
Date: 24 June 2013

To: Health and Well-Being Board

From: Dr Jane Moore, Director of Public Health

Subject: Physical Inactivity and Sedentary Lifestyles: the Coventry System Leadership Challenge

Purpose

To update the board on work that is taking place to reduce physical inactivity and sedentary lifestyles.

Recommendations

Health and Well-Being Board is recommended to:

1. Note the objectives of this programme and key workstreams
2. Agree to review progress in October

Systems Leadership

Towards the end of 2012, representatives from the Department of Health (DH), Public Health England (PHE), the Local Government Association (LGA) and associated leadership organisations including SOLACE and the NHS Leadership Academy, reached high level agreement on the need for a paradigm shift in public sector leadership. The DH has since provided funding for external facilitation in 8 'prototype' system leadership exemplar areas and one of these areas is Coventry. In Coventry, public health is coordinating the project with expert facilitation support identified by the Coventry City Council CEO, who is also accountable for delivery.

Physical Inactivity and Sedentary Behaviour

Physical inactivity is a global public health problem; the World Health Organisation includes physical inactivity amongst the top leading global risks for premature mortality, affecting countries across all income groups (high blood pressure (responsible for 13% of deaths globally), tobacco use (9%), high blood glucose (6%), physical inactivity (6%), and overweight and obesity (5%)).

In 2011, the Chief Medical Officers of the four home countries in the UK published a report on the issue (Start Active, Stay Active: a report on physical activity for health, Department of Health 2011). Broadly speaking there is evidence for a dose response relationship and the report and the recommendations draw on international evidence of the benefits of regular, moderate intensity physical activity (150 minutes a week for adults), which can reduce the risk of many chronic disease conditions and can impact positively on mental health. There are in addition, significant health inequalities in relation to physical activity according to income, gender, age, ethnicity and disability. The British Heart Foundation National Centre for Physical Activity and Health (BHFNC) has produced information on the economic benefits of physical activity. The cost of physical inactivity in England (including direct costs of treatment for the major lifestyle related disease, and the indirect costs caused through sickness absence) has been estimated at £8.2 billion a year.

Sedentary behaviour refers to the amount of time spent sitting with very low energy expenditure and is independently associated with greater all-cause mortality and chronic disease.

Physical Inactivity in Coventry

Measuring physical activity levels within populations relies mainly on self-reports in response to single or multiple item questionnaires. Current sources of information include the Active People Survey (conducted by Sport England), the Health Survey for England (HSE) and in Coventry, the Coventry Household Survey.

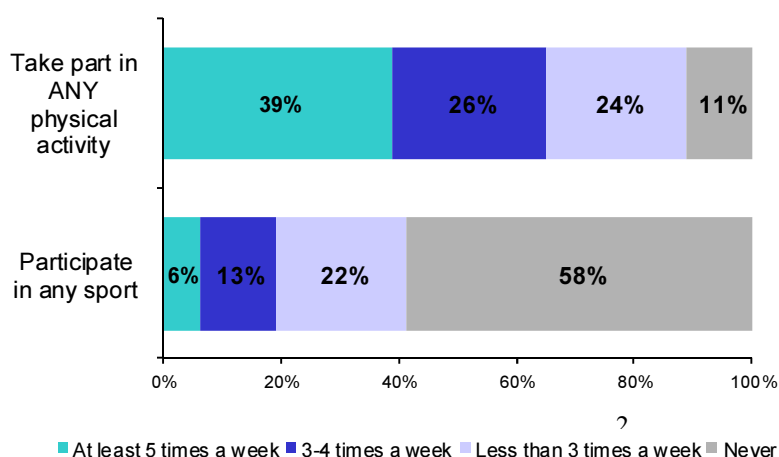
In the 2008 HSE, according to self - reports, 39% of men and 29% of women aged 16 and over met the minimum recommendations for physical activity in adults. However in a subset based on accelerometry, only 6% of men and 4% of women met the recommendations for physical activity by achieving at least 30 minutes of moderate activity on at least five days in the week of accelerometer wear⁴.

Coventry Household Survey 2012 (www.coventrypartnership.com)

The Household Survey provides an overview of quality of life and wellbeing across the city. In 2012 in total, 2,117 face to face household interviews were undertaken with residents aged 16 and over. The sample was stratified by Middle Super Output Area (MSOA).

The survey included questions on physical activity (e.g. brisk walking, cycling, housework, gardening, DIY, swimming, or sport for at least 30 minutes at a time where the participant is slightly out of breath but able to talk).

Figure 2: Respondents to Coventry Household Survey 2012.



Source: www.coventrypartnership.com

Coventry Systems Leadership Exemplar Project

We chose physical inactivity and sedentary lifestyles as the 'substrate' for the Coventry system leadership challenge, as whilst there is overwhelming evidence of the benefits of being physically active and less sedentary (at both an individual and population level), recent global analyses of the issue have concluded that there has been too great a focus on the responsibility of the individual which has led to limited success in developing sustainable behaviour change. The return of public health to local government means that there is renewed opportunity to develop a systemic approach to the issue of physical inactivity and sedentary lifestyles in Coventry.

Programme of Work

From January to April 2013, with support from the facilitator, we developed a novel process through which we engaged local system leaders. The engagement included identifying what we know collectively about Coventry people and more generically, the acquisition of new knowledge about physical activity interventions and population behaviour change. Subsequently we set about identifying new approaches to bring about population change in levels of physical inactivity and sedentary behaviour in the city.

There was consensus that we need to establish a new social norm in Coventry around regular health - enhancing physical activity (HEPA), what that means by way of being active and how it includes everyone regardless of age and body weight. This began as the notion of a 'social movement' and is now shaping up as a 'mobilisation' with an early focus on major summer events in the city (Godiva Festival and Godiva Returns) and subsequent effort to create the conditions and relationships that sustain repeated commitments to action and to continuously develop authentic narrative around being physically active in Coventry.

Objectives

- To deliver behaviour change at a population level in terms of levels of physical activity and sedentary behaviour in Coventry as measured by the SE Active People Survey and the Coventry Household Survey
- In the longer term improve health outcomes (specifically premature mortality) and reduce health inequalities in Coventry - in line with the Public Health Outcomes Framework
- Develop a new public health 'offer' that translates into other aspects of behaviour change and at a population level
- Develop relationships within the local system that focus on what we can better together, reducing both organisational silos and the notion of dependency on service provision. This will be tested through the programme evaluation

To deliver this we have identified five complimentary work streams:

1. A social movement for change; building leadership and capacity with agencies and citizens to achieve sustained change in patterns of physical inactivity and sedentary behaviour.
 - utilising the relational leadership approach to social mobilisation developed by Marshall Ganz in the United States which is currently being trialled in Baltimore in respect of elder care in communities
2. Understanding and targeting high risk populations with the most to gain (those deemed inactive/less than active according to the Coventry Household Survey).
 - employing *Value Modes* (a tool based on the British Values Survey) to engage the specific social groups in Coventry that have been identified as being largely inactive and gain insight into the barriers to becoming physically active and the potential for positive intervention from new behaviour change approaches (drawing on behavioural economics theory)
3. Partnering with local GPs to develop a physical activity offer initially for patients included on primary care hypertension registers (a new quality and outcomes framework requirement) with view to this being an offer to all patients on the practice list.
4. A workplace (social) 'responsibility deal' around physical inactivity and sedentary behaviour building on the Coventry and Warwickshire Workplace Charter. This would start with the major employers in the city including Coventry City Council, University Hospitals C&W, the two universities and e.g. Severn Trent and Barclays. Through our links with the chamber of commerce we will however encourage all employers to pursue the workplace charter commitment to physical activity.
5. Encouraging the development of social enterprise to support and sustain behaviour change in term of physical inactivity and sedentary lifestyles in workplaces and in communities.

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