

Active Kids Healthy Kids



Active Kids Healthy Kids BULLETIN
November 2009

From Physical Activity, Sport and
Recreation responsibility area of HPP

To support partners and stakeholders of
Active Kids Healthy Kids

*The contents of this bulletin do not necessarily represent the
position of Department of Health Promotion and Protection.
Much of the content originates from other organizations and is
included here for your reference.*

*BULLETIN Jeune actif, Jeune en bonne santé
novembre 2009*

*Du secteur de l'activité physique,
du sport et des loisirs de PPS*

*Pour appuyer les partenaires et les intervenants
d'Enfants actifs, enfants en santé*

*Le contenu du présent bulletin ne représente pas nécessairement la
position du ministère de la Promotion et de la Protection de la santé.
Il provient en bonne partie d'autres organismes et vous est fourni à
titre d'information.*

Jeune actif, Jeune en bonne santé

Nous apprécions recevoir des articles, tant en français qu'en anglais.

1. Physical Activity Practitioner Positions
2. New Developments for *Health Education / Healthy Living* in Nova Scotia
3. *Health Promoting Schools* Website Launched
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22. 2010 International Congress on Physical Activity and Public Health Announces Program
23. New Dietitians Act Introduced

Bulletins available online at
<http://www.gov.ns.ca/hpp/pasr/akhk-intro.asp>



1. PHYSICAL ACTIVITY PRACTITIONER POSITIONS

NEW ACTIVE COMMUNITIES COORDINATOR FOR HIGHLAND

The Antigonish Regional Development Authority is pleased to partner with Nova Scotia Health Promotion and Protection in welcoming **Eric Lumsden** as the **Highland Region Active Communities Coordinator**. Eric is responsible for providing support to enhance opportunities in physical activity and holds one of six positions in various regions across Nova Scotia. The Highland is comprised of **Antigonish, Guysborough and Pictou County**.

Eric Lumsden can be reached at the Nova Scotia Health Promotion and Protection office located at 149 Church Street, Suite #4 in Antigonish, by phone: 863-7395 or by email: eric.lumsden@gov.ns.ca.

MUNICIPAL PHYSICAL ACTIVITY LEADERSHIP PROGRAM (MPAL)

- **Municipality of the District of Chester** has hired **Gord Tate** as the new **Active Living and Active Transportation Coordinator** to help advance the physical activity strategy.
- The new Physical Activity Coordinator for the **Town of Kentville** is **Nicole Lutz**.

SPORT ANIMATORS

- Dustin Goodwin returns to the Tri-County Regional School Board
- Patrick Duggan returns to the Strait Regional School Board.
- The new Sport Animator for the South Shore Regional School Board is Devan Naugler.

NEW EXECUTIVE DIRECTOR AT RECREATION NOVA SCOTIA

Recreation Nova Scotia has a new Executive Director - Rhonda Limier. Most recently, she was the Executive Director for the Halifax Sexual Health Centre.

2. NEW DEVELOPMENTS FOR HEALTH EDUCATION / HEALTHY LIVING IN NOVA SCOTIA

Health Education

A new learning outcomes framework has been developed for Health Education Primary–6 and Healthy Living 7–9. It features a reduced number of outcomes at each grade level, the number ranging from 12 to 22. The new curriculum was developed using the World Health Organization’s life skills model as one of its foundational principles and identifies six health priority areas which the outcomes address—mental health; physical activity; healthy eating; sexual health; injury and disease prevention; and substance use and gambling. The new learning outcomes framework will be introduced to schools during the 2009–2010 school year.

Comments from HPP on physical activity content

The Department of Education consulted closely with several representatives from the Department of Health Promotion and Protection (HPP) and Department of Health on all subject areas. The new outcomes for physical activity are more representative of the current promising-practices and reflective of direction of physical activity stakeholders in Nova Scotia (e.g. active transportation, environments). The consultation committee attempted to integrate the health priorities where appropriate. In other words, the physical activity topic is not isolated from the other health priority areas which can be influential factors or health outcomes of physical inactivity.

Healthy Living 9

Teachers of Healthy Living 9 can expect to receive student textbooks and a teacher’s manual to support implementation of the new Healthy Living 9 course that will be introduced over the course of the year. Teachers will also receive a package of supplementary resources that complement learning and teaching in Healthy Living 9. Schools can expect to receive these distributions late fall.



3. HEALTH PROMOTING SCHOOLS WEBSITE LAUNCHED

A Health Promoting School (HPS) is one that creates a healthy setting for students and staff. It encompasses physical, social, spiritual, mental and emotional well-being. The intent is to help children and youth live healthier lives, learn and develop to their fullest potential, and to establish productive and satisfying relationships. HPS engages parents, students, educators, health providers and community to work together to create a healthy school environment.

www.nshealthpromotingschools.ca will:

- Improve internal communications to better coordinate programs and information between key partners by giving regional HPS teams, DOE, HPP and their partners.
- Provide parents and educators with links and information to promote health in their own schools, communities and homes.

Nova Scotia Health Promoting Schools is a partnership led by the Department of Education and the Department of Health Promotion and Protection, and comprising Nova Scotia’s eight school boards, the Mi’kmaq Kina’matnewey, the province’s district health authorities, and community members.



Provincial Workshop Schedule - Fall 2009

Make a move! supports healthcare providers to confidently counsel patients around physical activity. The first step in this program is a 3 hour, facilitated and interactive practitioner workshop that provides introduction to the counseling options, a robust toolkit for implementation, and practical counseling activities. **CEU/CME letter provided. All are welcome!**

Location	Date	Time	Facilitator
Yarmouth, Yarmouth Regional Hospital 60 Vancouver St. - Ruth & Irving Pink room (main floor)	Mon, Nov 16	9-12	Charlotte Frankland
Liverpool, Queens General Hospital 175 School St. - Lloyd Frellick Conference room (2 nd floor)	Tues, Nov 17	9-12	Dr. Chris Shields
Annapolis Royal, Annapolis Com. Health Centre 821 St. George Street - Education room, lower level	Thurs, Nov 19	9-12	Dr. Chris Shields
Lower Sackville, Cobequid Health Centre 40 Freer Lane – Room 2018	Wed, Nov 4	9-12	Suzanne Ferrier
Truro, Colchester Regional Hospital 207 Willow St. - Conference room	Thurs, Oct 29	9-12	Fran Dunn
Springhill, All Saints Springhill Memorial 10 Princess Street – Boardroom	Thurs, Nov 19	1-4:00	Suzanne Ferrier
New Glasgow, Aberdeen Hospital 835 East River Road – Boardroom	Fri, Nov 6	9-12	Dr. Angie Thompson
Antigonish, Martha's Centre 23 Bay St. – Room 404 (4 th floor)	Mon, Nov 23	1 :30 – 4 :30	Dr. Angie Thompson
Sydney, Cape Breton Regional Hospital 1482 George St.- Conference room 3624	Tues, Nov 10	9-12	Dr. John Hudec

Follow up meeting Monday, December 7th from 3-4:30pm. Everyone linked via Telehealth.

√ Workshops can be arranged outside of this schedule, at your site.

For more information or to register, contact Fran Dunn, Program Coordinator
phone: (902) 423-7682 x 316 e-mail: fdunn@heartandstroke.ns.ca

Make a move! is an initiative led by the Heart and Stroke Foundation of Nova Scotia in partnership with Nova Scotia Health Promotion and Protection and Cancer Care Nova Scotia.

5. ONLINE PRESENTATION: POLICY AND BUILT ENVIRONMENT

CHNET-Works is a networking venue dedicated to bringing together community health professionals from across Canada which holds regular **online presentations** called Fireside Chat.

Understanding policy implications of built environment research and healthy lifestyle choices

Friday, November 27, 2009, 2:00 - 3:30 PM (Atlantic Time)

Partners: Centre for Urban Health Initiatives, Heart and Stroke Foundation of Canada
Wendy Young PhD, Centre for Urban Health Initiatives (CUHI).
Paul Gorczynski, PhD candidate, Department of Exercise Sciences, University of Toronto.
Stephen Samis, Director, Health Policy at Heart and Stroke Foundation of Canada

To register or download past presentations go to: www.chnet-works.ca

6. TAKING ACTION LOCALLY TO INCREASE GIRLS' PARTICIPATION



On the Move is a national initiative, from Canadian Association for the Advancement of Women in Sport and Physical Activity (CAAWS), to increase opportunities for inactive girls and young women (ages 9-18) to participate in sport and physical activity. On the Move influences change in the sport and active living, health, education, and social service sectors to increase gender equity.

On the Move Workshops are half-day, interactive, issue-based sessions that provide an overview of the initiative, share best practices from across Canada, and provide "how-to" tips to increase the participation of girls and young women.

Opportunity 1: Become an On the Move workshop Facilitator

Application Deadline: Monday November 30, 2009 5:00pm EST

CAAWS is looking for twelve keen women from across Canada who would like to become On the Move workshop facilitators. Visit www.caaws.ca/onthemove

Opportunity 2: Cohost On the Move Workshop

Submission Deadline: December 11, 2009

CAAWS is currently looking for communities interested in co-hosting On the Move workshops between January and March, 2010. Appropriate for everyone from practitioners to policy makers, the workshops also provide an opportunity for participants to network and discuss collaboration and local action to make a difference in the lives of girls and young women in their community. Aboriginal communities interested in an On the Move workshop that highlights CAAWS's Team Spirit: Aboriginal Girls in Sport and Aboriginal Girls On the Move projects are also encouraged to apply.

Workshop expenses (e.g. facilitator costs, facility rental, refreshments) will be paid/reimbursed by CAAWS.

For information about the workshop and submitting a Letter of Interest visit

<http://caaws.ca/onthemove/e/workshops/index.htm>

Ateliers *En mouvement!* - Demande de collaboration de communautés hôtes

Date limite de proposition : le 11 décembre 2009

Grâce à un financement de l'Agence de la santé publique du Canada (ASPC), l'ACAFS offrira des ateliers *En mouvement!* à travers le Canada entre janvier et mars 2010. Les ateliers offrent aux participantes la possibilité d'étendre leur réseau et de discuter de collaboration et d'actions locales dans le but de faire la différence dans la vie des filles et des jeunes femmes de leur collectivité. Les communautés autochtones qui mettent l'accent sur les projets *Esprit d'équipe : les filles autochtones engagées dans le sport* et *Les filles autochtones En mouvement!* de l'ACAFS qui sont intéressées à l'atelier *En mouvement!* sont également incitées à faire une demande.

Si la co-présentation d'un atelier *En mouvement!* dans votre communauté vous intéresse, veuillez consulter notre site Web

<http://www.caaws.ca/onthemove/f/ateliers/index.htm>

pour télécharger l'information sur la présentation d'une lettre d'intérêt.

7. A FEW MINUTES OF YOUR TIME CAN HELP BUILD AN AFTER-SCHOOL RESOURCE



Physical & Health Education Canada (PHE Canada) is undertaking a scan of current after-school programs at the community level that contain a healthy living (physical activity/nutrition) component along with after-school initiatives that may not presently but could potentially incorporate a healthy living component in their programming. If your organization is running an after-school program that fits this description it would be greatly appreciated if you could take a moment to fill out the scan by clicking on the link below. This information will be very useful for the planning of resources and Federal/Provincial and Territorial governments will also be looking at the results of this scan to inform potential planning around physical activity promotion in the after-school time period.

Please share with your story by **November 18**.

ENGLISH SURVEY: http://www.surveymonkey.com/s.aspx?sm=5HPENJsH2IA3vjz2gbdX8w_3d_3d

FRENCH SURVEY: http://www.surveymonkey.com/s.aspx?sm=83j6f_2bIVf83VJadKF_2fz02g_3d_3d

8. THE DANCEOFF - FREE STYLE, HIP HOP COMPETITION



The 4th Annual Danceoff for all Atlantic Canadians is on Saturday, November 14 at the Halifax Citadel Hotel on 1960 Brunswick Street beginning at 8 am!

Open to all ages 4-12, 13-18 and 19 and over! No dance experience necessary. Enter as a group or individual.

www.thedanceoff.ca info@thedanceoff.ca 902.225.9267

9. EVER WONDER WHAT PARTICIPACTION IS UP TO?



Parent resource <http://www.participaction.com/en-us/GettingActive/InspiringKids.aspx#>

Dear Friend of ParticipACTION,

I'm thrilled to invite you to visit our **first digital, interactive ParticipACTION annual report**. As one of our valuable partners, we encourage you to celebrate our successes as your own.

Working together with you, our dedicated and passionate partners, ParticipACTION's voice continues to grow stronger. The important programs we have launched in the past year are helping us move forward towards addressing the physical inactivity crisis in Canada.

We hope you'll find our new format forward-thinking, too. The report gives you all the features of a traditional annual report, with some new features:

- **Audio interviews** with ParticipACTION leaders
- Dynamic **videos and visuals** from our 2009 programs
- Plus, the report is easy to download, navigate and share

We thank you for the ongoing support that you provide ParticipACTION. Together, we can realize a healthier, more active Canada.

Warmest,

Kelly D. Murumets
President and CEO

Chers amis de ParticipACTION,

Je suis ravie de vous inviter à consulter **le premier rapport annuel numérisé et interactif de ParticipACTION**. En tant qu'un de nos précieux partenaires, nous vous encourageons à partager nos succès.

En travaillant de concert avec vous, partenaires passionnés et dévoués, l'importance de ParticipACTION comme porte-parole se consolide. Les programmes importants que nous avons mis sur pied au cours de la dernière année nous aident à aller de l'avant en abordant la crise de l'inactivité physique au Canada.

Nous espérons que vous trouverez notre nouveau format tout aussi orienté vers l'avant. Le rapport contient toutes les rubriques d'un rapport annuel traditionnel, avec quelques nouveautés :

- Des **entrevues audio** avec les leaders de ParticipACTION
- Des **vidéos et des images dynamiques** de nos programmes 2009
- En plus d'être facile à télécharger, le rapport permet une navigation et un partage faciles

Nous vous remercions de votre appui continu à la promotion de ParticipACTION. Ensemble, nous pouvons bâtir un Canada plus sain et plus actif.

Sincères salutations,

Kelly D. Murumets
Présidente et chef de la direction

10. NOVA SCOTIA IS REPRESENTED ON PARTICIPACTION'S ADVISORY GROUPS

A very important aspect of ParticipACTION's mandate is to work in partnership with key individuals and organizations in the sector. Through its strategic planning process, ParticipACTION has restructured its committees and has created three **new Advisory Groups**, focused on Research, Marketing Communications and Policy and Capacity Building. The Advisory Groups include recognized leaders in the sport, physical activity, education and health promotion sectors, as well as federal and provincial/territorial government representatives.



Policy And Capacity Building Advisory Group

Farida Gabbani – Chair **Department of Health Promotion and Protection, Government of Nova Scotia**
Michelle Brownrigg Active Healthy Kids Canada
Rick Curtis Alberta Recreation and Parks Association
Judith Down Alberta Centre for Active Living
Jason Dunkerley Active Living Alliance for Canadians with a Disability
Andrea Grantham PHE Canada
Don LeClair Coalition for Active Living
Karin Lofstrom Canadian Association for the Advancement of Women and Sport and Physical Activity (CAAWS)
Pierre Morin Gestion Animation Loisir / Alliance québécoise du loisir public
Joanne Mortimore Athletics Canada
Geoff Ray NWT Recreation and Parks Association
Sandra Roach Department of Canadian Heritage
Dr. Art Salmon Ministry of Health Promotion, Government of Ontario

Marketing Communications Advisory Group

Mark Jones – Chair Department of Tourism, Culture and Recreation, Government of Newfoundland and Labrador
Jennifer Cowie-Bonne Ophea (Ontario Physical and Health Education Association)
Carol Davies Boys and Girls Clubs of Canada
Bev Deeth Concerned Children's Advertisers
Cathie Kryzanowski Saskatchewan in motion
Ellen Malcolmson Canadian Diabetes Association
Paul Melia True Sport Foundation
Nancy Dubois The Health Communication Unit, University of Toronto
Eileen Melnick McCarthy Heart and Stroke Foundation of Canada
Natasha Warren **Department of Health Promotion and Protection, Government of Nova Scotia**
Lisa Stevens ActNow BC
Shirley Paquette Ministry of Health Promotion, Government of Ontario

Research Advisory Group

Dr. Mark Tremblay – Chair Children's Hospital of Eastern Ontario (CHEO) Research Institute / University of Ottawa
Dr. Adrian Bauman (Honorary) University of Sydney (Australia)
Dr. Tanya Berry University of Alberta
Cora Craig Canadian Fitness and Lifestyle Research Institute (CFLRI)
Dr. Guy Faulkner University of Toronto
Dr. Gaston Godin Laval University
Dr. Amy Latimer Queen's University
Dr. Ryan Rhodes University of Victoria
Dr. John C. Spence University of Alberta

11. INJURY PREVENTION IN CHILDREN'S OUTDOOR ACTIVITIES



Injury Prevention in Children's Outdoor Activities is the November issue of ParticipACTION's and Canadian Fitness and Lifestyle Research Institute's of their fact sheets.

The Research File (mainly for leaders / practitioners)

http://www.participaction.com/ecms.ashx/InactivityCrisis/ResearchFile_November1_EN.pdf

Lifestyle Tips (mainly for public)

http://www.participaction.com/ecms.ashx/GettingActive/LifestyleTips_November1_EN.pdf

12. NEW TV AD CELEBRATES TWO REAL-LIFE CANADIANS WHO ARE GETTING ACTIVE IN HALIFAX!



Coworkers **Matt Whitman and Theresa Babin, from Halifax, Nova Scotia**, have been selected by ParticipACTION to share their personal story about getting physically active, so they can inspire others to do the same. Their story, about making a commitment to **"never take the elevator again" at work**, was turned into a 30-second television commercial that will begin **airing across Canada** on November 2.

Matt and Theresa submitted their story by recording a video at ParticipACTION's mobile Inspiration Booth, which visited Halifax in the summer of 2009 as part of the cross-country ParticipACTION Sun Life - Inspire the nation tour. Their story was selected out of almost 2000 stories collected through the tour and posted directly to our online Wall of Inspiration.



We launched our *Get Inspired. Get Moving.* campaign in November, 2008, with television commercials featuring Canadian icons including Donovan Bailey, Mary Walsh, Pierre Boivin and Bruny Surin. The icons called on all Canadians to share their stories about getting more active so they could inspire fellow Canadians to do the same.

To view the new television ad featuring Matt and Theresa, visit www.participaction.com, select "What's New" and then [Media Room](#).

13. LEARNINGS FROM A CITY TRANSFORMED INTO A CYCLING-FRIENDLY PLACE

On October 22, the **City Bicycle Coordinator** for Portland, Oregon - Roger Geller – spoke to various groups in Halifax about Portland's success **transforming it into a cycling-friendly city**. The US Consulate General toured the speaker sessions in Toronto, Ottawa and Halifax.

Councillor Linda Mosher, Chair of Halifax Regional Municipality's Active Transportation Advisory Committee hosted a session for councillors and municipal and provincial staff. Also Dalhousie's Department of Planning and the Halifax Cycling Coalition hosted separate sessions. Geller appeared on Breakfast Television.

Here are highlights from the Geller's session:

- Portland (population: 500,000)
- In 15 years, Portland went from <90 miles to 300 miles of bicycle routes in 15 years (includes routes on 5 of 10 bridges)
- Cycle trips tracked at a bridge from 2000+ trips to 16,000+ trips.
- 2001-2008 Bridge traffic: 19% increase in bicycles; only 1% increase in automobiles
- What it took/takes to make the changes:
 - Small and steady changes (start where you can have success)
 - Political support
 - Business support (at least minimal resistance)
 - e.g. There are 33 bicycle "corrals" (parking) on former vehicle street parking spots in front of shops and storefronts. Business owners like these because it eliminates smoke of idling cars, maximizes visibility of the storefront, increases curb appeal by attracting more people which maintains or increases local spending. Businesses are now asking the city for them. There are 55 locations on a waiting list.
 - Unprecedented media attention (editorial boards moved from skeptical to supportive)
 - Good measurements (data, evaluation)
 - Policies
 - Funding
 - Advocacy
 - Technical Professionals => Good design => Good infrastructure
- How Portland won over skeptics
 - There's now better data on state of health and the health outcomes of communities supportive of active transportation
 - Demonstrated economic benefits (local spending) thriving commercial districts
 - Tourism (positive image)
 - Environment outcomes
- How Portland won over more public to participate:
 - Good Infrastructure with real and perceived safety
 - Appeal to the average person (incl. children and older adults) – most need comfort, safety and convenience to decide to cycle.

- Encouragement through annual rides (4000), parkway Sundays, commuter challenge, visibility campaign (an NGO hands out free night lights)
- Enforcement (police hand out brochures and monitor intersections)
- Amsterdam's principles for town design to support cycling;

Comfort	Safety	Attractiveness	Direct and connected routes
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- Policies for future growth
 - New development areas must be a "20 minute neighbourhood" – can cycle to major amenities/services within 20 minutes.
 - Portland will grow by 1 million more people in next two decades: The transport plan will not be designed to accommodate cars for this million.

Roger has been Portland, Oregon's Bicycle Coordinator since 2000 and with the city's Bicycle Program since 1994. He has 15 years of experience managing bicycle capital, planning and policy projects. During this time he has contributed to the implementation of hundreds of miles of bikeways, the introduction of many innovations to Portland's streets and planning vocabulary and to the successful evaluation of their effect. His position requires an in-depth knowledge of design, policy, planning and maintenance relating to bikeways. Roger has a B.S. in Chemistry and M.A. in Urban and Environmental Policy, both from Tufts University. He has taught numerous classes, workshops and seminars in bikeway planning, policy and design and has presented often at national and local conferences. He is currently serving on the advisory board for Portland State University's Initiative for Bicycle and Pedestrian Innovation.



14. THE REAL COST OF SCHOOL SITING



Presenters: Matthew Dalbey, U.S. EPA & Renee Kuhlman, National Trust for Historic Preservation

At last count, 35% of K-8 students lived within 2 miles of their school. Because eligible Safe Routes to School infrastructure projects are limited to a 2 miles radius of participating elementary and middle schools, nearly two-thirds of America's children are only able to access their schools by automobile or bus.

Despite a growing awareness, existing community-centered schools continue to be threatened with abandonment and new schools continue to be built far from the residents they serve. Learn about the policy and practices that affect these decisions and how you can be part of the solution.

This webinar is part of the Safe Routes to School Coaching Action Network Webinar Series, developed by America Walks and the National Center for Safe Routes to School. For more information please contact Michelle Gulley, at mgulley@americawalks.org

Free and available to Canadians. Register here: <https://www1.gotomeeting.com/register/511729896>

15. BRINGING HEALTH TO THE PLANNING TABLE

The Healthy Living Issue Group of the Pan-Canadian Public Health Network has released the report, *Bringing Health to the Planning Table: A Profile of Promising Practices in Canada and Abroad*.

The report profiles case studies within 13 Canadian communities from across Canada where collaborative approaches to improve health outcomes have been a key consideration in planning decisions related to the built environment. This approach was chosen so that the successes (and lessons learned) of a variety of different projects could be shared with other communities. With one case study from each province and territory it provides a pan-Canadian perspective.

There is ample evidence proving that declining physical activity levels, together with limited access to healthy food, contribute to the rising incidence of chronic disease in Canada. A key determining factor to promote physical activity and prevent obesity is the built environment - that is, the buildings, parks, schools, road systems, and other infrastructure that we encounter in our daily lives. Urban planning decisions can advance or hamper health goals. However, as with any complex issue, progress will require inter-sectoral action. This means that planners and health officials need to work together to strengthen the health promoting features of land use and community planning.

NS: Spryfield Healthy Housing, Healthy Community Project

NB: Fredericton Active Transportation Committee

PEI: Charlottetown Active Transportation Initiative

<http://www.phac-aspc.gc.ca/hl-vs-strat/index-fra.php>

15. AMENER LA SANTÉ À LA TABLE DE PLANIFICATION

Le Groupe des modes de vie sains du Réseau pancanadien de santé publique vous présente le rapport intitulé *Amener la Santé à la Table de Planification : Un Profil des Pratiques Prometteuses du Canada et de l'Étranger*.

Ce rapport établit le profil d'études de cas au sein de 13 communautés de partout au Canada et où les efforts de collaboration visant à améliorer les résultats en matière de santé ont été un élément essentiel pour la planification des décisions liées au milieu créé. Cette approche a été choisie afin que les succès (et les leçons tirées) d'un éventail de projets puissent être communiqués à d'autres communautés. En présentant une étude de cas de chaque province et territoire, le rapport présente un point de vue pancanadien.

Il y a amplement de preuves qu'une diminution des niveaux d'activité physique et qu'un accès limité à des aliments sains contribuent à l'incidence accrue de maladie chronique au Canada. Un principal facteur déterminant pour promouvoir l'activité physique et prévenir l'obésité est l'environnement bâti - c'est-à-dire, les immeubles, les parcs, les écoles, les réseaux routiers et d'autres infrastructures que nous rencontrons dans notre vie quotidienne. Les décisions en matière d'urbanisme peuvent faire avancer ou entraver les buts en matière de santé. Toutefois, comme avec toute question complexe, les progrès nécessiteront une intervention intersectorielle, ce qui signifie que les planificateurs et les représentants de la santé doivent travailler ensemble pour renforcer les caractéristiques favorisant la santé de la planification de l'utilisation des terres et de l'urbanisme.

N-É: Logements sains, projet de communauté en santé

NB: Comité sur le transport actif de Fredericton

ÎPÉ: Charlottetown Active Transportation Initiative

<http://www.phac-aspc.gc.ca/hl-vs-strat/index-fra.php>

16. DO LIFESTYLE BEHAVIOURS DIFFER BETWEEN OVERWEIGHT & NON-OVERWEIGHT GIRLS AND BOYS?

Comparing Activity and Fruit and Vegetable Consumption by Weight Status among Children and Youth

October 8, 2009—The most significant behavioural difference between overweight and non-overweight Canadian boys between age 6 and 17 appears to be the amount of time they spend in front of a television, video or computer screen. However, a new study from the Canadian Institute for Health Information (CIHI) found that this does not apply to teenage girls. Instead, the main difference between overweight and non-overweight girls between age 12 and 17 is the daily consumption of fruit and vegetables.

The study, *Comparing Activity and Fruit and Vegetable Consumption by Weight Status Among Children and Youth*, is based on survey data from Statistics Canada¹ and compares lifestyle behaviours between overweight and non-overweight children (age 6 to 11) and youth (age 12 to 17). The behaviours examined in the study include screen time activities, fruit and vegetable consumption and physical activity.

“Over the past two decades, the proportion of overweight children and youth has grown tremendously in Canada, by more than 70%,” says Lisa Corscadden, Senior Analyst with CIHI’s Canadian Population Health Initiative and lead author of the study. “Our study examines how lifestyle behaviours between weight groups differ by age, as well as by sex. This is important to note when tailoring exercise and lifestyle programs for children and youth.”

Screen time most significant behavioural difference for grade school children and male youth

CIHI’s study found that overweight children between age 6 and 11, regardless of sex, were much more likely to report high levels of screen time than their non-overweight peers. According to the study, 48% of overweight children in this age group reported spending at least two hours a day in front of a television, video or computer screen, compared to 31% of their non-overweight peers. This difference was particularly pronounced among boys age 6 to 11, with more than half (52%) of overweight boys spending more than two hours of their spare time each day in front of a screen, compared to only 32% of their non-overweight peers.

Among male youth between age 12 and 17, the screen time percentages jumped to three out of four (75%) overweight boys spending two hours or more per day in front of a screen versus two out of three (67%) of their non-overweight peers.

“The amount of time spent in front of a television, video or computer screen emerged as the most significant behavioural difference between overweight and non-overweight children and male youth observed in our study,” explains Jean Harvey, Director of CIHI’s Canadian Population Health Initiative.

“This is important for parents and educators to keep in mind as cooler weather sets in and young children spend more time indoors. Screen time, after all, is sedentary time—and our study shows a definite link between a child’s weight and so-called ‘couch potato’ behaviour.”

Fruit and vegetable consumption differs between weight groups in female youth

The study also found fruit and vegetable consumption did not differ by weight group among children, with 40% of both overweight and non-overweight boys and girls reporting eating fruit and vegetables five times

or more daily. However, the study did not look at differences in other eating habits, such as the consumption of food of low nutritional value.

Sedentary behaviour more closely linked to weight status than reported physical activity

In this study, physical activity did not appear to differ by weight status of any group, with both overweight and non-overweight children and youth reporting very similar levels of daily physical activity. More than 80% of both overweight and non-overweight girls and boys age 6 to 11 had at least one hour or more a day of activity between in-school and extra-curricular activities. For 12-to-17-year-olds, physical activity levels dropped off, with roughly one out of three girls and one out of two boys engaging in physical activity for at least one hour a day—which applied equally for both overweight and non-overweight groups.

“The health benefits of increased physical activity among children and youth are unequivocal, regardless of their association with body weight or weight loss. Increased physical activity and decreased screen time are both effective, health-promoting strategies,” says Mark Tremblay, Chief Scientific Officer for Active Healthy Kids Canada and research scientist at the Children’s Hospital of Eastern Ontario. “Some studies informed by self-reported data fail to demonstrate significant benefits of physical activity. However, studies using more direct measures of physical activity typically show positive effects and reinforce the wisdom of establishing healthy active living behaviours as early in life as possible.”

For the 19-page report: http://secure.cihi.ca/cihiweb/dispPage.jsp?cw_page=media_20091008_e

17. 1 IN 5 TEENS HAVE HEART DISEASE RISK

Excerpt from Globe and Mail, André Picard, Public Health Reporter:

One in five adolescents aged 14 to 15 now has high blood pressure or high cholesterol or both and that could be putting them on the fast track to heart disease, new research shows.

“This study is further evidence of an accelerating decline in the heart health of Canada’s teens,” said Brian McCrindle, a cardiologist at the Hospital for Sick Children in Toronto. “Children just shouldn’t have these problems.”

Dr. McCrindle said children and adolescents are developing risk factors for heart disease because they are increasingly overweight and inactive, and because many have poor dietary habits.

“We know the causes but now we have to work on getting them to change behaviours,” he said.

The research, presented yesterday at the Canadian Cardiovascular Congress in Edmonton, involved 20,719 Grade 9 students in the Niagara region of Ontario, who have been tracked since 2002.

Researchers found that, in 2008, 17 per cent of the students had high blood pressure, 16 per cent had elevated cholesterol levels and 30 per cent were either overweight or obese.

View complete article:

<http://www.theglobeandmail.com/life/health/1-in-5-teens-at-risk-for-heart-disease-study/article1340789/>

18. WHERE YOU LIVE AFFECTS YOUR CHANCE OF OBESITY

New study finds people in areas that support more physical activity are 38 per cent less likely to develop Type 2 diabetes - Globe and Mail, Oct 13, 2009, Leslie Beck

If you want to know your risk of developing Type 2 diabetes, you're better off walking through your neighbourhood than looking inside your fridge.

A study published yesterday in the Archives of Internal Medicine found that people who live in neighbourhoods that support physical activity and healthy diets were 38 per cent less likely to get the disease than their counterparts who reside in unsupportive environments.

For the complete Globe and Mail article: <http://www.theglobeandmail.com/news/opinions/columnists/leslie-beck>

Highlights from the article:

- After five years of follow up, 233 of the 2,285 adult participants (aged 45 to 84 years) were diagnosed with Type 2 diabetes. Those who lived in a neighbourhood with the highest score for physical activity and healthy foods were 38 per cent less likely to develop Type 2 diabetes than those who lived in an area that scored poorly - even after accounting for socioeconomic factors as well as diet and exercise habits, family history of diabetes and alcohol intake.
- The University of Alberta suggested that your "Retail Food Environment Index" (RFEI) is a good predictor of whether you will end up obese. The study revealed that among 2,900 Edmonton residents, the odds of being obese was significantly lower if they lived in an area with the lowest RFEI (below 3), and greater if in a neighbourhood with a RFEI of 5 or higher.
- Researchers from the University of Utah also found that residents of Salt Lake City who lived in neighbourhoods built before 1950 were leaner than people who lived in more modern communities.

19. LONG DAY AT THE OFFICE CAN KILL WILL TO EXERCISE, DIET: STUDY

FROM CANADA.COM:

If you find yourself lacking the motivation swim laps at the pool after an especially stressful day at the office, you're not alone, say researchers at McMaster University in Hamilton.

<http://www.canada.com/health/Long+office+kill+will+exercise+diet+study/2038269/story.html>

20. WILLPOWER IS A MUSCLE: USE IT OR LOSE IT

FROM THE GLOBE AND MAIL:

Didn't feel like working out today? A new study suggests that doing one task that depletes your self-control can make it difficult to sum up the willpower to do another - such as exercise

<http://www.theglobeandmail.com/life/health/willpower-is-a-muscle-use-it-or-lose-it/article1300277/>

21. NEW REPORT ON THE INTEGRATED PAN-CANADIAN HEALTHY LIVING STRATEGY (2007)

The report is now posted on the Public Health Agency of Canada's website.

English
Français

<http://www.phac-aspc.gc.ca/hl-vs-strat/index-eng.php>
<http://www.phac-aspc.gc.ca/hl-vs-strat/index-fra.php>

The Healthy Living Strategy provides a conceptual framework for sustained action. The goals of the Strategy are to improve overall health outcomes and to reduce health disparities. Grounded in a population health approach, the initial emphasis is on healthy eating, physical activity, and their relationship to healthy weights.

Included in the Strategy are pan-Canadian healthy living targets - which seek to obtain a 20% increase in the proportion of Canadians who are physically active, eat healthy and are at healthy body weights. While ambitious, these targets can be achieved through collaborative action and will serve to sustain momentum from the 10 percentage point, year 2010 physical activity target set by Ministers responsible and for Physical Activity, Recreation and Sport in 2003.

While the Healthy Living goals and targets provide a standard reference point for all sectors to measure the success of their own strategies and interventions, to be successful, coordinated effort is required. Proposed action has developed through intersectoral working groups, and will be considered in the implementation of the Strategy.

The Strategy is a means to ensure greater alignment, coordination and direction for all sectors. The intersectoral nature of the Healthy Living Strategy also provides a national context and reference point for all sectors, governments and Aboriginal organizations to measure success of their own strategies and interventions.

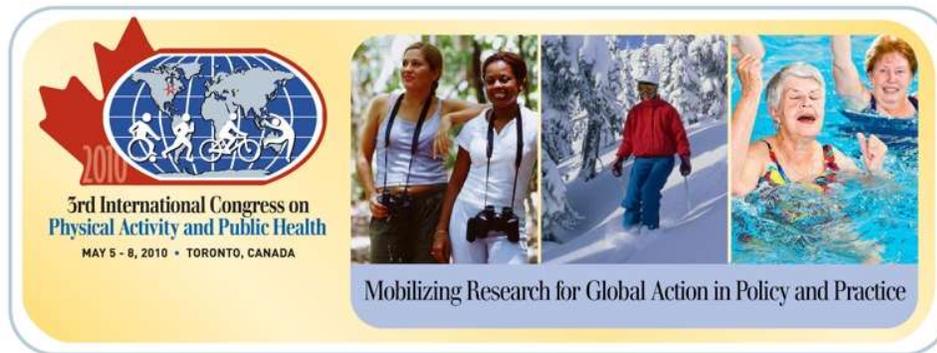
Physical Activity

In 2003, F/P/T governments in Canada (except Quebec) set a joint physical activity target to increase levels of regular physical activity among Canadians aged 20 and older by 10 percentage points by 2010. However, in recognition of the need for sustained effort over a longer period, the HLS set a target in 2005 to increase by 20% the proportion of Canadians aged 18 and older who engage in regular physical activity by 2015.

Data to evaluate the achievement of this target are taken from the 2005 Canadian Community Health Survey (CCHS), which classified respondents as "active," "moderately active" or "inactive," based on their self-reported leisure-time pursuits the previous three months. Classifications are:

- active = walking 1 hr/day or jogging 20 mins
- moderately active = walking 30 to 60 mins/day or a exercise class 1 hr/3 times/wk
- inactive = walking less than 30 mins/day

25% of Canadians aged 18 and older were active in their leisure time, and an additional 25% were moderately active. Combined, 50% of Canadians aged 18 years and older reported that they were at least moderately active in 2005. More men (52%) than women (48%) said they were active or moderately active in 2005. A 20% increase would mean that 60% of Canadians aged 18 and older would be accumulating at least 30 minutes a day of moderate physical activity by 2015.



2010 International Congress on Physical Activity and Public Health Announces 28 Symposia Topics and 5 Pre-Congress Workshops

The listing of 28 symposia and major speakers and pre-congress workshops for the 2010 International Congress on Physical Activity and Public Health is now available at www.icpaph2010.org (select Advance Program from left menu)

May 5-8, 2010 Toronto Congress

Registration is now open and will be limited to 1,200 delegates.

23. NEW DIETITIANS ACT INTRODUCED

A new dietitians act introduced today, October 21, will update the licensing process, define the profession's role and responsibilities, and help ensure the public's interest is protected through establishment of a new professional college.

"The former Professional Dietitians Act has remained substantially unchanged since 1990 and needs to be replaced by modern legislation that serves the public interest," said Health Minister Maureen MacDonald.

The new act will define the scope of practice of dietitians and address standards of practice. It will require all practitioners to be licensed, unlike the previous act.

It will also establish the Nova Scotia College of Dietitians and Nutritionists whose primary responsibility will be to serve and protect the public interest. The board of the college will include public members.

The new act is supported by the Nova Scotia Dietetic Association whose membership approved a draft of the act at their May 2009 annual general meeting.

"Our members are pleased with the new act which will give us legislation similar to other health professions in Nova Scotia," said Jennifer Hutchinson, president of the Nova Scotia Dietetic Association. "This act will enable licensed nutritionists and dietitians to practice to their full scope of practice which will be of benefit to their patients."