FEBRUARY 2006

IN THIS ISSUE..

Heart & Stroke Foundation 2005 Report on Canadian's Health

- Has the suburban dream gone sour?
- Comparing the activity of urban vs. non-urban Canadians
- Municipal resources for walking and biking
- Call to action from Federal Governments, Municipal Governments and all Canadians!

Has the Suburban Dream Gone Sour?

Heart & Stroke Foundation 2005 Report on Canadians' Health

This month is heart and stroke month. Do you know what your blood pressure and cholesterol levels are? Are you interested in reducing the likelihood of a stroke or heart attack? Then read on.

The Heart and Stroke Foundation's Annual Report Card on Canadians' Health dispels the popular myth that living in the country or suburbs is better for your heart health. The Foundation's first-ever report on urban versus non-urban living clearly shows that car-dependent Canadians get far less physical activity and are at increased risk of being overweight or obese.

Simply put, the suburban dream has gone sour.

"The evidence is conclusive: our car-dependent habits are killing us. We have to start focusing on healthy lifestyle habits to replace our 'drive-through' mentality," says Dr. Anthony Graham, Heart and Stroke Foundation's spokesperson. Yet 80% of Canadians believe city living and its high pressure, fast-paced lifestyle is detrimental to your health.

According to the Foundation, for people in the suburbs, smaller towns and rural areas, this false sense of security could be putting them at higher risk for heart disease and stroke than their city dweller counterparts. Foundation research shows that city-dwellers are twice as likely to walk, bike or take public transit to get to work as their non-urban counterparts. In addition, more city-dwellers walk or bike to do daily chores.

"This Report Card is a wake-up call

Heart & Stroke Foundation 2005 Report Card Urban vs. Non-urban Canadians

Percent of Population ¹	Centres	Canada	
Find their community convenient to walk or bike	87% A	60% C-	
Walk or bike to do daily chores	77% B+	60% C-	
Are at a healthy weight ²	50% D-	44% F	
Primary means of getting to work is by walking, bikiing or taking public transit	34% F	18% F	

Data from Heart and Stroke Foundation Survey of 1,082 Canadians aged 18-65, conducted in December 2004; margin of error is +/-3%, 19 times out of 20

for all Canadians, especially those living outside major urban centres, to take a look at their communities and their lifestyles," explains Dr. Graham. "Research has demonstrated that routine physical activity is one factor that can be linked to the lower rate of obesity observed in major urban centres."

Last year's Heart and Stroke Foundation Report Card on Canadians' Health: Fat Is the New Tobacco looked at the growing problem of being overweight and obese, calling on government and industry to make healthier food choices more accessible for Canadians. This year's Report Card looks at the other half of the unhealthy weight issue - physical activity.

It is no coincidence that as our physical activity levels decline, obesity rates soar. Almost 50% of Canadian adults and 37% of Canadian children are now either overweight or obese.

The Foundation points out that each additional kilometre walked per day

reduces the likelihood of becoming obese by nearly 5%, while each hour per day spent in a car increases the likelihood of becoming obese by 6%. "These percentages add up quickly, given the amount of time commuters spend in cars every day. No one should take them lightly," says Dr. Graham.

Unhealthy Planning

The Heart and Stroke Foundation recommends Canadians physically active at least 30 minutes each day. According to research by Dr. Larry Frank, member of the Heart and Stroke Foundation's Health Promotion and Policy Advisory Committee, individuals living in moderate-to-high density neighbourhoods that have community and commercial services within walking distance of where they live, are 2.4 times more likely to meet this 30 minute daily minimum.

"Unfortunately, non-metropolitan areas often contain disincentives to physical activity. In fact, residents

continued on reverse...

² Source: Statistics Canada, 2003; for Canadians aged 18 and over, excluding pregnant women



Heart & Stroke Foundation 2005 Report, continued from reverse

Municipal Resources for	· Walking	and Biking
-------------------------	-----------	------------

Percent of Canadian Municipalities	Population of Community		
Reporting they	<10,000	10,000-99,999	100,000+
Supply information on how to become more active in daily life	40%	57%	85%
Have bike lanes on road	15%	49%	60%
Have off-road trails and paths that prohibit motorized vehicles	57%	91%	97%
Have trails and paths linked to form a network	19%	39%	63%
Require safe pedestrian and bicycle routes when developing new areas	8%	35%	63%
Have a formal plan for bicycling and walking	6%	33%	60%

Source: 2000 Survey of Canadian Municipalities, Canadian Fitness and Lifestyle Research Institute

are exposed daily to the effects of heart-unhealthy planning," says Heart and Stroke Foundation researcher, Dr. Robert Ross. "Retail services outside of urban areas are designed with automobile access as a priority. Sidewalks and cycle lanes are conspicuous by their absence, making suburban and rural-dwelling Canadians prisoners to their cars."

A 2000 survey of Canadian municipalities found larger communities are more likely than smaller ones to have paths and trails that promote walking or biking and regulations that require safe pedestrian and bicycle routes when developing new areas.

This Report Card calls on Canadians, especially in non-urban areas, to be more conscious of their environments and car-dependent habits. The Foundation is working with national health organizations to encourage governments to commit greater resources to promoting healthy active lifestyles and communities that support them. The Foundation is also funding research on the social and environmental aspects of obesity, including studies of how community design influences physical activity and health.

The Heart and Stroke Foundation of Nova Scotia provides one example of leadership on this issue. Their recent report entitled, The Cost of Physical Inactivity in Halifax Regional Municipality documents the connection between health and planning and highlights the potential cost savings - in terms of lives, dollars and productivity - of building healthy, active communities.

"Governments need to recognize that walking needs to be incorporated into community design. Walking destinations are critical to protecting public health", says Dr. Frank, Associate Professor and Bombardier Chair at the University of British Columbia. "The way we design our communities has a real impact on our health."

Employers rightly talk about compensation, benefits and the opportunities that employees have while working. But not enough is being done to educate employees about a healthy lifestyle. Some will argue that this isn't the employer's responsibility, but there is a financial incentive for them to make it one.

The value of a proactive approach to healthcare is evident in the return on investment data. For every \$1 invested, there is a minimum return of \$1.64 for the employer. For plan members with three risk factors, (smoking, weight, high blood pressure and/or cholesterol, and inactivity) the return is \$2.04. It jumps to \$3.93 for blue collar workers. The returns include projected disability, absenteeism, and drug savings.

Despite the growing body of research on wellness programs, the focus on health within the public system and in most organizations, sadly, remains on a curative or reactive approach to health and medicine. Most provincial, and employer-sponsored health plans don't pay for preventative health practices.

We simply cannot afford the healthcare that we have. The time is right for the preventative medicine message to be heeded. Wellness efforts were once a casualty to tougher economic times and benefits contracts. It's time to reinvest in ourselves. Heart disease the number 1 driver of healthcare costs in organizations and the public system - is preventable in 80% to 90% of cases involving working-age citizens.

I don't know about you, but the term 'early intervention' should mean something other than employers and insurers becoming involved in health management after an individual is already off sick

Until next time...

The Heart and Stroke Foundation's call to action:

To Federal & Provincial Governments

- The Heart and Stroke Foundation of Canada recommends that the federal government allocate at least 7% of transportation infrastructure funds to active transportation projects and infrastructure (e.g., walking trails, sidewalks, bike paths).
- Both the federal and provincial governments should work with health organizations to develop effective social marketing campaigns that encourage Canadians to become more physically active.

To Municipalities

- Fund social infrastructure and active transportation projects that facilitate active living.
- Encourage mixed use developments that enable people to walk or bike to a variety of shops and services in their neighborhoods.
- Encourage forms of urban planning that lead to more new neighborhoods and developments in Canada that encourage active living.

To All Canadians

- Make physical activity an integral part of your everyday life. Take every opportunity during the course of the day to walk more; take the stairs, park your car further away, get off one bus stop earlier. All these incremental opportunities add up. This also helps overcome the "no time", "too busy" challenge.
- Get involved! The Heart and Stroke Foundation encourages all Canadians to take action and become advocates to make their communities activity friendly. Make sure your community supports active living, and speak up about urban design, transit, traffic and land-use issues.