

# ESTABLISHING A BASELINE: AT and Health Indicators in the Halifax Region



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**NSHA Public Health – Central Zone**  
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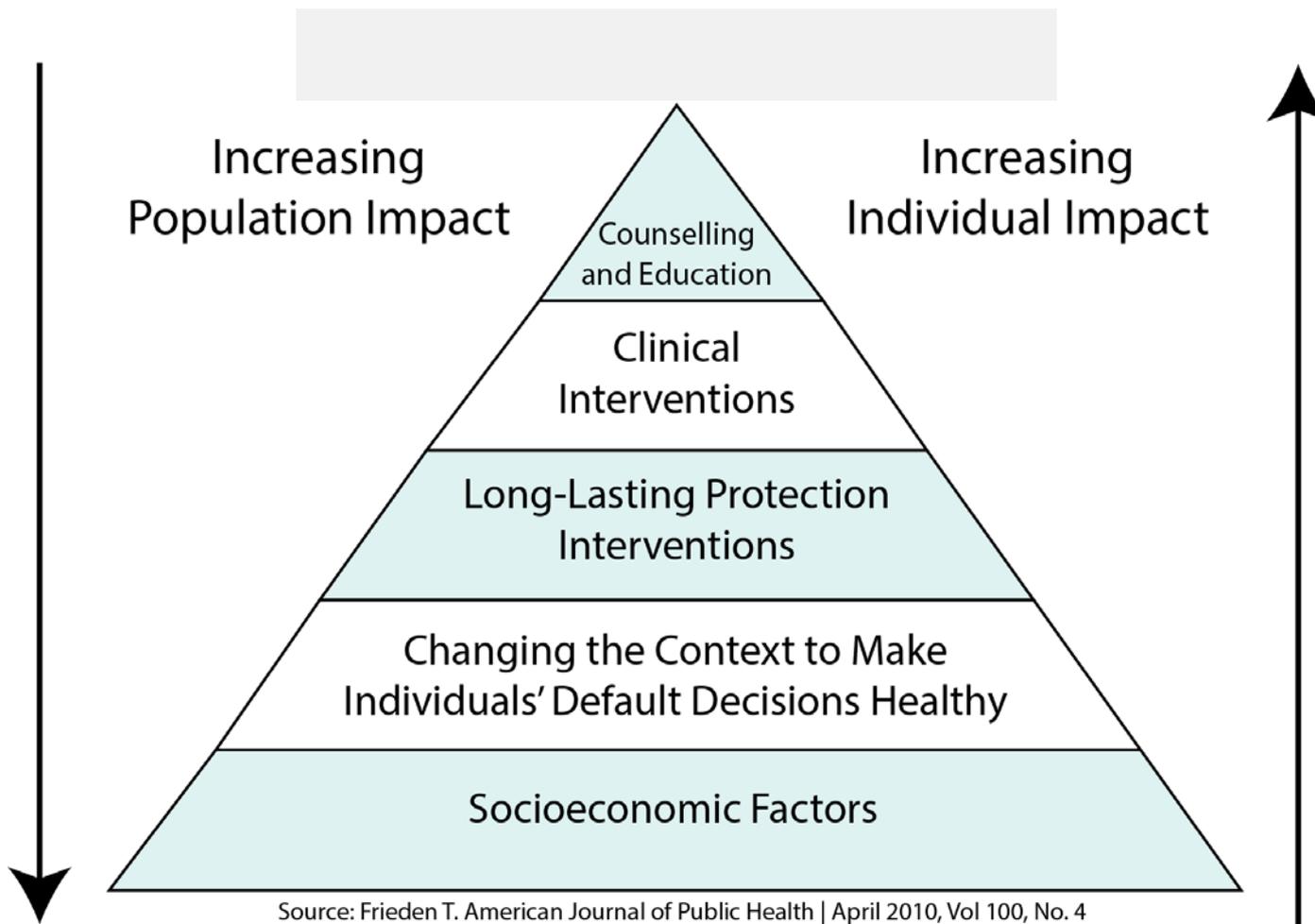
# Establishing a Baseline: **APPROACH & PARTNERS**

## PURPOSE



- Raise awareness about the link between AT and health
- Address information gaps and support evidenced informed decisions
- Build capacity locally and in other NS communities and health zones

# ROLE OF PUBLIC HEALTH



## INDIVIDUAL HEALTH BENEFITS

- Increased fitness and reduced obesity
- Reduced risk of cardiovascular disease, diabetes, stroke and some cancers
- Improved mental health
- Reduced risk of all-cause mortality



# POPULATION HEALTH BENEFITS

- Reduced medical costs from physical inactivity
- Reduced work absenteeism
- Reduced air pollution and greenhouse gas emissions
- Reduced risk of traffic injuries
- Improved community cohesion



# PROJECT APPROACH

PHASE 1 - INITIATING

Scoping  
Resources/funding  
Working Group

PHASE 2 - THINKING

Conceptual framework  
Logic model  
Indicator criteria

PHASE 3 - EXPLORING

Potential indicators  
Data partners/sources  
Data collection  
Analysis and synthesis

PHASE 4 - COMBINING

Report production/review  
Revisit objectives/logic  
Further work

PHASE 5 - SHARING

Lessons learned  
Knowledge transfer  
Next steps



# MULTI-DISCIPLINARY WORKING GROUP



# DATA PARTNERS & SOURCES



# FRAMEWORK TO SUPPORT DECISIONS

## HEALTHY BUILT ENVIRONMENT CONCEPTUAL FRAMEWORK

### INVESTMENT

Plans, policies, budgets



### INFRASTRUCTURE

Facilities, use, collisions



### INFORMATION

Events, education, promotion

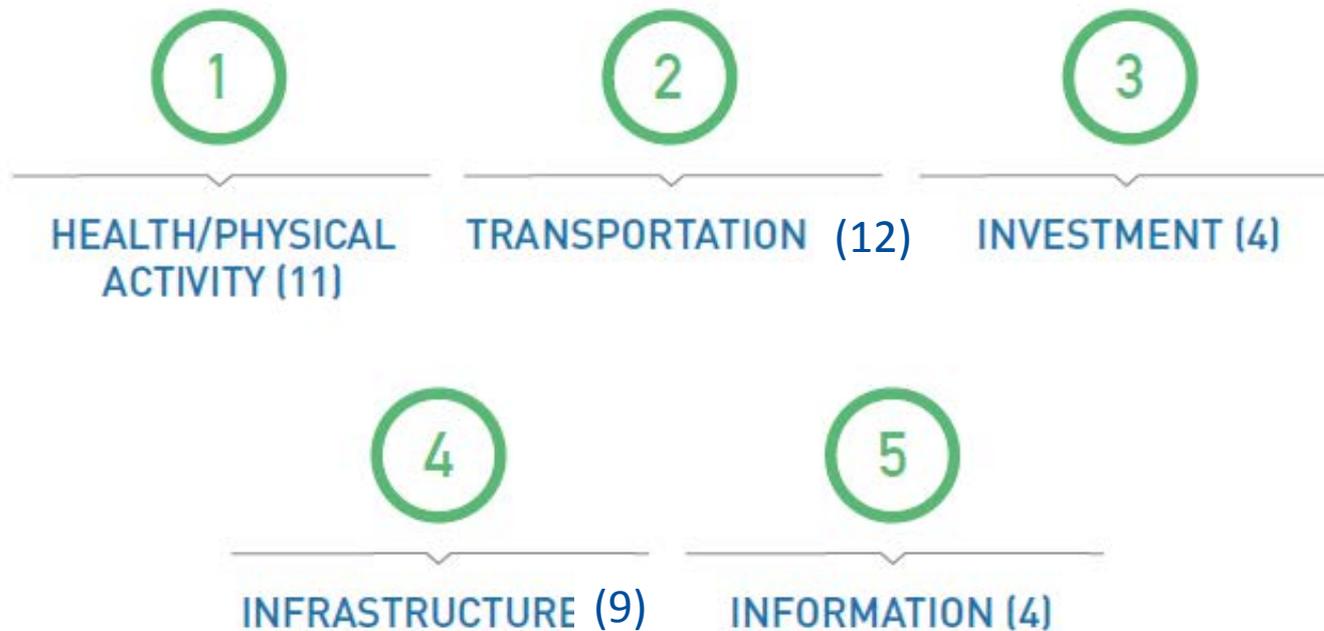
**IMPACT  
AT BEHAVIOUR**



# Establishing a Baseline: **FINDINGS & NEXT STEPS**

# PROPOSED INDICATORS

40 indicators identified for ongoing monitoring.  
Baseline data established for 28 of these – there is more work to do!



## KEY HEALTH FINDINGS



### Increasing rates of overweight/obesity

- 35% of youth
- 58% of adults



### Physical activity levels

- Only 8% children/youth and 18% of adults meet physical activity guidelines
- Self-reported data shows local activity levels higher than NS and national rates

## OTHER FINDINGS

- AT is gaining momentum > strategic plans/budgets
- New AT spending projected to double over 10-years
- Health benefits of AT are recognized
- High rates of AT/transit use for mid-size city
- Increasing use of vehicles to commute
- Very active “AT community”



### 3 TAKE-AWAYS



- A diverse mix of **committed partners** is essential to the project's success. These relationships will support collaboration and build capacity past the project.
- **Establish a collection/reporting timeline** that makes sense. Much of the data is not available every year.
- **Don't reinvent the wheel!** While gaining in significance, AT is a relatively new focus area for transportation policy and investment. It's important to build on what is out there and use limited resources effectively!

# FUTURE WORK...SOME IDEAS!

Develop a method to link **equity** to AT decisions

Better understanding of the **Province's role** in AT

Local data making **direct link** between health and AT

Percent of **children and youth** using AT to get to school

How do we measure **community engagement?**



## NEXT STEPS



### Short-term...

- Continue to develop/release related resources
- Pursue and create opportunities

### ...After that

- Consider options to fill the 12 baseline data gaps
- Leverage relationships to highlight and explore opportunities to address other questions/gaps
- Revisit baseline data in 5-years



# THANK YOU! ANY QUESTIONS?

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