



The Many Benefits of Walking

Hosts: Rebecca Gillett, MS OTR/L and Julie Eller

Guest Speaker: Leigh Callahan, PhD

Walking is proven to be one of the best treatments for arthritis pain relief. Yet as many as 43% of arthritis patients surveyed have told us that they have great difficulty walking or cannot walk even 15 minutes. The Arthritis Foundation's Walk With Ease program is designed to help even those who have the hardest time walking find ways to gradually begin and build up to a regular walking routine.

In this podcast, Dr. Leigh Callahan, who was instrumental in developing the Walk With Ease program, talks to Rebecca and Julie about the importance of physical activity and how walking in particular can help relieve pain, improve range of motion and flexibility, and increase strength and endurance in people living with arthritis.

Dr. Callahan advises how to "start where you are," even if that's in a sitting position, and to build up slowly with achievable goals. She talks about ways to find support and motivation and how to gradually create a walking routine to help your physical as well as mental health.

Leigh F. Callahan, PhD, is a scientist and professor at the University of North Carolina at Chapel Hill who specializes in arthritis and outcomes research, physical activity interventions and health disparities. She serves as associate director of the UNC Thurston Arthritis Research Center, is Mary Link Briggs Distinguished Professor of Medicine, professor in the Departments of Social Medicine and Orthopedics and Adjunct Professor of Epidemiology. Dr. Callahan is also director of the Osteoarthritis Action Alliance.

Additional Arthritis Foundation resources:

The Walk With Ease program can be done in a group or individually. Learn more, get the guidebook and get tools to track your progress online at <https://www.arthritis.org/health-wellness/healthy-living/physical-activity/walking/walk-with-ease>.

Set a goal to join the Arthritis Foundation's Virtual Walk to Cure Arthritis on May 16th. (<https://www.arthritis.org/events/wtca>) Sign up and start walking now!

Help make a difference for yourself and others living with arthritis by sharing your insights at [arthritis.org/insights](https://www.arthritis.org/insights).

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LIVE YES! WITH ARTHRITIS PODCAST:
THE MANY BENEFITS OF WALKING
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PODCAST OPEN:

Welcome to Live Yes! With Arthritis, from the Arthritis Foundation. You may have arthritis, but it doesn't have you. Here, you'll learn things that can help you improve your life and turn No into Yes. This podcast is part of the Live Yes! Arthritis Network — a growing community of people like you who really care about conquering arthritis once and for all. Our hosts are arthritis patients Rebecca and Julie and they are asking the questions you want answers to. Listen in.

Rebecca Gillett:

Welcome to the Live Yes! With Arthritis podcast. I'm Rebecca, an occupational therapist living with rheumatoid arthritis.

Julie Ellers:

And I'm Julie, a JA patient who's passionate about making sure all patients have a voice.

Rebecca:

Thanks for tuning in. Today we're talking about walking with arthritis. Julie, I don't know about you, but this whole stay-at-home thing has me out walking around my neighborhood more. And since walking and hiking are two of my most favorite ways of staying active, I'm at least grateful to be taking breaks from work. Have you found yourself out walking more?

Julie:

Yeah, I absolutely have. I feel so much joy when I step outside of my house that I'm in 24/7 and feel the sunshine on my face and that breath of fresh air. Oh, that's relief to me. So, I've been out walking quite a bit. My family and I are hunkering down in Tennessee, and I didn't bring my bike. So walking is my number one source of movement, stress reduction, and it can just be so beneficial to my day and stress level.

Rebecca:

My husband and I have been going on those walks a lot, and it's not something you'd normally do in the middle of the day or afternoon. It's been a good time to catch up, so it's been a good time to connect. There's the mental health and physical health pieces to it.

Julie:

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Getting that break from looking at a computer screen and just enjoying the outdoors, absolutely essential.

Rebecca:
Everything's blooming, it's spring.

Julie:
It's a good reminder that life is here. And it's real and beautiful. It's been very helpful for me in that way.

Rebecca:
One of the things that make me sad... It's spring, and we usually do have the Arthritis Foundation's Walk to Cure Arthritis this time of year. It's something my family and so many families who participate and look forward to every year. But with the COVID-19 crisis, the Arthritis Foundation made that difficult decision to cancel in-person events to keep everyone safe. So, it's a really tough time for us in the Arthritis Foundation community.

Julie:
That's right. But this year, we're going to have the first Virtual Walk to Cure Arthritis experience. It's going to be on May 16, making sure we can have safety as our priority. And make sure that many people with arthritis who are at high risk of severe illness, if they contract COVID-19, because of their age or their underlying conditions or their weakened or suppressed immune systems, have the opportunity for connection, for their movement, and for this really amazing community event. So, with our virtual walk as a theme: It's Give 54 ... Tell 54 ... and Move 54.

Rebecca:
That's right. It's all one day, May 16, but it's the same mission. So, together we're going to honor the 54 million Americans battling arthritis like us. The whole 54 campaign is about being able to participate virtually and honoring all of us with arthritis, but also: To Give 54 is about raising funds online to reach your goal and beyond; Tell 54 is about recruiting your family and friends to join your team to help support us; or Move 54 by keeping your momentum going ... Going out on a walk and share how you're moving; Whether it's walking or yoga or whatever it is. Share how you're moving. And most importantly, Julie, what do we want people to do?

Julie:
We want you to Share Your 54. We want to see and feel that sense of connection you've had in person. We want to feel that virtually. On social media, upload and share a video of how you're living your 54. Whether you're giving or telling or moving — whatever it might be. Tag the Arthritis Foundation and use the hashtag #walktocurearthritis. You can also email us your videos, and we'll be happy to see them in our inbox.

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Rebecca:

The virtual event will take place on our Facebook page nationally, but also on your local Facebook pages. Participate. Go on a walk with your family. And when you're done, at 4 p.m. Eastern Time on May 16, get on Facebook and share your stories. There will be lots of fun stuff happening live on Facebook. Hopefully you can join us for that.

Julie:

That's right. And you can use any kind of movement that gives you joy. I saw a great video the other day of someone using 54 seconds to tie a bow tie. It was one of the ways they were going to help us raise funds to cure arthritis and for arthritis resources and programs for our community. So, however you move, just move with us. We're really excited to have it all come together on May 16.

And right now, we know that walking can be really difficult when you have arthritis. When you're experiencing that pain of a flare and stiffness. But we have some lead time ahead of our May 16 date. So, it's a perfect time to start thinking about those baby steps you can take to getting comfortable walking with arthritis. Today, we're going to be talking with one of our experts about walking with ease and walking with arthritis: Dr. Leigh Callahan.

Rebecca:

Walking is such a great way to get moving. But I know there are definitely days I can't even think about going on a walk because of pain. Pain I've been having in my feet the past several months has really made it difficult some days. I know I'm not alone. There are so many people with arthritis who experience this.

Julie:

We know that walking with arthritis can be one of the most difficult things to get started, especially when you're in a flare or experiencing pain. So today, we're talking to the expert: Dr. Leigh Callahan.

Dr. Callahan is the associate director of the Thurston Arthritis Research Center at the University of North Carolina, Chapel Hill. She's also the director of the Osteoarthritis Action Alliance. She was the principal investigator of the community-based intervention trial that established the evidence base for the Arthritis Foundation's Walk With Ease program. She's truly the expert, and we're glad to talk to her today. Welcome Dr. Callahan. Thanks so much for joining us.

Dr. Leigh Callahan:

Thank you for having me.

Julie:

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We're really glad to talk to you about the benefits of walking and how they can help treat arthritis. And if you don't mind just starting off telling us a little bit about why walking can be a therapy for people with arthritis, that would be great.

Dr. Callahan:

Well, walking, as we all know, any type of physical activity, is good for us. It can reduce anxiety, reduce your blood pressure, body fat percentage, depression, help with falls and fractures. And walking is one of the easiest activities that someone can do. And for arthritis, we found that walking can improve pain, lower pain levels, lower stiffness, increase flexibility and reduce disability for the individuals who walk.

Rebecca:

Yeah. There are so many benefits. And it's free, right?

Dr. Callahan:

It is free, and it can be done at your own time, and at your own pace, and in your own environment.

Rebecca:

For our listeners who may have participated in our Live Yes INSIGHTS study... There were 43% who said that they could not walk for 15 minutes or had a very difficult time trying to walk for up to 15 minutes.

Dr. Callahan, for people like that, how do we get them to take that first step?

Dr. Callahan:

Although walking is a great exercise and inexpensive, many people just can't. My stepdaughter has rheumatoid arthritis, and the joints most affected and that hurt are in her feet. So, she needs to swim or ride a bicycle. Regardless of whether you are walking, going to the pool or riding a bicycle, or doing something where you're not bearing the weight on your feet.

Rebecca:

Yeah. I do a little bit better if I take a hot shower, or sometimes even if you just soak your feet, then they feel better. But I always like to remind people, you can do some stretches and exercises while you're seated, and that can help strengthen those muscles that need to support your joints, so that you can do a little bit more walking and weight bearing.

Julie:

That's a great point, Rebecca. I'm wondering, Dr. Callahan, do you have your top three tips for getting started?

Dr. Callahan:

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Well, I think that the points that were just mentioned about stretching and flexibility are quite important. The other issue is to really make sure you have the appropriate shoes, socks and clothing. Having shoes where the insole matches the arch of the foot, and that the soles are made from a foam or a material that's cushiony, and the right heel grip and toe box and proper fit. So that someone feels like they are comfortable in their shoes. And picking appropriate sock material. We don't think about socks, but those make a difference, too. And then having comfortable clothes.

Having the appropriate wear is important. Stretching, and then also starting slowly, starting with whatever point you can do. If 10 minutes at any pace is what you can do, start there, and feel good about going those 10 minutes.

Julie:

I think that's a great way to think about it. Start where you are. Remember to make it specialized to you and your needs. And one of the things we've talked about in a couple of our conversations about physical activity is that you can do it in short bursts. That it doesn't have to be 10 minutes all at once. It can be one minute, and then an hour later, another one minute, and that it adds up over the day.

Dr. Callahan:

Right. The most important thing is to feel good about moving. I think when people see goals of 10,000 steps a day, it's so overwhelming. They don't take the first step.

Julie:

That's right. I think the number can be really intimidating sometimes. That's absolutely right. So, setting it as a goal for joyful movement, that's a great tip for how we can approach a walking routine.

Rebecca:

So, you mentioned stretching and how important it is to do that. I do know that before I get out of bed, if I do some stretches for my calves and my feet and my legs and my hips, when I do go to stand up, it's so much better, versus if I jump out of bed and try to just stand and start walking. Is there a stretching routine that people are supposed to try to do before they walk?

Dr. Callahan:

In the Walk With Ease workbook, there are a range of proposed stretches that are valuable. But also I think it's good for people to think about stretching, not just which stretches, but to think about the form and the appropriateness in their stretching, so that people should stretch just until they feel tension and hold that in place, but not go too far. They need to stretch gently and smoothly and not bounce, but just stretch gently and try to do both sides, both your right and left sides. And the thing I think we all forget, not only with stretching, but also strengthening and even any type of physical activity, is to breathe.

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(laughter)

Rebecca:

Yeah, it's a little bit important. Yeah.

Julie:

That's so right.

Dr. Callahan:

So, those are key things to remember, regardless of whether you're stretching or strengthening or walking. But in terms of... you mentioned your calves; it's important to do your calf muscles, your hamstrings, your hips are another joint or another area to stretch, and your quadriceps. So, those are kind of the areas that we think about, and your iliotibial bands, thinking about when you're trying to do your stretching. Think through those muscle groups and those areas.

Julie:

That's great. So, Dr. Callahan, can you tell us what Walk With Ease is for our listeners who are unfamiliar?

Dr. Callahan:

Yes. So, Walk With Ease is an Arthritis Foundation program that was developed to help people learn to walk safely and comfortably. There is a workbook, and also individuals can go to classes. The workbook is used in both the classes, or somebody can just use it as a self-directed workbook themselves. It's guided for six weeks and offers people a way to start where they are in their physical activity world. The book provides guidance in terms of planning your exercise program. And when someone thinks of planning their exercise program, they think of the FITT. I don't know if you're familiar with that.

Rebecca:

Can you explain that to us?

Dr. Callahan:

Yes. So, it stands for... it's F-I-T-T. F for frequency. So that's how frequently you go for walks and how long. If it's starting out to try to walk a frequency of once or twice a week, that's fine. The I stands for intensity, and that's how hard you're working. And the goal is to have low to moderate intensity. You're working hard enough that you feel like there are some changes in your body. Like maybe you're breathing a little faster, or your heart rate might be going up a little, or you're using some muscles, but you're not working so hard that you're out of breath. You can still carry on a

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conversation with someone. We're aiming for feeling like, "OK, I'm doing something, but I can still talk normally."

Julie:

So, is it good to go with a partner if you're taking these 30-minute walks?

Dr. Callahan:

I think it's good to go with a partner for a lot of reasons. One, you can gauge your intensity that way. Two, your buddy is going to help you keep on coming out and doing the walk day after day. If you're responsible to someone else, you're more likely to do it. Accountability means a lot. A pet can help you be accountable as well.

Rebecca:

Yes. And they will walk you.

Julie:

Yeah, they will walk you. (laughs)

Dr. Callahan:

(laughs) That's what mine do.

Rebecca: Yes.

Dr. Callahan:

Too many people on the streets say, "Who's walking who?"

Rebecca:

It's good for dogs, too, because they can get arthritis.

Dr. Callahan:

They can. So, we've gone frequency, intensity and the first T is time. And so that's how long you're doing it. Any number of minutes is great to start. So, trying to work up to 10 minutes is great. And then move up from there. But you don't want to increase your time too rapidly.

And the last T is for type of exercise. So, it could be walking, as we're talking about in the Walk With Ease book. Maybe walking isn't for everyone. These principles apply to any type of physical activity. You want to think about your frequency, your intensity, the time you're doing it, and then apply that with whatever type of exercise you're doing.

Rebecca:

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So, it's just a great guide to just getting started.

Dr. Callahan: Exactly.

PROMO:

We want to hear from you. Tell us what you think about the Live Yes! With Arthritis podcast. Go to arthritis.org/liveyes/podcast and look for the podcast survey.

Rebecca:

So, when we're talking about walking though, what are the good body mechanics?

Dr. Callahan:

Well, we want to make sure that you keep the head up. Don't jut your head forward or lead with your chin. Shoulders need to be relaxed and not hunched, so that you're just to have a relaxed posture. You want to be able to breathe, as we were talking about breathing deeply.

Julie:

Yeah. (laughs) Don't forget it.

Dr. Callahan:

(laughing) Yeah, don't hold your breath. Have your stomach muscles tighten lightly. And swing the arms naturally. Not some sort of exaggerated swing, but just a natural arm swing and not clinching the hands in a tough fist. And taking strides that are appropriate for your leg length. Not too long or something you would, you know, waste energy. Just an appropriate, natural stride.

Julie:

I think if I think about good body mechanics while I walk, I'm going to start walking like a robot. (laughter) I'll be thinking about it way too hard. But then eventually... (laughter) ...it'll get to become a natural gait there. That's really helpful to think about, 'cause you kind of want to walk tall.

Dr. Callahan:

Yes. It's a little bit like thinking of a string attached to the top of your head and not pulling you taut, but just keeping you upright and in a nice posture.

Julie:

I love that visual. That's helpful for me.

Rebecca: Yeah.

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Julie:
I just sat up a little bit taller as you said that.

Rebecca:
While you were talking about it, I adjusted my posture. (laughter) And you have to listen to some good music to keep you going.

Julie: Oh yeah.

Rebecca:
I like listening to music or... I'm not even joking though, I did listen to one of our podcast episodes, the final version of it...

(laughter)

Rebecca:
...and here's the awesome thing: I left my house, turned it on and the episode was 22 minutes long, and I got back to my house right as it finished.

Julie:
That's a perfect lap.

Rebecca:
So, I walked 22 minutes. Yeah. But I love to listen to music if I don't have somebody I'm talking to when I'm walking. I think it kind of keeps me going and it keeps me at a pace.

Julie:
This is a shameless plug for everybody to listen to our podcast and take a walk. (laughs)

Rebecca:
So, you talked about how important attire is, and shoes, and being comfortable. What about where I walk?

Dr. Callahan:
It does matter where you go walking and it matters a lot if you have arthritis to try to have even surfaces so that you're not on some type of surface where you could get off balance. Or with a lot of, you know, roots or gravel, that type of thing. That's very helpful. If you're going to be walking somewhere where you might be going out a distance and then coming back, or a route that you think may be a little longer, it would be useful to think about if there are benches along the way

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where you could rest or stop for a little bit. Particularly if you were going in a park that had a nice walking trail, you might want to see, you know, see if there are benches appropriately spaced. Another thing is to think about the incline. Make sure that it's flat and that there's not a lot of hills to deal with.

Rebecca:

Yeah, that's important, because if you're just starting out and there's a big hill, you're going to have to walk up. That is not going to make it easy on you.

Dr. Callahan: No. Many people find walking in malls useful as well because often they have benches and they're flat, and a lot of malls are open for people to walk before their workday starts.

Julie:

That's a really interesting idea, especially if you live in an area where the weather might not be great for you to walk outside or something like that. It would be very dangerous for me. I would go on a major shopping spree every day. (laughter) Not the best thought for me to exercise, but I can certainly see the value, (laughs) heading to the mall.

Dr. Callahan:

Before the stores open...

Rebecca: Yes.

Julie:

That would be my control. (laughter) My discipline.

Rebecca:

Well, and I know like, I live in Colorado and it is hard. It was very unseasonable to be able to go on a walk recently. So, our rec centers often have a track that's indoor that you can use. That seems to be a common thing. Right?

Dr. Callahan:

That's a very common thing. The malls are good if the rec centers are not free for all. Often, their tracks are really nice because they're not that long around and you can stop.

Rebecca:

If you feel something needs to be stretched out that maybe you didn't stretch out before, or something's starting to hurt: Stop and rest, take a drink of water and then start again. Right?

Dr. Callahan:

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Exactly. And you just brought up a very good point. Hydration is important when walking, making sure that you do, you know, drink appropriate amounts of water.

Rebecca Gillett:

Yes, very much so. I always have to have a good glass of water before I start. And I always have to bring some with me, because if I'm getting to the point where I can still talk but I might be a little bit out of breath, then I'm definitely gonna need some water to stop. But it gives you a natural break to take a rest.

Julie:

Yeah. Dr. Callahan, do you have any recommendations on the best way to carry water with you when you're taking a walk?

Dr. Callahan:

My recommendation would be to think about carrying a lightweight backpack or looking into some of the fanny type packs that they have. They're often for runners, but they could be just, you know, in a running store. But they're good for walkers where they will hold a water bottle, and you can just wrap that little belt around your waist and not have to have your hands holding the bottle.

Julie:

That's a great idea. And I think also when you're wearing a backpack like that, or a fanny pack like that, if it's built for exercise, I almost feel like I'm putting my costume on and I'm getting into character. Julie, the exerciser. (laughter) And it becomes a little easier to stay active, in the right head space.

Rebecca:

Yeah. One thing that's different about this program is that there's actually a piece about making a contract. Can you tell us about that?

Dr. Callahan:

Yes. That is a very important piece of anything you are doing, starting any type of program. And the contract... we have individuals sort of think about, "OK, what are my goals? How am I going to keep the records for the goals?" And testing their progress and looking at their plan every week. And best of all rewarding yourself and then making a new contract. (laughter)

So, I think, you know... let's say somebody has not been moving at all. They need to think through, "OK, what can I realistically do?" And if it is, "I'm going to walk 10 minutes, three times a week," then make it part of their contract. Keep that record in their walking diary. And the Walk With Ease book has a walking diary. It has a sample contract where you can put, you know, the date, what your plan is, how far you're going to walk, or how long you're going to walk, and when you plan to do it.

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Do you want to plan to do this during the workday or before work or after dinner? And then, how are you going to reward yourself? So, that contract is in the book. You can set that up, and then there are sample walking diaries where you can write down how long you walked, how you felt. Did you have any pain? Did you have any fatigue? Did you walk by yourself or with someone? Keep doing that every time you walk. Then review it and see, "How successful was I at meeting those goals?"

Rebecca:

Yeah, that is such a great way to go about tracking your activity. Because I always tell patients, it's important to know maybe if you overdid it. So, if you went up from 10 minutes and decided to jump to 15 minutes, and had a little bit more pain than you had, then maybe 15 was too much and you need to drop down to 11 or 12. And you can track and see like, "What am I doing?"

The other piece about that that I like about tracking what your activity is, if you have a bad day and you don't get to walk your 10 minutes, you can take a look back at the last three weeks. "I started out with two minutes, and then I got to five, and then I got to eight, and I got to 10. So, I did it before and I can do it again."

Dr. Callahan:

Yes, that's so important to be able to see, "OK, I can come back and I can do this."

Julie:

"I accomplished this thing. It's OK, I have permission. I can give myself permission to take a breather today, to not feel good today. And tomorrow I can pick it back up wherever I can." As a data person, having metrics like that really appealed to me. It makes it easier for me to say, "Oh, OK, I can talk to my doctor about this. I can create the narrative of my exercise and really feel confident in it." And so I think that's a great point, Rebecca. Just a really great point.

Rebecca:

I wonder, Dr. Callahan, how do we maintain motivation to keep going?

Dr. Callahan:

Tracking is a great way to maintain motivation. And another positive for most people who have participated in our program, they will comment that they feel so much better, and that keeps them motivated to continue walking. So often, once people get into a routine of some sort of regular activity, they just want to keep doing it because they feel better.

Julie:

That is the reward.

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Rebecca Gillett:

That's the priceless piece. You just got to get there and it's hard sometimes.

Dr. Callahan:

I will say that the Walk With Ease workbook has a whole section on how to get back on track, because we all know life happens. You could have your in-laws come visit, or somebody in your family gets sick, or you get sick. And that's where we need the motivation to get started back into our routine and starting back maybe at a slower pace and building back up. Not rushing right back.

Rebecca:

We talked about stretching beforehand and the importance. What about when you're done walking? Is there something that you should be doing?

Dr. Callahan:

Yes. The Walk With Ease book has what we call the basic five-step walking pattern. The first is warming up, about walking at a very, very slow pace, gently stretching, doing your walk, cooling down.

Julie:

So, Dr. Callahan, I wonder, are there particular types of arthritis that respond well to walking and walking programs like this?

Dr. Callahan:

All types.

Julie:

All types of arthritis.

Dr. Callahan:

All types. It's been studied actually. We even recently did a study in individuals with systemic lupus erythematosus, and they responded well. But osteoarthritis, rheumatoid arthritis are both sort of the ones that have been looked at the most. But any type of arthritis responds well to physical activity.

Julie:

That's amazing. That's a really great and empowering thing to hear, especially if we have folks who are listening who have multiple diagnoses, or osteoarthritis that they don't have a treatment for, that physical activity can be a real help in any form. Even walking for 10 minutes a day.

Dr. Callahan:

Well, the new osteoarthritis guidelines for managing osteoarthritis that just came out from the American College of Rheumatology and Arthritis Foundation have physical activity and weight

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management at the top. And the benefits from these behavioral interventions are as strong as some of the pharmacologic interventions in osteoarthritis.

Julie:

Offentimes, patients go into the doctor's office and they hear, "Weight loss, exercise, weight loss, exercise." And it feels really disempowering. I don't want to hear that. I am doing my best here. But then you realize that you can have control over this thing. And that feels really good when arthritis is taking control over some of those areas of your life. So, do we have any final questions, Rebecca, that come to mind?

Rebecca:

So, I was going to share a story with you, Dr. Callahan. I've been certified to be an instructor for the Walk With Ease program years ago. And I worked with a woman I met who had rheumatoid arthritis as well, and she was older than me, closer to my mom's age, but she was a primary caregiver for her spouse, who is pretty much non-ambulatory. So, she is a primary caregiver, and she spent most of her time taking care of him and not herself, which is typical, right?

Dr. Callahan: Right.

Rebecca:

Taking care of him and not herself with her arthritis. A group of us were talking about the Walk to Cure Arthritis coming up in a few months that we were going to do. And she said, "Well, I want to do that, but I can't really walk. I don't really walk much." And so, she asked if I would help her in this process. And we started, and we literally started one step at a time.

And so, we would meet three times a week on a paved trail and we walked together. And the first time we probably walked maybe 10 minutes roundtrip. But after a couple of weeks, we got to our half mile. We got to a mile. I was gone for a little bit, and she texts me: "Hey, I went on a walk by myself in my neighborhood." And she started walking. And what she said is: "I found out that it feels good. I feel better. I can do it. And I get a break from taking care of somebody else. I'm taking care of me." And our walk came, and I told her and reminded her: "You do what you can. Don't overdo it." She had friends and family come, and she walked the whole three miles.

Julie:

Oh, my goodness.

Rebecca:

It was like...

Dr. Callahan:

That's wonderful.

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Rebecca:

She built that back up. She did it for herself and she was in tears. And so was I because I was so proud of her. Literally I've seen how somebody can go from, "I'm not walking" to "I never in my life thought that I could do a three-mile walk." I know the program has a lot of research behind it. Right, Dr. Callahan? I've seen it myself.

Dr. Callahan:

It does have a lot of research behind it. But it's these stories... This is why you do the research. It's not just to do the research, but to know that you've developed a program that really helps change people's lives.

Julie:

And this one certainly does. Rebecca, what I love so much about that story is that you set a long-term goal and you worked toward this big event, right? And every day you had this thing that was your why for what you were going to do. Or at least it was your immediate why. There was a broader purpose, but that's something we can all do.

PROMO:

Register and join us on May 16 at 4 p.m. Eastern Time, on the Arthritis Foundation's Facebook page for the Virtual Walk to Cure Arthritis event. After taking your own personal walk, join us on Facebook for LIVE conversations, stories and FUN together to honor the 54 million people living with arthritis. ONE DAY, SAME MISSION. Don't forget to Give 54, Tell 54, Move 54 and SHARE YOUR 54. For more information, go to Walk to Cure Arthritis dot org.

Rebecca:

Before we go, Dr. Callahan, are there any takeaways that you would recommend to our listeners?

Dr. Callahan:

I would recommend that people realize walking, or any type of physical activity, is doable, if you feel like you can start where you are and move up in short bits and pieces. It's all a matter of starting slow and moving at your own pace and moving forward with the appropriate techniques and rewards.

Julie:

I think that's the perfect takeaway for our listeners and for the two of us. We're looking at each other nodding away over here.

Rebecca:

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You know, one thing I want to ask, if somebody has to use an assistive device to walk, how does that come into play?

Dr. Callahan:

Using an assistive device can help people in many ways. It helps their balance and it helps them feel more safe and secure while walking. So, I highly recommend if someone uses a cane or would like to use walking poles, or even needs a walker to walk, that they use that assistive device and feel good about whatever they're doing.

Rebecca: And safe. And the walkers, you know, the four-wheel walkers that have the little seat. There's your built-in opportunity to take a break and rest.

Julie:

Yeah. Your built-in bench.

Dr. Callahan:

The main thing is to feel safe and comfortable.

Rebecca:

I thought about using a cane the other day, and my son said, "But Mom, you're going to look like a grandma." I was like, "I can get a cool one and bling bling it up."

Dr. Callahan:

Well, those walking poles are, you know, a lot of people are using those, and a lot of people who don't have arthritis are using those.

Rebecca:

I have some trekking poles for hiking. I can use that and not put as much pressure on my knees.

Dr. Callahan:

And particularly coming down.

Rebecca:

Yes. The downhill is the harder part.

Dr. Callahan:

The harder part with arthritis.

Rebecca:

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Yeah. And even if it's downhill in my neighborhood, which we do have hills, so I think trekking poles are good.

Dr. Callahan:
It looks cooler.

Rebecca:
(laughs) Fashionable.

Dr. Callahan:
They must know what they're doing.

Julie:
That's right. You look like you really know what you're doing.

Rebecca:
Well, thank you so much, Dr. Callahan, for talking with us about how we can take that first step to walking in the Walk With Ease program today.

Dr. Callahan:
Thank you for having me. I enjoyed chatting with you.

Julie:
Thanks for tuning in everyone.

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This Live Yes! With Arthritis podcast was brought to you by the trusted experts of the Arthritis Foundation. We're bringing together leaders in the arthritis community to help you make a difference in your own life in ways that make sense. You may have arthritis, but it doesn't have you.

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