

# Ehara taku toa i te toa takitahi. Engari, he toa takitini.

My strength is not the strength of one. It is the strength of many.

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## Introduction

Living Well is the outcome we want for people in the region where 'Living Well' means improving physical and mental wellbeing; personal development and achievement; and social and community cohesion and development; through regular physical activity – play, active recreation (including active transport), and sport.

Physical activity levels have been in decline for some time and this decline is more marked in some communities across our region than in others.

This is of concern because physical inactivity is now identified as the fourth leading risk factor for global mortality. The decline in physical activity levels has major implications for the prevalence of noncommunicable diseases (NCDs) and the general health of the population

## Physical activity in the Wellington region

- 527,800 people live in the Wellington region
- On any given week 391,125 (75%) people in the Wellington region participate in sport or recreation activities
- Only 23% of adults participate enough to meet physical activity guideline thresholds
- 9.7% of the region's population do no physical activity
- Inactivity cost the Wellington region \$141 million (2013)
- 12% of the region's residents walked, jogged or cycled to work
- The main barriers to participation are cost (64%) and time (59%)
- 90.7% of people are motivated by improving their fitness and health.
- 87.9% are motivated by enjoyment

New Zealand's recommended physical activity guidelines focus on less sitting, more movement, and better sleeping as part of an integrated approach to improving health and wellbeing. Currently only half of the people in the Wellington region are meeting the recommended thresholds.

# **Purpose**

The purpose of the Living Well Strategy is to achieve greater collective impact on wellbeing outcomes acquired through physical activity. By working better together we will be able to provide quality opportunities and support for people to be physically active. The mechanism for this is an agreed planning framework which will help identify where and how we can work together at a regional, sub-regional and/ or district/city level.

'Collective impact' involves multiple stakeholders collaborating across different sectors and/or organisation types to address complex social issues in local communities. This collaboration is built around a common agenda and requires, amongst other things, a coordinating or backbone organisation to manage and synchronise activities that contribute to the desired outcome(s).

Enabling wellbeing of our communities through regular physically active is the shared aspiration for Living Well. Evidence shows us that there are multiple benefits to individuals, communities, and the environment when people participate regularly in some form of physical activity. More generally we know that we are happier, healthier, and more connected when we are more physically active.

We know that the benefits that come from being physically active contribute to social capital and human capital indicators of wellbeing as well as several of the current wellbeing domains.

Increasingly, collaboration between organisations is viewed as a critical factor in achieving sustainable change. As organisations involved in, and concerned about the wellbeing of our communities, we are being urged to work better together and to harness our collective knowledge, skills, and resources.

When we combine our knowledge, resources, and talent and take collective responsibility for improving the wellbeing of the people in our communities then we will all be better placed to respond to changes in society that challenge everyday physical activity and the subsequent benefits that can be realised.

Nuku Ora, as a regionally focused organisation, is well-placed to operate as the backbone organisation and provide support to realising the outcomes of Living Well for our region.

# **Our Region's Plan**

Our Vision For further discussion: Evaluation is likely to be more qualitative than quantitative

perhaps in the form of case studies, telling stories verbally, or pictorially. This would be a useful conversation across the group to consider how we might evaluate

progress.

Our Purpose Achieve greater collective impact on our communities' physical, mental, and social

wellbeing through working more collaboratively on play, active recreation (including

active transport) and sport.

## **Our Objectives**

Objective	Explanation	Leading To
Promote the benefits of being physically activity	Our communities are well informed about the value and benefits of physical activity and use this information to choose to be physically active.	INFORMED COMMUNITIES
Optimise available spaces and places	We have the right community infrastructure to meet demand that is accessible to all, and supports a range of physical activities, and provides a connected network of facility types, including walkways and cycleways, open space, nature space.	CONNECTED NETWORK OF SPACES AND PLACES
Provide accessible opportunities for people to be physically active	There are appropriate physical activity programmes, opportunities, and events available for everyone in a variety of settings to support participation across our region (including high-quality play and PE programmes and experiences in schools).	ACTIVE PEOPLE
Work better together	Improved collaboration within and across sectors in areas where we can have greater collective impact on the physical activity levels of our communities including:  Ieadership and workforce development  investment and policy support  advocacy	AN ENABLING ENVIRONMENT

(Based on the World Health Organisation's Global action plan on physical activity 2018–2030: more active people for a healthier world) ISBN 978-92-4-151418-7 © World Health Organization 2018

## **Our Outcome**

Everyone, irrespective of gender, age, ethnicity, ability or disability, or economic situation gets to experience the short and long-term benefits of being physically active whether it be through play, active recreation, active transport, or sport as a consequence of much greater collective effort from organisations towards creating better opportunities for communities to become physically active, healthier, and socially connected.

# **Principles of Implementation**

The following principles will underpin our approach.

## Locally led

This is about engaging (talking to people and building relationships) with a community and taking time to understand:

- the community and what makes it unique
- different perspectives, knowledge, challenges, and barriers
- local networks and key local people
- where and how you could add value to other projects and initiatives
- · what matters most to that community.

## Insights and evidence driven

Being insights and evidence driven means:

- using multiple sources of information within the context you are working in, to help you understand the needs of participants and to improve decision-making
- evaluation becomes an integral part of the development and implementation of any initiative to ensure we continue to be effective in meeting the needs of participants.

## Targeting need

Physical activity decline is more marked in some communities across our region than in others. To address this, we must consider variations in motivation, confidence, and competence to be active of different groups

## Inclusive and equitable

Some groups within our communities still face barriers to being regularly physical active and therefore do not get to experience the benefits that come with regular physical activity. In our work we need to consider the needs of the widest range of people when it comes to planning and decision-making about physical activity.

#### Valuing Te Ao Māori

The needs of all in the region have been considered during the development of this strategy. Implementation of the strategy will need to recognise and respond to the uniqueness of Māori in terms of opportunity, impact, partnerships, and values.

## Better together

This is about looking at opportunities to work with others to share knowledge, expertise, and resources to achieve outcomes for our communities.

# **Collective Impact through Collaborative Action**

There is no one solution and no one organisation that can achieve Living Well outcomes. Success will require the collaborative effort of those invested in the wellbeing of the community at large, including the communities involved.

This means considering ways to align our activities – from programme delivery to policy development and considering opportunities to collaborate and coordinate effort on things that we cannot do alone.

Successful collective impact efforts meet five requirements as shown in the diagram below.



Not all collaborative effort will have a regional focus. There will be opportunities at sub-regional and city/district levels to work together on projects that positively influence wellbeing.

Nuku Ora is well-placed to operate as the backbone organisation, particularly given its regional focus and ability to coordinate the activity required.

# **Regional Conversations**

As part of the implementation of Living Well we will find the best way(s) to facilitate conversations that will drive change through improved understanding and greater combined thinking and action.

A key element in achieving collective impact involves coming together to discuss critical issues that affect the outcomes we are seeking in order to inform and coordinate action.

Through the implementation of Living Well we will initiate conversations about issues and challenges for the region with a view to finding solutions or ways forward for managing these.

Some examples of themes and conversation topics are:

#### **Equity**

- Diversity and inclusion how do we address and manage this across the region? In this conversation we would need to consider gender (including gender identity), disability, the changing ethnic and cultural landscape and how we make sure that there is equitable access to physical activity opportunities in our region.
- Inactivity and economic disadvantage and how we can address this. How do we remove or mitigate cost as barrier to participation?

#### **Good practice**

• Balance is better – how do we best provide quality opportunities for children and young people to ensure their enjoyment and long-term participation in sport and other physical activities?

## **Sport integrity**

- Safeguarding children
- Antidoping, match fixing

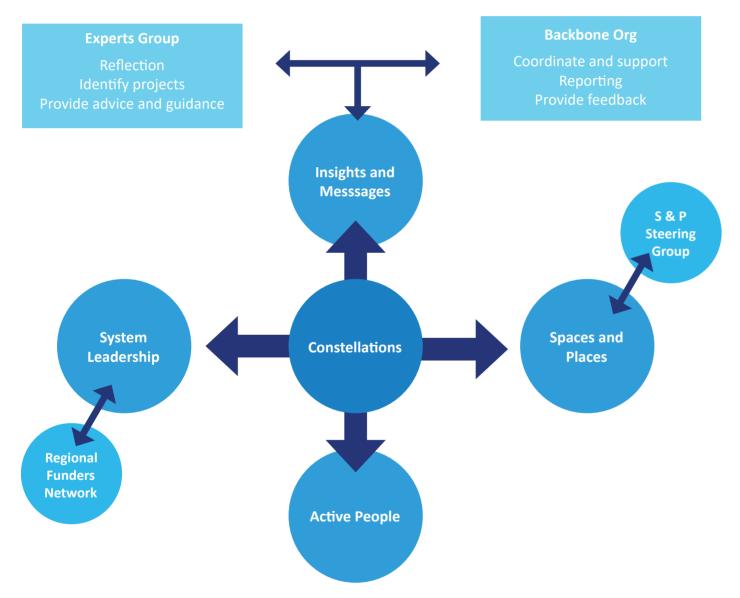
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# **Living Well Oversight**

We will apply a constellation governance model which is a light-touch model of governance biased towards action. This will allow us to engage with communities and respond to local needs and interests.

Constellations are outwardly focused, nimble action teams of people and organisations aligning their self-interest for collective impact.

The intended overall governance model for Living Well is represented in the diagram below.



Note that the makeup of each group is likely to reflect the differing needs of interested parties. It may be that for some such as the Active People group that there are sub-groups and networks focused on specific population groups or communities or physical activity domains. The proposed Funders' Network is an example of this.

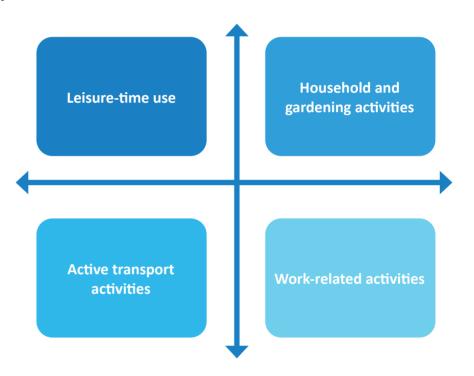
## Appendix 1: What is physical activity

## (Play, active recreation, active transport, sport)

Physical activity is defined as any bodily movement produced by skeletal muscle that requires energy expenditure.

Physical activity can be undertaken in many ways: at work and around the home, to get from one place to another, and as a way of using leisure time.

## **Physical activity domains**



For the purposes of Living Well, we will focus on leisure-time physical activity – play, recreation, and sport – and elements of active transport where:

**PLAY** is a way of being physically active that allows children to experience fun, joy and laughter in a way that is important to them. It's also where they develop and practice life skills.

**RECREATION** is physical activity that can be characterised as being more informally organised, less focused on competing with others and participant-led in terms of time and place.

**SPORT** is physical activity that can be characterised by more formal organisation, competition and rules driven, more organisation led and held to specific times and places.

**ACTIVE TRANSPORT** includes any kind of transport where you are using physical activity to travel to and from a destination, including walking, cycling, scooting and skateboarding.

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# Appendix 2: Physical inactivity, health and wellbeing

Regular active play, limited sitting and enough good-quality sleep are important for a child's healthy growth and development. From birth to five years of age, children experience a significant amount of physical, cognitive and socio-emotional development. Movement, through play, encourages this development. Play is an important way for a child to grow physically, socially, emotionally and spiritually, all of which are vital for their future health and wellbeing.

For children and young people following these guidelines is associated with better body composition, cardiorespiratory and musculoskeletal fitness, academic achievement and cognition, emotional regulation, positive social behaviours, cardiovascular and metabolic health, and overall quality of life. The benefits of following these guidelines far exceed potential risks.

For adults, regular physical activity is a well-established protective factor for the prevention and treatment of the leading noncommunicable diseases (NCDs), namely heart disease, stroke, diabetes and breast and colon cancer. It also contributes to the prevention of other important risk factors such as hypertension, overweight and obesity, and is associated with improved mental health, delay in the onset of dementia, and improved quality of life and well-being.

Physical inactivity is costly economically, socially, and individually. Low physical activity accounted for just under 3% of all illness, disability and premature mortality in 2013 (Ministry of Health 2016).

Physical inactivity contributed to 12.7% of premature deaths (all-cause mortality) and type 2 diabetes alone costs the health system \$1 billion per annum<sup>1</sup>.

Physical inactivity is on the rise – only 7% of 5-7-year olds are getting the recommended level of moderate to vigorous activity. From the Active NZ Survey, we can see that currently across New Zealand 58% of people are active.

¹http://www.gw.govt.nz/assets/About-GW-the-region/News-and-media-releases/Physical-inactivity-costs-report.pdf

## **Appendix 3: New Zealand Physical Activity Guidelines**

New Zealand's recommended physical activity guidelines focus on less sitting, more movement, and better sleeping as part of an integrated approach to improving health and wellbeing. The focus below is on the more movement aspect for different age groupings. The full guidelines can be found here.

## Recommended levels of physical activity for children under five years

- 1. Provide fun activities that support physical, social, emotional and spiritual growth (at least three hours every day for toddlers and pre-schoolers, spread throughout the day).
- 2. Include plenty of opportunities for active play:
  - that develop movement competence and confidence
  - that provide sufficient challenges to build resilience and encourage creativity through exploration
  - where children are by themselves as well as interacting with others, such as parents, siblings, friends, whānau/family and other caregivers
  - that include a variety of indoor and outdoor activities, especially activities involving nature.

## Recommended levels of physical activity for children aged 5 - 17 years

- 1. An accumulation of at least 1 hour a day of moderate to vigorous physical activity (incorporate vigorous physical activities and activities that strengthen muscles and bones, at least 3 days a week)
- 2. No more than 2 hours per day of recreational screen time
- 3. Participating in structured and unstructured light physical activities.

#### Recommended levels of physical activity for adults aged 18-65 years

- 1. At least 2½ hours of moderate or 1¼ hours of vigorous physical activity spread throughout the week.
- 2. For extra health benefits, aim for 5 hours of moderate or 2 ½ hours of vigorous physical activity spread throughout the week.
- 3. Do muscle strengthening activities on at least 2 days each week.
- 4. Doing some physical activity is better than doing none.

## Recommended levels of physical activity for adults aged 65 years and over

- 1. The following recommendations apply to all older people in New Zealand but should be adjusted for each older person according to their individual needs and abilities. Consult an appropriate health practitioner before starting or increasing physical activity start off slowly and build up to the recommended daily physical activity levels.
  - be as physically active as possible and limit sedentary behaviour
  - aim to do aerobic activity on 5 days per week for at least 30 minutes if the activity is of moderate intensity; or for 15 minutes if it is of vigorous intensity; or a mixture of moderate- and vigorous-intensity aerobic activity
  - aim to do 3 sessions of flexibility and balance activities, and 2 sessions of muscle-strengthening activities per week.

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- 2. The following recommendations apply to older people in New Zealand who are frail in place of the recommendations given above. Older people who are frail should:
  - be as physically active as possible and limit sedentary behaviour
  - consult an appropriate health practitioner before starting or increasing physical activity
  - start off slowly and build up to the recommended physical activity levels
  - aim for a mixture of low impact aerobic, resistance, balance and flexibility activities
  - discuss with their doctor about whether vitamin D tablets would benefit the older person.

# Appendix 4: Addressing physical activity behaviour change

## **Address individual factors**

- Beliefs and attitudes towards physical activity
- Help build self-efficacy relating to physical activity

## **Build social networks**

- Physical activity becomes the norm
- People are supported to become and remain active

## **Remove barriers**

- Improve access for different groups and communities
- Find solutions to barriers cost, transport, timing, proximity, participant-centred practices, availability of spaces and places, programmes

## Create an enabling environment

• Alignment and coordination of activities and resources that support the system such as policy, investment. workforce capability etc

# Appendix 5: Physical activity and wellbeing in the Wellington region

From *Active NZ 2018* we know that in the Wellington region:

- Adult participation has dropped 1% since 2017
- Young people's participation is holding, but for 12-14 year olds there was a 2% drop
- From 1998 2014, adult participation in sport and active recreation fell 7.7%; membership of sports clubs fell 11%.
- Overall there was a 2% drop in participation in sport
- Only 9% of youth and 26% of adults in the Wellington region are participating enough to meet physical activity guidelines
- The small drop in participation is mostly seen in high deprivation areas and across groups who are already participating less than average (Asian, Maori, Pacific people).
- Maori adults' participation rate in Wellington region is 68% in 2018 but was 73% in 2017, Pacific people participation also dropped 1%.

#### Barriers to participation for young people overall include:

- Too busy (44%)
- Too tired (18%)
- Too hard to motivate myself (18%)

Those who answered 'too hard to motivate myself' are mostly from low deprivation areas (21%) vs. high deprivation (15%)

#### For young people in high deprivation areas the barriers also include:

My family can't afford it (23%)

#### **Key findings from Active NZ 2018 also indicate that:**

- people who do at least 2.5 hours of recreational physical activity each week have 51% higher odds
  of reporting good mental wellbeing, however, participation in at least 4.5 hours per week increases
  the odds to 65%.
- the odds of having better mental wellbeing increased for each additional day of recreational physical activity from two to three days (24%), four days (18%) and five days (13%) per week.
- people meeting the physical activity recommendations by participating in vigorous-intensity recreational activity have 57 % higher odds of having good mental wellbeing compared to 23% for those participating at a moderate-intensity level.

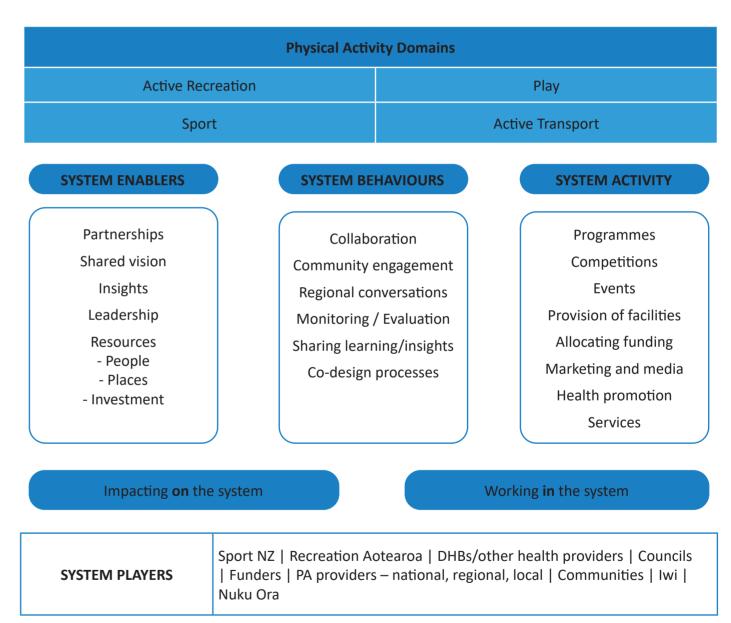
## Additionally we know from Ministry of Health data that:

• The proportion of people who are overweight or obese is growing (as is the total number of people who are overweight or obeses as the population grows) from 64.3% in 2011 to 66.8% in 2017.

## Appendix 6: Our regional physical activity system

## **System Purpose**

- Ensure people have the personal attitudes and self-efficacy to choose to be physically active
- Address barriers to ensure equitable, safe, and easy access to PA opportunities
- Ensure there are social networks/norms to support physical activity as a lifestyle choice
- Provide opportunities that enhance the physical activity experience for all



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