Victorian Health Promotion Foundation (VicHealth)

Submission to the National Sports Plan

July 2017



1. Introduction

1.1 About VicHealth

The Victorian Health Promotion Foundation (VicHealth) is pleased to make a submission to inform the development of the Australian Government's National Sports Plan. A National Sports Plan is an opportunity for the Australian Government to develop a vision that articulates the role and benefits of sport, and for sport to be a key partner for health and wellbeing.

VicHealth was formed 30 years ago with the mandate to promote good health in Victoria. Under the *Tobacco Act 1987* (Vic), we are required to provide 30% of our annual appropriations to sporting bodies. Because health and wellbeing is our focus, VicHealth's investments and partnerships in sport are directed to achieve this aim.

VicHealth works closely with the sporting sector to deliver the key priorities set out in our <u>Action Agenda for Health Promotion 2013-2023</u>. These are: more physical activity, healthy eating, preventing tobacco use, preventing harm from alcohol, and improving mental wellbeing. We also work with sporting groups to reduce barriers to participation experienced by disadvantaged groups, and to advance gender equality. Through this approach, we help drive change to achieve better health for individuals, communities, and the broader population. This model of working with sport is one that could be adopted by the National Sports Plan.

1.2 Outline of this submission

VicHealth's submission is guided by the set of questions in the <u>National Sports Plan Fact Sheet</u>. But rather than address each question individually, our submission makes a number of comments and recommendations under the following categories:

- Participation
- Prevention through physical activity
- Sporting infrastructure
- Sources of funding, including a national good causes lottery.

2. Summary of Recommendations

- 1. The National Sports Plan should include a contemporary definition of sport that reflects more Australians are participating in social and non-organised sport and physical activity.
- 2. The National Sports Plan should include longitudinal measures of participation in organised and non-organised sport and physical activity.
- 3. The National Sports Plan should set targets to reduce barriers to participation experienced by disadvantaged groups.
- 4. The National Sports Plan should ensure that publicly funded sporting groups are required to advance gender equality in sport.
- 5. The National Sports Plan should include a vision where health and wellbeing is part of the core business of sport.
- 6. The National Sports Plan should broaden its definition of prevention to include the major risk factors for chronic disease.
- 7. The National Sport Plan should embed health as an explicit consideration for all sporting infrastructure as it is planned, developed and used.
- 8. The National Sports Plan should highlight the role that sporting stadia and community sport and recreation facilities can play to promote health and wellbeing.
- 9. The National Sports Plan should highlight the importance of planning and design to support physical activity.
- 10. The National Sports Plan should focus on funding models that boost equal participation in sport and physical activity to improve population health outcomes.
- 11. The National Sports Plan should take into account the range of harms associated with gambling.

3. Participation

Recommendations

- 1. The National Sports Plan should include a contemporary definition of sport that reflects more Australians are participating in social and non-organised sport and physical activity.
- 2. The National Sports Plan should include longitudinal measures of participation in organised and non-organised sport and physical activity.
- 3. The National Sports Plan should set targets to reduce barriers to participation experienced by disadvantaged groups.
- 4. The National Sports Plan should ensure that publicly funded sporting groups are required to advance gender equality in sport.

3.1 Demand for non-organised, social, and flexible sport is increasing

The way Australians engage and participate in sport and physical activity is changing and this should be reflected in the National Sports Plan and its definition of sport.

Australians are increasingly participating in non-organised sport while rates of participation in organised and team sports (with the exception of soccer) remain steady or are declining. These changes are driven by broader societal trends: people are spending more time at work or caring for others, which means their discretionary time for sport is fragmenting. Taking part in structured and organised sport (at a set time of the day, at a set day of the week) does not always meet people's needs. Hence, social and non-organised sport is an increasingly attractive way for people to get the health benefits that come from physical activity.¹

Reflecting this change, the National Sports Plan should include a definition of sport that includes organised and non-organised sport, social sport, and physical activity. This definition is broader than the one in the Australian Sports Commission's Act (1989) and the one used by the Intergenerational Review of Australian Sport 2017.²

The National Sports Plan should also consider the role of current sporting organisations and the governance structures they need to adapt to this change. This may include supporting revised governance structures of sport; reorienting funding to support community participation that is broader than club membership; and supporting workforce capacity and development to provide a broader range of sustainable sport offerings, tailored to meet consumer preferences.

3.2 Participation in sport and physical activity is not equally distributed

While sport and physical activity is a large part of Australia's national identify and important for health and wellbeing,³ too many people miss out. Less than a third of Australians get enough physical activity to benefit their health. Sixty seven percent of Australians aged 15 years and over are either sedentary or have low levels of exercise, while just 19% of children aged 5-17 years do enough physical activity to meet the guidelines of 60 minutes of physical activity per day.⁴ Further, levels of physical activity follow a social gradient. People with lower levels of education, living on lower

incomes, or living in disadvantaged areas are more likely to have lower levels of physical activity compared to those who are more socially advantaged.⁴

There are a range of groups – including women and girls, Aboriginal people, low income households, and people living with disabilities – who are less likely to engage in sport and active recreation than the general population. Barriers to participation include discrimination, financial and transport costs, inaccessibility of facilities, and family circumstance.⁵ VicHealth research shows that barriers to participation in sport and recreation impact on people differently across <u>different life stages</u>.⁶ These can be exacerbated when sporting organisations and groups are not welcoming or inclusive, and when environmental factors, including the built environment, act as a barrier to participation, including to walking and cycling.⁷

VicHealth has had a strong focus on inclusive participation in sport and we have partnered with 31 State Sporting Associations to enable organisational and cultural change to make sport more welcoming and inclusive. Under our State Sporting Association Participation Program, organisations created safe, accessible, inclusive and equitable sporting environments to increase participation for women and girls, Aboriginal Victorians, culturally and linguistically diverse communities, and people with a disability. VicHealth's Everyone Wins framework underpinned this program.

3.3 Sport can adapt to the changing nature of participation

To help sport adapt to the changing nature of participation and to address barriers experienced by disadvantaged groups, VicHealth has a range of investments to help sporting organisations develop new offerings that are fun, social and flexible, which engage people who are inactive or less active to become more active. Three examples of our approach are:

- <u>Innovation Challenge: Sport</u>: this provides funding and support to sporting organisations to develop and test new ideas and concepts that tackle obstacles often blocking people from playing sport. Sporting groups have developed new programs and activities that are flexible and fun, provide more places to play, and engage disadvantaged groups with lower rates of participation.
- State Sport Program: this program helps State Sporting Associations develop new sport participation programs, to bring new national programs to Victoria (e.g, Fast 4 Tennis), and to extend existing programs to engage people who are less active (e.g, Summer Sevens soccer). The focus is on breaking down common barriers to participation in traditional sporting activities including time constraints, accessibility and cost. Twenty-one State Sporting Associations have participated in the program.
- Active Club Grants: VicHealth provides small grants to community sporting clubs to increase opportunities for Victorians to participate in community sport. Our most recent funding rounds have prioritised greater female participation in sport, and greater participation in social and modified forms of sport as its two key outcomes. Sporting clubs could address these outcomes by developing new participation opportunities or implement an existing State or National sport program at a club level.

3.4 Gender equality in sport

Women and girls are less likely to participate in organised sport than men and boys, although women's participation in activities that are not competitive – such as walking – is higher than men.⁸

A Victorian <u>Inquiry into Women and Girls in Sport and Active Recreation</u> noted that "participation and leadership in the sport and active recreation sector is still culturally dominated by men and boys ... [which are] the result of deeply entrenched practices, cultural norms and stereotypes that are perpetuated and reinforced in our broader society". The same inquiry developed a positive vision for change, one where "women and girls in all roles in sport and active recreation are the norm and where females and males have the same choices and opportunities to lead and participate".

Earlier this year the Victorian Government released <u>Safe and Strong: A Victorian Gender Equality Strategy</u>. The strategy is a framework for sustained action to build the attitudinal and behaviour change required to prevent violence against women and improve gender equality. The strategy notes that sport and recreation are not only critical to female empowerment and good health, but is also an important vehicle for change.¹¹

VicHealth's soon-to-be-released Gender Equality and Health Strategy has a vision where everyone can realise their full potential for health and wellbeing, regardless of gender. Our strategy will show how VicHealth will work across a range of settings, including sport, to improve gender equality. One example of our approach is Changing Our Game - Advancing Gender Equality in Sport for Women and Girls Program 2017-2020, which aims to embed gender equality in sport by:

- Boosting participation by creating new opportunities for female participation in sport and engaging women who are inactive or somewhat inactive to become more active.
- Increasing the **profile** of women's sport and improving attitudes towards gender equality in sport.
- Improving **organisational leadership** by through better sport policy and practice and creating welcoming and inclusive environments for women and girls.

To be eligible for VicHealth funding, elite sporting organisations, State Sporting Associations, National Sporting Organisations and Regional Sports Assemblies will be required to have at least 40% self-identified female representation on their boards by 1 July 2019.

Recently, VicHealth announced it will bring Sport England's highly successful <u>This Girl Can</u> campaign to Victoria, which aims to help women overcome their fear of judgment about their fitness level, ability, or how they look and to participate in sport. A VicHealth survey found that 41% of women said they were too embarrassed or intimidated to participate in sport or exercise; these are major barriers for many for the 60% of women who are not sufficiently active.¹²

4. Prevention through physical activity

Recommendations

- 5. The National Sports Plan should include a vision where health and wellbeing is part of the core business of sport.
- 6. The National Sports Plan should broaden its definition of prevention to include the major risk factors for chronic disease.

4.1 Broaden the definition of prevention

VicHealth believes the National Sports Plan should have a vision where **health and wellbeing is part of the core business of sport**. To achieve this vision, the National Sports Plan should broaden its definition of prevention to include the major risk factors for chronic disease. While there is a strong evidence showing the range of health, social, environmental, and economic benefits associated with physical activity, ⁴ physical activity alone will not prevent ill health.

In addition to physical activity, a broader definition of prevention would include reducing tobacco use, promoting healthy eating, preventing harm from alcohol, and promoting mental wellbeing.¹³ These risk factors are widely accepted as the major contributors to the burden of chronic disease,¹⁴ which cause eight out of every ten premature deaths and account for 36% of all health expenditure.¹⁵

There is strong evidence that prevention works, saving lives and health costs.¹⁵ By adopting a broader definition of prevention, the National Sports Plan will be better placed <u>'to identify how to use sport to achieve population health goals and reduce the burden of chronic disease'</u>.

4.2 There is good evidence that sport can promote health and wellbeing

Sport can be a strong partner for health, including promoting health and wellbeing and positive social norms. These are highlighted by three examples from VicHealth's work:

- From 2012 to 2015, VicHealth partnered with nine Regional Sports Assemblies to support the development of sustainable policies in rural and regional sporting clubs. Under the <u>Healthy Sporting Environments</u> Program, 250 clubs in regional and rural areas received support to improve club environments with a focus on: the responsible use of alcohol; healthy eating; reduced tobacco use; inclusion, safety and support; injury prevention and management; and UV protection. This pioneering program has given VicHealth an understanding of how health promotion can be weaved through grassroots sports clubs.
- Since 2014, <u>VicHealth</u> has supported the Western Bulldogs Football Club to help it deliver <u>Sons</u> of the West. This is a community men's health initiative to support men living in Melbourne's west to lead healthier lives. By partnering with an elite sporting club, the program is uses the power and passion of football to connect with men to improve their health.
- While many groups in society face barriers to participation, the sport and recreation sector has demonstrated that it can lead change to provide welcoming and inclusive environments. The

2016 and 2017 <u>AFL Pride Game</u> between St Kilda Football Club and the Sydney Swans showed that although there is a way to go to change community attitudes and behaviour towards LGBTIQ communities, sporting clubs can take a public stand to raise awareness and educate the community about the importance and benefits of being more inclusive for LGBTIQ supporters, players and officials.

5. Sporting infrastructure

Recommendations

- 7. The National Sport Plan should embed health as an explicit consideration for all sporting infrastructure as it is planned, developed and used.
- 8. The National Sports Plan should highlight the role that sporting stadia and community sport and recreation facilities can play to promote health and wellbeing.
- 9. The National Sports Plan should highlight the importance of planning and design to support physical activity.

5.1 Sporting infrastructure is more than stadiums, courts and ovals

Sporting infrastructure is often thought of as the physical building, such as a stadium, where sport is played. However, sporting infrastructure can take many forms, and the settings where sport and physical activity are enjoyed can be important environments that promote health and wellbeing.

Sports infrastructure and facilities can help reduce the availability and promotion of unhealthy food and drink options (including alcohol and sugar-sweetened beverages); smokefree environments; inclusive, female-friendly and family-friendly social and physical environments; built and natural shade; safety from injury and crime; and environmental sustainability.

As well the settings where sport is played, health promoting infrastructure includes the built environment and associated infrastructure that supports people to be active. Among other things, includes access to public transport, walking and cycling paths, and lighting to improve safety.¹⁶

The Victorian Government and the sports sector have developed a series of guides and resources for infrastructure planning, many of which are listed in the <u>Victorian Community Sport Infrastructure</u> <u>Fund guidelines</u> (see page 11). Resources and programs such as the <u>Healthy Choices policy guidelines</u> <u>for sport and recreation centres</u>, <u>Quit Smokefree Sports</u>, <u>Design for Everyone Guide</u> and <u>Good Sports</u> are particularly relevant to the National Sports Plan.

VicHealth has also developed specific tools and resources that support healthy sports infrastructure that are relevant to the National Sports Plan. These are:

- <u>Building the business case: healthy food and drink policies</u>: VicHealth has developed a suite of
 resources for sport and recreation groups and facilities, local governments, and health services
 that builds the case for the economic and public health benefits of implementing healthy food
 and drink policies.
- VicHealth has worked with <u>Etihad Stadium</u> and developed guidelines for <u>local governments</u> to install water fountains to promote and increase access to free drinking water. The <u>VicHealth Water Initiative</u> promotes water as the beverage of choice in sport stadiums and public spaces, including sports and recreation centres, sporting clubs, walking trails and open spaces. This work is currently being expanded within community sport and club facilities through our <u>Water Initiative</u> grants to State Sporting Associations and local councils and through <u>Regional Sports Assemblies</u>.

6. Sources of funding, including a national good causes lottery

Recommendations

- 10. The National Sports Plan should focus on funding models that boost equal participation in sport and physical activity to improve population health outcomes.
- 11. The National Sports Plan should take into account the range of harms associated with gambling.

6.1 Participation for all

VicHealth is pleased the Australian Government is looking at ways to increase funding for Australian athletes and to increase community participation in sport. As this submission points out, there are a number of ways sport can boost participation and VicHealth would be happy to work with the Australian Government to explore different funding models that achieve this aim.

While the success of Australian sport at the elite level is an important consideration for the National Sports Plan, funding models should focus on improving population health outcomes, including the health and wellbeing of disadvantaged communities. With this in mind, the proposal for a national lottery would appear to run counter to the National Sports Plan's pillar of prevention. There is a risk that a lottery will help <u>normalise gambling</u>¹⁷ by associating it with supporting Olympic success, and exacerbate the considerable harms from gambling experienced by thousands of Australians.

6.2 Gambling harms

Australians spend up to \$20 billion each year gambling, including \$12 billion on electronic gaming machines (pokies) and \$2 billion on lotteries. While the Productivity Commission has noted that the risks of problem gambling are low for people who only play lotteries, there are nonetheless significant harms associated with gambling.

The harms from gambling are experienced by individuals, their family and friends, and the broader community and include poorer health and wellbeing.^{20,21,22} A study for the Australian Institute of Family Studies that examined the impact of gambling problems on families found it affected the functioning of family and intimate relationships; led to financial difficulties; is associated with family violence; and has a negative impact on family members' health and wellbeing, including excessive drinking, smoking, and poor diet.²³

Gambling harms are felt most heavily by lower income households with gambling losses concentrated most heavily in areas of socioeconomic disadvantage.^{24,25} Given that ill health and the risk factors for chronic disease follow a social gradient,²⁶ a national lottery runs the risk that its cost will be born most heavily by those who can least afford it.

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