

5 Essential Movements That Support Independence in Older Adults

A practical session for care teams & recreation aides

Presented by Better5 · in partnership with Safe Care BC



Before we start — what to expect

This is interactive.. drop questions in the chat any time. We'll watch it as we go.

We'll run a couple of quick polls and a skill-testing question.

For each movement you'll see a short video, then we'll do a few reps together.

Move with us if you can! Most of these you can try right from your seat.

Who we are — and why we can talk about this

Better5 builds movement programs designed specifically for older adults.

Every program we have is designed with, and demonstrated by, registered/graduated physiotherapists / kinesiologists / provisional occupational therapist & more.

Built for real care settings: long-term care, independent living, assisted living, home care.

Currently working alongside SFU in a research study.

Everything you'll see today is grounded in clinical guidance, translated into things you can actually lead.



Why these movements matter

Independence lives in the small movements:

- Standing up from a chair, the toilet, the bed, the car
- Getting up the stairs and over a curb
- Carrying groceries in from transport
- Catching yourself when you trip

Lose the strength and balance behind these, and independence slips. Keep them and daily independence stays in the older adults hands.

01

Chair Squats

Lower-body strength for ease of transfer & strong strides.

Why it matters

Standing up from bed, toilet, chair, and car
Builds the functional strength behind every transfer
Reduces reliance on staff and grab bars

How to lead it

Feet flat, chair behind them. Stand up tall, sit down slow and controlled.
Cue: 'nose over toes' to stand; sit like you're reaching for the chair.
Lead from the front so they can mirror you.

Reps: start → build

Start: 5 reps. Build to: 10–12, or 2–3 sets across the day.

Modifications

Higher/firmer chair = easier. Add a cushion to raise the seat.
Hands on chair arms or a walker for support.
Too easy? Slow the lower to a 3-count, or hover before sitting.

Watch: knees caving inward, or the chair sliding. Chair against a wall if needed.

01

Chair Squats

Lower-body strength for every transfer



02

Step-Ups

Strength for stairs and curbs

Why it matters

- Mimics climbing stairs and stepping over curbs
- Builds lower-body strength and single-leg control
- Keeps residents confident on uneven ground

How to lead it

- Use a low step or bottom stair with a railing in reach.
- Step up leading with the stronger leg; step down leading with the weaker.
- Tall posture, look ahead — not down at the feet.

Reps: start → build

Start: 5 per leg. Build to: 10 per leg, then add height or light ankle weights.

Modifications

- Lower step, or a curb, to start.
- Hold the railing with one or both hands.
- Too easy? Slow it down or add a knee-raise at the top.

Watch: railing within reach every rep; no lunging or bouncing off the back foot.

02

Step-Ups

Strength for stairs and curbs



03

Farmer's Carry

Grip, posture, and carrying power

Why it matters

- Improves grip strength, posture, and endurance
- Directly transfers to carrying groceries and bags
- Reinforces tall, stable posture under load

How to lead it

- Two even loads — dumbbells or two grocery bags.
- Stand tall, shoulders back, walk a set distance and back.
- Cue: 'walk like you're proud, don't lean.'

Reps: start → build

Start: 1 short walk (10–20 steps). Build to: heavier load or longer distance.

Modifications

Lighter bags, or one hand on a rail/counter for a shorter loop.
Seated march holding light weights for very low ability.
Too easy? Add weight or steps before adding speed.

Watch: even weight both hands; clear path; no leaning or holding breath.

03

Farmer's Carry

Grip, posture, and carrying power



04

Seated Clamshells

Steady hips, stronger balance

Why it matters

Strong hip stabilizers are one of your biggest protectors against falls.

Seated clamshells train the muscles that keep you steady when you turn, step, or stand.. all from the safety and support of a chair.

How to lead it

Sit tall toward the front of a chair, feet flat, heels together.

Keeping heels touching, slowly open both knees outward.

Open only to a comfortable range — no leaning the torso.

Bring knees back together slow and controlled.

Reps: start → build

Start: 2-3 reps

Build to: 10–12

Modifications

Smaller opening to start; hands on the chair for support.

Can be done seated in bed with back supported.

Too easy? Add a hold at the top, or a light band above the knees.

Watch: open from the hips, don't lean the torso. Keep heels planted and pain-free.

04

Seated Clamshells

Steady hips, stronger balance

Kerry will perform a live demonstration

05

Single-Leg / Tandem Stand

The balance that catches a fall

Why it matters

Improves balance, proprioception, and postural control

Helps recover from trips and walk on uneven surfaces

Directly supports fall prevention and independence

How to lead it

Stand next to a sturdy chair, counter, or rail.

Tandem: heel-to-toe. Single-leg: lift one foot slightly.

Eyes forward on a fixed point, breathe.

Reps: start → build

Start: hold 5–10 sec, both sides. Build to: 20–30 sec, then lighter support.

Modifications

Two-hand support on the counter/rail.
Feet slightly apart (semi-tandem) before full tandem.
Too easy? Narrow the base, or turn the head side to side.

Watch: support within arm's reach EVERY time. Never practice unsupported.

05

Single-Leg / Tandem Stand

The balance that catches a fall



Things to look out for — red flags when moving with seniors

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Chest pain or pressure — Stop immediately. This is never 'push through.'

!

Dizziness or lightheadedness — Sit down, feet flat, stop the activity.

!

Shortness of breath at rest — Not exertion breathing — trouble catching breath means stop.

!

Sharp or joint pain — Muscle effort is fine; sharp / joint pain is a stop.

!

Suddenly pale, sweaty, confused — A change in how they look or respond — stop and check.

Skill-testing question:

Four residents are in your class. Who do you stop first?

A · Marion, 78

Breathing hard,
red-faced, but chatting
and smiling between
reps.

B · Frank, 82

Says his chest feels 'tight
and heavy,' rubbing his
sternum.

C · Doris, 75

A light sheen of sweat;
says her legs are 'getting
tired.'

D · Ben, 80

Suddenly quiet, pale,
unsteady, says the room
is 'spinning.'

The answer — and the order

Stop FIRST: B — Frank. Chest tightness/pressure is the an automatic emergency red flag. Stop, sit him down, check on him, escalate per your facility's protocol.

Then: D — Ben. Sudden pallor, dizziness, unsteadiness — stop and check right away; could be a blood-pressure or balance issue.

Keep an eye, don't necessarily stop:

A — Marion: hard breathing but talking and smiling = working, not distress. The 'talk test' passes.

C — Doris: light sweat + tired legs = normal training response. Offer a rest or a modification, keep going.

The lesson: how someone LOOKS and RESPONDS matters more than how hard they're working.

Independent Aging Comes Down to 5 Pillars of Health

01 Balance	02 Strength	03 Mobility	04 Endurance	05 Mind
Fall prevention, confidence, stability training	Functional muscle, independence, daily tasks	Flexibility, range of motion, pain reduction	Cardiovascular health, energy, heart health	Cognitive engagement, mood, social connection

The five movements weren't random, together they cover all five pillars of a complete program.

By introducing these movements either in exercise programs or “snacks”, you and your residents will see an improvement in everyday life

Balance

Resident: Less falls ... **For Staff: Less hospitalization or medical care required.**

Strength

Resident: More independence in everyday tasks... **For Staff: Less staff lifting and involvement**

Mobility

Resident: More independence in everyday tasks & less pain... **For Staff: Less staff intervention**

Endurance

Resident: Ability to enjoy longer activities .. **For Staff: Residents tire less easily, reducing staff support during activities and daily routines**

Mind

Resident: Feels happier, more connected + social ... **For Staff: Improves day-to-day interactions with residents**

If leading exercise every day sounds like a lot, we'll teach you (or anyone) how to facilitate movement safely

Our Train-the-Trainer series shows rec aides, or anyone, how to lead a Better5 class.

Train-the-Trainer also comes with a printable or digital PDF that dives deep into how the body works as we age, and the best way to get these movements in. Each chapter has a quick quiz.

Done-for-you programming across all five pillars.

Staff can press play on our videos or facilitate the programming.

To facilitate these classes, staff don't need to be fitness experts.

Runs on any TV, tablet, or laptop.

Better5 has helped over 400,000 older adults

247

Published programs

4.9 / 5

Member rating

Better5 is BBB Accredited.



This business has committed to upholding the [BBB Standards for Trust](#).



Kathie Ross Murphy

September 14, 2025 · 🌐

Okay, Better5, I had to go to see a spinal surgeon this week to determine whether I needed spine surgery. After studying all the side views of my spine, the doctor said at this point he doesn't think it would help my feet and leg numbness. He then tested the strength in my legs and feet and said that my strength was great. I explained that I do lots of stretching and exercise because of my scoliosis. He looked at me very strangely and pulled up the straight on views of my spine and said, "Are you sure you ever had scoliosis? Because you don't now." I looked at the MRI picture and was amazed - the S curve was gone. Before I started Better5, I was going to a chiropractor who x-rayed me and the S curve was very defined. Once I started doing the stretching, back, core, etc programs, I no longer needed the chiropractor. I know my Lord had a hand in it, but I truly believe the strengthening of the muscles around my spine aided in straightening my spine. Thanks Better5!! See less

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Heather McLean

These classes have been the best things I've done in years. After several falls (including a couple that gave me concussion!) I was totally into that downward spiral. About six months ago I started doing Better5 regularly - the change has been noticeable. I used to take my walking stick everywhere: now it is only with me when going somewhere unfamiliar; my energy is up; haven't had a dizzy spell for months. . . .

Better5 has helped over 400,000 older adults



Alex David Kanarek ▸ Better5.com Club - Stay Motivated with Community Support

October 31, 2025 · 🌐

I live in Rockwood, Ontario, near Guelph, and can't remember when I started to work out with Better 5, but it must be several years ago. Now, at 95 and 6 months, I am still mobile, despite osteoarthritis in my knees and hands, and having to use a walking stick outside, especially in the snow. The chair-based strengthening sessions are the ones for me - I feel Dr. Ben is an old friend now!. I like the 7-minute lower body workouts so much that I do two of them each time. I cannot manage any of the monthly challenges, but with my 15 to 30 minutes most days, I just keep going! **See less**



7 MINUTES OF CORE STRENGTHENING

I am stuck in a wheelchair and keep my core strength is important get would not be able to do this class But al Aldo is such a great teacher that managed the first session with with no o Aldo's sincere effort to make the clas feel more comfortable for us shows how much he loves what he is doing teaching us Great class



Margaret Sawers

May 18 · 🌐

Loveing better 5, only up to day 3 and can see improvement already.can now sleep 4 hours between bathroom visits instead of 1 or 2



Mary Anne Hanson

I'm a sedentary 80 year old. Have successfully done day one twice, and day two once. Will keep repeating until I feel ready for day three! Love doing SOMETHING instead of NOTHING for myself!

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21h



Thank you for joining us!

Drop them in the chat, we'll take as many as we can.

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