Blueprint for Physical Activity Action in Waterloo Region

A Report to the Waterloo Region Active Living Network

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In May 2009, Region of Waterloo Public Health (Public Health) was asked by the Province to establish a Waterloo Region Healthy Communities Partnership (Partnership) to improve population health outcomes through the development of local healthy public policies in six health promotion priority areas – physical activity, sport and recreation, injury prevention, healthy eating, tobacco use/exposure, substance and alcohol misuse, and mental health promotion. The Partnership was formed in late 2009 and developed a twofold vision to create a strong voice for health promotion in Waterloo Region and to reflect the diversity of our community in decision making. In March 2010, a Community Picture was released and identified three priority actions for the Partnership:

1. Implement the Healthy Community Food System Plan for Waterloo Region which includes food skills and food access. Ensure that the plan addresses issues which contribute to the viability of local farms and to ensure access to healthy eating options through the implementation of regional and municipal planning, human services, and zoning support.

2. Improve the affordability and availability of physical activity, sports and recreation opportunities, including active transportation, at the neighbourhood level and region wide (including formal and informal).

3. Use social determinants of health approach to address the underlying contributing factors associated with mental health and to advocate for stakeholders to adopt and fund such an approach.

Three existing and nascent networks stepped forward to guide next steps regarding these priority actions. The Waterloo Region Active Living Network, the Waterloo Region Food System Roundtable and the Mental Health Work Group agreed to act as the respective leads for the food system, physical activity and mental health priorities.

This report, Blueprint for Physical Activity Action in Waterloo Region, was made possible by a third round of funding by the Ministry of Health and Long Term Care released in January 2013; it is intended to support the evolving work of the Waterloo Region Healthy Communities Partnership. Two other reports have been released due to this third round of funding. They are and Planning for
Food Friendly Municipalities and Building Capacity for Policy Work: What Helps and Hinders Healthy Eating, Physical Activity and Good Mental Health for Residents of Wilmot Township.

Readers with questions regarding the Partnership are welcome to contact Katherine Pigott at kpigott@regionofwaterloo.ca or 519-883-2004 ext 5415. Those who would like further context regarding this report should contact, Elba Martell at emartell@regionofwaterloo.ca or 519-883-2004 ext. 5921

The perspective and recommendations expressed within Blueprint for Physical Activity Action in Waterloo Region belong to the consultant and do not necessarily reflect the perspective of the Ministry of Health and Long Term Care or Region of Waterloo Public Health.
EXECUTIVE SUMMARY

Physical activity promotes wellbeing, physical and mental health, prevents disease, improves social connectedness, provides economic benefits, and contributes to environmental sustainability. Yet, only 22.3 per cent of youth and 49.1 per cent of adults in the Waterloo Region are sufficiently active to achieve health benefits. Our region is ranked 21st out of 34 regions within Ontario with respect to physical activity.

The current report (1) summarizes previous physical activity related information and recommendations derived from more overarching health oriented workshops and policy documents, and (2) reports on a community engagement process (i.e., focus groups) to determine various stakeholders’ perceptions of physical activity opportunities, barriers, and promotion.

The summary of past physical activity related information notes with encouragement the number of (a) different opportunities available to be physically active in Waterloo Region, (b) community groups dedicated to providing or advocating for physical activity, and (c) policies that incorporate physical activities either directly or indirectly. However, the need for a more concerted and coordinated effort to promote these opportunities is also highlighted.

There are several specific and general recommendations moving forward from this report that can be considered by the Waterloo Region Active Living Network, the Healthy Communities Partnership, and the Region of Waterloo:

1. Continue to advocate for the adoption of the Toronto Charter for Physical Activity.
2. Coordinate and promote physical activity opportunities under one overarching initiative within the Region.
3. Dedicate a full-time staff member in the Region dedicated to oversee and coordinate efforts pertaining to physical activity opportunity awareness.
4. Focus on getting the Region in “SHAPE” through Sharing, Helping, Accessing, Partnering, and Educating.
5. Set and evaluate targets for physical activity rates for children, youth, adults, and older adults and evaluate the visibility and usage of any coordinative actions undertaken.

Overall, there is infrastructure, programming, policy, and a base of volunteers and professionals within Waterloo Region that can form the foundation of a coordinated effort to increase active living. A dedicated effort toward coordinating and promoting physical activity will be beneficial to the health of the community and its members, in a region known for its innovation and leadership.
SECTION 1: INTRODUCTION

In February 2013, Region of Waterloo Public Health requested proposals to “Develop the Waterloo Region Blue Print for Action for Physical Activity” as part of initiatives undertaken by the Waterloo Region Healthy Communities Partnership (WRHCP) and the Waterloo Region Activity Living Network (WRALN). Overall, the general objective of this Blueprint is to suggest a plan for advocacy related to physical activity within Waterloo Region. Specifically, this report will summarize (a) previous policy workshops and documents related to active living (i.e., WRHCP policy workshop February 23/24 2011; WRHCP Long report on “Supporting Advocacy on Municipal Official Plans: Active Living Section”) in addition to (b) results emanating from focus groups designed as a community engagement process between February and April 2013.

This report will proceed in four sections. First, the remainder of this introduction provides some context pertaining to physical activity benefits, recommendations, and rates within the Waterloo Region. It also describes recent work by the WRALN about policy development regarding physical activity in Waterloo Region. Section two summarizes several documents reviewed by the authors that are relevant to active living in Waterloo Region. Section three describes the methodology, analysis, and results of the community engagement process that included focus groups and interviews with key stakeholders. Finally, recommendations and conclusions emanating from the summarized information are forwarded in the final section.

Physical Activity Benefits, Recommendation, and Rates

Throughout this report, the terms physical activity and active living will be used interchangeably. It is recognized that these terms evoke different images regarding the tasks involved and the intensity at which these tasks are pursued. However, for the sake of clarity, our intention in using ‘physical activity’ and/or ‘active living’ is to generally encapsulate numerous activities that require energy expenditures that exceed what is typically at rest (e.g., sport, exercise, leisure time activities, activities of daily living, and work tasks). There is a general consensus that physical activity is a beneficial undertaking, and that it promotes well-being, physical and mental health, disease prevention, health related quality of life, social connectedness, and contributes to financial and environmental sustainability. Specifically, Lox and colleagues (2010) summarized that common benefits of physical activity include (among others):

- Lower morbidity and mortality rates
- Decreased risk of numerous health problems including diabetes, cancer, and heart disease
• Enhanced mood
• Weight control
• Better cognitive functioning
• Increased social contacts and relationship

In addition to the previously noted benefits, estimates over the past 15 years (Bloom, Grant, & Watt, 2005; Katzmarzyk et al., 2000; Katzmarzyk & Janssen, 2004) suggest that physical inactivity represents approximately 2.5 per cent of Canadian healthcare costs, which translates into approximately $5.3 billion ($1.6 billion direct costs, $3.7 billion indirect costs; Bloom et al., 2005; Katzmarzyk & Janssen, 2004); thus, there are economic gains to be realized through increasing physical activity.

In 2011, the Canadian Society for Exercise Physiology provided recommended minimum activity levels for a variety of age groups. The guidelines are as follows:

• Children and youth (5-17 years): 60 minutes of moderate to vigorous-intensity daily physical activity.
• Adults (18-64 years): 150 minutes of moderate to vigorous-intensity activity weekly.
• Older adults (> 65 years): 150 minutes of moderate to vigorous-intensity activity weekly.

In addition to these guidelines, individuals are encouraged to take advantage of the benefits of activities that strengthen muscle and bone. Finally, greater benefits are associated with more physical activity.

Overall, data collected from a variety of sources depict the physical activity landscape in a very negative light. For example, the most recent Active Healthy Kids (May 2013) report graded activity levels for children and youth as a ‘D-’ (e.g., http://www.activehealthykids.ca). Furthermore, Canadian statistics (based on a Canadian Fitness and Lifestyle Research Institute report; Cragg & Cameron, 2009) suggest that less than half of Canadian adults are sufficiently active (49.4 per cent), while activity rates for youth are much lower (21.5 per cent). Finally, as it pertains specifically to Waterloo Region, activity rates are comparable with the national average for both adults (49.1 per cent) and youth (22.3 per cent) but places the Region 21st out of 34 regions within Ontario with respect to physical activity.
To summarize the preceding points, first, there are numerous benefits to being physically active for both individuals and society at large. Second, physical activity recommendations appear to be very reasonable across age spans. Finally, however, participation rates in Canada, Ontario, and within Waterloo Region are extremely low, warranting an examination of contributing factors to physical inactivity and mobilizing community action. The subsequent section will communicate recent efforts on the part of the Waterloo Region Active Living Network.

**Waterloo Region Active Living Network (WRALN)**

The WRALN was formed in 2008 with the vision of “a vibrant Waterloo Region where all citizens are engaged in active living” and a mission to bring “people from various backgrounds together to collaboratively build a community that ensures active living opportunities and encourages an active Waterloo Region”. Further information on the network can be found at www.wraln.com.

Individuals contributing to the WRALN are affiliated with academic institutions, health care providers, non-governmental agencies, and municipal governments. Several subcommittees exist to promote membership in the network; engage the community in active living workshops, seminars, and networking events; and advocate for physical activity within Waterloo Region.

In the last two years, the advocacy subcommittee of the WRALN was responsible for completing the project objectives of an advocacy development grant (Heart and Stroke Foundation SPARK program) devoted to the promotion of a **physical activity charter** for Waterloo Region. These objectives included the examination of existing charters, engagement with developers of previous charters, promotion of a charter specific to the Region, and analysis of focus groups about the utility of the proposed charter. At its core, a physical activity charter is a document designed to outline the values of physical activity and help guide efforts to effectively create and promote policies dedicated to supporting active lifestyles. The physical activity charter is a call for action and an advocacy tool to create sustainable opportunities for physically active lifestyles for all. Organisations and individuals interested in promoting physical activity can use this charter to influence and unite decision makers at regional and local levels to achieve a shared goal. Evans and colleagues, in a submission currently under review with the Journal of Public Health Management & Practice (contact the author of this report if you wish to view a copy), outline relevant active living charters throughout Ontario as well as important concepts related to the development and
continued promotion of these charters based on in-depth semi-structured interviews with individuals across the province who participated in the promotion of these documents within their community.

As a consequence of research pertaining to existing physical activity charters, an examination of the content of the documents, and feedback from community members within the Waterloo Region, the advocacy subcommittee made the recommendation that the WRALN promote the Toronto Charter for Physical Activity (see Appendix A; www.globalpa.org.uk). The charter is an international advocacy document (i.e., not specific to the City of Toronto) that was developed through the contributions of over 450 individuals/organizations from 55 countries linked through the International Society for Physical Activity and Health.

Based on this recommendation, the WRALN made a presentation to the Region of Waterloo\(^1\) Community Service Committee (CSC) on June 19, 2012 (Appendices B and C for the formal request and minutes from the committee meeting) and requested Regional support for the Toronto Charter for Physical Activity. As the minutes depict, this committee moved (and carried the motion) that regional staff review the physical activity charter and prepare a report on its implications. As of the development of the current report (May 2013), the response to the CSC has not been submitted by regional staff.

**About This Report**

In an effort to aid the WRALN and the WRHCP, the current report (1) summarizes previous physical activity related information and recommendations derived from more overarching health oriented workshops and policy documents, and (2) reports on a community engagement process (i.e., focus groups) to determine various stakeholders’ perceptions of physical activity opportunities, barriers, and promotion within the Region. It is hoped that this report will help the WRALN to move ahead with its policy advocacy plan and to communicate the implications of the aforementioned request to support the Toronto Charter for Physical Activity. Following these summaries, recommendations and conclusions are provided.

\(^{1}\) Waterloo Region has a two-tiered government structure with both regional and municipal governments. The municipal governments include those for three urban municipalities (Cambridge, Kitchener, Waterloo) and four townships (North Dumfries, Wellesley, Wilmot, Woolwich)
SECTION 2: POLICY WORKSHOP AND DOCUMENTS SUMMARY

Two major documents relevant to the discussion of physical activity within Waterloo Region are examined and summarized in the current section. The first document is a report developed by Dillon Consulting Limited on a series of workshops held in February 2011 to create a community picture of Waterloo Region from a health promotion perspective. The second document is a report developed by Krista Long for the WRHCP on the relevancy of municipal official plans to advocacy goals of the partnership. While both documents contain information on several health concerns (e.g., physical activity, mental health, healthy eating, etc.), only information pertaining to physical activity is contained herein.

Part 1 - Community Picture Workshops (February 2011)

In 2009, the Ministry of Health Promotion and Sport (MHPS) created the Healthy Communities Framework with the vision of having healthy communities across Ontario working together, and building both a healthier and more active Ontario. With this goal in mind, the MHPS identified six priority areas that it wanted to address: healthy eating; reduced tobacco use and/or exposure; injury prevention; substance and/or alcohol misuse prevention; mental health; and the specific focus of the current report, physical activity, sport, and recreation. The MHPS envisioned the Healthy Communities Framework as being a strategic asset as it empowered various community stakeholders to partner in the promotion and co-ordination of action plans with the goal of aiding in the creation and implementation of policies.

Locally, Region of Waterloo Public Health (ROWPH) was asked to establish and coordinate a Region of Waterloo Healthy Communities Partnership (WRHCP) to work toward improving health outcomes in the priority areas identified:

Workshop consultation summary

As part of the WRHCP, two workshops were held to inform a Waterloo Region Community Picture. Essentially, the workshops were designed to garner insights regarding the six priority areas identified by the MHPS and to create an initial report regarding the Waterloo Region Community Picture. Community partners were invited to participate and provide feedback over the course of two days. A variety of stakeholders and decision makers representing a number of sectors and organizations within the Waterloo Region participated in the consultations. A consultation group (Dillon Consulting Limited) ran the workshops and put together a report
regarding the findings. Although questions were asked regarding the six priority areas, the current report will focus on findings specific to physical activity, sport, and recreation (see Appendix D).

The workshops were structured such that a number of key questions were asked regarding the stakeholder groups. These key questions included: the current issues and trends in the Region, influences contributing to these issues and trends, network and organizations currently active in the area, existing policies and strategies, and recommended actions and policies. The following section will briefly highlight the findings while discussing its contribution to the current project.

**Key target groups**
The stakeholders were asked to identify target groups who are at a higher risk for inactivity resulting in adverse health effects. The participants identified that physical activity, sport, and recreation is important to the entire community, with a priority placed upon young children, seniors, low income, and new Canadians because of the additional and unique barriers faced by these groups to regularly engage in physical activity. The findings from the consultations informed the identification of key stakeholders for the current project.

**Issues and trends**
The community consultation summary of the findings identified a number of issues and trends related to the topic at hand. A major barrier to physical activity was cost and time restraints. The stakeholders identified a number of subsidies that somewhat alleviate the cost issue; however, participants were uncertain whether the current subsidies are sufficient, and whether adequate resources were devoted to educating the key target groups (e.g., new Canadians, low income families) about these opportunities.

**Influences contributing to issues and trends**
The stakeholders acknowledged a number of influences contributing to the downward trends of physical activity, sport, and recreation; however, the overarching influence of community infrastructure (e.g., community design, resources, education) was highlighted. Participants identified existing neighbourhood resources (e.g., parks, naturalized areas) as being essential for incorporating daily physical activity. A number of stakeholders felt that our current communities were lacking the necessary infrastructure that could be used to promote active
living. Moreover, the stakeholders supported the promotion of alternative physical activity opportunities (i.e., not organized sports).

Networks and organizations
The participants noted a number of community organizations and networks currently active in the Waterloo Region. The list is quite extensive and speaks to the number of engaged and interested groups invested in addressing physical activity, sport, and recreation within the Region.

Existing policies and strategies
The participants were also asked to identify current policies and strategies adopted by governments within Waterloo region. The stakeholders were able to discuss a number of current initiatives including Active Cambridge, Active Cities, Kitchener Charter for Active Living, and Healthy Kitchener Strategy.

Recommended actions and policies
A primary area of concern of the workshops focused on recommended actions and policies regarding physical activity, sport, and recreation. The recommendations ranged from being general in scope to targeting specific policies that could be adopted immediately. The recommendations also spanned several levels of government (e.g., municipal, regional, provincial). Considering that the focus of the current project is on issues related to the Region, some of the recommendations are not applicable to the current project. Potentially relevant recommendations include the following:

- Convince municipalities, townships, and Region of Waterloo to play an active role in advocating for physical activity of its citizens
- Utilize social media to advocate for physical activity
- Encourage workplaces to support employee health through physical activity
- Examine and communicate funding and financial assistance programs within the Region
- Engage boards of education regarding community use of schools
- Promote greater partnerships between health practitioners and planning experts.
- Examine Montreal’s Green Neighbourhoods initiative
- Partner with local universities and colleges
- Develop indoor spaces for activity during winter months
In April 2012, Krista Long compiled a report designed to guide and inform the development of policy and planning documents related to healthy eating, active living, and mental health. The report was prepared for the Healthy Community Partnership in the Waterloo Region and the surrounding partner networks. The following section will briefly summarize the findings and key recommendations regarding active living in the report titled *Supporting Advocacy on Municipal Official Plans*.

**Review of policies within the Waterloo Region**

The report is centered on a number of key priority areas/indicators for healthy eating, active living, and mental health. The report acknowledges that the key areas identified (see below) are not exhaustive, but rather, are meant to offer a broad overview that can serve as a starting point for the discussion of policy and planning documents. The key priority areas identified as being specific to active living were: pedestrian linkages, accessible recreation opportunities, and active transportation. For an analysis of the current municipal official plan policies for the Waterloo Region regarding these specific target areas, see Appendix E (Table 1 of Long report, 2012). Policies relevant to active living/physical activity are denoted with a sideboxed ‘PA’.

The “Supporting Advocacy on Municipal Official Plans” report contains a number of policies regarding the various municipalities and townships within the Waterloo Region (i.e., Waterloo, Kitchener, Cambridge, Wellesley, Woolwich, North Dumfries, Wilmot). Generally, there are a number of similarities regarding the policy initiatives. However, given that there are unique challenges, the report makes suggestions specific to each municipality and township within Waterloo Region. These suggestions are broad in scope, and are intended to guide and inform future decisions regarding policies within each specific township. The need for stronger policies regarding bike lanes and active transportation are two examples of the type of recommendations made within the report.

**Groups currently engaged**

The second aspect of the report centered on the groups currently engaged in addressing issues related to healthy eating, active living, and mental health within the Waterloo Region. A major aspect of this section within the report involved a chart encompassing all the partners in the
area. The chart has been modified to highlight the groups addressing active living within the Waterloo Region (see Appendix F).

As a general comment, there are a number of groups invested in addressing issues related to active living. Considering that the Healthy Communities partnership was created so as to promote and co-ordinate planning and action in the creation and implementation of policies, the one aspect missing from the various reports is the current level of co-operation among the various groups.

Summary
The two reports highlighted in the foregoing section identify a number of key policies and initiatives currently active within Waterloo Region. As well, both reports acknowledge a number of key partners and active groups whose interests are aligned in that they all have the main goal of addressing issues in the Region related to active living. There are a number of recommendations and future action directions given in both reports, and parties invested in the creation and implementation of future policy documents can use these recommendations as a guide.
SECTION 3: COMMUNITY ENGAGEMENT FOCUS GROUPS

Rationale
While the Toronto Charter for Physical Activity is a well-established international document that is based on the collaborative efforts of more than 400 researchers, it is important to understand how the charter will impact citizens of the Waterloo Region. Toward this end, the purpose of the community engagement focus groups project was to extend the previously highlighted efforts in the Waterloo Region to gain an understanding of community members’ perceptions of the barriers to engaging in physical activity, the availability and accessibility of opportunities to be physically active, and issues related to the promotion and education of active living. More specifically, it was important to determine what issues are of special importance as it pertains to facilitating active lifestyles for residents in the Waterloo Region.

Participants
In conjunction with members of the WRALN advocacy group, and in consideration of the previous documents highlighted, a number of key stakeholders were identified to participate in focus group discussions. There were several reasons for the diversity of participants. First, a diverse sample of community members and stakeholders was desired to gain a variety of perspectives on matters crucial to individuals in the Waterloo Region. Second, we wanted participants to be representative of individuals across the lifespan, different cultural backgrounds, and varying socio-economic statuses. Third, we wanted to garner perspectives of individuals who may deal with additional and unique barriers (resource, personal, situational) to engaging in an active lifestyle. Following approval from the researchers’ institutional ethics review board, key informants representing the various groups of interest were contacted via e-mail and invited to participate in a focus group discussion. With the aforementioned criteria taken into consideration, eight focus groups were conducted, including the following groups:

- Early-adolescent youth (age range = 12-15)
- Late-adolescent youth (age range = 16-18)
- New Canadians
- University students
- Educators
- Members of the private fitness industry
- Older adults (two separate focus groups conducted)
In total, 46 male \( (n = 13) \) and female \( (n = 33) \) community members participated in focus group discussions. Following these focus groups, feedback on the preliminary findings was gathered from individuals representing a wide array of interests (e.g., service providers, representatives from community agencies, regional and municipal planners) at the Healthy Communities by Design Workshop hosted by the WRALN (April 17, 2013). These additional insights were used to enhance the scope of the initial findings and to refine the core themes that are presented in the forthcoming sections.

**Data Collection**

As noted, community members’ pertinent experiences and insights related to the engagement of physical activity in the Waterloo Region were gathered via focus groups. All of the focus groups were conducted in-person and at a mutually agreed upon time and location. Further, the focus groups ranged from 45 to 75 minutes in duration and were digitally audio-recorded and subsequently transcribed verbatim. The interview transcripts were complemented by field notes kept by the researchers who facilitated the focus groups, which highlighted any noteworthy observations made during the conversations with participants and were primarily used to aid the analysis of the transcripts.

All of the focus groups were conducted in a semi-structured manner to ensure that the same critical questions were explored in each focus group, while also allowing for a degree of flexibility to explore novel insights and directions brought forth by the participants. Toward this end, the interview guide was constructed to explore key questions related to: (a) the availability of opportunities to engage in physical activity, (b) the accessibility of opportunities to engage in physical activity, and (c) issues related to education and promotion of physical activity (see Appendix G for the complete interview guide).

**Data Analysis**

The transcribed interviews were analyzed using a thematic analysis approach as per suggestions by Patton (2002). That is, each transcript was read over several times to establish a general sense of the content being discussed and the context surrounding the diverse issues brought forth. The next stage centered on organizing and classifying the wealth of data by separating participants’ responses into meaning units, which refers to mutually exclusive segments of text that address a single idea or concept (Tesch, 1990). Once all of the transcripts were coded in this manner, the
categories were further delineated by employing a higher order coding approach. This involved two researchers independently comparing and contrasting the initial meaning units discerned as a method to determine the essential aspects of the initial categories, which resulted in the emergence of several key themes.

To ensure that the analysis resulted in themes that were an accurate and trustworthy reflection of participants’ thoughts and experiences, all of the foregoing procedures were performed independently by two researchers, who then compared their respective coding schemes and discussed any discrepancies until an agreement upon the final themes was achieved.

Results
The following sections aim to highlight the core themes that emerged from the focus groups, and are reflective of responses to the key questions outlined in the semi-structured focus group guide. Toward this end, five main themes emerged related to: (1) sharing (information across the Region), (2) helping (individuals and groups who are in need), (3) accessing (opportunities for active living), (4) partnering (and establishing strategic links), and (5) educating (individuals about the current opportunities available in the Region). A summary of these themes can be found in Appendix H.

Sharing information
All of the focus groups began by asking participants what types of activities they (or their members) generally took part in. Participants identified a wide range of activities they were engaging in to be physically active. These included organized activities such as team as well as individual sports and partaking in fitness groups. There were also a number of less structured activities discussed, such as using fitness facilities using drop-in sessions at local recreation centers, and taking advantage of hiking and cycling trails throughout the Waterloo Region, among other activities. However, community members mentioned that that many of the activities or programs they were participating in were often discovered by chance. For example, a group of seniors who were members of a group exercise class that was volunteer-run talked at length about the importance of this class to their well-being, but if it was not for having a neighbour or close friend inform them about it, they would have never discovered it. As one member of this class recounted:
I learned about it through a fitness class [I go to on] Mondays and someone said, ‘did you know there is this [senior exercise group] and they’re all over the city?’ It’s not advertised at all, I think most of us would admit it is someone we know who has told us.

More broadly speaking, a participant from one of the senior focus groups expressed her concern over the difficulty of gathering information pertaining to activities in the Waterloo Region:

A lot of the communities produce their own little newsletter, and when I read ours everything pertains to the Bridgeport community center, that’s it. Well, why is there not one newsletter for a whole region to tell you what is happening at all of the community centers?

In line with this suggestion, a participant from a different focus group commented that despite wanting to be able to share information with others, he did not feel confident in his knowledge about the various opportunities in the Waterloo Region despite being physically active himself:

I think parents are looking for that physical activity, but they also don’t know where to look and where to go. I’ve been asked by new families, new families to the community, what do you know about [activities]? I share what I know but I certainly know there are plenty of resources out there that I’m not familiar with.

In other words, it was common for individuals to seek out information but encountered difficulties when searching for those opportunities. Toward this end, a number of participants described instances where they felt that information could be more accessible:

If I wanted to investigate some other things—say at the Breithaupt center because they offer a lot over there too—I would have to go on the Kitchener website or physically go and pick up one of their books. And people, if you live in Waterloo, you concentrate on Waterloo, but I mean we’re twin cities so it’s never too far to go, right? I think it would be wonderful to have one spot for everybody and then you can pinpoint what works for me.

Overall, while participants’ responses suggested that the Waterloo Region is an area that is well suited for community members to engage in an active lifestyle in terms of the resources
available (e.g., youth sport program, subsidies, facility space, hiking and cycling trails), community members expressed concern that a larger issue lies in the awareness and education of these opportunities within the Region.

Helping individuals and groups in need
One issue consistently raised during the focus groups was the importance of ensuring everyone has equitable access to opportunities to engage in physical activity. Due to the wide variety of participants sampled, a number of different barriers to physical activity were identified. For example, individuals who came from a background of lower socioeconomic status often viewed cost and transportation as a primary barrier to getting themselves and their family members physically active. However, a number of cost-friendly, and sometimes completely free, opportunities to be physically active were identified. These included the YMCA offering to subsidize membership costs according to personal income, free (or low cost) facility access at community recreational centers, and the provision of government subsidies for certain activities (e.g., youth sport). Although this seems quite positive, what was rather disconcerting was that a number of individuals had no idea that these support options existed and, further, did not know which steps to take to seek this support.

On the other hand, there were some concrete suggestions put forth by participants on how to target specific priority populations. For example, an individual who works with new Canadians offered her thoughts:

*I think we need more family oriented things. If you look at how our sports are organized, it is organized as “this is the kids’ activity” and “this is the adults’ activity”. If we are looking at immigrants and refugees, or even low income, they can’t find a babysitter and, in fact, it would be much better to promote family activities for mental health and to decrease cost.*

Accessing opportunities for active living
Currently, there are a variety of organized and often relatively affordable opportunities for community members to engage in physical activity in the Waterloo Region. For instance, one participant commented on the effectiveness of an open access track to run and walk on:

*Activa has that track and it’s really well used by the public because it’s free access and open all the time.*
Positive examples such as this were reported by a number of participants across the focus groups. One individual described his experience as an employee at a local community centre:

> What I find very effective is registration night at community centres. Why? At the community centers a lot of people go, but you have all the activities’ outlines and they all have different desks. Let’s say I’m signing up for basketball but I see Zumba across the room, then I can also sign up for that. A lot of people sign up with their friends, so they talk about the different programs that they are going to enroll in and it’s very effective to let people know what’s being offered.

Further, the variety of opportunities discussed were generally amenable to individuals representing a number of different facets of the population, including individuals across the lifespan and individuals who encounter additional and unique barriers to living an active lifestyle. For example, a participant who runs a mental health program explained the breadth of individuals her program was able to reach:

> Low income, mental health groups, immigrants; basically, we are open for anyone. So we have single moms with kids, we have elderly people, and we have people who love to participate in any kind of physical activity, so they come along. Sometime we have a large group and sometimes we have one or two.

In addition to the mere existence of these programs, a number of participants highlighted the quality and accessibility of physical activity programs being offered at various locations. However, there were specific issues related to accessibility highlighted. Both the senior and youth groups commented on the importance of finding activities that were catered to individuals in the age range. As a youth participant commented:

> Everything that I know of, the cut off is grade 10. I volunteer at the community centre and everything is like grade 6 to grade 10. So when you’re grade 11 and 12 there is nothing, and if you’re like grade 9 and 10, then you don’t want to hang out with 11 year olds.

The following quote provides another example, related to the senior portion of the population:

> I feel intimidated going to those clubs; you are exercising and you’ve got all these young people beside you and they are pumping away, and you are just going easy
because you can only do what you can. So you get intimidated and I just did not feel comfortable going.

A commonality among many of the suggestions put forth from different community members was the importance of creating opportunities for physical activity that offer an inclusive environment and more recreation-oriented activities.

Another issue of accessibility was highlighted by a member of the private fitness industry. He conveyed mixed emotions regarding accessibility toward active transportation; on one hand expressing concern over some of the major streets, but on the other hand praising the plethora of biking trails available:

*Barriers, it’s the streets… You’ve got King St, which is built for horse and buggy... How about Ira Needles, how many people got hit on Ira Needles last year? There are bike lanes but it’s scary as hell. Definitely, definitely, the streets are a huge barrier. There are a lot of paths---I’m not ragging on that---there are a lot of paths. I can go from my house to my gym and cross maybe five roads easily, because there are paths through Beechwood and old Beechwood, and there are paths all through there.*

Another specific issue related to accessibility was the importance of having physical activity opportunities that are relatively close in distance. In fact, this topic emerged in every single focus group conducted. As one participant succinctly stated:

*Proximity is a big thing; things have to be on the main bus lines and there has to be ample parking for those of us who are driving, all these things are very important.*

Despite the wide range of personal and situational barriers to accessibility highlighted over the course of the focus groups, a common thread across participants’ experiences was that a greater awareness of the program and opportunities that are currently in place would benefit individuals’ ability to access appropriate avenues related to active living in the Waterloo Region.

**Partnering and establishing strategic links**

As highlighted in the previous themes, it is apparent that there is a lot underway in the Waterloo Region in regard to encouraging and facilitating healthy and active lifestyles. In fact, there are a
myriad of different advocacy groups currently in existence that share somewhat complimentary goals in terms of promoting healthier lifestyles, as demonstrated by the following comment given by an educator:

   We’re just a small smattering of the people out there that are pro-physical fitness and getting our kids active. There are more than five of us out there, there are a lot of them out there, and you’ve just got to tap into that network.

What is missing, however, is the establishment of formalized and strategic links among these advocacy groups. For example, consider the following exchange among three participants:

   (Participant 1): I know when I taught down in Cambridge it was like another kingdom.
   (Participant 2): It’s a different world, it’s like we aren’t connected at all in this region.
   (Participant 3): There needs to be more partnerships in the Region.

Despite there being a number of motivated individuals who are interested in promoting active living, the coordination among these groups seems rather disparate from the perspective of community members:

   How we can connect some of the different groups of people that might see themselves as belonging together, or wanting to belong together. Whether that is new moms, cultural groups, kids, disease focused; something that people can say, “yes, that’s for me”.

Accordingly, it is reasonable to suggest that advocates for physical activity within Waterloo Region would be well served to consider ways to establish a more interconnected network of groups that are enthusiastic in the promotion of active living. Further, strengthening the existing partnerships between advocacy groups may enhance the reach and capacity of the present ongoing initiatives. In sum, a key area of focus moving forward should be directed toward a more collaborative effort of co-coordination among community groups across the Region.
**Educating individuals about physical activity opportunities/initiatives**

Many of the aforementioned suggestions related to establishing formalized and strategic partnerships in the Waterloo Region stem from the concern that it is difficult to access knowledge and information about opportunities related to active living. One individual, who has worked in a number of different capacities for initiatives related to promoting an active lifestyle recommended:

*I think we need to be a bit more purposeful on how we promote that to people.*

Participants also commented that individuals who are inactive are the least likely to become informed about the various active living opportunities considering how information is currently being disseminated. Consider the following comment by a participant²:

*As far as that leisure guide goes, it’s still a hard copy; I always chuckle because it is distributed to the community recreation centres. The people that need to know about it do not go into the Waterloo recreation centre.*

To combat this issue, participants offered two general suggestions. The first is that governments within Waterloo Region need to make active living a priority. For example, one participant commented:

*I think they have to promote it more. What’s in the five top things that the city cares about? Is getting people active and exercise in the top five?*

This seems reasonable considering the previous literature highlighting the potential economic advantages associated with a more active population. A second related suggestion toward better educating community members is disseminating information through a centralized source, such that it is easily accessible to all community members. Consider the following examples that all came from different focus groups:

*Example 1: Social media is probably the biggest thing to get it out there. Hasn’t everybody said that?*

*Example 2: I think social network is the best, if you want to reach people, then have things online, it’s easy to access. Like we said, these things are going on.*

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² It should be noted that online versions of community guides for all municipalities and townships are available.
Example 3: I would like to see events being promoted, sometimes the media would be a huge help.

Overall, it appears that the focus of future efforts does not need to be on educating individuals on the value and benefits of an active lifestyle, as this seems to be well understood by the general population. Rather, educating individuals about the resources and opportunities available for individuals to engage in an active lifestyle may be a better strategy.
SECTION 4: SUMMARY AND RECOMMENDATIONS
The purpose of the present report was to (1) summarize previous physical activity related information and recommendations derived from more overarching health oriented workshops and policy documents, and (2) report on a community engagement process (i.e., focus groups) to determine various stakeholders’ perceptions of physical activity opportunities, barriers and promotion within the Region. Through this process, a primary objective is to provide guidance to the Waterloo Region Active Living Network with respect to their efforts toward promotion of, and advocacy for, physical activity. There are a number of issues for discussion and the subsequent sections briefly highlight two regularly occurring themes in the report, its limitations, and recommendations moving forward.

Prevalence of Activities, Interest Groups, and Salient Policies
Given the previous research provided in the introduction to this report highlighting dismal physical activity rates across the country and locally, it is encouraging to note the number of different opportunities available to be physically active in Waterloo Region. This was a common point of discussion within the focus groups and there is evidence of this on-line and in municipal activity guides. As one example, Kitchener’s Summer Leisure Guide was recently published both in hardcopy and online (see http://kitchener.ca/flashgallery/mags/leisuresummer2013/index.html). Furthermore, as was highlighted and discussed in Section two and in the Long (2012) report, there are numerous community groups dedicated to physical activity (or specific forms of it) and policies that incorporate physical activity directly (typically walking, cycling, active transportation initiatives) and/or potentially influence community members’ ability to be physically active indirectly (e.g., community garden initiatives). While there is certainly some scope to consider the provision of additional and, perhaps, alternative opportunities (e.g., culture-specific activities), as well as to ensure that the goals of the policies are met, perceptions of a lack of infrastructure and opportunity were not strongly emerging from the documents or focus groups.

Coordination and Promotion of Existing Resources
Taken together, the examination of policy documents (Long, 2012) and feedback from community members suggest the need for a more concerted and coordinated effort to promote the opportunities that are available as well as the resources available to those who may perceive that they lack the access to these opportunities. A very strong positive are the current and ongoing efforts within the Region and links with action items outlined with the Toronto Charter for Physical Activity that is
being promoted by the WRALN. In essence, the examination of policies, programs, and community member perceptions suggest that many action items of the charter are already taking place. Nevertheless, it is perhaps necessary to consider greater promotion and coordination of these efforts. For example, with respect to major action item #2 (“Introduce policies that support physical activity”), there are a number of statements within regional and municipal documents supporting and considering physical activity in the forms of walking, cycling, and active transportation. Furthermore, a number of initiatives in major action item #3 (“Reorient services and funding to prioritise physical activity”) are already being undertaken by the listed sectors including (a) transportation/planning, (b) planning and environment, (c) sport, parks, and recreation, and (d) health. Despite these ongoing efforts, recent reports specific to Waterloo Region suggest that the number of individuals who are meeting the minimal recommendations for being physically active is rather low. However, as the community engagement focus group results indicated, there appears to be a need for greater (a) sharing of information, (b) helping of individuals/groups in need, (c) accessibility to opportunities for active living, (d) partnering and establishment of strategic links, and (e) educating individuals about physical activity opportunities and initiatives.

**Limitations of the Report**

There are several limitations to the generalizability of the present report’s findings. First, the individuals who participated in the focus groups represent a very limited portion of the population and only a small number of potential groups of stakeholders. For example, perceptions held by those not specifically represented in the groups may differ and we encourage continued discussion of the needs for and perceptions of physical activity within the Region. However, we believe the document provides a snapshot of perceptions regarding activity opportunities, barriers, and promotion. Second, as noted in the methods of Section three, the interpretation of comments from the focus group participants was a result of collaboration between two researchers and subject to potential bias that is present in all qualitative research procedures. However, the protocol (both method and analysis) followed suggested procedures by experts in qualitative research.

**Recommendations**

There are several specific and general recommendations moving forward from this report that can be considered by the Waterloo Region Active Living Network, the Healthy Communities Partnership, and the Region of Waterloo:
1. Continue to advocate for the adoption of the Toronto Charter for Physical Activity: As noted previously, many efforts currently undertaken are consistent with the guiding principles and action items housed under the charter. It seems logical to adopt guiding philosophical framework to ensure that these, and future, initiatives remain at the fore of policy maker’s decisions. Furthermore, adoption of this charter will link the Region with an international effort to promote physical activity.

2. Coordinate and promote physical activity opportunities under one overarching initiative within the Region: As noted, a major theme of the focus groups pertained to gaining knowledge about and access to physical activity opportunities. An initiative that is designed to make citizens aware of opportunities that spans municipalities and activity types, as well as communicates options regarding accessibility, would allow for a ‘one-stop shopping’ of activities without infringing on the autonomy of programs. This suggestion is congruent with the Toronto Charter for Physical Activity complementary document titled “Non-communicable disease prevention: Investments that work for physical activity”, in which the sixth investment discusses “Community-wide programs involving multiple settings and sectors and that mobilize and integrate community engagement and resources”. The WRALN has some momentum and interest in connecting physical activity providers as well as a viable website to initiate this endeavour.

3. Dedicate a full-time staff member in the Region dedicated to oversee and coordinate efforts pertaining to physical activity opportunity awareness: Community organizations have a vast array of volunteer and paid individuals seemingly willing to invest time and effort into coordinating actions and promoting physical activity. However, at least one dedicated staff member responsible for coordinating efforts (i.e., Public Health) would allow for continuity of this initiative. This recommendation is consistent with a previous recommendation (#10) outlined in the Waterloo Region Health Communities Partnership Community Picture prepared for Region of Waterloo Public Health by Dillon Consulting Ltd. (2011).

4. Focus on getting the Region in “SHAPE”: The analysis of the focus group discussions yielded themes suggesting a need for coordination, communication, and collaboration. In short, these discussions focused less on the need for new infrastructure and programming (although specific suggestions periodically arose) and more on information dissemination.
The acronym, recognizing that there is a certain degree of overlap among the themes, suggests activities dedicated to:

a. Sharing: through a common source, information on events, programs, best-practices, news, etc. could be provided that would span the cities and townships of the Region.

b. Helping: ensuring everyone has equitable opportunity to be physically active and is aware of programs that exist to aid those who are experiencing barriers to participation (e.g., through financial need, disability, etc.).

c. Accessing: considering individual needs to understanding and engaging in physical activity. Issues raised under this theme included considering activities that are appropriate for recreational to competitive interests, across the age span, and for a multicultural community. As one very specific example, considering activity/leisure guides in languages other than English would ensure access to this information for a greater portion of the population.

d. Partnering: fostering partnerships throughout the Region and networking among advocacy groups, and both private and public organizations.

e. Educating: to be absolutely clear, this theme is not focused on educating the public on the benefits of physical activity. This theme is about promotion and public awareness of opportunities as well as current policies and decisions being made regarding physical activity in the community. This is a point that is raised in the “Non-communicable disease prevention: Investments that work for physical activity” document as investment #5.

5. **Set and evaluate targets** for physical activity rates for children, youth, adults, and older adults and **evaluate the visibility and usage** of any coordinative actions undertaken. For example, research conducted by Evans and colleagues noted the importance of incorporating formal evaluations of physical activity initiatives as a means to objectively assess and gauge the effectiveness (or lack thereof) of various efforts.

Overall, there is infrastructure, programming, policy, and a base of volunteers and professionals within Waterloo Region that can form the foundation of a coordinated effort to increase active living. A dedicated effort toward coordinating and promoting physical activity will be beneficial to the health of the community and its members, in a region known for its innovation and leadership.
Active Healthy Kids Canada (2013). *Are we driving our kids to unhealthy habits?: The 2013 Active Healthy Kids Canada Report Card on Physical Activity for Children and Youth.* Toronto: Active Healthy Kids Canada.


Cragg, S., & Craig, CL. (2009). *Rating Canada’s regional health: Which health region has the most physically active population?* Canadian Fitness and Lifestyle Research Institute, Ottawa, Canada.


Appendix A:

Toronto Charter for Physical Activity
The Toronto Charter for Physical Activity: A Global Call for Action

Physical activity promotes wellbeing, physical and mental health, prevents disease, improves social connectedness and quality of life, provides economic benefits and contributes to environmental sustainability. Communities that support health enhancing physical activity, in a variety of accessible and affordable ways, across different settings and throughout life, can achieve many of these benefits. The Toronto Charter for Physical Activity outlines four actions based upon nine guiding principles and is a call for all countries, regions and communities to strive for greater political and social commitment to support health enhancing physical activity for all.

Why a Charter on physical activity?

The Toronto Charter for Physical Activity is a call for action and an advocacy tool to create sustainable opportunities for physically active lifestyles for all. Organisations and individuals interested in promoting physical activity can use this Charter to influence and unite decision makers, at national, regional and local levels, to achieve a shared goal. These organisations include health, transport, environment, sport and recreation, education, urban design and planning as well as government, civil society and the private sector.

Physical activity – a powerful investment in people, health, the economy and sustainability

Throughout the world, technology, urbanisation, increasingly sedentary work environments and automobile-focused community design have engineered much physical activity out of daily life. Busy lifestyles, competing priorities, changing family structures and lack of social connectedness may also be contributing to inactivity. Opportunities for physical activity continue to decline while the prevalence of sedentary lifestyles is increasing in most countries, resulting in major negative health, social and economic consequences.

For health, physical inactivity is the fourth leading cause of chronic disease mortality such as heart disease, stroke, diabetes, cancers; contributing to over three million preventable deaths annually worldwide. Physical inactivity also contributes to the increasing level of childhood and adult obesity. Physical activity can benefit people of all ages. It leads to healthy growth and social development in children and reduces risk of chronic disease and improved mental health in adults. It is never too late to start physical activity. For older adults the benefits include functional independence, less risk of falls and fractures and protection from age related diseases.
For sustainable development, promoting active modes of travel such as walking, cycling and public transport can reduce harmful air pollution and greenhouse gas emissions, which are also known to negatively impact health. Urban planning, design and redevelopment that aim to reduce dependence on motor vehicles can also contribute to increased physical activity, particularly in those developing countries experiencing rapid urbanisation and growth. Increasing investment in active travel provides more equitable mobility options.

For the economy, physical inactivity contributes substantially to direct and indirect health care costs and has a significant impact on productivity and healthy life-years. Policies and actions that increase participation in physical activity are a powerful investment in preventing chronic diseases and improving health, social connectedness and quality of life as well as providing benefits for economic and sustainable development of countries throughout the world.

Guiding principles for a population based approach to physical activity

Countries and organisations working towards increasing participation in physical activity are encouraged to adopt the following guiding principles. These principles are consistent with the Non Communicable Disease Action Plan (2008) and the Global Strategy on Diet, Physical Activity and Health (2004) of the World Health Organisation as well as other international health promotion charters. To increase physical activity and decrease sedentary behaviour, countries and organisations are encouraged to:

1. Adopt evidence based strategies that target the whole population as well as specific population subgroups, particularly those facing the greatest barriers;
2. Embrace an equity approach aimed at reducing social and health inequalities and disparities of access to physical activity;
3. Address the environmental, social and individual determinants of physical inactivity;
4. Implement sustainable actions in partnership at national, regional and local levels and across multiple sectors to achieve greatest impact;
5. Build capacity and support training in research, practice, policy, evaluation and surveillance;
6. Use a life-course approach by addressing the needs of children, families, adults and older adults;
7. Advocate to decision makers and the general community for an increase in political commitment to and resources for physical activity;
8. Ensure cultural sensitivity and adapt strategies to accommodate varying ‘local realities’, contexts and resources;
9. Facilitate healthy personal choices by making the physically active choice the easy choice.
A framework for action

This Charter calls for concerted action across four key areas. This action should involve governments, civil society, academic institutions, professional associations, the private sector, and other organisations within and outside the health sector, as well as communities themselves. These four action areas are distinct, yet complementary, building blocks for successful population change.

1. IMPLEMENT A NATIONAL POLICY AND ACTION PLAN

A national policy and action plan provides direction, support and coordination of the many sectors involved. It also assists in focusing resources as well as providing accountability. A national policy and action plan is a significant indicator of political commitment. However, the absence of a national policy should not delay the efforts of state, provincial or municipal organisations to enhance physical activity in their jurisdictions. Policy and action plans should:

- Gain input from a broad constituency of relevant stakeholders;
- Identify clear leadership for physical activity, which may come from any government sector, other relevant non-government agencies or from a cross sector collaboration;
- Describe the roles and actions that government, not-for-profit, volunteer and private sector organisations at national, regional and local levels should take to implement the plan and promote physical activity;
- Provide an implementation plan that defines accountability, timelines and funding;
- Include combinations of different strategies to influence individual, social, cultural and built environment factors that will inform, motivate and support individuals and communities to be active, in ways that are safe and enjoyable;
- Adopt evidence-based guidelines on physical activity and health.

2. INTRODUCE POLICIES THAT SUPPORT PHYSICAL ACTIVITY

A supportive policy framework and regulatory environment are required to achieve sustainable changes in government and society. Policies that support health-enhancing physical activity are needed at national, regional and local levels. Examples of supportive policy and regulations include:

- Clear national policy with objectives for increasing physical activity that state by how much and by when. All sectors can share common goal(s) and identify their contribution;
- Urban and rural planning policies and design guidelines that support walking, cycling, public transport, sport and recreation with a particular focus on equitable access and safety;
- Fiscal policies such as subsidies, incentives and tax deductions that may support participation in physical activity or taxation to reduce obstacles. For example, tax incentives on physical activity equipment or club membership;
- Workplace policies that support infrastructure and programs for physical activity and promote active transport to and from work;
• Education policies that support high quality compulsory physical education, active travel to school, physical activity during the school day and healthy school environments;

• Sport and recreation policy and funding systems that prioritise increased community participation by all members of the community;

• Advocacy to engage the media to promote increased political commitment to physical activity. For example, ‘Report Cards’ or civil society reports on the implementation of physical activity action to increase accountability;

• Mass communication and social marketing campaigns to increase community and stakeholder support for physical activity action.

3. REORIENT SERVICES AND FUNDING TO PRIORITISE PHYSICAL ACTIVITY

In most countries, successful action to promote physical activity will require a reorientation of priorities in favour of health enhancing physical activity. Reorienting services and funding systems can deliver multiple benefits including better health, cleaner air, reduced traffic congestion, cost saving and greater social connectedness. Examples of actions underway in many countries include:

In education:
• Education systems that prioritise high-quality compulsory physical education curriculum with an emphasis on non competitive sports in schools and enhancing physical education training for all teachers;

• Physical activity programs that focus on a range of activities that maximise participation regardless of skill level and that focus on enjoyment;

• Opportunity for students to be active during class, in breaks, at lunch time and after school.

In transportation and planning:
• Transport policies and services, that prioritise and fund, walking, cycling and public transit infrastructure;

• Building codes that encourage or support physical activity;

• Trails in national parks and preserved areas to increase access.
In planning and environment:
- Evidence based urban design that support walking, cycling and recreational physical activity;
- Urban design that provides opportunities for sport, recreation and physical activity by increasing access to public space where people of all ages and abilities can be physically active in urban and rural settings.

In workplace:
- Workplace programs that encourage and support employees and their families to lead active lifestyles;
- Facilities that encourage participation in physical activity;
- Incentives for active commuting to work or by public transport rather than by car.

In sport, parks and recreation:
- Mass participation and sports for all, including those least likely to participate;
- Infrastructure for recreational activities across the life-course;
- Opportunities for individuals with disabilities to be physically active;
- Building capacity among those who deliver sport through increased training on physical activity.

In health:
- Greater priority and resourcing of prevention and health promotion including physical activity;
- Screening of patients/clients for levels of physical activity at every primary care consultation, and provision of brief, structured counselling and referral to community programs for insufficiently active patients;
- For patients with diseases/conditions such as diabetes, cardiovascular disease, some cancers or arthritis, screening by health and exercise professionals for contraindications and advice on physical activity as part of treatment, management and review plans.

4. DEVELOP PARTNERSHIPS FOR ACTION

Actions aimed at increasing population-wide participation in physical activity should be planned and implemented through partnerships and collaborations involving different sectors, and communities themselves, at national, regional and local levels. Successful partnerships are developed by identifying common values and program activities and by sharing responsibilities, accountabilities and information. Examples of partnerships that support the promotion of physical activity are:

- Cross-government working groups at all relevant levels to implement action plans;
- Community initiatives involving different government departments and non government agencies (for example: transport, urban planning, arts, conservation, economic development, environmental development, education, sport and recreation, and health) working in collaboration and sharing resources;
- Coalitions of non government organisations formed to advocate to governments for the promotion of physical activity;
- National, regional or local partnership forums with key agencies from multiple sectors, and public and private stakeholders to promote programs and policies;
- Partnerships with population sub groups including indigenous peoples, migrants and socially disadvantaged groups.
A call to action

A strong body of science supports the benefits of physical activity for health, the economy and the environment. To achieve a greater commitment to increasing physical activity around the world there is an urgent need for clear direction and strong advocacy. The Toronto Charter for Physical Activity outlines four actions based upon nine guiding principles. Implementation of the Toronto Charter will provide a solid foundation and direction for health enhancing physical activity in all countries.

We encourage all interested stakeholders to support the adoption and implementation of the Toronto Charter for Physical Activity and to engage in one or more of the following actions:

1. Show your agreement with the four areas for action and nine guiding principles by registering your support of the Toronto Charter for Physical Activity;
2. Send a copy of the Toronto Charter for Physical Activity to at least five of your colleagues and encourage them to do the same;
3. Meet with decision makers in different sectors to discuss how national plans and policy action following the guiding principles of the Toronto Charter for Physical Activity might positively influence action across sectors;
4. Mobilise networks and partnerships all sectors to support and implement the Toronto Charter.

In turn, members of the Global Advocacy Council for Physical Activity commit to the following actions:

- Translate the final version of the Toronto Charter for Physical Activity into French, Spanish and possibly other languages;
- Disseminate the final version of the Toronto Charter for Physical Activity widely;
- Work with physical activity networks and other stakeholder organisations to further mobilise governments and decision makers throughout the world to increase commitment towards the promotion of health enhancing physical activity;
- Continue to partner with other groups and organisations in order to advocate for health enhancing physical activity throughout the world.

For links to supporting resources and to directly forward the Toronto Charter for Physical Activity to colleagues please visit:

www.globalpa.org.uk

Global Advocacy Council for Physical Activity,
International Society for Physical Activity and Health.
The Toronto Charter for Physical Activity: A Global Call to Action.
www.globalpa.org.uk.
May 20, 2010.
Appendix B:

Request for Regional Support of a Charter for Physical Activity
Request for Regional Support of a Charter for Physical Activity

Request: THAT the Regional Municipality of Waterloo support The Toronto Charter for Physical Activity (see attached) and adopt its guiding principles for a population based approach to physical activity;

AND THAT the Regional Municipality of Waterloo encourage the Waterloo Region Active Living Network to develop a blueprint for action specific to the needs of the Region.

How do we define physical activity and what are the benefits?
‘Physical activity’ is an umbrella term that describes a number of specific activities (e.g., sport, exercise, leisure time activities, work, and activities of daily living) that require energy expenditures above what is normal when the body is at rest. Physical activity promotes wellbeing, physical and mental health, prevents disease, improves social connectedness and quality of life, provides economic benefits, and contributes to environmental sustainability.

What is a charter for physical activity?
The physical activity charter is a call for action and an advocacy tool to create sustainable opportunities for physically active lifestyles for all. Organisations and individuals interested in promoting physical activity can use this charter to influence and unite decision makers at regional and local levels to achieve a shared goal.

Why a charter for physical activity in our region?
According to a 2009 Canadian Fitness and Lifestyle Research Institute report, only 22.3 per cent of youth and 49.1 per cent of adults in the Region of Waterloo are sufficiently active to achieve health benefits. Our region is ranked 21st out of 34 regions within Ontario with respect to physical activity. Canada- and Ontario-wide reports indicating a general lack of physical activity are also available (e.g., http://www.activehealthykids.ca).

What are the recommended guidelines for physical activity?
The January 2011 physical activity guidelines from the Canadian Society for Exercise Physiology suggest minimums for (a) children/youth (5-17 years) = 60 minutes of moderate- to vigorous-intensity daily physical activity, (b) adults (18-64 years) = 150 minutes of moderate- to vigorous-intensity weekly, and (c) older adults (> 65 years) = 150 minutes of moderate- to vigorous-intensity weekly. Furthermore, these guidelines state the added benefit of activities that strengthen muscle and bone and also note that greater health benefits accrue with more physical activity.

What are the costs associated with supporting the charter and adopting its principles?
There is no specific budget attached to this request. The charter provides a set of guidelines to consider when developing policies and initiatives at our local level. In sum, it is an overt statement of the importance of physical activity for our citizens.

How does the charter complement existing initiatives?
This charter is intended to link with existing, well-designed tools promoting active living within the Region including the Pedestrian Charter, Pedestrian Master Plan, Active Transportation Master Plan, Regional Cycling Master Plan, Safe Routes to School charter, and the Cambridge Charter for Physical Activity. However, the guiding principles of the proposed charter address a broader set of activities, issues, and challenges associated with an active lifestyle. Furthermore, this charter links directly with strategic objectives 4.2 and 4.7 Health and Inclusive Communities, and 3.2 Sustainable Transportation, contained within the Region of Waterloo’s 2011-2014 Strategic Focus document.

Why the Toronto Charter for Physical Activity?
This is an international advocacy document developed by the International Society for Physical Activity and Health (see www.globalpa.org.uk for further information) and is the result of contributions from over 450 individuals/organizations from 55 countries representing all regions of the world.

What are the next steps?
The Waterloo Region Active Living Network will develop a blueprint for action specific to the Region through community consultations.
Appendix C:

Relevant Meeting Minutes from the Region of Waterloo Community Services Committee

(June 19, 2012)
Present were: Chair S. Strickland, L. Armstrong, J. Brewer, T. Cowan, T. Galloway, J. Haalboom, B. Halloran, R. Kelterborn*, G. Lorentz*, C. Millar, J. Mitchell, K. Seiling and J. Wideman*

Members absent: D. Craig, R. Deutschmann and C. Zehr

MOTION TO RECONVENE INTO OPEN SESSION

MOVED by G. Lorentz
SECONDED by C. Millar

THAT the meeting reconvene into open session.

CARRIED

DECLARATIONS OF PECUNIARY INTEREST UNDER THE MUNICIPAL CONFLICT OF INTEREST ACT

None declared.

DELEGATIONS

a) Jodi Murray & Sam AbiSaab, Waterloo Region Active Living Network, provided an update on the mandate and activities of the organization and sought the Committee's support of a Physical Activity Charter within the Region. They shared a presentation and distributed the 2012 Active Healthy Kids Canada Report Card, both are appended to the original minutes.

S. AbiSaab defined physical activity and its benefits, and identified the members of the Network, specifically the advocacy committee, who've reviewed other established charters and chose the Toronto Charter to guide local principles.

J. Murray requested that the Region endorse the Toronto Charter and she outlined the nine (9) guiding principles. She advised that the charter is intended to link with the current existing tools within the Region and that there's no specific budget attached to this request and this charter. She stated that there is a need to develop a blueprint for action specific to the Region.

The Committee inquired about the purpose of the charter in terms of the various other charters the Region has previously supported. S. Strickland suggested that the matter be referred to staff for a report dealing with the impact of the charter and what the Region’s role might be.

* J. Wideman joined the meeting at 1:21 p.m.
MOVED by J. Haalboom
SECONDED by L. Armstrong

THAT the matter of a Physical Activity Charter for the Region of Waterloo be referred to staff and that staff be directed to prepare a report.

CARRIED

REPORTS – Public Health

a) PH-12-024, Public Health Humidex Advisory and Smog Advisory Response Protocol

Karen Quigley Hobbs, Director, Infectious Disease, Dental & Sexual Health, introduced the report and David Young, Manager, Health Protection & Investigation, summarized the report.

MOVED by J. Wideman
SECONDED by T. Galloway

THAT the Regional Municipality of Waterloo endorse the Region of Waterloo Public Health Humidex Advisory and Smog Advisory Response Protocol as outlined in Report PH-12-024.

CARRIED

b) PH-12-025, 2011 Food Safety Annual Report

D. Young provided highlights of the report.

Received for information

* G. Lorentz left the meeting at 1:35 p.m.

c) PH-12-026, 2011 Public Health Annual Report

K. Quigley Hobbs made introductory comments and advised that the data for Emergency Medical Services (EMS) response times on page 6 of the annual report should be 14 minutes and 34 seconds.

Received for information

d) PH-12-027, Waterloo Region Sexual Health Youth Strategy

K. Quigley Hobbs provided an overview of the report.

* G. Lorentz returned to the meeting at 1:39 p.m.

MOVED by L. Armstrong
SECONDED by G. Lorentz

THAT the Regional Municipality of Waterloo endorse the Waterloo Region Sexual Health Youth Strategy as outlined in Attachment 1 of Report PH-12-027 dated June 19, 2012.

CARRIED
Appendix D:

Physical Activity Section of the Dillon Consulting Ltd Report on February 2011 WRHCP Workshops
4.0 PRIORITY AREA FINDINGS

Participants provided their thoughts on the questions asked during the group discussions. The findings are presented below by MPHS priority area. The potential policies or actions identified support the outcomes for each of the priority areas under the MHPS Healthy Communities Framework, as follows.

![Priorities and Outcomes Table]


Though policy and actions are identified by priority area, we recognize that priorities are interrelated and some recommended actions cut across a variety of areas.

4.1 Physical Activity, Recreation and Sport

Key Target Groups

Participants were asked to reflect upon the community assessment presentation and to identify key target groups who may experience challenges affecting their abilities to undertake physical activity or who may experience adverse health issues as a result of physical inactivity. Participants noted that physical activity supports physical well-being and maintains mental wellness, helps manage stress and influences decisions not to use tobacco and alcohol. Being physically active allows residents to address all other priority areas, by supporting mental health, facilitating healthy eating habits and curbing tobacco, substances and alcohol use.

Stakeholders identified that physical activity is important for the entire community, including young children, adolescents, post secondary students, adults, and seniors. Children are particularly identified as a priority group as they rely on parental role models to facilitate an active lifestyle.

Issues and Trends

Issues or trends related to physical activity, sport and recreation identified include:

- obesity and chronic disease are health outcomes that result from low physical activity levels.
- Physical Activity data given to date is mostly self-reported and likely
underestimates the problem.

- Time and cost restraints were identified as barriers to active living. Demands in our daily lives and competing interests hinder our ability to participate in daily activity. Children who are transitioning into teens often experience a decrease in their level of physical activity. A high amount of screen time was identified as one of the factors that contribute to sedentary behaviour.

- The continued reliance of travel by car is seen as a barrier to active living. Commuters who spend long periods of time in their vehicles have limited opportunities to participate in physical activity.

- People are not well informed about the benefits of living a healthy lifestyle.

- Physical activity is important and decision-makers have a role in supporting and facilitating a healthy and active lifestyle.

- Affordability affects a person’s ability to participate in organized recreation programs. Affordability affects not only low income earners, but middle income earners as well. Middle-income earners may have the financial capability of participating in recreational programs, but they may also face competing financial priorities. There is uncertainty whether current subsidies are sufficient or if additional subsidies are required to improve access to physical activity. Concerted efforts are required to ensure that sports and recreational programs are affordable and accessible to seniors, low income population groups and new Canadians. Those requiring assistance may feel a reluctance to seek financial assistance.

- Few opportunities to participate in physical activity in the winter. There is a need for appropriate indoor walking facilities. People often go to malls to walk, which may not provide an ideal walking surface.

Participants also identified the importance of incorporating physical activity as part of our daily lives, which can be accomplished by using existing neighbourhood resources, walking within communities, and using parks and naturalized areas. Neighbourhood design and community planning play a role in providing residents the infrastructure and amenities to support physical activity.

- Fear of injuries influence a person’s willingness to participate in physical activity. For example, fear of cycling on regional and city roads affects a person’s willingness to cycle. Existing communities may not be adequately designed to support walking or cycling. There is a lack of vision of what could be accomplished in the community with respect to active living infrastructure, such as bike lanes, and the Regional Municipality of Waterloo should look to other jurisdictions to see what is possible. Our communities were designed around cars and do not provide suitable opportunities for activities, such as walking and exercising, and do not provide places to play. Although bike
paths are available in Waterloo, Kitchener and Cambridge, infrastructure improvements are required to support physical activity.

- Fear of liability is reducing opportunities for physical activity. Open spaces such as baseball diamonds, soccer fields and playgrounds in schools are not open to the public. Signage indicates there is no access to school property outside of school hours. Staff would also be required if indoor school facilities were to be used off hours. The permitting for use of ball diamonds and other recreation facilities also prevents spontaneous physical activity. There is a need for parental support to ensure that kids are active and the trend of keeping kids inside to keep them safe is an issue.

- Physical activity goes beyond organized sports. Any activity that allows us to be active is beneficial and should be supported. For example, skateboarding is seen as a negative activity for youth. However, this is an activity that is appealing to youth and allows them to be active. Messaging needs to be improved to encourage active lifestyles. For instance, gardening and arts could be considered physical activity.

### Networks and Organizations Working on the Priority Area

Participants provided feedback regarding other networks and organizations within the Region who are working to address physical activity, sport and recreation. The following provides a list of organizations identified by workshop participants:

- Accessibility Advisory Committees (Kitchener and Waterloo), which involved planners by going out into the community with them to consider accessibility issues
- **Canamera Games**
- **Wellness Active Living Club (WALC)** is a physical fitness program for older adults run by Community Support Connections. The program partners with churches and takes activity to seniors. There are approximately 300 participants in the program.
- **Run for Life (Cambridge)**
- **Kitchener-Waterloo Sports Council**
- **Kitchener Sports Association**
- **Kitchener Sports Council**
- **Service Clubs**
- **Municipal Neighbourhood Associations**
- **Universities and colleges (Wilfrid Laurier University Kinesiology Physical**
Education, Center for Community Research, Learning and Action, for example)

- Tri-Cities Transport Action Group TriTAG
- Waterloo Cycling Club
- Trails Committees
- Multicultural Centres/News Magazines, such as African Council and cricket clubs supported by ethnic-based communities
- Working Centre
- Community gardens
- Waterloo Catholic District School Board, including the Healthy and Active Living Coordinator as a resource person
- Kitchener Minor Hockey (outreach programs for new Canadians)
- Access to Recreation for All Youth (ARAY)
- Waterloo Region Housing
- Community Garden Council
- School boards
- Churches
- Opportunities Waterloo Region
- Private seniors homes
- Older Adult Centres
- Community Health Centres
- Centres for Community Living
- Volunteer Action Centre
- Free, volunteer based soccer clubs
- Silent Dance Party (attendees listen to music on personal mp3 players and
dance in a public dance floor without bothering neighbours)

- Libraries, churches, museums and parks available for activities – Activities are listed in the local Recreation Guide
- Early Years Centres and home day care providers
- Hospitals and health care providers
- Sports Canada
- Kiwanis Service Clubs
- Active and Safe Routes to School (ASRTS)
- Commuter Challenge
- Workplace walking groups
- Waterloo Region Active Living Network (WRALN)

**Existing Policies and Strategies**

Participants were asked to identify particular policies and strategies that are being undertaken in Waterloo Region that contribute to the priority areas. The following provides a list of policies and strategies identified by workshop participants:

- Active Living and Physical Activity Charters and policies
- Healthy Kitchener Strategy and other municipal strategies
- Charter for Physical Activity is being developed by the Centre for Community Research, Learning and Action (Wilfrid Laurier University)
- Active and Safe Routes to School Charter
- Pedestrian Charter
- Cambridge Charter for Active Living
- Kitchener Charter for Active Living
- Active Cambridge: Active Cities
- Master Plans for Active Transportation, Cycling and Pedestrians
- Fitness tax credit for kids
Recommended Actions and Policies

Participants were asked to identify policies, programs or actions to address the issues raised.

- The government, whether it is federal, provincial or municipal have an advocacy role to support physical activity. Participants identified that physical activity should be brought to the forefront of policy with the Federation of Canadian Municipalities. Actions can identify best practices in other communities, mobilize decision-makers to imagine the possible and share visions and commitment across a broad cross-section of stakeholders. Identify a “challenge” that would motivate a community to be more active collectively and implement actions by local champions. Regional Council to be carried back to municipalities.

- With the rising costs of healthcare, participants identified the need for governments to invest in preventative programs, shifting the costs from treatment towards prevention.

- Physical activity provides a rallying point to target other priority areas as well. Living active and healthy lives allows people to address other issues in their own lives related to the other priority areas. Physical activity promotes a sense of well being and can reduce feelings of depression and anxiety.

- Actions are needed to identify and respond to barriers to address changing social norms and behaviours. Social media such as Facebook and Twitter provide opportunities to counter negative and false messages. Actions can also include education to inform the public about the benefits of physical activity and the role it plays in preventing chronic diseases.

- Encourage facilities at workplaces to support healthy lifestyles for employees.

- Provide funding for smaller, grass roots organizations. Though subsidies exist to allow lower income groups to participate in recreational programs, financial assistance is required to enable them to pay for transit.

- Policies at schools can integrate active living programs into the education system, such as bike riding tests for 6 year olds. Participants also identified the need to update the education curriculum to increase physical activity. Efforts can also be undertaken to support the use of school recreation facilities after hours, including changes to the community use of schools policies or retaining additional staff/resources.

- Though some Active Transportation Master Plans are being undertaken in the Region, participants identified the need for an Active Transportation Master Plan across all municipalities.

- Develop partnerships between health practitioners and planning practitioners. This can facilitate policies that provide opportunities for physical activity in new and existing developments. Many new developments don’t have places
for kids to play and existing developments could be retrofitted to encourage active living. Agreements may be put in place with residents in neighbourhoods with many cul-de-sacs to allow access across their properties, establishing an interconnected network of pathways. There is a need to facilitate improvements in road designs that inhibit speeding, such as narrower lanes for cars and speed bumps, referred to as “road diets”.

- Consider implementing municipal “Form Based Codes” in lieu of Zoning By-Laws to improve the mobility, function, and appearance of communities. This planning mechanism favours mixed use development, supporting communities that promote active transportation.

- Wellington-Dufferin-Guelph’s 3 Up, 2 Down Initiative – Increase three healthy habits (physical activity, hours of sleep, consumption of fruits and vegetables) and decrease two unhealthy habits (consumption of sugar and hours of screen time (TV, computer, tablets, etc.) (designed for children)

- Work with residents one neighbourhood at a time, to create “Green Neighbourhoods”. Green Neighbourhoods promote active modes of transit and support transit use. They limit local travel and speeds of cars in specific zones, located in residential neighbourhoods and around schools, hospitals and commercial streets. Green Neighbourhoods are indicated by special signs. This initiative is being undertaken in Montreal.

- Develop partnerships with Universities (as was done with the Saskatoon Health Unit and the University of Saskatchewan) to improve access to healthy food and physical activity.

- Determine how pedestrian and cycling friendly the Region is through the American Cycling Association on-line rating system and Walk21 measures. This information needs to be included in the local “Vital Signs” report.

- Develop more indoor spaces to facilitate physical activity and walking during the winter months.

- House a resource person or facilitator at all school boards.

- Create “Fitness for Learning” style program based on Nutrition for Learning volunteer model to provide healthy food to school children.

- Provide programs to mental health groups, who will benefit from physical activity.
Appendix E:

Gap Analysis of Municipal Official Plan Policies

(Table 1 of Long Report, 2012)
**Analysis of Waterloo Region Municipal Official Plan Policies**

Table 1 provides an analysis of the municipal official plan policies for Waterloo Region. It identifies which municipalities currently have strong policies supporting the key priority areas for healthy eating, active living, and mental health identified in the previous section. Appendix 4 provides a comprehensive listing of each of the policies referenced in Table 1.

**Table 1: Gap Analysis of Municipal Official Plan Policies**

<table>
<thead>
<tr>
<th>Priority Area</th>
<th>ROP</th>
<th>Waterloo</th>
<th>Kitchener</th>
<th>Cambridge</th>
<th>Wellesley</th>
<th>Woolwich</th>
<th>North Dumfries</th>
<th>Wilmot</th>
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</thead>
<tbody>
<tr>
<td>Walkable Access to Affordable Healthy Food</td>
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<tr>
<td>Ensure affordable and nutritious food for all residents</td>
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<td>Identify lands close to residential and community use areas for community gardens</td>
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<td>Land use designations for small-scale food processing facilities and distribution centre(s) for locally produced food</td>
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<td>Support small-scale food-based home industries</td>
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<td><strong>Urban Agriculture</strong></td>
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<tr>
<td>Permit community gardens in all land use designations</td>
<td>✓</td>
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<tr>
<td>Permit edible landscaping and rooftop gardens in all land use designations</td>
<td>✓</td>
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<td>Set targets for community garden sites in new developments</td>
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<tr>
<td>Provide infrastructure support for gardens</td>
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<td>Encourage allotment gardens in institutional land uses</td>
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<td>Apply zoning to ensure long-term tenure and protection for community gardens</td>
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<td>Permit bee keeping</td>
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<td>Permit the raising of rabbits and hens (small animal husbandry)</td>
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<tr>
<td>Encourage urban foraging</td>
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<tr>
<td>Create Community Garden Location Criteria</td>
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<tr>
<td>Include urban agriculture in City’s managed open space strategy</td>
<td>✓</td>
<td>✓</td>
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<td><strong>Sustainable Food System</strong></td>
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<tr>
<td>Support sustainable agriculture and food production methods</td>
<td>✓</td>
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<tr>
<td>Foster sustainable food systems</td>
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<td><strong>Pedestrian Linkages</strong></td>
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<tr>
<td>PA Multi-modal pedestrian linkages/corridors (trails, sidewalks, bike lanes) within and between all land uses</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Intensification of land uses to support pedestrian links</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Link all residents with important destinations</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>PA Open spaces, recreational areas and parks will be developed as an interconnected system</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>PA Interconnected system of regional trails to permit linkages between municipalities</td>
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<td>✓</td>
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<td>Active and Passive Recreation</td>
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<td>Opportunities</td>
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<tr>
<td>Trails as both recreation and active transportation infrastructure</td>
<td>n/a</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Priority for active and passive parks for physical and mental health</td>
<td>n/a</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>On and off road walking and cycling network</td>
<td>n/a</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Accessible Recreation Opportunities</td>
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<td>Paris and recreation opportunities within close proximity to neighbourhoods</td>
<td>n/a</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>All season recreational opportunities</td>
<td>n/a</td>
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<tr>
<td>Recreational trails permitted in all land use designations</td>
<td>n/a</td>
<td>✓</td>
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<tr>
<td>Provide safe, affordable and quality recreation programs and facilities for all residents and visitors regardless of age, physical ability and financial means.</td>
<td>n/a</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Provide an appropriate supply and distribution of community facilities</td>
<td>n/a</td>
<td>✓</td>
<td>✓</td>
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<td>All residents within a 5 minute bike ride or 15 minute walk of a pathway/trail</td>
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<td>Utilize a safe and consistent design for pathways using a Planning and Design Guideline/Standard</td>
<td>✓</td>
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<tr>
<td>Active Transportation</td>
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<tr>
<td>Preference for pedestrian forms of transportation</td>
<td>✓</td>
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<td>Support infrastructure for active transportation (bke)</td>
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<tr>
<td>PA</td>
<td>Bike lanes on all main city arterial roads</td>
<td>✔️</td>
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<tr>
<td>PA</td>
<td>Bike lanes on all county roads</td>
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<tr>
<td>PA</td>
<td>Bike boxes at major intersections</td>
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<td>PA</td>
<td>Bicycle parking by-law to support bike parking at major destinations</td>
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<tr>
<td>PA</td>
<td>Employment lands shall be linked to residential areas and main transportation corridors with active transportation infrastructure</td>
<td>✔️</td>
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<tr>
<td>PA</td>
<td>Active transportation networks are integrated with other modes of transportation (eg transit)</td>
<td>✔️</td>
<td>✔️</td>
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<td>PA</td>
<td>Intensification of land uses to support active transportation</td>
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<td>PA</td>
<td>Provide incentives for pedestrian travel (eg increased car parking fees)</td>
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<tr>
<td>PA</td>
<td>Ensure that bikeways and pedestrian walkways are integrated into and designed as part of new road and other infrastructure projects</td>
<td>✔️</td>
<td>✔️</td>
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<tr>
<td>PA</td>
<td>Encourage and support walking and cycling as healthy, safe and convenient modes of transportation all year round</td>
<td>✔️</td>
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<tr>
<td>PA</td>
<td>Support increased bicycle safety and access for intersections</td>
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<td>roadways, bridges and underpasses</td>
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<td>Develop innovative policies and facilities that encourage City employees to cycle</td>
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<td>All residents within 1km (or 5 min) of cycling route</td>
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<td>Prepare and use a Bicycle Transportation Plan</td>
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<td>Traffic calming measures</td>
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<td>Pedestrian traffic signals at all intersections</td>
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<td>Controlled pedestrian crossings</td>
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<td>Sidewalk Priority Index</td>
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<td>Pedestrian refuge islands</td>
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<td>Sidewalks on both sides of streets</td>
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<td>Create and use a Sidewalk Policy</td>
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<td>Ensure all sidewalks are accessible</td>
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<td>Use a Municipal Pedestrian Charter as a guideline in the planning and development of walking opportunities</td>
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<td>Signed walking and pedestrian routes</td>
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<td>Limit surface parking between the front face of a building and the public street or sidewalk</td>
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<td>Design measures which promote pedestrian safety and security</td>
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<td>Affordable Housing and Safe Environments</td>
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<td>Inclusive Communities</td>
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<td>Adopt affordable housing targets and standards</td>
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<td>Standards for intensification that minimize the cost of housing and promote compact form, healthy living, and safety</td>
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<td>Design of buildings to create safe, comfortable pedestrian environments</td>
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<td>Buffer residential and sensitive land uses from noise and incompatible use areas</td>
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<td>Provide mixed and non-traditional housing arrangements</td>
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<td>Require development to meet social, health and well-being needs of current and future residents</td>
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<tr>
<td>Ensure an adequate supply, range and geographic distribution of housing types</td>
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<td>Design compact urban form that supports walkable communities and live/work opportunities</td>
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<td>Support for an assessment tool which allows the evaluation of public health impacts of a proposed plan or development</td>
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<td>Be inclusive of the needs of persons with disabilities, seniors, children and those with reduced mobility</td>
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<td>Apply universal physical access design standards to publicly accessible spaces and</td>
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<td>buildings</td>
<td>Community Connectivity/Social Cohesion</td>
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<td>Provide mixed used neighbourhoods that reduce the need for residents to commute long distances to work, school, shops and services</td>
<td>n/a</td>
<td>✔</td>
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<tr>
<td>Neighbourhoods are designed to include meeting spaces and common areas that address the needs of people of all ages and physical abilities.</td>
<td>n/a</td>
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<tr>
<td>Increase community safety features and initiatives to encourage more social interaction</td>
<td>n/a</td>
<td>✔</td>
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<tr>
<td>Provide a community focal point in each neighbourhood</td>
<td>n/a</td>
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Appendix F:

Example Groups/Initiatives Supporting Active Living in Waterloo Region

(adapted from Long, 2012)
<table>
<thead>
<tr>
<th><strong>Policy/Project</strong></th>
<th><strong>Region or Municipality</strong></th>
<th><strong>Details</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Project Health</td>
<td>Region – Public Health</td>
<td>Provides a variety of health promotion services to workplaces interested in improving and/or sustaining a healthy workplace in Waterloo Region. Includes active transportation, healthy eating, and physical activity among other health related topics.</td>
</tr>
<tr>
<td>TravelWise</td>
<td>Region</td>
<td>Strategies that encourage employees to use active and sustainable transportation. Includes ride matching for carpoolers, GRT corporate pass, emergency ride home.</td>
</tr>
<tr>
<td>Active Transport Master Plan</td>
<td>Region – wide</td>
<td>Walk Cycle Waterloo Region. Developing a plan to make it easier to walk, cycle, and ride within the Region. Advocating active transport.</td>
</tr>
<tr>
<td>Regional Cycling Master Plan</td>
<td>Region-wide, Waterloo, Kitchener, Wellesley</td>
<td>Goal of doubling the number of cycling trips to 2 per cent of all trips by 2016. Includes a cycling map.</td>
</tr>
<tr>
<td>Cycling Advisory Committee</td>
<td>Region</td>
<td>Advise the Region on the implementation of the cycling policies.</td>
</tr>
<tr>
<td>Community Trails and Bikeways Master Plan</td>
<td>City of Waterloo</td>
<td>Approved by Council in 2001. Serves as the primary reference for the ongoing development of a city-wide interconnected off-road trail and on-street bikeway system.</td>
</tr>
<tr>
<td>Charter of Physical Activity</td>
<td>City of Cambridge</td>
<td>Active Cambridge.</td>
</tr>
<tr>
<td>Bikeway Network Plan</td>
<td>City of Cambridge</td>
<td>Enables and supports cycling in Cambridge and incorporates direction for future routes, end of trip facilities, promotion and education. Currently maintains 230km of on-road cycling facilities, including bike lanes,</td>
</tr>
<tr>
<td>Master Plan for Leisure Services/Facilities</td>
<td>City of Cambridge</td>
<td>Ensure recreation facilities, programs, green spaces and consultation services are provided for the enjoyment and well being of the citizens of Cambridge. Ensure that all residents, regardless of their recreational interests, capabilities, or financial status are able to participate.</td>
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<tr>
<td>Plan for a Healthy Kitchener</td>
<td>City of Kitchener</td>
<td>Plan that highlights the community's six key priorities for its future, and guides the City of Kitchener Strategic Plan.</td>
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<tr>
<td>Leisure Facility Master Plan</td>
<td>City of Kitchener</td>
<td>Focuses on planning for leisure facilities for recreation, arts and culture, sports fields and trails.</td>
</tr>
<tr>
<td>Park Master Plan</td>
<td>City of Kitchener</td>
<td>Guides the long-term plans, priorities, and strategies for local parks and open spaces. Includes natural areas, community trails, grand river corridor, active parkland, neighbourhood parks and community engagement.</td>
</tr>
<tr>
<td>Multi Use Pathway Masterplan</td>
<td>City of Kitchener</td>
<td>Guiding document that provides the framework for the design, development, and operation of a multi-use pathway network in the city. All development and redevelopment applications must be consistent with the Multi-Use Pathways Trails Master Plan.</td>
</tr>
<tr>
<td>Active transportation charter</td>
<td>Waterloo Region District School Board</td>
<td>Adopted May 2011. The Charter is a statement of principles that recognizes the value of active modes of transportation for the journey to and from school.</td>
</tr>
<tr>
<td>Active and Safe Routes to School</td>
<td>Region-wide</td>
<td>A comprehensive community-based initiative that taps into the increasingly...</td>
</tr>
<tr>
<td>Accessibility Plan</td>
<td>Cities of Kitchener and Waterloo (joint)</td>
<td>Accessibility plan for the two cities based on requirements of <em>Accessibility for Ontarians with Disabilities Act</em> (AODA); developed with Grand River Accessibility Advisory Committee (GRAAC) - committee</td>
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urgent demand for safe, walkable neighbourhoods

Partnership between all municipalities, school boards, police
Appendix G:

Semi-structured Focus Group Guide
Focus Group Semi-Structured Interview Guide

Investigators:
Mark Eys, Ph.D. (meys@wlu.ca)
Alex Benson, M.Sc. (bens9230@mylaurier.ca)
Mark Surya M.Sc. (sury7600@mylaurier.ca)

Part 1: Introduction

Good morning/evening everyone,

Thank you for taking the time to speak with us today. The purpose of today’s discussion is to better understand your thoughts and experiences related to being physically active in the Waterloo Region. Specifically, we are interested in how to improve opportunities for individuals in the community to engage in physical activity and raise awareness of these opportunities. For today’s discussion we are going to be using a focus group format, and we encourage you to communicate any thoughts or ideas that you may have related to these topics. There are no right or wrong answers to any of these questions as we are just interested in your perspectives on these matters, so please feel free to build on and/or contrast any comments and discussion points.

Part 2: Physical activity opportunities

1. To begin, we are interested in some of the ways you are currently active. Can you please describe what types of physical activity you (or your members) engage in?

2. What types of opportunities for physical activity are currently available to you (or to your organization members)?

3. We are also interested about your perceptions of physical activity opportunities in general. Can you describe, generally, some of the different opportunities for physical activity in your community?

Part 3: Physical activity access

4. Now that we’ve discussed some of the physical activity opportunities available in your area, we’d like to get your thoughts on the access to these opportunities. Can you please describe the accessibility of these various opportunities?
Specific follow-up question:
- How can we improve access to these various opportunities?

5. Can you please describe any barriers to engaging in physical activity?
Specific follow-up questions:
- Potential personal barriers?
- Potential community barriers?
- Potential resource barriers?
- What can be done to assist in overcoming these various barriers?
6. What additional opportunities would you like to see in your area?

**Part 4: Physical activity promotion**

7. As we have highlighted, one of our main interests is to better understand how we can improve the promotion of physical activity in the Waterloo Region. What do you know about the current community initiatives regarding physical activity?

Specific follow-up questions:
- What are some potential ways that we could better educate you about the available physical activity opportunities in the area?
- Generally, what would be the most effective method of communication regarding the various opportunities in the area?

8. How, if at all, do you think a physical activity network would influence your physical activity lifestyle?

**For the policy providers:**

9. Please describe your willingness, if at all, to be involved and engaged in a physical activity community network?

10. Please describe the communication and/or intercommunity partnerships that currently exist between your organization and others in the area?

Specific follow-up questions:
- Ask about how a physical activity network would impact these relationships.
- Ask about feasibility and willingness to be a part of the intercommunity partnerships.

*Note: The focus groups are semi-structured in nature. With this consideration in mind, the previous script does not represent a verbatim portrayal of what the researcher(s) will be asking the participants. The purpose of the guide is to provide the researcher with key questions to ask each focus group. When appropriate, the use of probing questions may be utilized in order to maximize the richness of the data within the interviews. These consist of elaborative, clarification, and contrast type probes.*
Appendix H:

Summary of Key Themes from Community Engagement Focus Groups
### Themes Pertaining to Developing a Blueprint for Physical Activity in the Waterloo Region

<table>
<thead>
<tr>
<th>Themes</th>
<th>Number of respondents who spoke to each theme</th>
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<tbody>
<tr>
<td><strong>S</strong>haring information (24)</td>
<td>Educators, new Canadians, youth population (12-15), members of the private fitness industry, senior aged individuals,</td>
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<tr>
<td><strong>H</strong>elping individuals and groups who are in need. (79)</td>
<td>All participants</td>
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<tr>
<td><strong>A</strong>ccessing opportunities for active living (59)</td>
<td>All participants</td>
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</tbody>
</table>
| **P**artnering and establishing strategic links (33) | Educators, new Canadians, youth population (16-18 year olds), university students, senior aged individuals |}

**Educating individuals about the opportunities and initiatives related to physical activity (78)**

| All participants                                                                                           |

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