

**INQUIRY INTO INQUIRY INTO CHILDHOOD
OVERWEIGHT AND OBESITY**

Organisation: Bicycle Network

Date received: 25 August 2016



BICYCLE
NETWORK

23 August 2016

The Hon Bronnie Taylor MLC
Chair of the Standing Committee on Social Issues

NSW Upper House Inquiry into childhood overweight and obesity

Bicycle Network submission

1. Executive Summary: State Government to re-think it's strategy to increase physical activity levels in children

This inquiry is an important intervention and opportunity to develop new policy, funding and legislative measures to address the issue of childhood overweight and obesity in New South Wales. The terms of reference of the inquiry acknowledge the importance of physical activity in relation to the issue, however, they do not refer to the significant impact the normalisation of active travel behaviours for children can make.

With 80% of Australian children and 60% of adults not getting the recommended amount of physical activity (costing Australia \$13.8 billion in health and associated costs), Australian governments must urgently reconsider their strategies for dealing with this issue.

Bicycle Network recommend that the NSW State Government devise new strategies to increase levels of physical inactivity, with a focus on normalising active transport. Recommendations are:

1. Fund a preventative health program that targets physical inactivity in children
2. Fund separated bike infrastructure
3. Legislate to reduce speeds to 30km/h around school zones
4. Increase the legal age to ride on footpaths to 16



2. Background

Bicycle Network welcomes the opportunity to provide comment on the Standing Committee on Social Issues Inquiry into childhood overweight and obesity.

Bicycle Network is Australia's largest bicycle member group, representing more than 50,000 people across the country, including New South Wales. Our mission is to tackle the health problems associated with physical inactivity by creating a nation of bike riders.

Our behaviour change program targeted at children, Ride2School, has now been successfully implemented in 2,500 schools across three states, helping 66,000 children increase their physical activity every day. Schools participating in the Ride2School program record an average active travel rate of 55%, a significant increase on the national average of 25%.

As the results of the Ride2School program demonstrate, behaviour change programs are one of the most cost-effective preventative health measures Governments can support when it comes to preventing childhood obesity.

The following submission outlines a number of key issues and recommendations to tackle childhood overweight and obesity.

3. Key issues

3.1 80% of Australian children are physically inactive¹

The Australian Department of Health recommends that 'children aged 5–12 years should accumulate at least 60 minutes of moderate to vigorous intensity physical activity every day.'² Currently, more than 80% of children are physically inactive. How to ensure children attain this minimum level of activity in an increasingly time-pressured society is a challenge for parents, teachers and policy makers.

Governments need to 'encourage, support and facilitate the incorporation of more physical activity throughout...everyday activities such as using active transport to and from school, sporting commitments or social engagements.'³

The reference to physical activity in this inquiry's terms of reference is critical to the issue of obesity in children, given the proven link between regular exercise and

¹ Active Healthy Kids Australia (2014) 2014 Report Card on Physical Activity for Children and Young People: Is Sport Enough? Available at https://heartfoundation.org.au/images/uploads/publications/ahka_reportcard_longform.pdf

² Australian Government Department of Health (2014), Australia's Physical Activity and Sedentary Guidelines available: <http://www.health.gov.au/internet/main/publishing.nsf/content/health-pubhlth-strateg-phys-act-guidelines#apa512>

³ Active Healthy Kids Australia (2014) n1



combatting obesity⁴. However, the terms of reference make a serious omission by failing to mention active travel.

3.2 Physical inactivity is costing Australians up to \$13.8 billion per year

Lack of physical activity represents a huge annual economic cost to the nation. A recent global study estimated the cost of physical activity in 2014 to be \$805 million including \$640 million in direct costs (healthcare expenditure) and \$165 million in indirect costs (loss of productivity).⁵ When calculations are broadened to include the mortality cost of people passing away prematurely, the cost jumps to a staggering \$13.8 billion annually⁶, with one study estimating that over 16,000 people die prematurely due to conditions and diseases attributable to physical inactivity⁷.

Regular participation in physical activity has been proven to not only reduce the chance of overweight and obesity but also to reduce the risk of physical health problems such as cardiovascular disease and stroke, type 2 diabetes, hypertension, some cancers and osteoporosis.⁸ In children, physical activity has a role to play in brain development, physical fitness (cardio and muscular strength), reduced body fat, favourable cardiovascular and metabolic disease risk profiles, enhanced bone health, and reduced symptoms of depression.⁹

3.3 Organised sport is not enough to overcome the issue

In their 2014 report card on Physical Activity for Children and Young People¹⁰ the Heart Foundation asks “Is sport enough? If we look at overall physical activity levels as well as physical fitness and obesity levels, then the answer is clearly no.” While some children may participate in up to three hours per week of organised sport, these hours include time listening, socialising and learning, and do not equate to actual time spent undertaking physical activity. Participation in organised sport can also depend on parents’ or carers’ ability to transport children to venues and training facilities, whereas normalising active travel behaviours increases children’s independent mobility, taking pressure off time-poor parents and increasing children’s independence.

Behaviour change programs such as the Ride2School Program work closely with school communities to unpack the perceived and actual barriers to riding and walking

⁴ Lewis, S. Hennekens, C. (2016) *Regular Physical Activity: A ‘Magic Bullet’ for the Pandemics of Obesity and Cardiovascular Disease* 134(3) *Cardiology* 360 available at <http://www.ncbi.nlm.nih.gov/pubmed/27082238>

⁵ Ding, D. et al (2016) *The economic burden of physical inactivity: a global analysis of major non-communicable diseases* *The Lancet*

⁶ Medibank (2008), *The Cost of Physical Inactivity*, Medibank Private, Sydney, http://www.medibank.com.au/Client/Documents/Pdfs/The_Cost_Of_Physical_Inactivity_08.pdf

⁷ *ibid*

⁸ World Health Organisation (2010) *Global recommendations on physical activity for health*

⁹ Australian Medical Association, *Position Statement on Physical Activity* (2014) available at https://ama.com.au/position-statement/physical-activity-2014#Anchor_4

¹⁰ Active Healthy Kids Australia (2014), *above n1*.



to school. The program supports school communities to increase active travel rates and develop sustainable active travel cultures by implementing tailored interventions specific to the barriers. The end result is that active travel behaviours become the norm, children develop the skills to continue active travel behaviours throughout their lives, and children have an increased likelihood of attaining the recommended 60 minutes of physical activity per day.

3.4 Active transport can be critical to elevating and sustaining higher physical activity levels

Active transport and programs that encourage a reduction in sedentary transport modes will reduce childhood overweight and obesity in New South Wales.

As the terms of reference of this inquiry make clear, increasing physical activity for children is critical to combatting childhood overweight and obesity. Active transport has been shown to be negatively correlated with childhood overweight and obesity.¹¹

Children who use active transport to get to or from school generally are more physically active than those who do not and also accumulate more daily minutes of health enhancing activity.¹² The World Health Organisation recommends children get 60 minutes of physical activity per day, to develop normally, and building a habit of active travel is an easy way to achieve this target.

Instilling active transport habits in children and families has been trialled through school/community programs and demonstrated behavioural change programs can be effective in increasing active transport choices by families.¹³

Behaviour change programs that assist children to make active transport the norm can help NSW avoid the massive health costs caused by high levels of physical inactivity in our society. The Ride2School case studies demonstrate the potential for a comprehensive behaviour change program to motivate ongoing increased physical activity levels and decreased health costs in NSW.

3.4 Existing road and school environments are not conducive to making active transport easy for everyone

While behaviour change programs can help children, parents and school communities foster good habits, it is also critical to ensure good behaviour change is not undermined by real and perceived risk associated with the road environment.

The most effective method of increasing bike riding as a form of active transport across the population has been shown to be investment in infrastructure that

¹¹ Gordon-Larsen, P. Nelson, M. and Beam, K (2005) *Associations among Active Transportation, Physical Activity, and Weight Status in Young Adults* 13(5) *Obesity Research* 868 – 875.

¹² Active Healthy Kids Australia (2015) *2015 Progress Report Card on Active Transport for Children and Young People*, 4.

¹³ Di Pietro, G. and Hughes, I. "TravelSMART Schools – there really is a better way to go!" 26th Australasian Transport Research Forum Wellington, NZ, 1 – 3 October 2003.



separates bike riders from cars. This includes off road and shared paths and separated on-road paths such as “Copenhagen lanes” that create physical barriers between bike lanes and cars. Separated infrastructure provides both experienced riders and non-riders the confidence to use active transport.¹⁴

The road environment has also been shown to have a significant impact on active transport levels specifically in children and adolescents. In a 2014 Deakin University study, increased active travel levels in young people were recorded on roads treated with traffic calming measures (higher intersection density, higher prevalence of traffic/pedestrian lights, speed humps) as well as those with greater street connectivity (higher intersection density, not cul de sac).¹⁵

Evaluations of the Ride2School program in Victoria across the 2006 – 2007 pilot years showed that it was far more effective in inner suburban school communities with close-knit neighbourhoods and wider footpaths compared to outer suburban school communities located in more industrial areas.¹⁶

Reducing speeds in areas where children are likely to be walking and riding (such as around schools and sporting areas) is also helpful. The internationally recommended speed is now 30 km/h for local streets to encourage shared road use – particularly by children, who have lower capacity than adults to observe looming vehicles.¹⁷

Raising the age that it is legal to ride on footpaths to 16 years is another measure that would make it safer for children to regularly use active transport. Research indicates that students up to the age of 16 are more likely to take risks adults wouldn't when riding on the roads, making footpaths the best place for younger riders¹⁸.

4. A case study in normalising active travel – Ride2School

The Ride2School initiative is designed to support schools in encouraging more students to be physically active on their journey to school. The program works with children, parents, teachers and local council to overcome their unique obstacles and barriers to active travel being the norm. This program is motivated by a desire to see more children meeting the required 60 minutes of moderate to vigorous physical

¹⁴ National Institute for Transportation and Communities (2014) *Lessons from Green Lanes: Evaluating Protected Bike Lanes in the U.S* (NITC-RR-583), 137.

¹⁵ Timperio, A. Crawford, D. “Active Transport Among Youth – How Important Is the Road Environment?” Deakin University Australia Centre for Physical Activity and Nutrition Research

¹⁶ Crawford, S. and Garrard, J. (2013) *A Combined Impact-Process Evaluation of a Program Promoting Active Transport to School: Understanding the Factors That Shaped Program Effectiveness 2013* Journal of Environmental and Public Health, 9.

¹⁷ Wann, J. Poulter, D. and Purcell, C. “Reduced Sensitivity to Visual Looming Inflates the Risk Posed by Speeding Vehicles When Children Try to Cross the Road” (2011) *Psychological Science* 22(4) 429 - 434

¹⁸ Ellis, J. (2014, January). Bicycle safety education for children from a developmental and learning perspective (Report No. DOT HS 811 880). Washington, DC: National Highway Traffic Safety Administration.



activity a day recommended by the Australian Department of Health and the World Health Organisation.

There are close to 3,000 schools registered in the program nationally, however the program has gained small traction in schools in NSW. Over the past 12 months only 22 NSW schools have submitted data to the program, compared to 228 Victorian schools. Schools who register and participate in the program by submitting data report an average active travel rate of 55%. Support provided in the Ride2School Program across Tasmania and Victoria includes:

- National Ride2School Day
- School visits
- Interventions such as Active Paths initiative (highly visible and engaging way-finding markers used as tools to guide students to school)
- Council 'Active Travel' studies
- Parent engagement
- HandsUp! evaluation system
- Star awards and barrier busters

Recent results from Ride2School programs include a story from ***Bellbridge Primary School, Victoria***

Bellbridge Primary School is located in the western metro region of Melbourne. In 2015 its average active travel rate as recorded through the HandsUp! system was 42%. Two major barriers for the community were parental concern around distance to school, and perceived safety.

After consultation with the school community, the ActivePaths intervention was implemented in October 2015. Almost 12 months since the launch of Active Paths, Bellbridge Primary school has not only increased its engagement with the program but has increased its average active travel rate to 60%.

The school has won the trophy for the best school in the state in both terms 1 and 2, 2016.

5. How Government can support active transport and Ride2School

Funding from state government enables Bicycle Network to radically increase the number of children assisted by Ride2School. Support from the NSW State Government will help build a new generation of students who are more active, healthier, happier and less likely to suffer from issues caused by obesity.

The importance of government funding for the Ride2School program is born out in our evaluation of the Ride2School Tasmania 2015-2016 experience. The implementation of State Government funding increased registration from 45 primary schools to 83 registered schools. The baseline data recorded at the beginning of the



pilot on 1 July 2015 had 1,141 students being active. Within 12 months, the post-pilot data recorded a total of 3121 active students as a result of the program intervention.

6. Recommendations

6.1 Fund a preventative health program that targets physical inactivity in children

We recommend that the Ride2School program is funded by the NSW State Government as a means to address childhood overweight and obesity.

6.2 Fund separated bike infrastructure

Any behaviour change program needs to be coupled with an infrastructure investment in proximate areas to schools to provide a safe and appealing environment for children to utilise.

6.3 Legislate to reduce speeds to 30km/h around school zones and in local streets

Improving the environment around schools and in local streets will provide a more conducive environment for behaviour change programs to be effective. A 30 km/h speed limit would follow best practice international recommendations for local streets.¹⁹

6.4 Increase the legal age to ride on footpaths to 16

Enabling children up to the age of 16 years to ride on the footpath would reduce the real and perceived risk of primary and secondary students riding to school, gaining additional periods of physical activity every day.

Please feel free to contact us if you would like any further information on our submission.

Best wishes

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¹⁹ Global Road Safety Partnership (2008) *Speed management: a road safety manual for decision-makers and practitioners*, 14.

