

# Western Australia's Physical Activity Plan

*A Strategic Physical Activity Action Plan for a Healthy Active WA*

2007/08-2010/11

**Consultation paper**

  
**be active wa**  
Premier's Physical Activity Taskforce

## ***How to Have Your Say***

We want to hear what you think about the strategic directions we are proposing and how they can best be realised. In order to have the required input in the planning processes, we need your feedback on this discussion document before the 16th May 2007 (the workshop for consultation will be held prior to this time to assist you in making your comments). Other avenues for commenting are also provided.

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### **Workshop/forum**

<b>Date</b>	<b>Time</b>	<b>Venue</b>
<b>8<sup>th</sup> May</b>	<b>8.30am-2.00pm</b>	<b>Wollaston Conference Centre Wollaston Road, Mt. Claremont WA 6010</b>

### **Regional teleconference or videoconference**

A regional teleconference to discuss these issues (TBA).

### **On-line survey**

Respond to draft (posted on the beactive website).

### **Written replies to:**

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# ***A Strategic Physical Activity Action Plan for a Healthy Active WA 2007/08-2010/11***

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## ***Foreword***

### **From the Premier's Physical Activity Taskforce**

Physical inactivity is clearly a risk to health and wellbeing in Western Australia. There is solid evidence to support the benefits of activity which extend beyond the health domain and encompass social, economic and environmental benefits.

People are no longer as physically active as they used to be and this inactivity is associated with numerous chronic diseases as well as being a major contributing factor to the global epidemic of overweight and obesity. Research in 2005 (Access Economics, Australian Bureau of Statistics) estimated that around 3.24 million Australian adults are obese. This includes 1.52 million males, 1.72 million females, over 280,000 young Australians (5-19 years) and almost half of all older people.

The evidence shows that successful approaches to physical inactivity are long term and involve many sectors and agencies. The action required takes time and requires a combined effort across a wide range of policies.

This Strategic Plan sets out how we will work together and what will do to engage more Western Australians to participate in physical activity. We will also produce an implementation plan to clearly set out how we will achieve this.

The Physical Activity Taskforce has presented us with a new framework and a clear picture of the areas to be prioritized over the next five years. The quality of support through the consultation process highlights the efforts of a wide range of stakeholders to support this endeavour. Western Australia is positioned to be a leader in physical activity promotion with a booming economy to support change. This sits within the parameters of Government policy 'Towards a common goal – Striving for a healthy future for all.

## ***Introduction***

This discussion document sets the scene for a Strategic and Action Plan for Physical Activity. The aim of the plan is to give clear direction for the promotion of physical activity in Western Australia. This document is intended to stimulate discussion within sectors and among others with an interest in physical activity. It sets out the key issues and suggests some strategic directions in Western Australia. It needs further input to make it as effective as possible.

The final Plan will guide and set the parameters for action.

### **Process**

Feedback on this document will be used to further develop the Strategic and Action Plan.

### **Where will this Strategic and Action Plan fit?**

*It is timely to review the strategic directions and adopt the next 5 year plan. The new Strategic and Action Plan will build on the earlier documents.*

The plan **proposes** 4 key strategic directions:

- policy
- populations
- profile
- promotion

The plan **proposes** 4 priority delivery areas:

- school and family based settings
- primary care settings
- community settings
- worksite settings

It is **proposed** that the Strategy will be implemented:

- by identifying the actions that different types of organisations /providers can take to address priority objectives
- by developing detailed action-oriented strategies for specific population groups
- by targeting action across the lifespan.

### **Considerations to take into account**

1. This document is the third draft awaiting input from key agencies.
2. It is suggested that the document is approximately 55-60% along the process continuum.
3. The overall structure is to be reviewed with appendices used to highlight elements of the content.
4. It is proposed that the document will have multiple visuals in the final layout process.
5. 2006 Survey results are pending and will be included after their official release.



**Please Note: The lightbulb icon has been used throughout the document to highlight areas/issues for your comment and feedback.**

## ***Purpose, structure and function of the plan***

To date the Premier's Physical Activity Taskforce (PATF) has established links, partnerships and representation across the Government and non-government sectors. It has established a strong evaluation base, identified strategies and interventions that will have impact and established a range of initiatives across the state. This Strategic Plan builds on this foundation and sets new directions for promoting physical activity in Western Australia. It envisages encouraging and supporting a whole of community change in attitude and behaviour towards physical activity.

The Plan seeks to support the Government's broad commitment in striving for a healthy future for all. Its main aim is to improve the physical activity levels of Western Australians as a whole by providing healthy active environments through a multi-level approach. It fully supports the Government's strategic direction of ***Better Planning: Better Futures***, and specifically strategic outcomes 3.1 and 4.1.

The Strategy also promotes the 'Active Australia' aim of collaboration between the many sectors of government and non-government organizations to increase people's choices and opportunities to be more physically active.

It presents a shared vision, a framework for cooperation and a basis for coordinated whole of government and community action for the creation, enhancement and sustainability of policies and environments that support physical activity. In carrying out the work, a broad-based approach is stressed as well as the need to broaden and consolidate partnerships and associations.

National and International strategies have been sourced, issues and trends assessed, challenges acknowledged, priorities identified, and strengths, weaknesses, opportunities and threats analysed in order to formulate the strategy. The PATF will re-visit this plan annually to gauge progress and adjust strategies, objectives and actions as new issues in physical activity emerge.

The guiding Principles for the PATF include:

- Achievability and sustainability – outcomes need to be assessed to ensure that they are achievable and sustainable.
- Inclusivity – outcomes should reflect the diversity of the Western Australian population and acknowledge cultural differences.
- Adaptability – provide for flexibility and adaptability to suit changing community needs.
- Integration – the best outcomes will be achieved through an integrated, across government and whole of community approach.
- Collaboration and Partnerships – success will depend on the development of a sense of shared responsibility and collaborative partnership.
- Equity – there must be equal opportunity for all people to participate in activities regardless of their income, gender, age, disability or cultural background.

Underlying these principles, the PATF provides its Terms of Reference:

- To prepare a Physical Activity Strategy for WA towards achieving a 5% increase in physical activity over a ten year period.
- To undertake an extensive statewide consultation across public, private and community sectors.
- To harness the collective expertise, resources and service provision capability across Government towards formulation and subsequent implementation of the strategy
- To monitor and evaluate the Strategy implementation.

## ***The big picture***

The widely documented 1996 US Surgeon General's Report on Physical Activity and Health concluded that; people of all ages can benefit and improve the quality of their lives through a life long practice of moderate intensity physical activity. This was endorsed by the Director General of the World Health Organisation (WHO). Studies have shown that even relatively moderate changes in behaviours toward healthy living, especially by increasing physical activity and improving diet are sufficient to prevent the development of almost 60% of Type II diabetes cases and up to one-third of cancers (WHO, 2004).

Research on physical activity continues to evolve and it is now known that the substantial benefits to be gained from a more physically active community are wider than health benefits alone. Being active also has impacts on social, economic, and environmental sustainability (World Health Organisation 2002, 2004, 2006, Department of Health and Human Services, Centres for Disease Control and Prevention, 2004).

Evidence suggests that characteristics of our communities, such as proximity of facilities, street design, density of housing, availability of public transport and pedestrian and bicycle facilities play a significant role in promoting or discouraging physical activity (Timperio, Crawford, Telford, Salmon, 2004, Ball, Timperio & Crawford, 2006, Giles-Corti, & Donovan, 2002, Humpel, Owen & Leslie 2002, Robert Wood Johnson Foundation White Paper, 2001, Dannenberg et al 2003).

Demographic, biological factors, psychological, cognitive and emotional factors, behavioural attributes and skills, social and cultural factors and the physical environment all have a connection to physical activity (Dishman & Sallis, 1994; Trost, Owen, Bauman, Sallis, Brown, 2002, Sallis & Owen, 1997., Matsudo et al.,

2005, Matson-Koffman, Brownstein, Neiner & Greaney, 2005, The Task Force on Community Preventive Services, 2001).

These relationships show the complexity of the overall issue of changing, enhancing and maintaining positive attitudes towards physical activity participation in the community. Socially, activity can contribute to increased social contact and trust, support groups and increased community capacity.

Communities, institutions and organizations that engage people in physical activity can grow community capacity and cohesion by developing their capacities and skills enabling them to participate more fully in society. Consistent influences on physical activity patterns among adults and young people include confidence, support from others positive beliefs concerning the benefits of physical activity and safety.

An overarching long term plan to develop infrastructure to support sustainable increases in non-motorised transportation is needed (Robert Wood Johnson Foundation, White Paper, 2001). Reduced usage of cars can impact on parking facilities allowing more green space. Urban air quality can be improved from reduced car emissions and in turn an impact on greenhouse gases.

The choice to be active is not always an easy one. Active modes of transport are seldom considered and safety concerns can also inhibit people from active transport, including walking and cycling, an element that is of particular concern to women and ethnic minority groups. For children a life of computers, mobile phones and electronic games can impact on the uptake and engagement of physical activity (Ward, Saunders & Pate, 2007).

With the onset of urban sprawl recreational and leisure facilities may no longer be located where convenient for the majority of people and the services may no longer meet their needs.

A comprehensive approach is needed to develop community infrastructure, to create more livable communities and improve the physical environment.

Australia ranks second behind the USA with over 60% of adults currently categorized as being overweight or obese (Cameron et al., 2003). However Coyne, Findlay, Ibiebele, Firman (2004) believe that this figure may be an underestimation of the true prevalence and the data should be interpreted with caution due to the low response rate and possible selection bias.

Figures from the Australian Institute for Health and Welfare (AIHW: 2004) indicate that obesity rates increased between 1980 to 1999-2000, from 8 to 20% for Australian women and from 9 to 17% for Australian men. An appropriate starting point as suggested by Swinburn (2003), for a comprehensive obesity program is children. This is discussed also by Flynn et al. (2006), who note the gaps in the pre-school years as a possible critical period for obesity prevention.

Only 59 % of Western Australians are sufficiently active for good health. However the results from the 2006 Adult survey indicate that .....

To be expanded when results are released.

Western Australian communities face many challenges including changing demographics, unprecedented growth in some areas, decline in others and emerging societal issues. Because of the complexity of physical activity and the many factors that influence it, there is no one solution for increasing and or maintaining participation levels. In response to this and involvement from a number of key stakeholders the PATF has developed a framework which will provide direction in the quest for a collective action to enhance participation in physical activity across Western Australia.

## SECTION 1

### **Background**

This Strategic Plan is intended as a guiding document for all key agencies, and communities to promote regular PA and improve health and quality of life and takes into account the wide-ranging factors and issues of participation in PA. It is for *all* WA populations and includes objectives and strategies to address the issues and challenges of inactivity.

The main reasons given for not being more active are generally time, health not good enough and already active enough (though often this is not the case). Enablers include interested friends and family, better and safer environments for walking and organized groups (Be Active Australia, 2005).

Therefore there is no single solution/initiative to change a culture of inactivity. The responsibility for improving health lies with the individual and the community. However, there is evidence about effective approaches and strategies consistent with the WHO's policies and associated strategies.

### **Promoting physical activity in Western Australia – the way ahead**

#### *Strategic intent*

The strategic intent maps out how we can achieve set objectives over the next 5 years and reflects the strategic direction of the State Governments **Better**

**Planning: Better Futures**. It highlights how the PATF will:

- Continue to work with key agencies and stakeholders in the common goal to increase physical activity participation in Western Australia.
- Base actions on a whole-population approach because this approach looks at changing the underlying factors which limit physical activity.
- Continue to look at changing the conditions that affect the physical activity levels of the public as a whole.

- There is a need to improve the institutions and networks responsible for implementing the strategies in order to increase physical activity levels.

### ***Rationale and Purpose***

As has been shown, addressing the determinants of physical (in) activity is beyond the responsibility or capability of one sector alone and therefore requires a whole of government approach. Recommendations for the promotion of physical activity include; multi-level and multi-strategy approaches that emphasize combined environmental, policy and individual strategies. (Matson-Koffman, Brownstein, Neiner & Greaney, 2005, TheTask Force on Community Preventive Services, 2001)

### ***The Aim***

The main aim of the Strategy is to improve the physical activity levels of Western Australian's as a whole by providing healthy supportive environments through a multi-layered approach. It aims to further develop partnerships working to provide support and to wherever possible remove barriers to participation, reduce levels of social isolation and in turn improve quality of life.

## SECTION 2

### Context

In response to its commitment to physical activity the PATF has developed a framework which will:

- establish *vision* and *mission* statements that build on the previous 4 year plan
- establish key directions, *objectives* and *actions*
- assess *priority* areas for action with regards to barriers to physical activity within Western Australia
- call on a collective action and the challenges identified by the 2006 Survey.

### Conceptual Framework



#### *Social-Ecological Model*

There is still a lack of a clear model and framework that adequately mirrors the complexity of the physical inactivity issue. As such the framework constructed in this plan has been developed from a number of sources.<sup>1</sup>

It is hoped that the framework structure can serve as a model that can be used in communities to support active living. The physical and social environments of families, communities and organizations, the policies, practices and norms within their social and work settings and access to reliable and up-to-date information are some of the many factors that affect people's decisions and abilities to practice positive behaviours to physical activity.

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<sup>1</sup>These sources are from The Public Health Action Cycle (Institute of Medicine, 1988), the Model for Policy Research (Schmid, Pratt and Witmer, 2006), the Outcome Model of Health Promotion Switzerland (Cloetta et al, 2005), the Mobile Ecological Model (Matsudo et al, 2004), the Ottawa Charter, Ontario's Active 2010, King's Determinants of Behaviour.

McEleroy et al., (1988) noted the complexity of these influences and developed the **Social-Ecological Model** (Figure 1). The model provides a framework for comprehensive interventions.

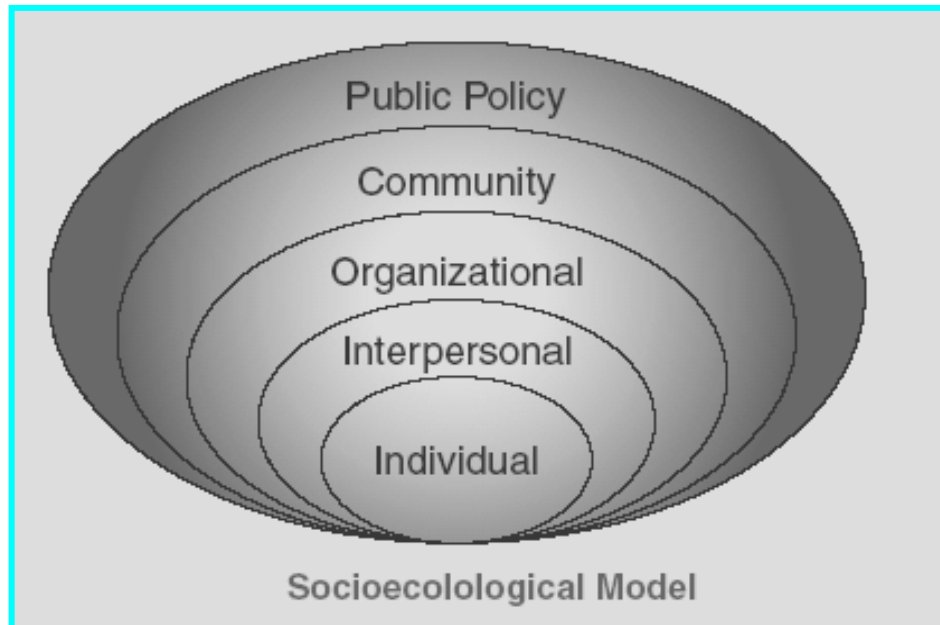


Figure 1: The Social-Ecological Model



The levels of influence in the model incorporate:

- individual factors (knowledge, attitudes, beliefs),
- interpersonal factors (family, friends, peers, social networks),
- organizational/institutional factors (policies, regulations),
- community factors (social norms, standards)
- public policy (policies and laws that regulate or support physical activity).

The model provides the basis for this strategic plan and is supported by 4 key directions. The relationship to each level is included.



## Key directions

### 1. Promote active public policy (Policy)

*Alignment with the Social Ecological Model (Fig. 1) – Policy level*

To effectively increase physical activity levels in Western Australia a whole-of-government approach is needed. Promoting, developing and supporting policy that facilitates and encourages physical activity across sectors including transport, urban planning, health, education, and local government and non-government agencies.

### 2. Promote public awareness, skills and engagement (Promotion)

*Alignment with the Social Ecological Model (Fig. 1) – Individual and interpersonal levels*

The availability and access to information on physical activity and the wide ranging benefits of participation can support individuals, families and communities to overcome barriers to participation, and strengthen skills and competencies.

### 3. Promote opportunities for physical activity across all populations and communities.

*Alignment with the Social Ecological Model (Fig. 1) – Community and Organisational level*

To effectively increase physical activity levels in Western Australia the physical and social environments need to support people to be active. This includes the development and utilization of infrastructure to support walking and cycling networks, public awareness, promoting positive role models and settings which make activity easy. To encourage and influence social and cultural norms that support physical activity.

#### 4. Increase the profile of physical activity

*Alignment with the Social Ecological Model (Fig. 1) – All levels*

To effectively increase physical activity levels in Western Australia the profile of physical activity needs to be lifted across all sectors and by key partners.

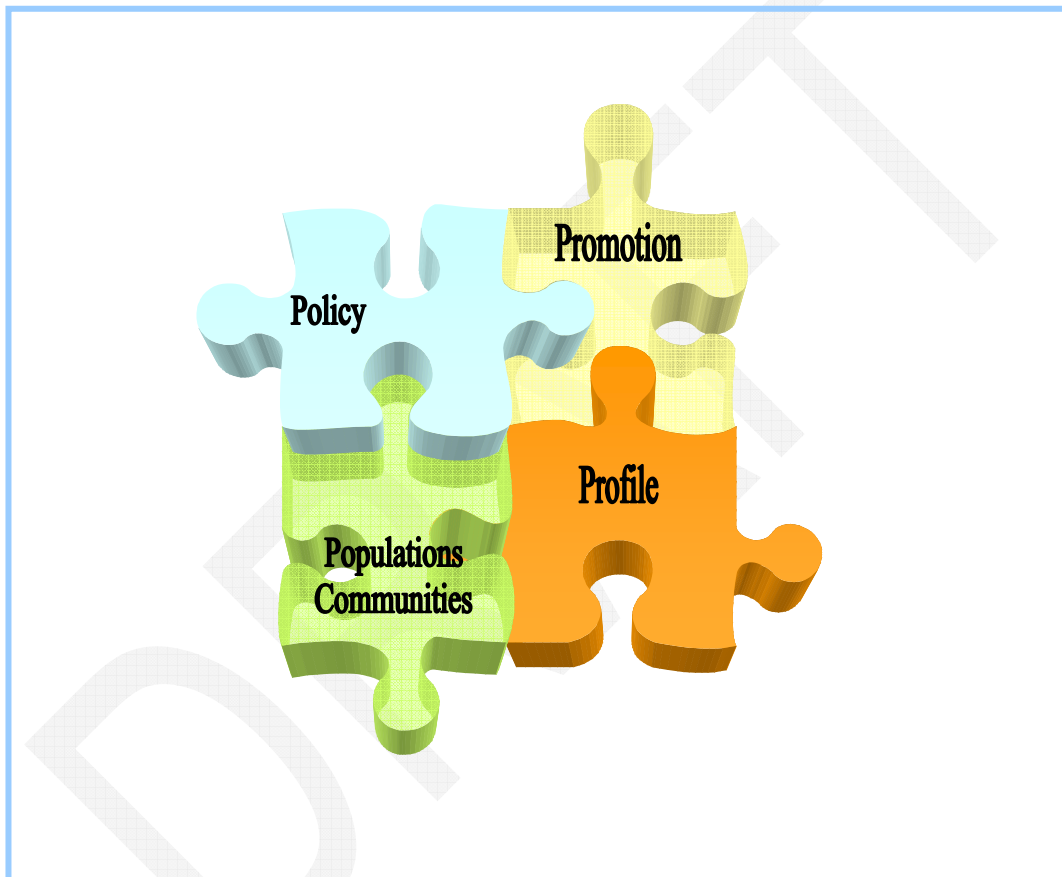


Figure 2: The Key Directions jigsaw



Monitoring, research and evaluation are integral to the key directions.



## **The objectives and the actions**

The 4 key directions and rationales are accompanied by objectives and actions. The actions are a step-by-step guide to achieving each strategic direction.

### **The actions**

- Build on the foundations already underway from the previous strategic plan.
- Respond to the challenges in the context of today's environment.
- Define direction for new initiatives.
- Build on effective programs and projects that promote physical activity.
- Engage a variety of approaches to promote physical activity participation.
- Include ongoing monitoring and evaluation and uses this evidence to inform policy and programs.

“Plans on physical activity should comprise multiple strategies aimed at supporting the individual and at creating a supportive environment. Combinations of different actions and programs are likely to be needed in different settings to reach and target populations” (WHO, 2007, p5).

### **Settings, sectors, target groups**

Intrinsic to the 4 strategic directions are:

- Settings – which include: schools, workplaces, homes, community, faith centres, health care.
- Sectors – health, education, planning and infrastructure, sport and recreation, children and youth, tourism, crime prevention, community development, environment and conservation, climate change.
- Target groups – children, middle-aged, women, overweight and obese, indigenous (check correct terminology), sedentary.



## ***Vision and Mission***

Underpinning the Plan are the Vision and Mission statements.

### **Vision**

#### **Current**

*The individual and community benefits of physical activity will be recognized, valued and supported by community and government; and environmental and policy supports will allow a 5% increase in physical activity levels by 2011.*

#### **Proposed**

After consultation with key personnel across, the DSR Corporate Executive Strategic Policy, Programs and Services, Facilities and Camps, Business Management and the PATF Consensus reached re removal of the %.

#### **Option:**

**A physically active Western Australia (this option received most approval)**

### **Mission**

#### **Current**

*To oversee the development and implementation of a whole of community physical activity plan for Western Australia.*

#### **Proposed**

After consultation with key personnel across, the DSR Corporate Executive Strategic Policy, Programs and Services, Facilities and Camps, Business Management and the PATF Consensus reached that the % could be added to the mission statement.

#### **Options:**

- 1. Our mission is to provide a strategic direction to reverse the levels of inactivity and promote a Healthy Active Western Australia.**
- 2. Our mission is to increase and maintain the proportion of physically active people in Western Australia.**

## Overview and summary



This is illustrated in the Framework overview below: Figure 3 (this is awaiting consultation).

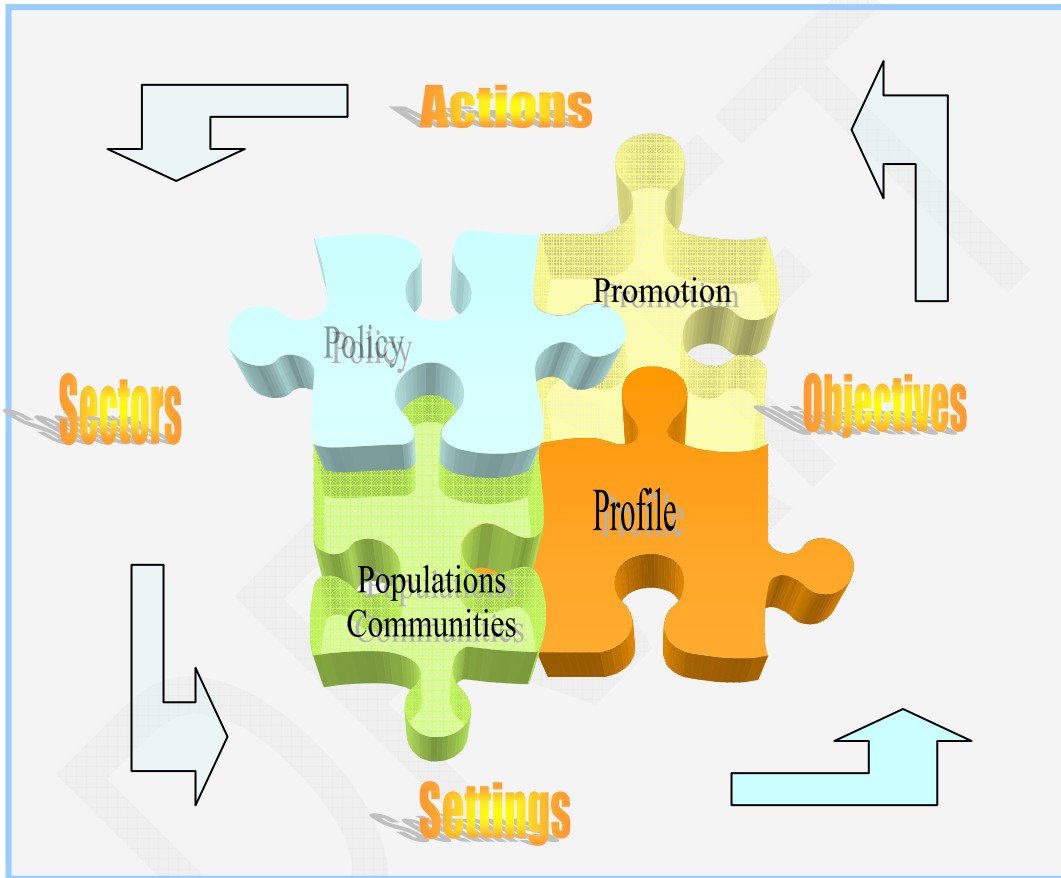


Figure 3: Key directions and relationships

The framework recognizes the relationship that exists between the individual and the environment. The main points of the model are that:

- Physical activity and inactivity are determined by many different factors.
- Programs need to be comprehensive.
- The most effective approaches are ones that involve a combination of the efforts at all levels.

DRAFT

## **SECTION 3 (to be developed after consultation process)**

### **Proposed directions, rationales, objectives and action steps**

The **proposed** four key directions are supported by accompanying rationales:



#### **Key Direction 1: Promoting active public policy**

##### **Rationale:**

- The promotion of public policy that encourages and supports physical activity can maximize the opportunities available to all Western Australians.
- Policies that support and promote physical activity can lead to improvement of quality of life.
- Effective policies can have an impact on populations, increasing awareness of physical activity as an important health issue.
- Decision makers can set the stage for physically active 'friendly policies' A common foundation for healthy public policy and the associated coordination of programs will contribute to improving the physical activity levels in WA.

#### **Key Direction 2: Promoting public awareness, skills and engagement**

##### **Rationale:**

- The health benefits of physical activity have been convincingly established in the literature over the last 40 years.
- The fact that ? % of Western Australians still do not achieve an adequate amount of daily physical activity indicates that broader strategies need to be developed to reach those who currently do not participate regularly, to raise awareness and increase the communication and understanding of the benefits of physical activity as well as providing support to those who are actively engaged.

### **Key Direction 3: Promoting opportunities for physical activity across all populations and communities**

#### **Rationale:**

- By providing supportive environments and opportunities for physical activity participation across communities and populations there is support to all Western Australians across all stages of the life span to be physically active.

### **Key Direction 4: Increase the Profile of physical activity (advocacy)**

#### **Rationale:**

- By increasing the profile of physical activity effective advocacy strategies can be put in place
- Advocacy can support the promotion of current and future directions in increase the proportion of the population participating in regular activity
- By increasing the profile of physical activity policies can be incorporated into a wide range of actions, including building design and smart growth opportunities for active transport etc.



On the following pages are the proposed key directions and their associated objectives and actions (these are broadly stated and will be refined after consultation and developed in the implementation plan).

## Key Direction 1 Active Public Policy

### Social Ecological Model Level: Public Policy, organizational and community levels

<b>Objective 1.1</b>	<b>Actions</b>
<b>Policy development</b>	1.1.1 Increase the proportion of public policy and decision makers who recognize the importance of physical activity for its contribution to public health.
	1.1.2 Develop policies and guidelines to increase participation in physical activity among special populations
	1.1.3 Advocate and develop policies that promote participation in physical activity among 'at risk' populations
	1.1.4 Advocate for physical activity programs that incorporate the latest evidence
	1.1.5 Ensure full and equitable access to all public facilities that could house programs and services that increase the daily amount of physical activity for each community member.
	1.1.6: Promote events that feature physical activity (traditional, cultural and seasonal activities).

<b>Objective 1.2</b>  <b>Create supportive communities and environments</b>	<b>Actions:</b>
	1.2.1: Work with key agencies to encourage safe environments for physical activity
	1.2.2: Work with key agencies to create a variety of environments that support physical activity (home, school, workplace)
	1.2.3 Provide incentives to employees who walk, bike, or use public transport to commute to and from work and for work-related travel.
	1.2.4: Ensure that physical activity facilities are accessible and affordable.
<b>Objective 1.3</b>  <b>Develop personal skills through policy</b>	<b>Actions</b>
	1.3.1: Develop guidelines to increase awareness and understanding of the benefits of physical activity across all settings
	1.3.2 Develop and advocate for resources that promote physical activity that are readily available for all
<b>Objective 1.4</b>  <b>Monitor, research and evaluate existing policies, regulations, programs and services</b>	<b>Actions:</b>
	1.4.1: Coordinate systems to monitor and evaluate new programs and interventions to determine their effectiveness and measure progress. 1.4.2: Identify barriers to participation.

**Key Direction 2 Promoting public awareness, skills and engagement**

**Social Ecological Model Level: Individual and interpersonal levels**

<p><b>Objective 2.1</b></p>	<p><b>Actions:</b></p>
	<p>2.1.1: Strengthen the support given to parents, caregivers and professionals in promoting the value of physical activity to children</p>
	<p>2.1.2: Provide information to assist all involved in early childhood learning and care settings to support physical activity</p>
	<p>2.1.3: Adapt resources so that they are appropriate for and accessible to WA's diverse communities</p>
	<p>2.1.4: Reinforce public health messages for all ages</p>
<p>2.1.5: Develop and promote an active living statement for community use</p>	
<p><b>Objective 2.2:</b> <b>Create supportive environments to support participation across all sectors</b></p>	<p><b>Actions:</b></p>
	<p>2.2.1: Identify existing policies, regulations, programs and services to identify barriers to physical activity participation</p>
	<p>2.2.2: Examine and promote strategies that are more effective for continued and sustained participation in physical activity</p>

	2.2.3: Work with our partners/stakeholders in communities including NGO's and the private sector to enhance and coordinate messages that encourage physical activity.
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<b>Objective 2.3:</b> <b>Develop personal skills by enabling access to easy to understand information that is evidenced based</b>	<b>Actions:</b>
	2.3.1: Work to provide physical activity information that is evidenced based, easily understood and widely available
	2.3.2: Work to provide information for different cultures in a variety of mediums.

<b>Objective 2.4:</b> <b>Monitor, research and evaluate promotion strategies</b>	<b>Actions:</b>
	2.1: Evaluate and monitor promotion strategies across population groups.

**Key Direction 3: Promoting opportunities for physical activity across populations and communities**

**Social Ecological Model Level: Public Policy, Community and Organisational levels**

<b>Objective 3.1: Policy development for healthy environments across priority populations</b>	<b>Actions:</b>
	3.1.1 Develop policies that support physical activity in key sectors and settings, targeting population sub-groups
	3.1.2 Consider policies that encourage participation of priority groups through community organizations (collaboration with providers to consider initiatives to increase patronage)
	3.1.3 Continue to strengthen state policies related to physical education
<b>Objective 3.2: Create supportive communities and environments across the population sub- groups</b>	<b>Actions:</b>
	3.2.1 Support culturally appropriate programs that support physical activity participation
	3.2.3 Enhance awareness in communities of local facilities and services

	3.3.3 Look at messaging for each group in order to promote engagement
	3.4.1 Promote and support innovative approaches to engage the older adults sub-group (use of online information such as KinectAustralia ( <a href="http://www.vicfit.com.au/infoline">http://www.vicfit.com.au/infoline</a> ))

<b>Objective 3.3: Targeting the inactive, older adults, children (9- 12 years), indigenous</b>	<b>Actions:</b>
	3.3.1 Promote walkability of neighbourhoods
	3.3.2 Look at key issues – program accessibility, safety, social support.
	3.3.3 Investigate social support for older adults (source, type or timing of support necessary for facilitating physical activity adoption and maintenance)
	3.3.4 Promotion of age-friendly urban design
	3.3.5 Promote physical activity in school time

<b>Objective 3.4 Monitor, research and evaluate environments for</b>	<b>Actions:</b>
	3.4.1: Support the ongoing development of monitoring tools for evaluation of physical activity across priority population groups and monitor the impact of environmental policies that impact on physical activity across priority populations

**Key Direction 4: Increase the Profile of physical activity (advocacy)**

**Social Ecological Model Level: All levels**

<b>Objective 4.1</b>  <b>Target all sectors and communities</b>	<b>Actions:</b>
	4.1 Look at key avenues for advocacy
	4.2 Look at advocacy across settings
	4.3 Look at advocacy across populations
	4.4 Look at advocacy across communities

***Appendix 1(to be completed after consultation)***

**WA's Physical Activity Strategy links with the WA Governments  
Better Planning: Better Futures - A Framework for the Strategic  
Management of the Western Australian Public Sector.**

State Plan Goals/Strategic Outcomes
Goal 3: Lifestyle and the environment – Protecting and enhancing the unique Western Australian lifestyle and ensuring sustainable management of the environment. Strategic Outcome 3.1: A unique lifestyle that is maintained and enhanced
How the State's Physical Activity Plan link to these:

Goal 4: Regional development – Ensuring that regional Western Australia is strong and vibrant Strategic Outcome 4.1: Regional communities that is educated, healthy, safe and supportive.
How the State's Physical Activity Plan link to these:

## ***Appendix 2***

### **The Costs of Physical Inactivity**

The diverse health benefits of physical activity have been increasingly recognized since the publication of the 1996 US Surgeon General's Report on Physical activity and Health (USDHHS1996). In response to the high prevalence of inactivity in today's lifestyles several studies have been conducted to provide the evidence that physical activity is crucial to health and well-being.

In terms of direct health care costs in Australia, at least 400 million dollar per year are attributable to physical inactivity direct health care costs (Lee, & Paffenbarger 2000; Stephenson et al, 2000). Physical inactivity contributes to around 13, 000 deaths per annum. This corresponds to 36 deaths per day or 1.5 deaths per hour (Mathers et al., 1999).

Approximately 3.3 million Australians are obese with another 5.6 million overweight (Australian Institute of Health and Welfare, 2003). It is estimated that the total economic cost of obesity in Australia, including both financial costs (\$3.767 billion) and lost wellbeing (\$17.2 billion), was \$21 billion in 2005 (Access Economics PTY LTD, 2005).

It has been suggested that savings of up to \$8 million per year could be achieved in Australia for every 1% increase in the proportion of the population that achieves a sufficient level of physical activity for health (Stephenson et al, 2000).

The health benefits of regular physical activity are many. Research has shown that it has major health benefits across many areas and in particular the National Health Priorities. Physical inactivity is a strong risk factor for a range of diseases and conditions. It can also contribute to other risk factors such as increases in blood pressure, blood cholesterol levels and overweight and obesity.

Regular moderate physical activity throughout life reduces the risk of all-cause mortality as well as the incidence of, and fatality rate from, cardiovascular disease, especially coronary heart disease, through a direct effect on coronary atherosclerosis. Physical activity also reduces the risk of non-insulin dependent diabetes (NIDDM) and favourably influences body weight, blood pressure and lipid profiles (cite ref here).

### **Western Australian statistics**

Put in WA stats re health expenditure (dot points)

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## ***Appendix 3***

### **Physical activity overview; what is it, what are the benefits, what are the barriers, how much do we need?**

#### **What is physical activity?**

It is important to define what is meant by physical activity in order to support interventions and change.

'Physical activity is any bodily movement produced by skeletal muscles that results in energy expenditure and includes activities of all intensities.' (Casperson, Powell, & Christenson, 1985, p.423).

In this definition is the recognition that physical activity is a broad concept, taking into account, exercise, sport, play, leisure, dance, occupational work, transportation and household tasks. It occurs in a diverse range of settings, from work to household to active commuting, to organised sports and active leisure pursuits.

#### **Benefits of physical activity**

The benefits are many and can be divided into physical, psychological, social, environmental and economic. (Department of Health and Human Services (DHHS 1996, 2002).

##### *The physical benefits:*

- reduces the risk of cardiovascular diseases
- reduces the risk of developing non insulin dependent diabetes
- reduces the risk of developing high blood pressure
- reduces blood pressure in those already with hypertension
- reduces the risk of developing colon cancer

- reduces the risk of developing breast cancer
- reduces the development of osteoarthritis and osteoporosis
- reduces fall-related injuries among older adult
- helps maintain a healthy weight and reduce overweight and obesity
- helps build and maintain healthy bones, muscles and joints
- risk reduction in all cause mortality.

*The psychological benefits:*

- reduces feelings of depression and anxiety
- reduces feelings of stress.

*The social benefits:*

- increases sense of involvement
- increases networks and social support.
- increases sense of community

*The environmental benefits:*

- cleaner and greener transport options
- appreciation of the environment, the outdoors

*The economic benefits:*

- healthier communities
- participation in sport and recreational events
- associated tourism

### **What are the barriers to participation?**

Given the scale of benefits from being more active, it is difficult to understand why so many people are inactive.

Barriers to participation in WA ...

Results from 2006 survey here ...

## **How much physical activity is needed and what are the recommendations?**

### **The National Physical activity Guidelines for Australians**

People should put together at least 30 minutes of moderate intensity physical activity on most days of the week, in addition to their normal everyday activities. It is important to note that the 30 minutes need not be consecutive, but can be accumulated in lots of 10 minutes. Further health benefits can be gained through greater amounts of moderate and/or vigorous physical activity (Department Of Health and Aging, 2004)

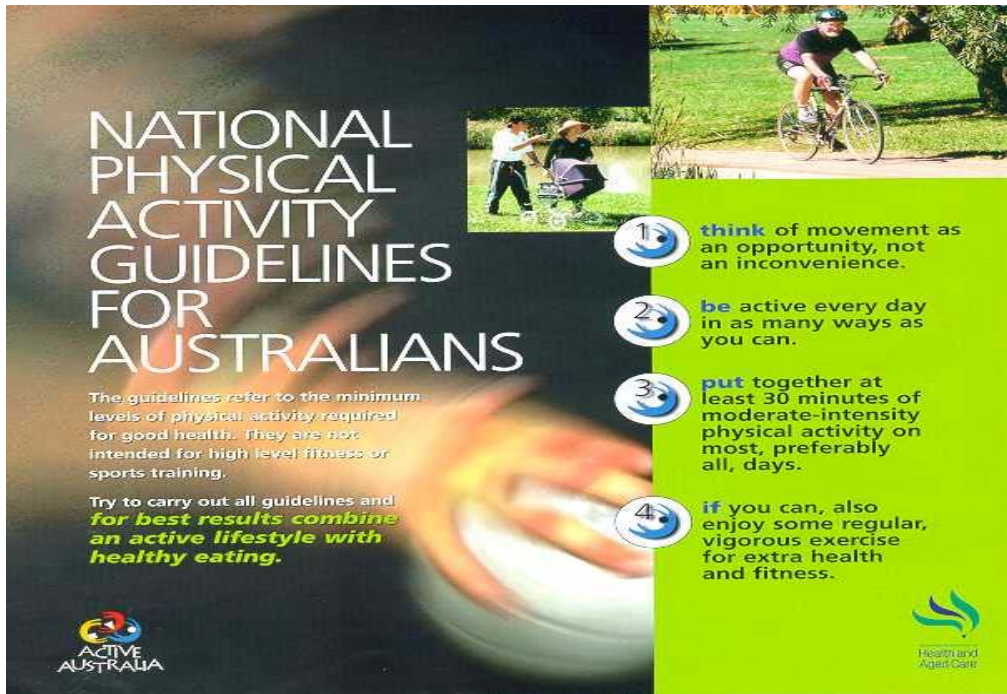
Children and youth should participate in at least 60 minutes (and up to several hours) of moderate–to vigorous intensity physical activity every day. The guidelines also stipulate that children and youth should not spend more than two hours a day using electronic media for entertainment (e.g. computer games, TV, Internet), in particular during daylight hours.

The US Dietary Guidelines Advisory Committee (2004) concluded that many people may require more than 30 min of daily physical activity to prevent excessive weight gain. To prevent the transition to overweight or obesity it seems likely that moderate intensity physical activity of approximately 45 – 60 minutes per day is required (Saris et al. 2003).

In summary:

#### **Adults**

- 1 Think of movement as an opportunity, not an inconvenience.
- 2 Be active everyday in as many ways as you can.
- 3 Put together at least 30 minutes of moderate-intensity physical activity on most days, preferably all, days.
- 4 If you can enjoy some regular, vigorous exercise for extra health and fitness.



## Children and youth

1. Children and young people should participate in at least 60 mins (& up to several hrs) of moderate to vigorous physical activity every day.
2. Children and young people should not spend more than 2hrs a day using electronic media for entertainment, particularly during daylight hours.

## ***Appendix 4***

### **How active are Western Australians?**

State surveys have been conducted in 1999, 2002, 2006 to determine what proportion of WA's are active and to identify elements that contribute to or hinder participation. Since 1999 the PATF has published these surveys as a monitor of activity across the State. This data provides insight into the physical activity patterns across the State and guide change. The 2006 Adult survey shows that most people in WA are not active enough. For example:

Need to insert a graph/s here indicating percentage of population reaching the recommended level of physical activity (percentage, age, male, female)

Then some discussion (the graph indicates that activity varies by age, gender ....  
For women .... For men ...

Also need the barriers reported in the survey.

## ***Appendix 5***

### **Glossary of terms**

**Active living** refers to a way of life in which physical activity is valued and integrated into daily life.

**Active transport** includes any method of transport that requires expenditure of energy.

### **Community**

**Exercise** is a subset of physical activity and is defined as planned, structured and repetitive movement done to improve or maintain one or more components of fitness, such as muscle strength, endurance, flexibility, or cardio-respiratory endurance.

**Intensity** is the perceived or self reported rigour at which an activity is performed.

**Physical activity** is any bodily movement produced by skeletal muscles that results in energy expenditure.

**Physical inactivity** can be defined as people undertaking 'insufficient' physical activity to achieve measurable health outcomes.

**METS** (metabolic equivalent unit) = the energy (oxygen) used by the body as you sit quietly. The harder your body works during an activity the higher the MET.

**Moderate intensity physical activity** refers to physical activity that requires 3 to 6 METS.

**Obesity** refers to a condition of excessive fat accumulation to the extent that health may be impaired.

**Social-Ecological Model** refers to how varying levels of influence and factors affect people's decisions and abilities to practice positive health behaviours.

**Target audience** refers to the selected group you are trying to reach/influence.

**Vigorous intensity physical activity** is activity requiring 6+ METS.

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## **Appendix 6**

### **Resources and references (to be completed, all sources listed to date. This is a working list).**

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