

CHAPTER TWO

THE *ACTIVE LAUNCESTON* HEALTH PROMOTION INITIATIVE

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Rationale for a health promotion initiative

For over 60 years, research has consistently demonstrated that the health benefits derived from a physically active lifestyle are extensive (Hallal et al. 2012). It is now widely accepted that physical inactivity is an important predictor of numerous chronic diseases such as obesity, chronic heart disease, type-2 diabetes, and some cancers (Hallal et al. 2012; World Health Organization 2009). Furthermore, the World Health Organization recognises physical inactivity as a leading risk factor for morbidity and premature mortality, estimating that worldwide approximately “3.2 million deaths each year can be attributable to insufficient physical activity” (World Health Organization 2014).

Therefore, increasing levels of physical activity can improve the health of populations, reduce burden on health systems, and contribute to improvements in overall well-being (Preventative Health Task Force 2008). Das and Horton (2012) noted that it would be inaccurate to suggest that physical activity has an effect only on a person’s physical health, as the contribution to improvement in mental health and overall well-being has now also become evident. The Global Advocacy for Physical Activity (2011) suggests:

Physical activity promotes healthy growth and development in children and young people, helps to prevent unhealthy mid-life weight gain, and is important for healthy ageing, improving and maintaining quality of life and independence in older adults.

There is, however, no single approach for encouraging individuals and communities to increase their levels of physical activity. Rather, it requires a long-term commitment with multiple initiatives and interventions taking place at all levels (Department of Health and Human Services 2008). The most successful investments in increasing physical activity levels are population-based, community-wide, multi-sectoral, multi-disciplinary programs involving numerous settings and sectors, that mobilise and integrate community engagement and resources (World Health Organization 2014). Supportive environments, mass-media campaigns, and community programs and interventions are three essential elements to enable effective community-wide increases in physical activity (Bauman, Finegood, and Matsudo 2009). Social norms also have a role to play in increasing community physical activity levels. If being physically active is considered normal behaviour in one's community, participation levels will in turn increase. This suggests that physical activity interventions should incorporate strategies likely to modify behavioural social norms (Ball et al. 2010).

In Australia, 63% of the adult population is overweight or obese (Australian Bureau of Statistics 2012) and the burden of chronic disease will increase significantly over the next decade with major impacts on families, communities, the health care system, and the economy (Victorian Health Promotion Foundation 2009). Tasmanians suffer higher levels of chronic conditions than do populations in other states and territories, and hence the consequences of physical inactivity may be comparatively greater in that state (Department of Health and Human Services 2007). Tasmanians trail behind four other states and territories when it comes to physical activity, with a 64.4% participation rate in comparison to the Australian Capital Territory (77.1%), the Northern Territory (71.5%), Western Australia (65.4%), and Victoria (64.6%) according to the Australian Bureau of Statistics (2011). Approximately one third of Tasmanians do not undertake recommended levels of physical activity and, in addition, 65.6% of that state's adults are overweight or obese (Australian Bureau of Statistics 2012). Tasmania has other challenges that relate to its smaller population base. Relatively lower incomes and the state's dispersed population make access to coordinated and structured physical activity programs challenging for some population groups.

The impact of being inactive extends beyond the health and well-being of individuals. Physical inactivity also has a considerable negative impact on the economy. It is widely recognised that improved physical activity can result in significant healthcare improvements and savings for individuals and the community as a whole (Department of Health and

Human Services 2011; Muller et al. 2012; Trust for America's Health 2008). The notion that community-wide physical activity interventions can encourage and support people to increase their physical activity levels, resulting in improved health and well-being for individuals and their communities, is well supported.

Active Launceston: An Overview

Active Launceston is located in the regional community of Launceston. Launceston is a major regional economic and cultural centre, servicing Northern Tasmania. The community has an emphasis on agriculture and tourism. The region's population of approximately 79,000 (Australian Bureau of Statistics 2013) is concentrated around the Tamar River catchment and Launceston city. Launceston offers a diverse range of infrastructure to support participation in physical activity.

The impetus for the initiative to be located in Launceston was related to the existing relationships and strategic direction of the key partners, University of Tasmania (UTas) and the Launceston City Council. An existing strong relationship between the vice-chancellor and council general manager of the respective institutions provided a platform for the development of a program that would aim to meet the needs of not only the community, whose poor health outcomes were well documented, but also UTas and the local government authority. For UTas, this engagement offered an opportunity to bolster its presence in the north of the state in addition to strengthening its community engagement agenda. Finally, key drivers and strong networks in the health and recreation sectors in Launceston allowed the efficient coordination of resources toward effective outcomes for the initiative.

Active Launceston was established in 2008 as a community partnership between UTas, the Launceston City Council, and the Office of Sport and Recreation within the Tasmanian state government. As a significant employer and generator of income, UTas has an obligation to contribute actively to the Tasmanian community. The *Active Launceston* partnership is one founded on an understanding of mutual benefit, with funding organisations benefitting by its standing as a community-focussed health-promoting initiative. *Active Launceston* was initiated as an 18-month pilot and its success resulted in ongoing funding, now secured through to 2015.

Active Launceston aims to increase physical activity participation to improve the health and well-being of the Launceston community. The initiative provides free physical activity programs and events for the community in addition to endorsing and guiding new and existing physical

activity providers to enhance their service and connection with the community. *Active Launceston*'s mission is to mobilise the community to increase its participation in physical activity by filling gaps in provision, reducing barriers to participation, and targeting those with the highest need. The partnership has four objectives: the development of partnerships, increasing the opportunities to be active, developing resources, and monitoring outcomes. It seeks to encourage behaviour change through providing access to programs, resources, and networks to ensure that healthy lifestyle behaviour changes are sustained, thus reducing the burden of chronic disease at both individual and community levels.

Active Launceston effectively addresses an identified lack of coordination in the community for physical activities. It is acknowledged as holding a mandate to promote the benefits of physical activity locally and, more importantly, to deliver a selection of inclusive physical activity opportunities. Rather than duplicating services, *Active Launceston* initiatives add value to existing successful local programs, address gaps in service provision, and develop capacity within the community for sustainable participation in physical activity.

The *Active Launceston* program reflects the Tasmanian state government's vision that "all Tasmanians experience and enjoy the many benefits of regular physical activity" (Premier's Physical Activity Council 2011). It is designed to overcome barriers that community members may have in participating in physical activity, including limited or poor knowledge of opportunities, low self-esteem, prohibitive costs, and social disconnection. *Active Launceston* targets groups identified as having the highest need for support such as older people, disengaged young people, children, sedentary adults, those suffering from a chronic condition or disability, those recovering from illness or injury, and people from non-English speaking or lower socio-economic backgrounds.

As a publicly funded initiative, the evaluation of *Active Launceston* is a priority. Findings have provided valuable insights into the benefits of the program to participants, stakeholders, UTas students, and the broader community.

The effectiveness of *Active Launceston* is evidenced later within this chapter. However, its reproducibility has also recently been assessed. The initiative is in the process of state-wide expansion with the current implementation of *Active Tasmania*. The chosen model of *Active Tasmania* is to provide consultancies and a suite of customised resources to improve the health and well-being of Tasmanian communities through increased participation in physical activity.

University–Community Engagement and Collaboration

Managed by UTas, *Active Launceston* has become a foundational initiative for the university in achieving authentic, integrated, and effective community outreach. Importantly, *Active Launceston* has enabled the development of a strong connection to the community in a non-political (non-governmental) environment (Auckland and Byrne 2010). *Active Launceston* resonates with the strategic priorities of UTas, even more apparent through the new strategic plan, *Open to Talent*, in which “community” is highlighted as an ongoing focus. *Active Launceston* presents opportunities for leadership, research, evaluation, teaching, social inclusion, entrepreneurship, and promotion and marketing, with a focus on sharing the knowledge gained with other communities. It enjoys support across two faculties of UTas, with students and staff from a variety of disciplines providing specialised input.

A major factor in the success of *Active Launceston* has been the way the initiative has engaged the community. *Active Launceston* has leveraged a variety of resources, both physical and intellectual, that support good community engagement and reflect some of the fundamental principles that underpin university–community engagement. In understanding these principles, it is important first to establish a working definition of community engagement.

Common to many definitions is the notion that community engagement is the process of working collaboratively with and through groups of people connected through physical or non-physical mediums, or special interest groups, to address issues affecting their well-being. It often involves partnerships and coalitions that help to mobilise resources and influence systems, change relationships, and serve as catalysts for changing behaviours, practices, and policies (Fawcett et al. 1995).

Beyond the collective definition of community engagement is the notion of university–community engagement which by extension is defined as the creation of sustainable partnerships between a university and its surrounding communities that enhance the learning experience of students and staff while simultaneously contributing to the overall health and well-being of the local community (Fairnie and Platt 2004). Engagement Australia (2014) defines engagement as:

the cultivation of relationships that lead to productive partnerships which yield mutually beneficial outcomes to universities and their partners through the application and utilisation of university resources including staff, students, infrastructure and knowledge and across the breadth of university activities including Research, Education and Service.

Active Launceston is an excellent example of university–community engagement as it reflects some of the key concepts that underpin effective community engagement, including the concepts of reciprocity, mutual benefit, knowledge application, and capacity building.

In an interview in November 2012, David Rich, UTas provost, suggested that, together with research and teaching, university–community engagement has emerged as one of the key pillars of university core business. It has evolved to a point where it is no longer regarded as something that is separate from, or an add-on to, other core interests, but is integral to all of the operations of the university. Arguably, community engagement is also a term that is not well understood as it has been used to describe the myriad of ways that universities interact with communities in which they are located. Literature concerning university–community engagement identifies three ways in which it can be viewed, namely civic engagement, engaged scholarship, and service-learning (Boyer 1994).

Civic engagement is a collaborative activity that builds on the resources, skills, expertise, and knowledge of the campus and community to improve the quality of life and advance the campus mission. It can be viewed within the context of teaching, research, and service in and with the community (Bringle and Hatcher 2004).

Engaged scholarship is the scholarly work developed by the campus that simultaneously meets the core mission of the university while addressing the needs and aspirations of the community it serves. Engaged scholarship is therefore seen as a collaborative process that contributes to the public good.

The third context within which university–community engagement can be viewed, that of service-learning, draws heavily on the concepts of reciprocity, mutual benefit, and knowledge application (Jacoby 2009). It is a form of experiential education in which students engage in activities that address human and community needs, together with structured opportunities designed to promote student learning and development.

Community reach of *Active Launceston*

Between 2008 and the end of 2012, *Active Launceston* achieved a considerable community reach, coupled with a strong engagement by participants. It coordinated 69 programs that engaged a total of 8,240 participants who attended 18,739 sessions that amounted to 23,217 hours of physical activity. Participation in programs consistently reached capacity, with waiting lists regularly needing to be generated. Awareness of the *Active Launceston* initiative almost doubled from 32% of telephone

survey respondents in 2008 to 61% in 2012.

Active Launceston has provided valuable experience to students in the tertiary education sector, with a total of 73 university students from a variety of health, exercise science, and education courses assisting in the facilitation of programs. Students have participated for a total of 744 hours, averaging 11 hours of participation each. Three students have also been involved in the evaluation of *Active Launceston*, gaining important experience in research and, more specifically, health service evaluation.

In addition to the programs run by *Active Launceston*, there have been 60 events, programs, or organisations endorsed and supported by *Active Launceston*. Since 2008, *Active Launceston* has acted as an economic multiplier through the engagement of 47 private physical activity providers in a paid capacity to instruct and coordinate sessions. Additionally, it has generated business for over 70 different suppliers including merchandise vendors, graphic design companies, and food and beverage outlets.

Evaluation of *Active Launceston*

An ongoing mixed-methods evaluation of *Active Launceston* has been in progress since its inception. An online survey and focus groups of participants, and stakeholder interviews, determined the impact of programs on participants. Student testimonials provided further information regarding outcomes for students and the university–community engagement. In addition, telephone surveys of Launceston residents were conducted in 2008 and 2012 to determine community participation in activity and exercise. These data demonstrate the impact and outcomes to program participants, stakeholder groups, and students, and the reach that *Active Launceston* has achieved in the community.

Online survey, focus groups, and interviews: Participants and stakeholders

Responses to the online survey, conducted in 2012, were received from a total of 545 participants and stakeholders who included students, fitness instructors, and the general community. Of those who responded, 74.1% agreed or strongly agreed that they currently engage in regular physical activity, defined as a total of 30 minutes or more per day at least 5 days a week. *Active Launceston* had encouraged 86.4% of respondents to participate in community-based physical activity events and programs, and 82.2% agreed or strongly agreed that participation in *Active Launceston*

had led to an increase in their level of physical activity. An overwhelming majority of respondents (93.2%) agreed that being involved in an *Active Launceston* activity had taught them more about the opportunities available in the community to be physically active. While physical activity and health improvements were important outcomes for most respondents, a variety of other aspects and consequences were valued. These included trying new activities (55.3%), having a safe and supportive environment for physical activity (42.9%), finding out what else was available in the community (42.0%), socialising (37.7%), meeting new people (32.1%), and becoming involved in the community (24.2%).

Six focus group interviews with 41 participants identified major themes relating to the impact of the partnership as both direct benefits of participation and broader benefits to the community. Participation in *Active Launceston* directly benefited people through increased engagement in exercise and activities, benefits to health, personal development, and enjoyment.

Participants found that their involvement led to other activities, both community-based and self-arranged. Results of the evaluation indicated that *Active Launceston* provided the impetus to become active, overcoming some of the barriers that existed to taking the initial step, and provided the opportunity to try new things and rediscover activities that participants had previously engaged in. Indications of significant lifestyle changes were expressed in a number of ways.

I've taken it from the class into my own life where I am [bike] riding six days a week now.

I can hardly wait to get back in and do some walking, whereas before it just probably wouldn't have entered my head. I can just feel myself sitting at a desk all day and disintegrating. ... I really want to get back to the exercise.

Health benefits were widely described, including improvements in physical health, strength, fitness, mental health, and weight loss. For participants with disabilities, an important outcome of *Active Launceston* involvement was improvement in the self-management of conditions.

It helps so much, their, not just their physical health but their mental health. Most of our clients have some kind of mental health issue also, and it's been able to raise them by having better spirits. (Carer of people with disabilities)

My fitness levels have improved and my sugar levels have dropped ... I'm getting a lot better at it and I think it has done me a world of good.

Participants believed that their involvement contributed to their personal development though the social benefits of being part of a group. They mentioned improvements in confidence, self-esteem, knowledge, skills, and motivation, with some finding that *Active Launceston* provided routine and filled a void in their life.

I know that it has sort of picked up my self-esteem from my depression and I've noticed there's people who have been in the groups with me, and they've picked up as well.

Well, part of it is adding to your routine of life which is an important thing for people in retirement. It adds to the other capacities. It makes life busy.

The enjoyment that participants experienced was also evident.

Well, the other day when she came home from the laser skirmish I've never seen her laugh so much in all my life; the enthusiasm that she got from that!

The broader benefits of *Active Launceston* to the community occur by promoting social trust through bringing people from different backgrounds together and providing a context for learning from and supporting others. These benefits to community were amplified by the approach of targeting groups at risk of social isolation.

I am actually looking at ... volunteering with the Migrant Resource Centre because there is apparently about 300 and still more people coming and I really don't mind chatting with them and stuff ... so I thought, you know, I am going to start volunteering to do that.

It engages a whole group of people that otherwise couldn't access it or would just think, "I can't go to a gym, it's too hard, it costs too much money", that sort of thing. So it engages all those people.

Participants acknowledged the support of funding bodies, building trust in governing organisations. By using and showcasing community facilities, the initiative was found to have the potential to enhance the reputation of partnering parent organisations.

It encourages you to believe that the council actually cares for its ratepayers and is trying to do things. Through *Active Launceston* they are

trying successfully to reach out there and do things that will make people happier and healthier, physically better, mentally better rather than just having bike lanes and roundabouts.

Participants were aware of the role of UTAs in supporting *Active Launceston* and appreciated the benefits of collaboration between university and government

The university with their health and physical education department, and the council and the community, the three sort of joining, that's great.

Stakeholders ($n = 13$) echoed all of the benefits that participants identified. When talking about direct benefits to participants, stakeholders tended not to focus on the physical benefits but emphasised the importance of outcomes such as improved confidence, self-esteem, and mental health, and the positive social interactions and connectedness that occurred.

Some of the cohorts that they bring out are very socially isolated, often people with disabilities, mental health issues. The benefits of reducing isolation and getting people out are well beyond how we might define health. There are the social determinant benefits of getting people together.

Stakeholders cited increased participation rates and growth of programs as their evidence for the success of *Active Launceston*. They felt that the *Active Launceston* model was unique and filled a gap in the physical activity “market”. Respondents attributed its success to the ability to initiate activity in previously sedentary people, encourage and facilitate participation in other organised activities, and promote lifelong behavioural change.

[They] have worked hard in working with stakeholders around the community to say, “We are going to offer this, but then when it finishes how can we... get people to come onto your program?” So I see *Active Launceston* as a bit of a feeder to a number of stakeholders and providers.

It's certainly getting in to a different demographic than those I would probably see attending my classes, so it is great in that it is attracting people who may not otherwise exercise.

Active Launceston is seen as having a unique approach that complements existing models, with the added role of providing advocacy for sections of the community less able to access these types of physical

activities. Stakeholders provided a number of anecdotes that illustrated the potential that *Active Launceston* programs have to change people's health and well-being. Here is one example:

There are many people, and I am thinking of one particular person in [an area of relative disadvantage] who was very isolated, very immobile, high levels of chronic conditions. And *Active Launceston*, or her involvement with some of the *Active Launceston* programs, has actually been the point of changing her whole life around. To see her as such an inspirational, I guess, peer leader now. And seeing how she is seen in the community and how she inspires other people to be physically active is just inspirational in itself and that was from participating. ... This person was 100% wheelchair bound and very obese, had multiple chronic conditions, and now she can walk with walking frames and she does all sorts of wonderful things and she is involved with programs that the house runs as a volunteer now ... a very inspirational woman.

Student testimonials

Testimonials were sought from 19 of the 73 (26%) university students who experienced an *Active Launceston* placement. All found the experience to be enjoyable and a valuable addition to their training. It was often the first time that they had been able to work in a non-clinical community-based context and for many it opened their eyes to future career opportunities.

The *Active Launceston* placement was very different to other placements I have participated in because *Active Launceston* aims to help the wider community whereas other places have been more one-on-one patient consultation.

It helped with my organisational skills and also an insight to what is out there in the career world and a "behind the scenes" look into organising events and trying to advertise, get media attention etc.

Other learning opportunities for students included the development of communication and teamwork skills as well as an understanding of the specific needs of some groups and social determinants of health.

I learned the ins and outs of how to lead small and large community groups for exercise sessions, working as a team with other instructors and valuable communication skills between both the instructors and the clients.

It also gave me a better understanding of some barriers that people face on

a day-to-day basis that affects their ability to lead a healthy and fulfilling life.

Students appreciated the “hands-on” and authentic learning opportunities that *Active Launceston* provided, the opportunity for engagement with community members and health professionals, and the opportunity for volunteerism it encouraged.

I loved meeting new people and chatting to them each week as we walked and learning about their exercise history and lifestyle habits and encouraging to keep active and get out and about as much as possible.

Active Launceston provided students with not only the opportunity to experience how events and programs are run, but also the planning involved. They saw first-hand the strengths of the *Active Launceston* initiative.

I think the messages that *Active Launceston* communicates through the programs and events are a fantastic initiative, especially for a smaller town like Launceston. It’s really great how they aim to target many different audiences and cater for different needs for different groups among our community. It’s easy to get involved and is free. It is definitely a positive project for Launceston.

For one student, the experience helped to consolidate a future career preference.

I also found that I gained a lot of self-satisfaction with the *Active and Inclusive* program [one initiative of *Active Launceston*] where I enjoyed making the participants happy and enjoy their exercise. From the opportunity of this program, I have realised that I might like to work with people with disabilities in my future. I would not have been able to make this conclusion if I had not helped out with *Active and Inclusive*.

Telephone surveys of Launceston residents

Two cohorts of Launceston residents were randomly selected using computer generation to participate in cross-sectional time-series telephone surveys in 2008 ($n = 879$) and 2012 ($n = 900$). The cohorts were comparable with regard to gender and body mass index. However, respondents in 2012 were older than were those in 2008. Chi square analyses were used to compare the two cohorts. The proportions of respondents reporting that they engaged in regular physical activity

remained unchanged (78% in 2008 versus 77% in 2012, $p = .80$). Furthermore, although there were more people who believed that the time they spent participating in physical activity had increased over the previous 12 months (20% in 2008 versus 24% in 2012), the difference in percentages was not significant ($p = .08$). However, the proportion reporting that they undertook moderate level activity in the previous two weeks increased by eight percentage points (from 48% in 2008 to 56% in 2012, $p < .005$), and those reporting participation in vigorous activity increased by 12 percentage points (from 17% in 2008 to 29% in 2012, $p < .005$). These changes were equally evident in men and women.

Summary of evaluations

The evaluation of *Active Launceston* demonstrated that the initiative had been successfully implemented and has engaged a large number of residents from Launceston and its surrounds. Awareness of *Active Launceston* increased in the community over the life of the program. Qualitatively, there was ample evidence that participation in *Active Launceston* programs influenced people's lives profoundly by improving fitness and health as well as increasing social engagement. Over the period in which *Active Launceston* has been operational, the participation rate in physical activity was not demonstrated to have increased with regard to either regularity of physical activity or time spent in physical activity. However, more people reported that they had engaged in moderate or vigorous activity over the previous fortnight.

University engagement achieved through *Active Launceston*

As the sole university in Tasmania, UTas recognises the potential and responsibility it has in contributing to the economic, social, cultural, and intellectual life of the island state. The notion that universities seek partnerships that help address social, cultural, and civic problems within host communities is not new. At the community level, there is a degree of expectancy that universities can contribute to the public good (Boyer 1994). It is a challenge to manage this expectation within the limited resources and capabilities, and within the mission of the university.

Active Launceston creates opportunities to contribute to the research agenda through the process of community engagement. Opportunities for community-based research across interdisciplinary lines are presented through the different ways in which *Active Launceston* engages the

community. Community engagement through research requires university researchers to establish and maintain effective relationships with stakeholders, be they the bodies that fund the research, the research participants, and/or research partners (Kilpatrick, Barrett, and Jones 2003). From a community perspective, a key benefit is the potential that effective engagement brings through contributing to, and building capacity of, the community through access to the physical and intellectual resources of the university.

The involvement of students from UTas in *Active Launceston* activities and events itself presents a community-based service-learning opportunity. Learning through interactions with people external to the university community helps introduce new ideas, develop civic and leadership skills, raise awareness of new practices, enrich student learning, and expose students to new and different value sets. Furthermore, *Active Launceston* employees contribute to the teaching and learning of students through providing seminars on the benefits of community engagement and physical activity projects, and by presenting options for career opportunities.

The success of *Active Launceston* has now provided a platform for postgraduate research in active living along with the opportunity for peer-reviewed publications and conference presentations. There is now also the opportunity for teaching and learning engagements within undergraduate courses for *Active Launceston* employees. *Active Launceston* has recently employed a research fellow and is bolstering its research outcomes including longitudinal studies tracking *Active Launceston* participants over time.

Finally, the commencement of a new university-level unit titled *Foundations for Active Living*, part of the Bachelor of General Studies, is an exciting development for *Active Launceston*. This foundation unit is broadly targeted to provide participants and future providers with the opportunity to build on their engagement with the project as participants by developing knowledge in the theoretical underpinnings of the benefits of physical activity and the fundamentals of community-based health promotion. Successful completion of this unit may be credited in current or future tertiary studies. For UTas, the additional revenue stream will help to support and expand the program into the future and create the potential for sustainability.

Conclusion: The logistic challenges of community engagement

Active Launceston provides a solid case study for how universities can engage effectively with their communities. However, the success of the initiative has not come without its challenges. The long-term financial viability of *Active Launceston* continues to be of concern for its project partners and staff. With tight economic times and conservative fiscal policies of state and federal governments impacting on the academic sector, the need to attract funding outside traditional grant streams has become essential. *Active Launceston* employees often feel constrained by project resourcing and believe that a higher level of engagement, a greater number of activities, and an increased ability to capture fully the impact of the programs on the community could be achieved if more time and funding were available.

Although partners in the initiative have found common ground through the development of *Active Launceston*, they continue to have a variety of competing strategic directions that may affect their continued support of this initiative. This provides a challenge for *Active Launceston* project managers to ensure the basic needs of each organisation are continually met through the outcomes of the partnership.

There is a perception among some commercial fitness providers that, by providing free activities, *Active Launceston* might reduce their ability to attract clients. Ensuring that processes are in place to enhance the connection of commercial providers to the community and *Active Launceston* participants, rather than detract from it, has been critical in nurturing these working relationships.

There is also a risk that some *Active Launceston* programs may be “preaching to the converted”. It is important that programs be open and accessible to all while retaining the essential elements (e.g., venue and time) of sessions that best suit those in the community who are most in need. The ability to adapt and deliver a flexible model in line with changing participation trends in sport and physical activity, along with changing health needs of the community, is a vital element of the success of *Active Launceston* and requires a high level of communication and engagement with stakeholders.

Increasing physical activity participation is important for improving the health and well-being of our communities. Although many lessons have been learned throughout the project’s lifespan, *Active Launceston* has demonstrated the effectiveness of community-wide interventions in providing benefit to individuals and communities, and how to enhance the

university–community engagement agenda successfully through a mutually beneficial partnership.

References

- Auckland, S., and L. Byrne. 2010. "Active Launceston Pilot Project – University Partnerships for Healthy and Active Communities." Paper presented at the 7th Annual Australian University Community Engagement Alliance (AUCEA) National Conference at the Newnham campus of University of Tasmania, Launceston, July 5–7.
- Australian Bureau of Statistics. 2011. *Australian Social Trends, June 2011: Sport and Physical Recreation*. Australian Bureau of Statistics. [http://www.ausstats.abs.gov.au/ausstats/subscriber.nsf/LookupAttach/4102.0Publication29.06.114/\\$File/41020_Sport_Jun2011.pdf](http://www.ausstats.abs.gov.au/ausstats/subscriber.nsf/LookupAttach/4102.0Publication29.06.114/$File/41020_Sport_Jun2011.pdf).
- . 2012. *Australian Health Survey: First Results, 2011–12*. Australian Bureau of Statistics. [http://www.ausstats.abs.gov.au/ausstats/subscriber.nsf/0/1680ECA402368CCFCA257AC90015AA4E/\\$File/4364.0.55.001.pdf](http://www.ausstats.abs.gov.au/ausstats/subscriber.nsf/0/1680ECA402368CCFCA257AC90015AA4E/$File/4364.0.55.001.pdf).
- . 2013. "2011 Census Quickstats." Australian Bureau of Statistics. http://www.censusdata.abs.gov.au/census_services/getproduct/census/2011/quickstat/60201?opendocument&navpos=220.
- Ball, K., R. Jeffery, G. Abbott, S. McNaughton, and D. Crawford. 2010. "Is Healthy Behavior Contagious: Associations of Social Norms with Physical Activity and Healthy Eating." *International Journal of Behavioral Nutrition and Physical Activity* 7 (1): 86. <http://www.ijbnpa.org/content/7/1/86>.
- Bauman, A., D. T. Finegood, and V. Matsudo. 2009. "International Perspectives on the Physical Inactivity Crisis—Structural Solutions Over Evidence Generation?" *Preventive Medicine* 49: 309–312.
- Boyer, E. L. 1994. "Scholarship Reconsidered: Priorities for a New Century." In *Universities in the Twenty-First Century: A Lecture Series*, 110–132. London: National Commission on Education.
- Bringle, R. G., and J. A. Hatcher. 2004. "Advancing Civic Engagement Through Service-learning." In *Public Work And The Academy: An Academic Administrator's Guide to Civic Engagement and Service-learning*, edited by M. Langseth, W. M. Plater, and S. Dillon, 125–145. Boston, MA: Anker Press.
- Das, P., and R. Horton. 2012. "Rethinking Our Approach to Physical Activity." *The Lancet* 380 (9838): 189–190.
- Department of Health and Human Services. 2007. *Tasmania's Health Plan*. Department Health and Human Services. <http://www>.

- dhhs.tas.gov.au/about_the_department/our_plans_and_strategies/tasmanias_health_plan/tasmanias_health_plan_archive.
- 2008. *Reduce Inactivity, Get Moving: A Review of Potential Strategies*. Department of Health and Human Services. Hobart, Tasmania. <http://www.getmoving.tas.gov.au/resources/research>.
 - 2011 *A Fair and Healthy Tasmania – Cost and Savings Analysis*. Department of Health and Human Services. Hobart, Tasmania. http://www.dhhs.tas.gov.au/_data/assets/pdf_file/0010/115201/Fair_and_Healthy_Tasmania_2011.pdf.
- Engagement Australia. 2013. “Welcome to Engagement Australia.” Engagement Australia. <http://engagementaustralia.org.au/>.
- Fairnie, I., and D. Platt. 2004. “Definitions of Community Engagement.” Paper presented at AUCEA National Conference, University of Western Sydney, July 25–27.
- Fawcett, S. B., A. Paine-Andrews, V. T. Francisco, J. A. Schultz, K. P. Richter, R. K. Lewis, E. L. Williams et al. 1995. “Using Empowerment Theory in Collaborative Partnership for Community Health and Development.” *American Journal of Community Psychology* 23: 677–697.
- Global Advocacy for Physical Activity. 2011. *Non Communicable Disease Prevention: Investments That Work for Physical Activity*. Global Advocacy for Physical Activity (GAPA), the Advocacy Council of the International Society for Physical Activity and Health (ISPAH). www.globalpa.org.uk/investmentsthatwork.
- Hallal, P. C., A. E. Bauman, G. W. Heath, H. W. Kohl, I. M. Lee, and M. Pratt. 2012. “Physical Activity: More of the Same Is Not Enough.” *The Lancet* 380 (9838): 190–191.
- Jacoby, B. 2009. “Civic Engagement In Today’s Higher Education: An Overview.” In *Civic Engagement in Higher Education: Concepts and Practices*, edited by B. Jacoby and associates, 5–22. San Francisco, CA: Jossey-Bass.
- Kilpatrick, S., M. Barrett, and T. Jones. 2003. “Defining Learning Communities.” Paper presented at New Zealand Association of Research in Education/Australian Association of Research in Education Joint Conference, at Auckland, New Zealand, November 29–December 3.
- Muller, P., A. Wadsley, D. Adams, D. Arthur, and B. Felmingham. 2012. *The Value of Sport and Physical Recreation to Tasmania*. Australian Innovation Research Centre. http://www.development.tas.gov.au/_data/assets/pdf_file/0016/47122/Summary_-_12_July.PDF.

- Premier's Physical Activity Council. 2011. *Tasmania's Plan for Physical Activity 2011–2021*. Hobart, Tasmania: Tasmanian Government.
- Preventative Health Task Force. 2008. *Australia: The Healthiest Country by 2020*. Canberra: Commonwealth of Australia. [http://www.health.gov.au/internet/preventativehealth/publishing.nsf/Content/A06C2FCF439ECDA1CA2574DD0081E40C/\\$File/discussion-28oct.pdf](http://www.health.gov.au/internet/preventativehealth/publishing.nsf/Content/A06C2FCF439ECDA1CA2574DD0081E40C/$File/discussion-28oct.pdf).
- Trust for America's Health. 2008. *Prevention for a Healthier America: Investments in Disease Prevention Yield Significant Savings, Stronger Communities*. Washington, DC. <http://healthyamericans.org/reports/prevention08/Prevention08.pdf>.
- Victorian Health Promotional Foundation. 2009. "The Health and Economic Benefits of Reducing Disease Risk Factors." VicHealth. <http://www.vichealth.vic.gov.au/Publications/Research/Health-and-economic-benefits-of-reducing-disease-risk-factors.aspx>.
- World Health Organization. 2009. *Global Health Risks: Mortality and Burden of Disease Attributed to Selected Major Risks*. World Health Organization. http://www.who.int/healthinfo/global_burden_disease/GlobalHealthRisks_report_full.pdf.
- . 2011. *Physical Inactivity: A Global Public Health Problem*. World Health Organization. http://www.who.int/dietphysicalactivity/factsheet_inactivity/en/index.html.