



Healthy children – action the *Active Travel Charter for Children*

The *NSW Active Travel Charter for Children* was launched at the International Walk 21 Conference in Sydney in October 2014. The Charter was supported by 15 Government agencies and NGOs with an interest in children's health and well-being, including NSW Health, Transport for NSW, the Department of Education, Office of Environment and Heritage, The Federation of Parents and Citizens Association, the Association of Independent Schools of NSW, Catholic Education Commission of NSW and the Heart Foundation.

However, to date, no funding has been made available to implement the Charter.

A plan and accompanying resources have been developed by NSW Health's Office for Preventive Health. This is available on the Healthy Kids website:

<http://www.healthykids.nsw.gov.au/campaigns-programs/childrens-active-travel.aspx>

However, as children's travel behaviour is the result of multiple factors, including parental attitudes, school support and local physical environments, the Office identified that changing children's behaviour will require action across Government agencies and within the community. This will include support from local councils to provide safe walking and cycling paths, support from schools to encourage parents to use active transport rather than private cars to drop off and collect children, and support from State Government planning agencies to design and fund significant active travel infrastructure which is connected, family friendly and accessible.

The *Active Travel Charter for Children* is the first step in fostering collaboration between agencies to address the barriers to children's active travel.

Why the *Active Travel Charter for Children* is needed - the health benefits

Overweight and obesity rates in children have increased alarmingly since 1985 when only around 11% of children were overweight or obese. Although there are signs that the rapid increases between 1985 and 2004 have plateaued there is no room for complacency, with between 23% and 27% (depending on the study) of children under the age of 17 currently categorised as overweight or obese¹.

Reducing childhood overweight and obesity is one of the NSW Premier's Priorities, with a commitment to reducing overweight and obesity by 5% over the next 10 years. The reason for the increase in overweight and obesity is complex, with contributions from poor nutritional habits and insufficient physical activity. NSW Health's *Healthy Eating and Activating Living* (HEAL) Strategy has in place a range of initiatives to address these causes.

However, the growing trend for children to be driven in cars to their everyday destinations – rather than using active transport such as walking, cycling, riding a scooter etc - is an issue which needs its own strategies. In addition to its impact on weight management, both insufficient physical activity and increased sedentary behaviour are both, independently, risk factors for poor health.

Compared to previous generations, the use of active travel modes by children – walking, cycling, using a scooter etc – rather than passive modes such as being driven by car is rapidly declining. There was a 42% decline between 1971 and 2013².

Children aged between 5 and 17 now average 18 minutes per day in active transport – with 5 to 8 year olds averaging about 13 minutes and 15 to 17 year olds 24 minutes. This is far below the 60 minutes per day of moderate to vigorous physical activity (MVPA) recommended by the Australian physical activity guidelines³.

Children who use active transport to get to or from school are not only more physically active than those who do not but also accumulate more daily minutes of health enhancing activity, take more steps, expend more energy over the day and generally have better health related fitness⁴.

Children and young people who are active on a daily basis are less likely to be overweight or obese, at reduced risk of developing conditions such as Type II diabetes and metabolic syndrome, are more likely to see improvements in aerobic fitness and bone health, and experience positive mental health benefits⁵. In addition to the general health benefits, active transport participation promotes social connectedness, a sense of independence, and can improve a child's spatial awareness and knowledge regarding road rules and safety. Beyond the individual-level, high use of active transport can create safer neighbourhoods by diffusing traffic congestion and reducing air pollution levels, especially in high volume destinations such as around schools.

As with adults, helping children become more active as part of their everyday activities will help to instil healthy habits which are sustainable across their lifetime. Children who walk, cycle, or catch public transport for everyday short trips will grow up thinking this is normal and continue to choose active travel modes into adulthood.

Why the *Active Travel Charter for Children* is needed - economic assessment

It is difficult to do cost benefit analyses on health interventions which improve children's health. Adult lives have monetised values modelled from their contribution to Australia's economy through income production, tax payments, productivity etc. Children's lives, on the other hand, are often valued through the economic impact on parents of a child's death, illness or disability or the impact of a childhood risk factor or illness on their future adult economic contribution.

One attempt to model the impact of increasing children's walking or cycling to school was undertaken by the Cyclesafe Network⁶ which assessed the impact of children living near the CSN cycling to school rather than being driven by their parents. There is a high degree of unknowns in the model used, such as the monetised benefit of the health improvements to the children. However, the model does take into account broader transport and environmental benefits which come from reducing car use.

There are 63,000 children located within the catchment area of the CSN and 93 of the region's 125 schools are located within 500m of the proposed paths. If only 5% of those

children began using the CSN for trips to and from school the 'monetised' benefits (using the Transport for NSW Bike Facility Tool) were calculated as \$8.8 million per year.

How much needs to be spent on the *Active Travel Charter for Children* to make an impact

The Heart Foundation believes a commitment of \$12.5 million over 4 years, shared between 5 key agencies, can deliver a critical mass of community led programs to identify and remove local barriers to active travel and make changes which will motivate children and their carers to be more active in their everyday lives.

We propose that \$12.5 million over 4 years (\$3.1 million per year) be split across budgets of:

- NSW Health – Office of Preventive Health
- Transport for NSW
- Dept of Education
- Dept of Planning and Environment
- Office of Local Government

This would amount to about \$625,000 from each department's budget, each year for 4 years. Each department would take responsibility for the roll out of its own programs but we suggest the Premier's Council for Active Living (PCAL) be tasked with developing an implementation plan in collaboration with the five agencies and enhancing co-ordination and collaboration between the agencies.

We suggest the Office of Preventive Health be tasked with evaluation and reporting impacts/outcomes in order to align the programs with the Ministry for Health's strategic plans to meet the Premier's target for the reduction of childhood overweight and obesity.

How the money would be spent:

The NSW Healthy Town Challenge run by the NSW Office of Preventive Health has demonstrated how local communities can leverage small amounts of funding to deliver high value campaigns which promote community health behaviour changes.

Some suggested activities which could be branded under the NSW *Active Travel Charter for Children* initiative include:

- Small grants to local schools-based groups to assess local needs and implement an active transport plan for children at individual schools – Education budget
- Grants for local councils to assess and remedy local concerns about safety in areas where children travel, identifying accident hot spots, faulty footpaths, parking issues around schools etc - Transport & Infrastructure budget
- Small grants for local community groups (could include local councils) to identify and address parental attitudes which act as a barrier to children using active travel modes – Planning & Environment budget

- Augmentation of the Healthy Kids website with videos, games, case studies etc to provide a central resource for participating communities – Health budget
- Targeted activity for Aboriginal communities and disadvantaged schools in conjunction with existing health promotion programs (such as Knock Out, Aboriginal Go4Fun) – Health budget

Contact for further information

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¹ NSW Ministry of Health, Snapshot of Childhood Overweight and Obesity – Healthy Children Initiative, June 2014.

² Active Healthy Kids Australia (2015). The Road Less Travelled: The 2015 Active Healthy Kids Australia Progress Report Card on Active Transport for Children and Young People. Adelaide, South Australia: Active Healthy Kids Australia. pp12

³ Active Healthy Kids Australia (2015). The Road Less Travelled: The 2015 Active Healthy Kids Australia Progress Report Card on Active Transport for Children and Young People. Adelaide, South Australia: Active Healthy Kids Australia

⁴ Active Healthy Kids Australia (2015). The Road Less Travelled: The 2015 Active Healthy Kids Australia Progress Report Card on Active Transport for Children and Young People. Adelaide, South Australia: Active Healthy Kids Australia. pp4

⁵ Active Healthy Kids Australia (2015). The Road Less Travelled: The 2015 Active Healthy Kids Australia Progress Report Card on Active Transport for Children and Young People. Adelaide, South Australia: Active Healthy Kids Australia. pp4

⁶ The Cyclesafe Network Steering Committee 2016. The Cyclesafe Network Active Travel Infrastructure Project: Consultative Draft