## THE GERONTOLOGICAL COMPETENCIES FOR ACCREDITED KINESIOLOGY PROGRAMS

The U.S. Department of Health and Human Services reported that only 23% of adults meet recommended physical activity guidelines, with rates declining with age and among individuals with chronic conditions (CDC, 2023). Physical inactivity is strongly associated with obesity, cardiovascular disease, diabetes, and reduced functional mobility, highlighting the importance of preparing the Kinesiology workforce to address these challenges (Smith & Johnson, 2024). However, many Kinesiology programs do not include targeted training in evidence-based interventions for diverse populations, creating gaps in workforce readiness.

While the American Kinesiology Association (AKA) and National Association for Kinesiology in Higher Education (NAKHE) do not have accreditation standards specific to aging, the following competencies are recommended and aligned with core accreditation domains:

- 1. <u>Evidence-Based Approaches to Kinesiology</u>: Apply principles of biomechanics, exercise physiology, and motor behavior to design, implement, and evaluate physical activity programs; analyze and interpret data from fitness assessments, wearable devices, and population-based studies on physical activity trends.
- 2. <u>Health & Human Performance Systems</u>: Compare local, national, and global strategies for promoting physical activity and wellness; understand how social determinants, accessibility, and systemic inequities influence participation in exercise and sport.
- 3. <u>Program Planning & Management</u>: Assess the physical activity needs of diverse populations; design culturally relevant interventions (e.g., youth sports programs, senior fitness initiatives, adaptive exercise programs); manage resources and budgets for wellness programs; evaluate program effectiveness.
- 4. <u>Policy in Kinesiology</u>: Understand policies affecting physical activity, sport, and human performance (e.g., school physical education mandates, workplace wellness incentives); advocate for inclusive, evidence-based practices; evaluate the impact of policy on equity in access to physical activity opportunities.
- 5. <u>Leadership & Communication</u>: Lead teams in fitness, rehabilitation, and sport contexts; communicate exercise guidelines, safety instructions, and motivation strategies effectively to clients, athletes, and communities.

Best practices for implementation include:

- Curriculum Integration: Embed evidence-based kinesiology content throughout undergraduate and graduate programs, ensuring competencies are reinforced through practical labs, internships, and real-world projects (American Kinesiology Association, 2018).
- Faculty Development: Provide specialized training and incentives for kinesiology faculty, including workshops on emerging exercise science, applied technology, and interprofessional collaboration (National Academy of Kinesiology, 2020).
- Experiential Learning: Encourage fieldwork, clinical placements, and community-based fitness initiatives to apply theoretical knowledge in diverse settings (Thompson & Miller, 2019).
- Interprofessional Education: Promote interdisciplinary education and collaboration with healthcare, rehabilitation, and wellness teams to prepare students for integrative practice (American College of Sports Medicine, 2021).
- Community Engagement and Collaboration: Partner with schools, community centers, healthcare organizations, and local governments to ensure programs are responsive to population needs and promote equitable access to physical activity (Trust for America's Health, 2022)..
- Global Competency Frameworks: Incorporate competencies such as leadership, advocacy, cultural competence, digital literacy, and interprofessional collaboration, preparing students to promote physical activity and functional health across diverse populations and contexts worldwide (Rodriguez & Carrillo-Alvarez, 2023).

## References

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