

# South Tyneside Physical Activity Strategy 2019-2022



...an outstanding place to live, invest and bring up families



South Tyneside Council

**HELLO TOMORROW  
CHANGE IS HAPPENING**



## Vision

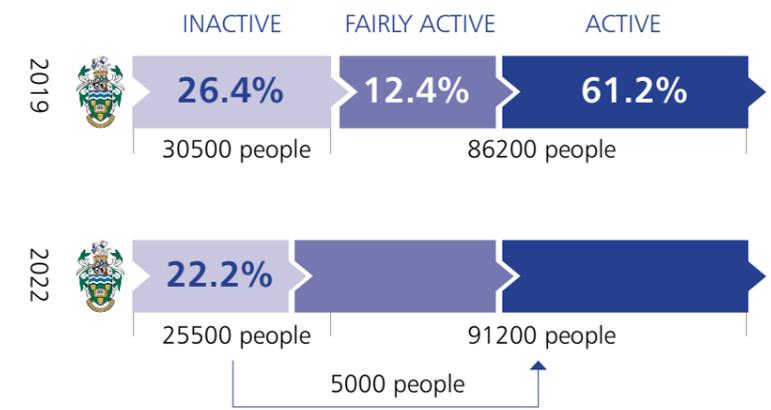
*Our strategic vision is to create a system and environment that moves 5000 people from being inactive to active*

In delivering this we will commit to the following key aspirations

- We will develop a traffic free cycle/walkway connecting South Tyneside to the International Advanced Manufacturing Park and over 5000 new jobs
- All children to achieve the early learning goal in physical activity
- More children will travel to school by foot or bike than anywhere else in the region, seeing 1070 more children regularly walking or cycling to school.
- We will ensure that physical activity forms part of quality GP and health professional conversations with the 69000 residents living with one or more co-morbidity.

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## Raising the profile of Physical Activity in South Tyneside

Despite the fact that physical activity is universally acknowledged to be an important part of healthy functioning and well-being, the full scope of its value is rarely appreciated.

An active life is essential for health. Activity reduces the risk of many preventable diseases, from cancer to diabetes, and conditions like obesity and depression. In relation to adult social care, being active increases your chances of staying independent in later life.

Being active is also good for children's educational attainment, it can boost workplace productivity and reduce sickness absence and it can even reduce crime and anti-social behaviour.

Sport offers many entry-level jobs and opportunities for volunteering that can lead to full-time careers. Businesses with active workforces are more productive, have lower sickness rates and lower staff turnover. Pedestrians help keep local high streets alive.

Prevention has become increasingly important in recent years as the cornerstone of the drive to reduce people's need for high cost health treatments and care services. The benefits of prevention go far beyond improved health for individuals and reduced pressure on health and social care – the consequences of poor health have an impact on the economic prosperity and social wellbeing of the country. For this reason, **prevention is everyone's business** and physical activity remains one of the core elements of a healthier lifestyle.

In every way, activity gets us out the door and connecting with others, avoiding social isolation, increasing social capital and community spirit.

## What does that mean in South Tyneside?

The South Tyneside Vision sets out the shared long-term ambitions agreed with our partners for the economic, social and environmental wellbeing of South Tyneside.

Partnership is a real strength in South Tyneside and the members of the South Tyneside Partnership all share a determination to make South Tyneside an outstanding place to live, invest and bring up families. To achieve our overall vision we have agreed a number of strategic outcomes under the themes of people and place. These are things that will be achieved over the next 20 years.

In some instances a physically active community could be critical to help achieve these outcomes. Whilst the impact upon some outcomes such as health maybe obvious, the impact physical activity (and inactivity) can have across 'people' and 'place' highlights how important physical activity and its numerous benefits are to helping South Tyneside achieve its vision.

### PEOPLE



BETTER EDUCATION AND SKILLS



INCREASING PROSPERITY



PROTECT VULNERABLE CHILDREN AND ADULTS



STRONG AND INDEPENDENT FAMILIES



HEALTHIER PEOPLE

### PLACE



A REGENERATED SOUTH TYNESIDE WITH INCREASED BUSINESS AND JOBS



BETTER TRANSPORT



BETTER HOUSING & NEIGHBOURHOODS



A CLEAN AND GREEN ENVIRONMENT



LESS CRIME AND SAFER COMMUNITIES



## BETTER EDUCATION AND SKILLS

Education and health are closely linked. Promoting the health and wellbeing of pupils and students within schools and colleges has the potential to improve their educational outcomes and their health and wellbeing.

The amount of moderate to vigorous physical activity pupils engaged with at age 11 can have an effect on academic performance across English, maths and science at age 11, 13 and final GCSE exam results highlighting the positive association that exists between academic attainment and physical activity levels of pupils.

We know higher attaining schools have greater levels of participation in physical activity and sports programmes than lower performing schools.

The Culture and Sport Evidence (CASE) programme, led by the Department for Culture Media and Sport, has found:

- Young people's participation in sport improves their numeracy scores by 8% on average above non-participants.
- Underachieving young people who take part in sport see a 29% increase in numeracy skills and a 12 to 16% rise in other transferable skills.



## INCREASING PROSPERITY

Individuals with health conditions can struggle to gain or sustain employment, which creates a challenging cycle of deprivation and illness that is hard to break. Only 59.4% of people of working age with a musculoskeletal (MSK) condition (osteoarthritis hip and knee, back pain and neck pain) are in work compared to South Tyneside's employment level of 68.7% of the working age.

In 2016, MSK problems were the second most common cause of sickness absence, which accounted for 30.8 million days lost in work (22.4% of total sickness absence). For both men and women, the leading cause of morbidity, in England, is low back and neck pain. 18.3% of South Tyneside residents report back pain compared with a national average of 16.9%.

Many people with MSK conditions can improve their quality of life and independence by becoming more physically active. This has benefits for the individual, their families and the wider economy. Those who participate will rely less on health and care services and remain able to continue to participate in the workplace.

Workplaces could encourage employees to be more active as this has significant business benefits.

Physically active employees are:

- less likely to take sick leave (for example being active can reduce chances of depression by 30% and back pain by 25%).
- less likely to have an accident at work more productive
- less likely to suffer from major health problems



## STRONG AND INDEPENDENT FAMILIES

Regular physical activity during the early years provides immediate and long-term benefits for physical and psychological well-being.

The Best start in Life Strategy sets out the commitment to improving the lives and chances of children and families in South Tyneside, to ensure each and every child in South Tyneside is provided with the best start in life.

Physical activity is central to optimal growth and development in the under 5s. Regular physical activity, especially in the form of play, is valuable in developing motor skills, promoting healthy weight, enhancing bone and muscular development, and for the learning of social skills.

Conversely, opportunities for young children to be sedentary should be limited and replaced with more physically active options.

Therefore, physical activity plays an essential role promoting physical and psychological development during these years and contributing towards establishing patterns of behaviour that may continue into later childhood and adulthood.



## HEALTHIER PEOPLE

Around one in two women and a third of all men in England are damaging their health through a lack of physical activity. Tackling physical inactivity is key to reducing the burden of preventable death, disease and disability. Increasing physical activity levels can also generate a variety of socio-economic benefits. Physical activity can, and does, make a profound and positive impact on individuals, communities and wider society and can support local areas to achieve their potential.

Physical inactivity directly contributes to one in six deaths in the UK the same number as smoking. Around a quarter of adults are still classified as inactive, failing to achieve a minimum of 30 minutes of activity a week. In some communities only one in ten adults are active enough to stay healthy. A number of diseases are currently on the increase and affecting people at an earlier age. These include cancer and diabetes, and conditions like obesity, hypertension and depression. Regular physical activity can guard us against these.

Health topic	Evidence of the effect of physical activity
Overall death rate	Approximately 30% risk reduction for the most active compared with the least active
Cardiovascular health	20% to 35% lower risk of cardiovascular disease, coronary heart disease and stroke
Metabolic health	30% to 40% lower risk of type 2 diabetes in at least moderately active people compared with those who are sedentary.
Musculo-skeletal health	36% to 68% risk reduction of hip fracture at the highest level of physical activity.
Falls	Older adults who participate in regular physical activity have an approximately 30% lower risk of falls
Cancer	Approximately 30% lower risk of colon cancer and 20% lower risk of breast cancer for adults participating in daily physical activity
Mental health	Approximately 20% to 30% lower risk for depression and dementia for adults participating in daily physical activity.



## A REGENERATED SOUTH TYNESIDE WITH INCREASED BUSINESS AND JOBS

The consequences of poor health have an impact on the economic prosperity and social wellbeing of the borough.

Health affects economic growth directly through labour productivity and the economic burden of illnesses. Health also indirectly impacts economic growth since aspects such as child health affect the future income of people through the impact health has on education. This indirect impact is easier to understand if it is observed on a family level. When a family is healthy, both the mother and the father can hold a job, earn money which allows them to feed, protect and send their children to school. Healthy children will perform better in school and a better performance in school will positively impact their future income.

The cost of physical inactivity in England has been estimated at £7.4 billion a year, including the direct costs of treatment and the indirect costs caused through sickness absence. The main cost however is in loss of productivity.

By considering the elements of a physically active environment, designers and developers could create more economically thriving spaces that would add value to their schemes, as well as fulfilling national and local health policies. For example:

- Retailers report an increase in trade of up to 40% when places are made more attractive for walking.
- Places that are easier and more attractive to walk around (designed for so-called 'walkability') do better commercially (with an 80% increase in retail sales) and have higher housing values.

Sport itself makes a huge contribution to the lives of individuals, to the economy and to society. Sport England has undertaken research to examine the economic value of sport in England. In 2010, sport and sport-related activity generated Gross Value Added (GVA) of £20.3 billion – 1.9% of the England total. This placed sport within the top 15 industry sectors in England. Sport and sport-related activity is estimated to support over 400,000 full-time equivalent jobs – 2.3% of all jobs in England.

In South Tyneside there are numerous semi professional and amateur sports clubs which contribute towards the economy and as well as the impact of the Great North Run.



## BETTER TRANSPORT

Transport systems and the wider built environment play a crucial role by either promoting or hindering physical activity. The Active People Survey has shown that people who cycle for travel purposes (i.e. rather than simply for recreation) are four times as likely to meet physical activity guidelines as those who do not.

The overall costs to society from road transport are substantial. For example, it has been estimated that half of the UK's £10bn cost per annum of air pollution comes from road transport. The Cabinet Office has estimated that excess delays, accidents, poor air quality, physical inactivity, greenhouse gas emissions and some of the impacts of noise resulting from motorised road transport costs English urban areas £38-49 billion a year. Evidence shows that road transport can also lead to reduced social cohesion and increased social isolation for many.

This impact is not equal as disadvantaged areas tend to have a higher density of main roads, leading to poorer air quality, higher noise levels and higher collision rates.

A more active community may be more likely to embrace the opportunities for active travel and in turn reduce the negative consequences of road transport.

Active commuting is positively associated with wellbeing and is associated with reduced risk of feeling constantly under strain and being unable to concentrate compared to car travel.

In fact, health-promoting transport systems are pro-business and support economic prosperity. They enable optimal travel to work with less congestion, collisions, pollution, and they support a healthier workforce.



## BETTER HOUSING & NEIGHBOURHOODS

Being active has many benefits that contribute towards our communities and neighbourhoods. For example some areas have been experimenting with allowing street closures ('street play') for set periods of time on a regular basis to encourage children to be able to play actively, independently and safely near their own front door. This can help improve children's confidence, self-esteem and resilience as well as encouraging physical activity. Play streets in Hackney found that the initiative led to an estimated 8,140 child-hours of outdoor play across 29 streets in a 12-month period. Some 1,600 children were involved.

These initiatives have also resulted in an increased sense of community cohesion as neighbourhoods talk to each other whilst their children play.

As mentioned previously, physically active travel can contribute towards a reduction in motorised transport and the subsequent environmental impact. Yet the social impacts of motorised transport are also worth considering. The volume and speed of motorised traffic can reduce opportunities for positive contacts with other residents in a neighbourhood and, for many people, can contribute to increased social isolation. Therefore efforts to reduce the reliance on motorised transport could have positive impacts upon our communities.

A study of three streets in Bristol, for example, found that people living in a street with heavy traffic had significantly fewer friends and acquaintances on the street than those living in a quiet one. Developing active communities could be an important step to reducing the need for road travel.

There is good evidence that volunteering is good for the person volunteering and the people and organisations they support. Volunteers have better social interaction, integration and support which all positive ingredients in the make-up of a vibrant community.

Volunteers have always played a vital part in the sports and physical activity sector. Without them, most community sport and physical activity simply wouldn't happen. The Government's strategy for sport and physical activity, Sporting Future, is very clear on the benefits of volunteering to the individual and to the nation.



## A CLEAN AND GREEN ENVIRONMENT

South Tyneside has an outstanding natural and built environment. It has an award winning beautiful coastline, parks and open spaces. These treasured assets can help promote good health, and again, healthier, active people could be better placed to make the most of these assets.

Increasing people's exposure to, and use of, green spaces has been linked to long-term reductions in overall reported health problems (including heart disease, cancer and musculoskeletal conditions); it has also been linked to reduced levels of obesity and high physical activity, and higher self-rated mental health.

Our green environment is not only our public parks and spaces, but our own gardens and streets. Gardening has a multitude of benefits to both the individual and the environment.

Parliamentary Office of Science and Technology 2016 (POST) argue that more green space and urban vegetation, including domestic gardens, are linked with many other environmental effects that indirectly affect people's health.

This includes reducing the risk of flooding, noise pollution (borders of shrubs and trees can reduce, by half, sound levels at a distance of 30 metres) and air pollution. They can also reduce the 'urban heat island' effect through reducing radiation and creating shade.

As we get older, our relationship with gardens and gardening changes as they become much more important to us as a source of physical activity, but also in terms of our identity and independence, and in reducing loneliness. There is emerging evidence that gardening may also be important in falls prevention (helping to maintain good gait and balance) and also in dementia prevention and cognitive decline.

Whilst being physically active is a benefit of access to green space, it may also be an important contributing factor to creating and sustaining green space. If individuals are inactive and suffering the many negative consequences of inactivity, then maintaining, developing and using South Tyneside's green space may become less likely.



**LESS CRIME AND SAFER COMMUNITIES**

Sport programmes aimed at youths at risk of criminal behaviour can enhance self-esteem and reduce reoffending.

Kickz is a national programme in the UK which uses football to engage 12-to-18-year-olds in deprived areas. It delivers sport coaching plus workshops on topics such as drug awareness and healthy eating. In one location for Kickz in North London, youth crime dropped from 2,529 incidents in the year before Kickz started, to 867 in the third year of the programme. 20% of this reduced crime is attributable to Kickz.

Returns on investment in sports programmes for at-risk youth are estimated at £7.35 of social benefit for every £1 spent – through financial savings to police, the criminal justice system and the community.

**National Picture**

Based on the recent Active Lives Survey published by Sport England, **66%** of UK adults (19+) do 150 minutes or more of physical activity. This equates to around 27 million people.

**11.8%** of UK adults are fairly active, achieving between 30 and 149 minutes of physical activity per week. This equates to around 5.6 million people.

**22.2%** of UK adults are classed as inactive, achieving less than 30 minutes of physical activity per week. This equates to around 11.5 million people.

**Those at risk**

**Socioeconomic Groups**

There are differences in inactivity levels between socioeconomic groups. People who are long term unemployed or have never worked (NS SEC 8) are the most likely to be inactive (38%) while those in managerial administrative and professional occupations (NS SEC 1-2) are least likely to be inactive (17%)

**Gender**

There is a difference in inactivity levels between men and women. Nationally 27% (6.1 million) of females are classified as inactive compared to 24% (5.3 million) of males.

**Age**

Nationally inactivity levels increase with age. Those aged 16 – 24 years old are least likely to be classed as inactive (15%) with those aged 75+ most likely to be inactive (54%).

**Disability**

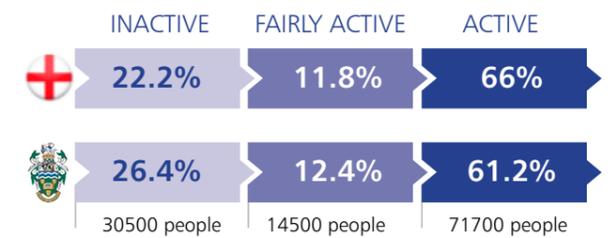
51% of people who have 3 or more impairments are classified as being inactive. This is compared to 21% of those without a disability.

**Local Picture**

The most recent data (2016/17) published by the Active Lives Survey shows that 61.2% (72,000) of the 19+ population in South Tyneside are classed as active. This is significantly worse than the national prevalence of 66%.

12.4% (14,500) of the 19+ population is classified as fairly active. This is above the national average of 11.8%.

Locally 26.4% (31,400) of the 19+ population is classified as inactive. This is above the national average of 22.2%.



Walking is the most likely way all adults can achieve the recommended levels of physical activity and walking for at least 10 minutes on at least five days a week suggests regular walking. In South Tyneside, 53.7% of the 16+ population reported walking for ten minutes or more at least five times per week. This is similar to both the regional average (51.2%) and the national average (50.6%)

**Definitions**

**Physically active:**

Any body movement that expends energy and raises the heart rate. A person is defined as being physically active if they achieve 150 minutes or more of moderate intensity physical activity per week.

**Physically Inactive:**

A person is defined as being physically inactive if they are engaging in less than 30 minutes physical activity per week

**Sedentary:**

Time spent in low energy postures e.g. sitting or lying.

## Physical Activity Guidelines

### Early years (under 5s) - for children who are capable of walking

- 1 Children of pre-school age who are capable of working unaided should be physically active daily for at least 180 minutes (3 hours), spread throughout the day.\*
- 2 All under 5s should minimise the amount of time spent being sedentary (being restrained or sitting) for extended periods (except time spent sleeping).

\* Most UK pr-school children currently spend 120-150 minutes a day in physical activity, so achieving this guideline would mean adding another 30-60 minutes per day.

Individual physical and mental capabilities should be considered when interpreting the guidelines.

### Children and Young People (5-18 Years)

- 1 All children and young people should engage in moderate to vigorous intensity physical activity for at least 60 minutes and up to several hours a day.
- 2 Vigorous intensity activities, including those that strengthen muscle and bone, should be incorporated at least three days a week.
- 3 All children and young people should minimise the amount of time spent being sedentary (sitting) for extended periods.

Individual physical and mental capabilities should be considered when interpreting the guidelines.

### Adults (19-64)

- 1 Adults should aim to be active daily. Over a week, activity should add up to at least 150 minutes (2½ hours) of moderate intensity activity in bouts of 10 minutes or more one way to approach this is to do 30 minutes on at least 5 days a week.
- 2 Alternatively, comparable benefits can be achieved through 75 minutes of vigorous intensity activity spread across the week or combinations of moderate and vigorous intensity activity.
- 3 Adults should also undertake physical activity to improve muscle strength on at least two days a week.
- 4 All adults should minimise the amount of time spent being sedentary (sitting) for extended periods.

Individual physical and mental capabilities should be considered when interpreting the guidelines.

### Older adults (65+ Years)

- 1 Older adults who participate in any amount of physical activity gain some health benefits, including maintenance of good physical and cognitive function. Some physical activity is better than none, and more physical activity provides greater health benefits.
- 2 Older adults should aim to be active daily. Over a week, activity should add up to at least 150 minutes (2½ hours) of moderate intensity activity in bouts of 10 minutes or more - one way to approach this is to do 30 minutes on at least 5 days a week.
- 3 For those who are already regularly active at moderate intensity, comparable benefits can be achieved through 75 minutes of vigorous intensity activity spread across the week or a combination of moderate and vigorous activity.
- 4 Older adults should also undertake physical activity to improve muscle strength on at least two days a week.
- 5 Older adults at risk of falls should incorporate physical activity to improve balance and co-ordination on at least two days a week.
- 6 All older adults should minimise the amount of time spent being sedentary (sitting) for extended periods.

## Physical inactivity - Highest impact area

### Our biggest impact will be moving inactive people and getting them to do something, however small

Over a quarter of our Adult population are classified as being inactive.

This equates to approximately 30500 individuals.

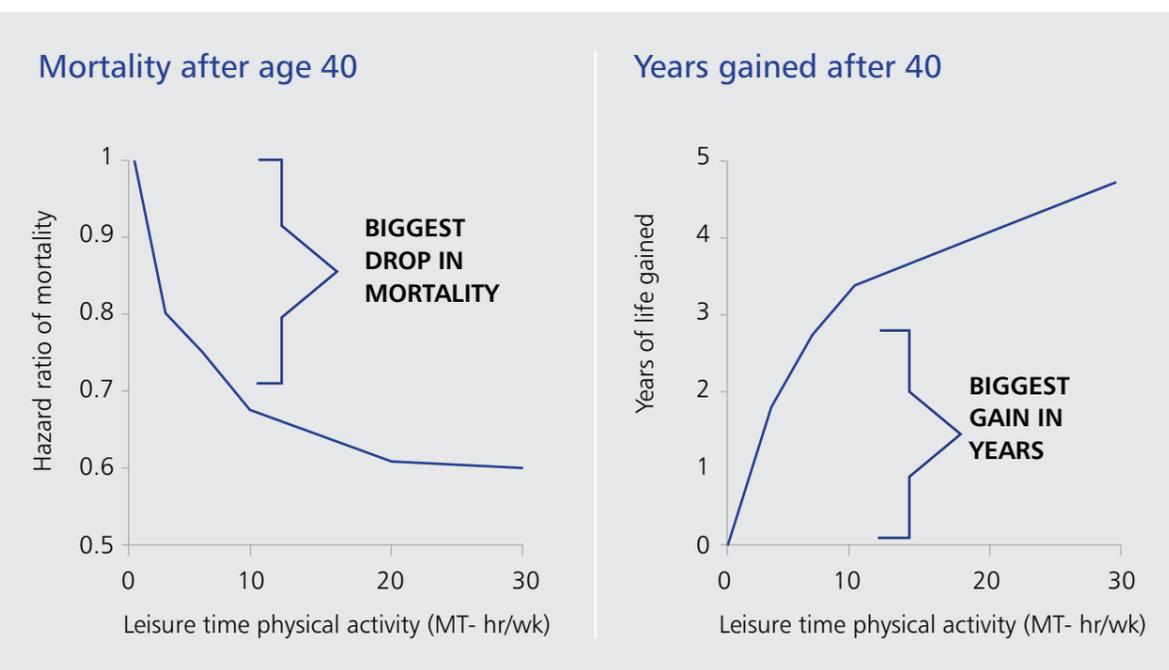
### Why an emphasis on inactivity

The biggest benefit to individuals and public investment is found in addressing those that are inactive.

Physical inactivity directly contributes to one in six deaths in the UK.

## Physical Activity - More is better

Whilst we recognise that our highest impact area is tackling physical inactivity, we also recognise that there is large cohort of people who are not completely inactive but also do not meet the physical activity guidelines. The strategy recognises the importance of supporting people to increase and maintain their physical activity levels.





## Our approach

The causes of physical inactivity are multiple, complex and interlinked and reach far beyond public health. Responses to these complex challenges have largely been generated by approaches that were developed to answer questions about the effectiveness of clinical interventions, and as such are based around cause and effect. These traditional approaches that focus on single interventions do not work at a population level.

The value of using systems to understand complex phenomena in public health and health care has been increasingly recognised and such approaches create opportunities for concerted local action to support individuals, families and communities. Everybody has a part to play in tackling inactivity but it is clear that a different approach is needed. In order to develop effective responses to major public health challenges, a wider set of approaches, and a focus on complex systems is required.

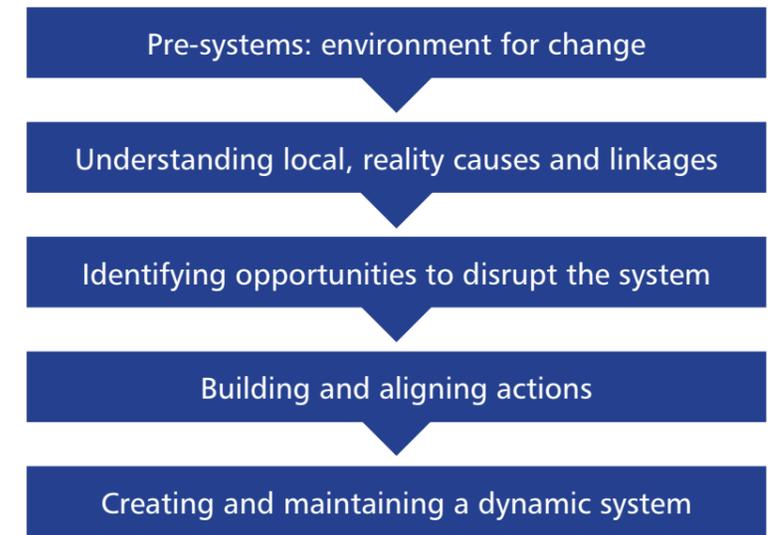
A complex systems model highlights poor health and health inequalities as outcomes of a wider variety of interdependent elements within a connected whole.

Challenges that emerge as a result of a complex system cannot necessarily be solved with a simple, single intervention, but the interacting factors within the system can potentially be reshaped to generate a more desirable set of outcomes. There is no single solution to tackle inactivity and a broad range of actions involving stakeholders from across the system is needed. Some of these actions might only have small effects on individuals but can drive large changes when considered at population level.

Instead of trying to fix the problem of inactivity, we could consider what, if and how a course of action contributes to reshaping a system in favourable ways. A systems approach moves away from silo working on isolated short term interventions to working with stakeholders across the system to identify, align and review a range of actions to tackle inactivity.

The current understanding is that a whole systems approach includes the following key elements.

### A whole systems approach to physical activity



### Pre-systems – creating the environment for change

This preparation element involves building an understanding of the context of inactivity in the local area and its impact on economic prosperity and wellbeing.

Key actions include securing senior leadership commitment; collecting and analysing relevant data and information to support the programme; and developing relationships with key stakeholders across the council and wider community.





## Physical literacy and early patterns of behaviour

“Physical literacy can be described as the motivation, confidence, physical competence, knowledge and understanding to value and take responsibility for engagement in physical activities for life.” (IPLA, 2017)

### Background

In July 2011, the Chief Medical Officers (CMOs) from the four home countries of the UK launched physical activity guidelines for the early years. For under-fives the physical activity guidelines are:

- Physical activity should be encouraged from birth, particularly through floor-based play and water-based activities in safe environments.
- Children of pre-school age who are capable of walking unaided should be physically active daily for at least 180 minutes (3 hours), spread throughout the day.
- All under-fives should minimise the amount of time spent being sedentary (being restrained or sitting) for extended periods (except time spent sleeping).

The early years is increasingly being recognised as a critical period for development shaped largely by early life experiences. Healthy development in early childhood lays the foundation for successful developmental outcomes in later life and consequently impacts several aspects of adult life such as health and wellbeing, educational attainment and economic status.

There is increasing interest in this age group, driven in part by a growing awareness that early life experiences impact upon future health outcomes and the rising prevalence of overweight and obesity in this population.

A large proportion of children under five are enrolled in childcare, this makes it a valuable setting for the promotion of physical activity in this age group. Research suggests that physical activity levels in childcare appear generally to be very low; children accumulate less than 60 minutes of moderate or vigorous physical activity over an 8 hour day.

Whilst increasing activity in the childcare setting is important, it is recognised that physical activity should be encouraged throughout the whole day and in all settings that come into contact with this age group.

### Evidence

Physical activity in the early years has been shown to have an impact on numerous pathways relating to current and future behaviours and health outcomes.

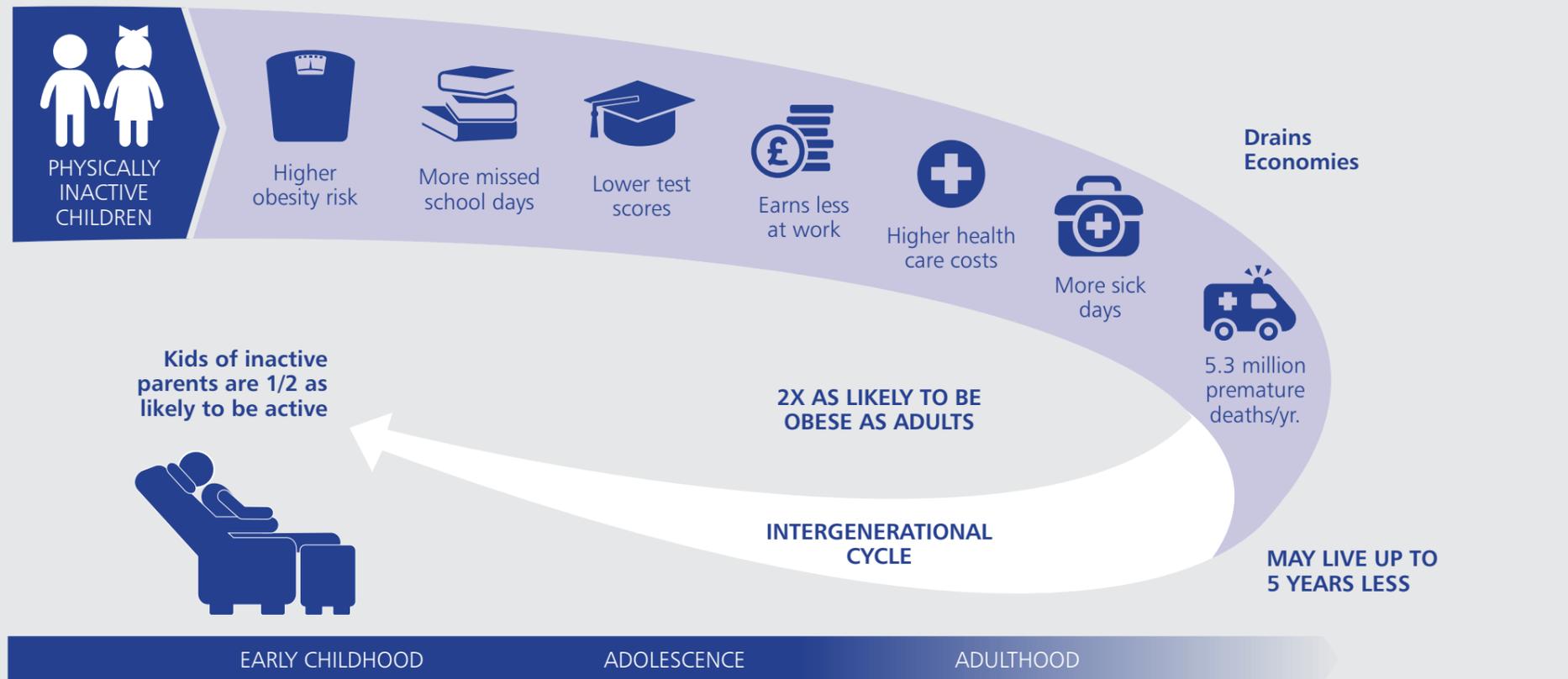
#### Physical and developmental outcomes

There is strong evidence to suggest that physical activity is inversely associated with weight as measured by BMI, suggesting that physical activity has a protective effect against weight gain. The dose response relationship of physical activity would suggest higher levels of physical activity offers the best protection.

Play is important for the development of cognitive, social and emotional wellbeing. Specifically physical activity is consistently associated with balance, locomotor skills and/or manipulative skills all of which influence physical, social and cognitive development.

In older children the link between physical activity and improved measures of cognitive development and academic achievement is relatively well established, but there is less certainty in the early years. During the first years of life, the brain undergoes a rapid period of development and it is likely that physical activity plays a key role. The benefits of physical activity for brain development are likely to accrue through a variety of mechanisms including the formation of neural structures necessary for practising physical skills.

Physical activity in the early years may be beneficially associated with self-concept, self-esteem, behaviour and emotional and social competence.



## National guidelines

### Possible actions for stakeholders

- Policy makers from various disciplines, including education, welfare, planning, health and social development should be aware of the importance of physical activity in the early years when designing policy.
- Funding should be made available for training for early years practitioners on physical activity.
- Physical activity levels and early year's settings provision of physical activity should be measured and evaluated consistently across all early years settings through embedding these elements into existing inspection procedures.
- Provide safe, attractive and accessible outdoor play facilities in local communities that facilitate physical activity in the early years.
- Maximise existing opportunities, e.g., Start4Life and Change4Life to communicate and raise the profile of physical activity in the early years to practitioners and parents.

### Possible actions for practitioners

- Provide children in their care with enabling environments that promote physical activity and reduce sedentary behaviour.
- Provide opportunities and appropriate equipment, e.g., wellies and rain coats, to enable children to spend time outdoors regardless of the weather conditions.
- Modify break times to encourage shorter more frequent breaks to provide lots of small, portable equipment, everyday objects and props for play.
- Facilitate and support parents' understanding of the importance of physical activity for their child's wellbeing by providing them with information.
- Promote parent and child activity opportunities within settings.

## Evidence for interventions

**Practitioner training** - Training early year's practitioners to integrate physical activity into settings has been shown to be consistently effective resulting in recommendations that practitioners should be trained to integrate physical activity into usual daily practice.

**Environmental approach** - Spending more time outdoors, providing children with portable play equipment and providing additional playground space have all been associated with increased physical activity. In early years settings shorter break times, as opposed to extending the duration of existing breaks, and offering opportunities for unstructured play have also been identified as effective.

**Motor skill development** - Structured activity sessions delivered in childcare are effective in improving motor skills. Successful programmes focused on fundamental movement skills, body management, physical fitness or dance, delivered in discrete units of 30-45 minutes, 2-3 days per week for up to 20 weeks.

## Impact

The importance of physical literacy cannot be underestimated. The graphic above demonstrates the negative effects low levels of physical literacy can have on both an individual and wider society. Action to increase the physical literacy of our early year's children in the borough has the potential to positively affect every stage of an individual's life course.



## Planning, Environment and Transport

The linkages between health and the built and natural environment have long been established and the role of the environment in shaping the social, economic and environmental circumstances that determine health is increasingly recognised and understood.

Being active is not simply a matter of choice. The day-to-day pressures we face, the behaviour of those around us, the sort of communities we live in and the prevailing culture relating physical activity may currently favour inactivity.

Although individuals need to be informed and motivated to adopt physical activity, the public health priority should be to ensure that environments are safe and supportive of health and wellbeing.

The environment in which we live is inextricably linked to our health across the life course. NICE guidance on physical activity and the environment emphasises that local authorities can prioritise the creation and maintenance of environments that encourage people to be active. Doing this can bring many other benefits, such as reduced traffic congestion, the revitalisation of local shops and services and increased community cohesion and social interaction.

Features of the built environment that have an impact on physical activity include:

- location, density and mix of land use
- street layout and connectivity
- physical access to public services, employment, local fresh food
- safety and security
- open and green space
- air quality and noise
- community interaction
- transport

Much of this is not about new investment; it's about maximising the potential of the many assets we already have in our parks, leisure facilities, community halls, and workspaces, and thinking differently about the way we commission and plan public sector services.

### How can the environment help?

#### Active travel

Transportation plays an important role in supporting daily activities. Active travel (cycling, walking and use of public transport) can increase physical activity levels and improve physical and mental wellbeing. Prioritisation of active travel can also reduce over reliance on motorised transport, contributing to improved air quality and a reduction in road injuries.

Re-allocation of road space to support walking and cycling; restricting motor vehicle access; introducing road-user charging and traffic-calming schemes; and creating safe routes to schools. Such changes have prompted substantial shifts from car transport to walking and cycling.

## Green Infrastructure

People who have close access to green space live longer than those without it, even adjusting for social class, employment and smoking.

Having the open space to exercise also alleviates stress and depression and has been shown to aid mental health. At a neighbourhood level, trees and vegetation improve residents' health, wellbeing and social safety.

Access to open and green space - parks, gardens, tree-lined streets, communal squares and allotments - is important for quality of life and for the sustainability of towns and cities.

Improving or adding green spaces and tree cover improves air quality as well as making spaces feel more welcoming.

## Design

Building design can encourage movement through and around the building, as well as between sites. Schools need active school playgrounds; safe routes to school; and high quality, safe bicycle parking. Similarly, workplaces can introduce practical measures such as showers for cyclists or easily accessible stairs.

## Inequalities

As mentioned previously those from disadvantaged communities are less likely to be active and their active environment also impacts upon the choices that they can make. Those living in deprived areas are:

- ten times less likely to live in the greenest areas compared with people in the least deprived areas;
- more likely to feel unsafe in their neighbourhood, with consequent negative effects on their health, including a reluctance to take exercise.

## Cost

A key aspect of the planning system is viability: will the 'cumulative burden' of the requirements to assist with making a community more active, challenge the ability of a developer to receive 'competitive returns' from their development?

By considering the elements of a physically active environment, designers and developers could create more economically thriving spaces that would add value to their schemes, as well as fulfilling national and local health policies. For example:

- Retailers report an increase in trade of up to 40% when places are made more attractive for walking.
- Places that are easier and more attractive to walk around (designed for so-called 'walkability') do better commercially (with an 80% increase in retail sales) and have higher housing values.

## Neighbourhood design

The design of a neighbourhood can contribute to the health and well-being of the people living there. Several aspects of neighbourhood design (walkability and mixed land use) can also maximise opportunities for social engagement and active travel.

Neighbourhood design can impact on our day-to-day decisions and therefore have a significant role in shaping how physically active we are. Evidence suggests that investing in infrastructure to support walking can increase levels of physical activity among all age groups. Improving neighbourhood walkability and access to recreational and non-recreational destination (such as grocery stores, schools and other amenities) can also impact positively upon social interaction among older adults.

Mixed land use developments that prioritise access to schools, recreational centres and social amenities can increase physical activity among children, adolescents and older adults. Provision of local amenities can improve mobility and social engagement among older adults.

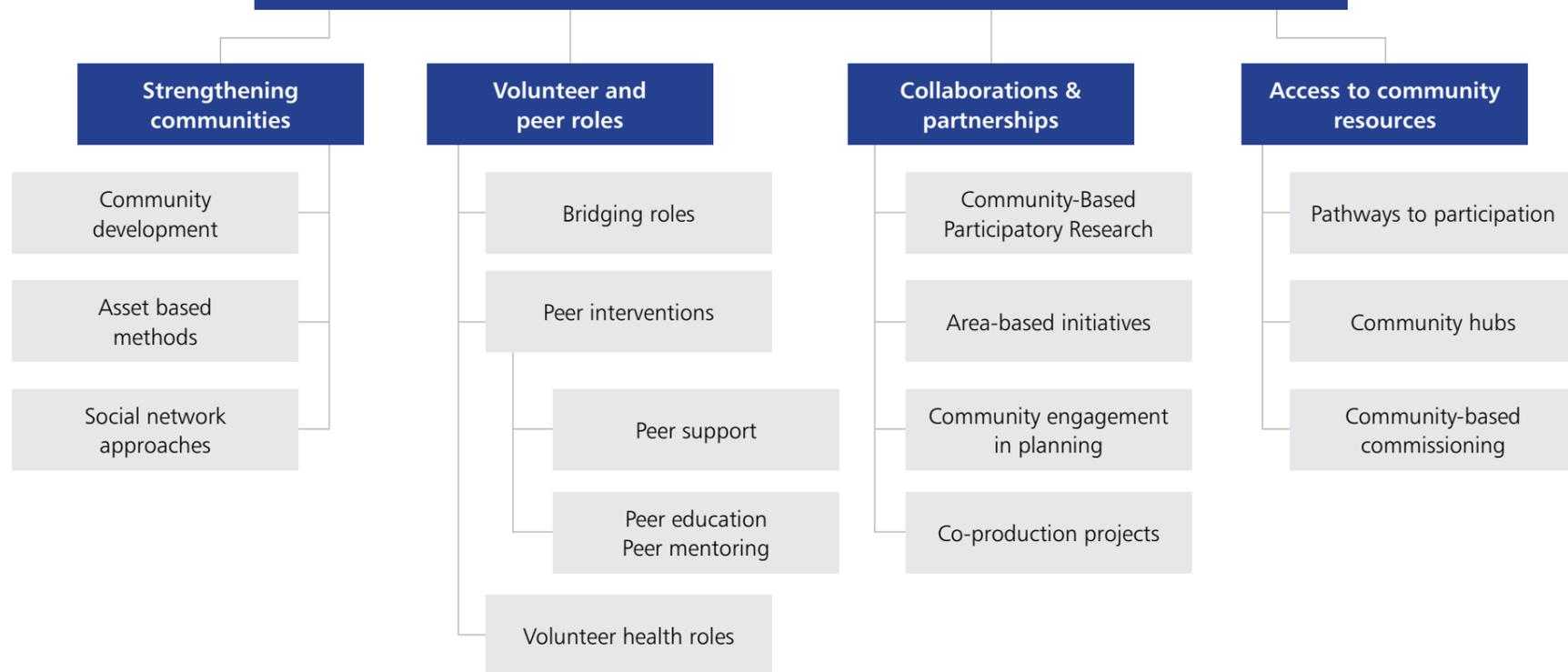
## Provision of active travel infrastructure

- Improved air quality is associated with increased physical activity among older adults
- Access to, and engagement with, the natural environment is associated with numerous positive health outcomes, including improved physical and mental health, and reduced risk of cardiovascular disease, risk of mortality and other chronic conditions.
- There is consistent evidence that having access to recreational infrastructure, such as parks and playgrounds, is associated with an increase in physical activity.

## Prioritise active travel and road safety

- Attempts to prioritise pedestrians and cyclists through changes in physical infrastructure are associated with positive behavioural and health outcomes. For instance, the separation of cycling and pedestrian infrastructure from road traffic can encourage active travel.
- Traffic calming measures, including speed humps, speed tables, cushions and roundabouts, are associated with increased walking behaviour and a reduced risk of pedestrian injury.

# Community-centred approaches for health & wellbeing



A guide to community-centered approaches for health and wellbeing (2015)

The family of community-centred approaches represents some of the available options that can be used to improve physical activity, grouped around four different strands:

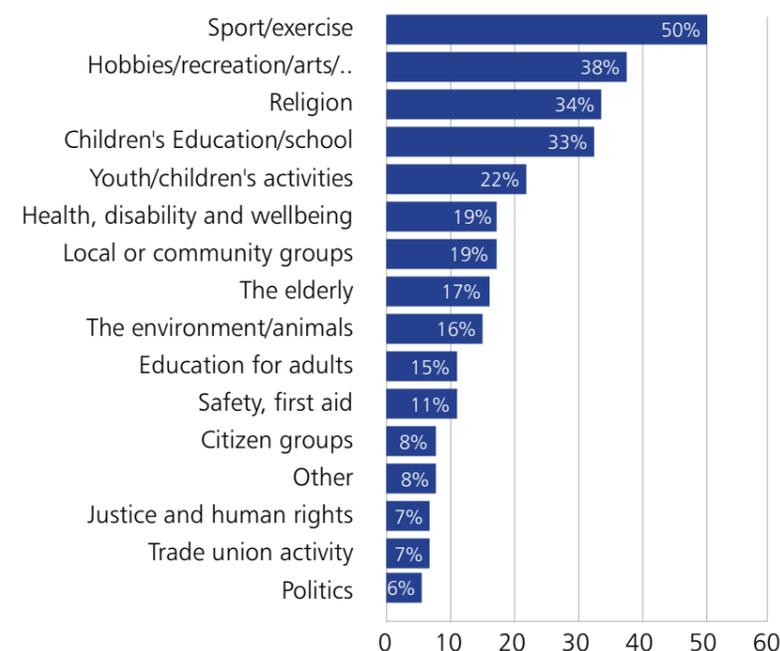
- **Strengthening communities** – where approaches involve building on community capacities to take action together on health and the social determinants of health
- **Volunteer and peer roles** – where approaches focus on enhancing individuals' capabilities to provide advice, information and support or organise activities around health and wellbeing in their or other communities
- **Collaborations and partnerships** – where approaches involve communities and local services working together at any stage of planning cycle, from identifying needs through to implementation and evaluation
- **Access to community resources** – where approaches connect people to community resources, practical help, group activities and volunteering opportunities to increase social participation

A specific example of how components of the family of community centred approaches can support an increase in physical activity levels can be found within the volunteering arm of the model.

## Volunteering

Nationally it is estimated that 27% of people formally volunteer at least once a month and 41% once a year (UK civil society almanac (2017))

- Sports organisations, clubs and groups attract the most volunteers, with half of those who have formally volunteered in the past year doing so with a sports club, organisations or group
- The most popular activity undertaken by volunteers is organising or helping to run a charity event or activity, followed closely by raising/handling money or taking part in a sponsored event



Organisation/clubs/groups to which respondents who had formally volunteered at least once in the last 12 months gave unpaid help, 2015/16 (% of respondents)

■ % of respondents

## Community centred approach to physical activity

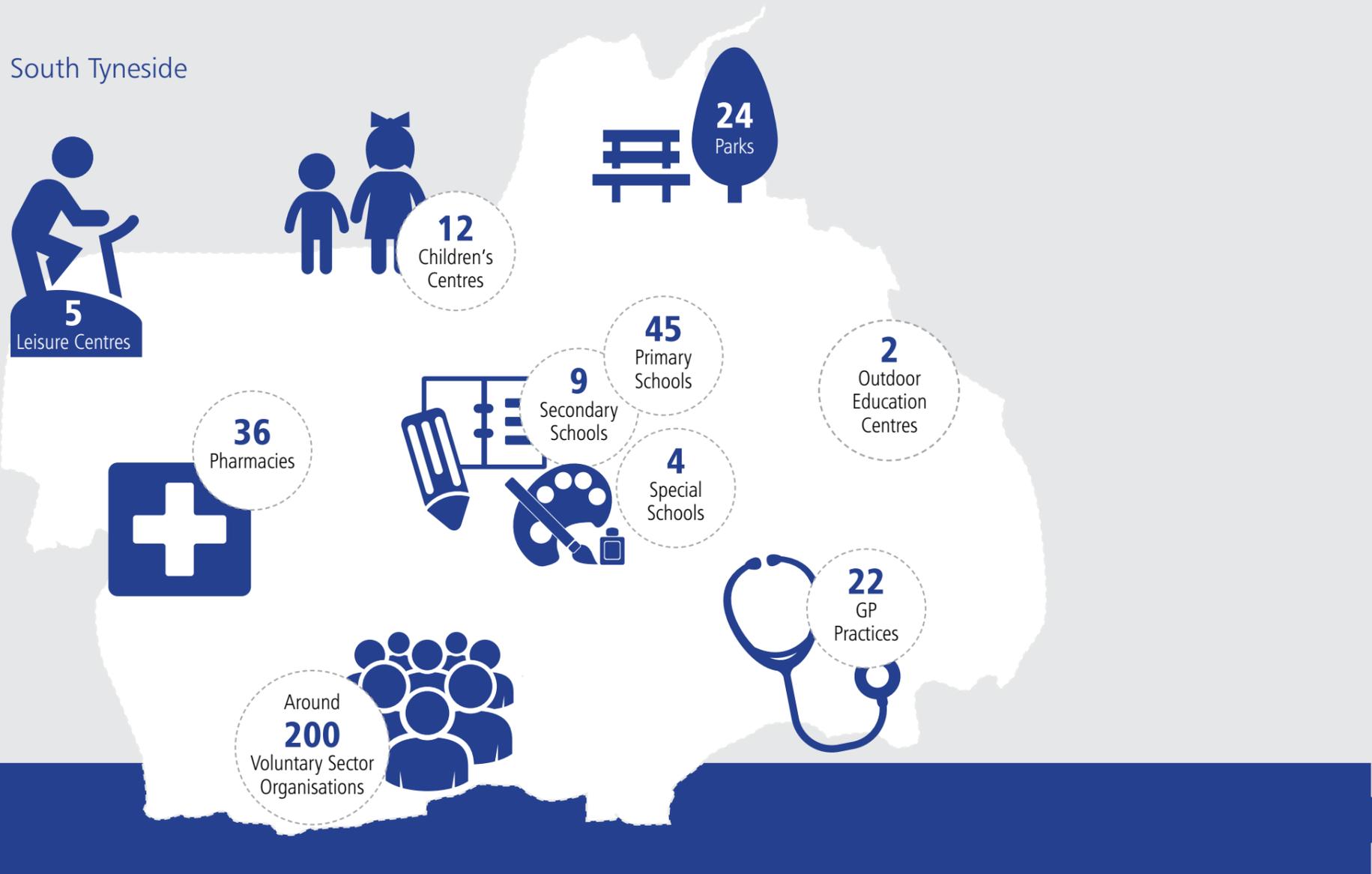
### Background

Communities, both place-based and where people share a common identity or affinity, have a vital contribution to make to increasing physical activity levels and general health and wellbeing. Community life, social connections and having a voice in local decisions are all factors that underpin good health.

As outlined in the 2015 Director of Public Health annual report, 'Communities working together to improve health and wellbeing', the assets within communities, such as the skills and knowledge, social networks and community organisations, are building blocks for good health. Community-centred

approaches are not just community-based, they are about mobilising assets within communities, promoting equity and increasing people's control over their health and lives.

This Physical Activity Strategy aims to utilise the family of community centred approaches, to support our goal of increasing physical activity within the borough.



### Our local picture

Following a mapping exercise in 2017 it was estimated that over 900 community groups were operating in South Tyneside. A mapping exercise in 2014 estimated that over 1300 people regularly undertake some form of formal volunteer work. Given the national breakdown of voluntary clubs, there could be a significant local volunteer workforce contributing towards increasing physical activity.

The physical activity strategy group will look to build on and strengthen the role volunteers can play in increasing physical activity levels within the borough while also setting out to identify where other elements of the family of community centred approaches can add value to the agenda.

### Evidence

NICE guidance (NG44, 2016) endorses community engagement as a strategy for health improvement. There is a substantial body of evidence on community participation and empowerment and on the health benefits of volunteering.

### Impact

South Tyneside has many assets, our environment, our residents, and our communities. Many of our assets are involved in an impressive range of activities that can support people to become more physically active, from participating and organising local events, to volunteering in initiatives such as health walks and parks and green space maintenance.

### Recommendations

- Consider how community-centred approaches that build on individual and community assets can become an essential part of local health plans
- Recognise the scope for action as there are a diverse range of approaches that can be used to improve physical and mental health
- Use the family of community-centred approaches as a tool to consider potential options for health improvement and preventive services
- Involve those at risk of social exclusion in designing and delivering solutions that address inequalities in health
- Celebrate, support and develop volunteering as the bedrock of community action

If being active was a pill we would be rushing to prescribe it. Physical activity is essential for health and reduces the risk of many preventable diseases and conditions from cancer to depression



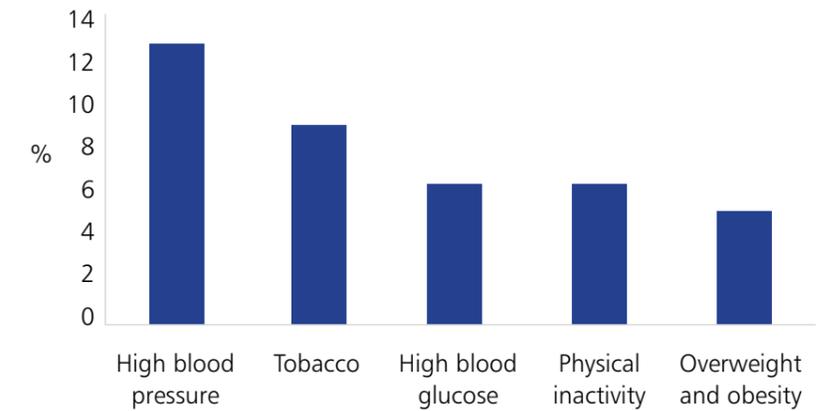
Everybody Active, Every Day  
Cross sector approach for national and local action

## Primary care/disease prevention and management

## Evidence

### Risk reduction/prevention

Physical inactivity is the fourth leading risk factor for global mortality (accounting for 6% of deaths globally). Overweight and obesity are responsible for 5% of global mortality. Within these five highest risk factors for mortality physical activity is the only one that, if improved, can contribute to reducing all of the other risk factors.



There is strong evidence that increasing physical activity can reduce the risk of many of the more common long term conditions by at least 20% while reducing all-cause mortality by between 20 and 35% overall.

## Background

Physical inactivity has been recognised as a significant risk factor for many chronic diseases and is the fourth leading cause of death and ill health globally. Yet, in South Tyneside, three out of every ten adults are inactive and putting their health at risk because they do not recognise the importance of physical activity.

As many people's first point of contact with the NHS, around 90 per cent of patient interaction is with primary care services. Primary care doctors, nurses and pharmacy staff have a real opportunity to help patients understand the value of physical activity to their health.

Primary care practitioners regularly advise and prescribe drugs to prevent certain types of illness, such as hypertension, or to reduce the risk of events such as heart attacks or strokes. It is crucial that

the primary care workforce have an understanding of the efficacy of using physical activity as a preventative option as it can have a similar risk reduction profile to most drugs with the added benefit of being free and with a safer side effect profile.

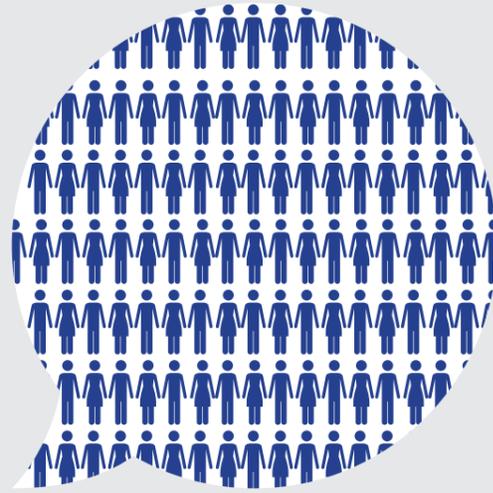
Brief advice on physical activity from healthcare professionals has been shown to improve clinical outcomes, with one in four people becoming more active if advised by a nurse or GP, however nationally, as many as 72% of GP's do not discuss the benefits of increasing physical activity with patients.

Not only is physical activity effective as a preventative option, it also forms part of the treatment recommendations for a number of long term conditions such as hypertension, diabetes, heart disease, arthritis, COPD, anxiety and depression and some cancers.

Physical Activity contribution to reduction in risk of mortality and long term conditions		
Disease	Risk reduction	Strength of evidence
Death	20-30%	Strong
CHD and Stroke	20-35%	Strong
Type 2 diabetes	35-40%	Strong
Colon Cancer	30-50%	Strong
Breast Cancer	20%	Strong
Hip Fracture	36-68%	Moderate
Depression	20-30%	Strong
Hypertension	33%	Strong
Alzheimer's Disease	20-30%	Moderate
Functional limitation, elderly	30%	Strong
Prevention of falls	30%	Strong
Osteoarthritis disability	22-80%	Moderate

## Numbers needed to treat

For one patient to get the benefits of taking statins



Doctors need to prescribe to **60** people

To get one inactive patient to meet recommended activity levels



Doctors need to advise **12**



"Let's make every contact count, for physical activity!"

### How we will achieve this?

The aim of this strategy is to secure collective commitment to addressing physical inactivity within South Tyneside, to demonstrate effective leadership in driving the appropriate systems, culture and process changes. However monitoring success will be a challenge. Establishing a comprehensive action plan will demonstrate clear accountability and ensure effectiveness of our efforts. We will review our performance, learn from experiences, build on achievements and adapt the plan as necessary. We will gather data and evidence from local and national initiatives and build on what we know works within our communities of South Tyneside.

We will encourage stakeholders: to use the data that has been collected to shape and refine physical activity provision, interventions and future services. We are committed to reviewing our local plan annually and adapting to keep pace with change and monitor progress against key priorities. Named lead officers will be responsible for the strategic oversight of each priority and will coordinate the actions that sit under that domain. An annual progress report will be produced and presented to the Health and Wellbeing Board.

### Who gains the most?

There is a clear relationship between the amount of physical activity people do and all-cause mortality. While encouraging people who are already active to do more and increasing the activity levels of all adults who are not meeting the recommendations is important, targeting those adults who are significantly inactive (i.e. engaging in less than 30 minutes of activity per week) will produce the greatest reduction in chronic disease.

### Treatment of long term conditions

Increasing physical activity is part of the management and treatment pathways of a number of common long term conditions

### Brief advice

NICE guidance PH44, physical activity: brief advice for adults in primary care, outlines the evidence and recommendations for providing brief advice on physical activity to adults in a primary care setting. It aims to improve health and wellbeing by raising awareness of the importance of physical activity and encouraging people to increase or maintain their activity level.

The guideline includes recommendations on the following areas:

- Identifying adults who are inactive
- Delivering and following up on the brief advice
- Incorporating brief advice in commissioning
- Systems to support brief advice
- Providing information and training

# Action Plan

## Increasing the Value attached to physical activity

Priority Area	Our High Level Local Actions	We will achieve this by ...
increasing value of PA	Increasing the prominence of physical activity in the work place in South Tyneside	enhancing the PA element of the local BHAWA
		strengthening the role physical activity has to play in HR policies
		using South Tyneside Council as the test bed for any new approaches
	Ensure local transport plans and physical activity agenda are fully aligned	exploring the feasibility of specific initiatives (e.g. free gyms, lunch clubs,)
		providing an overview of local and regional transport strategies and how they align to the physical activity strategy
		maximising the effectiveness of school travel plans including the co-ordinated use of modeshift stars.
	Ensure physical activity is considered as part of the development of other local strategies	identifying best practice and increasing the number of Public and private early years setting travel plans
		working with housing colleagues to consider how PA fits within the housing strategy
	Increase the emphasis of physical activity within the school setting	exploring how physical activity fits within the Community pride strategy
		reviewing the physical activity content of the current healthy schools offer to identify areas for strengthening
		identifying and promoting a physical activity 'champion' school and sharing best practice with other schools.
		developing a coordinated local approach to providing training and resources for specific school based physical activity interventions (e.g., Daily mile, 30 active minutes)
encouraging all of our schools to take up the Local Authority bikeability level 1 and 2 offer for those in years 4, 5 and 6.		



## Early Years and Physical Literacy

Priority Area	Our High Level Local Actions	We will achieve this by ...
Early Years and physical literacy	Review and develop early years healthy schools criteria	reviewing the physical activity content of the current early years healthy schools offer to identify areas for strengthening
		implementing actions that can strengthen the physical activity component of the early years healthy schools criteria
	Utilise the school's sports premium to support physical activity in the early years settings	scoping the feasibility of making a formal request for % funding of the school sports premium across the borough
		Creating a business case for pooled funding that demonstrates the impact of PA in early years settings.
		contacting regional and national CSP's to identify if pooled sports premium has been explored in other areas.
		taking a coordinated approach to collating the school sports premium info for the borough to understand where and what it is being used for. We will case study positive examples and share best practice
	Develop a focused early years STC physical activity offer	developing an evidence based physical activity offer targeted towards the early years
		commencing promotion and delivery of the early years physical activity offer
		exploring early years settings planning application criteria.
	Make better use of data and intelligence around physical activity in the early years settings	ensuring all nursery's in the borough have access to the local authority balance bike offer
		creating a dashboard of national and local data around physical activity in the early years to better inform interventions and decision making
	Maximise current physical activity training offer.	reviewing training provision currently available across the borough for early years practitioners
ensuring physical activity is a core part of the Change4Life training prospectus		
auditing the current training offer to assess take up rates		
		systematically promoting the local training offer to all early years settings ensuring all children have access to the outdoor learning environment throughout the day

## Planning and the environment

Priority Area	Our High Level Local Actions	We will achieve this by ...
Planning and the environment	Embed physical activity within the local plan	ensuring opportunities to encourage and support physical activity are delivered through Local Plan planning policies
		completing the baseline assessment template on Physical Activity and the Environment (NICE NG90)
		adopting a healthy planning checklist that incorporates physical activity
	Ensure physical activity is considered as part of other strategies	exploring the role physical activity can play within the housing strategy in relation to sustainable tenancies and transport
		exploring the role physical activity has to play within the refresh of the local green infrastructure strategy
	Continue to develop walking and cycling schemes for future delivery	physical activity strategy group to review scheme proposals
		physical activity strategy group to work with Planning and Highways to identify potential sources of funding to deliver schemes
		physical activity strategy group to assist in the identification and development of future schemes
	Make better use of data and intelligence	identifying sources of national and local data and intelligence around physical activity, transport and physically active environments
		collating national and local data sets into one performance dashboard
		exploring links between physical activity and transport data to wider determinants of health data
	Explore the use of developer contributions in relation to increasing activity	identifying and influencing the current process of how developer contributions currently operate within the borough (linked to healthy place checklist)
		linking data and intelligence to developer contribution opportunities

## Community and voluntary provision

Priority Area	Our High Level Local Actions	We will achieve this by ...
Community	Ensure physical activity is part of the Inspire five year strategy	supporting the development of the five year strategy
		ensuring sport and physical activity is a prominent in any volunteer development work (volunteer passport)
		encouraging and supporting voluntary and community sector organisations to source funding and plan and deliver specific interventions
	Embedding physical activity within a Better U programme	ensuring physical activity is a core component of the development of the A Better U programme
	Develop the role of the young ambassadors to include physical activity	including health and wellbeing venues in the 'Your Welcome' young person friendly assessment programme
	Ensure signposting activities are well promoted	promoting the use of wellbeing info through the GP Health Pathways system
		promoting the use and benefits of wellbeing info to the third sector via Health net etc.
		including wellbeing info in any contracting arrangements with third sector providers
		ensuring physical activity is part of the Local Authority Lest talk directory
	Monitor and evaluate specific commissioned programmes	assessing and improving the impact of commissioned physical activity programmes
working in partnership with providers to understand how we better promote commissioned services across the borough		
Explore the role community associations have to play in increasing community level physical activity levels	better understand the current community association offer	
Develop a family centred approach pilot within Marsden Health and Wellbeing Centre	providing an intelligence function to community associations to identify need and plan services	
	Ensuring physical activity is a core component of the Family Centred Approach	

## Primary Care

Priority Area	Our High Level Local Actions	We will achieve this by ...
Primary Care	Explore the use of a physical activity prescription pad to support brief advice	testing a prescription pad and GPPAQ use with practice nurses for acceptability.
		considering how full roll out of a physical activity pad would be implemented and how evaluation should take place. Consider offer from Kings College London.
	Develop a co-ordinated approach to the promotion of training opportunities for PA in primary care	promoting the use of BMJ learning modules for physical activity and long term conditions
		promoting the use of the PHE clinical champions training. Consider a specific Time in Time out session
	Ensure HealthPathways system is set up to promote physical activity where appropriate	developing a physical activity specific pathway within HealthPathways
		embedding physical activity within condition specific pathways where appropriate
	Ensure systems are in place to support people to increase their physical activity to support condition management	promoting the use of wellbeing info within the third sector
		ensuring Local authority physical activity pages are up to date, reviewed regularly and promoted
		identifying opportunities to utilise physical activity as a secondary prevention treatment option
		including physical activity in the fit for operation agenda
ensuring Local Authority Lets Talk directory is linked to Health pathways		



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## Implementing and monitoring our progress

The task ahead of us is complex and challenging; however, should we succeed then the rewards for our children, families and wider communities such as businesses, schools, etc. will be significant. This strategy is intended to provide an overview of how we, as a partnership, aim to tackle this issue and succeed in achieving a substantial decline in the levels of inactivity within South Tyneside.

## Our Delivery plan and Annual Report

Whilst the action plan set out in the strategy is a three year programme, it is essential that we outline smaller goals in order to ensure that the implementation of the strategy is successful. The strategy will be supplemented with an annual delivery plan which will set out the actions that will be delivered on over the coming year. The delivery plan will enable us to monitor the progress made against specific actions and update and shape the action plan going forward.

An update report will be published annually to outline the progress made in delivering the strategy and will set out the priority actions for the following year.

If you know someone who needs this information in a different format, for example large print, Braille or a different language, please call Marketing and Communications on 0191 427 1717.