INCREASING PHYSICAL ACTIVITY & ACTIVE LIVING IN COMMUNITIES

PROVIDED BY: MONASH HEALTH LIBRARY

DATE: 23 MAY 2023

Please find following a summary of a literature search and relevant results. All articles can be provided in full - email <u>library@monashhealth.org</u> for a list of the articles you require.

QUESTION

Monash Health

Library

Increasing physical activity and active living in the community / SEPHU catchment area.

SEARCH LIMITS

English-language, last 5 years, developed countries, screened out rural and remote areas.

SEARCH METHODOLOGY

A systematic search was conducted for literature. The results were screened by two librarians using <u>Covidence</u>. See the Appendix for the PRISMA chart, search terms, and Medline search strategy.

DATABASES SEARCHED

- Medline index of peer reviewed articles across health sciences and medicine.
- Embase index of biomed and pharmacological peer reviewed journal articles.
- Emcare index of nursing, allied health, critical-care medicine and more.
- Grey literature Google, Google Scholar, Trip database, Biomed Central Proceedings.





LITERATURE RESULTS

All articles can be provided in full text - email <u>library@monashhealth.org</u> a list of articles you require.

GENERAL RESOURCES

ONLINE RESOURCES (GREY LITERATURE)

NSW Minstery of Health (2022) NSW Healthy Eating and Active Living Strategy 2022-2032. Link

- We need to partner with consumers and health professionals to design, test and develop these programs and services, especially those with direct experience of lifestyle guidance in a clinical setting and people with lived experience.
- Appropriate professional education, and clinical policies, procedures and guidelines, will support our health workforce to provide routine advice in sensitive and non-stigmatising language. Person-centred digital health solutions will help patients, providers and programs share information, make decisions and integrate care.

Australian Department of Health & Aged Care (2021) National Preventative Health Strategy 2021-2030. Link

 The National Preventive Health Strategy presents a powerful opportunity for Australia to build a sustainable prevention system for the future – building on previous success and momentum, addressing the increasing burden of disease, reducing health inequity and increasing preparedness for emerging health threats.

Western Health (2021) active Living. Link

- We will aim to work across settings to embed active living, with a focus on active travel, in the Melton and Moorabool community.
- Being physically active on all or most days is one of the best things we can do to maintain and improve our health. All too often, our busy lifestyles get in the way and stop us from being as active as we should. Other things that may prevent us from being active include lack of suitable opportunities to be involved in sports and exercise, living or working in an environment that isn't very 'walking friendly' or not knowing how to be active in a new set of circumstances such as after an injury or in a new stage of life.

Community Preventative Services Task Force (2020) Nutritional and Physical Activity: Community Based digital Health and Telephone Interventions to Increase Healthy Eating and Physical Activity. Link

- The Community Preventive Services Task Force recommends community-based digital health interventions to increase healthy eating and physical activity among adults.
- These interventions are for adults interested in improving these behaviours. They're designed to increase healthy eating and physical activity by using websites, mobile apps, text messages, emails, or one-on-one telephone calls.

World Health Organizations (2018) ACTIVE: A Technical Package for Increasing Physical Activity. Link

• This ACTIVE technical package is the first of several implementation tools that the World Health Organization (WHO) will develop to support countries plan, implement and evaluate the implementation of the Global Action Plan. It outlines four policy action areas, which directly reflect the four objectives of the Global Action Plan endorsed by the World Health Assembly.



2



World Health Organization (2018) More Active People for a Healthier World: GLOBAL ACTION PLAN ON PHYSICAL ACTIVITY 2018-2030. <u>link</u>

• The new WHO global action plan to promote physical activity responds to the requests by countries for updated guidance, and a framework of effective and feasible policy actions to increase physical activity at all levels. It also responds to requests for global leadership and stronger regional and national coordination, and the need for a whole-of-society response to achieve a paradigm shift in both supporting and valuing all people being regularly active, according to ability and across the life course.

PEER-REVIEWED LITERATURE - IN REVERSE CHRONOLOGICAL ORDER

Articles are grouped by theme:

- Public health strategy
- Neighbourhood walkability
- Green infrastructure
- Technology use
- Primary care referrals
- Programs
 - Active travel
 - Community based
 - Sporting / competition
 - o For older adults
 - \circ For families
 - For children

Each article summary contains excerpts from the abstract and an online link.

PUBLIC HEALTH STRATEGY

Lightner, J. S., et al. (2023). Community Health Improvement Plans and Physical Activity Implementation Strategies: Findings From a Cross-Sectional Survey of US Local Health Departments. Journal of public health management and practice : JPHMP, 29(2), 120-127. <u>Request</u> <u>article</u>

Community Health Improvement Plans (CHIPs) are a foundational public health practice conducted by every accredited health department in the United States. Community Health Improvement Plans may impact community-wide physical activity (PA) by implementing large-scale interventions. However, no studies have evaluated whether, or how, CHIP goals focusing on increasing PA are implemented. This study aims to understand CHIP PA goals, implementation strategies, and implementation outcomes of CHIP nationally. Overall, it seems that communities are choosing easily adopted, appropriate, feasible, and safe interventions that may be less effective over those that may produce large-scale improvement in PA behavior. Community Health Improvement Plans may serve as a powerful tool to improve population health if implemented effectively.

Kohler, S., et al. (2021). **Co-producing an action-oriented framework for community-based Physical Activity Promotion in Germany**. Health promotion international, 36(Supplement_2), ii93-ii106. <u>Full</u> <u>text</u>

German National Recommendations for Physical Activity (PA) and PA Promotion recommend community-based approaches to promote PA at the local level with a focus on health equity. In



addition, the German Federal Prevention Act addresses health equity and strengthens setting-based health promotion in communities. However, the implementation of both in the local context remains a challenge. The six-phase action-oriented framework integrates practice-based and scientific evidence on PA-related health promotion and health equity. It represents a shared vision for the implementation of National Recommendations for PA and PA Promotion in Germany. The extent to which structural changes and health equity can be achieved is currently being investigated in pilot-studies.

Oliver, E. J., et al. (2021). Where next for the design, delivery, and evaluation of community-based physical activity prescription? Emerging lessons from the United Kingdom. Applied physiology, nutrition, and metabolism = Physiologie appliquee, nutrition et metabolisme, 46(11), 1430-1434. Full text

Despite widespread use, community-based physical activity prescription is controversial. Data limitations have resulted in a lack of clarity about what works, under what circumstances, and for whom, reflected in conservative policy recommendations. In this commentary we challenge a predominantly negative discourse, using contemporary research to highlight promising findings and "lessons learnt" for design, delivery, and evaluation. In doing so, we argue for the importance of a more nuanced approach to future commissioning and evaluation.

Foster, C., et al. (2018). What works to promote walking at the population level? A systematic review. British journal of sports medicine, 52(12), 807-812. Full text

Interventions to promote walking have focused on individual or group-based approaches, often via the randomised controlled trial design. Walking can also be promoted using population health approaches. We systematically reviewed the effectiveness of population approaches to promote walking among individuals and populations. We found mass media, community initiatives and environmental change approaches increased walking (range from 9 to 75 min/week).

Salvo, D., et al. (2021). Physical Activity Promotion and the United Nations Sustainable Development Goals: Building Synergies to Maximize Impact. Journal of physical activity & health, 18(10), 1163-1180. <u>Full text</u>

Many of the known solutions to the physical inactivity pandemic operate across sectors relevant to the United Nations Sustainable Development Goals (SDGs). The authors examined the contribution of physical activity promotion strategies toward achieving the SDGs through a conceptual linkage exercise, a scoping review, and an agent-based model. The authors call for a synergistic approach to physical activity promotion and SDG achievement, involving multiple sectors beyond health around their goals and values, using physical activity promotion as a lever for a healthier planet.

NEIGHBOURHOOD WALKABILITY

Zhang, X., et al. (2023). Linking Urban Planning, Community Environment, and Physical Activity: A Socio-Ecological Approach. International Journal of Environmental Research and Public Health, 20(4), 2944. Full text

Lack of physical activity is a growing concern among public health advocates and urban planners. Our socio-ecological model incorporates urban planning and World Health Organization actions on physical activity to identify key factors related to leisure-time physical activity at the community level. Local governments can promote transportation, recreation and safety, especially in rural and minority communities lacking active-friendly built environments and facing challenges from aging population, poverty, and longer commuting time. This socio-ecological approach can assess multilevel factors related to physical activity in other countries.





Lenstra, N., et al. (2019). **Public libraries and walkable neighborhoods.** International Journal of Environmental Research and Public Health, 16(10), 1780. <u>Full text</u>

The hypothesis of this study is that public libraries can be understood as important supports of walking in neighbourhoods, not only as walkable destinations, but also as providers of programs that increase walking in communities. Recent work by public health scholars has analysed how libraries and other public institutions can contribute to community health. The principal conclusion of this study is that additional research is needed to comprehensively understand the intersection between public health and other community centres.

GREEN INFRASTRUCTURE

Fontan-Vela, M., et al. (2021). Active use and perceptions of parks as urban assets for physical activity: A mixed-methods study. Health & place, 71(din, 9510067), 102660. Full text Parks are potential key urban assets for improved population health; however, their use is not equal among all social groups. Individual and contextual factors could influence residents' perceptions of parks and how they interact with and, eventually, benefit from them. Mixed-methods provided an insight of the potential causes leading to the differences in park use and PA within cities, which is essential in terms of environmental justice and health equity. Thus, a mixed-methods comprehensive approach to public health problems can help designing public policies addressing relevant factors related to urban health inequities.

Omura, J. D., et al. (2020). Built Environment Approaches to Increase Physical Activity: A Science Advisory From the American Heart Association. Circulation, 142(11), e160-e166. Full text Effective population-based approaches implemented in communities can help increase physical activity among all Americans. Evidence suggests that built environment interventions offer one such approach. These interventions aim to create or modify community environmental characteristics to make physical activity easier or more accessible for all people in the places where they live Implementing this Community Preventive Services Task Force recommendation in communities across the United States can help promote healthy and active living, increase physical activity, and ultimately improve cardiovascular health.

TECHNOLOGY USE

Makai, A., et al. (2020). The effect of a community-based e-health program to promote the role of physical activity among healthy adults in Hungary. BMC public health, 20(Suppl 1), 1059. Full text Physically active lifestyle can prolong the years spent without chronic diseases and is strongly associated with good mental and physical health. The goal of the study was to examine the physical activity patterns of the healthy adults and the effectiveness of a community-based e-health program. To our knowledge, ours was the first community-based e-health program in Hungary to improve the physical activity level of the healthy adult population. Based on our results this webbased e-health program can be an adequate tool to promote healthy lifestyle. The study could provide appropriate information for the further health interventions and policy making. Further research is necessary to determine the special risk groups and to develop an applicable e-health program for such specific subgroups.

Faries, M. D., et al. (2019). Evaluation of Walk Across Texas! - a web-based community physical activity program. BMC public health, 19(1), 1588. <u>Full text</u>

In response to the chronic disease burden, web- and community-based programs have the potential to address targeted behaviors, such as physical activity (PA), using a novel approach with



5

large audiences. The purpose of this study was to preliminarily evaluate an established team centered, web-based community PA program in Texas. The results provide initial support for the effectiveness of WAT! to initially increase and maintain moderate levels of PA of participants over 8-weeks, even in inactive or low-active participants. Descriptor variables were unable to differentiate between those who increased PA and those who did not. However; the results provide a canvas for future research questions regarding PA enhancement within a team-centered, web-based approach.

Harris, T., et al. (2018). A pedometer-based walking intervention in 45- to 75-year-olds, with and without practice nurse support: the PACE-UP three-arm cluster RCT. Health technology assessment (Winchester, England), 22(37), 1-274. Full text

Guidelines recommend walking to increase moderate to vigorous physical activity (MVPA) for health benefits. A primary care pedometer-based walking intervention in 45- to 75-year-olds increased 12-month step counts by around one-tenth, and time in MVPA bouts by around onethird, with similar effects for the nurse support and postal groups, and persistent 3-year effects. The postal intervention provides cost-effective, long-term quality-of-life benefits. A primary care pedometer intervention delivered by post could help address the public health physical inactivity challenge. FUTURE WORK: Exploring different recruitment strategies to increase uptake. Integrating the Pedometer And Consultation Evaluation-UP (PACE-UP) trial with evolving PA monitoring echnologies.

Shen, C., et al. (2018). Health information exposure from information and communication technologies and its associations with health behaviors: Population-based survey. Preventive medicine, 113(pm4, 0322116), 140-146. <u>Full text</u>

Health information and communication technologies (ICTs) are increasingly used but little is known about routine exposure to health information from ICTs and its associations with health behaviors. A territory-wide population-based dual landline and mobile telephone survey was conducted in 2016 in Hong Kong, where smartphone ownership and Internet access are among the most prevalent, easiest and fastest in the world. Health information exposure from traditional sources (television/radio/newspaper/magazine), Internet websites, social media sites and instant messaging (IM); and information on smoking, alcohol consumption and physical activity were recorded. Health information exposure from IM was least frequent but associated with healthier behaviors. Further public health education campaigns can consider using IM to deliver information, particularly to disadvantaged groups.

PRIMARY CARE REFERRALS

Cunningham, K. B., et al. (2021). **Methods of connecting primary care patients with communitybased physical activity opportunities: A realist scoping review**. Health and Social Care in the Community, 29(4), 1169-1199. <u>Full text</u>

Deemed a global public health problem by the World Health Organization, physical inactivity is estimated to be responsible for one in six deaths in the United Kingdom (UK) and to cost the nation's economy 7.4 billion per year. A response to the problem receiving increasing attention is connecting primary care patients with community-based physical activity opportunities. We aimed to explore what is known about the effectiveness of different methods of connecting primary care patients with community opportunities in the United Kingdom. Comparisons of the processes and their theories of change revealed several indications helpful for future development of effective processes. Our review also highlighted the limited evidence base in the area and the resulting need for well-designed theory-based evaluations.





McHale, S., et al. (2020). Green Health Partnerships in Scotland; Pathways for Social Prescribing and Physical Activity Referral. International journal of environmental research and public health, 17(18). <u>Full text</u>

Increased exposure to green space has many health benefits. Scottish Green Health Partnerships (GHPs) have established green health referral pathways to enable community-based interventions to contribute to primary prevention and the maintenance of health for those with established disease. Green health interventions have potential to integrate successfully with social prescribing and physical activity referral.

PROGRAMS – ACTIVE TRAVEL

Hino, K., et al. (2019). Modal Shift from Cars and Promotion of Walking by Providing Pedometers in Yokohama City, Japan. International journal of environmental research and public health, 16(12). Full text

Mobility management is a transportation policy aiming to change travel behavior from car use to sustainable transportation modes while increasing people's physical activity. Providing pedometers and visualizing step counts, popular interventions in public health practice, may constitute a mobility management program. Participants living in neighborhoods far from railway stations and in neighborhoods with a high bus stop density tended to shift to walking and public transport, a modal shift that was highly associated with increased step counts.

Richards, E. A., et al. (2018). A county extension-delivered, email-mediated walking intervention: A programme evaluation. Health Education Journal, 77(5), 615-624. <u>Request article</u> The promotion of walking could be a feasible population-level physical activity strategy because it requires little planning, is low cost and can be done year-round across settings. Community, nonprofit organisations offer one means by which to help increase walking through community programmes. The use of the county-based US Cooperative State Research, Education, and Extension Service is an effective option for health promotion programming. Furthermore, a theorybased, email-mediated intervention is a valuable strategy as an independent and convenient way to facilitate increase in physical activity.

PROGRAMS – COMMUNITY BASED

Byrne, L., et al. (2019). **Mixed-method evaluation of a community-wide physical activity program in Launceston, Australia**. Health promotion journal of Australia : official journal of Australian Association of Health Promotion Professionals, 30 Suppl 1(9710936), 104-115. <u>Full text</u> Physical inactivity is a leading risk factor for disease burden and premature mortality. Interventions to increase physical activity are common, though few examples of multi-strategy, wide-scale community programs exist. Active Launceston is a community-wide program aimed at improving health and well-being through physical activity. We report on the process evaluation of Active Launceston and changes in community physical activity participation between 2008 and 2015, as a measure of program effectiveness. Mixed-method evaluation suggests Active Launceston is an effective community-wide program supporting community members to engage in regular physical activity and increase levels of social engagement.





Cleland, V., et al. (2019). Exploring the Health-Promoting Potential of the "parkrun" Phenomenon: What Factors are Associated With Higher Levels of Participation? American journal of health promotion : AJHP, 33(1), 13-23. Full text

" parkrun" is a free and increasingly popular weekly 5-km walk/run international community event, representing a novel setting for physical activity (PA) promotion. However, little is known about who participates or why. This study aimed to identify sociodemographic, health, behavioral, individual, social, and environmental factors associated with higher levels of participation.. Multivariate analyses revealed relative parkrun participation was inversely associated with education level and positively associated with interstate parkrun participation, perceived social benefits, self-efficacy for parkrun, and intentions to participate. parkrun attracts nonwalkers/runners and population groups hard to engage in physical activity. Individual- and social-level factors were associated with higher relative parkrun participation. parkrun's scalability, accessibility, and wide appeal confers a research imperative to investigate its potential for public health gain.

Abdin, S., et al. (2019). 'Summer of Sport': the development of a 6-week programme in increasing physical activity to improve public health outcomes. Public health, 177(qi7, 0376507), 44-47. <u>Full</u> text

A population-based physical activity (PA) programme was implemented to increase PA levels and encourage individuals to join the local council leisure facility., STUDY DESIGN: This is a cross-sectional design. Public health teams should work with partner organisations to embed robust processes for measuring outcomes that impact on population health.

Kamada, M., et al. (2018). **Community-wide intervention and population-level physical activity: a 5-year cluster randomized trial.** International journal of epidemiology, 47(2), 642-653. <u>Full text</u> Evidence from a limited number of short-term trials indicates the difficulty in achieving populationlevel improvements in physical activity (PA) through community-wide interventions (CWIs). Compared with control communities, adults achieving recommended levels of PA increased in intervention communities. The 5-year CWI using the focused social marketing strategy increased the population-level of PA.

Rasmussen, R. L., et al. (2018). An explorative evaluation study of the mechanisms underlying a community-based fitness centre in Denmark - Why do residents participate and keep up the healthy activities? Health & social care in the community, 26(6), 898-907. Full text Health-risk behaviour like physical inactivity is more evident in deprived neighbourhoods than in nondeprived neighbourhoods, and in the former knowledge is lacking as to what causes effects in interventions on physical activity. A possible contribution to physical activity interventions is community engagement, which has been shown to be effective for changing health-risk behaviour, but more knowledge is needed on "the active ingredients" or mechanisms that make interventions work. The aim of this study was to give more insight into the possible mechanisms within an intervention on physical activity using community engagement. Findings indicate that both the social aspect and the activities should be prioritised, as should a continued focus on the inclusion of different residents in the area. Furthermore, unintended consequences should be considered and prevented through support for volunteering residents.





PROGRAMS – FOR OLDER ADULTS

Batra, A., et al. (2019). **Determining the Long-Term Effectiveness of a Group-Based Physical Activity Program**. Health promotion practice, 20(3), 401-408. <u>Request article</u>

Few studies examine the impact of evidence-based programs when adopted in community-based settings. The purpose of this study is to assess the effectiveness of EnhanceFitness (EF) upto 12-months. Randomized controlled trials are commonly used to determine the efficacy of an intervention. These interventions when disseminated at the population level have the potential to benefit large masses. EF is currently offered at more than 700 locations. This tremendous success of EF brings attention to an important question of continuous monitoring of these programs to ensure program consistency and intended outcomes. The model used by the Healthy Aging Regional Collaborative could be replicated by other communities.

Frei, A., et al. (2019). A novel approach to increase physical activity in older adults in the community using citizen science: a mixed-methods study. International journal of public health, 64(5), 669-678. Request article

The aims of this study were to implement a novel, community-based physical activity (PA) intervention in a Swiss town with active participation of elderly participants and to evaluate its effectiveness, feasibility, acceptability and sustainability. After the intervention period, key participants took over organization, independently organized monthly get-togethers, added new walking routes and continuously recruit new participants. Eleven months after withdrawal of the study team, 61 people regularly walk in groups together., CONCLUSIONS: The novel CAPACITY intervention was successfully implemented, transferred to participants and is now self-sustainable for almost 1 year in the community.

McKay, H., et al. (2018). **Implementation of a co-designed physical activity program for older adults: positive impact when delivered at scale**. BMC public health, 18(1), 1289. <u>Full text</u> Despite known health benefits of physical activity (PA), older adults remain among the least physically active age group globally. To influence population health, interventions that are effective in small trials must be disseminated at scale. Despite evidence for efficacy, few PA interventions are scaled up to reach the wider community. CTM adopted central tenets of implementation science that consider the complicated systems where interventions are delivered to improve public health. In this iteration of CTM we demonstrate that a partner-based health promotion intervention can be effectively implemented across settings to enhance PA, mobility and social connectedness in older adults.

Virag, A., et al. (2018). Study of the effects of multimodal exercise program on physical fitness and health perception in community-living Hungarian older adults. Journal of Sports Medicine and Physical Fitness, 58(5), 669-677. <u>Full text</u>

The aim of this study was to investigate the effects on fitness indicators and subjective healthperception of a multimodal exercise program provided by a district in Budapest among communityliving seniors. This multimodal exercise program can be effective among community-living older adults, even in Hungary, a country where geriatric physical activity is not widespread. Therefore, it would be useful to extend this model program to other settlements as well.





PROGRAMS – FOR FAMILIES

Ho, H. C. Y., et al. (2020). A cluster randomized controlled trial of a positive physical activity intervention. Health psychology : official journal of the Division of Health Psychology, American Psychological Association, 39(8), 667-678. <u>Request article</u>

Due to global urbanization, technological advancements, and increasing convenience in daily activities, reduced energy expenditure in all aspects of life has become a major public health concern. A positive physical activity (PPA) intervention was developed to promote physical activity and fitness among Hong Kong families. PPA utilizes positive affective attitudes to circumvent barriers to health behavior change by helping families associate feelings of enjoyment with physical activity. The results not only shed light on the intervention's effectiveness for physical activity and fitness but also demonstrated that the community-based collaborative approach was successful in engaging relevant stakeholders in an active and fruitful partnership with effective capacity building for program development.

PROGRAMS – FOR CHILDREN

Cousson-Gelie, F., et al. (2019). **The "great live and move challenge": a program to promote physical activity among children aged 7-11 years. Design and implementation of a cluster-randomized controlled trial.** BMC public health, 19(1), 367. <u>Full text</u>

Recent population-based surveys have reported that large majorities of children in France, Europe and in the US are not complying with international physical activity (PA) guidelines. There is, therefore, a need to find programs that will improve children's PA habits from an early age. Theorybased interventions that include school, family, and community involvement have the potential to generate a considerable increase in the PA level of children. This study will evaluate the effectiveness of a multilevel, theory-based PA program and potentially provide valuable information for schools and public health officers looking for innovative PA programs.

Hanckel, B., et al. (2019). **The Daily Mile as a public health intervention: a rapid ethnographic assessment of uptake and implementation in South London, UK**. BMC public health, 19(1), 1167. <u>Full text</u>

Existing evidence identifies health benefits for children of additional daily physical activity (PA) on a range of cardiovascular and metabolic outcomes. The Daily Mile (TDM) is a popular scheme designed to increase children's PA within the school day. Emerging evidence indicates that participation in TDM can increase children's PA, reduce sedentarism and reduce skinfold measures. However, little is known about the potential effects of TDM as a public health intervention, and the benefits and disbenefits that might flow from wider implementation in 'real world' settings. Examining TDM in 'real world' settings surfaces adaptions and variations in implementation. This has implications for the likely effects of TDM, and points more broadly to an urgent need for more appropriate methods for evaluating public health impact and implementation in complex contexts.

Frost, M. C., et al. (2018). Increase in Physical Activity Sustained 1 Year After Playground

Intervention. American journal of preventive medicine, 54(5 Suppl 2), S124-S129. <u>Full text</u> Regular physical activity is a vital component of child health, and schools play an important role in the promotion of physical activity among children. This paper describes the implementation and evaluation of a playground redesign involving structural and loose play equipment to increase students' physical activity. This evaluation demonstrated that environmental interventions involving the provision of structural and loose play equipment can be implemented in an intermediate school setting, and can create a sustainable increase in physical activity among



CC O S BY NC



students during recess. This example also demonstrates that schools and community organizations can evaluate the impact of these interventions using relatively simple, low-cost observational methods.

Pathirana, T., et al. (2018). **Impact evaluation of "Have Fun - Be Healthy" program: A community based health promotion intervention to prevent childhood obesity**. Health promotion journal of Australia : official journal of Australian Association of Health Promotion Professionals, 29(1), 100-104. <u>Full text</u>

Childhood obesity is rising in prevalence in Australia. This study aimed to evaluate the impact of the "Have Fun-Be Healthy" (HFBH) intervention, delivered in the Playgroup setting, to generate short term changes in dietary, physical activity and sedentary behaviours of children under 5 years and self-efficacy of parents and primary carers. HFBH intervention was successful in improving the dietary, physical activity and screen time in children and parental self-efficacy. SO WHAT?: Being amongst the first of its' kind in Australia, the findings of this study can have implications for developing and implementing similar future health promotion interventions in comparable settings.

Monash Health Library





SEARCH TERMS

Concept	MeSH headings	Keywords
Communities	Popultation health, residence characteristics	Population or community or catchment or regision or are or suburb or council <i>near</i> health
		Population or community <i>near</i> group or need or trend or program or initiative
		Community <i>near</i> based or setting or environment
Public health approaches	Health promotion, public health	Public health <i>near</i> affect or effect or impact or priotiy or intervention or model or program or strategy or approach or policy
Physical activity	Exercise, physical conditioning human, running, swimming, walking	Increase or improve or enhance or opportunity or facilitate or encourage <i>near</i> physical activity or exercise or walking or running or jogging or swimming or yoga or sport or cycling or bike or riding
Developed countries	Developed countries	High income or developed or industrialised or first work <i>near</i> country or nation or population
		Keywords for all developed countries and significant cities



MEDLINE SEARCH STRATEGY

- 1 Population Health/ or Residence Characteristics/ (39881)
- 2 ((population or communit* or catchment or region or area or suburb* or council*) adj3 health).tw. (105760)
- 3 ((population or communit*) adj3 (group* or need* or trend* or program* or initiative*)).tw. (86642)
- 4 (community adj3 (base* or setting* or environment*)).tw. (105412)
- **5** 1 or 2 or 3 or 4 (295671)

6 (public health adj3 (affect* or effect* or impact* or priorit* or intervention* or model* or program or strateg* or approach* or program* or policies or policy)).tw. (54053)

- 7 (health adj promot*).tw. (47159)
- 8 *Health promotion/ or *Public Health/ (107763)
- 9 6 or 7 or 8 (186576)

10 exercise/ or physical conditioning, human/ or running/ or swimming/ or walking/ (216977)

11 ((increas* or improv* or enhanc* or opportunit* or faciitat* or encourag*) adj2 (physical activit* or exercise or walk* or running or jogging or swim* or yoga* or sport* or cycling or bike or riding)).tw. (65749)

- 12 10 or 11 (256244)
- 13 Developed Countries/ (21341)

14 ((high* income or high-income or higher income or developed or industrialised or industrialized or first world) adj (countr* or nation* or population*)).tw. (57640)

15 ((aruba/ or bahamas/ or curacao/ or puerto rico/ or United States Virgin Islands/ or australia/ or new zealand/ or australian capital territory/ or new south wales/ or northern territory/ or queensland/ or south australia/ or tasmania/ or victoria/ or western australia/ or austria/ or belgium/ or channel islands/ or exp france/ or exp germany/ or ireland/ or liechtenstein/ or luxembourg/ or monaco/ or netherlands/ or Scandinavia/) and Nordic Countries/) or switzerland/ or exp united kingdom/ or england/ or scotland/ or wales/ or Bahrain/ or Barbados/ or Bermuda/ or Brunei/ or exp canada/ or alberta/ or british columbia/ or manitoba/ or new brunswick/ or northwest territories/ or nova scotia/ or Appalachian Region/ or Great Lakes Region/ or Mid-Atlantic Region/ or Midwestern United States/ or New England/ or Northwestern United States/ or Pacific States/ or Southeastern United States/ or Southwestern United States/ or nunavut/ or ontario/ or prince edward island/ or guebec/ or saskatchewan/ or Yukon territory/ or alabama/ or alaska/ or arizona/ or arkansas/ or california/ or colorado/ or connecticut/ or delaware/ or "district of columbia"/ or florida/ or georgia/ or hawaii/ or idaho/ or illinois/ or indiana/ or iowa/ or kansas/ or kentucky/ or louisiana/ or maine/ or maryland/ or massachusetts/ or michigan/ or minnesota/ or mississippi/ or missouri/ or montana/ or nebraska/ or nevada/ or new hampshire/ or new jersey/ or new mexico/ or new york/ or north carolina/ or north dakota/ or ohio/ or oklahoma/ or oregon/ or pennsylvania/ or rhode island/ or south carolina/ or south dakota/ or tennessee/ or texas/ or utah/ or vermont/ or virginia/ or washington/ or west virginia/ or wisconsin/ or wyoming/ or Chile/ or Croatia/ or Cyprus/ or Czech Republic/ or Czechoslovakia/ or Slovakia/ or Greece/ or Greenland/ or Guam/ or Hong Kong/ or Hungary/ or Iceland/ or Israel/ or exp italy/ or Japan/ or Kuwait/ or Latvia/ or baltic states/ or estonia/ or latvia/ or lithuania/ or Malta/ or andorra/ or gibraltar/ or greece/ or exp italy/ or exp portugal/ or san marino/ or exp spain/ or poland/ or romania/ or slovakia/ or Slovenia/ or Qatar/ or Saudi Arabia/ or Seychelles/ or Singapore/ or Sweden/ or Taiwan/ or Denmark/



or faroe islands/ or finland/ or New Caledonia/ or new zealand/ or Norway/ or Oman/ or Panama/ or exp united arab emirates/ or "Antigua and Barbuda"/ or "Trinidad and Tobago"/ or "Republic of Korea"/ or "Newfoundland and Labrador"/ (2018491)

16 (antigua or barbuda or aruba or bahamas or cayman islands or curacao or puerto rico or trinidad or tobago or caicos islands or virgin islands or australia or new zealand or australian capital territory or new south wales or northern territory or queensland or south australia or tasmania or victoria or western australia or western europe or austria or belgium or channel islands or france or germany or ireland or isle of man or liechtenstein or luxembourg or monaco or netherlands or holland scandinavia or switzerland or united kingdom or great britain or england or scotland or wales or Bahrain or Barbados or Bermuda or Virgin Islands or Brunei or canada or alberta or british columbia or manitoba or new brunswick or newfoundland or labrador or northwest territories or nova scotia or nunavut or ontario or prince edward island or quebec or saskatchewan or yukon or united states or america or alabama or alaska or arizona or arkansas or california or colorado or connecticut or delaware or columbia or florida or georgia or hawaii or idaho or illinois or indiana or iowa or kansas or kentucky or louisiana or maine or maryland or massachusetts or michigan or minnesota or mississippi or missouri or montana or nebraska or nevada or new hampshire or new jersey or new mexico or new york or north carolina or north dakota or ohio or oklahoma or oregon or pennsylvania or rhode island or south carolina or south dakota or tennessee or texas or utah or vermont or virginia or washington or west virginia or wisconsin or wyoming or Chile or Croatia or Cyprus or Czech Republic or Czechoslovakia or Slovakia or Greece or Greenland or Guam or Hong Kong or Hungary or Iceland or Israel or italy or aosta valley or friuli venezia giulia or sardinia or sicily or trentino-alto adige or Japan or South Korea or Kuwait or Latvia or baltic states or estonia or latvia or lithuania or Macao or Malta or southern europe or andorra or gibraltar or greece or italy or malta or portugal or san marino or spain or vatican or poland or romania or slovakia or Slovenia or Qatar or Saudi Arabia or Seychelles or Singapore or saint martin or sint martin or st martin or Saint Kitts or st kitts or Nevis or Sweden or Taiwan or Denmark or faroe islands or finland or aland or french polynesia or nauru or New Caledonia or northern mariana islands or Norway or Oman or Panama or united arab emirates or abu dhabi or ajman or dubai or Sharjah or Uruguay or Slovak or korea republic or Czech republic).tw. (2151803)

- 17 13 or 14 or 15 or 16 (3393468)
- 18 5 and 9 and 12 and 17 (1045)
- 19 limit 18 to (yr="2018 -Current" and english) (296)





APPENDIX

PRISMA CHART

Identification of studies via databases and registers Studies removed before References imported for screening (n= 635): screening: Medline (n= 295) Duplicate studies removed (n= Identification 174) Embase (n= 221) Emcare (n= 117) Studies screened against title Studies excluded (n= 347) and abstract (n= 461) Studies assessed for full-text Screening Studies excluded (n=83): eligibility (n= 114) Wrong outcomes (n=14) Wrong setting (n=25) Wrong study design (n=7) Wrong intervention (n=9) Wrong patient population (n=25) Wrong Comparator (n=3) Include Studies included (n=31)

This report contains curated literature results against a unique set of criteria at a particular point in time. Users of this service are responsible for independently appraising the quality, reliability, and applicability of the evidence cited. We strongly recommend consulting the original sources and seeking further expert advice.

