Our 10-year goal
Regular physical activity has major benefits for health and wellbeing. It reduces people’s risk of conditions like heart disease, type 2 diabetes and cancer. It also helps reduce social isolation, strengthens social connection and improves mental wellbeing.

In 2013, VicHealth set a 10-year goal that 300,000 more Victorians would be physically active by 2023.

Our progress so far
Over the past six years, we have worked with local government, schools, community organisations and all levels of sport to promote physical activity so that more Victorians can be active, irrespective of social or economic background.

We have also funded research that revealed Victorians’ changing needs for, and expectations of, physical activity. People want to take part in social and unstructured sport and physical activity that is flexible and fun and fits into their busy lives. This is particularly true for people who are less physically active.

Our landmark campaign, This Girl Can – Victoria, celebrates real women giving it a go and getting active. It also aims to influence policies and the places where women go to exercise, so they feel welcome, included and supported.

2019–2023
Over the next four years, we will aim to increase physical activity levels of people who are less active, with a focus on:

• fear of judgement experienced by women
• social sport, active recreation and play
• walking and active travel.

Working with our partners and the community, our efforts will focus on those people with the lowest levels of physical activity. We will continue to measure and monitor physical activity levels across population groups and evaluate programs to track our progress.
In 2013, VicHealth released its Action Agenda for Health Promotion, which set our strategic direction for the 10 years to 2023. Promoting physical activity is one of the five strategic imperatives identified for action to improve the health of all Victorians, with a 10-year goal that 300,000 more Victorians would be physically active by 2023.

In the last six years, we:

• launched This Girl Can – Victoria, which in its first year encouraged more than 285,000 Victorian women to be more active
• encouraged an average of over 100,000 Victorian primary school kids each year to walk, ride or scoot to and from school, by working with councils and schools
• commissioned research to better understand barriers and motivators of physical activity at various life stages
• supported sporting organisations across Victoria to encourage Victorians who are less active to be more active through more social and flexible versions of sport
• supported the Victorian Government’s Change our Game initiative
• tested the design and development of modified or social sport programs to inspire women and girls to be more active through sport, work towards better gender equality and take on greater leadership roles in sport
• worked with partners to develop a consensus statement to tackle obesity in Victoria
• encouraged innovation in the sporting sector via the Innovation Challenge: Physical Activity and built capacity to be innovative via our incubator program Sport Jam
• extended the body of knowledge on barriers to active travel and how to positively influence individuals’ behaviour, and tested programs to get women walking more by funding the Change to Walking program and Let’s Walk programs conducted by Victoria Walks.

More information about our work on physical activity from 2013 to 2019 can be found on our website.
For many Victorians, a range of barriers makes it difficult to be physically active. Where people live, their level of income and their access to places and spaces for physical activity can all influence the amount of activity they do. Inequities in physical activity contribute to inequities in other areas of health, including cardiovascular disease, type 2 diabetes, certain cancers, musculoskeletal conditions such as osteoarthritis, and mental illness (Bauman 2004; Jeon et al. 2007; Kohl 2001; Teychenne et al. 2008; Wolin et al. 2009).

On the other hand, being physically active can positively influence other social determinants of health, such as academic results, social connection, gender equality, mental health and wellbeing. It can also empower certain communities, such as Aboriginal and Torres Strait Islander peoples (Thorpe et al. 2014).

Promoting health equity in physical activity requires systemic changes to our social and physical environments, such as infrastructure, the built environment and the provision of welcoming, inclusive environments. Creating tailored participation opportunities and shifting social norms around gender is also vital.

We are committed to reducing health inequity in each of our physical activity focus areas by working with partners and alongside at-risk communities to:

- advocate for change in social and environmental settings to support physical activity
- co-develop messages and projects that are meaningful and relevant to those communities
- measure the impact of our work across different populations.
FOCUS AREA
Fear of judgement experienced by women
VicHealth’s campaign This Girl Can – Victoria will continue to smash stereotypes about where and how women can be active. It will empower more women to feel comfortable in their bodies and in public spaces, and inspire them to become more active.

What will success look like?
More women and girls are physically active.

FOCUS AREA
Social sport, active recreation and play
We will continue to champion social and informal (or less structured) versions of sport and active recreation through to 2023.

What will success look like?
A greater number of people who are less active participating in social versions of sport and active recreation.

FOCUS AREA
Walking and active travel
We will continue to help create a culture and environments that normalise active travel and encourage short neighbourhood trips to be active ones.

What will success look like?
An increase in the proportion of Victorians walking and participating in active travel.

Building on the success of the first two years of the campaign, we will:
• continue to work with the community and our partners to change social norms and increase positive attitudes towards strong, powerful, active women
• continue to support and build the confidence of women and girls to participate in physical activity
• extend the reach of the campaign with local engagement strategies, tools and resources
• ensure the campaign remains relevant for women experiencing disadvantage
• assist physical activity providers to understand the fear of judgement, support women who are less active and create welcoming and inclusive environments
• continue to invest in and promote tailored participation opportunities for women and girls in sport
• seek to improve policies, practices and environments in settings outside formal sport, such as gyms, community facilities and open spaces
• require selected sport and recreation organisations that receive VicHealth funding to have a minimum of 40 per cent female representation on their governing body
• build understanding of the interplay of barriers to women and girls participating in physical activity.

Our social and informal programs will focus on three main groups:
• young people (12–17 years)
• women and girls
• population groups who face the greatest barriers to being active.

To increase support for this work, we will:
• continue to inspire change and foster innovation in the sport and active recreation sector
• share our key learnings and encourage others to embed them in their practice
• support the scaling-up of the programs we have seed-funded
• explore and confirm the program elements that lead to sustainability
• work with our partners to create more opportunities for children to play and be active outdoors
• influence the design and use of public spaces for recreation
• conduct research into the value of self-organised informal sport, and which policies better enable it at a local level.

We will:
• continue to deliver the Walk to School program to embed walking, riding and scooting to and from school in families’ lives, so that children are more confident to walk by themselves
• explore opportunities to work with councils to develop environments that support neighbourhood walking
• continue to fund Victoria Walks to support local councils to embed the economic case for investment in walking in local planning submissions and decision-making frameworks
• collaborate with government departments (such as transport, planning and education) that play a role in supporting active transport, to align programs and funding opportunities to inform a Victorian walking strategy and other significant strategies and policies
• continue to build on the body of knowledge on active travel behaviour and barriers to active travel, through investment in research and translation
• test and trial approaches to increase the number of Victorians actively walking, including women, Indigenous communities and other people who face greater disadvantage.
The current Australian Physical Activity and Sedentary Behaviour Guidelines emphasise the importance of moving more (Department of Health 2019).

Regular physical activity is one of the most important factors in promoting good health and preventing chronic disease (AIHW 2017). Being active lowers the risk of cardiovascular disease, type 2 diabetes, colon cancer, anxiety and depression (Kyu et al. 2016; Rebar et al. 2015). It also enhances psychosocial wellbeing and cognitive performance in adults (Chan et al. 2019; Reed & Buck 2009; Smith et al. 2010).

If young children are active, they're more likely to stay active throughout childhood and develop good habits to become healthier adolescents and adults (Telama et al. 2014). Active children and young people are more socially active, have reduced symptoms of depression and anxiety, and have better academic performance (Eime et al. 2013; Hoare et al. 2014; Singh et al. 2012). Despite these benefits, only one in five Australian children meet the recommended one hour of physical activity every day (ABS 2013).

Physical inactivity places a significant burden on our economy, with the total annual cost to the Australian economy estimated at $805 million (Ding et al. 2016). It is also a significant contributor to the burden of disease, and this impact is projected to increase in coming years (VicHealth 2019).

Although there is strong evidence of the health benefits of physical activity, a range of indicators shows that Victorians are not meeting the recommended levels of physical activity. Over two-thirds of adults are overweight or obese, and less than half are sufficiently active (ABS 2019).1

Physical activity rates also vary across population groups. In particular:

- physical activity is lower among people living in the most disadvantaged areas (ABS 2019)
- Indigenous Australians are less likely to be physically active than non-Indigenous Australians (ABS 2014)
- people with a disability are 40 per cent less likely to be physically active than those without a disability (VicHealth 2018)
- just under half of Australian women are not sufficiently active and just over 10 per cent of Victorian women don’t do any physical activity in a typical week (ABS 2019)
- 52 per cent of Victorian women worry about being judged while exercising, and for 41 per cent this fear stopped them from getting active (VicHealth 2016).

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1 Participating in 150 minutes or more of exercise in the last week excluding workplace physical activity.


VicHealth 2016, Physical activity behavioural change formative research: A marketing research report, Victorian Health Promotion Foundation, Melbourne.


VicHealth 2019, Burden and potential burden of risk factors in Victoria: Key findings from an AIHW analysis of the Australian Burden of Disease Study 2015, Victorian Health Promotion Foundation, Melbourne.
