

### **OBJECTIVES**

By the end of the presentation, attendees will...

- 1. Recognize effective exercise prescriptions for women in prison.
- 2. Understand the benefits of exercise on the physical health outcomes for women in prison.
- 3. Understand the potential benefits of exercise on mental health outcomes for women in prison.

#### INTRODUCTION

- The majority of female prisoners enter prison in poor physical health.<sup>1</sup>
- Institutional factors, including the prison environment itself, may affect women's physical health.<sup>1</sup>
- Women in prison experience higher rates of mental and physical illness compared to the general population and also men in prison.<sup>2</sup>

#### INTRODUCTION

- Promotion of physical activity may improve the health status of women in prison.<sup>3</sup>
- Need to determine the most effective intervention programming to meet the needs of this population.<sup>4</sup>



#### PURPOSE

- Current research indicates a lack of physical activity programs available for women in prison.
- The purpose of this systematic review was to assess exercise interventions that promote physical wellness for this population.



#### METHODS

#### **Search Engines:**

 CINAHL, Cochrane, ProQuest, PTNow, PubMed, and ScienceDirect

#### **Search Limits:**

English, peer-reviewed, humans, adults(18+), 2009-2021

### SEARCH TERMS

(Exercise AND "Physical Activity")

**AND** 

(Prison OR Prisoner OR Jail OR Inmates)

**AND** 

Health

**AND** 

Intervention



# SELECTION CRITERIA

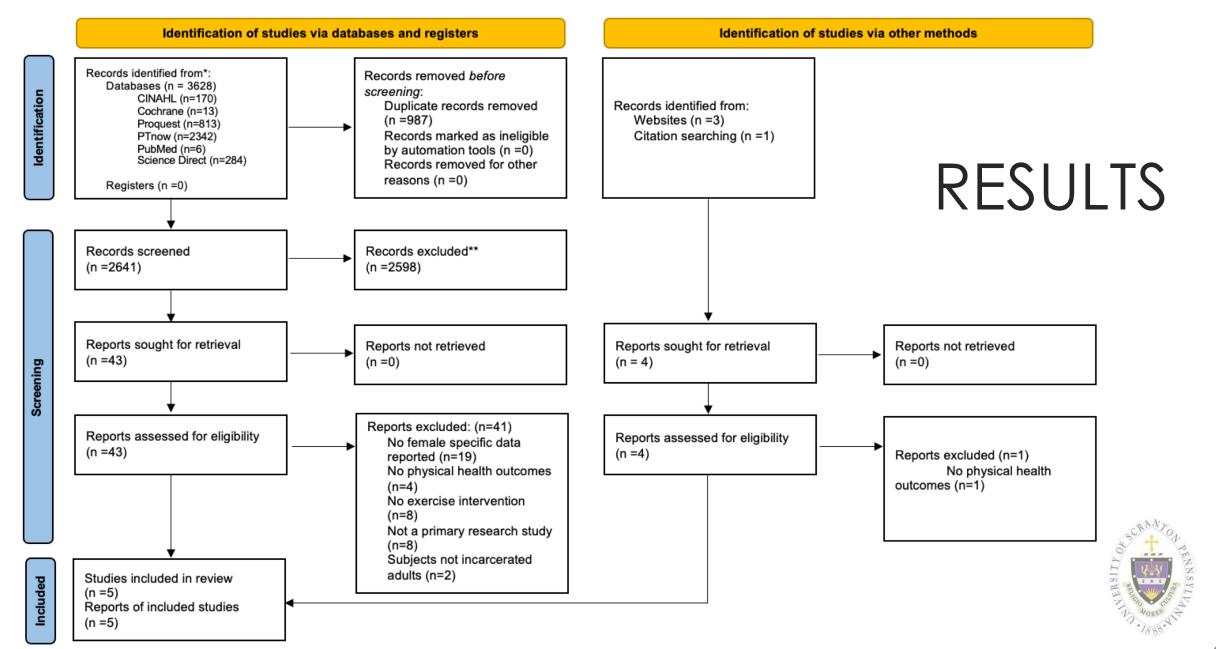
#### **Selection Criteria**

- Women in prison
- Exercise interventions
- Outcomes:
  - Physical Health/Wellness (primary)
  - Mental Health (secondary)

#### **Methodological Assessment Tool**

- Oxford Center for Evidence-Based Medicine 2011 (OCEBM)
  - Quantitative studies
- Joanna Briggs Institute (JBI)
  - Qualitative studies





#### RESULTS

- Range of Scores
  - $\circ$  Quantitative = 2 4 (OCEBM)
  - Qualitative = 8/10 (JBI)
- Total number of subjects (n) = 119
  - $\circ$  Range = 12 33
- Programs took place over 6 -12 weeks



# RESULTS

Physical Health Outcome Measures (Number of Studies)	Secondary Outcome Measures (Number of Studies)
Body-Mass Index (3)	Sleep (2)
Waist-to-Hip Ratio (1)	Energy Level & Stress (2)
Bust Circumference (1)	Mental Health (3) Happiness, hopelessness, guilt
Waist Circumference (1)	Resilience Scale (2)
Overall Physical Health (2)	Outlet for Anger & Frustration (2)
	Physical Manifestations of Stress (1) Nail biting, hitting, throwing



# SUMMARY OF QUANTITATIVE RESULTS

Author, Year	OCEBM Level and Design	Intervention	Key Findings	
Sumter et al. <sup>5</sup> (2009)	Level 2 Randomized Controlled Trial	Meditation and Mindfulness Activities	ness <b>emotions, nail biting behavior, guilt, and</b>	
Güney et al. <sup>6</sup> (2021)	Level 3 Non-Randomized Control Cohort	Jogging, Squats, Pilates, Walking	Decrease in BMI, waist circumference. Increase in happiness and resilience.	
Elwood Martin et al. <sup>7</sup> (2013)	Level 4 Case Control	Group Circuit Classes, Individual Program, and Nutrition Education  Decrease in chest size, waist-hip ratio, weight, and BMI. Improvement in energy level, sleep, and stress level.		
Johnson et al.8 (2018)	Level 4 Pilot Study	Pedometer, MyPlate and Education	<b>Decrease in BMI</b> and increase in resilience scores	

## QUANTITATIVE RESULTS

#### Statistically significant reductions:

- Body Mass Index (-0.40)
- Bust Size (-0.99 inches)

Statistically significant **improvements** for secondary health outcomes: (Likert Scale)

- ∘ Sleep (0.96)
- ∘ Guilt (-0.94)
- Hopelessness (-0.72)
- Nail biting (-0.35)
- Outlet for anger and frustration (-0.35)



# SUMMARY OF QUALITATIVE RESULTS

Author, Year	JBI and Design	Intervention	Key Findings
Gallant et al. <sup>9</sup> (2015)	8/10 Qualitative design	Softball Program	Improvement in mental health, overall physical health and mood. Reduction in stress and anxiety. Outlet of anger and frustration



### QUALITATIVE RESULTS

#### Qualitative improvements were noted:

 Overall physical & mental health, energy level, mood, anger management

#### Qualitative reductions were noted:

Stress & anxiety



#### CONCLUSIONS

- Exercise interventions, whether structured or unstructured, led to improvements in physical and mental health outcomes in women in prison.
- There were no adverse effects.
- Recent research has utilized varied outcomes and interventions.

#### LIMITATIONS

- Limited amount of women-based research available
- Small sample sizes
- Large variability in intervention types and parameters
- Varied outcomes measured
  - Self-report measures<sup>5</sup>
  - Likert Scale
- Lack of control group<sup>7,8</sup>



#### CLINICAL RELEVANCE

- Well-rounded interdisciplinary programs, including both structured and unstructured activities, are necessary.
- Physical therapists are uniquely qualified to address the needs in this population.



### FUTURE RESEARCH

- Goal to implement an exercise program for women in prison at the local Lackawanna County Prison
- Research optimal exercise intervention in prison populations
- Investigate the role and impact of PTs in prison settings
- Address women's health concerns in prison, specifically related to measuring the impact of exercise on physical and mental health



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