

# Learnings and opportunities: Coronavirus impacts on our health, wellbeing and physical activity

Chris Lacey (he/him)

Manager, Physical Activity and Sport, Programs

Dr Annemarie Wright (she/her)

Principal Research Advisor, Policy and Research Office

# Outline



- Unequal impacts of coronavirus on the health and wellbeing of Victorians
- Challenges in maintaining our community connections, accessing healthy and affordable food, managing the shutting down of our traditional sport and physical activity programs
- Victorians' renewed interest in walking and bike riding and some great collaborative partnerships

# VicHealth

*The world's first health promotion foundation*

## Our five strategic imperatives



Promote  
healthy eating



Encourage regular  
physical activity



Prevent  
tobacco use



Prevent harm  
from alcohol



Promote  
mental wellbeing



Established  
30 years ago, funded  
by a tax on tobacco

©VicHealth



Vision: one million more  
Victorians to have better  
health and wellbeing by 2023



# Coronavirus Victorian Wellbeing Impact Survey

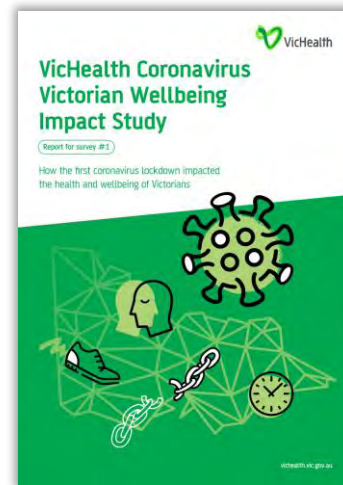
Online survey of 2000 Victorians aged 18-75+

Wave 1 - 29<sup>th</sup> May - 8<sup>th</sup> June 2020

Wave 2 - 10<sup>th</sup>- 21<sup>st</sup> September

## Survey Questions

1. What has been the impact of the second wave on people's health and wellbeing?
2. Has the second wave changed people's health and wellbeing relative to the first?
3. What factors have influenced these changes?
4. How does this vary by socio-demographics and recent experiences e.g. job loss, the summer bushfires



# Overall survey results

**After the first wave we saw significant impacts on food security, social connection and physical activity levels**

## **Areas of Improvement since first wave**

- Food insecurity, risk of short-term harm from alcohol, financial hardship

## **Areas of Decline since first wave**

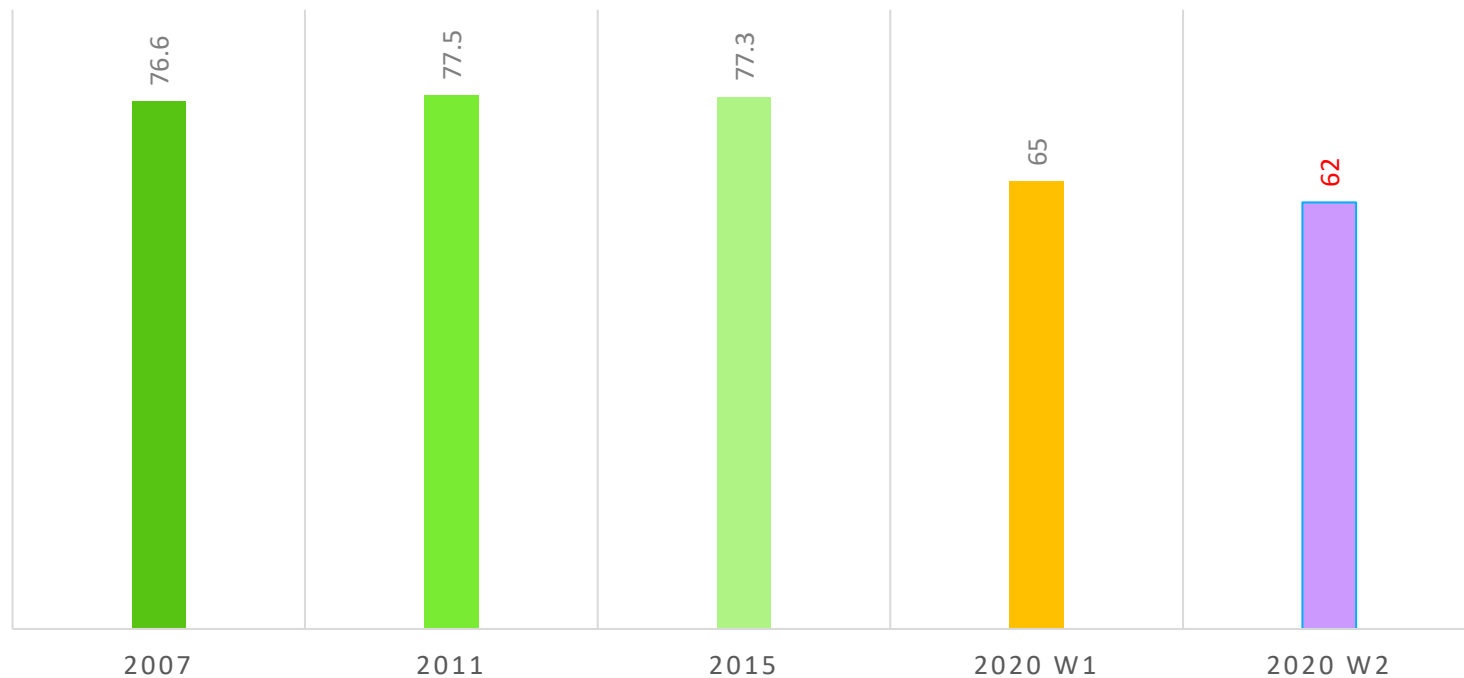
- Life satisfaction, subjective wellbeing, social connection

## **Areas of Stability/no change**

- Physical activity, healthy & unhealthy food consumption, smoking, psychological distress

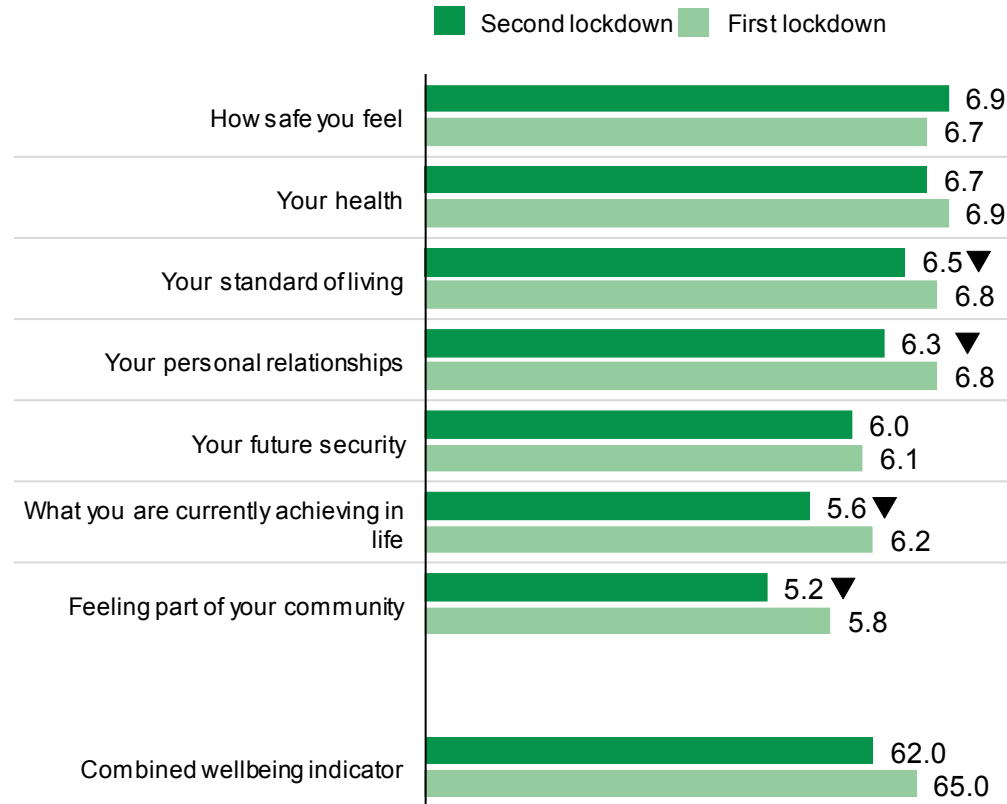
# General Wellbeing Results

## Subjective Wellbeing



# Domains of subjective wellbeing

How satisfied are you with ...? (score out of 10, higher is more favourable)



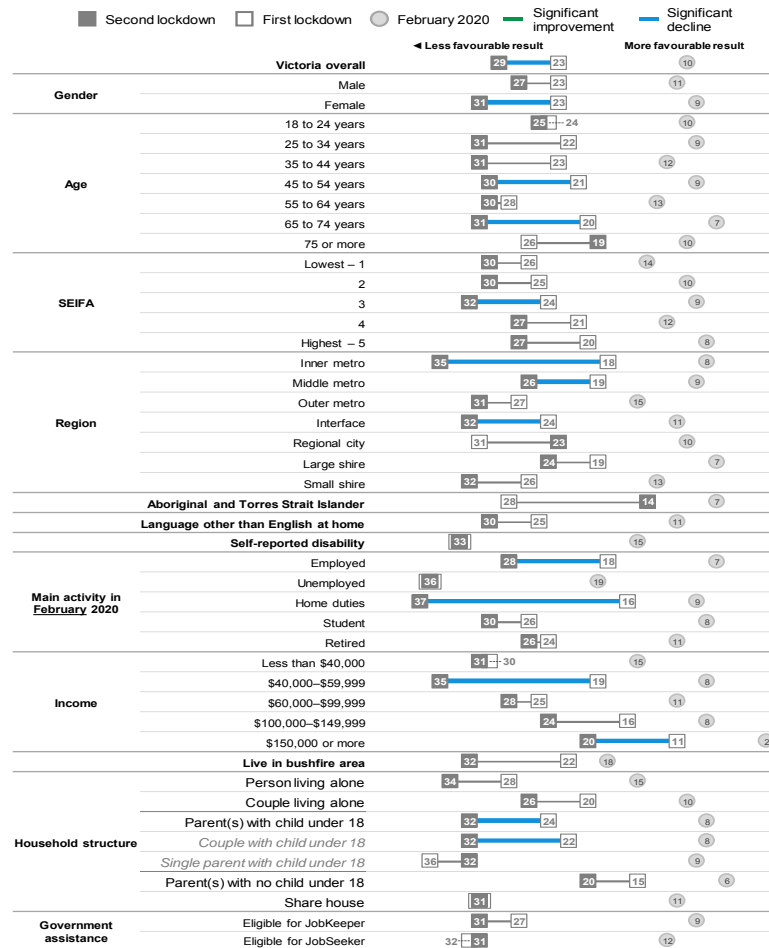


# % Lack of social connection with others

For 25-34 year olds

Lack of social connection in women (41%) is twice that of men (20%)

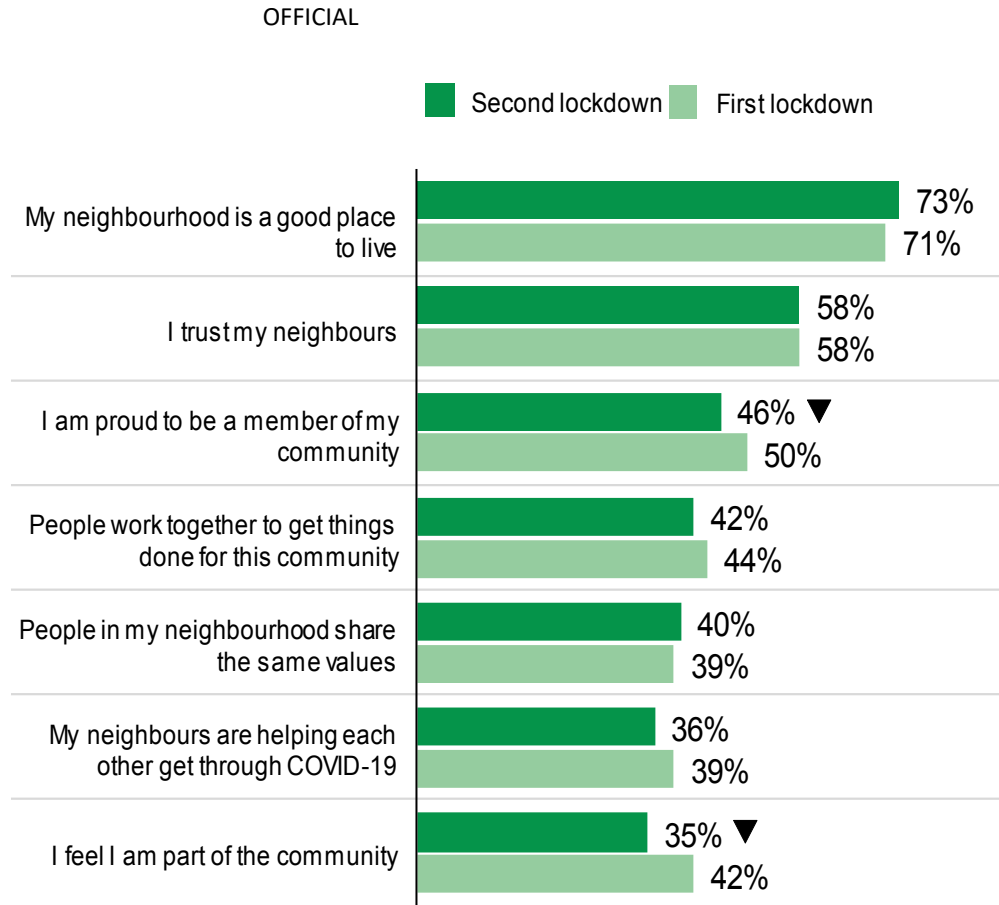
OFFICIAL



OFFICIAL

# % Agreement with community connection statements

*Only 1 in 3 felt part of the community during lockdown two*



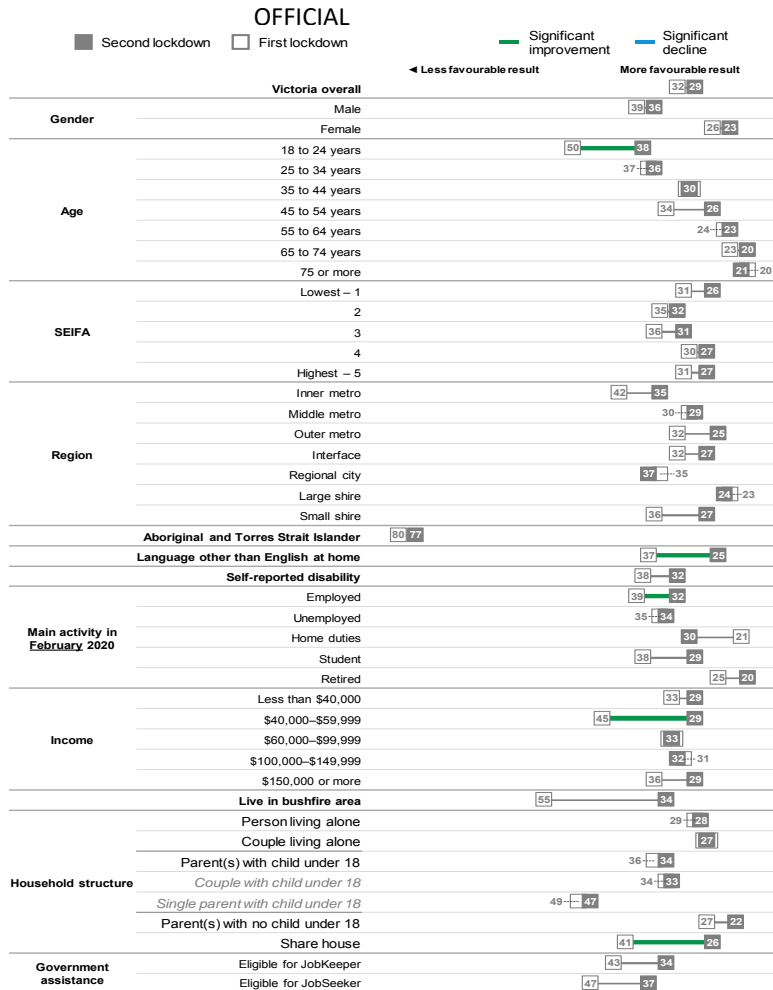
# Healthy Eating Results

# Daily sugary drink consumption

1 in 3 people consumed sugary drinks daily in wave 2

## Improvements:

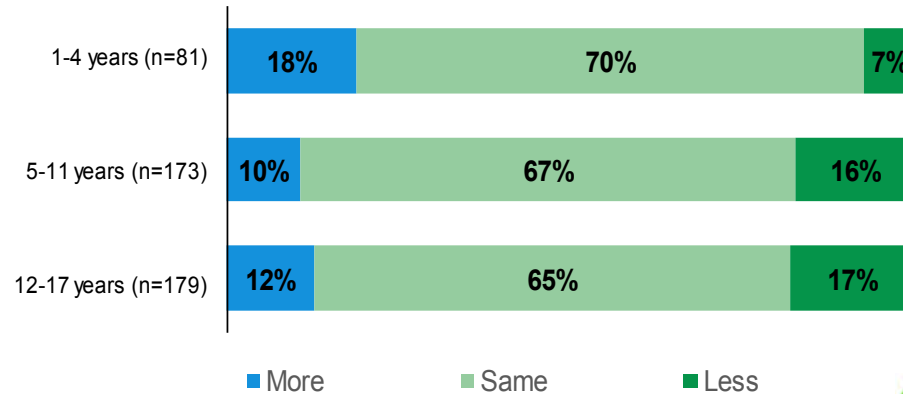
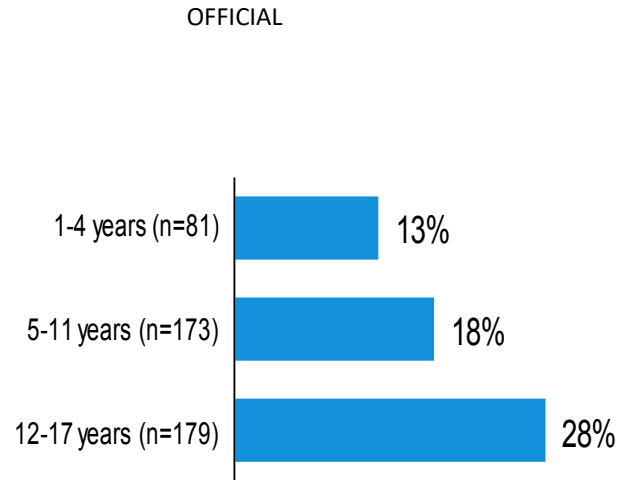
- Young people
- Language other than English
- Employed
- Income \$40-60K



# Child & adolescent sugary drink consumption

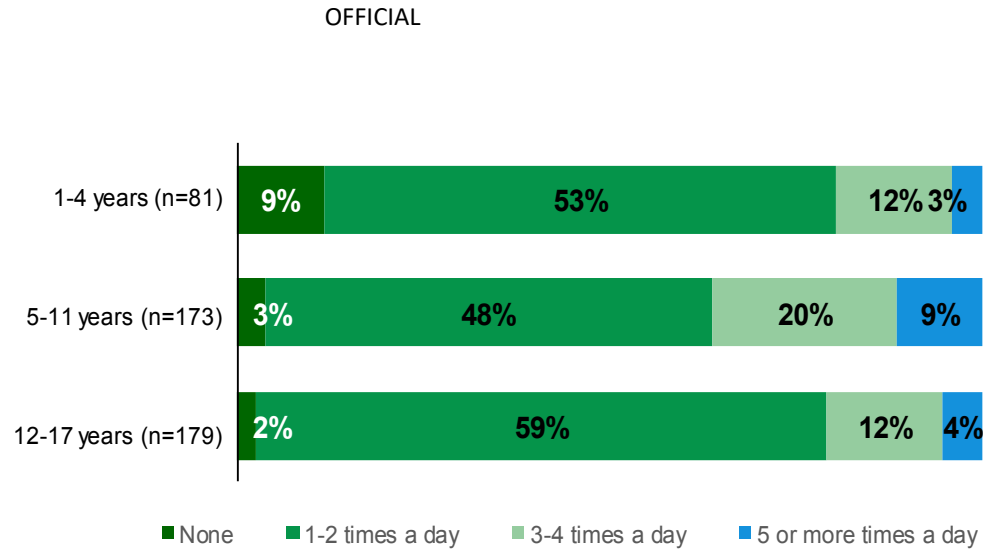
% sugary drinks daily

More, less or same during lockdown compared to Feb 2020

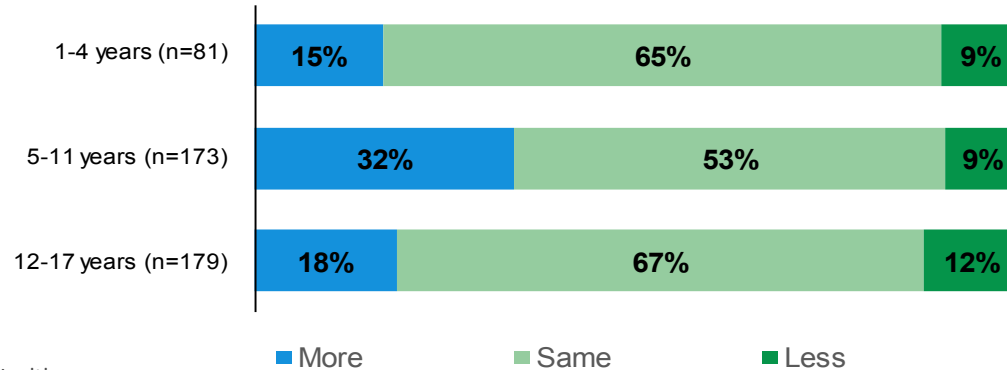


# Child & adolescent unhealthy snack food consumption

## Number of unhealthy snacks per day



## More, less or same during lockdown compared to Feb 2020



# % Reliance on low-cost unhealthy food due to shortage of money

## Improvements

- Young people
- High SES
- Unemployed
- Parents of U18s
- Bushfire communities

## Little change

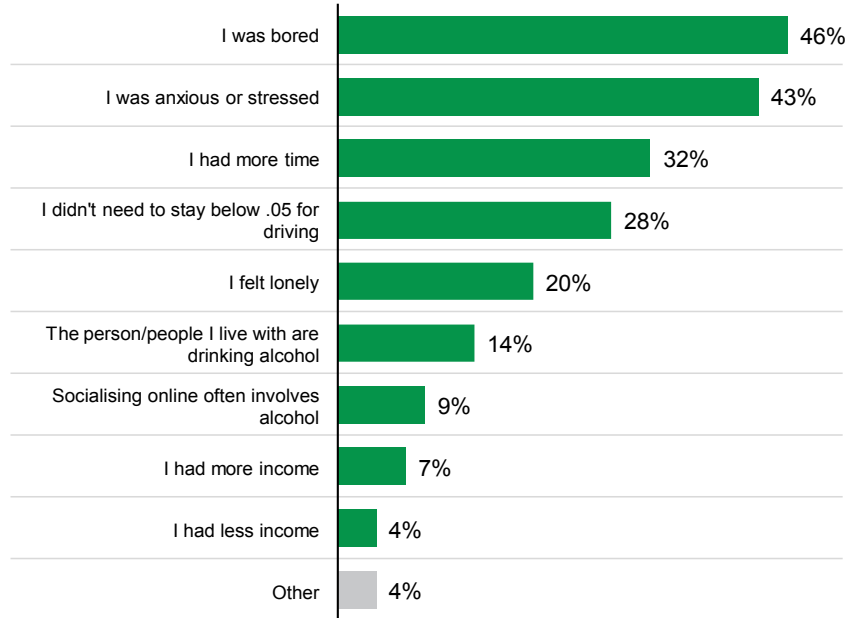
- Inner metro
- Aboriginal and Torres Strait Islander peoples
- JobSeeker



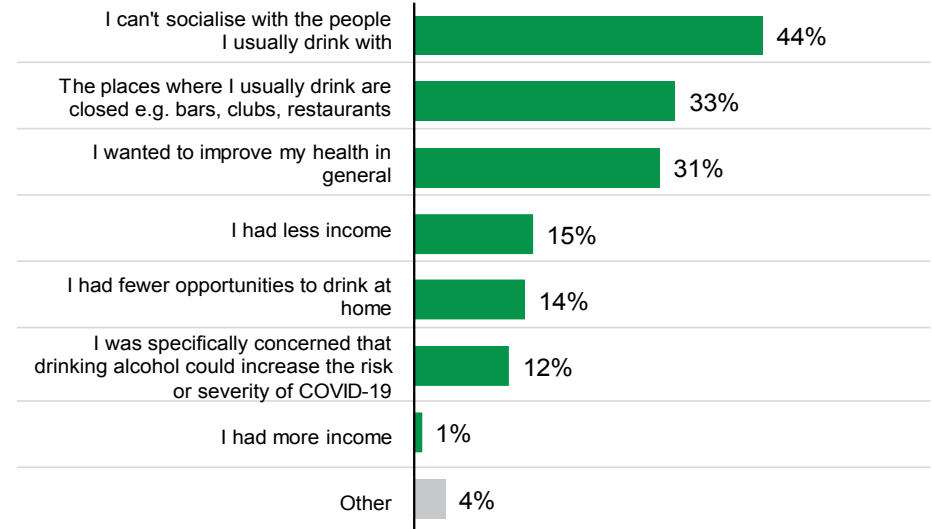
# Alcohol Consumption Results



## Reasons for drinking more

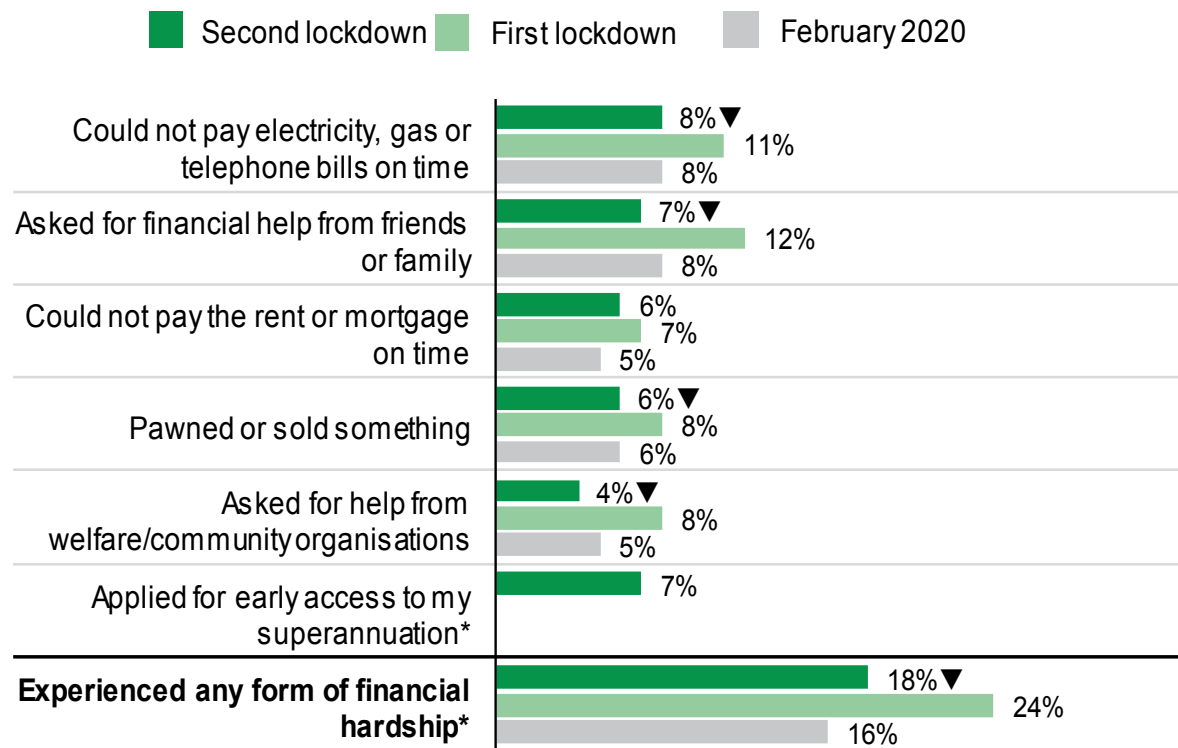


## Reasons for drinking less



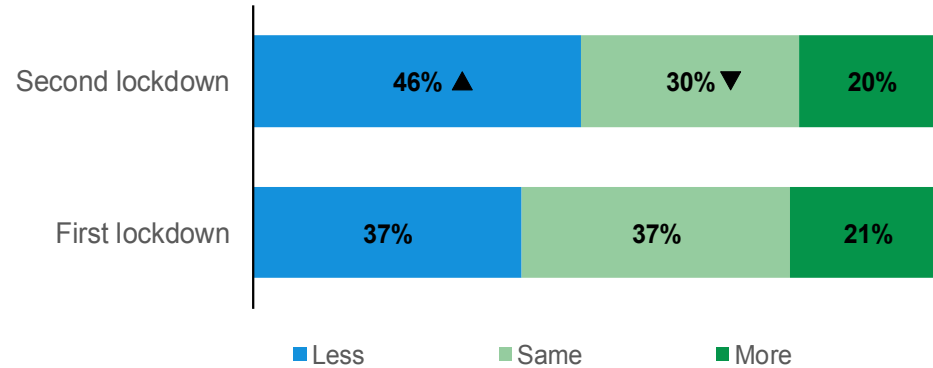
# Financial Hardship Results

# % Financial hardship

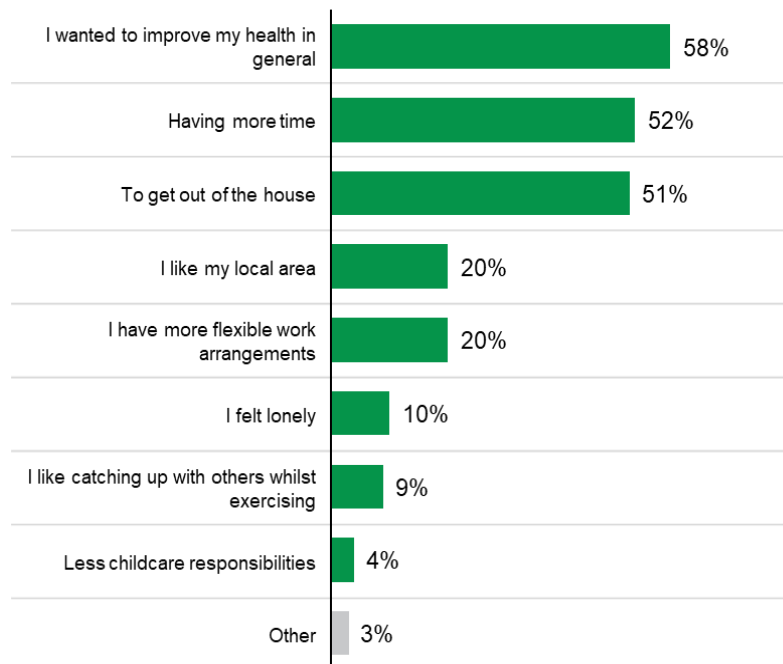


# Physical Activity Results

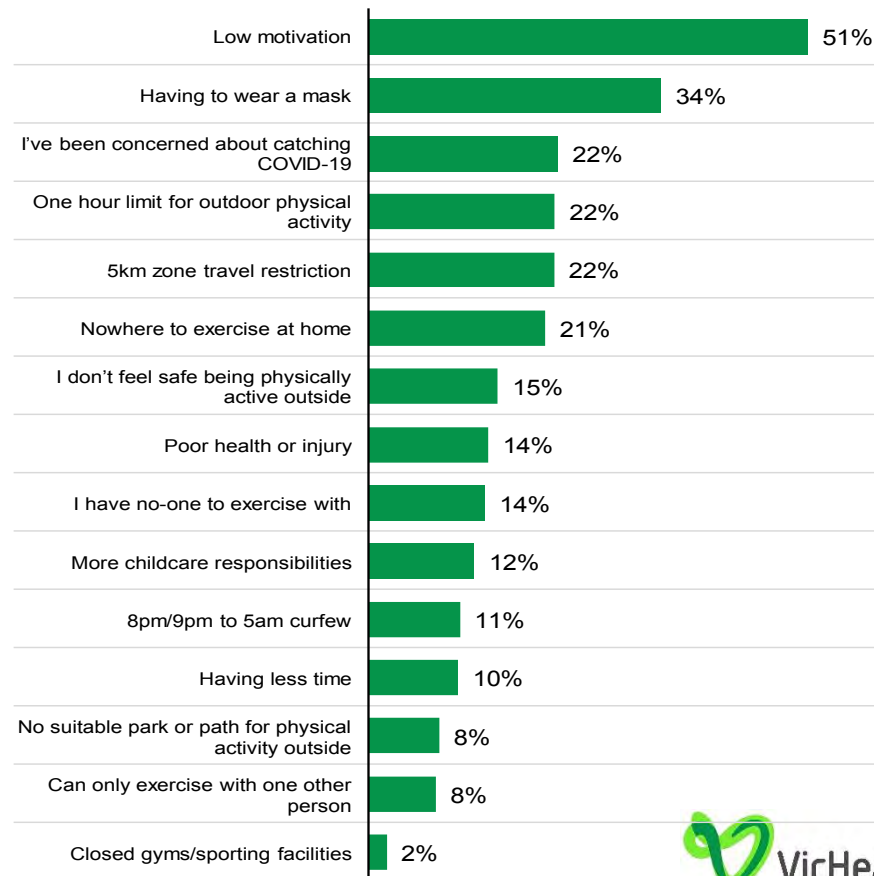
## Are you doing more, less or the same amount of physical activity compared to Feb 2020?



## Reasons for more physical activity

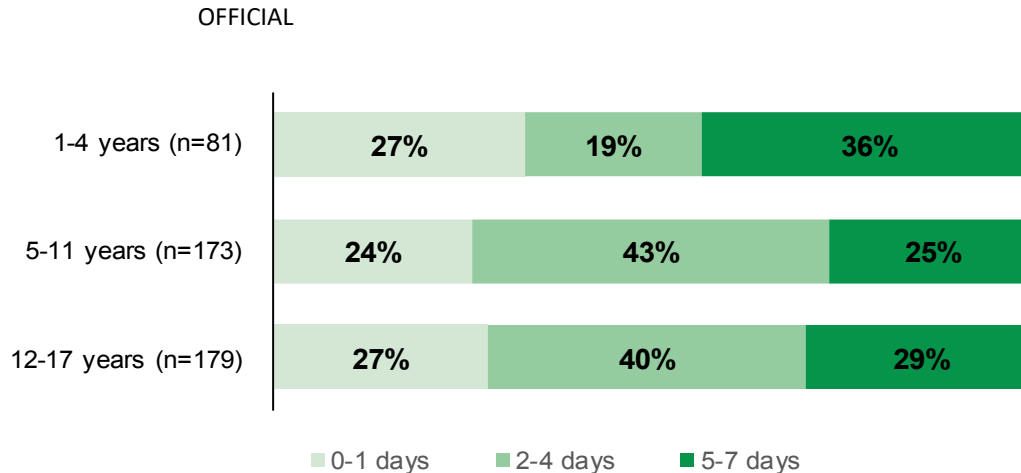


## Reasons for less physical activity

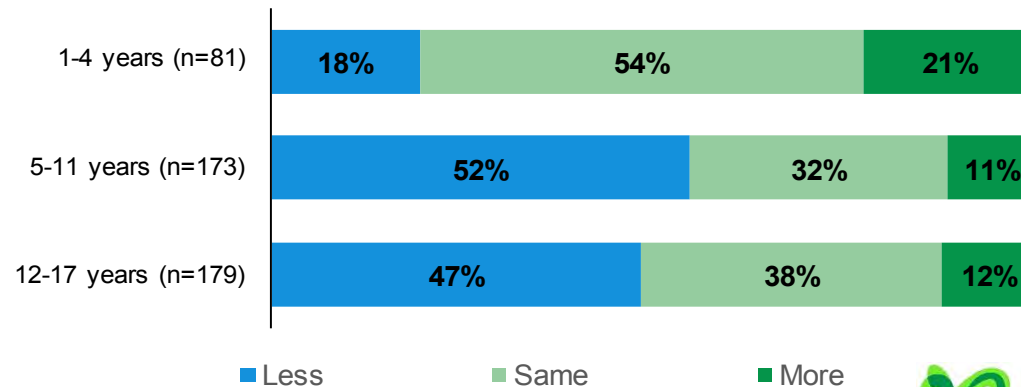


# Child & adolescent physical activity

## Number of days

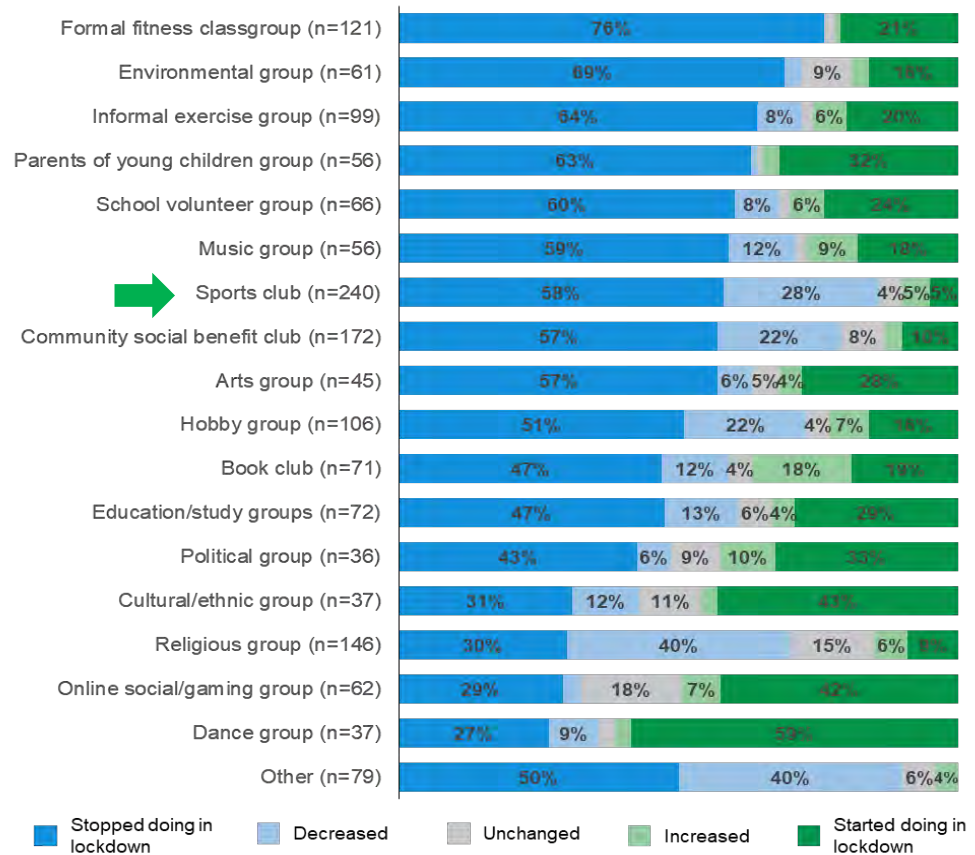


## More, less or same during lockdown compared to Feb 2020



# % Change in involvement in community groups/clubs

*3 in 4 women stopped involvement in sports clubs during lockdown*

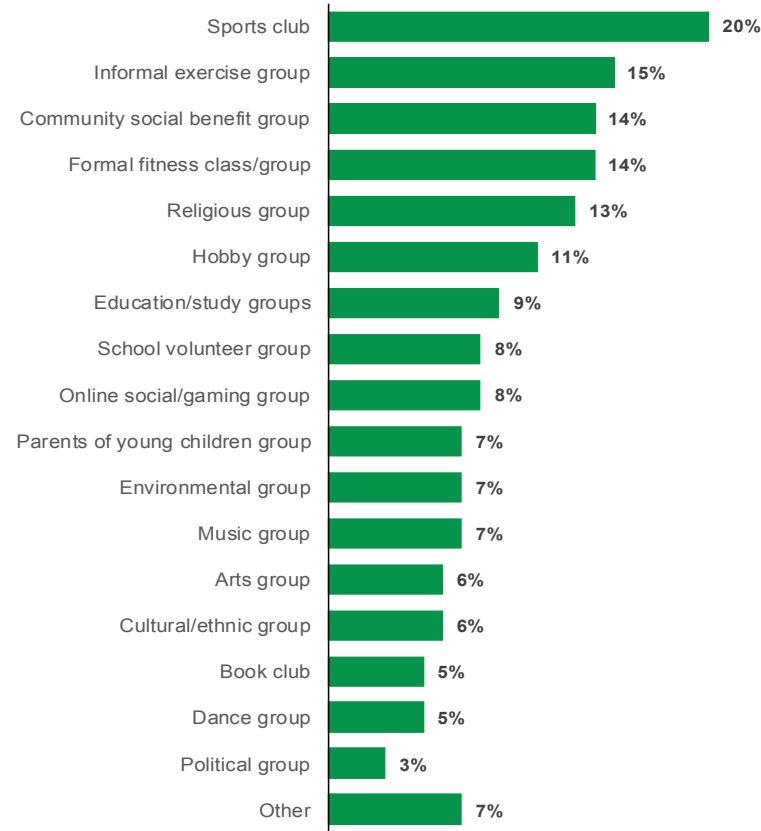




# Planned involvement in community groups/clubs after lockdown

*More than half of all respondents (56%) wanted to be involved in a group or club after lockdown*

OFFICIAL



OFFICIAL

# What did VicHealth do?

# Impacts and opportunities



- **Renewed interest in walking and bike riding**
- **VicHealth and partners changed approaches**
  - **COVID-19 Working Groups established**
  - **New Grants**
- **Department of Transport pop up bike lanes**

# Key Response: Walking and Bike Riding Post COVID-19 Working Group

“Huge public support for temporary or pop up cycling and walking infrastructure - 80-90% of population and not just cycling enthusiasts” - RACV and Amy Gillett Foundation

## 4 agreed focus areas by the working group:

1. **Joined up ask for funding from Federal and/or State Government**
2. **Joined up ask for more enabled approvals from Department of Transport**
3. **Ensure best supports to enable local governments to deliver effectively and quickly**
4. **Coordinate and leverage data and insights**

# Walking and Bike Riding projects

## Streets are for everyone

A consensus statement to support more walking and bike riding for Victorians



### Our Vision

**Vibrant, active and connected communities where people can walk and ride bikes for leisure, running errands or commuting.**

This consensus statement has the support of key advocacy, health promotion and research groups operating in Victoria. It outlines the benefits of walking and bike riding to the economy and the health and wellbeing of Victorians; highlights barriers to the vision; and provides detail on 3 clear and practical recommendations for implementation by the Victorian Government. These recommendations are:

1. Include walking and bike riding as an essential part of integrated transport planning.
2. Prioritise streets for people in residential areas, around schools and shopping strips.
3. Upgrade cities, regional centres and local neighbourhoods by improving footpaths, bike lanes, crossing opportunities and completing missing links.

The group welcomed the recent announcement by the Victorian Government to allocate \$15.5 million to 100 kilometres of new and improved bicycle routes across the state.

However, while this addresses some issues with bike riding in the inner Melbourne suburbs, there are not enough well-connected, shared paths to take the Victorian 100. There is also a need for more safe places to cross the street and better footpaths in many areas.

It is hoped that the investment in health and transport can help make our cities safer and more vibrant walking and biking options for their daily lives, whether for leisure, running errands, commuting or walking after school hours.

**An investment of \$500 million in walking and bike riding trips will return a value of \$6.5 billion to the Victorian community!**

1. MAV Walking and Bike Riding Project – to support councils for increasing infrastructure
2. ‘Streets for Everyone’ Consensus Statement – 3 practical recommendations for implementation
3. Values Based Messaging Guide – to build public support
4. Monash University research projects – LGA cycling research, research priorities

# What's next?



- **Focus on local government policy work through LG Municipal Public Health and Wellbeing Plans**
- **Build future partnerships with organisations to meet the health promotion needs of Victorians in most need and children aged 0-25**
- **Leverage the policy and consensus statements produced to influence and advocate for change**
- **Share learnings with sectors to continue to build sector capability and promote partnerships to maximise outcomes**

# Thank you. Questions?

Chris Lacey - [clacey@vichealth.vic.gov.au](mailto:clacey@vichealth.vic.gov.au)

Dr. Annemarie Wright - [awright@vichealth.vic.gov.au](mailto:awright@vichealth.vic.gov.au)

For further survey information: [VicHealth Coronavirus  
Victorian Wellbeing Impact Survey](#)