

Building health through sport

VicHealth action plan 2010–13

October 2010



Sport is a universal language that can bring people together, no matter what their origin, background, and religious beliefs or economic status.

→ Kofi Annan, former UN Secretary-General

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Sport promotes involvement, integration and responsibility in society and contributes to the development of the community.

→ The Brighton Declaration on Women and Sport

Introduction

How much you earn, your social position, your level of education or your capacity to be involved in activities that help connect you to others in your community are important factors in determining your health and wellbeing. Social disadvantage, material deprivation, and poor living and working conditions are clearly linked to poor health. Tobacco use, alcohol misuse, physical inactivity and an unhealthy diet also contribute to ill health. Consequently, to promote health in a population and prevent disease, we need improvements to social, economic, cultural and physical environments, in addition to supporting individuals to make healthy lifestyle choices. The role of sporting organisations in contributing to these improvements is clear.

As a country with a proud and strong history and identity embedded in sport, we have an enviable opportunity to maximise health and sport goals. VicHealth's experience in working with sport has shown that a cooperative and complementary approach can produce improved sport and public health outcomes. With appropriate support, sporting organisations can and do play a significant role in tackling many of our major public health concerns.

For 23 years, VicHealth has worked with thousands of sporting organisations, ranging from the smallest of community-based clubs to the largest national codes. Many of these are also associated with vicsport. Over this time we have been improving the way we monitor and analyse changes in sport participation rates, how sport can improve our health, and the extent to which specific groups engage with particular sporting activities. We also understand the leadership strengths of sporting clubs and organisations for setting and reinforcing community standards.

In 2009, VicHealth developed a new strategic plan defining our role and focus during 2009–2013. Our long-standing partnership with sport is critical to our goals of increasing participation in physical activity, increasing opportunities for social connection and creating supportive environments for health.

VicHealth's strategy for health in sport is multi-pronged. We are focusing our attention on finding ways to enable the sports sector to lead and innovate, to increase participation rates in sport, and to create sporting environments that are healthy, safe and inclusive for all in our community.

In this action plan we detail the role of VicHealth and the sports sector in promoting health and outline specific activities that will be undertaken with the sports sector over the next three years to address priority health areas for action.

The sports sector, with a limited infrastructure, faces many challenges to address community expectations which envision sport as a key player, not only in increasing sports participation, but also in creating environments which are optimal for good health. VicHealth will continue to work with sporting organisations to create accessible, healthy and safe sporting environments. We believe this both broadens the value of sporting organisations and leads to increased participation rates. Sport has long been a leader in building a proud national identity and reinforcing community values. We wish to see this leadership extended into public health issues which affect us all.

VicHealth is proud to partner with many sporting organisations, including vicsport, to build health in our community. It is a game we all want to play.



Sindloop 121.

Lindsay Gaze VicHealth Board Member



land Burking

lan Buckingham vicsport Chair

The role of VicHealth and the sports sector in promoting health: a partnership approach

Figure 1: VicHealth's work with sport 2010–2013: a supporting framework

Priorities for focus within the sports sector

Health inequalities

- Improve the physical and mental health of people experiencing social, economic or geographic disadvantage
- Contribute to closing the health gap between Indigenous* and non-Indigenous Victorians

Participation

- · Increase participation in physical activity
- Increase opportunities for social connection
- Reduce race-based discrimination and promote diversity
- Prevent violence against women by increasing participation in respectful relationships

Nutrition, tobacco, alcohol and UV

- Improve nutrition
- Reduce tobacco use
- Reduce harm from alcohol
- Reduce harmful UV exposure

Our approach

To develop and implement innovative ways to promote health through partnering, advocacy and capacity building with sport.

Health promotion actions

- Facilitate sports participation and skill development for community members
- Develop sporting organisations and environments which foster good health
- Build the sport workforce capacity to plan, implement and evaluate health promotion activity
- Support the sports sector to develop systems to support and sustain health
- Support the role of sport in strengthening communities
- Use sport as a vehicle to communicate about priority health issues
- Create and use knowledge acquired through research and evaluation with the sport sector
- Contribute to and advocate for healthy sport policy and regulation

Priority populations

In addition to whole-of-population approaches, VicHealth will work with sport to focus efforts on those in our community who experience the greatest disadvantage.

Outcomes

Individual level

- Increased participation in sport
- Increased skills and self-efficacy
- Increased social connection
- Increased healthy eating
- Reduced smoking and alcohol consumption

Organisational level

Sporting environments that:

- are safe, accessible, inclusive and equitable
- are safe and supportive of women's participation
- bring together people from diverse backgrounds
- sustain responsible alcohol and food management policies and have diminished reliance on alcohol and unhealthy food sponsorship
- adopt measures to reduce harmful UV exposure.

Community level

Sporting organisations acknowledged as:

- contributors to development of supportive communities
- reflecting community concerns, aspirations and expectations
- contributing to community health.

^{*} Throughout this document the term 'Indigenous' refers to people of Aboriginal or Torres Strait Islander descent.

The evidence supporting sports participation for young people is overwhelming... It has the power to combat everything from racism to low self-image, to the high-school dropout rate.

→ Sue Castle, Executive Producer, PBS, Sports: Get in the Game

The role of VicHealth and the sports sector in promoting health: a partnership approach

Sport: contributing to the development of healthy communities and individuals

Sport forms part of Australia's national identity. As one of only two nations to have competed in every modern Summer Olympic Games, Australia values sport highly at the individual competitor level and across the wider community. Elite level sport is for the few; however, sporting organisations and governments have increasingly recognised the importance of community level sport and its role in promoting physical activity and addressing wider health issues and community concerns.

Sport has the capacity to deliver multiple benefits across a range of public health policy issues. Engagement in sport improves cardiovascular health; reduces the risk of type 2 diabetes and some cancers; contributes to skeletal development; and prevents stress, anxiety and depression. In addition to these physiological benefits, sports participation can also improve cognitive and educational performance and provide valuable development experiences. Research has found that sport can be a means for overcoming discrimination, can build social connections and can attract young people to out-of-school educational programs, which can achieve substantial improvements in literacy and numeracy.1

The sports sector is the messenger for many commercial products and social norms. The potential influence of sport and sporting heroes/heroines on social norms and behaviours underlies the major sponsorships of sporting events by corporations. Likewise, given the central role of sport in Australian culture, sporting organisations have the capacity to address community concerns and play a leadership role in informing attitudes and behaviours in these domains.

The sports sector is also a major contributor to the economy both directly in terms of employment, volunteer hours and events, and indirectly in saved health care costs. Recent research by Frontier Economics indicates that the Australian sport sector:

- reduced health costs by \$1.5 billion per year
- improved productivity from a healthier workforce by \$12 billion per year
- saved \$4 billion per year from the inputs by volunteers into community sport – a higher contribution than in any other sector.²

The sports sector is also a major contributor to the economy both directly in terms of employment, volunteer hours and events, and indirectly in saved health care costs.

While the benefits of sport participation are clear, Australian sport faces many challenges including:

- loss of funding
- fragmented systems
- lack of infrastructure and facilities
- unclear relevance to markets and undefined stakeholders
- difficulty in recruiting volunteers
- competition from other activities.

Consequently, sports are under pressure to find new ways to engage more of the community and sustain participation while meeting changing community norms and expectations, generally within the confines of already stretched budgets. The overall proportion of the population engaging in organised sport

has remained largely static over the past seven years and in some sports, numbers are declining. Overcoming barriers to participation and increasing participation levels are clearly of mutual interest to both public health and sport.

While this mutual goal is clear, methods for increasing participation rates in sporting activities are not straightforward. Contemporary lifestyles are more often sedentary, car-dependant, safety-conscious, risk-averse and time-poor. All these factors mitigate engagement in sporting clubs. Sport and public health are both interested in understanding why some people take part and others do not, particularly in the context of predicted demographic changes resulting from an ageing population and a growing multicultural community.

Numerous studies have shown a relationship between adolescent participation and continued physical activity. If we do not engage more young people (particularly women and people from culturally and linguistically diverse backgrounds) it will seriously impact on future participation rates. This is compounded further by participation rates progressively decreasing as age increases for all groups.

The sports landscape should reflect our community's diversity – ethnicity, gender, and people with disabilities – with opportunities for all to participate. Many sports have begun to encourage participation by Indigenous communities, new migrant groups and people with a disability. It is now the time for all sports to create healthy, diverse and welcoming clubs and organisations.



Sporting organisations and their competitive cultures have sometimes given rise to unhealthy environments that can deter broader community engagement and perpetuate unhealthy attitudes and behaviours. From the smallest sport club to the largest, beneficial sporting environments can be created that extend beyond the playing field and reinforce healthy and respectful attitudes, social norms and behaviours.

For example, all sporting organisations have an opportunity, with adequate support, to implement policies, programs and practices that ensure:

- community members are provided with safe, supportive and meaningful opportunities to participate regardless of ability
- those from varying socioeconomic backgrounds participate without costs being prohibitive
- women participate in safe environments free from the fear of violence

- Indigenous and culturally diverse community members participate in environments that value diversity and are free from discrimination
- serving and promotion of alcohol is managed in a responsible manner
- a variety of healthy food choices are available and promoted, and the promotion of less healthy food is limited
- measures are taken to reduce harmful exposure to UV.

There will be inevitable tensions between some public health goals and commercial interests within the sport sector. Sports can and do demonstrate strong public health leadership. For instance, the Australian Football League's response to the serious public health issues of racial vilification and violence against women has been in line with community-wide expectations. Sports that have focused on developing healthy and inclusive environments, on creating places where fun is to be had

and where involvement is rewarded, are leading the way in improving physical and mental health across the community.

VicHealth's vision for health in sport is closely aligned with the principles articulated in the Australian Sport Commission statement: the 'Essence of Australian Sport', namely:

- fairness
- respect
- responsibility
- safety.

The role of VicHealth and the sports sector in promoting health: a partnership approach

VicHealth: contributing to the development of healthy communities and individuals

The Victorian Health Promotion Foundation (VicHealth) was established by the Victorian Parliament under the *Tobacco Act 1987* with a mandate to promote good health for all Victorians. The objectives of VicHealth as mandated by the *Tobacco Act 1987* are:

- to fund activity related to the promotion of good health, safety or the prevention of disease
- to increase awareness of programs for promoting good health in the community through the sponsorship of sports, the arts and popular culture
- to encourage healthy lifestyles in the community and support activities involving participation in healthy pursuits
- to fund research and development activities in support of these activities.

Under section 33 of the Act, the VicHealth budget must include provision for payments to sporting bodies (not less than 30%) and to bodies for the purpose of health promotion (not less than 30%).

VicHealth is an independent, statutory authority with a Board of Governance that is responsible to the Minister for Health. With support across the political spectrum we work in partnership with governments, organisations, communities and individuals from a broad range of sectors including sport, community, urban planning, transport, local government, education and the arts. Fundamental to our success is the strength of these partnerships.

Our health promotion investments target the greatest preventable risk factors for ill health: smoking; poor nutrition; harmful use of alcohol; lack of physical activity; social and economic exclusion; and UV exposure. While working to improve the health of all Victorians, we also focus on the needs of those with the poorest health by targeting many of our activities on health inequalities.

Our vision

VicHealth envisages a community where:

- health is a fundamental human right
- everyone shares in the responsibility for promoting health
- everyone benefits from improved health outcomes.

Our mission

Our mission is to build the capabilities of organisations, communities and individuals in ways that:

- change social, economic, cultural and physical environments to improve health for all Victorians
- strengthen the understanding and skills of individuals in ways that support their efforts to achieve and maintain health.

Our values

- Brave
- Just
- Creative

Our focus

VicHealth's focus is on health promotion and primary prevention of non-communicable diseases.

VicHealth's focus				
Promotion	Prevention	Early intervention	Treatment	Rehabilitation

Primary prevention' addresses the causes of poor health to prevent problems from developing in the first place. It can focus on individual risk factors and behaviours or broader social, economic and environmental contributors to disease. The broader contributors are often referred to as 'health promotion'.

Health promotion does more than merely prevent poor health. It also increases the prospects of achieving optimal health. This is vital to meet both the productivity requirements of our economy as well as to realise widely shared aspirations for a just and sustainable society.

VicHealth has more than 20 years experience in drawing diverse groups together to influence the health-related lifestyles of individuals and to improve the social, economic, cultural and physical environments required to sustain health.

We highlight what can be achieved by integrating funding activities, research

and rigorous evaluation. We also build opportunities for people to be informed, learn new skills, have greater access to activities that promote good health, and share healthier environments.

This allows us to lead and advocate for excellence in the development of appropriate health promoting policies and programs, as well as maintain strategic alliances with national and global public health interests to strengthen health promotion action and advocacy.



All sports for all people.

→ Pierre de Coubertin, former President, IOC

People with disabilities want to be recognised for what they can do, not what they can't do.

→ Karni Liddell, former paralympic swimmer

The role of VicHealth and the sports sector in promoting health: a partnership approach

Adding value to the sports sector: a partnership approach

VicHealth will work with sport to continue to build a strong sector that is able to address contemporary community concerns and lead innovation to promote health, in addition to supporting activity designed to address a range of health issues.

1. Supporting framework

The work supported by VicHealth over the next three years will be underpinned by an evidence-based framework (see page 6) identifying:

- health issues under focus
- actions required to address these health issues
- priority populations for focus
- mutually desired outcomes to underpin evaluation and monitoring of activity.

2. Maximising policy relevance

VicHealth continues to align itself strategically with international, national and state policy health initiatives.

Internationally, the World Health Organization's Commission on Social Determinants of Health identifies the following areas of immediate focus:

- improve daily living conditions
- tackle the inequitable distribution of power, money and resources
- measure and understand the problem and assess the impact of action.

The National Health Priority Areas initiative identifies the following chronic diseases requiring special attention: reducing cancer, diabetes, cardiovascular disease, arthritis and other musculoskeletal conditions, asthma, injury and mental health problems including stress, anxiety and depression.³

Victorian Government strategies for prevention and health promotion relevant to the sports sector include:

- Sport and Recreation 2005–2010: a five-year plan for sport and recreation in Victoria
- Victorian Tobacco Control Strategy (2008–2013): reducing the toll of tobacco
- Restoring the balance: Victoria's Alcohol Action Plan (2008–2013): actions to prevent and reduce harm associated with alcohol misuse in Victoria
- A Fairer Victoria (2010): addressing social disadvantage
- All of Us: Victoria's multicultural policy: strengthening and promoting multiculturalism
- Because Mental Health Matters: State Mental Health Strategy (2009–2019): focusing on increasing social inclusion and reducing discrimination and violence as drivers of the mental health reform
- Department of Human Services: Health promotion priority setting (2007–2012): to improve overall health and reduce health inequalities
- Action Plan: Strengthening Community Organisations: strengthening communities
- State Violence Against Women Prevention Plan (2009–2019): a cross sector strategy to prevent violence against women
- State Respect Strategy: focus on reducing discrimination and preventing violence
- Indigenous inclusion framework and Indigenous health promotion framework: to contribute to closing the gap in Indigenous health.

These initiatives provide opportunities for the sports sector to make contribution in a range of policy arenas. Over the next three years, VicHealth will continue to advocate for inclusion of sport sector activity in relevant policies and programs.

3. Developing strategic partnerships

VicHealth invests in partnerships with researchers, policy makers, government and non-government sectors, private industry and philanthropic organisations to facilitate sustainable advocacy, policy and structural change which maximises health outcomes. Through engagement with local government and education and planning sectors, among others, our work to increase physical activity can be maximised. Over the next three years, we will support the sports sector to develop partnerships which benefit our mutual goals.

VicHealth continues to align itself strategically with international, national and state policy health initiatives.

4. Supporting workforce and volunteer development

VicHealth acknowledges that sport faces many challenges in recruiting and supporting volunteers to develop and deliver programs. Over the next three years, VicHealth will provide skills training to sports sector staff and volunteers to increase their ability to promote good health in the sports setting.

5. Consolidating the evidence base to strengthen sport practice and positioning

Innovation and evaluation is an important focus of VicHealth's work. We apply learning to generate change by working closely with our evaluation partners. This work will be consolidated over the next three years to build a strong evidence base regarding the role of sport in promoting health.

6. Communication with and about sport

VicHealth recognises the importance of effective marketing and communication in improving health. We focus our activity on raising awareness, understanding and support. Over the next three years, we will communicate with sports sector stakeholders and partner with them to develop strategies which promote good health and make more visible the work

being undertaken by the sector. We will also provide information and support that will enable the sports sector to contribute to increasing awareness of our strategic priority areas.

Action	Our planned activities	
Research and evaluation	Promote use of a range of evaluation techniques targeted at the needs of the sports setting.	
	Consolidate partnerships with Deakin, Ballarat, Monash and La Trobe Universities to support evaluation capacity development in sport.	
	Support research and synthesise and disseminate knowledge to sports sector stakeholders on effective sport-based health promotion practices and assist them in the implementation of evidence-based activity across VicHealth's strategic priority areas.	
Organisational development	Support development of healthy sporting environments that are welcoming, safe and accessible to all community members.	
	Provide media support, advice and training to sports sector partners and funded projects to promote program objectives and outcomes.	
	Provide opportunities for sports sector skill development in promoting health.	
Systems development	Encourage links between government, community, academic and sports sector stakeholders to foster comprehensive program development and evaluation activities.	
Communication	Form partnerships with a range of funding bodies to build a strong base for health promotion activity.	
	Use a range of communication channels to translate and disseminate the results of sports setting evaluation projects.	
	Develop communications strategies for sports sector activities to raise awareness, understanding and support among target audiences.	
	Facilitate an ongoing events program including sport-focused seminars, conferences and forums.	
Contribute to policy	Use evaluation outcomes to inform policy.	
and regulation	Develop policy submissions to support sports sector development and growth.	
	Advocate for inclusion of sports sector activity in relevant government policies and programs.	

Action in priority health areas

Addressing health inequalities

What we know

People from low income households are more likely to report their health as fair or poor, experience depression, have days off work due to ill health, report greater levels of physical impairment, and have greater difficulty accessing affordable health care.⁴

There is a direct relationship between participation and socioeconomic disadvantage. Men and women in lower socioeconomic groups are more likely to report a sedentary activity level compared to higher socioeconomic groups.⁵

For example:

- people who complete Year 12
 education or higher have rates of
 participation in sport or physical
 activity above the average (64%)
- those with a degree or diploma have the highest rate of participation (79.2%)
- people who finish school at Year
 11 or below have the lowest rate of participation at 51.3%⁶
- people on a weekly income of less than \$300 per week have a participation rate of 46.2% compared to 72.3% for people earning more than \$1000 per week
- professionals and advanced services workers have the highest rate of participation [79.5%].⁷

The life expectancy of Indigenous people is much lower than that of the total Australian population⁸ with Indigenous young people being four times more likely to die before the age of 25, twice as likely to be obese, twice as likely to smoke and 13 times more likely to be in prison.⁹

Men and women in lower socioeconomic groups are more likely to report a sedentary activity level.

While 10% of Australian Football League players are from Indigenous communities, less than half of the Indigenous population participates in organised sport and physical recreation, compared with two-thirds of non-Indigenous Australians.¹⁰



Our role with sport

VicHealth focuses on improving the physical and mental health of people experiencing social, economic or geographic disadvantage. We are also committed to making a contribution to closing the health gap between

Indigenous and non-Indigenous Victorians. Over the next three years, we will strengthen this focus by supporting and documenting models of good sports sector practice that contribute to reducing health inequalities.

Action	Our planned activities
Research and evaluation	Implement and document models of good practice in creating sporting environments which benefit the health of population groups experiencing disadvantage due to their social and economic circumstances.
Participation and skill development	Work with leaders from Indigenous and new arrival communities to develop strategic partnerships with a small number of national and state sporting bodies to increase participation in the codes.
Communication	Document and disseminate the success of the Rumbalara Football and Netball Club in developing a community environment which fosters good health.
	Develop a positive imaging strategy which identifies the contribution made by Indigenous men and women to sport and the wider community.
Community strengthening	Support organisations such as the Fitzroy Stars Football Club to establish a community hub from which to develop health promotion activity.
Organisational development	Support Indigenous sporting organisations to strengthen their approaches in dealing with the social and economic determinants of health.

Action in priority health areas

Increasing social connection and participation in physical activity

What we know

Physical inactivity has been estimated to account for 6.6% of the burden of disease and injury. It accounts for 22% of heart disease, 11% of stroke, 14% of diabetes and 10% of breast cancer; with 54% of Australian adults not doing enough physical activity to achieve health benefits.¹¹

Younger females are less likely to participate in sport or recreational physical activity than young males. ¹² In Australia, 79.5% of adult women are either sedentary or have a low level of exercise compared to 65.8% of men. ¹³

People who speak a non-English language at home, especially females, have lower than average regular participation rates in any physical activity.¹⁴ Communities with high levels of social cohesion, including participation in community organisations and activities, have better health than those with low levels of social cohesion.¹⁵

In rural communities, sport and recreation clubs are the primary source of social interaction and support.¹⁶ Participation in physical activity provides opportunities for social connection, cooperation, reciprocity, collective identity and trust in the community.¹⁷

Communities with high levels of social cohesion, including participation in community organisations and activities, have better health than those with low levels of social cohesion.¹⁵

Participating in sport enhances physical health and has positive social and psychological effects, including increased self-esteem, development of life skills, decreased involvement in risky behaviours and an increase in academic achievement.

People identify a range of benefits from being involved in a local community sporting club. The five key benefits are:

- 1) socialising and spending more time with friends
- 2) increasing exercise and physical fitness
- 3) participating in the local community
- 4) improving health
- 5) meeting new people.18



Our role with sport

From its inception, VicHealth has played a significant role in supporting sporting organisations to promote and encourage increased physical activity. Regardless of the sport played, successful clubs and organisations have a commitment to inclusion and champion social unity.

They provide a valuable service to the local community and beyond by providing a place for people to go to improve physical and mental wellbeing. Over the next three years, we will continue to support activity designed to expand opportunities for participation in sport. We will also explore the social and economic barriers to participation and how to best overcome them.

Action	Our planned activities	
Research and evaluation	 Synthesise and disseminate research findings documenting: physical activity participation rates across the population and sub-populations the links between physical activity and physical and mental health the social connection benefits derived through sports participation and the consequent impact on mental health. Work with our sport and academic partners to investigate models of good practice in increasing sport participation rates for priority population groups. In collaboration with vicsport and Sport and Recreation Victoria, support a Research Practice Fellow to strengthen data collection and analysis systems to monitor changes of participation in all forms of physical activity. 	
	Explore models of good practice in increasing social connection via participation in sport.	
Create environments	Develop an awards program with vicsport which fosters and promotes ethical and just conduct in sport.	
Communication	Support sporting bodies to develop communication strategies that promote the physical and mental health benefits of physical activity and the benefits of being involved in sport.	
Community development	Support sporting bodies to work with community organisations to increase participation in physical activity.	
	Contribute to the Victorian Fire Recovery effort through support for local sport initiatives.	
Organisational support	Support partnership development between state sporting associations, regional sports assemblies and community organisations to remove barriers and increase access to participation for population groups with low participation rates.	
	Support partnerships between sporting bodies and schools to build community links which increase physical activity for children and young people.	
	Provide skills training to sport and recreation sector staff and volunteers in practices designed to increase participation in physical activity.	
Participation and skill development	Work with vicsport, the government, corporate and philanthropic sectors to sustain a small grants program designed to remove barriers to participation in sport and prevent injury.	

Action in priority health areas

Reducing race-based discrimination and promoting diversity

What we know

Discrimination contributes to inequality and disadvantage experienced by Indigenous Victorians and some migrant and refugee communities.¹⁹

Of Australians born in non-English speaking countries, 47% report having experienced discrimination while 14% report experiencing discrimination in the last 12 months.²⁰

Indigenous and overseas-born Victorians report unacceptably high rates of discrimination when participating in sport.²¹

For people born overseas, physical activity rates are higher in non-organised sport than for organised sport regardless of country of birth, although there are differences within groups.

Sport can play a critical role in promoting multiculturalism.

Prejudice and race-based discrimination are influenced by social norms. Social norms are constantly changing, therefore harmful social norms can be shifted and positive norms reinforced.²²

Sporting clubs can implement codes of practice and regulations to prohibit race-based discrimination and establish positive norms.

Sport can play a critical role in promoting multiculturalism as it offers opportunities for greater social connections, openness and respect between different individuals and groups.



Our role with sport

VicHealth supports development of positive behaviours and attitudes about diversity in the wider community; and helps to strengthen organisational policies and practices that assist this process.

We are committed to enabling Indigenous Australians and people from culturally and linguistically diverse backgrounds

to benefit from the lifelong health and social rewards from sport. Over the next three years, we will work with the sports sector to reduce the discrimination affecting Victorians from Indigenous and diverse cultural backgrounds and ensure that sport can also reap the benefits of a multicultural landscape and increased participation rates.

Action	Our planned activities	
Research and evaluation	Conduct a review to identify evidence-based strategies to reduce discrimination in sport.	
	Support research and evaluation to assess models of good sports sector practice in reducing discrimination and promoting diversity.	
Communication	Work with the sports sector to communicate about the positive aspects of cultural diversity.	
	Develop a positive imaging strategy which identifies the sports contribution made by people from varying cultural backgrounds.	
Community development	Work with the Cities of Whittlesea and Shepparton and sporting organisations in these two municipalities to implement a multifaceted approach to reducing discrimination and promoting diversity.	
Organisational support	Develop resources and provide skills training to sports sector personnel in practices designed to reduce discrimination and promote diversity within club environments.	
	Undertake a regional sports intervention designed to support sporting organisations to implement strategies promoting respectful behaviours, policies and environments.	
Participation and skill development	Support sporting organisations to develop opportunities to increase sustained contact between people from different ethnic and racial backgrounds.	

Action in priority health areas

Preventing violence against women

What we know

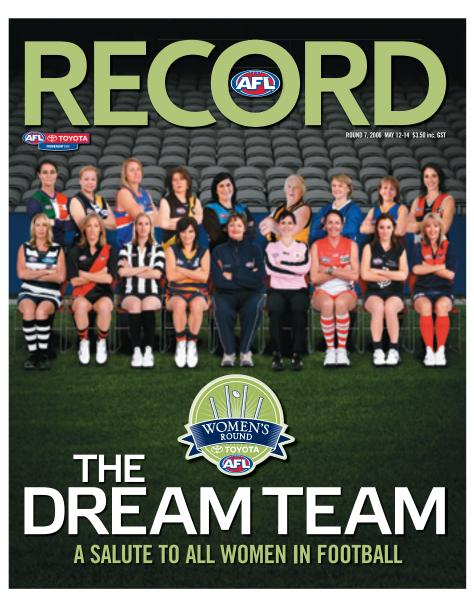
By the age of 15, one-third of women have experienced inappropriate comments about their body or sex life, one-quarter have experienced inappropriate sexual touching, and one in five have been stalked.²³

Sport has begun to play a significant role in addressing violence against women.

One in three women in Australia who have had a boyfriend or husband report experiencing at least one form of violence during their lifetime from an intimate male partner.²⁴

Intimate partner violence is the leading preventable contributor to death, disability and illness in Victorian women aged 15–44 years, with depression and anxiety being the majority of the health burden imposed.²⁵

Sport has begun to play a significant role in addressing violence against women through creating environments which foster development of respectful relationships and equal participation.



This image of $AFL\ Record$ is reproduced courtesy of the Australian Football League

Our role with sport

VicHealth works with academic institutions, government and nongovernment sectors to develop policies and programs designed to prevent violence against women. Our work is recognised as making a global contribution to increasing knowledge about the health impacts of violence

against women and models of good practice in preventing this violence. Over the next three years, we will continue to support sporting organisations to create safe and inclusive environments for women. We will also focus on mechanisms to facilitate the development of respectful relationships in which women and men can participate on equal terms.

Action	Our planned activities
Research and evaluation	Support research to identify models of good sports sector practice which foster respectful behaviours, policies and environments that are inclusive and safe for women and girls.
Participation and skill development	Support and document activity designed to increase women's participation in sport at all levels.
Systems development	Support the translation of knowledge-building activities into initiatives designed to develop effective systems within sport to prevent violence against women.
	Support the development of an infrastructure within the Australian Football League Victoria capable of integrating and sustaining violence prevention initiatives into the core functioning of the code.
Communication	Develop a communications strategy and collateral that promotes equal and respectful relationships between women and men.
	Work with the sports sector to communicate the benefits of developing respectful and responsible relationships between men and women.
	In collaboration with relevant sporting organisations, respond to media coverage of violence against women within sport.
Organisational support	Develop resources and provide sports sector training in practices designed to foster respectful relationships between men and women within club environments.
	Undertake a regional sports intervention designed to support sporting organisations in implementing strategies promoting respectful behaviours, policies and environments.

Action in priority health areas

Reducing tobacco and alcohol consumption and promoting healthy food choices

What we know

In 21 years, the smoking rate of Victorian adults has dropped from 34% to 17%.²⁶ Though much progress has been made, smoking remains the leading preventable cause of many cancers, respiratory, cardiovascular and other diseases.

In Victoria, smoking costs approximately 4000 lives and \$5 billion each and every year. ²⁷ Smoking rates remain disproportionately high in many of our communities, causing avoidable hardship and ill health among many of the people who can least afford it. ²⁸

Alcohol remains the most widely used drug in Victoria with nearly half of Victorians over the age of 14 years being daily or weekly drinkers.²⁹

While alcohol consumption is commonplace in many local sporting clubs, research has found that it is the least healthy aspect identified by the community.

While the majority of Victorian drinkers consume alcohol in moderation, 33% of all Victorian adults (aged 18 or over) drink at risky or high-risk levels for short-term harm at least yearly.³⁰ This figure is substantially higher among 18–24 year olds, with 18% undertaking risky drinking at least weekly, 44% at least monthly and 64% at least yearly.³¹

There has been a strong association between alcohol and sport in Australia.

While there is a diversity of alcohol cultures within sport, sponsorship of some sport and sporting events by alcohol companies, media coverage of celebrations with alcohol, particularly high-profile male team sports are commonplace.



For individuals, the least healthy aspect of being involved in a local sporting club is the level of alcohol consumed.³² While alcohol consumption is commonplace in many local sporting clubs, research has found that it is the least healthy aspect identified by the community.³³

Inadequate vegetable and fruit intake is responsible for 30% of coronary heart disease, 20% of gastrointestinal cancer and 14% of stroke.³⁴

Our role with sport

Controlling tobacco consumption and promoting healthy eating are two areas that VicHealth has invested in since its establishment. The buy-out of tobacco sponsorship in sports and arts events was a world-first and cemented a 22-year relationship between VicHealth and sports for tackling major public health issues and promoting sport. In this time, substantial investments were made in sporting clubs and organisations to create environments supporting healthy choices, such as smoke-free policies and healthy food choices and messages at events and in clubs.

Over the next three years, VicHealth will continue its research and policy development agenda and complement this by extending its healthy environments strategy to reinforce gains and achieve further reductions in smoking and optimal nutrition in sporting clubs and events.

VicHealth has also supported research, programs and campaigns to tackle the harmful consumption of alcohol. The philosophy of harm minimisation informs our work and we support multipronged strategies that extend beyond the health sector and into areas of law enforcement, market regulation, taxation and social marketing.

Over the next three years, our efforts will focus on facilitating a comprehensive public health approach to reduce alcohol misuse in sports. We will continue to research the social impacts of alcohol consumption and effective interventions for reducing alcohol-related harms and support sporting organisations to shift to a safe drinking culture. Key messages on responsible alcohol use will also be developed in collaboration with sports.

Action	Our planned activities	
Research and evaluation	Support research to develop innovative alcohol prevention policies and programs in sport.	
	Explore models of good practice in creating sporting environments which reduce tobacco and alcohol consumption and provide healthy food choices.	
Create environments	Facilitate the creation of sporting environments that promote a safer drinking culture.	
Organisational support	Support development of sporting organisations which regulate tobacco consumption, sustain responsible alcohol management and healthy food policies.	
	Implement a regional sports intervention designed to support community sporting organisations to progress work in reducing tobacco and alcohol consumption and to implement healthy food practices.	
Communication	Support development and implementation of a campaign which highlights sports sector activity designed to create healthy sport environments.	
	In collaboration with relevant sporting organisations, respond to media coverage of alcohol consumption within sport.	
Systems development	Support the translation of knowledge-building activities into initiatives designed to develop effective systems within sport to ensure responsible management of alcohol, tobacco and healthy food consumption.	
	Support the development of policies and associated infrastructure within the Australian Football League Victoria capable of integrating and sustaining responsible alcohol, tobacco and healthy food consumption practices into the core functioning of the code.	

Action in priority health areas

Reducing harmful UV exposure

What we know

More than 1600 Australians die from skin cancer each year, with at least two out of three Australians being diagnosed with skin cancer before 70 years of age.³⁶

Of all cancers, skin cancer is the most expensive burden on our health system. Ironically, skin cancer is one of the most preventable cancers in Australia.³⁷

Major outdoor sports such as cricket, tennis, golf, lawn bowls and surfing are generally played during the time of year when UV levels are extreme. Players and spectators are all at risk unless appropriate protection is taken.

A 2009 survey found that more than half of Victorian State Sporting Associations did not have a policy for sporting clubs to manage exposure to UV radiation and just under half did not have a policy around heat illness.³⁸

...skin cancer is one of the most preventable cancers in Australia.

A balance is required between avoiding an increase in the risk of skin cancer by excessive sun exposure and achieving enough sun exposure to maintain adequate vitamin D levels. Vitamin D is beneficial for maintaining musculoskeletal health and reducing the risk of bone fractures. However, it should be noted that only certain groups in the community are at increased risk of vitamin D-deficiency. They include naturally dark-skinned people, those who cover their skin for religious or cultural reasons, the elderly, babies of vitamin D-deficient mothers and people who are housebound or are in institutional care.³⁹



Our role with sport

VicHealth and the Cancer Council Victoria have worked in partnership for over 20 years to reduce the harmful effects of UV exposure. A key setting for the Cancer Council SunSmart campaign has been schools and outdoor sports activities.

In the next three years, we will reinforce sun-protective attitudes and behaviours across the community, particularly among young people. Innovative measures in sports settings will also be supported to maintain the decrease in rates of melanoma and non-melanoma skin cancer.

Action	Our planned activities	
Research and evaluation	Support research into effective social marketing strategies for UV protection.	
Create environments	Improve environmental protection strategies, including shade audits, identifying options for built and natural shade.	
Communication	Increase investment in public education campaigns. Target adolescents and young adults with SunSmart messages to increase UV protective behaviours. Focus awareness-building activity in settings and activities where people mostly get burnt including	
	sport, water/beach related activities, active and passive recreation.	
Organisational support	Trial new UV protection strategies with community sporting organisations.	
	Assist sporting organisations to reduce UV exposure through provision of small grants to enable access to shade equipment.	

References

- Sport England 2009, Summary of the value of sport – Education and lifelong learning, viewed 19 February 2010 at http://www.sportengland.org/ research/value_of_sport_monitor.aspx
- Australian Sports Commission media release 'Setting a new direction and platform for Australian sport' February 2010, viewed 26 February 2010 at http://www.ausport.gov. au/media/asc_news/setting_a_ new_direction_and_platform_for_ australian_sport
- 3. Australian Institute of Health Policy Studies & Victorian Health Promotion Foundation 2008, A vision for prevention in Australia, discussion paper, National prevention summit: Investing in Australia's health and wellbeing, Australian Institute of Health Policy Studies & VicHealth, Carlton.
- Turrell, G, Stanley, L, Loopeer, M & Oldenberg, B 2006, Health inequalities in Australia: Morbidity, health behaviours, risk factors and health service use, Queensland University of Technology & Australian Institute of Health and Welfare, Canberra.
- Australian Institute of Health and Welfare 2008, Making progress: The health, development and wellbeing of Australia's children and young people, AIHW, Canberra.

- 6. Stratton, M, Conn, L, Liaw, C & Conolly, L 2005, Sport and related recreational physical activity the social correlates of participation and non-participation by adults. Sport Management Association of Australia and New Zealand (SMAANZ), ABS, 11th Annual Conference, 25–26 November 2005, Canberra, viewed February 2010 at http://www.ausport.gov.au/__data/assets/pdf_file/0005/276926/ABS-Social_correlates_of_participation_and_non-participation1.pdf
- 7. Ibid
- 8. Standing Committee for the Review of Government Service Provision 2007, Report on Government Services 2007, Indigenous Compendium, Productivity Commission, SCRGSP, Canberra.
- Australian Institute of Health and Welfare 2007, Young Australians: their health and wellbeing 2007, AIHW, Canberra.
- 10. Thorpe, S & Browne, J 2009, Closing the nutrition and physical activity gap in Victoria: Victorian Aboriginal nutrition and physical activity strategy, Victorian Aboriginal Community Controlled Health Organisation, Melbourne.

- Australian Institute of Health and Welfare 2006, Australia's health 2006, AIHW, Canberra.;
 - Australian Institute of Health and Welfare 2008, *Australia's health 2008*, AIHW, Canberra.;
 - National Heart Foundation of Australia 2007, *The burden of cardiovascular disease in Australia for the year 2003*, Consultancy report by Vos, T & Begg, S, Centre for Burden of Disease and Cost-Effectiveness, University of Queensland. National Heart Foundation of Australia, Canberra.:
 - Begg, S, Vos, T, Barker, B, Stevenson, C, Stanley, L & Lopez, A 2007, *The burden of disease and injury in Australia 2003*, AIHW cat. no. PHE 82, AIHW, Canberra.
- 12. Stratton, M et al. 2005, op. cit.
- 13. Australian Bureau of Statistics 2007, National survey of mental health and wellbeing 2007 cited in Women in Australia 2009, Department of Families, Housing Community Services and Indigenous Affairs, Canberra.
- 14. Australian Sports Commission and Department of Health and Ageing 2008, *Participation in exercise*, recreation and sport, Annual report, Australian Government, Canberra.
- 15. Stansfeld, S 2006, 'Social support and social cohesion', in M Marmot & R Wilkinson (eds), Social determinants of health, 2nd edn, Oxford University Press, UK.

- 16. Townsend, M, Moore, J & Mahoney, M 2002, 'Playing their part: The role of physical activity and sport in sustaining the health and wellbeing of small rural communities' in International Electronic Journal of Rural and Remote Health Research, Education, Practice and Policy, 109.
- 17. Chau, J 2007, *Physical activity and building stronger communities*. NSW Centre for Physical Activity and Health.
- 18. Victorian Health Promotion Foundation 2010, Community attitudes survey: Healthy community sporting environments, VicHealth, Carlton.

19. Altman, J, Biddle, N & Hunter, B 2004,

Indigenous socio-economic change 1971–2002: A historical perspective, Australian National University Centre for Aboriginal Economic Policy Research, Canberra.;
Larson, A, Gilles, M, Howard, P & Coffin, J 2007, 'It's enough to make you sick: The impact of racism on the health of Aboriginal Australians', Australian and New Zealand Journal

of Public Health. Public Health

Paradies, Y 2007, Exploring the health effects of racism for Indigenous people, Keynote address to the Rural Health Research Colloquium, Tamworth, NSW.

Association of Australia, Canberra.;

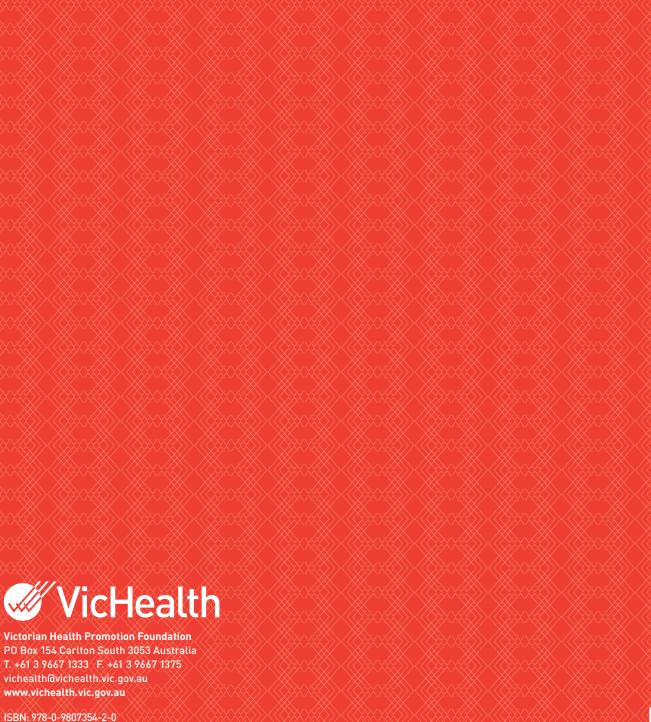
- Markus, A & Dharmalingham, A 2008, *Mapping social cohesion: The Scanlon Foundation Surveys*, Monash Institute for the Study of Global Movements, Monash University, Melbourne.
- 21. Victorian Health Promotion Foundation 2007, *More than* tolerance: Embracing diversity for health, VicHealth, Carlton.

- 22. Crandall, C & Strangor, C 2005, 'Conformity and prejudice', in Dovidio, J, Glick, P & Rudman, L (eds), Reflecting on the nature of prejudice: 50 years after Allport, Blackwell, Malden, MA.
- 23. Australian Bureau of Statistics 2006, 2006 Census of Population and Housing, ABS, Canberra.
- 24. Mouzos, J & Mikkai, T 2004, Women's experience of male violence: Findings from the Australian component of the International Violence Against Women Survey, Research and Public Policy Series, No. 56, Australian Institute of Criminology, Canberra.
- 25. Victorian Health Promotion
 Foundation 2004, The health costs
 of violence: Measuring the burden of
 disease caused by intimate partner
 violence. A summary of findings,
 VicHealth, Carlton.
- 26. Unpublished data, Centre for Behavioural Research in Cancer, 2004; Germain, D, Wakefield, M, Durkin, S 2008, Smoking prevalence and consumption in Victoria: key findings from the 1998–2007 population surveys. CBRC Research Paper, Series No. 31, Melbourne, Australia. Centre for Behavioural Research in Cancer, Cancer Council Victoria, February 2008.
- 27. Cancer Council Victoria 2005, *The Tobacco Tragedy: Deaths caused by smoking in Victoria 1999–2002*, Cancer Council Victoria, Melbourne.
- 28. Department of Human Services 2008, *Victorian Tobacco Control Strategy 2008–2013*, DHS, Victorian Government, Melbourne.
- 29. Australian Institute of Health and Welfare 2005, 2004 National drug strategy household survey: State and territory supplement, Drug Statistics Series 13, AIHW, Canberra.

- 30. Turning Point Alcohol and Drug Centre 2007, Victorian drugs statistics handbook: Patterns of drug use and related harms in Victoria, Drugs Policy and Services Branch, State of Victoria, Melbourne.
- 31. Ibid.
- 32. Op. cit.
- 33. McLennan & Podger, 1995, *National nutrition survey 1995*, Australian Bureau of Statistics, Canberra.
- 34. World Health Organization 2002, *Globalization, diets and noncommunicable diseases*, World Health Organization, Geneva.
- Australian Institute of Health and Welfare 2005, States & Territories GRIM (General Record of Incidence of Mortality) Books, Canberra: AIHW.
- 36. Staples, M, Elwood, M, Burton, R, Williams, J, Marks, R & Giles, G 2006, 'Non-melanoma skin cancer in Australia: the 2002 national survey and trends since 1985', *Medical Journal of Australia* 184: 6–10.
- 37. Cancer Council Victoria 2009, SunSmart's submission for the 2006– 09 VicHealth review, Cancer Council Victoria, Melbourne.
- 38. Hearne K & Makin J, 2009, Needs assessment for a combined UV protection and heat policy resource, Research Memorandum for SunSmart, Cancer Council Victoria, Melbourne.
- 39. Risks and Benefits of Sun Exposure:
 Position Statement, approved by the
 Australian and New Zealand Bone
 and Mineral Society, Osteoporosis
 Australia, the Australasian
 College of Dermatologists and
 the Cancer Council Australia,
 Melbourne, May 2007.

Sport is a preserver of health.

→ Hippocrates



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