

Our Children's Health and Fitness

***Findings and Recommendations from
Rob de Castella's SmartStart to Life
Presentation to Mr Peter Dundas-Smith, CEO
Fisheries Research & Development Corporation***

The Current Situation

The “Big” Picture

- *Australia is now the second most overweight country in the world*
- *High levels of CVD & increasing Type II Diabetes, Osteoporosis, Colon Cancer, Depression*
- *NHF Report in 2001 – 21% boys and 23% girls are overweight or obese nationally*
- *“By 2020, with the current trend in weight gains, 80% of all Australians and one third of all children will be overweight or obese”
Prof Adrian Bauman, University of Sydney.*

Who are we?

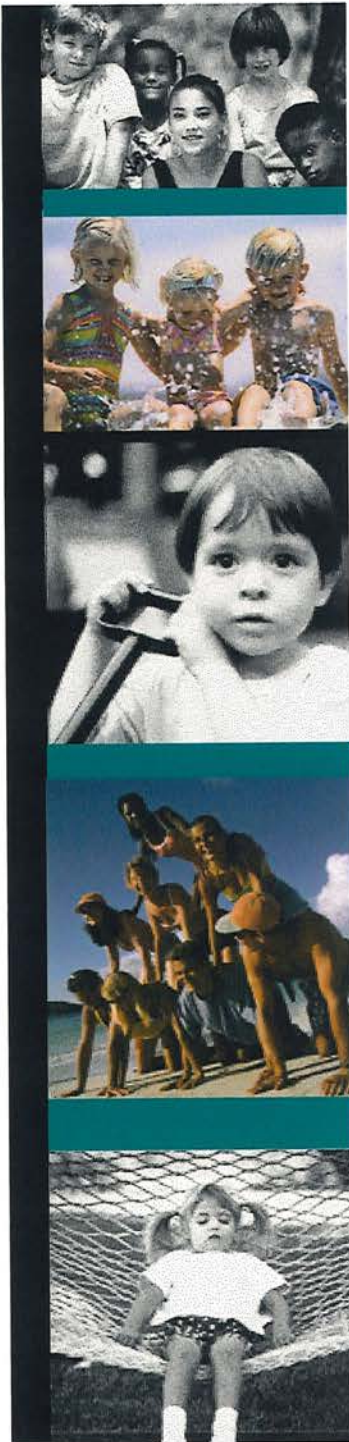
Rob de Castella's SmartStart to Life Program

- ***Launched 2000, measured over 15,000 Primary School students, over three consecutive years***
- ***Backed by high profile Australian and a team of experts in health, education and science. A comprehensive database***
- ***Thousands of reports for children, parents and schools***
- ***"Trialed" a user pays approach***



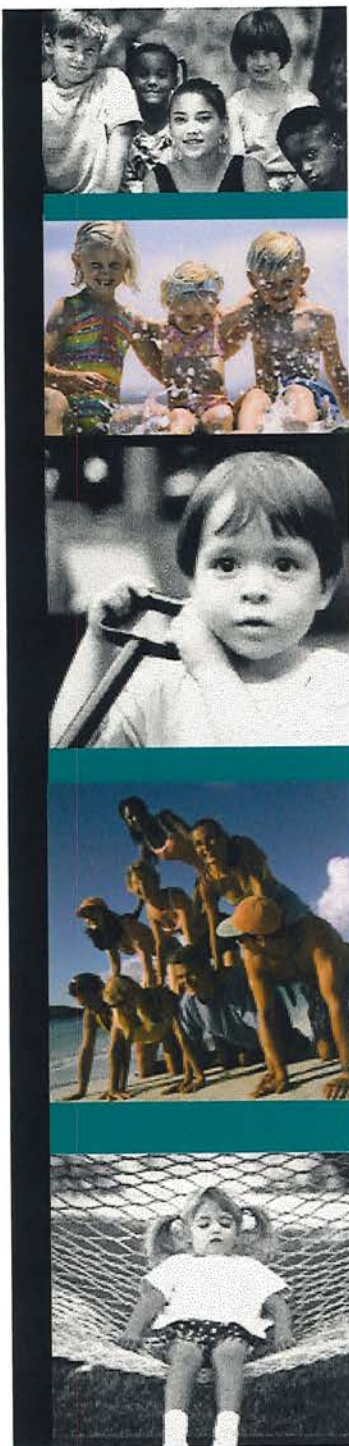
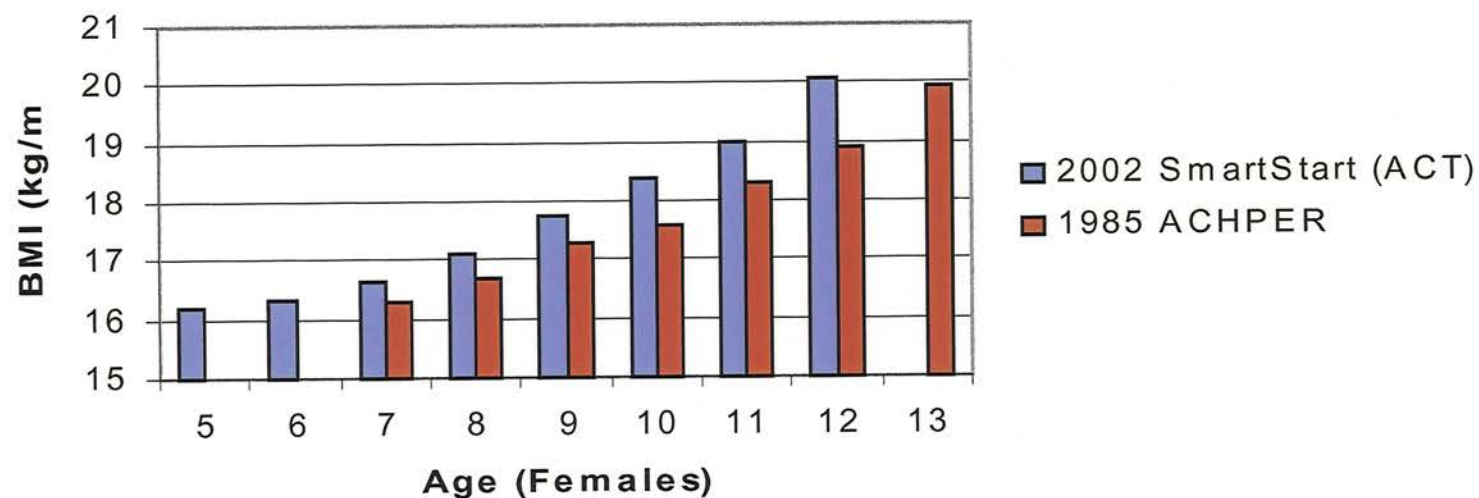
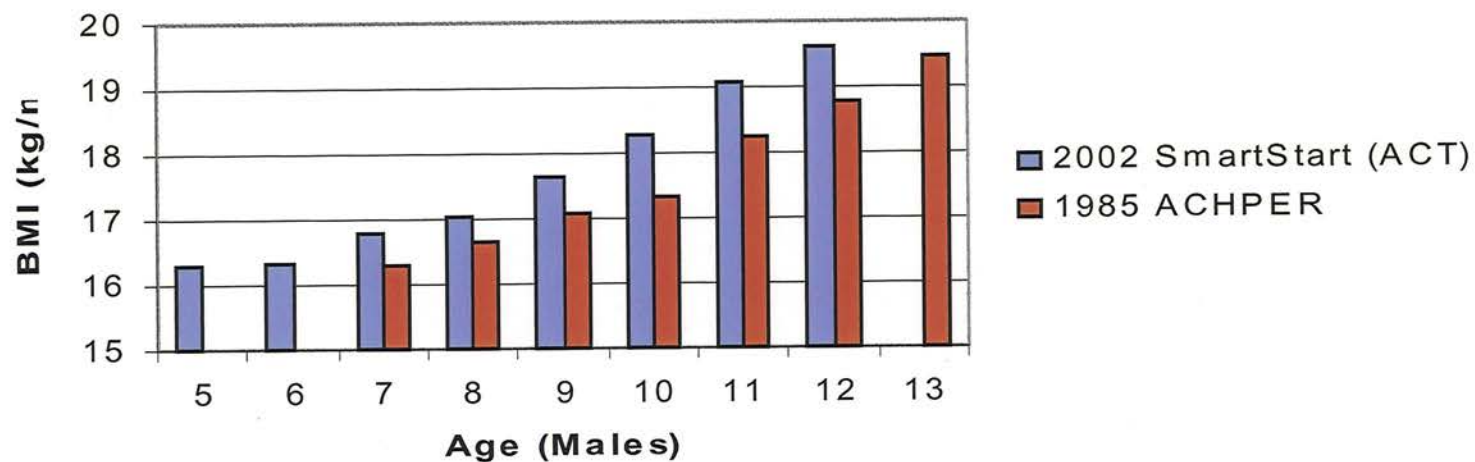
What is SmartStart to Life?

- ***Targets - Body Composition, Cardiovascular Fitness, Flexibility, Isometric Strength, Strength Endurance, Power and Coordination***
- ***Collects, analyses and reports on individual and population statistical changes***
- ***A system to educate, empower and promote self responsibility***



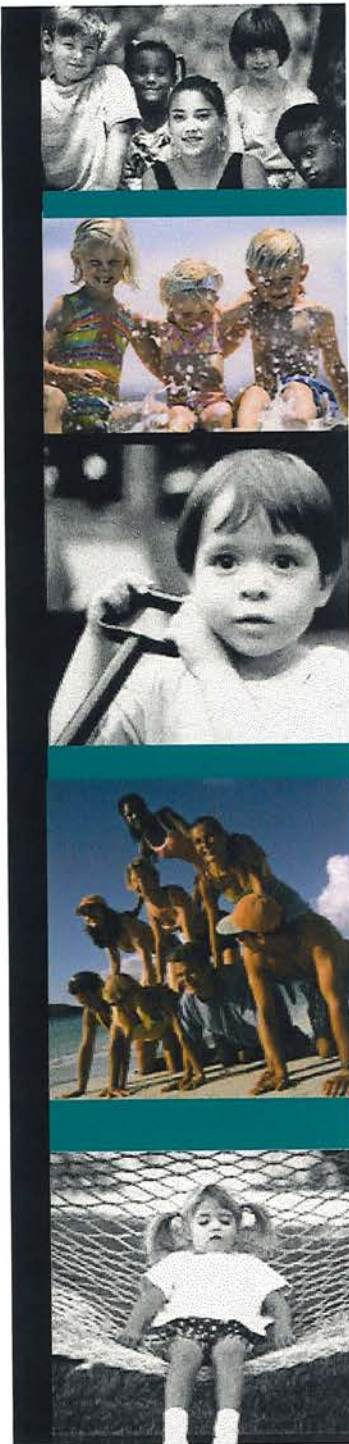
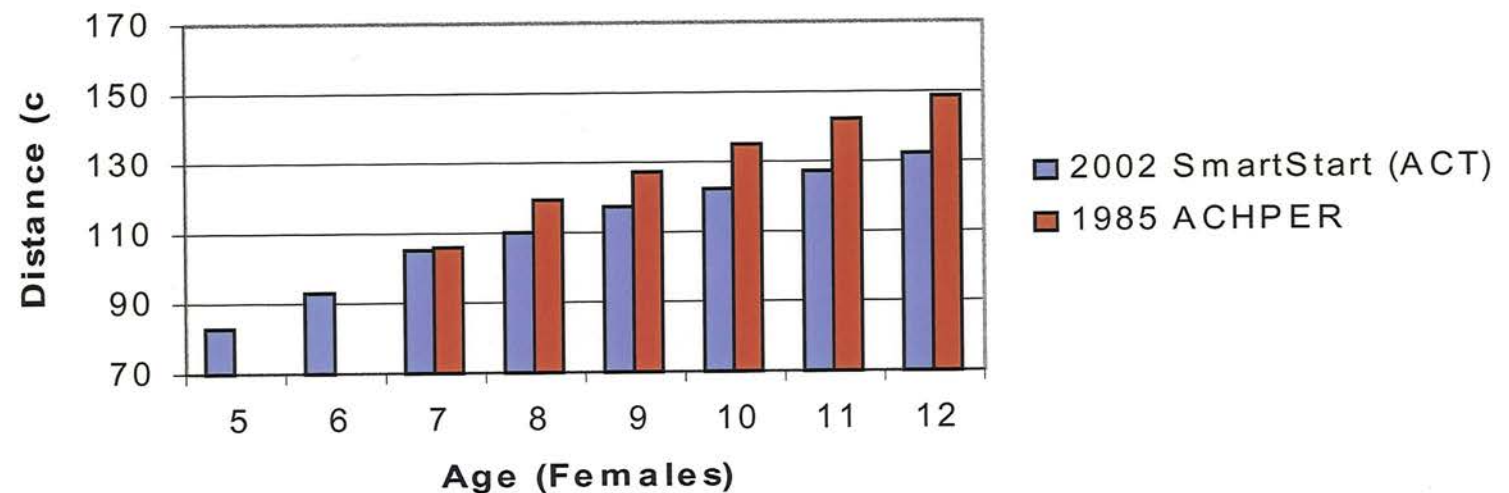
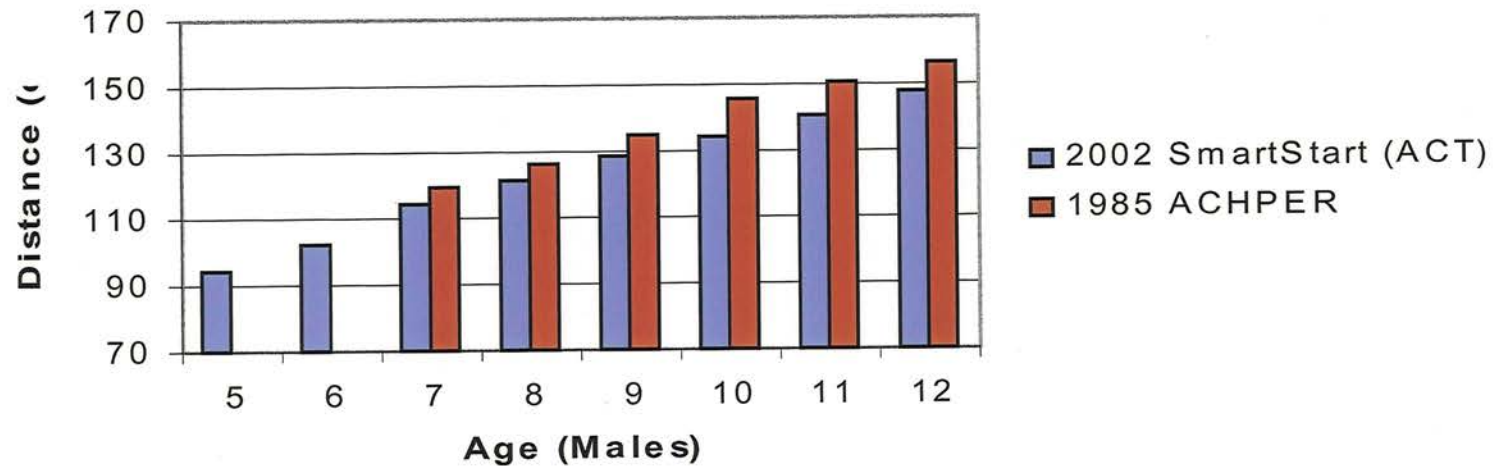
What have we have found?

Average BMI 1985 Vs 2002

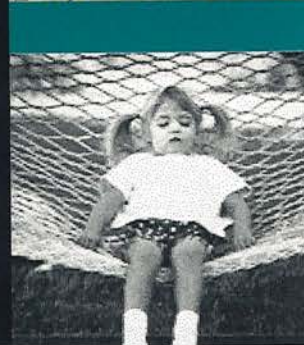


Upper Body / Lower Body Coordination & Power

Average Standing Long Jump 1985 Vs 2002



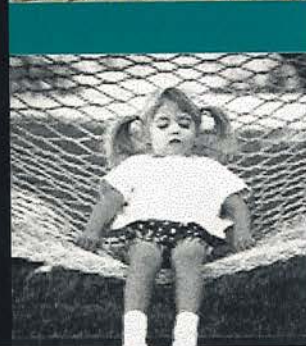
Why?



- ***Advertising changes attitudes and behaviour***
- ***Technology reduces labour***
- ***Electronic entertainment and computers***
- ***Safety concerns***
- ***Litigation and insurance***
- ***Dual Income families***
- ***Time poor parents***
- ***Family unit breakdown***
- ***Other reasons???***

The Facts Are

- *These things are not going away*
- *It has never been more difficult to keep healthy and fit*
- *Prevention is better than cure*



Why Children?

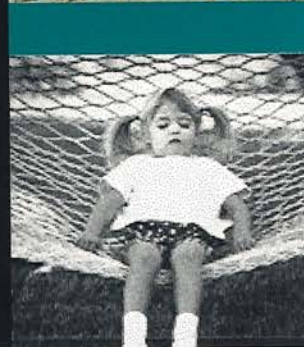
- *Attitudes and behaviors are established in childhood*
- *Escalating increases in overweight placing increasing stress on our health care system*



What is needed for change?

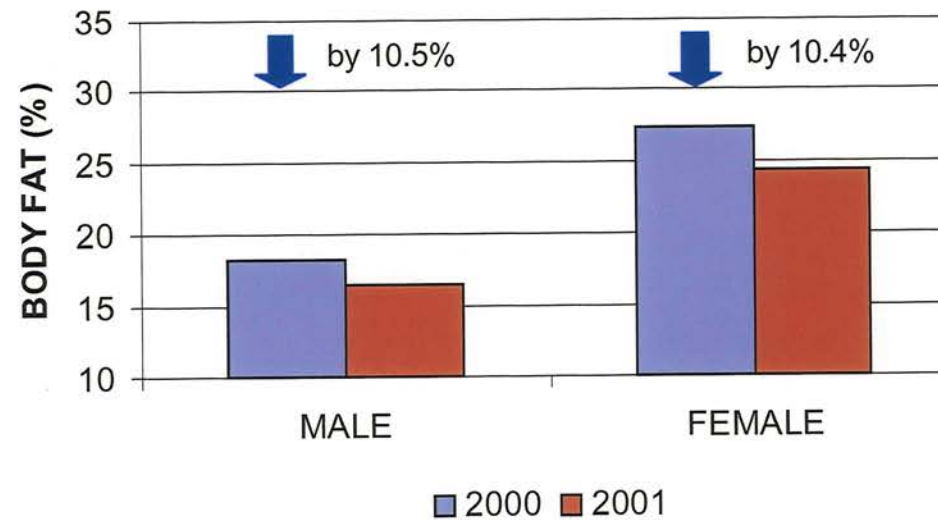
A successful intervention will include the

- *individual*
- *home*
- *school*
- *government, and*
- *community*

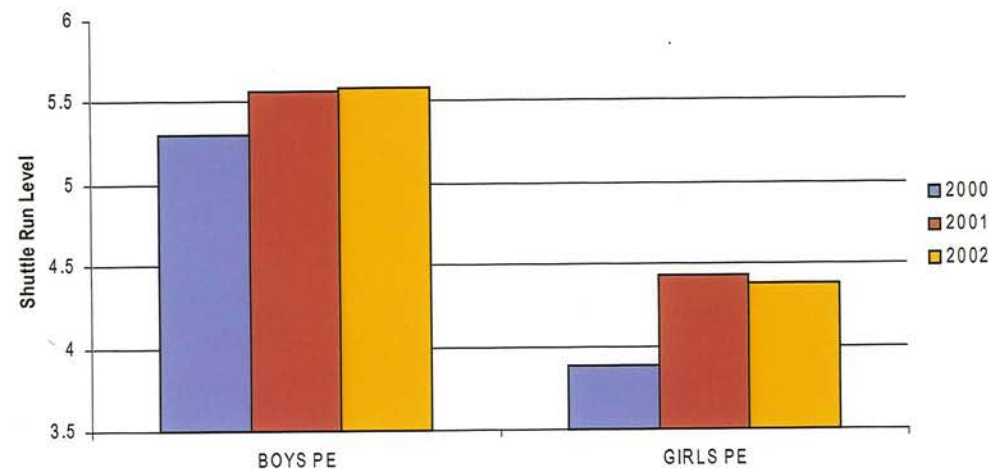


Changes in School "A" 2000/01

CHANGES IN BODY FAT



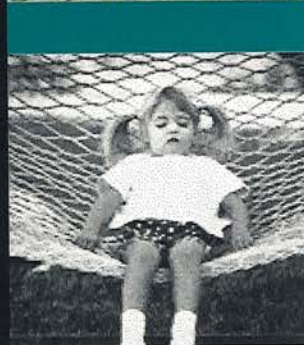
Shuttle Run Changes 2000, 2001, 2002



Identified Issues (3 years of operations)

Children

- *Enjoy being active and participating in their assessments*
- *Children respond*
- *Children are motivated*
- *Focus on self-comparison*



Identified Issues (cont)

Parents

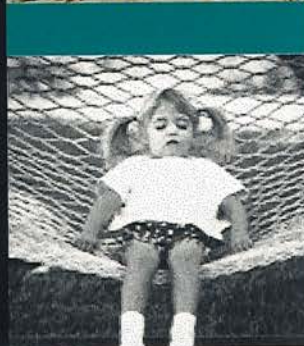
- *Parents have no objective way to assess the physical health and fitness of their children*
- *Significant confusion exists as to how to address physical health issues*
- *Many parents are “at a loss” when it comes to knowing what to do – and feel helpless*



Identified Issues (cont)

Schools and Teachers

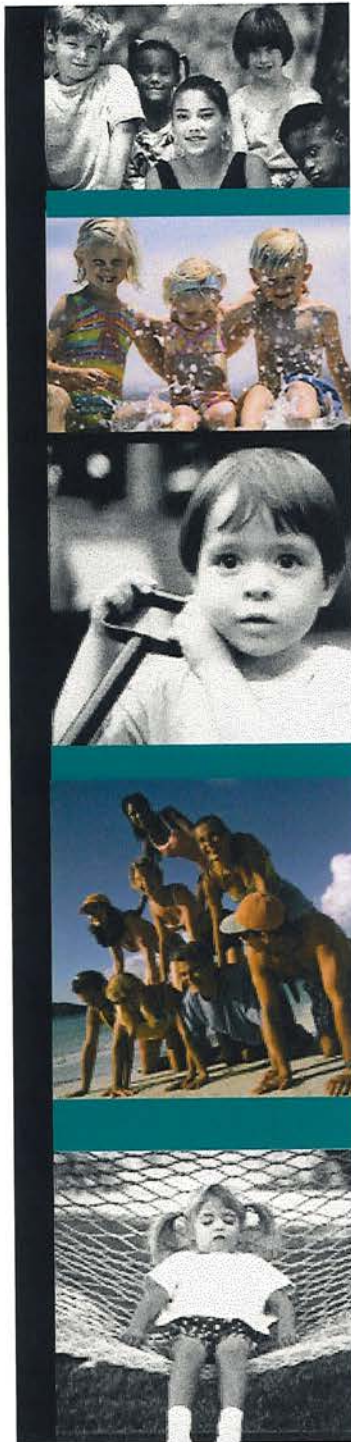
- *The physical health profiles of schools can be improved (we've proved it)*
- *Participation can stimulate generalist Primary School teachers to undertake more PE*



Identified Issues (cont)

Funding Issues

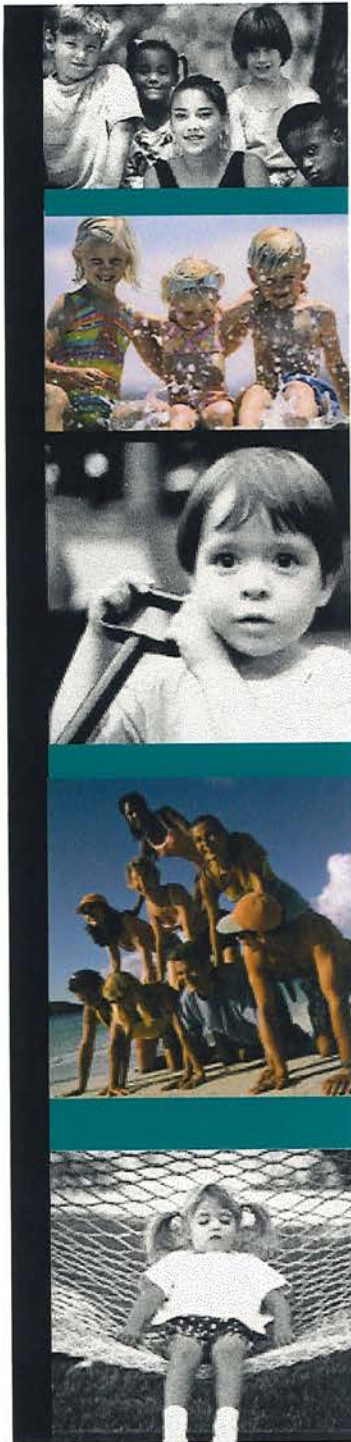
- ***A “User Pays” approach may offset some costs***
- ***Significant Sponsorship potential exists for a National Program only***



Recommendation

***That the Commonwealth
implement a nationally
coordinated program to address
the decline in our children's
physical fitness and body
composition***





Why Benchmark in Primary Schools?

- *Immediately makes children's health and fitness a priority on a national basis*
- *"If you can't measure it ... you can't manage it"*

"Children First"

A National Children's Health Initiative

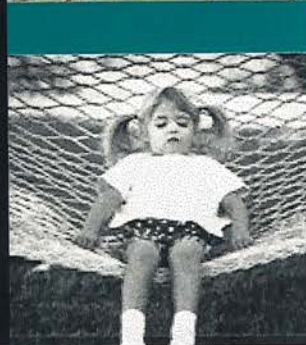
- *Measure the physical health and fitness of every Primary School aged student each year (approx 1.9M children require approx 550 measure staff)*
- *Height, Weight, BMI, Body Fat, Aerobic Fitness, Flexibility, Strength, Power and Co-ordination*
- *Provide a statistical profile and report for every child, parents and school*
- *Provide statistics for government, health, education*
- *Educate students through participation*
- *Motivate children with competitions, and seeing their improvements*
- *Conduct Community Forums for parents*
- *Conduct Professional Development for primary school teachers*
- *Share the costs between Commonwealth and State Governments, Corporate sponsors and participants*

TOTAL COST - approx \$45 per student per annum



Why adopt "Children First"

- *The Score is on the board*
- *Cost Sharing*
- *National and World Leadership*
- *We require a "system" to change behaviour*



Where to from here?

Pilot in 2003/04

- *Pilot in one State*
- *Students measured twice over two years*

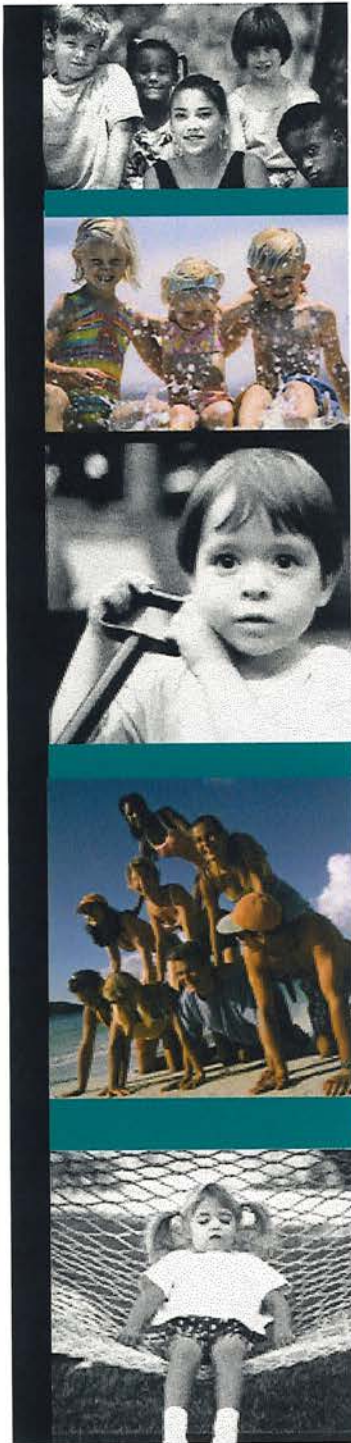
Example – SA (160,000 primary school students)

- *Pilot cost @ approx \$45 per student per annum*
- *TOTAL COST – approx \$7.2M per annum*

Pilot

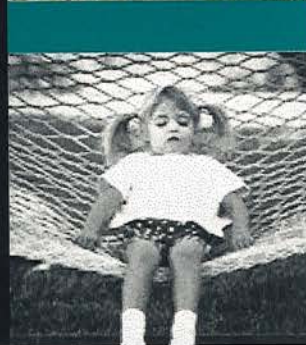
Pilot Goals

- *Test large scale operation and systems*
- *Investigate health and fitness issues*
- *Evaluate health outcomes of program*
- *Increase public awareness, interest and expectation*



Funding Models - Pilot

- *Commonwealth Funded*
- *Commonwealth and State Funding*
- *Corporate Sponsorship*



Structures

- *Internal Operations within Government*
- *External organisation contracted by Government*
- *Partnership between Government and External organisation*



Outcomes

Health

- *Improved health profile and outcomes*

Education

- *Positive impact on learning*

Sport

- *Greater participation (performance) in sport*

International

- *Support and leadership to international partners*

National

- *Commonwealth leadership*

Finance

- *Reduced health care costs*
- *Investment return in international & local arena*

