Exploring the views of local residents on physical activity and health

Why is physical activity so important?

We know that inactive lifestyles contribute significantly to many chronic diseases, such as heart disease, cancer, stroke, evident in the richer nations of the world. The World Health Organisation has identified physical inactivity as a 'global public health problem' and has established minimum physical activity targets for people at different stages of the life-course. The current guidelines recommend that all adults should undertake a minimum of 150 minutes per week of at least moderate-intensity physical activity (activity that makes you slightly out of breath). Yet just under 1/3 of adults across the globe meet those targets. It is not at all clear how the disconnection between the recommendations of policy makers and the behaviour of ordinary people might be overcome.

Lay views on matters of health and wellbeing are more often than not ignored in favour of various kinds of 'expert' opinions of health problems. Yet if interventions to improve health are to be successful they have to take account of the ways in which ordinary people think about everyday issues and everyday behaviour – and they have to be grounded in the everyday experiences of lay people.

What did we want to find out?

Using an opportunity to examine the impact of an urban regeneration project (Connswater Community Greenway) on local residents in East Belfast we used qualitative methods to explore the views of 113 people on how to increase rates of physical activity in an area of multiple deprivation. We asked local residents about their perceptions and views about physical activity, how levels might be improved, and how the Connswater Community Greenway might impact on their physical activity level and health.

What did we do?

We conducted 14 different focus group discussions to explore the detailed views that local residents held about physical activity. Focus groups are especially useful devices for accessing the views of ordinary people and what they are prepared to say in public about topics under investigation. In analysing our data we sought to identify the issues that most concerned the research participant as well as the strength of those views. We did that by counting the number of occasions on which specific issues were referenced in the talk of participants and then looking at the association between talk about one topic and talk about another (such as physical activity and the weather). An example of this kind of analysis appears in Figure 1 and we refer to such figures as 'issue webs'.

What did we find?

The results of the analysis suggest that lay people rarely consider physical activity as a separate issue, or one that centres on individuals and their motivation, but rather as one component in a complex web of concerns, processes and events that include such things as the actions of neighbours and relatives, material and political environments, vandalism, violence, dogs and the weather. Results also suggest that there is a social element to physical activity whereby local residents recognise important connections between their own behaviour (and level of physical activity) and the structures in which they live and work. So, for example, the flags and wall murals on the lower Newtownards Road (Figure 2) are not simply a passable feature of the area but interconnect with other things so as to inhibit or even prevent residents from being active. This is

quite different from much academic thinking and policy discussion of physical activity – where the emphasis is placed on individuals and their cognitive styles (especially their 'motivation').

Why is this important?

Our results provide support to those who argue that physical activity policy must focus on populations and the complex interactions among the factors influencing physical inactivity, rather than solely focusing on individuals. For lay people, it seems, living an active life is about safety and policing, social and family life, infrastructure and politics as much as it is to do with being motivated. This has implications not only for health policy, but also for our conceptualization of the public health arena. For the expression of violence and disorder and even forms of symbolism are not just matters for policing or for politics but also fundamental to improving or inhibiting the health of populations.

Citation:

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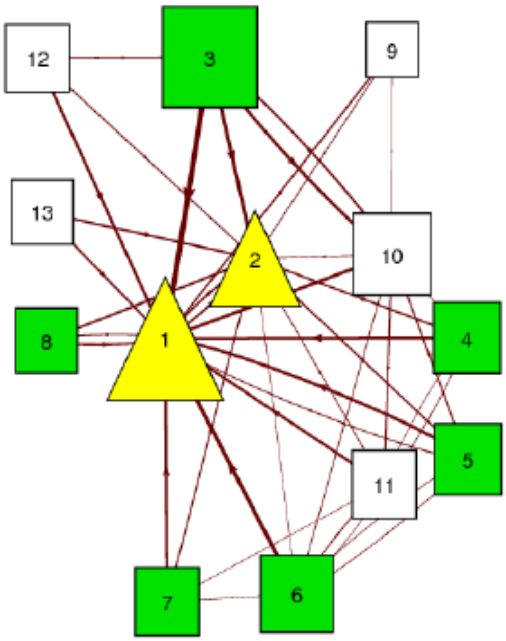
Figure 1: Issue web showing how being "out and about" and "active" are co-associated with key variables in 14 focus group discussions.



Index of activities: 1=being out and about; 2=being active.
Index of facilitators: 3=physical infrastructure; 4=good weather; 5=other people; 6=being safe; 7=greenery and open space; 8=organisational infrastructure.
Index of inhibitors: 9=current demands of work and daily life; 10=vandalism & anti-social behaviour; 11=territoriality; 12=bad weather; 13=urban infrastructure.

The size of the nodes (squares, triangles) is proportional to the frequency that this aspect was mentioned in the focus group discussions. The thickness of the lines is proportional to the strength of the co-association between different aspects.

Figure 2: Photograph of Newtownards Road, October 2013.