

PARKS AND LEISURE AUSTRALIA

# HEALTH AND WELLBEING POSITION PAPER

2018



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# 1.0 Introduction

This position paper was developed by Parks and Leisure Australia (PLA) for use by the PLA board, regional councils, members and stakeholders to identify key issues and priorities for the parks and leisure industry relating to community health and wellbeing. It is based on the Community Health and Wellbeing Position Paper produced by Karen Milligan and May Carter on behalf of PLA (WA) in 2013. It specifically outlines:

- the key health and wellbeing challenges facing the industry
- the value of parks and leisure to community health and wellbeing
- an overview of the parks and leisure industry's role in community health and wellbeing

Most importantly, it articulates what PLA and its members will do to promote community health and wellbeing.

The term 'health and wellbeing' is best defined by the Constitution of the World Health Organization (1946) which states that:

**“Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.”<sup>1</sup>**

The constitution also states:

**“that having the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition and that governments have a responsibility for the health of their peoples which can be fulfilled only by the provision of adequate health and social measures.”<sup>2</sup>**

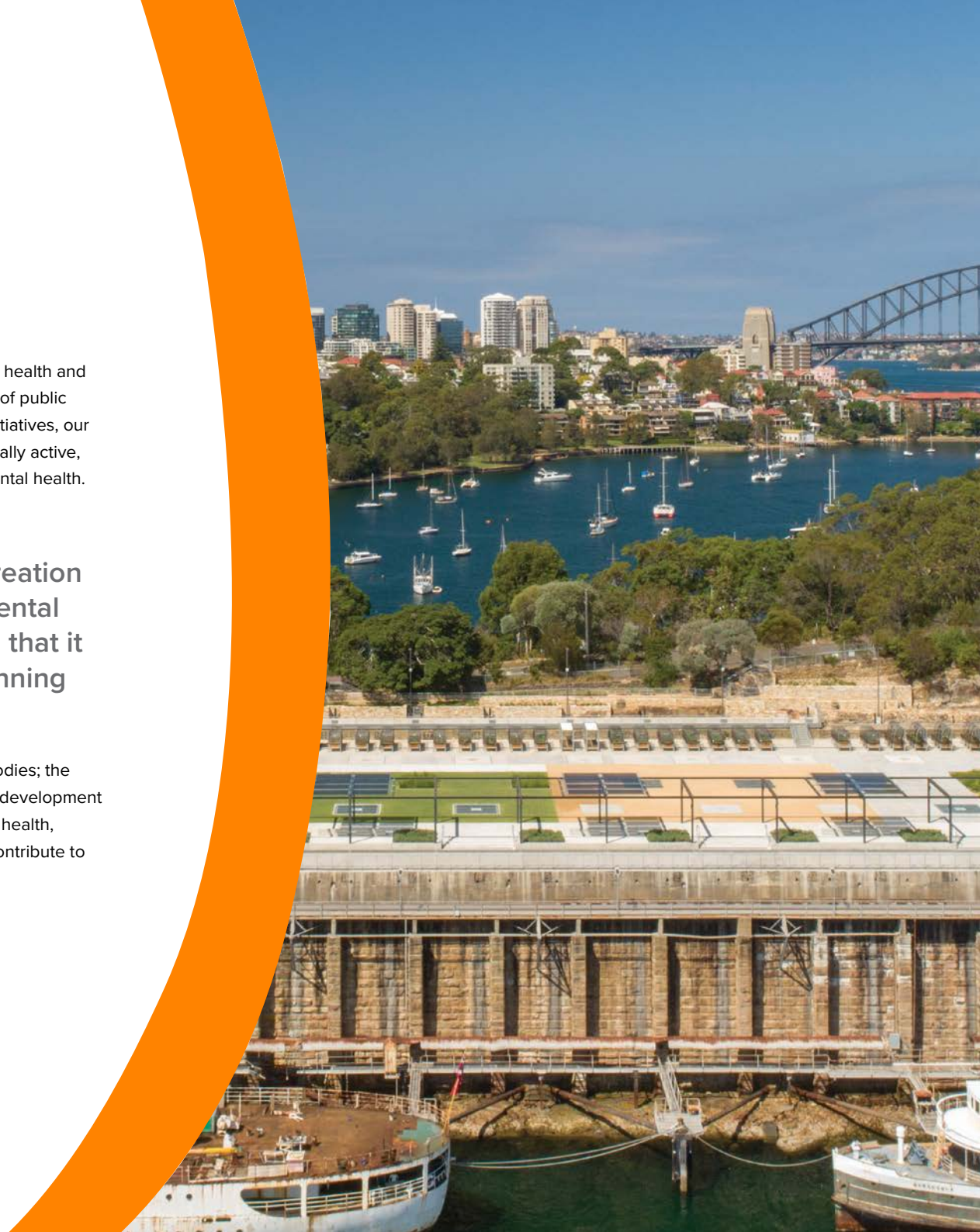


## 2.0 Position Statement

The parks and leisure industry plays a vitally important role in contributing to the health and wellbeing of the community through the design, management and maintenance of public spaces and community places. Along with the development of programs and initiatives, our industry provides the critical urban infrastructure that allows people to be physically active, connect with nature, interact with their community and maintain physical and mental health.

**PLA believes that this provision of healthy urban infrastructure, i.e. parks, reserves, sport and recreation facilities, pathways and public spaces is fundamental to sustaining our neighbourhoods and cities and that it should be placed as the priority in the urban planning agenda.**

Our industry works in collaboration with Federal, State and Local Government bodies; the not-for-profit sector; and the private sector to ensure that planning policy, urban development and infrastructure investment is informed by contemporary knowledge of social, health, environmental and economic benefits of the spaces and places that positively contribute to the development of liveable, active and engaged communities.





## 3.0 Background

### 3.1 Parks and Leisure Australia

Parks and Leisure Australia (PLA) is the peak industry association for professionals working in the parks and leisure sector in Australia. The parks and leisure sector employs more than 300,000 professionals whose purpose is to plan, deliver and manage these spaces and places that are essential to our towns and cities.

Our members are “the people behind the places.” These professionals work across policy, planning and the provision of assets, services, facilities, program and research in the parks and leisure sector including:

- Community and urban planning
- Public and open space planning and design
- Parks, environment, biodiversity and conservation
- Sport and physical activity
- Tourism, events, arts and interpretation
- Research, training and academia
- Private sector, consulting, trade and suppliers

Our members promote health and wellbeing through the provision of:

- Public open space, parkland and places for community interaction and connection;
- Recreational walking and cycling paths;
- Indoor and outdoor leisure facilities for fitness, sport and active recreation; and
- Programs and initiatives that promote physical activity and participation in community leisure and support services.

The contributions to community health and wellbeing made by PLA members and member organisations need to be well-articulated to other disciplines and within organisations. The aim is to ensure that parks and leisure professionals are actively involved in urban planning and program delivery.

It is important that PLA members and stakeholders have a common understanding of their commitment and contribution to community health and wellbeing, enabling PLA to work towards a common goal and develop a cohesive approach to dealing with priority issues. Through a range of actions and strategies, PLA is committed to supporting better community health outcomes.

Proposed actions and strategies are described within this position paper, providing guidance for members and stakeholders to address priority actions. The purpose of this paper is to outline the actions and strategies that can be refined further as our knowledge of and evidence for, the role of parks and leisure in health and wellbeing continues to expand.



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### 3.2 Health and wellbeing

Achieving better community health outcomes has become more complex and challenging with population growth, lack of or often conflicting competition for open space, changes in social and family structures, and increasing global economic and environmental challenges which impact on housing choice and affordability.

Some of the key factors that determine people's health and wellbeing include:

- individual lifestyle factors (e.g. physical activity levels, diet, smoking, etc)
- social and community networks (connections within the community and to family and friends)
- general socio-economic, cultural and environmental conditions (e.g. income, access to health care, housing, pollution, etc)

The Australian Institute of Health and Welfare details how these factors influence an individual's health and wellbeing:



Source: Australian Institute of Health and Welfare.<sup>3</sup>

PLA has a significant role in ensuring policies, strategies and programs address these factors to ensure that physical activity levels increase and community health and wellbeing improves.

Research indicates that:

- Eight in ten Australian children do not meet national guidelines of 60 minutes of physical activity per day.<sup>4</sup>
- More than a third (36%) of Australians aged 15 and over do very little or no exercise at all.<sup>5</sup>
- 70.8% of Australian men were overweight or obese in 2014-15, compared with 56.3% of women.<sup>6</sup>
- Participating in regular physical activity can reduce cardiovascular disease-related deaths by up to 35%.<sup>7</sup>
- Physical inactivity costs the Australian economy \$805 million annually - \$640m in direct costs (healthcare expenditure) and \$165m in indirect costs (loss in productivity)<sup>8</sup> (2013 figures).
- Physical inactivity causes an estimated 16,000 premature deaths a year.<sup>9</sup>
- Productivity loss due to physical inactivity is estimated at 1.8 working days per worker per year.<sup>10</sup>
- Adults who participate in sport are 20–40% less likely to die prematurely from all causes compared with non-participants.<sup>11</sup>
- The cost benefits of investing in physical health initiatives can be overwhelming positive, e.g. a 2014 Auckland University study found that best-practice cycling policies for New Zealand's largest city could deliver returns 24 times higher than initial investments.<sup>12</sup>
- People who are overweight or obese and physically inactive have the same level of disease burden (the health loss from living with, or dying prematurely from, a disease or injury) as people who use tobacco.<sup>13</sup>
- An extra 15 minutes of brisk walking, 5 days each week, could reduce disease burden due to physical inactivity by an estimated 13%. If this time increased to 30 minutes, the burden could be reduced by 26%.<sup>14</sup>
- Physical inactivity contributes to 19% of diabetes cases, 16% of bowel cancer cases, 16% of uterine cancer cases, 14% of dementia cases, 11% of breast cancer cases, 11% of coronary heart disease cases and 10% of strokes.<sup>15</sup>

The World Health Organization states that ischaemic heart disease and stroke (both non-communicable diseases) are now the major causes of death and disability worldwide.<sup>16</sup> In Australia poor nutrition, sedentary lifestyle and obesity contribute to a significant burden of disease and equal tobacco use as the most prevalent cause of ill health.<sup>17</sup> The incidence of poorer mental health, particularly conditions exacerbated by social isolation, is also increasing. Four million Australians were estimated to have experienced a common mental disorder in 2015<sup>18</sup> and half the population of Australia between 16 and 85 years of age will experience a mental disorder at some time in their life.<sup>19</sup> There has been “an annual average increase of 4.7% in the number of estimated GP encounters that were mental health-related since 2011–12.”<sup>20</sup>

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**8** in ten Australian children do not meet national guidelines of **60 minutes** of physical activity per day.



More than a third of Australians aged 15 and over do very little or no exercise.

**70.8%** of Australian men were overweight or obese in 2014-15, compared with 56.3% of women.

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## 4.0 The relationship between parks and leisure to health and wellbeing

### 4.1 The value of parks and green spaces to healthy placemaking

Provision of parks and leisure services is often cited as an important factor in 'healthy placemaking', i.e. shaping the built environment so that healthy activities and experiences are integral to people's everyday lives and therefore help to tackle preventable diseases.<sup>21</sup> Such an environment becomes more liveable, walkable and sustainable.<sup>22</sup> Research demonstrates that access to good quality green spaces (i.e. parks and public spaces) that are well-connected and attractive, have significant benefits to individuals and communities. From an environmental benefit perspective such spaces help to reduce air pollution, noise and excessive heat, all of which can impact health and wellbeing. From a social benefit perspective, such spaces create opportunities for social interactions with family and friends or opportunities to connect with other people and potentially animals and wildlife. From a health perspective such places help people to relax, reduce their stress levels and provide opportunities to be more physically active; all of which may directly influence better self-reported mental health.<sup>23</sup>

The World Health Organisation states that there is a need for "small, local green spaces very close to where people live and spend their day, as well as large green spaces offering formal provisions such as playing fields and opportunities to experience contact with nature and relative solitude."<sup>24</sup> It specifically notes that a "lack of parks, sidewalks and sport / recreation facilities" are key environmental factors that discourage people from being more active.<sup>25</sup>

The World Health Organisation also notes that "urban green space has health benefits, particularly for economically deprived communities, children, pregnant women and senior citizens. It is therefore essential that all populations have adequate access to green space, with particular priority placed on provision for disadvantaged communities...the need for green space and its value for health and well-being is universal."<sup>26</sup>



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## 4.2 The contribution of parks and leisure to health and wellbeing

The contribution made by the parks and leisure industry to community health and wellbeing can be classified into four key areas:

### 1. Physical and mental health benefits

Parks and leisure infrastructure and services can promote physical activity and an active lifestyle. Examples of direct benefits to health include: reduced risk of non-communicable diseases such as cardiovascular diseases, colon and breast cancer and diabetes; improved bone health; reduced risk of falls and fractures; assistance with weight management; enhancement of the immune system; and improvement of mental health and sense of wellbeing.

### 2. Social benefits

Parks and leisure services can generate stronger connected communities with improved social interaction and inclusion through provision of active and vibrant community hubs, access to facilities and resources, opportunities for volunteering and involvement.

### 3. Environmental benefits

Development of well-planned and attractive settings for active living encourages uptake of active transport and use of public parks and leisure services. Further health benefits associated with provision of parks and green environments include temperature reduction and mitigation of the urban heat island effect; air quality improvement; management of storm water reducing the incidence of flooding and water-borne disease; ecosystem support and biodiversity enhancement.

### 4. Economic benefits

Parks and leisure services can assist to reduce health care cost through reduction in disease and illness associated with lack of physical activity and social interaction; can provide local employment and investment opportunities; and contribute to maintaining a healthy workforce.<sup>27</sup>

Despite these findings, there is limited understanding of the mechanisms that link parks and leisure to better community health and wellbeing. While few researchers are able to pinpoint explicit causal links between parks and better health, it is generally agreed that provision of parks and leisure services is “more than a luxury” and should be given greater credence in urban planning policy. It is further acknowledged that while not enough is yet known about the specific spatial and social conditions that create beneficial health effects, more research is required to enable findings to be translated into clear design guidelines and social policy.



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### 4.3 Risks associated with lack of parks and leisure facilities and services

There are important risks associated with the contribution of the parks and leisure industry not being appropriately considered within community health and wellbeing planning:

- **Increased cost for public health** through lack of parks and leisure focused preventive health measures.
- **Lack of community social connection**, reducing community vibrancy, engagement and ownership.
- **Decreased environmental amenity and ecological health** resulting from poor urban design, lack of active transport planning and ineffective resource management.
- **Reduced economic opportunities** that could be realised through better environmental amenity and commercial operations for tourism, recreation and sport.





## 4.4 Policy frameworks supporting community health and wellbeing

The World Health Organisation developed a new global action plan in 2018 to help countries develop policy actions to promote physical activity . The four objectives contained within this framework are:

1. Create active societies (social norms and attitudes)
2. Create active environments (spaces and places)
3. Create active people (programs and opportunities)
4. Create active systems (governance and policy enablers).<sup>33</sup>

Through these measures, it aims to reduce physical inactivity by 10% by 2025 and 15% by 2030.

The parks and leisure industry operates within social and legislative frameworks that guide the way PLA members can respond to health and wellbeing issues. The most pressing drivers for immediate action are:

- The growing social and economic impact of chronic ill health and the global push to address this issue.<sup>34</sup>
- Competing interests for land due to increasing populations and increasing densities, which often displaces or deprioritises provision of land for sport, recreation and physical activity.
- The requirement for Local Government Authorities to prepare Municipal Public Health and Wellbeing Plans.
- The requirement for Local Government Authorities to integrate operational and financial planning with strategic council or community plans.

## 4.5 External opportunities and constraints

Key external constraints that influence the way that the parks and leisure industry can respond to these drivers to action are:

- Limited information that clearly articulates how parks and leisure contribute to community health and wellbeing.
- Lack of integrated community health policy or strategy at global, national and local levels.
- Limited collaboration between organisations involved in promoting better health and wellbeing agendas.
- Limited funding for further research and professional development.
- Limited funding to preserve or acquire land for sport, recreation and physical activity.

## 5.0 PLA's role in community health and wellbeing

### 5.1 Successful programs and practices

There is a need to reverse the trend of physical inactivity and many emerging evidence-based solutions fall within the mandate of the parks and leisure industry. Examples of successful programs and practice include<sup>35</sup>:

1. **Whole of school programs** (e.g. provision of game equipment and painted markings in playgrounds to encourage physical activity).
2. **Transport policies and systems** that prioritise walking, cycling and public transport (e.g. active transport programs such as walking school bus and tools to encourage active transport to work).
3. **Urban design regulations and infrastructure** that provides for equitable and safe access for recreational physical activity and recreational and transport-related walking and cycling across the life course.
4. **Physical activity and non-communicable disease prevention** integrated into primary **health care systems**.
5. **Public education**, including mass media to raise awareness and change social norms of physical activity (e.g. female participation campaigns, encouraging stair use over escalator use through signage and stairwell upgrades).
6. **Community-wide programs** involving multiple settings and sectors that mobilise and integrate community engagement and resources.
7. **Sports systems and programs** that promote 'sport for all' and encourage participation across the lifespan.

One of the greatest challenges currently facing our members is that the provision of parks and leisure facilities, services and programs that engage communities in sport, physical activity and social interaction is so interwoven into the urban fabric that in many cases, it is simply taken for granted. Without fully understanding the benefits of access to parks and participation in leisure services, communities and those who manage facilities and services, may become complacent about measuring their value.<sup>36,37</sup>

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## 5.2 Key priorities for the parks and leisure industry

In addressing health issues, social and environmental determinants play a key role. Access to good quality parks and leisure facilities and services may have a strong positive impact on community health and wellbeing outcomes. PLA acknowledges that we have an obligation to assist with improving community health and wellbeing outcomes by acting to preserve the right to recreate for current and future generations. Protection of the right to recreate may best be achieved through:


1. Provision of places for physical activity, social interaction, relaxation and contact with nature;
2. Development of programs and activities that promote participation in physical activity and encourage social interaction;
3. Actively promoting good practice;
4. Promotion of parks and leisure industry professional development to enable members to understand and address community health and wellbeing issues; and
5. Encouraging partnerships with other organisations to achieve common goals.

To achieve all of these outcomes, a comprehensive approach to community health and wellbeing will be required with multiple concurrent strategies involving a range of stakeholders. There is a need for professionals within different sectors and organisations to work collaboratively with communities to address often complex social, economic and environmental factors.

Key health and wellbeing priorities for the parks and leisure industry include:

1. Develop a solid understanding of community health and wellbeing and a strong evidence base;
2. Develop a clear agenda for policy and advocacy;
3. Focus on health promotion and disease prevention;
4. Enhance social and environmental conditions that facilitate good health and wellbeing and reduce ill health risk factors;
5. Take a whole of lifestyle approach to planned intervention; and
6. Address social inequity when developing health promotion initiatives.





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and sport / recreation  
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### 5.3 Aligning parks and leisure with health and wellbeing

It is essential that parks and leisure facilities and services are considered within community health and wellbeing planning. This may be achieved by:

1. Ensuring community engagement in planning and addressing local issues.
2. Seeking opportunities to contribute to research exploring spatial and social conditions for beneficial health effects.
3. Providing urban design guidance appropriate for better community health and wellbeing outcomes.
4. Facilitating a cross-sector collaborative approach.

### 5.4 Evaluating outcomes

In order for parks and leisure facilities and services to be considered within community health and wellbeing planning, it will be critical that industry professionals:

1. Ensure actions to deliver health outcomes are evidence based and measurable;
2. Ensure community health and wellbeing outcomes are economically, socially and environmentally sustainable; and
3. Facilitate ongoing professional development.



## 5.5 PLA support for the parks and leisure industry

PLA will support the parks and leisure industry in advocating for and delivering quality community health and wellbeing outcomes by:

1. Staying informed through alliances and partnerships;
2. Leading the parks and leisure industry on critical approaches and strategies, such as identifying and promoting performance targets to determine minimum and best practice industry standards;
3. Monitoring and measuring industry responses to critical approaches and strategies by periodic assessment;
4. Facilitating a well informed profession that is proactive regarding community health and wellbeing initiatives, issues and responses, through networking and professional development, promotion of new research, advocacy resources and reviewing case studies;
5. Advocating to governments and industry partners for better environmental, health, social and economic outcomes;
6. Lobbying for funding and resources for community health and wellbeing commitments and delivery; and
7. Informing the community of strategies that have been applied under this commitment, to assist with building social capital regarding community health and wellbeing.



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