

2014 Member Survey

Part II: Subgroup Responses and Discussion

RESULTS: SUBGROUPS

Several subcategories of respondents are of interest to NPAS leadership. Among these are

- People with the least amount of experience
- People with the most experience
- State health department employees
- Paid members, regular and student
- Local/community level workers (local nonprofits, local public health, and local health care)
- University respondents

Questions relevant to training needs are the main thrust of this section, Tables A through H in the appendix also look at certification, member benefits, and work status.

TRAINING NEEDS

Least Experienced Respondents

Twenty respondents answered that they had been working in physical activity for less than 3 years, with four of those less than one year. Seven of the 20 work at a statewide level of a public health department, with most of the rest working at the community level.

No single response on activities carried out often or sometimes received a majority (10 or more) votes. Common activities selected by these early career professionals were issuing messages on social media, building capacity of partnerships, and contacting partners to discuss physical activity.

For the question “how much experience have you had in the following PAPHS competencies,” responses were grouped in “some to none” or “good deal plus very much.” None of these answers received a majority in the “good deal plus very much” column, either. Due to the low number of responses, generalized interpreting for training purposes might be problematic.

Most experienced respondents

Contrast answers by those of the least experience with respondents who have the most experience. Applying the Survey Monkey filters of 5-10 years plus 10 years or more, 119 respondents answered Question 1 regarding activities they often or sometimes work on and Question 2 on how much experience they have in the list of PAPHS competencies.

These experienced respondents were likely to spend lots of time building the capacity of partners and contacting partners, just as the least experienced were, but they were far less likely to issue messages on social media (47% low experience, 37% high experience).

Competency areas ripe for training include these four, in which under half of the experienced respondents said they had a “good deal to very much” experience:

- use **media advocacy** to advance physical activity
- create and communicate appropriate physical activity information on **social media**
- know the **functions of governing bodies**, such as school boards, planning boards, and state agencies, legislatures, executive agencies, and courts at all levels
- interpret sources of data from professions outside of public health to inform program and policy development.

Table: Most Experienced (5 years+) Respondents

	Some to none—	Good Deal plus Very Much—	Total
Use media advocacy to advance physical activity (4.6)	72.88% 86	27.12% 32	118
Create and communicate appropriate physical activity information on social media (1.3)	72.03% 85	27.97% 33	118
Know the functions of governing bodies, such as school boards, planning boards, and state agencies (4.3), and roles of legislatures, executive agencies, and courts at all levels (5.4)	53.78% 64	46.22% 55	119
Interpret sources of data from professions outside of public health to inform program and policy development (2.5)	51.69% 61	48.31% 57	118
Use data to illuminate public health disparity and access issues (2.4)	47.90% 57	52.10% 62	119
Apply assessment skills for population-based physical activity, such as surveys, diaries, pedometers, and accelerometers (6.3)	44.92% 53	55.08% 65	118
Use theoretical frameworks and models to plan and	43.70% 52	56.30% 67	119

evaluate physical activity interventions (3.1)			
Use quantitative and qualitative analysis to document physical activity programs. (3.8)	43.70% 52	56.30% 67	119
Use public health data as a tool to develop community-based interventions (2.1)	38.66% 46	61.34% 73	119
Review and recommend best practices and procedures for PA efforts (2.3)	27.73% 33	72.27% 86	119

State health department employees

State health department employees (n=37) demonstrated familiarity with the best practices procedures and using public health data as a tool. They also reported better knowledge of the functions of governing bodies. Once again, media-related competencies reflected the least experience, with "create and communicate appropriate information on social media" and "use media advocacy" as the least likely to have "good deal to very much" experience.

Important and urgent training needs for state health department employees included these, which all had 50% or higher responses:

- Developing policies to support physical activity in rural settings
- Sustaining policy efforts
- Evaluating policy and environmental change interventions
- Communicating the value of policy and environmental change activities
- Analyzing policies for their public health impact
- Identifying appropriate policy strategies for different communities

Members (Regular and Student)

Twenty-six respondents indicated they have a paid membership, with 21 of those having regular membership and five student. Seven of these respondents have the PAPHS certification, with nine more indicating they have plans to become certified. Twenty have worked in physical activity more than 5 years. Most of the paid member respondents work full time on physical activity. Work settings included higher education (6 respondents), state level public health (6 respondents), K-12 school system (3), local public health and nonprofits, students, consultants, state nonprofits, and business.

Paid members were as likely to carry out the activities of contacting partners and building capacity of partnerships as others were. In the experience category, however, paid members were more likely to have used theoretical frameworks and models to plan and evaluate

interventions. They're also more likely to have applied assessment skills for population based physical activity.

Worksite policies (54%) ranked above rural policies (46%) in the needs of paid members. Communicating the value of policy and environmental change activities ranked third, with 42%.

Community level workers

Ninety-eight (98) respondents indicated working at the local level, with 70% having 5 or more years of experience.

Respondents at the local level matched the top two activities of others: Contacting partners and building capacity of partners for physical activity. The next most likely activities for local level people were:

- Issuing messages on social media
- Answering questions from the public on exercise physiology
- Writing promotional materials

For most urgent and important training needs, once again, worksite and rural policies took the top two spots. These were followed by two more receiving more than 50% response:

- Addressing the needs of high burden populations
- Conducting health impact assessment.

The top response from local level respondents on high priority activities for the NPAS is to increase priority on education to the public that physical activity has health benefits for all people, regardless of weight or weight-related goals. 65% respondents ranked this activity in the high priority category. Only one other activity netted more than 50% of responses for "high priority" -- expand resources available to professionals and their allies on physical activity in public health.

University respondents

Thirty-five respondents answered that "university or other higher education" best describes their employer. 82% of those have worked in physical activity 5 or more years, higher than respondents overall.

University respondents ranked the same two top answers as local level respondents, once again the only two that more than half of respondents ranked "high priority".

University respondents' highest ranked experience was for the skill "apply assessment skills for population based physical activity," followed by "use public health data as a tool to develop community-based interventions." They were as unlikely as others to "create and communicate appropriate physical activity information on social media."

Items ranked urgent and important by more than half of university respondents included:

- Developing worksite policies that support physical activity
- Identifying appropriate policy strategies for different communities
- Evaluating policy and environmental change interventions
- Conducting health impact assessment
- Developing policies to support physical activity in rural settings

MEMBERSHIP

Questions of particular interest among paid members are those affecting the direction of the organization. Paid members called for high priority on expanding resources available to professionals and their allies and for NPAS to become more of a national “thought leader” on PAPH. All except one of the choices, though, were ranked “high priority” by more than half the paid member respondents.

Most valuable benefits, according to paid members, are networking, webinar trainings, newsletter, website resources, the discount to the *Journal of Physical Activity and Health*, and the ability to inform state or local policy. Avenue to obtain continuing education and involvement in developing or implementing national initiatives also were selected by more than 5 each.

Table H in the appendix shows responses for membership benefits by membership status. One benefit selected more consistently among paid members is networking.

For respondents overall...

Seven choices were provided for organizational direction to be ranked by low, medium, or high priority. For interpretation, we combined the data in two different ways. Table A-1 in the appendix shows Low/Medium combined into one category with High priority separated out. This table showed that national involvement (both as a “thought leader” and in policy development and policy education) was highest priority.

Table A-2, though, combines choices Low priority versus Medium/High priorities combined. This table shows the top two responses as professional development activities: expand professional development and training opportunities for members and expand resources available to professionals and their allies on physical activity in public health.

PAPHS

Twenty-one respondents are certified as Physical Activity in Public Health Specialists. PAPHS were asked why they pursued certification:

Tangible demonstration of my knowledge and skills	57.14%
	12

Gives me an instant level of credibility	33.33% 7
Makes me more competitive with other job candidates who are licensed (RNs, RDs, etc.)	28.57% 6
It was a personal goal	38.10% 8
Demonstrates my commitment to ongoing education and growth in the field	66.67% 14
Sets me apart from others working in the field	33.33% 7

PAPHS want to see NPAS more involved in policy efforts nationally. Becoming a national “thought leader” also ranked high.

DISCUSSION

The major implications of the survey are on training needs and direction of the organization. The survey also provides a profile description of members.

Profile

Members of the National Physical Activity Society are experienced in physical activity for public health. Nearly half have been in the field more than ten years, with 70% having five or more years of experience. Members work part time or full time in physical activity, alone and with others. They are as likely to work at the local community level as they are at state, national, and international levels combined.

The membership is enthusiastic and eager to share its opinions and knowledge. The survey response of 173 complete responses (and 183 who answered at least one question) shows commitment to public health physical activity and an interest in how the National Physical Activity Society serves its members and allies.

The National Physical Activity Society’s predecessor organization, the National Society of Physical Activity Practitioners in Public Health, focused its membership primarily on state health departments. The new expanded membership model of NPAS still has a core participation from state health departments (37 such workers responded) but is demonstrating a wider reach.

Training Needs

Media was a clear winner in training needs, both media advocacy and social media messaging. This medium for communication was consistently ranked low in experience. The highest use was among the least experienced respondents, suggesting that despite recommendations of social media experts, organizations still leave their social media messaging to younger and less experienced professionals.

Respondents want assistance with these professional development and training needs:

1. Developing worksite policies that support physical activity
2. Developing policies to support physical activity in rural settings
3. Identifying appropriate policy strategies for different communities

Students also wanted help with communicating the value of policy and environmental change activities.

Community level workers want training on health impact assessment.

Experienced members offered insight into areas of proficiency. Training implications might be to prepare and promote advanced training in some of these areas and/or to invite experienced members to present on the topics (in parentheses is the percentage that answered “good deal to very much”):

- review and recommend best practices (72%)
- use public health data as a tool to develop community based interventions (61%)
- use quantitative and qualitative analysis to document programs (56%)
- use theoretical frameworks and models to plan and evaluate physical activity interventions (56%)
- apply assessment skills for population-based physical activity (55%)
- use data to illuminate public health disparity and access issues (52%)

PAPHS

Comments on the certification questions might be interpreted as potential Physical Activity in Public Health Specialists not seeing the relevance of certification. Only 21 of the 350 certified PAPHS responded to the survey. When asked why PAPHS pursued the certification, respondents chose a variety of answers, indicating several avenues of promotion for the certification.

Organizational Direction

Grouping responses to the organizational direction question by those who thought an activity should be medium or high priority resulted in different responses than those who rated an activity only as “high.” The top two choices in each grouping, however, were related to each

other. Looking at the overall answers through a lens of what *paid* members selected, the top two activities then are becoming more involved nationally and expanding resources and training available to professionals. Notably, though, six of the seven organizational direction choices were placed in medium or high priority category by more than 80% of respondents. Our public education message, *Increasing priority on education to the public that physical activity has health benefits for all people regardless of weight or weight-related goals*, was voted medium or high priority by 144 respondents. This message is not being promoted heavily by other organizations.

CONCLUSION

An engaged 173 people finished the 2014 spring survey of National Physical Activity Society membership, providing a profile of public health physical activity workers, recommending training needs, and indicating priorities for organizational direction.

Highly experienced members at the community, state, and national levels identified needs for training in worksite and rural physical activity policy. They also indicated lack of experience with social media and media advocacy. Webinar trainings and the newsletter were popular benefits of involvement with NPAS. With 70% of respondents working in this field for 5 years or more, training should be aimed for those at an advanced level unless specifically noted.

Members indicated several activities that should be of medium or high priority for the National Physical Activity Society. Interpreting by those who paid for membership, the highest priorities should be becoming more involved nationally (in both policy education and thought leadership) and expanding resources and training available to professionals. NPAS' unique public education message also received support.

###

2014 Membership Survey
The National Physical Activity Society
Pam Eidson, MEd, PAPHS
Executive Director

Special thanks to action team chairs and to board member Hillary Hanson for assistance on the survey and its interpretation.