



INCREASING PHYSICAL ACTIVITY PARTICIPATION: FUTURE DIRECTIONS

GUEST EDITORIAL

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This issue and the previous two issues of the *NSW Public Health Bulletin* have examined the promotion of physical activity in NSW. Recent epidemiological evidence indicates that inactivity confers a substantial health risk. The US Surgeon General's report on physical activity¹ focused our attention on this risk factor in 1996, but the evidence had already been compelling for a decade².

Our knowledge on the health effects of physical activity is expected to develop in two areas:

- the role of physical activity in cancer prevention, which is continually being elucidated^{3,4}; and
- the connections between physical activity and mental health, where evidence from cross-sectional population studies will be replaced by evidence from cohort studies and controlled trials.

The benefits of physical activity will fall primarily into the national health priority areas of cardiovascular disease, diabetes, cancer, injury (in the elderly) and mental health.

OVERSEAS INITIATIVES

The recent acceptance of the evidence in favour of the health benefits of moderate physical activity has led to international interest in activating the sedentary members of our communities. Some countries have traditionally had good facilities for specific activities. For example, the Netherlands has an intricate network of cycleways, and cycling is part of everyday life for people of all ages. The fact that the relative weight (body mass index) of the Dutch population has not increased to the same extent as that of the Australian or US populations is an interesting ecological association.

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Infectious Diseases

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Future directions

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In the USA, the promotion of physical activity is being taken seriously by public health groups, which are developing coalitions to provide frameworks for action. For example, the Physical Activity and Nutrition Branch of the Centers for Disease Control and Prevention (CDC) is developing better ways to measure physical activity in large-scale surveys as part of a program of fostering outcomes-based research into physical activity. The CDC is working closely with an expert committee on physical activity measurement at the Australian Institute of Health and Welfare, and aspires to establishing international standardisation of physical activity measurement within 12 months.

The United Kingdom and Canada are using social marketing approaches to inform the public, and health professionals, about the new evidence of the benefits of moderate physical activity. The Health Education Authority of England and Wales has recently completed two years of physical activity public education campaigns, with promising results. These campaigns have included:

- the "30-minute Olympics" including the "walk to the bus challenge", the "gardening events" and a cycling event called the "tour de shops"; and
- advocacy of the need for everyone to have a "personal trainer" in canine form to encourage daily walking.

In New Zealand, the Hilary Commission (Sport and Recreation), North Island regional health services and general practitioner organisations have combined to design and distribute a "green prescription pad" on which GPs can recommend physical activity.

PROGRESS IN NSW

In the light of these overseas initiatives, how well is NSW doing with the promotion of physical activity? A parochial view that we are at the forefront of many innovative approaches is supported by the interest others have shown in our work. The centrepiece of recent NSW initiatives is the Premier's Physical Activity Taskforce, formed in 1996 to develop an integrated intersectoral strategic plan for physical activity promotion. This plan is available for public comment, and will be finalised before the end of 1997.

The draft plan identifies agencies which are to take the lead in promoting physical activity, including some health sector groups and many in other sectors: the Department of Sport and Recreation, the Department of School Education, the Australian Council for Health, Physical Education and Recreation, local government and groups concerned with the way in which the physical environment can

promote personal physical activity. The structural changes required include modifications to the urban landscape to make public spaces easier to use, safer and more accessible on foot and by cycle.

The NSW Health Department has a leading role in health sector change, health professional education and the development of public education campaigns. Planned campaigns include a GP awareness campaign late in 1997; and a mass media campaign for the general population early in 1998, involving the national initiative (Active Australia) and supported by a variety of local programs. The synergism of the national program, the NSW Taskforce and the forthcoming Olympic Games should provide a boost to this campaign. The mass media component of the campaign will be reinforced by programs at local level, supported by many of the groups represented in the Taskforce.

FUTURE CHALLENGES

There has been substantial national and international interest in the NSW approach to physical activity. The challenge is to expand the strategic framework developed by the Premier's Taskforce into effective concrete programs, and to document the net effect of these efforts on the health of our population. Part of the evidence for effectiveness will accrue from the Physical Activity Demonstration Projects. These projects, which are funded by the NSW Health Department, have three main targets:

- the physical environment;
- promoting activity through general practice; and
- better links between the public health sector and the fitness industry.

The NSW Schools Fitness Survey has set a benchmark for school-aged children⁵ against which a range of curriculum changes and teacher-training strategies can be assessed. The greatest challenge for the Taskforce will be to put intersectoral functioning ahead of traditional differences between the sectors, so common goals can be achieved. In the demonstration of effective intersectoral action, NSW can make a central contribution to health promotion and to public health.

1. US Surgeon General's Report: Physical Activity and Health. Atlanta: Department of Health and Human Services, Centers for Disease Control, 1996.

2. Powell K, Thompson P, Casperson C. Physical activity and the incidence of coronary heart disease. *Annu Rev Public Health* 1987; 8:254-287.

3. Thune I, Brenn T, Lund E, Gaard M. Physical activity and the risk of breast cancer. *New Engl J Med* 1997; 336:1269-1275.

4. Thune I, Lund E. The influence of physical activity on lung-cancer risk - a prospective study of 81,516 men and women. *Int J Cancer* 1997; 70:57-62.

5. Booth M. The 1997 NSW Schools Fitness And Physical Activity Survey. *NSW Public Health Bulletin* 1997; 8(5): 35-36.