyawaki, 2015; Petrescu-Prahova, Belza, Kohn, & Miyawaki, 2015).

Procedure

We obtained administrative program records from Sound Generations, including site names and addresses, names and contact information of current and past Y staff who were involved with EF programs, EF participants, and EF instructors at Y-affiliated sites. Sites were categorized by program status (currently active, formerly active, licensed but never active). We sent letters via United States Postal Service (USPS) inviting target samples to participate in the study. Interested study participants phoned a study phone line or sent an email to the study email account. A project manager responded to all phone and email messages, determined eligibility, and scheduled interviews. We enrolled 20 participants, 17 instructors, and 15 staff to obtain rich information, achieve conceptual saturation, and maintain feasibility within the limits of study funding and staff availability (Christensen, Schmidt, Budtz-Jorgensen, & Avlund, 2006). Study inclusion criterion was EF program involvement between January 2005 and June 2012. We developed three interview guides (participant, instructor, and staff) and piloted-tested each with participants, staff, and instructors not participating in the study. We obtained verbal informed consent before starting the interview, as well as wrote summary memos after each interview. Upon completion of the interview, all participants received a US\$20 gift card. The University of Washington Institutional Review Board considered this study exempt from review.

Analysis

Members of the research team (B.B., M.P.P., C.M.) conducted all the interviews. Interviews lasted from 45 to 90 minutes. Interview times varied because we probed to facilitate and/or prompt interviewees' insights and responses. For example, we probed champions as ". . . can be paid staff or a volunteer who helps keep classes going, recruits new participants, or works to expand the program" or "Anybody who sort of serves as a volunteer cheerleader for the class." Interviews were digitally recorded and professionally transcribed verbatim. Data were analyzed in ATLAS.ti, Version 7. We conducted a qualitative thematic content analysis (Hsieh & Shannon, 2005) for the initial phase of coding as our overall analysis strategy. We developed separate codebooks for participants, instructors, and staff using a priori themes from the interview guide as well as other themes that emerged from the review of the transcripts. Three pairs of team members coded a subset of participant, staff, and instructor transcripts separately, and then compared, reviewed, and reconciled coding until agreement exceeded 80%. After reaching 80% agreement, the remaining transcripts were divided and coded independently. A secondary deductive analysis was conducted to identify champions' characteristics and roles. Descriptive statistics were used to summarize demographic items. Quotations in this article are the exact terms used by interviewees.

Results

Twenty-seven out of 52 interviews from 19 different sites (out of 27 sites) discussed champions. Table 1 presents the demographics of the sample. The average ages of participants, instructors, and staff were 72.4 ($SD = 11.9$), 54.3 ($SD = 12.2$), and 48.7 ($SD = 13.5$) years old, respectively. Seventeen out of 20 participants had at least some college education. EF participants had attended EF, on average, for 24.5 months ($SD = 23.2$), 2.3 ($SD = 0.5$) times a week. The vast majority (76%; 13/17) of instructors had prior fitness class teaching experience. They had taught EF for an average of 2.7 years ($SD = 2.2$). Staff, on average, had been with the organization for 9.9 years ($SD = 4.9$), and 75% (11/15) of them had taught fitness classes.

There are a variety of ways interviewees identified champions such as naming specific individuals or not naming but stating they are participants, staff, or instructors. Some interviewees talked about multiple individuals in their sites. However, the vast majority (15 interviewees) identified themselves as champions at their sites regardless of their roles.

Table 1. Demographic Characteristics of the Sample ($N = 52$).

	Participants ($n = 20$)	Instructors and master trainers ($n = 17$)	Staff ($n = 15$)
	n (%) or M (SD)	n (%) or M (SD)	n (%) or M (SD)
Age	72.4 (11.9)	54.3 (12.2)	48.7 (13.5)
Gender			
Female	17 (85)	12 (71)	12 (80)
Male	3 (15)	5 (29)	3 (20)
Education			
Less than college	3 (15)	0 (0)	0 (0)
Some college	4 (20)	5 (29)	3 (20)
College degree or higher	13 (65)	12 (71)	12 (80)
Duration of EF participation (months)	24.5 (23.2)	NA	NA
Frequency of EF participation (week)	2.3 (0.5)	NA	NA
Years in current position	NA	5.4 (5.9)	3.6 (2.6)
Prior experience teaching fitness classes (yes)	NA	13 (76)	11 (73)
Length of time teaching EF class (years)	NA	2.7 (2.2)	NA
Size of EF class (participant)	NA	21.0 (7.5)	NA

Note. EF = Enhance@Fitness.

Characteristics of EF Champions

Regardless of whether they are EF participants, instructors, or staff members, EF champions are “high energy,” “passionate,” and “enthusiastic” about EF. For example, participant champions encourage their friends, bring them to class, and spread the word about the program.

I would encourage people to come, and I do, because I think it’s very beneficial, (Female, age 75, from Washington).

Well, I meet people in my art groups. I have breakfast with people in the morning and meet other people along the way. If I think that they might be

interested I tell them about it, particularly when they complain about aches and pains. (Female, age 75, from Washington)

I think that there are people who actively encourage their friends to come—especially some of the seniors. If they know someone who's kind of been living a shut-in life, like they may have lost a spouse and just are struggling with depression—they do encourage one another. (Female, age 51, from Michigan)

Instructor champions work “very well with older adults” because they are “empathetic” and care about seniors “from their heart.” They are “heart-driven” people and want to be there for seniors. Champions have a “magnetic personality” and “people are just drawn to” their classes. Instructor champions are “the heart and soul of the program.”

I think that the characteristics would be that they care from the heart and not from their pocket. They really want to be there, or at least that's what it seems like . . . it's heart-driven. They have the compassion for health, and they have a compassion to see things done right, and they know how to make things happen. (Male, age 50, from Florida)

I truly have a passion for seniors. It was kind of close to my heart . . . It was definitely a soft spot in my heart. (Female, age 51, from Michigan)

He's always talking up the program. He has like a magnetic personality and people are just drawn to him . . . he's always doing fun things in his class. I think that he's a good promotional person for the program . . . he should be given credit for everything that he does. (Female, age 60, from Florida)

Staff champions take the extra time to “talk to participants,” show their “dedication” to them, and “follow through” with their commitment.

She always strives to learn more, okay? She always wants to get better at what she does. Being her director I couldn't ask for anything else. Besides that she actually really cares . . . she loves what she does. I can honestly say that about her, because she cares about the seniors. She takes the extra time to talk to them. (Male, age 29, from Florida)

It's their personality, their dedication to it, and their follow-through. I mean, you've got to have all of that. It doesn't work if you've got ideas and no follow-through, or the personality of a snake. They're both really, really nice guys. They're open to suggestions and ideas from their group. It just works well and we're very fortunate. (Male, age 66, from Florida)

Roles of EF Champions

Believers. Participant champions “wanted to bring [their commitment to EF] to everybody’s attention,” so they announced in their class “[how long] they had been doing EnhanceFitness.”

I have a few that have been with me since the beginning, and so there are probably three or four or maybe five, that I would count as a champion for sure. Yesterday, as a matter of fact, one of them that’s been with me, she just wanted to bring it to everybody’s attention that we had been doing EnhanceFitness for 8 years and thanked me for putting up with them! (Female, age 55, from Washington)

There are a few people that either help me in handing out equipment or with the paperwork. There is always somebody. [Moderator]: Do they also help recruit new participants and sort of spread the word about the program? [Interviewee] Oh, yes, in fact I’m just coming from a class where three new people just showed up. They were friends of people in the class. (Female, age 61, from Florida)

Instructor champions “believe in the EF program” because they see how participants improve; some instructors were initially EF participants, experienced the benefits, and “loved it so much that they became an advocate” and eventually instructors.

The woman from the Department of Health who was trained is also now an instructor for us in our LIVESTRONG program as a cancer survivor herself. She went through the program and loved it so much and is an advocate and became a trainer. She is passionate about this program and is planning to teach it at our [branch name], so it will be the second branch that we go to. There are champions, and there is another woman who is an active older adult coordinator who I think or well, I know is enthusiastic about that. I mean, she’s very passionate about older adult activities. (Female, age 38, from Rhode Island)

Staff champions are “very supportive” of the program and want to “make the program happen no matter who was running it.”

She is so supportive. She wants this to work. She wants to make this happen. She wants to find the funding. She wants to route the money our way. She wants to keep this going. If she says that she will do it, she does it. [champion’s name] is just the bomb. She was my boss when EnhanceFitness came in. I love how she is just matter of fact, she’s fun and she’s high energy. She also loves the program and is so supportive. With [champion’s name], you know, she travels all over the U.S. and does trainings. She’s learned so much. Anything

she's learned she passes to everyone else. She's a greater sharer of knowledge. She's like the heart and soul of the program. She wants everybody to be successful, and she wants this to be huge. She is for spreading it as much as she can . . . she wants everyone feels successful. (Female, age unknown, from Michigan)

Promoters. Participant champions are “walking advertisements” who talk about and recommend EF to anybody, whether they are at the EF class site or anywhere they find potential participants.

There were several people who were walking advertisements for the class, they would tell one another in class the things that they were now able to do that they couldn't before. Truly worth teaching the class. (Female, age unknown, from Kansas)

Instructor champions reported they were “the go-to person” and “a 100 percent promoter.” They “sell [the program]” as if they made the EF program, and will keep promoting it because of the positive effects on the well-being of the participants.

I'm the one who is walking around and trying to get everybody to come to class. Yes, I'm basically the go-to person when I'm there. They especially like the fact that it's free for the first time, and so that is what I do. (Male, age 50, from Florida)

I am a 100 percent promoter because of what I see, you know, the results that I myself see. I sell it. Like if I made it, you know, because that's how much I believe in it. I will never get tired of promoting it. It's hands down what I see as an instructor. It all goes back to what I myself am experiencing. It's the progress that I'm seeing in the participants. It's just amazing. (Female, age 36, from Florida)

Other instructors “talk up the program.” They get their class participants excited so that these participants tell their friends. Instructor champions were “a good promotional person” and their classes grew. Staff champions called themselves “cheerleaders” who promote EF, the instructors, and the class.

Yes, I think that he talks it up to other people. He gets people excited who are in the class so that they tell their friends and that sort of thing. His class has grown. (Female, age 60, from Florida)

Recruiters. Several participant champions were themselves recruited by friends or acquaintances who were EF participants. They were taken to a

class, introduced, discovered they enjoyed the class, and joined. Some participants use a complimentary guest pass to recruit newcomers.

They come as a guest. Each member has so many guest privileges, and I think that they vary. [Moderator]: So you're able to bring someone? [Interviewee]: That's right, uh-huh, who might be considering joining. [Moderator]: Do you think that that works as far as them getting a sampling of the class? [Interviewee]: Yes, it has for a couple of friends that I have brought. (Female, age 75, from Washington)

Some participants become EF instructors' "assistants."

I would say that at many of our sites we have seen that instructors get what they call a quote, unquote "assistant." What happened is that is something that just evolved naturally. What happens is that you will get a participant or a couple—several—that are just so excited about the program. I can think of several offhand that they will be the person who perks up when a new participant comes. They will be the welcome person. "Hey, welcome to the class!" They will be the recruiter person. They will even help with maybe setting up the Fitness Check area just to make sure and help in that area. I can think of several or many of my sites that have someone like that—one, two, three participants who would act just like what you're saying, who are a *true* champion of EnhanceFitness . . . They just do it on their own. Nobody asked them to do that. They just love that. First of all, they love the community that EnhanceFitness provides, and then also obviously the physical benefits. They want to capture anybody who comes in and really help them to feel that same way. (Female, age 36, from Florida)

Instructors may demonstrate some EF moves and talk about why someone should join the class.

I will be putting on a little show. I will be showing them a few of the moves and talk about the benefits of EnhanceFitness and why they should go there. Those kinds of things. (Male, age 72, from Michigan)

I did a little demonstration to show what the class is about so that they can kind of take a peek that this is how it's different from *SilverSneakers* [another exercise program] and so just come and try it type of thing. That's what I tried to do from that standpoint. Demos usually will help, because it always gives them a taste of what the class is about. (Female, age 41, from Ohio)

Some instructors recruit because they experienced the benefits of EF, particularly when they encountered physical ailments. They joined the class as

participants and found that their ailments improved; they experienced the positive outcome of EF and wanted to share it with others.

I have such wonderful stories of people about EnhanceFitness and how it's improved their life so much, and how they can walk so much farther without having to rest. They can reach up in cabinets and get their plates and bowls—oh, yeah. (Female, age 51, from Michigan)

Staff champions recruit newcomers, personally escort them to class, and “talk to them on the way, to get to know them.” Once they are in class, staff champions introduce them to other participants and “make them feel welcome.”

Just any new person that comes in, or any senior that calls, we try to get them in EnhanceFitness. It's such an easy sell, like I said. We're like come on, go up and try it! They will do it. But in the classes like if the ladies are walking out, like one day I had a member and she's been a member for many years and I was talking to her. All of the other ladies were done with the class and walking by. I'm like I'm trying to talk Sharon into trying EnhanceFitness. Tell her about the class. They did and she joined, she paid today. She went and took a class and loved it and paid, and so now she's in that class of wonderful people. Yes, I mean, EnhanceFitness around here is just rockin' and rollin'. I mean, we love it. (Female, age 51, from Michigan)

I always tell them that you're going to improve your cardiovascular strength, your range of motion, your balance, your strength and everything. Once I take them up to the studio and say, “This is Sally [name of a new participant] and everybody be nice to her,” everybody is just so warm and inviting and they embrace them. I don't know, it's just easy. (Female, age 51, from Michigan)

Discussion

The purpose of this study was to identify champions' characteristics and roles through semistructured qualitative interviews with EF participants, instructors, and staff from Y-affiliated sites. EF champions are enthusiasts, full of positive energy, who have compassion and are supporters of older adults, and who care about the benefits of EF for participants. Champions are EF believers, advocating for EF program delivery because they have experienced or seen its benefits. They are EF promoters, constantly talking about EF to whoever may benefit from joining the class. They are EF recruiters, charming others with their magnetic personality and personally bringing newcomers to EF classes. These roles emerge from the champions' experience with the

program—They had a common desire to share the benefits and joy of EF with as many people as possible.

Practice Implications

There are multiple ways to integrate champions into an EF program. With their high energy, they can be an emergent resource. Champions can help with adoption because they are passionate, enthusiastic believers of the program and like to show its values to others (Satterlund et al., 2011). EF staff champions have been able to convince management personnel in their organization about the value of EF for their clients and their organization. They have been successful in recruiting not only EF participants but also EF instructors. They were able to even become EF instructors themselves by convincing management support their EF certification training. Champions can help with implementation and maintenance because they are promoters and recruiters, advocating for and advertising the program, searching for resources within and outside the organization (Cheadle et al., 2010; Kuehl et al., 2013), and making sure that there are enough participants to keep the program going. EF staff champions coordinate with instructor champions to implement EF, recruiting and bringing new participants to the class. Then instructor champions take over and welcome these new participants while participant champions support instructors by introducing new participants to the rest of the group and helping them join the class so as to maintain the number of enthusiastic participants in class. Community sites adopting EF or other evidence-based programs can foster and support champions by engaging with them and supporting their efforts, recognizing that they are an important resource throughout the adoption, implementation, and maintenance of health promotion programs. For example, to support and retain these champions, organizations could offer recognition events (Howell et al., 2005). Many organizations recognize their employees as “employees of the year,” present them with plaques, and display them in offices. Organizations can add “champion of the month” and thank them for their efforts. They can publicize champions’ articles in their organization newsletter including their stories why they do what they do as champions. However, one unique characteristic of EF champions is that regardless of their positions—whether they are participants, instructors, or staff members—their role as champion is borne out of their own enthusiasm. Thus, this type of event would be a surprise for champions, especially participant champions. However, it would be an encouraging gesture for participant champions to be recognized by their instructors thanking them for their assistance in whatever the capacity they

help the class. For instructors and staff, it would also be a message that management recognizes and acknowledges their efforts and skills.

Study limitations should be noted. These champions were identified within Y-affiliated sites. Those with other organizational affiliations may play different roles. Champions who promote the program may naturally be perceived positively. Those who chose to share their opinions in this study may have had a more positive experience, and thus, there is a potential for self-selection bias. Although we were able to note champions' gender during the interviews, no information on their race/ethnicity was available unless interviewees specified champions' race/ethnicity. However, there were no interviewees who mentioned champions' racial/ethnic classification.

Conclusion

We explored the roles of EF champions in adopting, implementing, and maintaining EF at Y-affiliated sites. Our findings show the importance of champions' presence in program dissemination, and underscore the vital roles that champions play both at individual and organizational levels. The energy that participants, instructors, and staff bring as program champions becomes contagious and is valuable for recruiting and retaining participants because it sparks others' interests and motivation (Kuehl et al., 2013; Satterlund et al., 2011). Once EF is implemented at their site, EF champions make every effort to maintain the program in their organization. There was a case reported that when there were no champions, the program was not offered any longer (Female, age 38, from Rhode Island).

There are a few steps that can enhance champions as resources. First, we can try to identify potential champion candidates. For instance, YMCA's Leadership Development Department has incorporated a "Leadership Competency" model into their hiring processes, which is focused on competencies required to grow/thrive in the YMCA environment (M. Pike, personal communication, March 18, 2016). This way, organizations may be able to identify these potential champion qualities among new staff members. Another step would be to systematically test and evaluate the process supported by champions: identify potential champions among staff and instructors especially during the hiring and/or training processes; develop a network of champions among staff, instructors, and participants (most likely identified by instructors); and recruit new participants supported by a team of staff, instructor, and participant champions. By evaluating and measuring the effectiveness of this mechanism, we may be able to best utilize champions and their talent and skills in the health promotion programs.

Acknowledgments

The authors would like to acknowledge Laura Farren for administrative and research support, Grace Kline for data analysis, YMCA of the USA for assistance with recruiting, and Sound Generations for data and technical assistance.

Authors' Note

The contents of this work are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention (CDC) or the National Institutes of Health (NIH).

Declaration of Conflicting Interests

The authors declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

Funding

The authors disclosed receipt of the following financial support for the research, authorship, and/or publication of this article: This study was funded in part by the Prevention Research Centers Program of the Centers for Disease Control and Prevention (CDC), through the University of Washington Health Promotion Research Center Cooperative Agreement U48DP001911. Miyawaki was also funded by the T32 Women's Health Postdoctoral Fellowship, National Institutes of Health (NIH), through Grant AG027677.

References

- Belza, B., Petrescu-Prahova, M., Kohn, M., Miyawaki, C. E., Farren, L., Kline, G., & Heston, A. H. (2015). Adoption of evidence-based health promotion programs: Perspectives of early adopters of Enhance®Fitness in YMCA-affiliated sites. *Frontiers in Public Health and Promotion, 2*, Article 164. doi:10.3389/fpubh.2014.00164
- Belza, B., Shumway-Cook, A., Phelan, E. A., Williams, B., Snyder, S. J., & LoGerfo, J. P. (2006). The effects of a community-based exercise program on function and health in older adults: The EnhanceFitness program. *Journal of Applied Gerontology, 25*, 291-306.
- Blake, H., Mo, P., Malik, S., & Thomas, S. (2009). How effective are physical activity interventions for alleviating depressive symptoms in older people? A systematic review. *Clinical Rehabilitation, 23*, 873-887.
- Centers for Medicare & Medicaid Services. (2013). *Report to Congress: The Centers for Medicare & Medicaid Services' evaluation of community-based wellness and prevention programs under Section 4202(b) of the Affordable Care Act*. Retrieved from <http://innovation.cms.gov/Files/reports/CommunityWellnessRTC.pdf>
- Cheadle, A., Egger, R., LoGerfo, J. P., Schwartz, S., & Harris, J. R. (2010). Promoting sustainable community change in support of older adult physical activity:

- Evaluation findings from the Southeast Seattle Senior Physical Activity Network (SESPAN). *Journal of Urban Health: Bulletin of the New York Academy of Medicine*, 87, 67-75.
- Christensen, U., Schmidt, L., Budtz-Jorgensen, E., & Avlund, K. (2006). Group cohesion and social support in exercise classes: Results from a Danish intervention study. *Health Education & Behavior*, 33, 677-689. doi:10.1177/1090198105277397
- Damschroder, L. J., Aron, D. C., Keith, R. E., Kirsh, S. R., Alexander, J. A., & Lowery, J. C. (2009). Fostering implementation of health services research findings into practice: A consolidated framework for advancing implementation science. *Implementation Science*, 4, Article 50. doi:10.1186/1748-5908-4-50
- Edmunds, S., & Clow, A. (2015). The role of peer physical activity champions in the workplace: A qualitative study. *Royal Society for Public Health*. Advance online publication. doi:10.1177/1757913915600741
- Glasgow, R. E., Vogt, T. M., & Boles, S. M. (1999). Evaluating the public health impact of health promotion interventions: The RE-AIM framework. *American Journal of Public Health*, 89, 1322-1327.
- Herring, M. P., O'Connor, P. J., & Dishman, R. K. (2010). The effect of exercise training on anxiety symptoms among patients: A systematic review. *Archives of Internal Medicine*, 170, 321-331.
- Howell, J. M., Shea, C. M., & Higgins, C. A. (2005). Champions of product innovations: Defining, developing, and validating a measure of champion behavior. *Journal of Business Venturing*, 20, 641-661.
- Hsieh, H.-F., & Shannon, S. E. (2005). Three approaches to qualitative content analysis. *Qualitative Health Research*, 15, 1277-1288. doi:10.1177/1049732305276687
- Kohn, M., Belza, B., Petrescu-Prahova, M., & Miyawaki, C. E. (2015). Beyond strength: Participant perspectives on the benefits of an older adult exercise program. *Health Education & Behavior*, 1-8. Advance online publication. doi:10.1177/1090198115599985
- Kohn, M. J., Belza, B., Petrescu-Prahova, M., Miyawaki, C. E., & Hohman, K. H. (2014). Participant variation by delivery site type in an evidence-based physical activity program. *Journal of Aging and Physical Activity*, 23, 401-408. doi:10.1123/japa.2013-0252
- Kuehl, H., Mabry, L., Elliot, D. L., Kuehl, K. S., & Favorite, K. C. (2013). Factors in adoption of a fire department wellness program: Champ-and-chief model. *Journal of Occupational and Environmental Medicine*, 55, 424-429.
- Lorig, K. R., Hurwicz, M.-L., Sobel, D., Hobbs, M., & Ritter, P. L. (2005). A national dissemination of an evidence-based self-management program: A process evaluation study. *Patient Education & Counseling*, 59, 69-79.
- National Collaborating Centre for Methods and Tools. (2011). *Engaging public health champions to garner support for innovations*. Hamilton, Ontario, Canada: McMaster University. Retrieved from <http://www.nccmt.ca/resources/search/91>
- National Council on Aging. (2012). *Evidence-based health promotion programs for older adults: Key factors and strategies contributing to program sustainability*. Washington, DC: National Council on Aging.

- Ory, M. G., Smith, M. L., Wade, A., Mounce, C., Wilson, A., & Parrish, R. (2010). Implementing and disseminating an evidence-based program to prevent falls in older adults, Texas, 2007-2009. *Preventing Chronic Disease*, 7, Article A130.
- Petrescu-Prahova, M., Belza, B., Kohn, M., & Miyawaki, C. E. (2015). Implementation and maintenance of a community-based older adult physical activity program. *The Gerontologist*. Advance online publication. doi:10.1093/geront/gnv024
- RE-AIM website. (n.d.). RE-AIM. Retrieved from <http://www.re-aim.hnge.vt.edu/>
- Rikli, R. E., & Jones, C. J. (1999). Development and validation of a functional fitness test for community-residing older adults. *Journal of Aging and Physical Activity*, 7, 129-161.
- Satterlund, T. D., Cassady, D., Treiber, J., & Lemp, C. (2011). Barriers to adopting and implementing local-level tobacco control policies. *Journal of Community Health*, 36, 616-623.
- Schiller, J. S., Ward, B. W., & Freeman, G. (2014). *Early release of selected estimates based on data from the 2013 National Health Interview Survey*. Retrieved from <http://www.cdc.gov/nchs/data/nhis/earlyrelease/earlyrelease201406.pdf>
- Sun, F., Norman, I. J., & While, A. E. (2013). Physical activity in older people: A systematic review. *BMC Public Health*, 13, Article 449. doi:10.1186/1471-2458-13-449
- Taylor, G. (2013). Nurse's health: Becoming a NMHP champion. *Australian Nursing Journal*, 21(2), 23.
- U.S. Department of Health and Human Services. (2014). *Healthy People 2020: Leading health indicators—Nutrition, physical activity, and obesity*. Washington, DC. Retrieved from <http://www.healthypeople.gov/2020/leading-health-indicators/2020-lhi-topics/Nutrition-Physical-Activity-and-Obesity/data>
- Wallace, J. I., Buchner, D. M., Grothaus, L., Leveille, S., Tyll, L., LaCroix, A. Z., & Wagner, E. H. (1998). Implementation and effectiveness of a community-based health promotion program for older adults. *The Journals of Gerontology, Series A: Biological Sciences & Medical Sciences*, 53, M301-M306.
- Woodall, J., Kinsella, K., South, J., & White, J. (2012). *Community health champions and older people: A review of the evidence*. Retrieved from <http://www.altogetherbetter.org.uk/SharedFiles/Download.aspx?pageid=4&mid=112&fileid=88>

Author Biographies

Christina E. Miyawaki, MSW, PhD, is an assistant professor in the Graduate College of Social Work at the University of Houston, and a Centers for Disease Control and Prevention's (CDC) Healthy Brain Research Network Scholar at the University of Washington Coordinating Center. Her current research interests include health promotion of older adults, and health disparities of elders of color and their family caregivers.

Basia Belza, PhD, RN, FAAN, is the Aljoya Endowed Professor in Aging in the School of Nursing and an investigator with the Health Promotion Research Center at the University of Washington. She is the lead of the CDC-funded Coordinating Center

for the Healthy Brain Research Network. Her scholarship focuses on improving the health of older adults through dissemination initiatives with a focus on physical activity prevention.

Marlana J. Kohn, MPH, is a research scientist at the Health Promotion Research Center, CDC Prevention Research Center at the University of Washington School of Public Health focused on healthy aging. Her research focuses on dissemination and implementation of evidence-based interventions for physical activity, workplace health and wellness, and colorectal cancer screening.

Miruna Petrescu-Prahova, PhD, is an assistant professor in the Department of Health Services at the University of Washington, and a core investigator with the Health Promotion Research Center. Her most recent work focuses on the dissemination and implementation of evidence-based programs for healthy aging, evaluation of public health networks, and development and evaluation of tools for facilitating clinical-community linkages.