

# Keko-rehabilitation for people with intellectual disabilities supporting their healthy lifestyle and engagement in work

## Background

The life expectancy of individuals with intellectual disabilities (ID) has increased, even though the risk for health conditions is high because of a sedentary lifestyle, poor diet, and poor self-care. Keko-rehabilitation is a program for adults with ID to promote a healthy lifestyle which facilitates engagement in major life areas, such as work. The program exploits community-based rehabilitation.



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## Aim and Method

The aim of Keko-rehabilitation is to improve functional and working ability among adults with ID. During the pre-orientation (fig 1.), the rehabilitees familiarize with rehabilitation themes (physical activity, nutrition, and self-care) by evaluating their own lifestyle behavior. In the next stage, participants increase their knowledge of healthy lifestyle theoretically and practically. They set their own goals to reduce the individual health risks. During the self-monitoring and in the second intensive period, they pursue and strengthen healthier lifestyle changes in their daily life with the support of their counselors and close ones. The rehabilitation ends with a group discussion with the counselors. The purpose of the discussion is to encourage the continuation of a healthy lifestyle. Measurements of rehabilitation are blood pressure and -sugar, weight, BMI, a six-minute walk, one leg balance and hand grip test.

## Results

To test possible rehabilitation effects on participant's outcomes paired samples t-test was used. The measurements showed positive effects on health and physical functioning. A significant effect was found on weight, BMI, one leg balance and hand grip test (table 1.), but not on blood pressure and -sugar or six-minute walk test. In addition, participants experienced that the knowledge and skills of the health behavior have improved. The statistical analyses were performed using the IBM SPSS Statistics 24. The total amount of participants in the study of Keko rehabilitation is 66.

## Discussion and Conclusion

So far the findings suggest that the health promotion is important for the target group. The rehabilitation can lead to improvements in health behaviour. We have a reason to believe that Keko-rehabilitation may have positive effects on functional and working ability, although further accurate scientific research is needed.

## Lessons Learned

Our findings indicate that adults with ID benefit of community-based rehabilitation. The combination of active agency and support of the counselors and close ones are crucial components in rehabilitation.

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Fig 1. The rehabilitation path of the participants

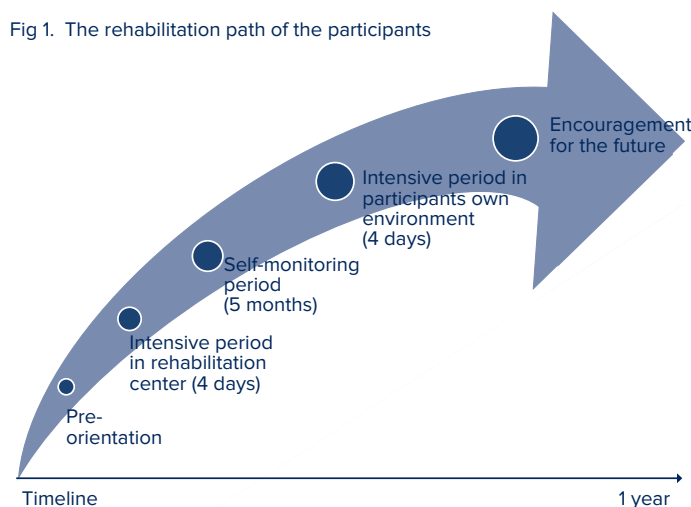


Table 1. The paired samples statistics and significance levels between pre- and post-tests.

	N	Pre-test (sd)	Post-test (sd)	Mean difference (95 % CI) <sup>1</sup>	P-value <sup>2</sup>
Weight (kg)	66	77,7 (17,2)	76,3 (17,1)	1,4 (0,7; 2,2)	<0.001
BMI	66	28,3 (5,7)	27,8 (5,7)	0,5 (0,3; 0,8)	<0.001
One leg balance, right (s)	66	15,8 (23,0)	25,6 (29,8)	-9,9 (-14,1; -5,6)	<0.001
One leg balance, left (s)	66	11,6 (18,0)	22,2 (27,7)	-10,6 (-15,9; -5,3)	<0.001
Hand grip, right (kg)	66	32,1 (10,5)	33,8 (11,0)	-1,7 (-2,7; -0,6)	0.003
Hand grip, left (kg)	66	30,9 (9,4)	32,2 (10,4)	-1,3 (-2,4; -0,2)	0.025

<sup>1</sup>confidence interval

<sup>2</sup>paired samples t-test