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Template

This first page is intended to be a short Exec Summary of the Chapter and should be no more than 1-2 sides

Introduction
<p>Physical activity and sport is valued in its own right for friendship, fun and enjoyment. It brings people together, breaks down barriers and helps to build communities. Further, sport and physical activity play a key part in helping us live longer, healthier and more active lives and promote psychological well-being too by reducing stress, anxiety and depression.</p> <p>Thus, increasing levels of activity presents the opportunity for the biggest health gain across the whole population and should be a priority as a consequence. Indeed, the positive impact on emotional health and wellbeing is particularly important, as psychological equilibrium is a prerequisite for informed and balanced decision-making which is the foundation stone for overall quality of life. The contribution of participation in sport and physical activity was confirmed in the Chief Medical Officer's 2009 Annual Report which stated "<i>The benefits of regular physical activity to health, longevity, well being and protection from serious illness have long been established. They easily surpass the effectiveness of any drugs or other medical treatment</i>".</p> <p>A wealth of evidence suggests that by promoting physical activity and active</p>

lifestyles, many of the important health challenges faced in the Sunderland can be addressed. Increasing the number of residents who are physically active has the potential to improve the physical and mental health, reduce all-cause mortality and improve life expectancy. Evidence suggests that there is not only the potential to save money by easing the burden of chronic disease on the health and social care services, but to also reduce worklessness caused by ill-health, physical and mental, therefore increasing the number of economically active residents.

Being 'physically active' is not demonstrated purely by attending gyms and playing sports. Physical activity includes all forms of activity, such as 'everyday' walking or cycling, active recreation not undertaken competitively, such as working out in the gym, dancing, gardening or families playing together, and also organised and/or competitive sport. While there is a need to increase levels of physical activity across Sunderland's adult and child population, it is especially true for those who lead sedentary lifestyles. Those most at risk include older people who experience a notable decline in activity after the age of 55, women, some black and ethnic minority sub-groups; and young adults who experience a drop-off in activity from the age of 16 We know from Active People Survey 4 that 51.4% of Sunderland's adult population do not participate in any form of sport or physical activity. However, the same survey also indicates that 51.9% of adults in the city would like to become more active.

Research shows that the benefits of physical activity can be achieved through sessions of as little as 10 minutes in duration when performed at a moderate intensity. This duration is sufficient to improve cardiovascular fitness and reduce some risk factors for heart disease and type 2 diabetes. Shorter sessions of physical activity also offer an easier starting point for people who have been inactive for some time and for those who have busy lives who find it hard to prioritise activity.

Through concerted partnership working and innovative service development and delivery, Sunderland has been able to realise a 4% increase in participation amongst adult residents, taking the city 0.44% higher than the national average. Whilst this achievement should be celebrated, it should also be used as an example of what can be achieved when organisations work together. There is no reason why we cannot continue to build upon these successes and create an inclusive and more 'active city'

Key issues and gaps

Despite the improvements made in increasing activity levels there is still much to do. As previously mentioned, just over half of Sunderland's adult population is physically inactive. Although no official figure exists to demonstrate levels of activity amongst children and young people, it is expected that statistics are

closely correlated.

We know that inequalities in health exist in many communities within the city. There are also clear and significant health inequalities in relation to physical inactivity according to income, gender, age, ethnicity and disability. . For example, whilst the Active People Survey tells us that 51.4% of Sunderland's adult population do not participate in any form of sport or physical activity, this increases to 56.1% for adults in NS SEC 5-8, to 60.1% for those aged 45 to 64 years of age and to 75% for both those aged 65+ and those with a limiting disability. Indeed, despite the achievements made in recent years there is still a disparity in participation between genders. Whilst the proportion of males doing no activity of any form has fallen since the Active People baseline survey, the proportion of females doing no activity of any form seems to be static or increasing slightly. Large numbers of residents may feel that they are faced with numerous barriers which prevent their participation in sports and physical activity. These could include perceived safety, individual culture, affordability and access.

Local and national data tells us that children who grow up in poverty are more likely to suffer from poor health and less likely to access cultural and leisure activities. It is therefore essential that the city continues to invest and develop interventions to promote opportunities which meet the needs of residents. This is particularly significant where efforts are focused in locations comprising large numbers of traditionally sedentary groups and individuals.

In response to significant changes in the delivery of school sports and activities for children and young people, the city also needs to develop new and innovative mechanisms for increasing participation amongst under 16's. The national School Games initiative will be part of this approach. The School Games are designed to build on the inspiration of 2012 to enable every school and child to participate in competitive sport, including meaningful opportunities for disabled youngsters. There are four levels – intra school, inter school, county festivals and national finals – of competition for school children, which it is hoped will help revive the culture of competitive sport in schools. However, it is recognized that competitive sport is not for everyone and other complementary opportunities will also need to be identified.

Sport and physical activity has a clear and lasting impact on every aspect of Sunderland life and positively affects the physical and social health of communities. Sport can regenerate estates, help tackle crime, engage those who are 'hard to reach' and raise achievement in our schools, colleges and universities. It is forecasted that the health costs of inactivity in Sunderland is at least £4.7 million per year, but the value of investing in physical activity and sport are significant. For example,

- The health gains of a 30-49 year-old who plays football are valued at £27,600 over their lifetime
- Youngsters who are active have numeracy scores, on average, 8% higher than non-participants

Sport is the number one choice for volunteering: 52% of adults who volunteer do so in sport.

Recommendations for Commissioning

There is strong evidence to show that physical activity benefits many aspects of health. The Chief Medical Officer's 2009 Annual Report notes that regular activity can reduce the risk of diseases including coronary heart disease by 10%, stroke by 20%, colon cancer by 40-50%, breast cancer by 30%, type 2 diabetes by 33-50% and obesity and can improve mental health and well-being, therefore significant and continued efforts should be made to increase the number of residents who are sufficiently physically active. Sport England (via the Active People survey) have provided significant intelligence which could enable effective targeted delivery of activities and interventions, thus improving the health of specific communities. Notwithstanding this position, there is a need to continue to develop an 'active culture' within the city.

Commissioning of proven, effective and recognised programmes / services must continue to ensure that recent progress does not stagnate or reverse. Sport and physical activity interventions have a positive impact on the reduction of early deaths as identified above in the short-term and contribute to the changes needed for the adoption of more healthy lifestyles in the medium term. Accordingly, they have an important role to play both in the near future and over longer time horizons.

Sunderland's residents currently benefit from a range of effective preventative, targeted interventions and specialist services, delivered by a number of organisations within the city. Such services include the city's sport and leisure facilities, specific programmes such as the Active Project, Sunderland Exercise Referral & Weight Management Programme, the Lifestyle, Activity and Ford (LAF) programme targeting families whose children have been identified as overweight, green exercise opportunities and age / ability specific activity sessions. Such services, programmes and opportunities are well subscribed and meet expectations, but much more could be achieved through creative and innovative commissioning.

Activities specifically for children and young people are required as a result of changes to school curriculum, schools sports agenda's and changes within the youth work sector. As well as guidance and advice for schools to fully implement their Physical Activity policies, and being able to access the quality of external physical activity providers into schools. Review training needs for Early Years staff working directly with children i.e. health visitors, day care staff and nurseries to be able to fully promote to parents the variety of opportunities across the city

General

- Review the communication and promotional materials used to engage the end user
- Review the mechanism to promote the opportunities available to other organisations and sectors of the community so then can signpost individuals to activity
- Ensure organisations / community sector are fully briefed on the services and opportunities available for employees / individuals
- Review resources available to support the services delivered
- Explore opportunity of developing a 'course' as part of health Champions model to be developed around physical activity
- Review the role of Health Trainers within this area of work
- Review the pricing policies of a number of activity opportunities across the City
- Engage with school to review the opportunities for schools to open to the community beyond the school day to encourage community based activity opportunities to be developed
- Need of further explore

1) Who's at risk and why?

The 2011 'Start Active, Stay Active' report released by the Department of Health (DoH) and composed by four current Chief Medical Officers, sets out new and important guidelines relating to physical activity throughout Great Britain. The report establishes a UK-wide consensus on the amount and type of physical activity required at different stages of the life-course. The report has drawn upon international experiences and examples of good practice.

Start Active, Stay Active updates the existing guidelines for children, young people and adults, and includes new guidelines for early years and older people for the first time in the UK. The flexibility of the guidelines creates new ways to achieve the health benefits of an active lifestyle, while retaining a strong link to previous recommendations. For all age groups, the report highlights the risks of excessive sedentary behaviour. New guidelines outlined in the report are as follows:

Guidelines for early years (Under 5's)

- Physical activity should be encouraged from birth, particularly through floor-based play and water-based activities in safe environments.
- Children of pre-school age* who are capable of walking unaided should be physically active daily for at least 180 minutes (3 hours), spread throughout the day.
- All under 5s should minimise the amount of time spent being sedentary (being restrained or sitting) for extended periods (except time spent sleeping).

Guidelines for children and young people (5 – 18 years)

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

Guidelines for adults (19 – 65 years)

- Adults should aim to be active daily. Over a week, activity should add up to at least 150 minutes (2½ hours) of moderate intensity activity in bouts of 10 minutes or more – one way to approach this is to do 30 minutes on at least 5 days a week.
- Alternatively, comparable benefits can be achieved through 75 minutes of vigorous intensity activity spread across the week or a combination of moderate and vigorous intensity activity.

Guidelines for older adults (65+ years)

- Older adults who participate in any amount of physical activity gain some health benefits, including maintenance of good physical and cognitive function. Some physical activity is better than none, and more physical activity provides greater health benefits.

- Older adults should aim to be active daily. Over a week, activity should add up to at least 150 minutes (2½ hours) of moderate intensity activity in bouts of 10 minutes or more – one way to approach this is to do 30 minutes on at least 5 days a week.
- For those who are already regularly active at moderate intensity, comparable benefits can be achieved through 75 minutes of vigorous intensity activity spread across the week or a combination of moderate and vigorous activity.
- Older adults should also undertake physical activity to improve muscle strength on at least two days a week.
- Older adults at risk of falls should incorporate physical activity to improve balance and co-ordination on at least two days a week.
- All older adults should minimise the amount of time spent being sedentary (sitting) for extended periods.

The report states that helping people to achieve these guidelines will require new and exciting partnerships to help create a more active society. It recommends that investment should be made in a variety of opportunities to be active including sport, active travel, dance, gardening and exercising in a natural environment – the list goes on.

The guidelines present a massive shift from previous policy. Adult guidelines appear to have changed the least from the previous policy which recommended that adults are active between 3 and 5 times per week for 30 minutes. Now it is recommended that adults are active daily, and complete at least 2 ½ hours of moderate activity each week.

What are notable from the recommendations set out in the Start Active Stay Active paper, are the changes to the guidelines for under 5's and over 65's. There were no previous UK public health guidelines for physical activity in under 5's, mainly because the evidence base for early year's activity is relatively new. Evidence suggests that physical activity for pre-school children, especially in the form of play, is a basic and essential behaviour that must be fostered and encouraged during the first five years of life. Opportunities for young children to be sedentary should be limited and replaced with more physically active options. The new messages need to be rolled out to the front line staff who are working in early years settings

Start Active Stay Active recommends that over 65's are active daily, for a minimum of 2 ½ hours per week. This echo's the recommendations set out in the adult 18 – 65 category but goes on to recommend that activity which will improve muscle strength and balance and coordination should also be incorporated on at least two of these days. We know that older age is characterised by increasing risk and incidence of coronary heart disease, stroke, type 2 diabetes, cancer and obesity. In addition, retaining physical and cognitive function becomes a major challenge, as well as the avoidance of debilitating mental illnesses such as depression and dementia. The high incidence of these conditions, coupled with increased longevity and continuing growth in the proportion of the population aged over 65, highlights a critical public health issue regarding human welfare, and social and health care. This

is the first time guidelines have been produced specifically to adults aged 65 and over. Indeed, the potential financial dimension of inactivity has been identified by Age UK who note that falls represent the most frequent and serious type of accident in the over 65s and that around 76,000 hip fractures occur in the UK each year at the cost of £1.4Bn to the NHS. This is an average cost of £18,400, which could rise significantly were the person to require a long stay in residential care as part of their convalescence and rehabilitation.

Guidelines for children and young people aged 5 – 18 years remains largely unchanged and still recommends a minimum of 60 minutes of moderate to vigorous activity per day. However the qualitative data from the Healthy Related Behaviour Survey 2010/11 found that only 42% of pupils sampled between 5-10 years and 29% 11-18 years reported that they had exercise to a level where they had to breathe harder five times or more in a week

The publication of these guidelines emphasises the importance of continued investment in sport and physical activity provision within the city, for both adults and children. The production of new guidelines for under 5's and over 65's requires that, as service providers, we need to respond to these recommendations and develop and deliver or commission new services.

The Department for Education has cut £160m funding for the School Sport Partnership network which will leave a huge void in the up-skilling of teachers in Physical Education, in the competitions and activities organised and delivered locally. It is anticipated that opportunities available to children and young people both in and out of school will be significantly affected.

People with mental illness seem to be more susceptible to physical illness and lifestyle choices that may make them more susceptible to ill-health. For example, research suggests people with mental health problems are more prone to having a poor diet, smoking, drug and alcohol misuse and low rates of physical activity. The most common barriers people were facing to improve their quality of life were lack of confidence, low self-esteem, poor social skills and lack of motivation. Furthermore, these issues were cited as major barriers in preventing individuals from accessing universal or mainstream services from which they could benefit. Such individuals are reported to often need support to gradually improve their confidence and motivation and support to access a range of cultural, leisure and social opportunities from which they might benefit as part of their recovery pathway, a good example being the model associated with support provided to access Wellness Services.

2) The level of need in the population

Sunderland has some of the worst areas of deprivation in England, with over 40% of the population living within an area classified as quintile 5, which is the most deprived. The most health deprived areas in Sunderland are as follows; City Centre, Port and East End, Hendon, Thornhill, Hetton Downs and Warden Law, South Wick, Witherwack, Marley Potts and Thorney Close. All these areas have high levels of health deprivation with Hendon and Southwick

being the worst.

Deprivation has a direct link with obesity and current levels of obesity within Sunderland are higher than the national average. The local levels of obesity for males are 24.1% and females 24.9%. The highest rates of obesity occur in 35 – 44 years for males and 55 – 64 for females. This indicates that almost a ¼ of adults living in Sunderland are overweight or obese, the highest prevalence lies within Silksworth, Millfield, Pallion, Redhill and Washington North

Sunderland has a population of an estimated 282,000 (2009 Sunderland Public Health mid year Annual Report), which indicates that 70500 (25%) of population in Sunderland is either overweight or obese

The recent Active People Survey which is coordinated by Sport England suggests that:

- 22.5% of adults in Sunderland take part in sport and active recreation compared to the national average of 22.0%
- However, 51.4% of adults do no sport or active recreation at all
- And, 51.9% of adult residents in Sunderland want to start playing sport or do a bit more

Based on these figures it is forecasted that the health costs of inactivity in Sunderland is at least £4.7 million per year.

The same survey provides an interesting insight into other physical activity associated statistics. These include:

- 7.2% of adult residents are regular sports volunteers, compared to the national average of 4.5%
- 20.9% are members of sports clubs, compared to 23.9% nationally
- 71.0% of residents are satisfied with sporting provision in the area, compared to 69.0% nationally
- The most popular activities for adults are swimming, going to the gym, football, athletics and golf.

Whilst some of this information is encouraging it does not detract from the fact that over half of the city's adult population is inactive. This level of inactivity is representative of a much wider distribution of ill-health throughout the city. Physical inactivity may be associated with increased prevalence of levels of lifestyle conditions including obesity, hypertension, diabetes and other musculo-skeletal conditions. There is also evidence that up to 37% of CHD deaths may be attributed to physical inactivity, and certain cancers and mental health conditions are associated with inactivity.

Clearly there is a need for greater targeted and general opportunity within the city. Innovative and sustained campaigns must exist within the city to engage with the 51.9% of adults who purportedly express an interest in being more active. Indeed Sport England's Market Segmentation (MS) data suggests that there is significant latent demand for the sports identified above which could be tapped if the right approaches and partnerships are adopted. The MS interactive web tool identifies over 30,900 adults who would like to swim, 15,900 with an interest in keep-fit/gym, 2,800 wanting to play football, 5,700

who would like to do athletics and 2,900 who would like to play golf.

Sport England's Market Segmentation tools categorise the types of adults whom live in the city. Their research shows us that:

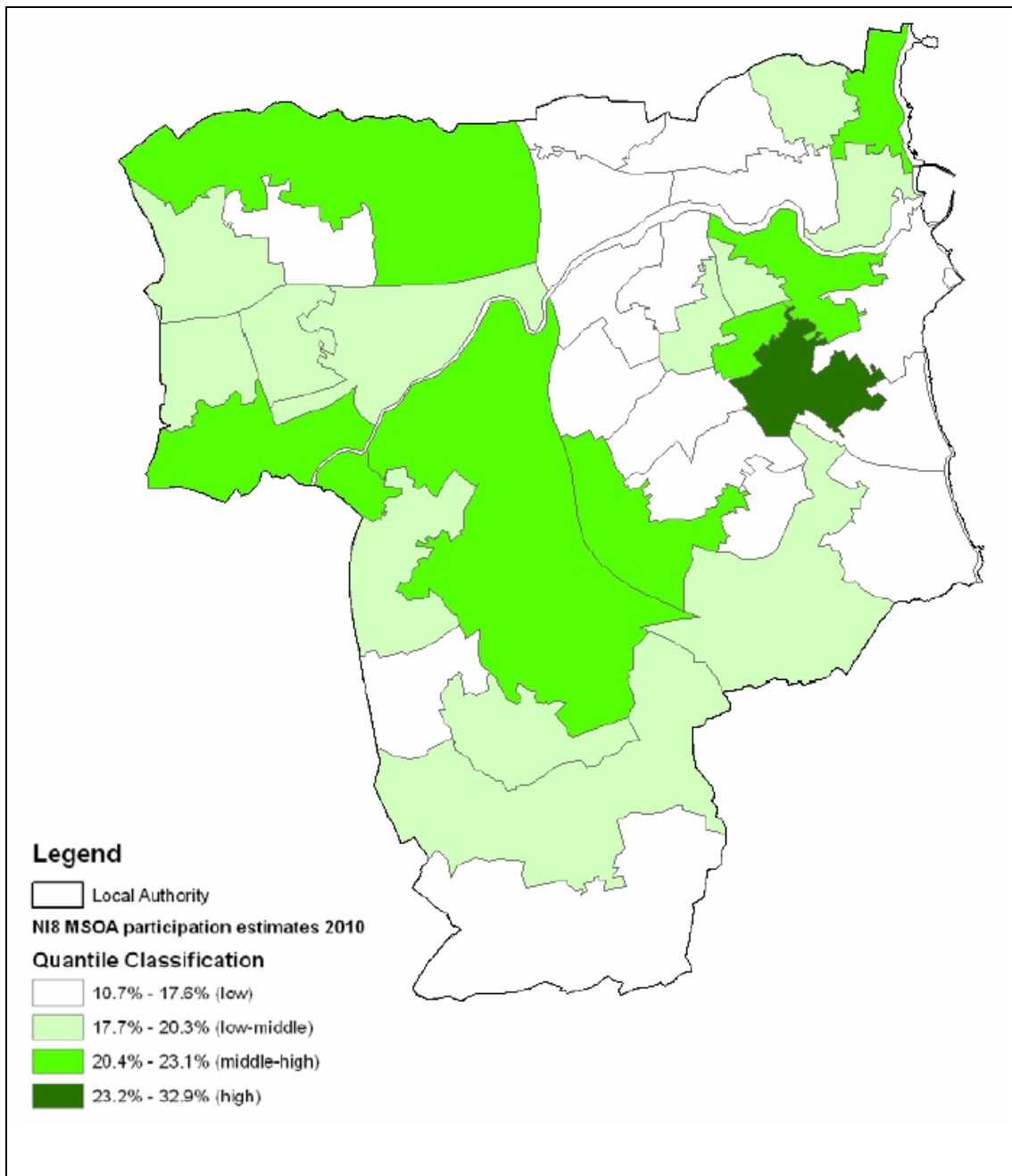
- 11.9% of the city's adult residents are considered 'Retirement Home Singles'. Typically aged 65+, these adults are much less active than the average adult population and they are likely to be doing less activity than 12 months ago, mainly due to health or injury. The top sports/activities that this group participate in are: keep fit/gym, swimming and bowls.
- 10.1% of the city's residents are 'Pub league team mates'. Typically aged 36 – 45, this group is male, showing average levels of sports participation. 14% of this segment takes part in keep fit/gym compared to 17% of all adults; 12% of this segment takes part in football compared to 4% of all adults. In addition, 11% of people in this segment take part in cycling, and 10% go swimming. This group may also take part in athletics or running, golf, angling, badminton, archery or martial arts/combat sports.
- 9.3% of the city's residents are 'Older working women'. Typically aged between 46 and 65, this group is female and married, working part time. Generally less active than the average adult population, the top activities/sports that this group participates in are shown in are: Keep fit/gym is the most popular sport with 15%, followed by swimming (13%) and cycling (4%). Athletics (including running) is enjoyed by 2% of this group, and other sports that this group may participate in are badminton, horse riding, tennis, martial arts (including Tai Chi), football and golf.

Recent Active People Survey results show that in Sunderland 22.5% of adults participate in 3x30minutes of moderate physical activity per week. From this survey we also know that 23.4% of the city's male population, and 10.7% of the city's female population participate in 3x30minutes per week. There is a clear difference here between the numbers of active males versus active females.

Further analysis shows that:

- 26.5% of the city's 16-34yr old residents are active 3x30minutes per week
- 17.4% of the city's 35-54yr old residents are active 3x30minutes per week
- 8.1% of the city's 55+ residents are active 3x30minutes per week
- 16.9% and 14.6% of the city's white and non-white residents active 3x30minutes respectively

In light of the changing recommendations for physical activity, ie. a recommendation of 5x30 as opposed to the current 3x30, these figures could obviously change. However, Sport England, for the foreseeable future will continue to report on the number of residents who are active 3x30minutes per week.



3) Current services in relation to need

Sunderland can boast a variety of preventative and targeted services which have been developed to meet the specific needs of Sunderland's residents.

Preventative services are those which are accessible to all adults. These include:

- Wellness Walking Programme
- Nordic Walking
- Cycle Sunderland
- Mums on the Move
- Active Project

- Community Wellness Programme
- Groundwork Green Activity Programme

Targeted and specialist services are those which may be accessed by specific populations and those who require additional support. These include:

- Sunderland Exercise Referral & Weight Management Programme
- Stop Smoking Service
- Specialist Weight Management Service
- Lifestyle, Activity and Food programme
- Employee Wellness Programme

All of these services are delivered as a result of commissioned funds or award grants and without these services, activity opportunities for thousands of residents would be removed. It is particularly true of the targeted services that they are often the 'starting point' for improving overall health and lifestyles in addition to increasing activity levels.

Activity delivery within Sunderland is of course not limited to those offered by Sunderland City Council. The city has a growing number of sports clubs, private activity providers and community interest companies and community centres who offer a range of physical activity opportunities throughout the city.

Ever changing fitness trends has seen a massive increase in the number of outdoor fitness sessions and 'boot camp' activities. There are now many of these activities taking place in parks and public spaces throughout Sunderland. More and more residents are taking advantage of the city's landscape and outdoor spaces to be active. The city has a number of cycling groups which use the cycle network, and numerous walking providers now operate throughout the city. Examples of these groups include the Wearside Family Cycling Group, Hetton Hawks and Sunderland Ramblers.

There is also evidence to suggest that there are now more sports clubs and groups operating in the city, as well as an increase in the number of adults and children taking part in competitive and recreational sports. New sports developments, such as the Goals Centre, have been built and are proving to be very popular with Sunderland residents.

For a long time community centres have been identifiable as likely places where you could find 'keep fit' classes and other social pursuits. It is becoming apparent that a much wider variety of physical activities are now being delivered privately in community centres, school and church halls throughout the city. Zumba fitness and other dance type activities have proven to be massively attractive activities to Sunderland residents, and these activities, plus other fitness classes and now widely available throughout the city. Providers of such activities include Sunderland Dance CiC, Be Active & be Fit CiC and many other providers.

4) Projected service use and outcomes in 3-5 years and 5-10 years

Continued support of commissioned services will be essential in ensuring that the number of physically active residents continues to grow in Sunderland. In the past 3 years participation has risen over 3%. This has been achieved as a result of effective partnership working between agencies and adequate financial support for the development and delivery of new and existing services.

Based on and building upon recent successes, it is not unfeasible that with continued support, participation in physical activity can reach 26% within 3-5 years and 30%+ within 5-10 years. The approaching 2012 Olympic and Paralympic Games provides an ideal opportunity for the launch and re-energising the promotion of services across the city and it is hoped that London 2012 will act as a catalyst for currently inactive residents to try something new and maintain participation.

5) Evidence of what works

The current initiatives and services available in Sunderland are currently working very well. For example:

- The Sport England funded Active Sunderland Project had worked with over 2,500 adult residents in the past two years, and raised awareness of the importance of leading an active and healthy lifestyle.
- Over 2,000 residents have been engaged in sport and physical activity over the last 18 months through the Sunderland Active Weeks.
- 1,399 new participants (total participations 8,818) have entered into affiliated football over the past 12 months through the Football Investment Strategy
- 100 adults are now taking part in lead running groups through the Sunderland Running Network.
- 150 adults from the BME population have been engaged through the Get into Football programme the last 9 months.
- 300 competitions have been delivered in schools involving 29,000 young people in the last 4 years through the Youth Sports Trust funding
- 435 young people have been engaged in targeted youth activity through sport
- Over 200 residents have taken part in Active Sunderland Nordic Walking programme
- 409 adults and children took part in the 2011 Sunderland Big Bike Ride and 1800 took part in the Sunderland 10k Run

- During 2010 / 2011 2,634 adults were supported through the Sunderland's Exercise Referral and Weight Management programme, attending in total 48,464 activity sessions
- 115 families have been supported as part of the Lifestyle, Activity & Food programme, helping the whole family to live healthier, more active lifestyles
- 13,720 attendances by adults participated in the Community Wellness programme in 2010 / 2011 and approximately 44,000 attendances since the programme began
- 170 adults on average are participating on a monthly basis in the Wellness Walking programme – led by volunteers
- 24,089 adults participated in the range of preventative, targeted interventions and specialist services delivered by the Wellness Service in 2010 / 2011
- 2,372,959 (2.3 million) people have accessed Sunderland City Council's leisure facilities in 2010 / 2011
- The Community Wellness Programme expanded in local community venues, eg. Fulwell Day Centre, including Sit n' Be Fit scheme to improve physical exercise for older people. Programme includes support for people with LD accessing Fulwell Day Centre. A total of 41 people with LD supported by the Council and living in the community (around 8% of the total number of people with LD with ongoing care plans) accessed this Wellness Centre in 2010. The Centre supports specific hard-to-reach groups in the community, with links between the MS Society, Parkinson's Disease Support Group and Macmillan Nurses and over-50 groups, for these groups in the wider community to access the centre.

6) User Views

"I started attending the walks in January as a new years resolution to take better care of myself. The walks are great and I have met lots of new people. I attend walks twice a week and I feel a lot fitter" – Janet, aged 49, Sunderland – Wellness Walking participant

"Nordic Walking is great. I cant jog and I don't like gyms, so this is a great way of getting outdoors and having a workout" – John, aged 52, Sunderland – Nordic Walking participant

"The advice I received on board the Active Bus has helped me become more active. I had a free Wellness Check which showed me what I needed to work on and then the Activator helped me to find activities I would like to take part in" – Stephanie, aged 29, Sunderland – Active Sunderland Customer

"The community wellness programme is ideal for me as its right on my doorstep. I can easily fit sessions into my week whilst the grandchildren are at school" – Mary, aged 55, Sunderland – Community Wellness Participant

"The programme has been very enjoyable and I would like to thank the team for helping me to lose weight, improve my fitness and boost my confidence" –

Sharon, aged 44, Sunderland – SERWMP participant

In 2010, the Sunderland Customer Contact Centre carried out a survey on behalf of the Active Sunderland to assess project performance. 143 participants of the Active project completed the survey, providing the following information:

68% of Active Sunderland participants are more active as a result of speaking to an Activator

36% of Active Sunderland participants take part in five or more physical activity sessions per week, 15% take part in four and 20% take part in three sessions per week

56% of Active Sunderland participants feel that their health and wellbeing has improved following speaking with an Activator

7) Equality Impact Assessments

The equality assessment highlights the potential impact of the policy, decision or activity on the people of Sunderland, specifically relating to the impact on individuals, groups with protected characteristics and communities of interest within the city. The assessment undertaken considers the following:

- Age

All physical activities developed and delivered by Sunderland City Council's Sport & Leisure Department and Wellness Services are accessible to people of all ages.

A number of activities including Walking, Nordic Walking, Community Wellness and the Green Activity programme may appeal more to older age groups but do not restrict access to younger participants in the way that age specific services would.

All city council led activities are delivered by instructors trained to accommodate a wide age range and offer easier/harder alternatives to ensure that activities are safe, effective and appropriate for all.

- Disability

Physical activities led by Sunderland City Council can have a positive impact on the health and well being of people with disabilities.

Where ever possible and practical, provision is made to accommodate those with a disability and some services/activities are delivered from venues which can provide specialist assistance.

- Sex/Gender

All services, with the exception of the Mums on the Move programme (a service for pre and post natal women) are available to all genders.

- Marriage and Civil Partnership

All programmes and services are available for those who are single, married or in a civil partnership.

- Pregnancy/Maternity

Specific provision for this group is made through the Specialist Exercise

Practitioner – Maternity for pre and post natal women up to 1 year after giving birth. Activities are programmed to accommodate their lifestyles and routines, specific activities are designed to be safe and effective at each stage of pregnancy and after giving birth.

Some activities i.e. Mums on the Move and Mums in the Pool have been specifically designed to include the infant, therefore negating the need for additional childcare.

Residents requiring this service may attend general access sessions or be referred by a health care professional.

- Race/Ethnicity

All City Council led services are available to people of any race or ethnicity. To engage further with specific communities, Active Sunderland Activators are available and work with BME groups and those with specific requirements to deliver activity taster sessions and courses to promote further integration into mainstream activity.

- Religion/Believe

All programmes and services are available to individuals whatever their religion / belief. Individual needs are accommodated wherever it is practical to do so.

- Sexual orientation

All programmes and services are available to individuals who are gay, lesbian or heterosexual.

- Transgender / Gender Identity

All programmes and services are available to trans gender / gender identity individuals and every effort is made to accommodate specific identified needs for changing / toilet facilities where it is practical to do so.

8) Unmet needs and service gaps

Changes within the school sports system, combined with revised, increased targets for participation amongst children and young people will ultimately present a great challenge and a large gap in service provision. Identification of appropriate delivery partners and sustained support for these partners will be essential in ensuring that as many children and young people as possible are meeting participation guidelines.

The new guidelines for children under 5 will need to be accessed across the city to ensure the workforce have a understanding of this and the services that are commissioned to meet the needs of the public

Establishing new, accessible and desirable physical activity opportunities for the general population is an on-going task.

Care should be taken and consideration given to life expectancy. In Sunderland, it is forecast that the number of older people above 65 years of age will rise from 46,000 in 2009 to 68,000 in 2030 – an increase of 46%. The number of people in Sunderland aged over 85 years – those with greatest care needs will more than double from 5,000 to 11,000 over the same period.

The forecast increase in number of older people means that commissioned

services will need to consider how the health of this growing section of the population will be met.

9) Recommendations for Commissioning

There is strong evidence to show that physical activity benefits many aspects of health. The Chief Medical Officer's 2009 Annual Report notes that regular activity can reduce the risk of diseases including coronary heart disease by 10%, stroke by 20%, colon cancer by 40-50%, breast cancer by 30%, type 2 diabetes by 33-50% and obesity and can improve mental health and well-being, therefore significant and continued efforts should be made to increase the number of residents who are sufficiently physically active. Sport England (via the Active People survey) has provided significant intelligence which could enable effective targeted delivery of activities and interventions, thus improving the health of specific communities. Notwithstanding this position, there is a need to continue to develop an 'active culture' within the city.

Commissioning of proven, effective and recognised programmes / services must continue to ensure that recent progress does not stagnate or reverse. Sport and physical activity interventions have a positive impact on the reduction of early deaths as identified above in the short-term and contribute to the changes needed for the adoption of more healthy lifestyles in the medium term. Accordingly, they have an important role to play both in the near future and over longer time horizons.

Sunderland's residents currently benefit from a range of effective preventative, targeted interventions and specialist services, delivered by a number of organisations within the city. Such services include the city's sport and leisure facilities, specific programmes such as the Active Sunderland Project, Sunderland Exercise Referral & Weight Management Programme, the Lifestyle, Activity and Food (LAF) programme targeting families whose children have been identified as overweight, 'green exercise' opportunities and age / ability specific activity sessions. Such services, programmes and opportunities are well subscribed and meet expectations, but much more could be achieved through creative and innovative commissioning.

Activities specifically for children and young people are required as a result of changes to school curriculum, schools sports agenda's and changes within the youth work sector. As well as guidance and advice for schools to fully implement their Physical Activity policies, and being able to access the quality of external physical activity providers into schools. Review training needs for Early Years staff working directly with children ie. health visitors, day care staff and nurseries to be able to fully promote to parents the variety of opportunities across the city

10) Recommendations for needs assessment work

Improved use of evidence to identify need at local level.

Continued monitoring is required to identify temporal trends

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