

# Depressive symptoms and perceived general health as factors associated with 12-week attendance to a community based chronic illness rehabilitation programme: MedEx Wellness.

O'Leary, E<sup>1,2</sup>., McCaffrey, N<sup>1</sup>., Moyna, N<sup>1</sup>., Doyle, F. <sup>3</sup> ., Furlong, B<sup>1</sup>, Walsh, D<sup>1</sup> and Woods, C. <sup>1,4</sup>

<sup>1</sup>MedEx Research cluster, Dublin City University, Ireland.

<sup>2</sup>DCU Sport, Dublin City University, Ireland

<sup>3</sup>Division of Population Health Sciences, Royal College of Surgeons in Ireland, Ireland



## Introduction

The presence of chronic illness has been consistently associated with depressive symptoms[1,2], and both are associated with decreased physical activity[3]. This study forms part of a longitudinal observational study with the aim to explore and identify the variables related to initiation, attendance and retention at a community based chronic illness rehabilitation programme. This paper examines how level of depressive symptoms and perceived general health are associated with 12-week attendance at a CBCIR.



## Methodology

As part of a MedEx induction, all participants completed the MedEx Questionnaire.

### MedEx Questionnaire

- Demographics (Age, Gender)
- Factors associated with attendance to MedEx classes including:
  - PHQ8 (depressive symptoms) [4]
  - Perceived wellness (1 item)
  - Self report physical activity (2 items [5])



### Attendance Monitoring

➤ Attendance (defined as a visit to a MedEx class) was monitored by researchers from exercise session 1 for a period of 12 weeks.

### Statistical Analysis

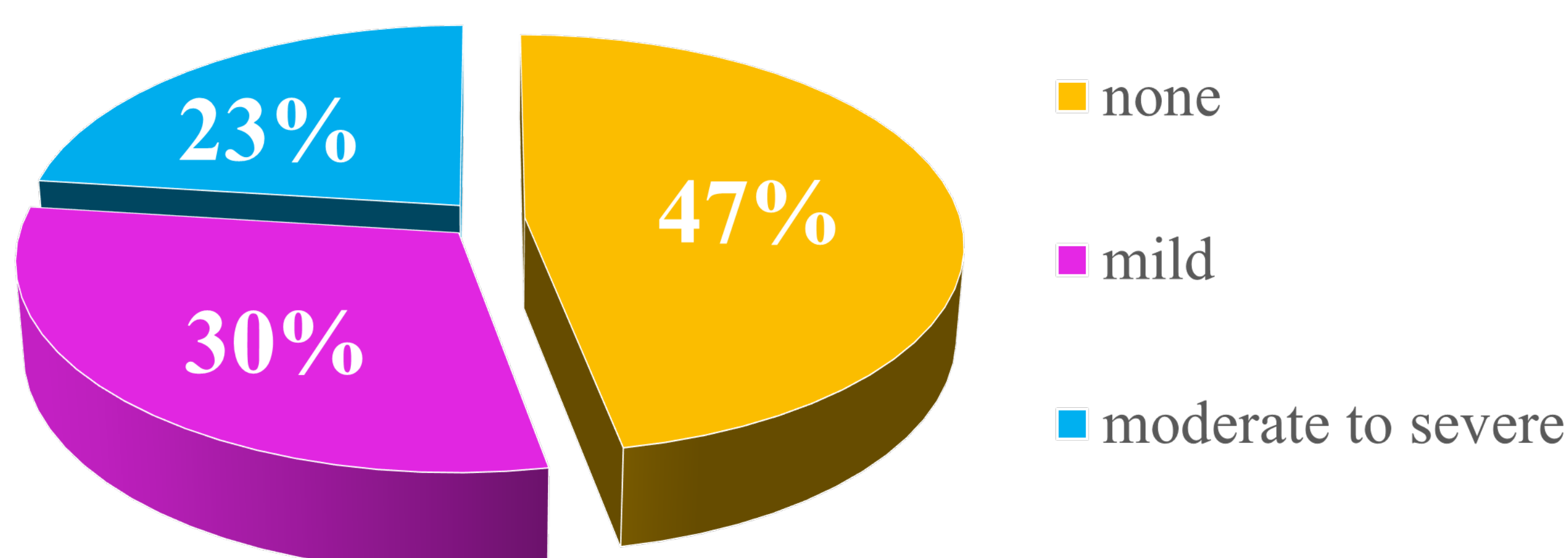
Data were input to SPSS, cleaned and checked for normality. Independent samples t-test and correlation analysis were used

## Results

A total of 156 (54% , 46% ) participants took part in this study with a mean age of 66.08±11.09 years.

- 18% reported their health to be excellent or very good, 42% good, and 40% fair or poor.

### Depressive Symptoms



Group differences were revealed in terms of perceived wellness and physical activity (days.30mins.MVPA) at baseline, individuals reporting their health as fair/poor were significantly less active than those in the very good/excellent health group (Fair/poor=2.68±2.12, very good/Ex=4.82±2.0, p<0.05).

Bivariate correlational analyses found a low but significant negative correlation between depression score and the number of sessions attended (r=0.189, N=156, p<.05).

## Discussion and conclusion

Most attendees at CBCIR programmes, though living with chronic illness, perceived their health as good and had no depressive symptoms. However, those with poor levels of perceived health were less active at entry; and the presence of depressive symptoms was negatively related to attendance. To reduce the likelihood of dropout, CBCIR programmes should design their induction session to cater for individuals who perceive their health as poor and who show depressive symptoms.

### References:

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Contact: emer.oleary@dcu.ie