E-Poster

EP-90

Identifying Gaps and Necessary Modifications in Exercise Guidance for Persons With Disabilities

Topic: Exercise

Simran Prakash

School of Medicine, University of Miami, Miami, United States

BACKGROUND

Physical activity remains poor for persons with disabilities (PWDs) due to physical inaccessibility, lack of education, dependence on caregivers, and sensory difficulties. No study thus far has analyzed accommodations for exercise to improve PWD health outcomes. By studying modifications made in the UK and in the US, this study is the first of its kind to evaluate gaps in exercise guidance faced by PWDs in healthcare settings. The study details necessary modifications that should be made for PWDs to optimize the effect of exercise on health management.

METHODS

The study took place at the Progression Across Transition in Healthcare (PATH) Clinic at the University of Miami. An anonymous survey was administered to participants with intellectual and developmental disabilities aged 18 years or older at the PATH clinic to assess their satisfaction with healthcare management of exercise and modifications needed for exercise. If a patient was unable to comprehend the survey or provide informed consent, a caregiver assisted with consenting and completing the survey on a voluntary basis. Developed with input from disability experts and prior validated needs assessments, the survey included five sections with about eight questions each. Questions assessed demographics, health-related behaviors, barriers, and satisfaction with physician-provided lifestyle recommendations. Quantitative data from Likert scales was analyzed via descriptive statistics, while qualitative data was analyzed in Excel to identify recurring themes (mixed methods). Satisfaction levels were compared with necessary modifications to determine gaps and areas of improvement for exercise recommendations.

RESULTS

Preliminary data has begun to identify a wide range of accommodations – e.g. fragrance-free zones, quieter rooms, personal trainers – to consider when providing exercise guidance to PWDs. Preliminary results suggest that PWDs understand exercise practices but do not receive adequate modifications from physicians tailored to disability. PWDs are satisfied with physician efforts and instead attribute these gaps to insufficient disability-specific education among healthcare providers. Data collection will continue into 2025 to further identify trends and refine these findings.

CONCLUSION

This study serves as a model for medical professionals to identify gaps in exercise treatment for PWDs. Ongoing data collection and analysis will assess healthcare inequities among PWDs and help develop a baseline database of accessible exercises for PWDs that can be disseminated to physicians serving PWDs globally.

Statement of Disclosures

None

Doi: 10.5606/archisprm.2026.EP-90

Corresponding Author:
Simran Prakash
School of Medicine, University of Miami, Miami, United States
Email: srp198@miami.edu