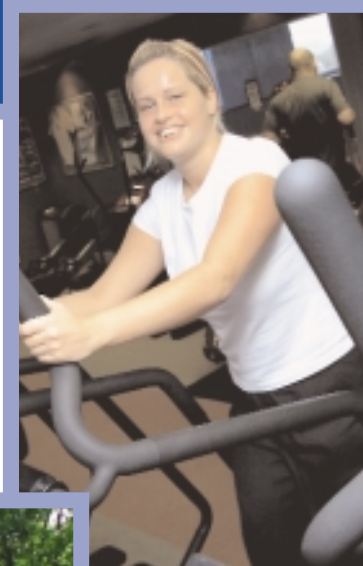


Physical Activity Strategy

*Moving towards a healthier
community in Gateshead*



January 2004



Foreword

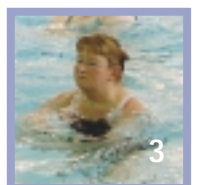
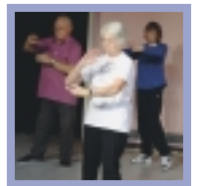
I am very pleased to introduce this physical activity strategy for Gateshead. The Council's vision for Gateshead is local people realising their full potential, enjoying the best quality of life in a healthy, equal, safe prosperous and sustainable environment. We all want local people living longer, healthier lives and one of the ways that we can help to achieve this is by participation in a rich array of cultural and leisure opportunities, including physical activity and sport.

None of this can be achieved without working in partnership and one of the strengths of this strategy is that it brings together a range of agencies that are working to increase levels of physical activity in the borough.

As a frequent participant on Health Walks I know the benefits that regular physical activity can bring, both in the short and longer term. Not only will this strategy help to co-ordinate and direct work that will tackle heart disease, stroke, diabetes and bowel cancer but also the worrying recent rise in obesity. Regular physical activity also has an important role to play in promoting mental wellbeing and social inclusion.

This strategy will help us all to work with local people and through the Gateshead Strategy partnership to harness the energies and resources of all those who have the interests of Gateshead and its people at heart.

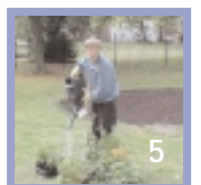
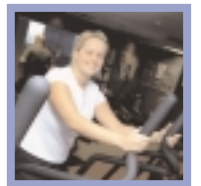
*Councillor David Napier
Cabinet Member - Health Portfolio*



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1 Executive Summary

“The lack of physical activity is a major underlying cause of death, disease and disability. Preliminary data from a WHO study on risk factors suggest that a secondary lifestyle is one of the ten leading global causes of death and disability. More than two million deaths each year are attributable to physical inactivity”

(World Health Organisation, Move for Health 2002)

Physical activity is now widely accepted as a major contributor to good health.

The potential long-term health benefits of increasing physical activity are immense.

Physical activity has well-documented benefits for reducing the risk of major causes of illness and death in Gateshead. Notably, there are benefits in reducing coronary heart disease, diabetes, certain cancers and mental health problems.

Gateshead also has a longstanding commitment to sporting excellence. However, current levels of physical activity in the general population of England, and Gateshead, are a cause for concern. In England only 32% of adults take 30 minutes of moderate exercise five times a week, in line with national recommendations.

In Gateshead this figure is only 26%. This compares poorly to other nations such as Finland where participation levels are at 80%. The Government has set the following target for physical activity within their strategy for sport and physical activity, “Game Plan”.

“To encourage mass participation the Government have set a target of 70% of the population being physically active (30 minutes of moderate exercise five times a week) by 2020.”

The Government’s long term vision for physical activity and sport for 2020 is;

“to increase significantly levels of sport and physical activity particularly among disadvantaged groups, and to achieve sustained levels of success in international competition”.

The aim is to increase participation levels for the whole population, but interventions should focus on:

- the most economically disadvantaged within those especially on young people, women and older people.

The Government have also set a specific target for 2005:

“to have at least 75% of children having the chance to participate in two hours of high quality sport and PE every week.”

1.1 Aim of Gateshead's strategy

Moving towards a healthier community is a strategy for Gateshead. A multi-agency task group was convened to develop the strategy for Gateshead. The task group have developed an overarching aim which is:-

"To get more people to be more active more often, and to ensure that there is a particular focus on certain target groups and inequalities".

1.2 Objectives of Gateshead's Strategy

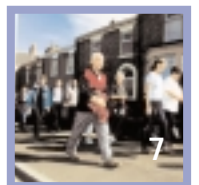
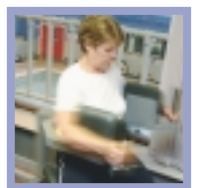
The objectives of Moving Towards A Healthier Community in Gateshead are to:

- increase levels of physical activity among the people of Gateshead
- provide a framework for individuals, groups, and organisations to work together to increase levels of physical activity
- develop a range of opportunities for people to become more physically active, based on current evidence and knowledge of local need
- develop, and review, a clear action plan based on national targets and local need

1.3 Principles of Gateshead's physical activity strategy.

The strategy and action plan are based on the following principles:

- there should be opportunities for everyone to become more physically active but ensure that those least likely to take part are targeted and included
- partnership working
- developed through the local and national policy framework
- evaluation, and monitoring against objectives, are key elements of all initiatives, and of the overall strategy
- to ensure that access to a range of services, both statutory and voluntary is central to the strategy
- to ensure that environment, transport and land use planning issues are implicit as well as explicit, within the strategy
- to consult with individuals, groups and the population in the development of programmes seeking to increase physical activity levels
- that increasing physical activity has links to other health and well being issues including mental health, sport, nutrition and these links need to be developed and strengthened.



2 Why Bother?

2.1 Benefits of physical activity

Physical Activity has positive effects on many aspects of health and well being. One of the most important effects is its role in reducing coronary heart disease. Regular exercise also reduces heart disease, stroke and levels of stress.

There is good evidence that regular physical activity helps to:

- reduce the risk of coronary heart disease
- reduce the risk of stroke
- prevent or delay the onset of high blood pressure
- regulate body weight
- reduce the risk of osteoporosis
- reduce the risk of colon cancer and other cancers
- prevent falls and fractures in older people, by improving co-ordination, strength and balance
- reduce symptoms of anxiety and depression
- prevent social exclusion
- provide social benefits of increased social networks

Physical activity initiatives can also have an impact on transport and environmental policy.

2.2 Health risks of physical inactivity

Physical inactivity is a major contributory factor in some of Gateshead's biggest killer diseases:

- heart disease
- stroke
- diabetes
- bowel cancer

Physical inactivity is also associated with other health problems, such as obesity, depression and osteoporosis. The incidence of stroke among middle-aged men in the UK is thought to increase threefold as result of physical inactivity.

The risk of colon cancer is doubled in sedentary people compared to the most active people.

Over one third of coronary heart disease (CHD) deaths (110,000 deaths yearly in England) are estimated to be attributable to physical activity.

This strategy seeks to reduce deaths from disease by a comprehensive programme of initiatives to ensure that:-



- early intervention is possible
- children and young people have positive experiences of physical activity
- older people have a range of options available
- professionals are aware of the benefits of physical activity and are able to promote physical activity in their work.

2.3 Size of the problem

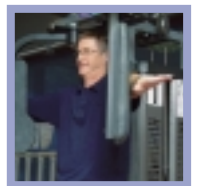
One of the most important consequences of physical inactivity is obesity. The UK is witnessing an 'epidemic' in the proportion of adults who are overweight or obese. Presently, one in five adults is overweight, a proportion that has nearly trebled in the last 20 years. At present rates, it is likely that one in four adults will be overweight in 2010¹.



Children are leading more sedentary lives, being drawn into lifestyles centred around television and computer screens. Overweight children often become overweight adults² and the number of overweight children is rising³. The association between obesity and diseases such as coronary heart disease (CHD) and Type II diabetes is well-established. Already, the number of young people with Type II diabetes is rising.

The Gateshead Health and Lifestyle Survey⁴ (1996) has estimated that 50% of men and 39% of women are over the ideal body weight. A similar survey of Gateshead pupils suggested that 10-15% of primary school pupils appear to be overweight⁵.

In Gateshead, the standardised mortality ratio (SMR) of CHD (1997-9) compared with England and Wales is 127, which means that Gateshead has a 27% higher rate of deaths from CHD compared with England and Wales. CHD is much more of a problem for women (SMR = 140) than for men (SMR = 117).

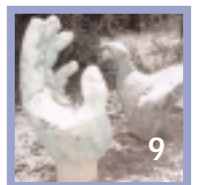


There are also higher rates of colorectal cancer in Gateshead (SMR = 108), where there is a particular problem in the rates of disease in females (SMR = 116).

2.4 Level of inactivity

In England, only about 37% of men and 25% of women currently achieve the recommended levels of physical activity⁶ of 30 minutes of accumulated periods of moderate activity on at least five days per week.

This percentage decreases with age. This compares very poorly with high achieving nations such as Finland where the participation rate is 80% and actually increase with age.



In Gateshead, the assessment of physical activity levels suggested only 26% of adults achieved five or more periods of physical activity per week⁴. Amongst Gateshead pupils, boys exercise more than girls, but there is a steady decline in physical activity during adolescence (only 25% of Year 10 girls exercise on three or more days)⁵.

This strategy seeks to:

- find out more about the people of Gateshead - what are the barriers to physical activity, what are the trends in our young people
- develop programmes to overcome barriers
- develop actions based on peoples specific needs

2.5 Cost of inactivity

Inactivity is costly not only to the individual, but also to the community and the nation, in both human and economic terms.

- Coronary heart disease (CHD) is a major cause of premature death and ill health in this country. 1.4 million people suffer from angina and CHD accounts for some 110,000 deaths yearly in England (41522 deaths under age 75 in 1998). 35 million working days are lost each year due to CHD.
- The cost of CHD to the NHS and social services was estimated at £1.6 billion in 1996.
- The direct cost of treating obesity in England was estimated at £497 million in 1998.
- The indirect costs, which include sickness absence and premature mortality, were estimated at £2.1 billion¹.

2.6 Health inequalities

There is good evidence that people with higher incomes or in non-manual occupation groups participate more frequently in active leisure pursuits than those with lower incomes or in manual occupation groups. However, the latter groups tend to be more active at work, including housework⁶.

Obesity is associated with lower socio-economic status. Children in lower socio-economic groups are more likely to spend more time watching television and are more likely to be overweight⁷.

The Governments overall objective is to increase participation levels of all. However, they highlight a need to develop participation amongst the most disadvantaged groups in society.

Within this approach there are some specific groups requiring additional targeting:

- young people up to 11
- young people 11-16
- young people 16-24
- women
- older people

This strategy for Gateshead seeks to:

- ensure that health inequalities are addressed throughout all initiatives
- target specific groups
- link closely and contribute to other work aiming to reduce inequalities

3 The National Framework

Increasing physical activity is part of a range of National Strategies. The Government has set out its long term vision for physical activity and sport in Game Plan.

3.1 National Service Frameworks

The National Service Frameworks (NSF) issued by the Department of Health (DH) set out long term and far-reaching healthcare programmes for:

- improving services for the prevention, treatment and rehabilitation of specific diseases
- improving healthcare services for specific target groups.

To date, NSFs exist for Coronary Heart Disease⁸, Diabetes⁹, Mental Health¹⁰, and for Older People¹¹. The Cancer Plan¹², although not an NSF functions as one.

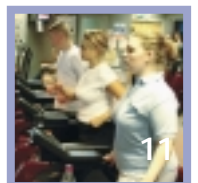
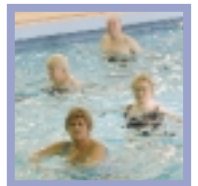
Within each NSF, there are standards recommending action in key areas including prevention of disease. This section explores the issue of physical activity within these frameworks.

3.1.1 Coronary Heart Disease

The National Public Service Agreement for the Department of Health includes a target to reduce mortality rates from heart disease and stroke by at least 40% in people under 75 by 2010. This equates to a total of 200,000 lives.

The NSF standards relevant to physical activity are:

Standards 1 and 2: Reducing heart disease in the population



The NHS and partner agencies should:

- develop, implement and monitor policies that reduce the prevalence of coronary risk factors in the population, and reduce inequalities in risks of developing heart disease

Standards 3 & 4: Preventing CHD in high risk patients

General practitioners and primary care teams should

- identify all people with established cardiovascular disease and offer them comprehensive advice and appropriate treatment to reduce their risks.
- identify all people at significant risk of cardiovascular disease but who have not developed symptoms and offer them appropriate advice and treatment to reduce their risks.

The specific targets for Health Authorities, Local Authorities, Primary Care Trusts and NHS Trusts are:

April 2001:

- Have agreed and be contributing to the delivery of the local programme of effective policies on (a) reducing smoking, (b) promoting healthy eating, (c) increasing physical activity and (d) reducing overweight and obesity.

April 2002:

- Have quantitative data no more than 12 months old about the implementation of the policies on:
 - promoting health eating
 - promoting physical activity
 - reducing overweight and obesity

April 2003:

Health Authorities, Local Authorities, Primary Care Trusts and NHS Trusts will:

- Have implemented plans to evaluate progress against national targets associated with Saving Lives: Our Healthier Nation local targets.

3.1.2 Diabetes



Standard One: Prevention of Type 2 diabetes

- The overall prevalence of Type 2 diabetes in the population can be reduced by preventing and reducing the prevalence of overweight and obesity and the prevalence of central obesity in the general population, particularly in sub-groups of the population at increased risk of developing diabetes, such as people from minority ethnic communities, by promoting a balanced diet and physical activity.
- Individuals at increased risk of developing Type 2 diabetes can reduce their risk if they are supported to change their lifestyle by eating a balanced diet, losing weight and increasing their physical activity levels.

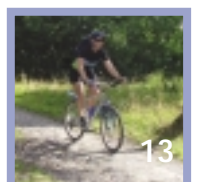


3.1.3 Mental Health

The benefits of physical activity on mental health are based on the finding that lower instances of mental health problems are generally reported among people who exercise regularly^{13,14}. There is also an opportunity to address social exclusion through physical activity initiatives.

Standard One: Mental health promotion

- Action across the whole population to promote good mental health and to improve the understanding of the factors that affect mental health.
 - in schools and with young people
 - in workplaces
 - in neighbourhoods
- Initiatives to identify groups of people who are most vulnerable to mental illness in order to promote better mental health, for example, within wider social inclusion initiatives and programmes.
- Action to combat discrimination against and social exclusion of people with mental health problems.



3.1.4 Older People

The prevention of falls is an important area considered within the NSF for older people. There is good evidence that the improvement of balance and co-ordination by using exercises that suit the specific abilities of individuals helps to diminish the risk of falls. Physical activity can also help older people lead a healthy and active life.

Standard six: Falls

- The NHS, working in partnership with councils, takes action to prevent falls and reduce resultant fractures or other injuries in their populations of older people.

Standard eight: The promotion of health and active life in older age

- The health and well-being of older people is promoted through a co-ordinated programme of action led by the NHS with support from councils.

3.1.5 Cancer

The White Paper *Saving Lives: Our Healthier Nation*, set a target of reducing the death rate from cancer in people under 75 by at least a fifth by 2010, saving up to 100,000 lives in total¹⁵.

The Cancer plan is a comprehensive strategy to tackle the disease. Part of this strategy arises from the recognition that prevention plays an important role in reducing the number of new cases of cancer.

With regard to physical activity, the Cancer Plan makes the following recommendations:

- from 2001 health authorities will have physical activity promotion schemes
- the Department of Health will issue guidance on supervised programmes of exercise for people whose health may benefit
- the Department of Health will work with other government departments on work to encourage and enable more walking and cycling, particularly in deprived areas

3.2 National Inequalities targets

The inequalities agenda is a key component of the *Saving Lives: Our Healthier Nation*¹⁵ and *The NHS Plan*¹⁶.

In February 2001, the Government announced two specific inequalities targets :¹⁷

- Starting with children under one year by 2010 to reduce by at least 10% the gap on mortality between manual groups and the population as a whole.
- Starting with health (local) authorities by 2010 to reduce by at least 10% the gap between the quintile of areas with the lowest life expectancy at birth and the population as a whole.

The impact of physical activity interventions on life expectancy is clear and has been discussed in detail. However, to meet the inequalities agenda, these interventions need to be targeted towards particular groups or geographical areas.

3.3 Local authority policy frameworks

Interagency partnership working is vitally important in developing effective strategies to address primary prevention work. Underpinning the national health service targets relevant to physical activity are local authority policy frameworks.

A New Commitment to Neighbourhood Renewal: National Strategy Action Plan ¹⁸

Focusing on deprived areas, this strategy integrates plans and initiatives on housing, transport and environment with a wide range of other policy areas including schools, primary healthcare, policing, and employment. It outlines proposals for empowering residents and getting public, private and voluntary organisations to work together in effective partnerships.

Planning Policy Guidance Note 13: Transport (Update)¹⁹

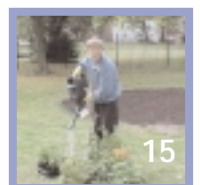
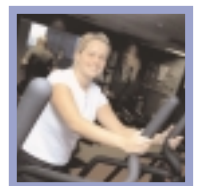
A range of policies to reduce the need to travel, including mixed-use development, urban housing, increased densities, housing/employment balance and provision of public transport. Key elements of this PPG note include the promotion of sustainable transport, including social inclusion in urban and rural areas.

Encouraging Walking Advice to Local Authorities²⁰

This document sets out a clear policy framework for encouraging walking and creating safer walking environments.

Local Government Act 2000²¹

Sets out a new legal framework with new powers to promote economic, social and environmental well-being of communities. It includes a duty to prepare a community strategy and local action plan in consultation with local strategic partnerships.



Our Towns and Cities: The Future – Delivering an Urban Setting Renaissance²²

Aims to increase quality of services to deprived areas, and encourages community-based projects.

Preparing Community Strategies²³

Guidance and best practice advice on developing and delivering the requirements of the Local Government Act 2000, which aims to more closely co-ordinate planning around environment, housing, transport, schools, leisure, etc. Includes the elements of a community strategy, developing Local Strategic Partnerships and formulating local action plans.

Healthy Workplace Initiative²⁴

A national initiative to support workplace by: identifying and promotion examples of good practice for key workplace health issues; making available appropriate and up to date information; encouraging better access to services and helping to provide a bridge between prevention, treatment and rehabilitation; and helping to promote compliance with relevant workplace legislation.

A New Deal for Transport: Better for Everyone²⁵

This documents sets out policy for a sustainable, integrated transport strategy for England and acknowledges the impact of different modes of transport on people's health. It outlines ways of providing safe, accessible networks for walking and cycling, and for reducing reliance on cars, particularly in urban areas.

Sustainable Local Communities for the 21st Century: Why and How to Prepare an Effective Local Agenda 21 Strategy²⁶

Based on the Rio Conference on Sustainable Development in 1992, this policy document sets out the rationale and process for implementing Agenda 21 locally.

National Cycling Strategy²⁷

Aims to increase the number of trips made by cycle by 2002, and quadruple them (compared with 1996 figures) by 2004. Requires the development of Local Transport Plans.

3.4 Interagency policy areas and programmes

Sure Start Programme²⁸

A programme to promote the physical, intellectual and social development of babies and young children – particularly those who are disadvantaged. A key target is that all children in Sure Start areas should have progress towards early learning goals when they get to school.

Healthy Schools Initiative – Excellence in Schools²⁹

Recognises schools as a key setting for improving health and redressing inequalities. Developing a National Healthy Schools Scheme. Supporting projects on specific topics such as promoting safe travel to school. The National Healthy School Standard provides a framework for education and health agencies to work in partnership to support healthy schools work locally.



Health & Neighbourhood Renewal³⁰

This is an update of New Deal for Communities: Guidance from the Department of Health. The guidance recognises the importance of creating opportunities for physical activity programmes, for example, by developing green transport plans and safe routes to schools, and exercise referral schemes and promoting physical activity to the local community.



4 Recommendations

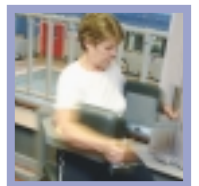
4.1 The physical activity message

The current recommendation for adults is³¹:

... adults should try to build up gradually to accumulate half an hour of moderate intensity physical activity on five or more days of the week.

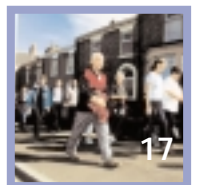
The expert recommendation for young people, supported by the Department of Health is that,

All young people should participate in physical activity of at least moderate intensity for one hour per day. This hour can be made up from a variety of activities across the day including organised sport, play, walking, or cycling to school, physical education or planned exercise.



4.2 Types of physical activity

The recommendations are for moderate intensity physical activity. The types of activity can range from formal/structured activity to informal lifestyle activities, such as walking, cycling, manual labour, and gardening. For children, different types of activity tend to appeal to boys and girls, with boys preferring games-based activities and girls individual-type activities.



5 Compliance with national recommendations

5.1 Level of compliance

Overall, the prevalence of physical activity is low. Data from the 1998 Health Survey for England found 37% of men and 25% of women met the current guidelines for activity.⁶

Table 1 Percentage of men and women in England (1998) meeting current physical activity guidelines by age.

Age Group	16-24	25-34	35-44	45-54	55-64	65-74	75+	All ages
Men	58	48	43	36	32	17	7	37
Women	32	31	32	30	21	12	4	25

- In Gateshead, the assessment of physical activity levels suggested only 26% of adults achieved five or more periods of physical activity per week.⁴
- Amongst Gateshead pupils, boys exercise more than girls, but there is a steady decline in physical activity during adolescence (only 25% of Year 10 girls exercise on three or more days).⁵

5.2 Barriers to participation

The perceived barriers to participating in physical activity are commonly quoted to be:

- lack of time,
- negative perceptions of 'exercise' and negative past experiences.
- practical barriers include cost of facility use,
- access to facilities and lack of equipment.

In Gateshead, the most common reasons given for physical inactivity amongst younger adults were lack of time, lack of motivation and individuals not considering themselves to be 'sporty types'. In the older age group (>55 years) injury and ill-health were common reasons for non-participation⁴.

Walking has been found to be the activity most likely to fulfil the criteria for successful intervention. It provides activity of moderate intensity and it fits easily into activities of daily life.

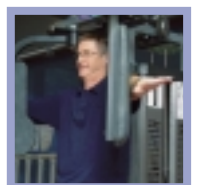
6 Physical Activity Interventions – what works and what’s happening in Gateshead?



There is international consensus that a physically active lifestyle is important to health and has great potential health gain . Although there are numerous physical activity interventions available, it is important to know what works for which target group. In Gateshead it was felt to be important to develop initiatives on the evidence of what works to increase and maintain levels of physical activity. It also gives a framework for what we need to focus on, and what not.

The principles for planning interventions need to consider the following points³²:

- an important step in the effective promotion of physical activity is developing strategies that encourage partnerships between a variety of professionals and community groups. Reviews of effective policy development emphasise the importance of a strong evidence base, ownership by a range of stakeholders, community involvement, needs analysis and evaluation^{33,34,35}.
- effective interventions need to be appropriate to the target group, developed with community involvement and focus on addressing barriers to participation and how these may be overcome.
- for hard-to-reach groups ensuring participation is likely to require proactive outreach work^{36,37,38,39}.
- hillsdon et al⁴⁰ found in a systematic review that effective interventions to promote physical activity required personal instruction, continued support, and exercise of moderate intensity that does not require attendance at a facility. The exercise should be easily included in an existing lifestyle and should be enjoyable. Promoting structural facility based interventions can lead to changes in behaviour⁴¹.
- in relation to mass media campaigns, Marcus et al⁴² found little long-term physical activity behaviour change



In Gateshead a multi-agency task group have developed this strategy and have taken into consideration the points above. They have also been incorporated into the development of the Action Plan.

6.1 Health Care Interventions

Interventions in healthcare settings can increase physical activity. Long term effects are more likely with continuing intervention and multiple intervention components such as supervised exercise, provision of equipment, and behavioural approaches⁴³.



6.1.1 Primary care based interventions

A benefit of primary care based intervention is that they can reach a high proportion of the population⁴⁴. Studies of effectiveness have shown them to be moderately effective, at least in the short term^{43,44,45}. The intensity of an intervention increases the effectiveness of behaviour change⁴⁴.

6.1.2 Exercise Referral Schemes

There has been a significant growth in exercise referral schemes over the last ten years. The most common model involves primary care staff (usually practice nurses or general practitioners) referring patients to leisure centres for advice and assistance in increasing physical activity. Although there is a lack of rigorous evaluation of these programmes, there is some evidence of short-term increases in levels of activity. However, there is no evidence of sustained behaviour change in the long-term.

The effectiveness of the schemes may be improved when⁴⁶:

- Staff are trained in behaviour change strategies
- Liaison between health and leisure service personnel is established and maintained
- Community based networks offer support beyond the referral period, incorporating sustained, active living

6.1.3 GOAL

GOAL (Gateshead's Opportunities for Active Lifestyles) - is Gateshead's exercise referral scheme. It is a partnership between Gateshead PCT, Gateshead Council, Gateshead Health NHS Trust, Age Concern Gateshead and other partners.

Gateshead Council's Cultural Development Services are seeking to increase access to both leisure centre based and non-centre based activity.

It has been developed in line with the National Quality Assurance framework and in consultation with local practitioners and the public.

GOAL is being launched alongside this strategy.

6.2 Children, Young People and the school setting

Physical activity programmes in schools have been associated with a number of positive changes. Interventions that are effective in increasing levels of physical activity include:

- modifications to curricula and policies to increase activity
- increasing the time spent in PE classes

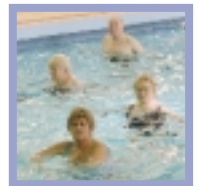
- increasing the proportion of active time during PE classes
- changing the type of activities used
- changing the rules of activities.



Most interventions are developed as a result of collaboration between schools and external advisory and support services, in the context of local healthy schools programmes⁴³.

The principles for successful interventions for promoting physical activity in schools are: ^{48,49,50,51,52}

- appropriately designed, delivered and supported physical activity curricula can enhance current levels of physical activity and can improve physical skill development. The quality of teacher skills, knowledge and experience is significant.
- young people benefit from access to suitable and accessible facilities and opportunities for enjoyable physical activity. These need to be appropriate for the religious and cultural needs of people from minority ethnic groups.
- interventions are likely to be more effective when young people are involved in planning of programmes.
- well-designed schemes adopt a whole school approach to the promotion of physical activity including:⁵³
 - a physical and health education curriculum
 - extra-curricular activities
 - links with the local community
 - safe transport routes to school
 - a mechanism to demonstrate how increase in the level of participation in regular physical activity will be measured.



Travel to school also offers an opportunity to increase levels of daily physical activity.

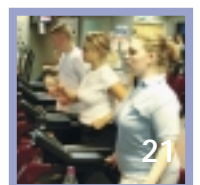
In Gateshead there is a wide range of activity for children, young people. both within the school setting, and outside.



We know a lot about the physical activity, exercise and sporting behaviour of our young people, particularly those in school, via the Health Related Behaviour Questionnaire (HRBQ) which was carried out in 1995 and 2001.

There are now established programmes of physical activity for under 4's and parents within Gateshead's Sure Start programme. The development of Children's Centres will enhance this.

The Gateshead Healthy School Award was launched in 1992 to promote the World Health Organisation (WHO) model of a healthy school. This initiative is co-ordinated by a partnership between Gateshead Council's Raising Achievement Service and Gateshead Primary Care Trust's (PCT) Health Promotion Service. The guidelines for the award conform to the requirements of the National Healthy School Standard (NHSS).



Charter point seven of the Gateshead Healthy School Award requires the participating school to have a whole school approach to the promotion of physical activity⁴². The recommendations of the NHSS are for all children to undertake at least two hours of physical activity per week. Last year, 70 schools achieved the award out of 92 schools.

Gateshead Council's Raising Achievement Service provides a whole range of in-service training for physical education in schools. This aims to increase the quality of teaching and learning in physical education. Health and Fitness is a generic component of the subject. Training also conforms to the recommendations of the national TOP programmes (see below). The Healthy and Active Schools team carry out much of the development of physical activity programmes in Gateshead's schools.

6.2.1 TOP Programmes

The TOP programmes are a series of linked schemes, designed to offer all young people the opportunity to participate and progress in sport. Delivered in partnership with a range of agencies including local education authorities and schools, local authority sports development officers and community groups and national governing bodies of sport and sports clubs, all of the TOP programmes are designed to offer TOP quality opportunities to young people.

The key features of all the programmes are:

- resource cards
- child friendly equipment
- training for teachers and community deliverers

TOP programmes have been designed to ensure that opportunities are on offer at each stage of a child's development:

- **Early Years:** Early physical activity opportunities for children aged 18 months to 5 years
- **Primary:** PE and sport opportunities for children aged 4 to 11 years
- **Secondary:** PE and sport opportunities for young people aged 11 to 18 years
- **Inclusion:** Ensuring that all programmes are fully accessible to young disabled people
- **Parents in Youth Sport:** Encouraging and supporting the involvement of parents in youth sport

6.2.2 Active Schools

Active Schools is the cornerstone of Sport England's commitment to involving more people in more sport, particularly young people. The programme is built around two key elements:

- Activemark awards for primary schools
- Sportsmark awards for secondary schools

Gold awards are given in recognition of excellent provision.

These national accreditation schemes recognise a school's commitment to providing a quality programme of physical education and school sport. Active Schools provides a range of integrated services and products specifically designed to help schools enhance their provision and achieve the awards. The recommendations for physical activity have been made in consultation with the British Heart Foundation.

In Gateshead, three Activemark and four Activemark Gold Awards have been achieved by primary schools and two Sportsmark Gold Awards by secondary schools.

The Gateshead Primary PE Award is a local programme that serves as a stepping stone to achieving the Activemark award.

6.2.3 School sport co-ordinator partnership

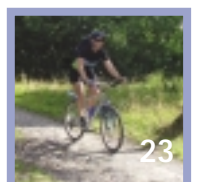
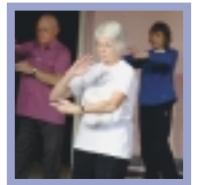
In Gateshead, five secondary schools, together with their feeder primary schools have received School Sports Lottery funding to develop sports initiatives at school. The specific aims of the partnership include: out of school hours provision, coaching and leadership and raising standards.

6.2.4 Sports College

These are secondary schools with a special focus on physical education and sport, which are funded to provide the lead in innovative practice and to work with partner secondary and primary schools to share good practice and raise standards. In Gateshead, there is one Sports College at Whickham.

6.2.5 Tournaments and festivals

Gateshead Council organise a variety of tournaments and festivals for schools in the area, with the objectives to encourage increased participation levels, raise standards and improve the transition between Key Stage 2 and 3 pupils. Organised competitions and festivals include:



- Cross country
- Athletics
- Gymnastics
- Girls five-a-side football
- Mini Basketball
- Rugby
- Swimming
- Dance

6.2.6 Programmes funded by New Opportunities Funding

New Opportunities Funding has also been successfully secured in education to provide a range of opportunities for activities both within and out of schools in Gateshead. Programmes which include physical activity are:

Gateshead Council Whickham Partnership. School Sport Co-ordinators Activities Programme

This project will offer young people in Gateshead a range of activities including aerobics, trampolining, football, basketball, rugby and dance.

Gateshead Council. Out of School Hours Learning Activities

Pupils from 10 secondary schools and 4 special schools will have the opportunity to take part in a wide range of activities to positively influence their attitudes to learning during the summer. Activities will include hockey, netball, video media, drama, theatre, music, dance, art and design.

The Thomas Hepburn Community School. Out of School Hours Learning Activities

To develop and enhance existing out of hours activities in 5 schools to include literacy, numeracy, music, drama skills, greater access to computers, cultural experiences and to encourage participation in team sports and fitness activities.

Wardley Primary School. Out of School Hours Learning Activities

To provide a range of out of school hours activities with the aim of increasing academic performance. Activities will include maths, English, drama, sport, dance gymnastics, ICT and homework clubs.

6.2.7 Programmes for young people outside the school setting

- There area wide range of diversionary activities for young people as part of the Youth Offending Team
- Activities are also offered via Youth and Community Services.

6.3 Older People

Addressing the needs of this diverse group of individuals is an important element of developing a comprehensive local physical activity strategy. Physical activity promotion for older people should^{39,54}:

- provide opportunities for affordable, accessible physical activity (particularly for those least likely to take part)
- address psycho-social needs and combine fun and socialising with physical activity
- involve older people in the planning, implementation and evaluation of programmes
- address the specific needs of different groups
- address the political, social and economic barriers which discourage older people from participating
- ensure the indoor and outdoor environment is safe and pleasant to take exercise

In addition, exercise sessions should be built into day and residential care settings and encouraged through groups based in community settings⁵⁵.

6.3.1 Ageing Well – Adding years to life, adding life to years

Ageing Well is a national project endorsed by Age Concern. It aims to maintain physical, mental and social activity throughout life in the over 50s. The main objectives of the scheme are to encourage healthy lifestyles and help the elderly get the most out of the health services. As part of this Project, Age Concern Gateshead has developed a range of physical activity initiatives:

Gentle exercise to music

These classes are held each week and are led by paid and voluntary instructors. Participants sit or stand according to their ability during the exercise sessions. Twenty-one classes are held with an average total attendance of 300 people.

Walking Group

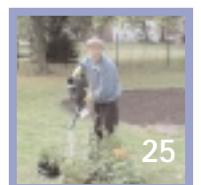
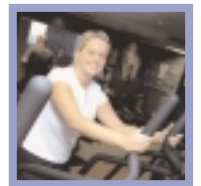
Around 40 participants meet fortnightly, monthly in winter, to walk on organised routes that are accessible by public transport.

Tea Dance

This event accommodates around 35 participants each week.

Tai Chi

Two groups, each around 30 in number undergo regular sessions led by trained instructors.



PAMS (Physical Activity Motivators)

This is a pilot scheme co-ordinated by Age Concern Gateshead linking to Leisure Services and Exercise Referral. The programme trains volunteers to “buddy” people interested in taking up physical activity. It assists in overcoming barriers.

6.3.2 Healthy Communities Collaborative

This is a programme being developed in six geographical areas to identify and implement initiatives designed to reduce the incidents of falls in the over 65s. The target is for a reduction in the number of falls by 30% by September 2003.

6.3.3 Gateshead Council

The Cultural Development Service (Gateshead Council) offer a range of specific opportunities for older people, including an Over 50's Club at Gateshead Leisure Centre. There are also many opportunities for older people to participate in unstructured physical activity opportunities.

Gateshead Health Walks also targets some of its walks towards older people.

6.4 Physically active transport and environmental approaches

Transport offers considerable potential for health enhancing physical activity. Cycling and walking can be of suitable intensity, and trips such as commuting or travel to school are regular, frequent and often of a suitable length (70% of journeys are less than five miles, 44% less than two)⁵⁶.

There is evidence of ‘suppressed demand’ for cycling and walking. A survey by MORI for the Commission for Integrated Transport⁵⁷ found that 47% of people said they would cycle more and 65% would walk more if problems such as road safety were addressed.

Average distance travelled per year by foot has declined over recent years, from 244 miles in 1985/6 to 191 miles in 1997/9 – a drop of 22%⁵⁸.

Effective interventions and features include:-

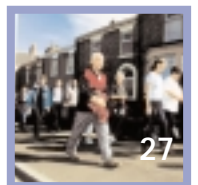
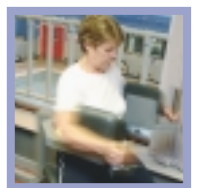
- walking and cycling to work
- promoting workplace cycling requires attention to environmental factors such as cycle parking & showers and to the road environment e.g safety
- simple intervention such as signs posted to increase stair climbing have been shown to be effective
- school travel plans, including walking & cycling to school can increase the numbers walking and cycling to school
- improving access by the creation of suitable facilities for physical activity and reducing barriers to their use can be effective in promoting physical activity, combined with informal outreach activities⁴⁷. Such facilities include walking and cycling routes or trails, including 'active transport' routes to a wider range of facilities.
- programmes aimed at achieving voluntary travel behaviour change by 'personalised journey planning' have achieved substantial increases in walking and cycling.
- one such approach is TravelSmart, a scheme developed and implemented in Western Australia. It was designed to inform and motivate people to use alternative transport modes to the car, including cycling and walking. It reported increases of 16% in walking and 91% in cycling two years after implementation⁵⁹.

6.4.1 Local Agenda 21 Strategy

Gateshead Council is committed to addressing the environmental objectives of Local Agenda 21 in Gateshead. Its strategy, launched in 2000⁶⁰, includes the reduction of car usage by improving public transport and promoting other modes of transport such as cycling and walking. There is also a pledge to provide safe routes for non-motorised travel modes.

Since its launch, progress has been made on the action plan as detailed below⁶¹:

- Safer routes to schools schemes are in place at 11 schools with an additional 7 planned
- Provision of bicycles for use by Council members and officers for official meetings
- Cycle routes between the Derwent Walk, Keelmans Way and the Millennium Bridge have been completed
- Promotion of the Millennium Festival of Cycling and establishing a National Cycle Network Route (no. 14).



6.4.2 Forestry Commission

Gateshead is a National pilot site for a joint project between the Forestry Commission, Gateshead Primary Care Trust, Derwentside Primary Care Trust and Friends of Chopwell Wood. The project seeks to demonstrate and enhance the potential of Forestry Commission woodland (Chopwell Woods) in achieving health outcomes. The pilot will be part of GOAL but will have additional support for local practices in referring patients and to develop health related initiatives in the wood.

6.4.3 Local Transport Plan

Gateshead Councils Local Transport Plan seeks to improve transport by;

- reducing road safety problems through local safety schemes, traffic calming and speed management
- the development of safer routes to school as part of the school travel plan process
- reducing inequalities and social exclusion by the provision of good walking, cycling and public transport
- good walking, cycling and public transport networks to leisure and fitness centres across Gateshead to improve access
- linking to mental health and physical activity by the creation of safe streets and routes to parks
- the development of the Great North Forest

6.5 Reducing inequalities

The characteristics of good practice in work on physical activity and inequalities include⁶²:

- proactive outreach work
- a multidisciplinary approach
- involvement of the targeted communities
- developing new partnerships with professionals who have good access to 'hard to reach' groups.

Barriers to participation in physical activity among black and minority ethnic groups tend to be similar to many of those in other groups, including lack of time and concerns about body shape. Additional barriers include racism, cultural inappropriateness (e.g. lack of single sex provision), the importance of family responsibilities and language issues³⁶.

Participation in physical activity tends to be low among people with disabilities. Key issues for people with disabilities is to participate in activities that they enjoy and perceive as supportive in maintaining activities of daily living and are activities which can be incorporated easily into routine life. Activities must be³⁷:

- appropriate from a social, environmental and physiological perspective
- planned in close co-operation with the target group
- involve specialist advice where appropriate.

In Gateshead many programmes seek to reduce inequalities.

6.5.1 Health Walks Gateshead

This initiative, launched in September 2001, aims to increase the health and fitness of sedentary people by promoting regular and brisk walking within local communities. This project is a multi-agency partnership involving Gateshead Council, Age Concern Gateshead, Gateshead PCT, The Countryside Agency, Gateshead Health NHS Trust and the local community. There are two components to Health Walks: Led walks and Independent walks.

Led walks are supervised by volunteer walk leaders who have been trained to provide first aid and to promote the health benefits of walking. The routes are typically two-mile circuits in urban areas, but some led walks have taken place in the countryside. It is anticipated that partnerships will be encouraged to take up walking on a regular basis.

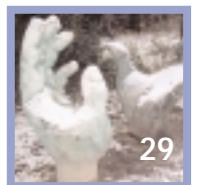
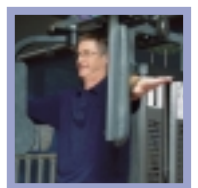
Independent walks are approximately two-mile circuits in urban areas located throughout Gateshead. Health walks is targeted at socially deprived areas, workplaces, older people, as well as a broader approach to the general population

6.5.2 Healthy Living Centres

There have been three successful bids to fund healthy living centres (HLC) accessible to Gateshead residents. The target groups covered by these HLCs include: older people, the Jewish community and disadvantaged communities.

Teams Healthy Living Centre - Gateshead and South Tyneside

The grant builds upon existing community health work in Teams, Gateshead. Schemes will enable older people to take part in health activities. There will be dietary information and training to address the high incidence of strokes and heart disease. Community-based health work and outreach will promote better health. It will comprise a community café offering healthy cookery courses and an older people's 'exercise activator'.



Labruit - Bensham, Gateshead

The Labruit project aims to address the health needs of the Jewish Community of Bensham, which is situated within two disadvantaged wards in Gateshead. The scheme will benefit families, elderly and disabled people and locals with health problems. It will provide a health clinic, facilities for children with mental and physical disabilities, exercise classes for men and women and a stress reduction programme. The project will also offer peri-natal support, family counselling and a healthy eating scheme.

Activating Healthy Living in Gateshead, Gateshead Council

This project aims to address health inequalities that exist in disadvantaged groups and communities across the borough. It will roll out current pilot programmes and establish new programmes in a complementary mix. The activities comprise Community Health Workers, gardening schemes, community cafes, Private Landlords Support Association, Arts in Health projects, a health information project and walking bus schemes.

Those activities which directly support the Physical Activity Strategy are; the promotion of walking buses, gardening and green gym projects, and the Community Health Workers, who support local people to take up a range of activities.

6.5.3 Digging Deep to Deliver 5-a-day - Schools Allotment Project

Managed by Age Concern Gateshead, together with partners Gateshead Council, Gateshead PCT and the 5-a-day Co-ordinator. Involves older people to encourage Primary School children to grow fruit and vegetables on school based allotments.

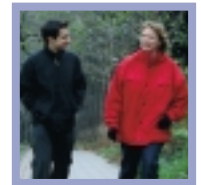
6.6 Community Based Programmes

Community based approaches appear to be more effective than other approaches in helping to maintain improvements in physical activity levels. These focused on:

- setting up buddy systems
- contracting with another person to complete specified levels of activity Establishing walking or other groups to provide friendship and support.
- this can be achieved either by developing new social settings or within existing settings such as the workplace or schools.
- in exercise referral schemes, community based networks can support long-term maintenance of behaviour change following formal involvement in primary care ⁴⁶.

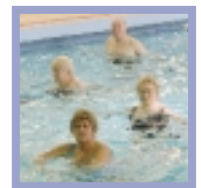
In Gateshead the following community based, or community linked programmes support this practice:-

- healthy communities collaborative
- health walks scheme
- healthy living centres
- GOAL
- PAMS (Peer Activity Motivators)
- Cardiac Rehabilitation Programme
- Over 50's Group



6.7 Workplace

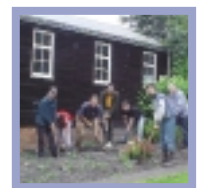
Workplaces provide an organisational structure for the co-ordination of health programmes and an appropriate setting for developing supportive relationships for behaviour change. There is some evidence to show workplace-based interventions can lead to increases in physical activity.^{63,64}



In Gateshead the Health at Work award was a Tyne and Wear Health Action Zone (HAZ) funded programme developed to encourage workplace initiatives that benefit the health of employees. During its four-year history, twenty organisations participated in this scheme. There are published model guidelines on the promotion of physical activity at work and the development of physical activity policies is a requirement of the second stage of the award.

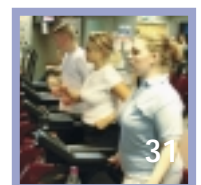
6.8 Leisure Opportunities in Gateshead

Figure 2 (overleaf) is a map of leisure buildings run by Gateshead Council. These leisure buildings accommodate a range of facilities including swimming pools, sports halls, fitness suites, and an international athletics track. A varied range of activities operate within these buildings which can be available for all sections of the community. There are opportunities for groups as well as individuals to participate in the programme of activities.



As well as leisure buildings the Council manage a number of parks which can be used for a range of physical activities. The formal settings of the parks are complimented by a number of countryside areas which are managed to provide good access to the community.

Details of the range of activities can be found at www.gateshead.gov.uk and within the quarterly publication - Gateway to Leisure.



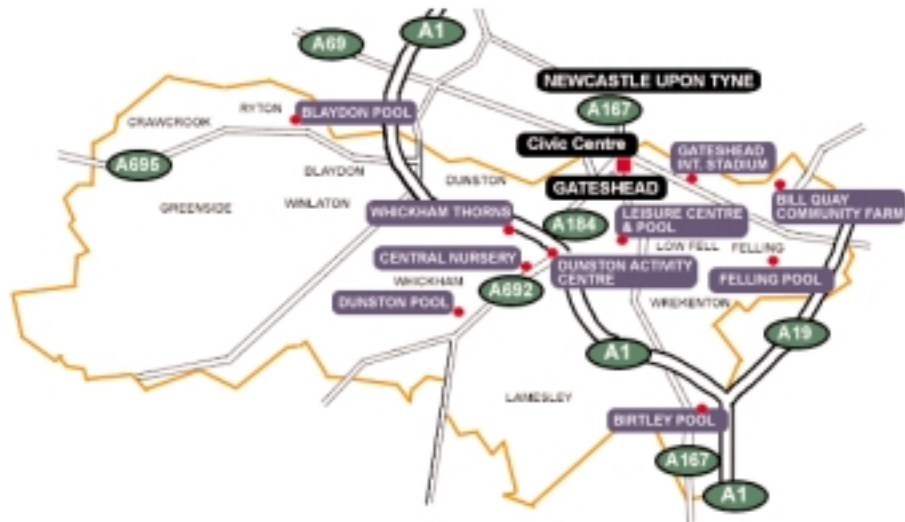


Figure 2 Map of leisure facilities in Gateshead.

6.9 Local sports clubs

Local sports clubs have a significant impact upon the number of leisure opportunities available within Gateshead. The range and number of clubs is vast and involves a great number of participants, officials, coaches and club helpers. Details of the clubs which operate in Gateshead can be found by contacting the Council's Cultural Development Service.

The Council does provide support to community groups, including sports clubs, through its grants and awards scheme.

7 What's next – Action!

7.1 Introduction

The Government is committed to increasing participation in sport and physical activity to 70% of the population by 2020.

Gateshead's Physical Activity Strategy shows our commitment at a local level to work with the people of Gateshead, and organisations, to increase levels of physical activity. It also demonstrates the approach we are taking – involvement of communities, basing local programmes on evidence, collecting baseline data, supporting innovation, sharing good practice and tackling inequalities.

This action plan begins to implement the priorities outlined in the strategy. This requires partnership working, motivation, resources and commitment at all levels in order to reach the Government's target, and more importantly improve the health of the people who live and work in Gateshead.

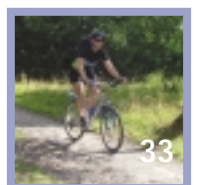
There are several areas prioritised for development in the Action Plan e.g. GOAL, and other areas which are well developed e.g. Programmes in schools.

However this action plan is far from complete. It requires more people, services and organisations to sign up to the strategy and set targets for increasing physical activity. The action plan is a working document; to add to, review and form a basis to celebrate achievements.

In developing specific, or cross-cutting programmes, the Action Plan needs to refer back to the main strategy – to the targets set, the evidence base, and any existing local initiatives.

Only by doing this will all those involved in the implementation of the Physical Activity Strategy achieve Gateshead's aim which is;

“to get more people to be more active, more often.”



7.2 Co-ordination of Physical Activity Strategy & Action Plan

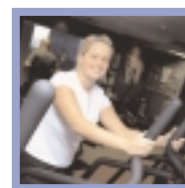
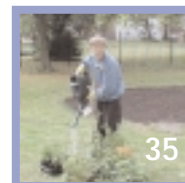
TASK	MILESTONE	RESPONSIBILITY	FUNDING	TIMESCALE	OUTCOME
<ul style="list-style-type: none"> To collect baseline information Regarding Activity of the population of Gateshead 	<ul style="list-style-type: none"> Questions included in health & lifestyle survey HRBQ repeated with young people 	<ul style="list-style-type: none"> Primary Care Trust Council 	<ul style="list-style-type: none"> HAZ Non-recurrent £55k £18k 	<ul style="list-style-type: none"> March 2004 March 2005 2004/5 	<ul style="list-style-type: none"> Increased knowledge and understanding of levels, barriers to enable targeting of programmes Valid data for children and young people
<ul style="list-style-type: none"> To develop database of physical activity initiatives available 	<ul style="list-style-type: none"> Central database of all activities collected & disseminated 	<ul style="list-style-type: none"> PCT/Council 	<ul style="list-style-type: none"> HAZ non-recurrent 	<ul style="list-style-type: none"> March 2005 	
<ul style="list-style-type: none"> To co-ordinate & monitor strategy 	<ul style="list-style-type: none"> Framework established 	<ul style="list-style-type: none"> Physical Activity Task Group 	<ul style="list-style-type: none"> Within existing resources 	<ul style="list-style-type: none"> Sept. 04 Annual Report - Jan 05 	<ul style="list-style-type: none"> Clear overview of progress of strategy and programmes within
<ul style="list-style-type: none"> To review pricing within leisure facilities 		<ul style="list-style-type: none"> Council 			

7.3 GOAL - Gateshead's Opportunities for Active Lifestyles (Physical Activity Referral and recommendation)

In relation to the evidence base the effectiveness of exercise referral schemes may be improved by:-

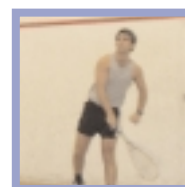
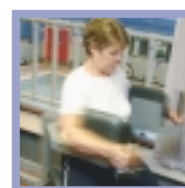
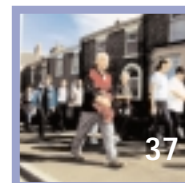
- Staff are trained in behaviour change strategies
- Quality supervision is achieved by adequate practitioner-patient ratios
- Liaison between health and leisure service personnel is established and maintained
- Community based networks offer support beyond the referral period, incorporating sustained, active living

TASK	MILESTONE	RESPONSIBILITY	FUNDING	TIMESCALE	OUTCOME
<ul style="list-style-type: none"> ● To develop a comprehensive physical activity referral scheme (GOALS) 	<ul style="list-style-type: none"> ● Steering group established ● Framework approved, based on National Quality Assurance ● Practices informed and involved in development of the scheme ● Standard documentation developed ● Referral to health walks programme established 	<ul style="list-style-type: none"> ● Primary Care Trust ● PCT/Council 	<ul style="list-style-type: none"> ● PCT, HAZ non-recurrent, Council 	<ul style="list-style-type: none"> ● Aug 03 ● Dec 03 ● Sept 03 ● Dec 03 ● Jan 04 	<ul style="list-style-type: none"> ● Scheme developed ● Increase in referrals and recommend to physical activity ● All practice informed/knowledge of scheme ● Clear documentation ● Non-centre based referral options developed and uptake monitored
<ul style="list-style-type: none"> ● To develop a training and awareness programme for staff 	<ul style="list-style-type: none"> ● Staff attending training 	<ul style="list-style-type: none"> ● PCT/Council 		<ul style="list-style-type: none"> ● Jan 04 	<ul style="list-style-type: none"> ● Increased awareness of behaviour change
<ul style="list-style-type: none"> ● To develop links to the PAMS (Peer Activity Motivators) 	<ul style="list-style-type: none"> ● Links established ● PAMS trained ● System for buddying set up ● PAMS included in GOALS framework 	<ul style="list-style-type: none"> ● Age Concern 	<ul style="list-style-type: none"> ● HAZ non-recurrent 	<ul style="list-style-type: none"> ● Dec 03 	<ul style="list-style-type: none"> ● Increase in patients adherence to GOALS



TASK	MILESTONE	RESPONSIBILITY	FUNDING	TIMESCALE	OUTCOME
<ul style="list-style-type: none"> To develop referral and recommendation literature 	<ul style="list-style-type: none"> Literature developed based on Health Promotion resources protocol 	<ul style="list-style-type: none"> Primary Care Trust 	<ul style="list-style-type: none"> HAZ Non-recurrent 	<ul style="list-style-type: none"> Jan 04 	<ul style="list-style-type: none"> literature produced
<ul style="list-style-type: none"> To ensure GOALS works in parallel and in conjunction with cardiac re-hab 	<ul style="list-style-type: none"> Cardiac re-hab on steering group 	<ul style="list-style-type: none"> PCT/Health Trust 		<ul style="list-style-type: none"> Dec 03 	<ul style="list-style-type: none"> Phase IV recommended options for physical activity
<ul style="list-style-type: none"> To appoint Council Co-ordinator for Gateshead Council 	<ul style="list-style-type: none"> Person appointed Exercise co-ordinators in council working to framework Increase in staff qualified to BACR III Close working with PCT 	<ul style="list-style-type: none"> Council PCT 	<ul style="list-style-type: none"> NDF 	<ul style="list-style-type: none"> Oct 03 	<ul style="list-style-type: none"> Clear referral rate established Increase in staff trained to receive referrals Patient information collected for monitoring purposes
<ul style="list-style-type: none"> To carry out evaluation of GOALS 	<ul style="list-style-type: none"> Commission Newcastle University Monitoring Framework set 	<ul style="list-style-type: none"> PCT 	<ul style="list-style-type: none"> To be sought 	<ul style="list-style-type: none"> Jan 05 Jan 06 	<ul style="list-style-type: none"> Evaluation carried out
<ul style="list-style-type: none"> To develop physical activity consultation session pilot 	<ul style="list-style-type: none"> Identify practice Referral system set up 6 month evaluation 	<ul style="list-style-type: none"> PCT/Council 	<ul style="list-style-type: none"> Council 	<ul style="list-style-type: none"> Dec 03 Dec 03 June 04 	<ul style="list-style-type: none"> Increased uptake of GOAL and physical activity

TASK	MILESTONE	RESPONSIBILITY	FUNDING	TIMESCALE	OUTCOME
<ul style="list-style-type: none"> To develop National pilot with forestry commission 	<ul style="list-style-type: none"> Produce framework Appoint person Link to GOAL 	<ul style="list-style-type: none"> PCT/FC 	<ul style="list-style-type: none"> Forestry Commission 	<ul style="list-style-type: none"> Jan 04 - April 05 	<ul style="list-style-type: none"> Increase in health benefits of woodland assessed
<ul style="list-style-type: none"> To develop follow up support to GOALS to sustain level of physical activity 	<ul style="list-style-type: none"> Support programmes established 	<ul style="list-style-type: none"> PCT/Council 		<ul style="list-style-type: none"> March 04 	<ul style="list-style-type: none"> Longer term adherence to physical activity
<ul style="list-style-type: none"> To develop links to nutrition strategy re: "diet" on prescription 	<ul style="list-style-type: none"> Links established Programme developed 	<ul style="list-style-type: none"> PCT 		<ul style="list-style-type: none"> March 05 	<ul style="list-style-type: none"> Cross-cutting health issues being addressed



7.4 Health Walks Gateshead

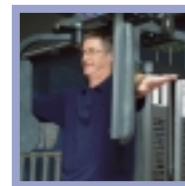
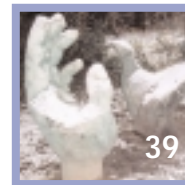
TASK	MILESTONE	RESPONSIBILITY	FUNDING	TIMESCALE	OUTCOME
<ul style="list-style-type: none"> To evaluate health walks 	<ul style="list-style-type: none"> Carried out Sub group set up 	<ul style="list-style-type: none"> Evaluation sub group 	<ul style="list-style-type: none"> £300 - HWP 	<ul style="list-style-type: none"> April 04 	<ul style="list-style-type: none"> Evaluate report produced
<ul style="list-style-type: none"> To develop walks in line with strategy target group 	<ul style="list-style-type: none"> Increase links with schools Increase workplace walks 	<ul style="list-style-type: none"> Health Walks Partnership (HWP) 			
<ul style="list-style-type: none"> To increase promotion of self and led walks 	<ul style="list-style-type: none"> Advertising strategy developed 	<ul style="list-style-type: none"> HWP 	<ul style="list-style-type: none"> HWP 		
<ul style="list-style-type: none"> To co-ordinate HWG effectively 	<ul style="list-style-type: none"> Appoint dedicated co-ordinator 	<ul style="list-style-type: none"> HWP 	<ul style="list-style-type: none"> WHL 	<ul style="list-style-type: none"> Nov 03 	<ul style="list-style-type: none"> Person appointed
<ul style="list-style-type: none"> To develop links with walk to school initiative 	<ul style="list-style-type: none"> Share information 	<ul style="list-style-type: none"> Council 			
<ul style="list-style-type: none"> To develop themed walks 	<ul style="list-style-type: none"> Mall walks Tourist route walks Places of interest 	<ul style="list-style-type: none"> HWP 			
<ul style="list-style-type: none"> To develop Walk with a Purpose initiative 	<ul style="list-style-type: none"> Promotion of other walking activities e.g. golf 				
<ul style="list-style-type: none"> To increase access for people with disabilities 					

7.5 Opportunities for Physical Activity

Further consultation with early years is required to consolidate & develop this area of the action plan. Many programmes promoting physical activity for early years are being implemented. The Physical Activity Task Group will ensure that this work is reflected in the Action Plan, and consistent with the strategy, during 2004

7.5.1 Children - Early Years (under 4's)

TASK	MILESTONE	RESPONSIBILITY	FUNDING	TIMESCALE	OUTCOME
<ul style="list-style-type: none"> To increase access to play facilities 	<ul style="list-style-type: none"> Links made with LPSA play 	<ul style="list-style-type: none"> Council 	<ul style="list-style-type: none"> Government 		<ul style="list-style-type: none"> Links established Joint planning
<ul style="list-style-type: none"> To link Health Walks for young mothers 		<ul style="list-style-type: none"> HWP, Teenage Pregnancy Co-ordinator 		<ul style="list-style-type: none"> March 05 	
<ul style="list-style-type: none"> To develop links with other initiatives/ programmes 	<ul style="list-style-type: none"> Sure Start/Childrens Centres Neighbourhood Nurseries Increase Sure Start involvement 	<ul style="list-style-type: none"> Physical Activity Task Group Sure Start 		<ul style="list-style-type: none"> Sept 04 	<ul style="list-style-type: none"> Increased links with other programmes
<ul style="list-style-type: none"> To audit provision of physical activity in early years 	<ul style="list-style-type: none"> Audit Carried out 	<ul style="list-style-type: none"> Council PCT 		<ul style="list-style-type: none"> Sept 05 	<ul style="list-style-type: none"> Knowledge of what is happening where and who is involved



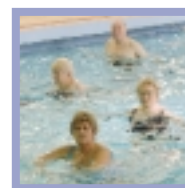
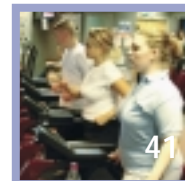
7.5.2 Children, Young People and the School Setting

Interventions that are effective in increasing levels of physical activity include:

- Modifications to curricula and policies to increase activity
- Increasing the time spent in PE classes
- Increasing the proportion of active time during PE classes
- Changing the type of activities used
- Changing the rules of activities

TASK	MILESTONE	RESPONSIBILITY	FUNDING	TIMESCALE	OUTCOME
● Initiative project Sports College Whickham School	<ul style="list-style-type: none"> ● Redesignation ● Conference - share good practice ● Academic standards raised 	<ul style="list-style-type: none"> ● Sports college ● Partnership Group LEA + LEA EDP RA L & C 	<ul style="list-style-type: none"> ● DfES ● YST 	<ul style="list-style-type: none"> ● Ongoing 2003-2004 & beyond 	<ul style="list-style-type: none"> ● Meeting Curriculum & Community Action Plan targets ● "Shared good practice"
● School Sports co-ordinators initiative	<ul style="list-style-type: none"> ● High quality physical education learning & teaching reported i.e. OFSTED 	<ul style="list-style-type: none"> ● LEA/RAC ● SSCo ● Partnership PDM 	<ul style="list-style-type: none"> ● DfES ● YST 	<ul style="list-style-type: none"> ● Ongoing 2003-2004 & on to 2006 (3 year funding) 	<ul style="list-style-type: none"> ● Improved performance HQ learning & teaching observed Reported e.g. OFSTED
● Sportsmark, Activemark & Gateshead primary physical education award	<ul style="list-style-type: none"> ● Schools Gain Awards 	<ul style="list-style-type: none"> ● LEA ● Physical Education & Sports Advisor ● Physical Education School Sports Officer ● Advisory Teacher ● PE Sport PDM 	<ul style="list-style-type: none"> ● Sport England ● DfES Standards Fund 	<ul style="list-style-type: none"> ● Ongoing 2003-2004 	<ul style="list-style-type: none"> ● Increase in number of schools achieving awards
● Space Sports & Arts & NOF PE Sports Projects	<ul style="list-style-type: none"> ● Facilities opened for school & community use 	<ul style="list-style-type: none"> ● LEA/Governing Body ● School Partnership RA & LC 	<ul style="list-style-type: none"> ● NOF/SE DfES 	<ul style="list-style-type: none"> ● 2004-2005 	<ul style="list-style-type: none"> ● increase in participation pupils/YP Community e.g. Holiday Schemes

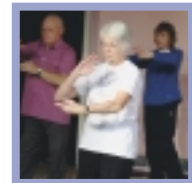
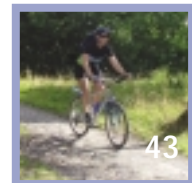
TASK	MILESTONE	RESPONSIBILITY	FUNDING	TIMESCALE	OUTCOME
<ul style="list-style-type: none"> Links with Gateshead Sports Partnership & Institute of Sport & Sports Plan 	<ul style="list-style-type: none"> Plans improved Facilities build 	<ul style="list-style-type: none"> Gateshead Council/LEA Sports partnership 	<ul style="list-style-type: none"> Lottery NDF/SE Council 	<ul style="list-style-type: none"> 2003-2004 ongoing 	<ul style="list-style-type: none"> Improved facilities. Increase in activities young people benefit from new facilities
<ul style="list-style-type: none"> Awards for all 	<ul style="list-style-type: none"> Successful bids by LEA/schools clubs 	<ul style="list-style-type: none"> LEA/schools 	<ul style="list-style-type: none"> SE 	<ul style="list-style-type: none"> 2003-2004 ongoing 	<ul style="list-style-type: none"> Increase in resources support activities.
<ul style="list-style-type: none"> Top Link CSLA JSLA YST Initiatives 	<ul style="list-style-type: none"> Schools register to take part in initiatives. Annual Plan 	<ul style="list-style-type: none"> LEA RAVL & C 	<ul style="list-style-type: none"> SE/YST 	<ul style="list-style-type: none"> 2003-2004 ongoing 	<ul style="list-style-type: none"> Increase number of schools/pupils taking part in initiatives & gaining awards
<ul style="list-style-type: none"> Scoring goals to success 	<ul style="list-style-type: none"> 6 schools receive (6 week) programme 	<ul style="list-style-type: none"> Raising Achievement Learning & Culture Inspector/Advisor PHSE & C Health Development Officers 	<ul style="list-style-type: none"> Newcastle United Football in the Community 	<ul style="list-style-type: none"> Nov/Dec 2003 	<ul style="list-style-type: none"> Pupil attendance, behaviour & attitude. Show improvement
<ul style="list-style-type: none"> CPD National PE/Sport Professional Development 	<ul style="list-style-type: none"> Comprehensive programme of courses planned for Teachers & AOTT's to provide high quality learning for young people 	<ul style="list-style-type: none"> LEA - LEAD Learning & Cultural Raising Achievement Partnership Group SC SSCo/HEI 	<ul style="list-style-type: none"> DfES YST Partnership RAVLC SC/SSCo Colleger/University 	<ul style="list-style-type: none"> 2003-2006 (3 years) 	<ul style="list-style-type: none"> Raised Standards achievements etc. Young people benefit from high quality PE & School Sport activities Increase in range of activities & numbers participating.
<ul style="list-style-type: none"> Tyne & Wear Youth Games 	<ul style="list-style-type: none"> Annual Event Tyne & Wear 	<ul style="list-style-type: none"> Tyne & Wear Sport Partnership 	<ul style="list-style-type: none"> Tyne & Wear SE/LEA's 	<ul style="list-style-type: none"> Annual May/June 2004 	<ul style="list-style-type: none"> Increase in number of YP



TASK	MILESTONE	RESPONSIBILITY	FUNDING	TIMESCALE	OUTCOME
<ul style="list-style-type: none"> Schools Obesity Health Related Research 	<ul style="list-style-type: none"> Schools registered Schools involved in range of sports activities including Great North & Run (Jnr) 	<ul style="list-style-type: none"> LEA/RA L & C in Partnership 	<ul style="list-style-type: none"> To be confirmed (link with 5-a-day Healthy Eating) 	<ul style="list-style-type: none"> 2003 - 2005 	<ul style="list-style-type: none"> Increase in pupil participation, physical activity. Links with 5-a-day Healthy Eating messages.
<ul style="list-style-type: none"> Links with Charter Point 7 Gateshead Healthy School Award Links with NHSS Guidance 	<ul style="list-style-type: none"> Schools provide 2 hrs high quality physical education. (physical activity) Increased participation in events. Schools achieve Primary PE Award Successful bids by LEA/schools clubs 	<ul style="list-style-type: none"> Physical Education & Sport Inspector Adviser Physical Education School Sport Officer Advisory Teacher Physical Education & Sport SSCo PDM 	<ul style="list-style-type: none"> DfES YST NOF SE Lottery Another source 	<ul style="list-style-type: none"> 2003-2004 ongoing 	<ul style="list-style-type: none"> Schools provide high quality physical education (physical activity). Learning & teaching standards raised. Schools provide 2 hrs of curricular activity.
<ul style="list-style-type: none"> Physical Education Sport Festivals Tournaments 	<ul style="list-style-type: none"> Events successfully held 2003 – 2004 Milestones Events eg Gymnastic Festival 300 500 gymnasts Cross country 	<ul style="list-style-type: none"> Physical Education & Sport Inspector/Adviser Advisory Teacher Physical Education & Sport Physical Education School Sport Officer 	<ul style="list-style-type: none"> Raising Achievement Learning & Culture 	<ul style="list-style-type: none"> 2003 – 2004 Annual Programme of activities 	<ul style="list-style-type: none"> Increase in number of young people participating in a wide range of sporting activities.
	<ul style="list-style-type: none"> Dance festival 500 – 600 yp Swimming festival 400 – 500 yp Skipping festival 200 – 300 yp Athletics primary School Festival 1,000 yp 				

7.5.3 Older Young People/School Leavers and Older Young People

TASK	MILESTONE	RESPONSIBILITY	FUNDING	TIMESCALE	OUTCOME
<ul style="list-style-type: none"> To increase links with connexions 	<ul style="list-style-type: none"> Active promotion of activities available in community 	<ul style="list-style-type: none"> Council & Connexions 		<ul style="list-style-type: none"> 2004 	
<ul style="list-style-type: none"> To find out what barriers young women face 	<ul style="list-style-type: none"> Survey to find out barriers to exercise for young women 	<ul style="list-style-type: none"> PCT/Council 		<ul style="list-style-type: none"> March 2005-2006 	<ul style="list-style-type: none"> Increased knowledge of need to base programmes on
<ul style="list-style-type: none"> To increase post – 16 activity 	<ul style="list-style-type: none"> Established clubs linked to out of school activities and college 	<ul style="list-style-type: none"> PCT 		<ul style="list-style-type: none"> 2005-2006 	<ul style="list-style-type: none"> Gateshead college involved in Strategy
<ul style="list-style-type: none"> To further develop exercise within community centres 	<ul style="list-style-type: none"> Audit current availability 	<ul style="list-style-type: none"> Gateshead sports partnership LA 		<ul style="list-style-type: none"> 2005-2006 	<ul style="list-style-type: none"> Clear map of activities and gaps to enable targetting
<ul style="list-style-type: none"> Further details & evaluate diversionary programmes for young offenders 	<ul style="list-style-type: none"> Promote what is happening currently 	<ul style="list-style-type: none"> YOT 			



7.5.4 Older People

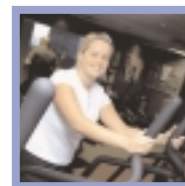
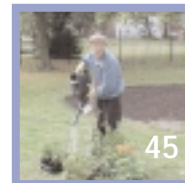
Physical activity promotion for older people should

- Provide opportunities for affordable, accessible physical activity (particularly for those least likely to take part)
- Address psycho-social needs and combine fun and socialising with physical activity
- Involve older people in the planning, implementation and evaluation of programmes
- Address the specific needs of different groups
- Address the political, social and economic barriers which discourage older people from participating
- Ensure the indoor and outdoor environment is safe and pleasant to take exercise

TASK	MILESTONE	RESPONSIBILITY	FUNDING	TIMESCALE	OUTCOME
● To develop PAMS Scheme	● PAMS trained Scheme established ● Evaluation	● Age Concern Gateshead ● PCT	● Gateshead PCT	● March 04	● Increase in uptake of activities
● To increase access to physical activity and reduce social isolation	● Provision of range of activities/classes	● Age Concern Gateshead	● Age Concern Gateshead Ageing Well	● Ongoing	● Provision of activities for Older People
● To develop sessions in residential & sheltered accommodation	● Sessions developed	● Council		● 2005-2006	● Increase in activity levels in older people
● To increase in number of qualified instructors for work with older people	● Review number of instructors currently via Age Concern & Council	● Age Concern ● Council		● 2005-2006	● More qualified instructors to take forward programmes
● To increase Gardening and allotment projects	● Volunteers involved in 5-a-day allotment project. ● Healthy Living Centre	● Age Concern ● Council	● NDF	● March 04	● Intergenerational Project ● Increase in allotment projects
● Specific exercise programme for older people	● Programme developed and advertised	● Council	● NDF	● 04-06 ● March 04	● Increase in opportunities for older people

7.5.5 Workplace

TASK	MILESTONE	RESPONSIBILITY	FUNDING	TIMESCALE	OUTCOME
<ul style="list-style-type: none"> Increased commitment from organisations to physical activity 	<ul style="list-style-type: none"> Promote strategy with workplace & employers Sign up to strategy 	<ul style="list-style-type: none"> PCT/Council Employees 		<ul style="list-style-type: none"> 2005-2006 	<ul style="list-style-type: none"> Programme of Physical Activity in workplaces linked to e.g. Health Walks Gateshead.
<ul style="list-style-type: none"> Compulsory lunch times and develop incentive schemes 	<ul style="list-style-type: none"> Lobby Government Organisations providing flexi-time schemes 	<ul style="list-style-type: none"> Government 			
<ul style="list-style-type: none"> Better provision of activities within workplaces for physical activity (changing, showers, lockers etc) 	<ul style="list-style-type: none"> Safe areas to park bikes Pay per mile cycling Changing & showers 	<ul style="list-style-type: none"> Employers Council 			

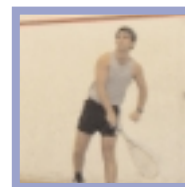
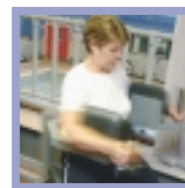
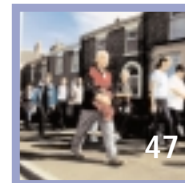


7.5.6 Black & Minority Ethnic Communities (BME)

TASK	MILESTONE	RESPONSIBILITY	FUNDING	TIMESCALE	OUTCOME
<ul style="list-style-type: none"> ● Work with established groups to identify barriers 	<ul style="list-style-type: none"> ● Barriers identified and action plan developed 	<ul style="list-style-type: none"> ● PCT/Council 		<ul style="list-style-type: none"> ● 2004-2005 	<ul style="list-style-type: none"> ● Knowledge of barriers to inform strategy
<ul style="list-style-type: none"> ● Training for practitioners regarding cultural implications of each community regarding physical activity 	<ul style="list-style-type: none"> ● Training carried out 	<ul style="list-style-type: none"> ● PCT/Council 		<ul style="list-style-type: none"> ● 2004-2005 	<ul style="list-style-type: none"> ● Increased understanding and knowledge of needs. ● Service re alignment
<ul style="list-style-type: none"> ● Increase links with Jewish community ● Link with Diversity group 	<ul style="list-style-type: none"> ● Consultation ● Diversity Officer, diversity forum 	<ul style="list-style-type: none"> ● Council 	<ul style="list-style-type: none"> ● NDF (Labruit Healthy Centre) 	<ul style="list-style-type: none"> ● 2004 	<ul style="list-style-type: none"> ● Provision of and support for activities based on communities needs

7.6 Partnership Links

TASK	MILESTONE	RESPONSIBILITY	FUNDING	TIMESCALE	OUTCOME
<ul style="list-style-type: none"> Promote strategy with other Health Improvement Groups (HIGs) 	<ul style="list-style-type: none"> Presentations to HIG groups Develop information sheet into leaflet to raise awareness 	<ul style="list-style-type: none"> PCT/Council 		<ul style="list-style-type: none"> March 2004 	<ul style="list-style-type: none"> All HIGs aware of strategy and consulted
<ul style="list-style-type: none"> Develop flow chart to show where strategy fits 	<ul style="list-style-type: none"> Chart produced 	<ul style="list-style-type: none"> PCT/Council 		<ul style="list-style-type: none"> 2004 	<ul style="list-style-type: none"> Strategy linked
<ul style="list-style-type: none"> Input to mental health promotion strategy action plan 	<ul style="list-style-type: none"> Cross references and joint actions identified 	<ul style="list-style-type: none"> PCT 		<ul style="list-style-type: none"> October 2003 	<ul style="list-style-type: none"> Joined up action plans
<ul style="list-style-type: none"> Be part of new community strategy 	<ul style="list-style-type: none"> Circulate action plan Participate in comm. Strategy Theme days 	<ul style="list-style-type: none"> Council 		<ul style="list-style-type: none"> 2004 	<ul style="list-style-type: none"> Physical Activity Strategy reflected in community strategy
<ul style="list-style-type: none"> Increased strategy links to NHSS (GHSA) 	<ul style="list-style-type: none"> Presentation to GHSA forum and Co-ordinators 	<ul style="list-style-type: none"> PCT/Council 		<ul style="list-style-type: none"> 2004 	<ul style="list-style-type: none"> PSHCE co-ordinator informed & involved in strategy
<ul style="list-style-type: none"> Link with NE Sport strategy 	<ul style="list-style-type: none"> Contact made Bids for funding completed 	<ul style="list-style-type: none"> PCT/Council 		<ul style="list-style-type: none"> 2004 	<ul style="list-style-type: none"> Linked into NE sport strategy
<ul style="list-style-type: none"> Link with sports college 	<ul style="list-style-type: none"> Contact made 	<ul style="list-style-type: none"> Council 		<ul style="list-style-type: none"> November 03 	<ul style="list-style-type: none">
<ul style="list-style-type: none"> Ensure co-ordinated approach to physical activity & sport 	<ul style="list-style-type: none"> Gateshead Council plan for sport 	<ul style="list-style-type: none"> Council/PCT 		<ul style="list-style-type: none"> 2004-2005 	<ul style="list-style-type: none"> Knowledge of joint targets working together.
<ul style="list-style-type: none"> Linking to other strategies & groups 	<ul style="list-style-type: none"> NE Physical Activity Group 	<ul style="list-style-type: none"> PCT/Council 		<ul style="list-style-type: none"> 2004-2005 	<ul style="list-style-type: none">



7.7 Promotion and Publicity

TASK	MILESTONE	RESPONSIBILITY	FUNDING	TIMESCALE	OUTCOME
<ul style="list-style-type: none"> ● Strategy and action plan on relevant websites 	<ul style="list-style-type: none"> ● Council ● PCT ● School 	<ul style="list-style-type: none"> ● Physical Activity Task Group 		<ul style="list-style-type: none"> ● 2004 	
<ul style="list-style-type: none"> ● Raise profile of physical activity via strategy launch 	<ul style="list-style-type: none"> ● Develop clear message 			<ul style="list-style-type: none"> ● January 2004 	
<ul style="list-style-type: none"> ● Develop calendar of events to promote physical activity across Gateshead 	<ul style="list-style-type: none"> ● Promote Heart Health week 	<ul style="list-style-type: none"> ● PCT/Council 	<ul style="list-style-type: none"> ● PCT 	<ul style="list-style-type: none"> ● June 2004 ● 2005 ● 2006 	<ul style="list-style-type: none"> ● Increase awareness of physical activity message

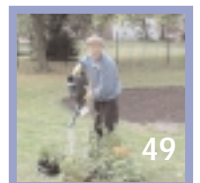
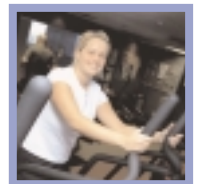
8 References

Much of the background to the evidence and good practice upon which this strategy has been based is from the Health Development Agency, in particular:-
Health Development Agency, Coronary Heart Disease Guidance for implementing the preventative aspects of the National Service Framework. London. Health Development Agency 2001.

The Governments Joint DCMS/Strategy Unit report has also provided clear targets and background information and statistics:-
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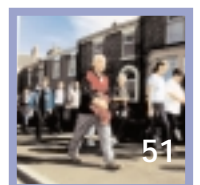
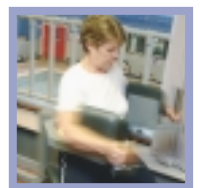
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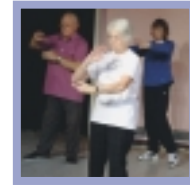
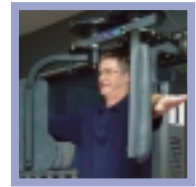
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This strategy has been developed by the Physical Activity Task Group, overseen by the Opportunities to Health (O2H) Action Group.

This multi-agency group seeks to optimise opportunities for health for Gateshead by championing, promoting, co-ordinating and lobbying for effective primary prevention activities.

If you would like further information or would like to get involved in this strategy, or others being developed (e.g. nutrition), please contact:-

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