

FOOD AND ACTIVITY:

A Competence Enhancement Project for Persons With Developmental Disabilities and Caregivers

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BACKGROUND

In Norway persons with developmental disabilities live in community-based settings. Managers and caregivers are expected both to promote residents' health and to support their autonomy. Ideas that serve as guiding principles in today's care of persons with intellectual disabilities are Individualization and participation.

Persons with intellectual disabilities have the right to be included in the community and to make their own choices in everyday life. Persons with developmental disabilities both obesity and malnutrition are problems (Hove, 2004; Ruud, Raanaas, & Bjelland, 2016). In our municipality most persons with developmental disabilities have these problems. Staff shifts make it difficult to keep track of persons with developmental disabilities' nutritional status, diet and activity. Persons with developmental disabilities do not have sufficient knowledge or understanding relating to own diet.

The competence of the caregivers in the field of nutrition and activity varies much. They assist with grocery shopping, preparation, and implementation of meals, and follow up the wishes of users. The need for increase in competence in nutrition and physical activity, both persons with developmental disabilities and caregivers, is huge.

PURPOSE

The main purpose of the project is that persons with developmental disabilities should have a better diet and increased activity level.

METHOD

Quality improvement intervention involving persons with developmental disabilities and their caregivers.

RESULTS

Based on the cookery courses the caregivers and persons with developmental disabilities developed a spiral booklet with recipes and shopping list tailored to one person. Tuesday Club got a better structure with regular activities like disco, party games and fitness activities. Persons with developmental disabilities participate in planning what to eat and they also participate in cooking.

Persons with developmental disabilities and their caregivers made a walking trail in the neighborhood with 5 checkpoints where the person who walk the trail get a mark in a card with a ticket punch. Five marks give a reward.

CONCLUSION

Persons with developmental disabilities and their caregivers got better knowledge of how to conduct a healthier diet. Cooking courses gave the persons with developmental disabilities increased expertise on practical cooking, and how to make single servings. Spiral booklet helps persons with developmental disabilities and their caregivers planning purchase of healthier groceries. The caregivers seem the spiral booklet is useful for guidance and motivation. The walking trail leads to increased physical activity outdoors and now the persons with developmental disabilities demand more checkpoints.

KEYWORDS

Food and activity, Persons with developmental disabilities and Quality improvement intervention

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