



Australian Government
Department of Health and Ageing

SECRETARY

Mr Shayne Neumann MP
Chair
House of Representatives Standing Committee on
Aboriginal and Torres Strait Islander Affairs
PO Box 6021
Parliament House
CANBERRA ACT 2600

Dear Mr Neumann

Thank you for your letter of 20 September 2012 to the Hon Tanya Plibersek MP, Minister for Health, which invites the Minister to make a submission to the Inquiry into the contribution of sport to Indigenous wellbeing and mentoring. Minister Plibersek referred the letter to the Hon Warren Snowdon MP, Minister for Indigenous Health, who has asked the Department to provide a submission to your Inquiry.

I am pleased to provide a submission from the Department of Health and Ageing to you in your capacity as Chair of the Standing Committee on Aboriginal and Torres Strait Islander Affairs.

The submission identifies the benefits of physical activity for the health and wellbeing of Aboriginal and Torres Strait Islander people. In accordance with the Committee's terms of reference, the submission provides examples of the Department's contribution to physical activity and sport initiatives for Aboriginal and Torres Strait Islander people, and the way in which it aligns with the Closing the Gap life expectancy target.

I appreciate the opportunity to provide a submission to the Committee's Inquiry and I encourage the Committee to contact the Department if it wishes to discuss the submission. Ms Samantha Palmer, First Assistant Secretary, Office for Aboriginal and Torres Strait Islander Health can be contacted by telephone on [REDACTED] or via email at [REDACTED]

Yours sincerely

[REDACTED]
Jane Halton PSM
Secretary

November 2012

**HOUSE OF REPRESENTATIVES
STANDING COMMITTEE ON
ABORIGINAL AND TORRES STRAIT ISLANDER AFFAIRS**

**INQUIRY INTO
THE CONTRIBUTION OF SPORT TO
INDIGENOUS WELLBEING AND MENTORING**

**SUBMISSION FROM
THE AUSTRALIAN GOVERNMENT
DEPARTMENT OF HEALTH AND AGEING**

NOVEMBER 2012

Introduction

The Department of Health and Ageing (DoHA) acknowledges the significant contribution that sport and physical activity can make to Indigenous health and wellbeing. Physical inactivity (lack of physical activity) is an important modifiable risk factor associated with several potentially preventable chronic diseases, including cardiovascular disease, hypertension and diabetes.

Physical inactivity is the third leading risk factor for the burden of disease and injury in the Aboriginal and Torres Strait Islander population, after tobacco use and high body mass. It accounts for 8% of the total burden of disease for the Indigenous population, and is also associated with overweight and obesity, the second most important risk factor for the gap in health outcomes.

Appropriate levels of physical activity for all ages can assist in the prevention of chronic disease, and its long term impact on life expectancy and quality of life. Chronic disease contributes to two-thirds of the health gap between Aboriginal and Torres Strait Islander people and non-Indigenous Australians. The majority (68%) of Aboriginal and Torres Strait Islander deaths in 2006–10 were due to chronic diseases, such as circulatory disease, cancer, diabetes and kidney disease. Therefore, programs that increase the levels of physical activity among Aboriginal and Torres Strait Islander peoples can contribute to achieving the COAG Closing the Gap life expectancy target.

This submission summarises the evidence that links physical activity to the health and wellbeing of Aboriginal and Torres Strait Islander people, and provides examples of DoHA's contributions to improving the health and wellbeing of Aboriginal and Torres Strait Islander people through sport and physical activity.

Links between physical activity, health and wellbeing

Physical activity is defined as any bodily movement produced by skeletal muscles that requires energy expenditure (World Health Organisation (WHO) 2012). It includes both informal opportunities for movement such as housework and active transportation, and formal and structured activities such as sport and exercise. Regular moderate intensity physical activity, such as walking, cycling, or participating in sports, has significant benefits for health, it can reduce the risk of a range of chronic diseases and can decrease the risk of a hip or vertebral fracture and help control weight (WHO 2012).

The effect of physical inactivity is manifested through a range of diseases, most notably ischaemic heart disease (55% of the burden attributed to physical inactivity) and diabetes (33%). Physical inactivity is the third leading risk factor for the burden of disease and injury in the Aboriginal and Torres Strait Islander population. It accounted for approximately 6.7% of the total burden of disease and injury in the Australian population and 8% for the Indigenous population (Vos et al 2007).

Research has established inverse associations between physical activity with fat mass and biomedical risk factors for chronic disease (Ness et al 2007, Steele et al 2009). Studies of the relationships between physical activity and the presence of disease have confirmed that activity reduces the risk for heart disease (Stephenson et al 2000, Bull et al 2004), high blood pressure (Kokkinos et al 2001), diabetes, and the symptoms of depression, anxiety and stress (WHO 2008). In the case of diabetes, large scale trials in China, Finland and the United States have shown that a combination of modest weight loss, diet and moderate physical activity can reduce the risk of developing Type 2 diabetes by 50-60% in those at high risk (Bull et al. 2004).

Involvement in sport and other forms of physical activity can provide an opportunity to socialise, develop and maintain contact with family, friends and networks. This can give participants an increased sense of wellbeing (ABS 2010). Regular moderate intensity physical activity such as walking, cycling, or participating in sports, has significant benefits for health, for instance it can reduce the risk of depression (WHO 2012).

Rates of physical activity among Aboriginal and Torres Strait Islander people

New data on the level of physical activity from the National Aboriginal and Torres Strait Islander Health Survey will be available in approximately October 2013. The National Aboriginal and Torres Strait Islander Nutrition and Physical Activity Survey will provide more detailed information regarding the type of physical activity (including sport). It is due to be released in June 2014.

The most recent national data on physical activity for Indigenous Australians is available for the period 2004 - 05. This data shows that half of Aboriginal and Torres Strait Islander peoples participated in low, moderate or high levels of physical activity.

Between 2001 and 2004 – 05 there was a noticeable shift towards reduced physical activity among the Aboriginal and Torres Strait Islander population aged 15 and over in non-remote areas. There was a substantial increase in those categorised as sedentary and a reduction in those participating in moderate levels of exercise. After adjusting for differences in the age structure of the two populations, this population was one and a half times more likely than other Australians to be considered sedentary in 2004 – 05.

In 2004-05, more Aboriginal and Torres Strait Islander females than males were considered sedentary (51% compared with 42%). Sedentary or low physical activity were highest in the older age groups (45 years and over), while moderate or high levels of physical activity were highest among those aged 15-34 years.

There is a positive association between level of physical activity and self-assessed health status. For example, in non-remote areas, 94% of Aboriginal and Torres Strait Islander people who engage in high levels of physical activity report excellent, very good or good health status. This reported health status reduced to 71% among people who are sedentary.

Benefits of sport and physical activity beyond chronic disease

Sport is an enjoyable and engaging form of physical activity for many young people and, when offered through school based programs, has been shown to improve attitudes to school and school attendance rates of participants. Improving educational outcomes also improves health outcomes. For example, we know that the origins of health behaviours are located in a complex range of environmental, social, economic, family and community factors. A number of studies have found that between one-third and one-half of the health gap between Aboriginal and Torres Strait Islander people and non-Indigenous Australians may be explained by differences in the social determinants of health, such as education, employment and income (Booth et al 2005, DSI Consulting Pty Ltd et al 2009).

A focus on sport and physical activity particularly in the early to young adult years, could also contribute to Closing the Gap in Indigenous disadvantage by assisting Aboriginal and Torres Strait Islander children and young people with their transition to adulthood and with the ownership of their

personal and cultural identity. Linking school engagement to sporting activities may contribute to breaking the intergenerational cycle of social and economic disadvantage by building young peoples' self-esteem and enabling them to both connect with mentors and other adults in their community, while working towards tertiary education and workforce participation.

More than ninety per cent of the 1,012 students surveyed in the Department of Education, Employment and Workplace Relations (DEEWR) funded Sporting Chance Program's evaluation reported a positive attitude toward their schooling, particularly in relation to their attitudes to school, self-identity, sense of pride in being Aboriginal and Torres Strait Islander and self-efficacy as learners. Data also showed that participation in the program was a contributing factor in improving educational outcomes through improved attendance and more active engagement in learning. (The full report can be accessed at <http://www.deewr.gov.au/Indigenous/Schooling/Programs/SportingChance/Pages/default.aspx>.)

Department of Health and Ageing (DoHA) activities

In December 2007, the Council of Australian Governments (COAG) agreed to a partnership between all levels of government to work with Aboriginal and Torres Strait Islander communities to close the gap in Indigenous disadvantage. Outcomes for Aboriginal and Torres Strait Islander people remain well below those of other Australians. In recognition of this, COAG is investing \$4.6 billion towards six targets, including closing the life expectancy gap within a generation, and halving the gap in mortality rates for Indigenous children under five within a decade.

To support the COAG Closing the Gap targets, DoHA funds activities which aim to increase physical activity among Aboriginal and Torres Strait Islander people. Some of the activities use sport as a vehicle to promote health and wellbeing. Examples of these activities follow:

Indigenous Chronic Disease Package

Preventive health is a priority area of the National Partnership Agreement (NPA) on Closing the Gap in Indigenous Health Outcomes. The objectives of the NPA will be supported by the successful implementation of other Indigenous initiatives including early childhood reforms, broader health system changes and measures to address the under-lying social determinants of poor health. Under the Partnership, the Australian Government committed \$805.5 million over four years (from 2009-10) for an Indigenous Chronic Disease Package (ICDP) to close the gap in life expectancy within a generation.

One of the aims of the ICDP is to reduce the major risk factors for chronic disease in Aboriginal and Torres Strait Islander communities, such as smoking, poor nutrition and lack of physical activity. A key component of the ICDP is the roll out of the Regional Tackling Smoking and Healthy Lifestyle Teams. The Regional Teams promote and support good health through the involvement of local communities and delivery of healthy lifestyle programs and social marketing strategies that include role models, ambassadors and champions (both locally recognised and high profile).

The Regional Teams work in partnership with Aboriginal and Torres Strait Islander communities and relevant organisations to address some of the main causes of chronic disease and premature morbidity and mortality. The teams have used locally recognised sporting role models such as Steve Renouf (former Rugby League Player), Rhys Wesser (former Rugby League Player), Ian

Lacey (Queensland Indigenous representative and former Brisbane Bronco) and Kieran Landers (Captain of the Ipswich Jets) to effectively promote smoke-free healthy messages.

The Regional Teams across Australia have used sport as a mechanism to engage with Aboriginal and Torres Strait Islander communities. For example, the 'Deadly Choices' campaign was developed by the Institute of Urban Indigenous Health in Queensland and includes influential role models Sam Thaiday and Preston Campbell (Rugby League players). The 'Deadly Choices' is a campaign which aims to empower Aboriginal and Torres Strait Islander people to make healthy choices for themselves and their families – to stop smoking, to eat good food and to exercise daily. 'Deadly Choices' also encourages Aboriginal and Torres Strait Islander people to access their local health service and complete a 'Health Check' – not just to see the Doctor when they are sick but visit their health service and access support to prevent or better manage their chronic disease and remain healthy.

The Queensland Aboriginal and Islander Health Council (QAIHC)—the peak representative health body for Aboriginal Community Controlled Health Services (ACCCHS) in Queensland—has collaborated with the Arthur Beetson Foundation to provide state-wide leadership and logistical support for the Murri Rugby League carnival. The Carnival builds on the use of Rugby League role models, such as Sam Thaiday, Preston Campbell and Arthur Beetson, providing a forum for:

- the 'Deadly Choices' Campaign to assist Aboriginal and Torres Strait Islander people to make healthy choices for themselves and their families;
- to continue to promote QAIHC's 'Hero Rewards Campaign' to encourage access to local Community Controlled Health Services to complete a 'Health Check'; and
- integrating and showcasing the work of the Regional Tackling Smoking and Healthy Lifestyle Teams, promoting healthy lifestyles and wellbeing within Aboriginal and Torres Strait Islander communities.

More information about 'Deadly Choices' is at:

- 'Deadly Choices'
<http://www.deadlychoices.com.au/>
- Geelong Cats – 'Deadly Choices'
<http://www.geelongcats.com.au/catstv/tabid/7942/contentid/490129/videotabid/191/videosubtabid/193/page/9/default.aspx#playvideo>

Healthy Communities Initiative

Healthy Communities is a Commonwealth funded initiative (\$71.8 million over five years from 2009-10) under the National Partnership Agreement on Preventive Health. Grant funding is provided to 92 local government councils to implement a range of community-based healthy lifestyle programs that target disadvantaged populations and adults not in the workforce. All the participating councils are implementing various physical activity programs, with 76 councils organising activities for Aboriginal and Torres Strait Islander people in their communities.

Healthy Communities provides grants to assist six organisations that have demonstrated success in delivering community-based healthy lifestyle programs to enable them to expand nationally.

National Physical Activity Guidelines

National Physical Activity Guidelines were developed for all Australians and provide information about the types and amounts of physical activity that are beneficial across the lifespan, and tips about how to incorporate physical activity into everyday life. The Guidelines recommend that children do at least 60 minutes of moderate to vigorous physical activity every day, and adults do at least 30 minutes of moderate physical activity on most, preferably all days (DoHA 2012).

More information about the Guidelines is at:

<http://www.health.gov.au/internet/main/publishing.nsf/Content/health-pubhlth-strateg-phys-act-guidelines>.

Revised National Physical Activity Guidelines are expected to be released in early 2013.

Health Promotion activities

In 2012-13, the Australian Government through DoHA is providing funding of \$3.2 million (GST inclusive) to Vibe Australia Pty Ltd (Vibe) to develop, produce and disseminate quality health and lifestyle promotion materials for Aboriginal and Torres Strait Islander people. Sports people are regularly featured as role models. Two activities funded that link sport and health promotion are:

- *Move it Mob Style* : The primary objective of *Move it Mob Style* is to showcase popular Aboriginal and Torres Strait Islander movement that promotes health and wellbeing via music, culture and physical activity. The program aims to combat obesity, foster good eating habits and instil pride and self-esteem in Aboriginal and Torres Strait Islander young people. In 2012-13 Vibe will produce 20 x half hour *Move it Mob Style* television programs. *Move It Mob Style* has been broadcast on NITV and was launched on ABC3 on 22 March 2012.
- *Vibe 3on3®* : In 2012-13 Vibe will deliver 10 *Vibe 3on3®* events in rural and remote communities. *Vibe 3on3®* events are run in collaboration with local Aboriginal Community Controlled Health Services and focus on Aboriginal and Torres Strait Islander youth, promoting healthy, positive lifestyle choices. The event encourages sportsmanship, teaches new skills and builds self-esteem through basketball, dancing, music, health and culture.

An evaluation of the Vibe projects, including *Move it Mob Style* and *Vibe 3on3®* will be undertaken in 2012-13 to assess the benefits and outcomes of the projects for Aboriginal and Torres Strait Islander youth.

In March 2011, the Swap It Don't Stop It campaign was launched. The campaign's website has a dedicated Aboriginal and Torres Strait Islander page including materials with messages such as swapping sedentary behaviour for physical activity, and a link to the campaign's radio commercial. The webpage also outlines the Live Longer! campaign, which delivers healthy lifestyle messages (including promoting physical activity) specifically for Aboriginal and Torres Strait Islander people. Grants from the Live Longer! campaign have also been provided for locally-driven health promotion projects focused on quitting smoking, getting active, eating healthy and getting health checks. An evaluation of the Live Longer! Grants is being undertaken.

Linking youth sport programs to health initiatives

DoHA provided \$1million in funding to the Clontarf Foundation in 2011-12 through DEEWR (administrator of the Sporting Chance Program), to integrate a range of health promotion and wellbeing activities, with a focus on smoking, sexual health, drugs and alcohol, and suicide prevention, into its school-based program. The Clontarf Foundation is a not-for-profit organisation which aims to improve the health, employment, education and life skills of Indigenous Australian teenaged males, through the use of football.

Under the National Binge Drinking Strategy, the Australian National Preventive Health Agency (the ANPHA) funds The David Wirrpanda Foundation, a not-for-profit organisation, to support its 'Gwabba Yorga – Gabaa Worra' project. This project uses netball as a vehicle to engage Indigenous females aged 12-17 years to educate them about the harms of binge drinking. A key component of the project is engaging elite Indigenous netballers to be role models and have an active part in the project. Through netball clinics, carnivals and education sessions the project aims to increase participants understanding of the consequences of binge drinking, increase personal responsibility and reduce binge drinking incidents, as well as indirectly contributing to increasing physical activity levels amongst this target group.

Promoting a Healthy Australia

Promoting a Healthy Australia (the ANPHA) is committed to improving health outcomes for all Australians. In partnership with the Commonwealth and the State and Territory Governments, the Agency is driving the national capacity for change and innovation around preventive health policies and programs, in the areas of obesity, harmful alcohol consumption and tobacco.

Conclusion

As detailed in this submission, physical activity including sport contributes significantly to the health and wellbeing of Aboriginal and Torres Strait Islander peoples. It will be vital to maintain a focus on increasing the levels of physical activity among Aboriginal and Torres Strait Islander peoples, if continued improvements to Indigenous health and wellbeing are to be achieved.

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