Active Living: Has the Concept Done the Job?

Dr Art Quinney
Dean of Physical Education and Recreation
University of Alberta

The concept of Active Living has its roots in the 1986 Canadian Summit on Fitness. At this meeting, there was a consensus that there was a need to reposition the fitness message so that it would impact a broader audience of Canadians. The prescriptive nature of the fitness message that had dominated our approach in the '70s and early '80s had attracted many people to alter their lifestyle to include an exercise component. However, it was believed that the message did not resonate with a large segment of the Canadian population. It was also argued that many could not identify with the narrow cardiovascular fitness approach in which fitness was seen as intimidating and did not meet their needs. Fitness activities were also seen by some as requiring special clothing, extraordinary time commitment, and special equipment and facilities.

The results of the 1981 Canada Fitness Survey also provided clear evidence that there would be a systematic barrier to a physically active lifestyle if we continued to present only a message that required Canadians to exercise vigorously following the Frequency, Intensity, Time and Type (FITT) principle.

The Active Living concept was intended to embrace the full continuum of physical activity from vigorous aerobic activity and training for elite sport performance to walking and cycling as a family activity. Active Living encourages Canadians to make individual choices about how they can include physical activity into their daily routines. Active Living was also to be an inclusive message that promoted a physically active lifestyle for everyone including children, frail elderly, persons with a disability and cultural minorities (Makosky 1994, Edwards 1994).

The Active Living concept was also supported by the concept that moving from a sedentary lifestyle to incorporate some regular physical activity into daily routines is a positive change. There is solid research to support this message. Regular, moderate intensity exercise does provide some health benefits. (See Figure 1) but participation in regular, vigorous physical activity provides the optimal conditions for health and quality of life outcomes.

A number of prominent scientists have criticized the concept of Active Living, particularly on the basis that the message is unclear, diffuse and lacking the ability to measure and evaluate outcomes. They argue that in attempting to create a "feel good, do whatever you would like" approach, that the message of promoting "physical" activity is diminished. There is also some evidence to suggest that these concerns are justified. In recent data collected in Alberta, the number of individuals who are moderately active has increased and the number who were vigorously active has leveled off or decreased. This group of scientists appreciates the need to reach as many Canadians as possible, but believes that the message is not strong enough on the benefits of vigorous physical activity (Bouchard 1994, McPherson 1994).

The specifics of the dose-response relationship of physical activity and health outcomes remain a controversial issue. We have benefited from two national consensus conferences on physical activity, fitness and health but the dose-response issue remains a major area of debate (Bouchard et al 1994). In October 2000, a third consensus process will be undertaken in Canada with the support of Health Canada and the U.S.-based Centers for Disease Control and Prevention in Atlanta to address this issue.

A recent review by Andrea Dunn and colleagues (Dunn et al 1998) provides a modest but supportive conclusion on the efficacy of lifestyle physical activity interventions and their potential for public health impacts. There are now several studies that have compared structured exercise programs to lifestyle physical activity interventions. In these studies, fitness gains and adherence are similar. The lifestyle interventions that have been tested in these cases, though, are well-developed, face-to-face contact interventions with well-qualified research staff in a clinical setting. Other lifestyle intervention research using targeted media campaigns aimed at increasing moderate intensity activity have effectively increased activity levels on an initial basis but the effects are short-lived.

Recommendations from Dunn and colleagues (Dunn et al 1998) for practitioners who are undertaking lifestyle physical activity interventions include:

1. Media campaigns are needed to inform the public of lifestyle physical activity and, in particular, to explain moderate amounts and intensities of activity.
2. Practitioners need to learn how to implement behavioral skills training and utilize these techniques in their programs that are now being taught in public health departments, health clubs, and recreation programs that are now being taught in public health departments, health clubs, and recreation.
Has the concept done the job? (continued from page 1)

departments in order to more widely disseminate lifestyle physical activity interventions.

3. Effectiveness of lifestyle physical activity interventions needs to be assessed by use of simple inexpensive measures such as step counters and activity logs.

4. Cost-effectiveness analysis of community health interventions need to be performed.

-- Dunn, 1998, pp. 409

Much of the controversy surrounding the development of the Active Living concept and its use as a promotion and programming vehicle has arisen because of poor definition of terminology and lack of a solid knowledge base about the concept. Social innovators are quite satisfied with moving forward with a loose conceptual framework to create change, whereas the scientific community requires a more substantive and rigorous adjudication before recommending adoption and implementation of new strategies. As a practitioner, your level of comfort will depend on whether you agree with the Nike slogan “Just do it” or require a more substantive base of information to drive your actions. Innovations must stand the scrutiny of scholars and practitioners and the test of time. Active Living has proven to be a conceptual framework that does have utility in the promotion of physical activity.

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The concept of Active Living is a relatively new one, and the concept of Active Living. For some, this position is no exception. As can be seen in the articles in this issue, there is healthy debate around the concept of Active Living. For some, the concept is a relatively new one, and can be interpreted in many ways. I hope that readers of Wellspring will find this issue stimulating and informative, as I have. —

Figure 1

Health and Benefits of Physical Activity

Time needed depends on effort

<table>
<thead>
<tr>
<th>Minimal or No Health and Fitness Benefits</th>
<th>Light Effort</th>
<th>Moderate Effort</th>
<th>Vigorous Effort</th>
<th>Maximum Effort</th>
</tr>
</thead>
<tbody>
<tr>
<td>Light Activity</td>
<td>Accumulate 60 minutes every day</td>
<td>Small increases in health benefits occur with light activity</td>
<td>Additional health and fitness benefits occur when you build up to moderate and vigorous activities</td>
<td>Too much maximal effort activity may result in health problems</td>
</tr>
<tr>
<td>The greatest increase in health benefits occurs when you move from being inactive (little or no activity) to accumulating 60 minutes of light activity daily.</td>
<td>The health benefits may occur without significant changes in body weight.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• dusting</td>
<td>• brisk walking</td>
<td>• jogging</td>
<td>• spruiming</td>
<td></td>
</tr>
<tr>
<td>• seated activities</td>
<td>• light walking</td>
<td>• biking</td>
<td>• racing</td>
<td></td>
</tr>
<tr>
<td>• gardening</td>
<td>• vacuuming</td>
<td>• swimming</td>
<td>• training for performance</td>
<td></td>
</tr>
<tr>
<td>• Tai Chi</td>
<td></td>
<td>• water aerobics</td>
<td>• competition</td>
<td></td>
</tr>
</tbody>
</table>

What is my breathing like? What is my heart rate (HR)?

- No change from rest – normal breathing
- Slight increase in breathing rate
- Greater increase in breathing rate
- More out of breath
- Completely out of breath

Resting HR
55–64% MaxHR
65–74% MaxHR
75–90% MaxHR
Greater than 90% MaxHR

Range needed to improve health and fitness

WellSpring

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Director’s Note

Active Living – A Way of Life

Judith Moodie

As the new Director of the Alberta Centre for Well-Being, I enjoy continuing my career in a position which involves advocating physical activity. I seem to have often chosen work which involves physical activity in some way, and this position is no exception.

As a very young and keen high school physical education and health teacher in Winnipeg in the early 1970’s, I worked hard to attract the young women in my classes to physical activity. As an athletic and habitually active person, I had a natural rapport with the school’s “jocks” and other students who enjoyed physical education classes. But what could I do with students who hated physical education, and invented new reasons every week for why they could not participate?

Reading the excellent articles in this issue of Wellspring, by Art Quinney, Kim Brotczynski and Gerry Glassford, I learned much about the history behind the concept of Active Living. I realized that if the concept of Active Living had been alive during my brief high school teaching career, then I would have had a useful framework for my work as a teacher. The inclusive message of Active Living would have been more appealing to my “less inclined” students than the typical messages of the day.

The concept of Active Living is inclusive, and invites non-athletes to get active in their own particular way, and in keeping with their own particular limitations. The concept is part of a larger picture of what makes people healthy.

In 1972 I moved to Alberta, and was no longer teaching in the schools on a regular basis. I remember well the early messages of ProActive Action, which encouraged Canadians to improve their fitness level. My interest in fitness and physical activity continued while I raised my children, and I followed with interest the historic events described by Gerry Glassford during these years.

Eventually I returned to university and completed a graduate degree, which enabled me to move away from teaching, and into facilitation, administration and advocacy work.

In 2000, I found myself working as a Proponent of Active Living - a concept I think I have lived by.

The Alberta Centre for Well-Being supports practitioners in their work to improve the health and quality of life of Albertans through physical activity. We are active participants in the National Coalition for Active Living, and we are committed to supporting the goal of reducing physical inactivity in Canada by 10% by 2003 which was set by the Canadian ministers responsible for fitness, recreation and sport.

As can be seen in the articles in this issue, there is healthy debate around the concept of Active Living. For some, the concept is a relatively new one, and can be interpreted in many ways. I hope that readers of Wellspring will find this issue stimulating and informative, as I have.

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Active Living!! Currently this word couplet has nestled the coattails of the national recognition quality of ParticipACTION but its social marketing value continues to grow throughout Canada and the world. In fact these two physical activity-linked icons are merrily related and have been since 1987 when the word couplet, Active Living, was created by a small working group drawn together by Lyle Makosky (then Deputy Associate Minister of Fitness and Amateur Sport). The meeting was held at Mont St. Marie and the task was to find ways to move our country toward the vision created by the participants of the Canadian Summit on Fitness (Ottawa, 1986). At the Summit the challenge had been clear – map out the fundamental principles for a re-vitalized fitness movement in Canada. The message that emerged was sharp and focused. A fundamental change was required in the way we viewed and marketed fitness and physical activity in our country. The Summit participants sold us that our fitness/physical activity focus had been too narrowly construed and communicated. What was needed was a broad, inclusive approach; an approach wherein fitness could emerge as a Canadian cultural trademark. What were the seminal forces which produced these two watershed events and led to the establishment of the Active Living conceptual model?

To better appreciate and more fully understand these events, we need to take a few steps backward in time. I will start in the mid-1950's when the results of the Kraus-Weber tests were released. This broadly interpreted test of fitness was born in Europe after World War II. The test was motivated by concern among Europeans for the fitness (and health) status of their youth. Once data from these studies were released, the researchers were invited to the USA to conduct a comparable study. Our American “cousins” feared unavourably when contrasted with their European counterparts. The shock waves were felt up to the level of the White House and resulted in Eisenhower’s creation of the President’s Council on Physical Fitness. Canadian youth were not tested by Kraus and Weber but a general assumption was that Canadian youth would do little better than their American “cousins”. The gauntlet had been thrown (our youth had been tested by European youth) and physical educators picked it up. The Canadian Association for Health, Physical Education and Recreation (CAHPER) championed the need for increased emphasis on high-quality school physical education and improved levels of youth fitness. Unfortunately, as is the case today, physical educators had little political “clout”. Socio-cultural change was not about to occur easily. Only the converted were listening to CAHPER’s messages. We needed help. And it arrived in the form of the Duke of Edinburgh, Prince Phillip.

In 1959 the Duke had been invited to address the Canadian Medical Association (CMA). Here was a powerful spokesperson for youth and fitness, a staunch advocate of Britain’s Outward Bound Movement. Here was a voice that would not be calling in the “wilderness”. But the Duke had little first hand knowledge of the fitness levels of Canadian youth. Canadian champions of the physical activity-physical fitness movement like Doris Plesew and Gordon Wright quickly corrected that shortfall. Armed with solid Canadian data, Prince Phillip challenged the CMA to advocate for positive changes in the fitness and physical activity levels of Canadians. The effects of his speech have echoed down the corridors of time. Spared by the Duke’s address, the CMA’s position that conversion of political advocates urged the government to take policy action. By 1961, Bill C- 131 An Act to Promote Fitness and Amateur Sport had been passed by parliament. We now had a base upon which to build. The ensuing 40-years have been a “great and yeasty” time, a period of rampant change for Canadian fitness and sport. We had federal government funding, a minister and a bureaucracy to help meet the challenges, three new fitness research centers, and scholarships to enable Canadians to pursue advanced degrees in the field of physical education, health, and exercise physiology. Within a few years, we had a new Sport and Fitness Centre at 33 River Road, Vanier, Ontario. Sport Canada, Recreation Canada, and ParticipACTION (created in 1973 from ParticipACTION) were created before the end of the decade of the 60’s. We had already established the Canadian Social structure for the fitness, physical activity and sport movement. Remaining efforts were directed to the broad goals of enhancing the fitness levels of Canadians. Our social marketing group, ParticipACTION, carried the fitness/physical activity message into every home. Canadians were distressed when they were told that “the average 30-year-old Canadian was about as fit as the average 60-year-old Swede.” But, increasingly, Canadians were responding to the health messages. The country was rife with great GOHA (Get Off Your . . . ) ideas. And other agencies were helping. Three other events occurred in the early 1970’s that formed a part of the foundation of Active Living. Between 1970 and 1972, a national Nutrition Survey was completed. Not surprisingly, our data identified high levels of inactivity among Canadians and the authors of the report noted the need for intervention to counteract this serious health-related problem. These, and related concerns, were fresh in the minds of participants in a December 1971 workshop on the Health of Canadians. Recommendations from this forum hammered home the collective concern about the low levels of physical activity among Canadians. Our nature as a collective of health professionals emerged on the national stage as a serious health concern. These two events produced a third – the publication in 1974 of the internationally acclaimed A New Perspective on the Health of Canadians. To lend credibility and to enhance its impact, the Minister of National Health and Welfare, Marc Lalonde, added his name to the document. For the first time in Canada, and the behavioural model was clearly recognized as important in the broad sphere of health. Fitness, physical activity, and health promotion were on our national agenda. Physical inactivity had gained important recognition as a significant health risk factor. In 1974, physical inactivity gained important recognition as a significant health risk factor.
**Spring child, Nathan Cole (7 lbs., 14 oz.), on January 27th.**

Also, congratulations to Russel and Jennifer Tuininga on the birth of their first Studies this June.

Sneaking Into Summer!

Fitness Unit (all located at the Percy Page Centre (PPC)) will be holding a sneaker contest to promote physical activity to employees at the PPC. The contest categories will include “Funkiest Sneaker”, “Cleanest Sneaker” (time to finally take your brand new shoes out of the closet” and “Most Mileage Sneaker” (older/well used). If you are in the area, come and join us at noon for the activities and festivities!

**Milestones**

Congratulations to Jennifer Hystad, ACFWB Older Adult Coordinator, for being our new Older Adult Coordinator. Also, congratulations to Russel and Jennifer Trainings on the birth of their first child, Nathan Cole (7 lbs., 14 oz.), on January 27th.

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Strength in Numbers – The ALP partnership
Katherine MacKeigan, Director
Provincial Fitness Unit, University of Alberta

The ALP is a group of organizations and programs whose mission is to increase the number of Albertans who are physically active and the capacity of the practitioners who assist them, through collaborative programs, services, research, and advocacy. The five organizations that comprise the ALP are:
- Alberta Centre for Well-Being (ACFBW)
- Schools Come Alive (SCA)
- Alberta Fitness Leadership Certification Association (AFLCA)
- Fitness Appraisal Certification and Accreditation Program (FACA)
- Be Fit For Life Network (BFFLN)

A Look Back

With the 1986 Canadian Summit on Fitness, leaders in the industry began to change their view of fitness. A vision was born: to encourage people to integrate physical activity into everyday activities. Physical activity was making the connection to well-being, health promotion and lifestyle behaviours. Alberta became one of the first provinces to recognize the importance of assisting communities to develop the means to encourage participation in physical activity. In 1988, Alberta Recreation and Parks, along with Alberta Lotteries, supported the Active Living movement by supporting Active Lifestyle programs and services in Alberta. In 1992, the American Heart Association, supported by the Canadian Heart and Stroke Foundation, announced that physical inactivity was a major risk factor for coronary heart disease. This announcement significantly increased the profile and importance of physical activity and the Active Living movement. The health connection was now well established.

Birth of ALP

In Alberta, a number of organizations were working hard at promoting physical activity and Active Living. There was an underlying need for a mechanism that would bring the various organizations together. In 1988, the Federal Health and Welfare

Active Lifestyle Portfolio

Alberta Centre for Well-Being
Alberta Sport, Recreation, Parks and Wildlife Foundation
Alberta Community Development

A Way of Life

continued from page 3

data based on the long-term research projects carried out by scholars like Ralph Paffenbarger and Stephen Blair were appearing in the literature. At a risk of over simplifying some complex results, it appeared that a peak level of health benefits accrued to participants somewhere near a scale point of moderate levels of physical activity. The graph of the two variables, level of physical activity intensity and health benefit, was not a positive, linear slope. It was more nearly shaped like the inverted “U”.

Summary

Brevity must necessarily do an injustice to the history of Active Living. The Canadian Summit on Fitness marked the turning point in our drive to make physical activity an integral part of the lives of Canadians. The message was clear and the total qualities were strong – Canadians wanted a more inclusive movement, a movement based on principles of equity, empowerment, and sensitivity to the premise of sustainability of both our social and physical environments. Canadians wanted a movement founded on the principle of personal choice. The new movement must have a collective voice; it must champion high level advocacy; it must be based on excellent research; and it must integrate the key elements of health – mental, social, physical and spiritual well-being.

Perhaps the people at the 1992 Fall Forum on Active Living captured the vision of this social movement best. Their dream was to encourage Canadians to integrate regular physical activity into their daily routine. The ALP was established.

References available on request

Gerry Glaesford has been a part of the Active Living movement since 1961. He can be reached at the University of Alberta, Centre for Health Promotion Studies at (780) 492-1348 or through e-mail at gerry.glaesford@ualberta.ca
The Active Living Shift

From public to private responsibility for health

Kim Bercovitz, Ph.D.
University of Waterloo and The University Health Network (Toronto)

Over the past decade, Canadians have witnessed a shift from high intensity exercise, as exemplified by “Active Living.” This shift represents a critical turning point for fitness policy and practice in Canada. By broadening the scope of physical activity to include daily activities such as gardening, housework, and walking or cycling to work, Active Living is intended to be more accessible to the public, especially the sedentary and “hard-to-reach,” thus rigorous exercise.

The promotional literature on Active Living is punctuated by “user-friendly” words such as “well-being,” “quality of life,” “lifestyle,” “empowerment,” “community,” and “collaboration.” What do these words mean and what purpose do they serve? One may also question why the shift toward Active Living and why now? This article will examine hidden meanings and political agendas that have arisen in response to the government shift from public health to private responsibility for physical activity.

To a large extent, Active Living evolved because it was ripe for the changing social, political and economic climate. In particular, its birth coincided with socio-demographic changes (the “greying” of the population; rise in multi-generational family units) and changes in the federal role in fitness and health promotion. The rhetoric of living actively diversts attention away from other important social (e.g., gender inequalities, substance abuse, personal safety) and structural (e.g., poverty, unemployment) issues. Too often Active Living is regarded as a “pill” for the “ills” of modern society. Second, to the extent that the social marketing campaigns are top-down (government) driven, they are grounded in a strong middle class and individualistic value system. So far these campaigns are embedded in a “web of power,” it is necessary to question who has the power to define who is worthy of fitness and who has the power to define what is an active and healthy community. As MacNeill (1995) points out, ParticipACTION’s visions of an active lifestyle are grounded in dominant biological definitions of what means to be fit. What predominates in the advertising and public service announcements are middle class heterosexual images. For example, a bare breasted retriever dog (what is commonly known as a “designer dog”) and an array of fresh produce are depicted to suggest that “Just walking the dog...” or “Just walking to the grocery store,” respectively, are illustrative of Active Living. Other physical activities that are promoted by ParticipACTION include: “Just walking to the video store,” domestic activities (e.g., housework, painting, gardening), outdoor activities (e.g., country skiing, sledding, skating, snowshoeing), dancing, bicycling, hiking, camping, and different picnics, many of which are illustrative of family-oriented activities. Clearly, the Canadian lifestyle “culture” as well as opportunity and access to partake in these types of upscale activities.

Third, there is no evidence to suggest that exposure to Active Living messages automatically translates into fits all approaches.” The inviting free-choice rhetoric that encourages Canadians to “just moving” obscures the structural and social psychological barriers to physical activity.

First, the “one size fits all” message ignores the fact that Canadians, particularly the sedentary and hard-to-reach, are not a homogeneous, monolithic population. Instead, they are a heterogeneous group, having diverse tastes, interests, and needs. It is mistaken to assume that a more inclusive and holistic model of physical activity will readily be embraced all Canadians. For some Canadians, especially those with low-income, physical activity or living actively may be neither an option nor a priority lifestyle issue. The overarching message is that all people are encouraged to participate in physical activity, such as walking or cycling to work, every day. However, large part of people do not work and in some neighbourhoods, walking provides an unsafe alternative to public transportation. The rhetoric of living actively diversly attracts attention away from other important social (e.g., gender inequalities, substance abuse, personal safety) and structural (e.g., poverty, unemployment) issues. Too often Active Living is regarded as a “pill” for the “ills” of modern society.

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Third, there is no evidence to suggest that exposure to Active Living messages automatically translates into
The Wave of the Future
Active Living information on the Canadian Health Network

John C. Spence, Senior Research Associate

According to a world wide survey conducted by the Angus Reid Group, Canadians agree that ParticipACTION is doing a good job at promoting physical activity. Yet, based on the strict American College of Sports Medicine fitness definition (i.e., using frequency, duration, and intensity measures), only 11% of Canadians are sufficiently active to accrue physical fitness and cardiovascular benefits. Behaviour change is an individual, complex, and dynamic process. Drawing on the Stages of Change model, individuals progress through several stages of readiness for change, including precontemplation, contemplation, preparation, action, and maintenance. Thus, it behooves social marketers and practitioners to encourage a step-wise progression along a continuum of activity, rather than to use universal messages that encourage persons to move directly from inactivity (e.g., precontemplation) to the action stage of behaviour. Activation is most likely to occur when motivation strategies of behaviour. Activation is most likely to occur when motivation strategies

Stages of Change model, individuals are familiar with the term “Active Living.” Do they participate in daily lifestyle physical activity? Are lifestyle exercise approaches relevant to and inclusive of special populations such as ethnic minorities, persons with a disability or low income individuals? Finally, programs and policies need to be established to support the creation of a healthy community, reduce inequities, and improve access for all Canadians to live actively.

Kim Benoit is a postdoctoral fellow in the Health Behaviour Research Group at the University of Waterloo and the Waterloo Health Program at the University Health Network (Toronto). She can be reached by email: k.benoit@uwatson.ca.

References available on request

RESEARCH CORNER

Each year, local, provincial, and national organizations organize projects and events in communities, schools and workplaces to promote physical activity, particularly to inactive Canadians.

In support of the joint federal–provincial-territorial government target to reduce physical inactivity by 10% in Canada by 2003, the purpose of the SummerActive campaign is to:

- Support efforts by governments, national organizations and community agencies to increase awareness among inactive Canadians of the benefits of adopting an active lifestyle.
- Call attention to the wide range of programs, events and related services that exist at the local level that provide inactive Canadians with trial participation opportunities designed to help them take the first step or “try it” and to “do more, more often.”

The Alberta Centre for Well-Being (ACFWB) and the Leisure Information Network (LIN) in Ontario, on behalf of the national Coalition for Active Living, have been contracted to oversee the Active Living site on CHN. Active Living, as defined on this site, is “creating physical, social and cultural environments that help and motivate people to be active and to integrate physical activity into daily living.” Given that the theme of this WellSpring issue is Active Living 2000, we thought it apropos to discuss this venture.

The CHN and the Active Living site will not serve as yellow pages to the Net. Rather, in most cases, links are not available on a particular issue at other web sites, then we will develop a product to address the need. For instance, if there is a big demand for information on workplace physical activity programs and satisfactory information is not provided from other web sites, then we would develop something in this area. Therefore, one of our tasks is to scan the Internet for relevant information. Another task is to seek advice from consumers, practitioners and expert panels as to where there may be gaps in the information provided. A key concern in this regard is that resources should be available in both official languages.

To provide Active Living information that Canadians will deem to be trustworthy, we will not make links to just any site. Rather, we have knowledgeable staff who will do a content analysis of a site before any link is made. Furthermore, an expert panel will be consulted about the information provided through both our products and the links attached to our site. Along with the need for trustworthy information, we feel it is important for this site to serve as a vehicle for facilitating the link between research and practice (broadly defined). As such, we will endeavour to showcase research and provide brief syntheses of important and current work.

A Caveat

While the Internet is viewed by many to be the great equalizer, comparable to the advent of the printing press, the fact is that many people cannot afford to own a computer much less surf the Net. In some parts of this country, electricity is still considered a luxury. As such, the CHN and the promotion of Active Living on it should not be considered the only wave to surf in the future.

Summary

We are very excited about our involvement in the CHN project. This initiative fits well with our mandate to serve as a recognized source for physical activity information. The fact that we will be working with the Leisure Information Network and interacting with other Active Living organizations from across Canada makes it all the more exciting. We hope to see you out there surfing very soon.

References available on request

Kim Benoit is a postdoctoral fellow in the Health Behaviour Research Group at the University of Waterloo and the Waterloo Health Program at the University Health Network (Toronto). She can be reached by email: k.benoit@uwatson.ca.

References available on request
In the 1997 fall issue of Wellness, several new physical activity and Active Living resources were highlighted. The following titles (and web sites) are an update to that original list.

**Monographs**

- La Fondation en adaptation motrice, Monographies (1999). Malden, MA: Blackwell Science. A comprehensive resource for pregnant women who want to maintain activity, or undertake physical activity as a component of making positive lifestyle changes to promote a healthy pregnancy.
- Lacklin-Vintinner, Angela (1999). Active living during pregnancy. Physical activity guidelines for mother and baby. Ottawa: Canadian Society for Exercise Physiology. A comprehensive resource for pregnant women who want to maintain activity, or undertake physical activity as a component of making positive lifestyle changes to promote a healthy pregnancy.

**Web sites**

- www.canparaplegic.org/guide - The Canadian Paraplegic Association offers a guide in accessible formats for people with disabilities to help maintain activity, or undertake physical activity in their paraplegics and quadriplegics. Topics covered include aerobic exercise, stretching, temperature regulation, nutrition, and the benefits of exercise.
- www.cflri.ca - site of the Canadian Fitness and Lifestyle Research Institute from which you can download Progress in Prevention - a series of bulletins highlighting physical activity trends and practices. LifeSpan - a collection of one page health and fitness articles; and numerous reports and current statistics based on their Physical Activity Monitor surveys.
- www.goldengate.ca/Resources.html - catalogue and order form for numerous Active Living and environmental resources.
- www.lin.ca - The Leisure Information Network has an extensive collection of online resources as well as links to organizations from which materials can be ordered.
- www.participation.com - ParticipACTION offers programs, publications and information soundbytes in order to promote healthy active lifestyles to all Canadians.
- www.hillforyou.org - The Hillforyou Commission of New Zealand has posted numerous resources and links related to sport, fitness and leisure, including policy papers that address physical inactivity as a public health issue and online strategy outline, and the physical activity levels of New Zealanders.
- www.cdc.gov/nccdphp/dph/readyes.htm - The Centers for Disease Control Guide to Promoting Moderate Physical Activity is a national campaign designed to encourage the Americans in becoming more active.
- www.cdc.gov/nccdphp/dhsp/public.htm - Guidelines for School and Community Programs to Promote Lifelong Physical Activity Among Young People (developed by the U.S. Centers for Disease Control).

**Tracy Chalmers Kitagawa**

ACFWB Resource Coordinator

**FROM THE RESOURCE LIBRARY**

**Sneaker Day and National Health Day** - May 12, 2005

**SummerActive - May 12 - Jun 20, 2005**

Since inception in 1995, an estimated 5 million Canadians of all ages and abilities have participated in fun-filled events to promote the health benefits of physical activity. Check with your local community for SummerActive events happening in your area.

**Fit Rendezvous - June 2 - 4, Edmonton AB**


**The International Conference on Sport Technology - June 4 - 6, Calgary, AB**

Hosted by the Sport Research Centre and the Faculty of Kinesiology at the University of Calgary, this conference will draw world calibre researchers, physical educators and sport administrators from applied fields within sport sciences, kinesiology and physical education. Visit www.kin.ucalgary.ca or Em: cspacs@ucalgary.ca.

Beyond 2000: Healthy Tomorrows for Children and Youth - June 14 - 18, Ottawa, ON

Hosted by the Canadian Paediatric Society and the Canadian Institute for Child Health. Some of the major themes include: determinants of health, education and health, access to care, environmental influences on child health and development, and children with special needs. Contact: Canadian Paediatric Society 100-2248 Chemin Widmer Road, Ottawa ON K1C 6L7 Ph: (613) 526-9397, Fax: (613) 526-3332. Em: beyond2000@cpps.ca.

**32nd Annual Community Development Conference - July 23 - 26, Salt Lake City, UT**

“Rising Tide: Community Development for a Changing World” International Focus on the Atlantic. Contact: David Bruce, Rural and Small Town Programme, Mount Allison University, 76 York Street, Sackville NB Ph: (506) 364-2395, Fax: (506) 364-2601 Em: dwbruce@mta.ca.

**National Physical and Health Education Conference - October 12 - 14, Orillia, ON**

The conference targets delegates who have an interest in the physical and health education needs of children and youth including physical educators, recreation professionals, and public health professionals. Contact: OPHEA, 1185 Eglington Ave. E., Suite 501, Toronto, ON M5C 3C6, Ph: (416) 426-7120 Fax: (416) 426-7735, Visit the OPHEA web site: www.ophaea.com or Em: info@ophaea.com or Em: actuveliving@ca/colphrd.

**Health for All in the Year 2000** - October 22 - 25, Ottawa, ON

Themes are health for aboriginal peoples, equity and health for all, innovative approaches to health for all, and international health. Contact: CPA, Conference Services, Ph: (613) 725-3769, Fax: (613) 725-9826, Em: conferences@cpa.ca.