

**Consultation response from the  
National Heart Forum**

Consultation: Climbing higher: sport and  
active recreation in Wales

Consulting body: Welsh Assembly  
Government

Date: October 2003

## **NATIONAL HEART FORUM**

### **Response to the Sport Policy Unit's**

#### ***Climbing higher: Sport and active recreation in Wales***

### **About the National Heart Forum**

The National Heart Forum (NHF) is the UK alliance of over 45 national organisations working to reduce the risk of coronary heart disease, the UK's leading single killer. Member organisations represent the medical and health services, professional bodies, consumer groups and voluntary organisations. Members also include many individual experts in cardiovascular research. Government departments, including the Welsh Assembly Government (WAG) have observer status.

The purpose of the NHF is to work with and through its members to prevent disability and death from coronary heart disease in the UK. In order to achieve this, the National Heart Forum has four main objectives:

- To provide a forum for members for the exchange of information, ideas and initiatives on coronary heart disease prevention
- To identify and address areas of consensus and controversy and gaps in research and policy
- To develop policy based on evidence and on the views of member organisations
- To stimulate and promote effective action.

The NHF embraces professional, scientific and policy opinion on current issues in coronary heart disease prevention. It co-ordinates action to reduce heart disease risk through information, education, research, policy development and advocacy and has for many years been developing policy around physical activity. Many of the recommendations contained in this response are taken from key NHF policy documents<sup>12</sup>. Copies of these can be obtained from the NHF offices.

This response does not necessarily reflect the views of all NHF members.

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<sup>1</sup> National Heart Forum. 1999. *Looking to the future: Making coronary heart disease an epidemic of the past* London: The Stationery Office.

<sup>2</sup> National Heart Forum. 2002. *Towards a generation free from coronary heart disease. Policy action for children's and young people's health and well-being*. London: National Heart Forum.

## Key observations

*Climbing Higher* represents the excellent beginning of a sport and physical recreation strategy for Wales. Whilst the NHF hopes that this is only the bare bones of the final document, this draft sets out clearly the direction of travel and recognises that physical activity and sport are on a continuum and are not mutually exclusive concepts.

**R1:** However, one criticism of the document is that we do not believe that it comprehensively covers all the areas of government policy that impact, either negatively or positively, on participation levels, particularly walking and cycling. In particular, we recommend that government transport policy should be reflected more strongly in this strategy (see also R14).

**R2:** **We strongly urge WAG to reconsider and possibly revise Aim 1 – 70% of men and women up to the age of 65 will participate in at least moderate intensity physical activity for 30 minutes five times a week.** Whilst targets can set direction and motivate organisations, they are also used as a means of measuring an organisation's performance and therefore if the target is hugely unrealistic, organisations will suffer unnecessarily. A great deal of doubt has been expressed over the accuracy of the assertion that the Finnish population is as active as stated both here and in the English sport strategy document *Game Plan*. Indeed, government officials in England are working with experts to determine the true level of physical activity in Finland, believed to be less than stated, on which to base the English target. We urge Wales to follow suit.

## Specific comments

### Section 4.2: Participation

**R3:** The NHF is concerned with the proposal to run pilot schemes to increase participation in physical activity unless the issue of sustainability is also addressed. We recommend that WAG commits itself to providing funding for a national roll out of the successful pilot projects.

**R4:** The proposal to develop a comprehensive and up-to-date guide to sport and active recreation opportunities across Wales is ambitious. Is there evidence that this will be a useful resource given the enormous effort required to

maintain it? We recommend that instead WAG considers establishing a guide to best practice, along the lines of Let's Get Moving<sup>3</sup>, a toolkit produced by the Faculty of Public Health Medicine and the National Heart Forum, which details success criteria of interventions to increase physical activity levels, including real examples with start-up costs and partnership information. This will support the development of successful projects and increase capacity.

- R5:** The NHF applauds the idea of abolishing charges for some activities. However, we are concerned that this might lead in time to a lack of investment in the leisure service infrastructure when many leisure centres are already in need of modernisation. The NHF recommends that WAG sets out how it aims to ensure maintenance and improvement of service provision whilst providing certain activities at no cost to the user.
- R6:** As well as holding an annual Wales Activity Day, the NHF recommends that leisure centres and after-school clubs should regularly offer taster activity sessions and skills appraisal sessions to guide children and young people on which sports or activities might interest them and suit them best.
- R7:** The NHF supports the development of GP exercise referral schemes. However, we recommend that WAG should commit itself to providing substantial funding to develop the infrastructure and training needs to support a Wales-wide scheme. We recommend that once a national scheme has been established, funding should be ring-fenced as was done with the primary care smoking cessation service.
- R8:** The NHF recommends that every effort should be made by WAG and by local health boards to encourage GP practices to undertake exercise referral and other health promoting services such as diabetes clinics and obesity clinics as part of the additional services they provide under the new GMS contract.

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<sup>3</sup> Faculty of Public Health Medicine. 2001. *Let's Get Moving: A physical activity handbook for developing local programmes*. London: Faculty of Public Health Medicine. [Contact NHF for a copy](#).

- R9:** NHF recommends that WAG works with the Royal Colleges and higher education establishments to determine whether medical undergraduate training should include a greater emphasis on exercise physiology and on counselling and health promoting theory and practice, or whether it would be more cost-effective and appropriate for nurses or for exercise professionals to be employed in health care teams to provide such counselling and advice. This discussion is timely and is taking place elsewhere in the UK.
- R10:** The strategy proposes to *encourage* increased family-based participation in sport and physical activity. The NHF recommends that this sentence should be strengthened by setting out examples of how family-based participation may be increased to avoid the action sounding ill thought out.
- R11:** The NHF strongly supports the involvement of students in the coaching of secondary and post-secondary school girls, people from ethnic minority communities and older people. We recommend the inclusion of younger (nursery and primary school age) children as a further target group for whom students could be involved in developing active playgrounds.
- R12:** The NHF is supportive of the need for social marketing as a mechanism for bringing about a shift in mindset, including the use of media campaigns. However, we strongly urge WAG to look at the lessons learned in the past e.g. Heartbeat Wales, Active for Life, and the experiences of the Health Education Council/Health Education Authority and Health Promotion Wales, as well as lessons learned from further afield including Australia, Finland, Canada, USA and others. There is a great deal of knowledge about the use and limitations of media campaigns to promote physical activity that the WAG needs to tap in to in considering their future use.

#### **Section 4.4: Infrastructure**

- R13:** The NHF recommends that walking and cycling are flagged as priority activities for the most effective and efficient delivery of mass participation that confers a health benefit, since these are the easiest activities to undertake as part of everyday life. Their omission from this section implies their invalidity.

- R14:** The NHF suggests that by including walking and cycling in this section, the document can expand on the role of the Transport Policy Division of WAG both in improving the infrastructure for walking and cycling, and in setting performance targets for increasing walking and cycling as forms of travel to and from the workplace, schools, shops and leisure facilities (see also R1).
- R15:** The NHF recommends that the document should make explicit reference to the role that schools can play in increasing physical activity levels among both pupils and staff through the curriculum, after school clubs and active transport to and from the school gates. Schools should be encouraged to develop school travel plans and to promote links with community sports and leisure facilities.
- R16:** The NHF recommends that the final strategy seeks to strengthen physical education, sport and active play in schools through a combination of investment, school policies and teaching practices. In addition to staffing requirements, which might be met through WAG's proposal to encourage students to deliver physical activity programmes, schools also need resources to carry out structural improvements, provide playing fields or create sheltered play areas and should not be expected to turn to private industry for funds since these sources are often at odds with a health promoting school ethos.
- R17:** The NHF strongly agrees with the notion that the planning process has a key part to play in participation levels. However, we recommend that WAG sets a clear intention to ensure, by use of secondary planning legislation if necessary, that new housing developments *always* make provision for sport, physical activity and play areas and cycle paths. Home zones in built up areas and quiet roads initiatives in rural areas should be actively encouraged through the planning process.
- R18:** The NHF recommends that street lighting should be designed for the footpath as well as for the road user and should be a key feature of future planning,

and that existing street lighting should be overhauled where it is of no or limited benefit to the pedestrian.

**R19:** The NHF recommends that new office developments should be *required* to include bike racks and changing facilities and also to ensure provision of and clearly direct users to accessible and attractive stairs. All too often the office worker or visitor is faced with a bank of lifts and no indication of where the stairs are simply because these are regarded by the developers as an emergency exit route only, not as an alternative and healthy means of accessing other floors.

**R20:** The document proposes to *undertake a review of the quality, quantity and suitability of sport and physical activity facilities across Wales*. The NHF recommends that the rationale for this exercise be made explicit in the final document and that such an audit should include school facilities. However, if the rationale is to inform the implementation of the strategy by providing baseline data, we strongly recommend that WAG considers undertaking this exercise before the strategy is produced, to inform the final document and ensure its appropriateness.

#### **Section 4.5: Policy development**

**R21:** The NHF applauds the idea of a smart card for sport and physical activity, particularly if it can serve as a useful method for monitoring activity levels.

**R22:** The document rightly identifies that a key problem for UK governments is how to evaluate and monitor physical activity policies and initiatives. The proposal to set up an evaluation and monitoring group in Wales is a good one. We urge WAG to also convene a group of scientific and policy experts to support the development of the strategy, as was done in Scotland when developing a walking strategy. This will ensure that robust evidence is used to inform the strategy and also that evaluation and monitoring methods have been considered by experts prior to implementation to avoid the possibility that late in the day a given intervention proves to be impossible to evaluate.

## **Section 5: Vision for 2023**

**R23:** The NHF recommends that the text in section 4 is made to reflect more closely the Aims set out in section 5. Of particular concern is a lack of actions in section 4 to encourage people over the age of 65 to participate in physical activity (older people are specifically mentioned only once and this is in an action that focuses mostly on school-age children). Significant investment will be required in order to provide an appropriate level of trained staff to support physical activity among the elderly, and to provide suitable facilities for them.

**R24:** The NHF recommends that section 4 includes actions to support Aim 5 *to support a further 12,000 jobs in Wales*. The Consumers' Association recently highlighted the lack of training that employees working in local public and private leisure facilities have in even basic exercise physiology and instruction. Provision of good quality workforce training and development must become a key requirement of leisure providers if capacity is to be increased whilst securing the safety and enjoyment of all members of the public. Efforts to develop a recognised and respected register of exercise professionals need to be stepped up.

## **Section 6: Evaluation**

**R25:** Regardless of the details of the final target set as Aim 1 of the strategy (see R1), the major problem that organisations will face in striving to reach the target is how to measure physical activity levels accurately and reliably. Institutions around the world are still grappling with this issue and WAG should seek to work closely with them to establish robust but convenient methods.

**R26:** The NHF strongly agrees with the need to develop data collection methods that are comparable across the UK and internationally. Again, this will require close collaboration with other organisations.