### (PP) COMMUNITIES ON THE MOVE

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#### Context

Physical inactivity is the second highest risk factor when it comes to disease and premature death. Furthermore, there is a relationship between health and socio-economic standing; the lower the latter, the poorer the healthier. Although lack of physical exercise causes a great number of health problems, this is hardly ever translated into policy. In 2003, this prompted the Netherlands Institute for Sports and Physical Activity (NISB) to launch a two-year project called "Communities on the move". The project's aim is to develop a community approach that focuses on stimulating an active lifestyle among specific groups in a low socio-economic position.

Three themes form the core elements of the community approach, in relation to the "community", active participation and enjoying physical activity. A community is a group of people who live in a certain area and have a particular relationship, such as the same cultural or ethnic background or a shared health problem. The social surroundings of the group are also part of the community, so the assumption is that the activities you organise for a group can have a positive effect on the social environment.

Active participation is another feature of the community approach. By allowing the target group to play a leading role in the organisation, the execution and the atmosphere of the activity, you encourage a more active lifestyle.

The final element is fun. If the participants have fun doing the activities, there is a better chance that their behaviour will change in the long run.

Apart from these three themes, the physical and social environment that influence whether groups of people pursue an active lifestyle or not, is an important aspect of the community approach. Furthermore, community approach requires co-operation between various organisations at a number of different levels.

### **Project/Partners**

The aim of the project was to acquire an understanding of the way in which the community approach can be applied to encourage people, whose socio-economic circumstances negatively affect their health and physical activity, to take more exercise and pursue a more active lifestyle.

The scheme comprised 11 pilot projects, all of which were monitored and supported. The target groups consisted of immigrant women, primary school children, refugee children, children attending pre-vocational secondary education, people with a mental handicap and elderly people.

The NISB provided the project supervisors and field staff with support in the form of guidance meetings and masterclasses, during which practical experiences are linked to the knowledge available from the national institutes responsible for promoting good health (including the Netherlands Institute for Health Promotion and Disease Prevention (NIGZ) and the Netherlands Institute for Care and Welfare (NIZW)). Topics on the agenda included quality requirements, instrument development, method development, monitoring and assessment. The NISB also

organised study days to enable project participants to share the experiences gained in pilots with other parties in this field.

Monitoring and assessment focused on the effects and the processes involved around the key elements of community approach. For this NISB, together with an external organisation, they developed a monitoring and evaluation scheme. The local organisations and groups were the main source of information.

The organisations responsible for the pilot projects included:

- municipal councils
- area health authorities
- local welfare organisations (neighbourhood and district organisations, homecare)
- educational bodies/schools
- local sports organisations
- provincial sports councils

A reference group comprising representatives from national organisations monitored the project and provided general advice, and was involved in the implementation of the new approach. They included the Wageningen University, the National Consultative Body for Cultural and Social Education, the Netherlands Area Health Authority, the Ministry of Health, Welfare and Sports, and the Hanze University Groningen.

# Results

The participants spent two years acquiring insight into how the various aspects of the community approach could be carried out, both among the target group and the organisations involved. The target group has begun to take more exercise and has become more aware of the aspects of an active lifestyle. More experience has been gained as to how the problem should be tackled and instruments have been developed to encourage people to become more active. A new set of physical activity options has also been specially developed for the target group. The organisations have acquired the knowledge and experience required for joint implementation of the community approach. This was the first time many of the sports and health organisations have worked together. What has also been learned is what competences the professionals need to put into practice. The project assessed the preconditions required for the implementation of the community approach to physical activity at the local level.

# **Discussion/Implications**

For two years, the NISB has used the 11 pilot projects to study whether you can get people to take part in physical activity by operating in their community and whether that can have a positive impact on the development of an active lifestyle. This required a number of organisations to work together at various levels. Each organisation underwent a process entailing the development, application and study of activities and methods designed to encourage physical activity and the pursuit of an active lifestyle. The NISB had no cut-and-dried answers to the questions involved, but did create the conditions required to find the solutions. The participant organisations were able to exchange experiences and reflect on their work at a series of masterclasses and study days. The resulting insight and experiences are to be translated into methods and instruments that the NISB will hand over to other parties, so that physical activity and an active lifestyle can be stimulated in other regions.

The projects have shown that the target groups are highly receptive to physical activity and have a great deal of fun doing it. The community approach is extremely labour intensive, however. Working with the target group and their surroundings and

collaborating with other organisations demands a great deal of time. The question 'whether the community approach is a useful approach to reach inactive people' depends mainly on the professionals involved, who are expected to apply new working methods and develop new competences. In short, the organisations and their policies will have to change as well. If this is possible, what is necessary to embed the community approach at local level, or to apply it nationally? And what are the opportunities available to sports and physical activity organisations?

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