



Active Living Plan

for a Healthier San Antonio

The Active Living Plan for a Healthier San Antonio

... shares the vision of the National Physical Activity Plan: One day, all Americans will be physically active and they will live, work, and play in environments that facilitate regular physical activity.

The Active Living Plan for a Healthier San Antonio

... provides a set of policies and strategies that aim to increase physical activity in all segments of the San Antonio Area population. The Plan is the product of a private-public sector collaborative. The Plan aims to create a local culture that supports physically active lifestyles. Its ultimate purpose is to improve health, prevent disease and disability, and enhance quality of life.

endorsed by



Mayor's Fitness Council
City of San Antonio



Activelivingcouncil.info@gmail.com

Table of Contents

Introduction	4
Guiding Principles	5
The Active Living Plan	6
Overarching Strategies and Target Outcomes	6
Sector Summaries	7
Sector Strategies, Tactics, and Outcome Measures	10
Business and Industry	10
Education, After School, and Early Childhood	12
Healthcare	15
Mass Media	17
Parks, Recreation, Fitness, and Sports	19
Public Health	21
Transportation, Land Use, and Community Design	23
Volunteer and Non-Profit	25
Conclusion	27
Appendices	28
Why Active Living? Local Data and Impact of Inactivity and Obesity	28
What is the Active Living Council?	29
What is the Active Living Plan?	32
Using the Active Living Plan	33
References	34

Introduction

Physical activity is a critical part of maintaining good health. *Everyone*, both children and adults, benefits from being physically active every day. Regular physical activity can reduce a person's risk of obesity and chronic disease and may prevent certain health conditions from worsening over time. Unfortunately, most people do not perform enough daily physical activity to improve their health and enhance their quality of life. Local data and health and economic impact are discussed in the appendices. While individuals must take responsibility for making decisions to improve their own health, living healthier lives also requires us as a community to embrace a culture of wellness. As a community, we must commit to creating an environment that helps residents make healthy choices and take responsibility for decisions that support good health in our homes, neighborhoods, schools, and workplaces. If major improvements in health and wellness are expected in San Antonio and the surrounding areas, physical activity promotion and specific strategies for improvement **must** be a health priority of our city and county.

The *Active Living Plan for a Healthier San Antonio (Active Living Plan)* is designed to help local private and public institutions and organizations create and reinforce policies, environments, and programs to promote active living. This plan is the product of private and public sector collaboration and presents strategies that aim to increase physical activity in all segments of the San Antonio Area population.¹ Persons who can best implement this plan are policy makers, funding decision makers, program providers, and San Antonio Area community members. Systematically reading and addressing the strategies, tactics, and measures, these persons and institutions can establish supportive policies, funding, and programs to increase physical activity and active living in the San Antonio Area. Existing national, state, and local resources contributed to the organization, content, and format of this plan. These resources included *Healthy People 2020*¹, the *National Physical Activity Plan*², *Make the Move*³, *Active Texas 2020*⁴, and the *SA2020 Final Report*⁵. While implementation of this plan will take effort and commitment by residents and community leaders, the *Active Living Plan* serves as a roadmap for transforming the San Antonio Area into an active living community.

1 The *Active Living Plan* is a product of the Bexar County Active Living Council (ALC), which was created through the Communities Putting Prevention to Work project of the San Antonio Metropolitan Health District and funded by the American Recovery and Reinvestment Act of 2009. More information about the Active Living Council and the *Active Living Plan* is located in the Appendices.

Guiding Principles for this Plan

Several principles guided the development of the *Active Living Plan*:

- Increasing physical activity will improve the health and wellness of individuals in our community.
- Making the healthy choice the easy choice in our local communities, where we live, work, pray, and play, is everyone's business.
- The plan recognizes that individuals are impacted not just by their own personal attributes and behavior, but also by political, societal and environmental influences (this understanding is often described as the ecological model of health behavior).
- Our success is dependent upon engaging leadership and working collaboratively to determine the content of the plan and to implement the plan. At the same time using evidence based strategies and best practices and evaluating effectiveness are equally important.
- All socio-demographic groups will benefit from initiatives proposed by this plan.
- The plan is a **"living document"** that must be updated on a regular basis.



The Active Living Plan

The *Active Living Plan* is organized into societal sectors with priority strategies and the tactics to achieve the goals of the plan. Combining all eight categories in one plan allows users to take advantage of cross-sector synergies. These strategies are not all inclusive but are those the council believed have priority in our community. Each strategy is followed by measureable outcomes that demonstrate the implementation of that strategy and by a list of potential community partners for implementing the strategies. These strategies and measureable outcomes are summarized immediately below and included in greater detail in the sections that follow.

Overarching Strategies and Measures of Success

In developing the plan, several overarching strategies emerged and are included in the plan. Determining target outcomes is complicated by the interrelatedness of contributing factors, competing or differing outcomes set by a variety of sources, and a limited ability to gather appropriate data. However, a reasonable place to start is *Healthy People 2020*¹, the health goals of the nation, and *SA2020*⁵, the goals set by Mayor Julián Castro for the city. Two main physical activity targets of *Healthy People 2020* are to increase the amount of time people in all population subgroups spend in moderate to vigorous physical activity and to increase opportunities for physical activity by creating and enhancing access to places and facilities where people can be physically active. *SA2020* goals are to reduce adult and childhood obesity by increasing physical activity and improving nutrition, i.e., eating more fruits and vegetables.

The Active Living Council (ALC) recommends the following overall strategies and primary measures as a means of achieving the goals of *SA2020* and national public health goals:

Overarching Strategies

- Mobilize public support for strategies and tactics included in the Bexar County *Active Living Plan*.
- Recommend and disseminate best practice physical activity models, programs, and policies to ensure residents will meet physical activity guidelines.
- Create a local resource center to disseminate effective tools and coordinate active living policy development for promoting physical activity across all sectors of Bexar County
- Identify gaps and mount a local physical activity education program to educate residents both about why they should and how they can increase physical activity. Integrate the program with other local, state, and national health promotion and disease prevention education campaigns
- Incorporate a “Health” component into the Comprehensive Plan for the City of San Antonio.
- Promote and publicly recognize local entities, such as developers, municipalities, neighborhoods, and school districts, that significantly support the concepts and implementation of the *Active Living Plan*.



Measures of Success

A positive change in the following measures will occur when physical activity is increased by the implementation of this plan:

1. Proportion of adults who meet the *2008 Physical Activity Guidelines for Americans* for moderate- and vigorous-intensity aerobic activity (<http://www.health.gov/paguidelines>)
2. Proportion of adolescents who meet *2008 Physical Activity Guidelines for Americans* for moderate- and vigorous-intensity aerobic activity (<http://www.health.gov/paguidelines>)
3. Proportion of public and private schools that provide access to their physical activity spaces and facilities for all persons outside of normal school hours
4. Proportion of shared urban spaces, parks, and facilities accessible to all residents
5. Proportion of residents who use active transportation (i.e., walk, bicycle, and public transit) to travel to work, school, and other destinations.

Currently, local data are unknown for measures 3-5. One goal of the Public Health Sector is to identify gaps in research and surveillance in order to establish baseline and target measures.

Sector Summaries

The *Active Living Plan* is comprised of recommendations that are organized in eight major categories or societal sectors and summarized as follows:

Business and Industry

Better community health translates to healthy employees and reduces employee and dependent costs. Business and industry executives must facilitate and encourage active lifestyle changes for employees and their families by creating healthy workplace policies and using health incentives to leverage community resources. The ALC recommends that businesses collaborate with one another and other sectors to recognize and share best practices and workplace models for increasing physical activity and healthy lifestyles.

Education, Afterschool and Early Childhood

The knowledge, skills, and patterns that promote lifelong active living begin in childhood, so it makes sense that schools can play a large role in promoting active living. Additionally, preschool years are crucial for obesity prevention due to the timing of the development of fat tissue. Significant evidence strongly supports the correlation between school-based Physical Education (PE) and increasing physical activity rates. A quality PE program can increase student participation in physical activity, increase their physical fitness, and enhance their understanding about the purpose and methods of physical activity. Physical activity such as walking or cycling to and from school is another ideal way to get some of that activity at no extra cost to the child or family and may reduce



costs related to driving and health. ALC recommended strategies include increased accountability for quality and quantity of physical education and activity programs using recognized age appropriate standards and student assessment data, as well as improved policies and programs for before and after school physical activity.

Health Care

A major component of improving our health and well-being involves the use of health care resources to increase the level of daily physical activity of patients. This *Active Living Plan* envisions the health care community changing the behavior of patients by providing clear, consistent messages that inspire, educate, and transform Bexar County into a community of healthy residents through an internalized lifestyle of active living. The ALC recommends making physical activity a patient “vital sign” that all health care providers assess and discuss with their patients, while establishing physical inactivity as a treatable and preventable condition with profound health implications necessitating referral, education, and services. The ALC also recommends establishing an information network and referral base to providers of resources promoting physical activity.

Mass Media

Through partnership and collaboration with other sectors, mass media is in a unique position to promote physical activity to benefit the overall health of the community. The ALC recommends cross-sector partnerships through a Mass Media Physical Activity Work Group to combine resources and key messages around common themes in order to provide a sustained mass media campaign promoting physical activity and healthy lifestyle habits throughout San Antonio and Bexar County.

Parks, Recreation, Fitness and Sports

Proximity to parks and recreational facilities is associated with higher levels of physical activity. Improving the use and equitable distribution of the locations of these valuable community resources can greatly impact our community’s level of fitness. This *Active Living Plan* envisions availability, enhanced access, quality, security, and programming of our region’s existing and future recreational facilities in all neighborhoods. The ALC recommends improving existing public and private parks and facilities and promoting programs and facilities where people work, learn, live, and play to provide easy access to safe and affordable physical activity opportunities through innovative funding and strategies, such as joint use agreements, public-private partnerships, and park foundations.

Public Health

The public health sector includes public health agencies and non-government organizations that promote the health of the community as a whole. Public health sector organizations offer the necessary expertise and resources to develop, promote and drive community-wide physical activity initiatives through policy advancement via coordination with political bodies, the implementation of policies, , education, practice, evaluation, and research. The ALC recommends developing and maintaining a diverse public health workforce with competence and expertise in physical activity, health, and wellness. Additionally, the council recommends the establishment of an activity living research task force to centralize and coordinate local research and monitoring of factors and programs influencing physical activity.



Transportation, Land Use, and Community Design

Creating opportunities for daily physical activity is a priority for our region and can be affected by decisions regarding transportation, land use and community design. Planning at the regional, county, and local levels must plan for people, rather than for cars and parking lots. Traditional, conventional urban design in our community has led to a large increase in sedentary behaviors. A healthy community is one that includes multi-modal transportation choices and promotes equitable, affordable housing and mixed use opportunities. The ALC recommends prioritizing resources and providing incentives to increase active transportation (i.e., walking or cycling to destinations) and other physical activity by designing for “people first,” through all regional community design, infrastructure projects, systems, policies, and initiatives. Furthermore, the council recommends the use of a comprehensive, strategic, and collaborative approach to increase connectivity and accessibility to essential community destinations, to increase active transportation and physical activity by utilizing the concepts of infill development, transit oriented development and complete streets, and to revitalize the region’s livable and sustainable communities.

Volunteer and Non-Profit

Volunteer and non-profit organizations have long been recognized as adaptable sources of innovation and social cohesion, and as early responders to emerging ideas, needs, and community opportunities. As such they have led the development and promotion of physical activity recommendations and programs. The unique characteristics of these organizations allow them to mobilize public action in the implementation of many aspects of the *Active Living Plan* and programs for physical activity. The ALC recommends the development of a transformational outreach program for non-profit and volunteer organizations and their members to promote active living and to support the ALC *Active Living Plan* through the creation of a database of organizations willing to support portions of the *Active Living Plan* and their resources, by the adoption of workplace tactics for organization employees, and through the promotion of physical activity programs by coordinating with local, state and national decision makers for policies and system changes identified in the *Active Living Plan*.



Sector Strategies, Tactics, and Outcome Measures

This section presents each of the eight sectors in more detail, identifying strategies, tactics, and measures by which to evaluate outcomes.

Business and Industry

San Antonio businesses are critically dependent on the local community to supply employees. Better community health translates to healthy employees and reduces employee and dependent costs. Business and industry executives must facilitate and encourage active lifestyle changes for employees and their families by creating healthy workplace policies and using health incentives to leverage community resources. A healthy and happy workforce is a competitive advantage for San Antonio economic development.

Strategy #1

Encourage business and industry to collaborate with each other and with all other sectors to identify opportunities to promote physical activity.

How will we do this? / • What will progress look like?

1. Identify a local lead organization, such as the San Antonio Business Group on Health, within business and industry to interact with other sectors.
 - First year: Lead organization selected by steering committee. Charter and initial meeting of the lead organization completed.
 - Second year: 20 members in organization
 - Fifth year: 35 members in organization
2. Use the lead organization to identify exemplary cross-sector partnerships for promoting physical activity within the workplace and throughout the community. Make this information easily available to other local businesses.
3. Use the lead organization to encourage businesses to explore ways to expand products, marketing, sponsorship, and other efforts to promote physical activity. Recognize and reward exemplary and innovative actions.
 - Lead organization is facilitating clearinghouse for local/regional/national vendors to support local healthy workplace programs.
 - Organization recognizes vendors and businesses for best local wellness practices.



Strategy #2

Identify, summarize, and disseminate best practices, models, and evidence-based physical activity interventions in the workplace.

How will we do this? / • What will progress look like?

1. Develop and maintain a clearinghouse of examples of best healthy practices and resources that can be accessed by local business and industry.
 - First year: Best healthy practices and models for physical activity interventions in the workplace (worksite wellness programs) have been identified.
 - Organization has an active website which disseminates best practices to local business and includes resources to assist in local program implementation.
 - A baseline and a system to track number of programs implemented is established.
2. Recognize organizations that demonstrate they are examples of best practices.
 - Organization sponsors annual, tiered (by number of employees) employer recognition awards for best local business wellness practices
 - 50 local companies are participating in the recognition program
3. Create a forum for key business and industry leaders to play central roles in influencing their peers.
 - Forum that disseminates information to local leaders has established a meeting schedule.

Potential Partner Agencies

American Institute of Architects (AIA)
San Antonio Metropolitan Health District
San Antonio Business Group on Health
San Antonio Chambers of Commerce
San Antonio Medical Foundation
San Antonio Mayor's Fitness Council
San Antonio Business Group on Health
University of Texas at San Antonio
University of Texas Health Science Center at San Antonio
Other local colleges and universities



Education, Afterschool and Early Childhood

Approximately one-third of children and teens are overweight or obese, and most youth do not meet national physical activity guidelines. The knowledge, skills, and patterns for active living begin in childhood, so it makes sense that schools play a large role in promoting active living.^{6,7,8,9} Additionally, preschool years are crucial for obesity prevention due to the timing of the development of fat tissue – a child who is overweight between the ages of 4-6 faces a greater risk of obesity as an adult.^{10,11} Significant evidence strongly supports the correlation between school-based Physical Education (PE) and increasing physical activity rates. A quality PE program can increase student participation in physical activity, increase their physical fitness, and enhance their understanding about the purpose and methods of physical activity.⁶ Physical activity such as walking or cycling to and from school is another ideal way to get some of that activity at no extra cost to the child or family.

Strategy #1

Develop and implement state and school district policies requiring standards and ensuring accountability for the quality and quantity of physical education and physical activity programs.

How will we do this? / • What will progress look like?

1. Work with local school districts and state legislature to develop and implement binding standards and guidelines, such as those published by the National Association for Sport and Physical Education (NASPE), to requirements for PreK-12 standards-based physical education that address curriculum, time, class size, and employment of certified, highly qualified physical education teachers.
 - Eighty percent of schools' School Health Advisory Councils will have recommended policies that meet the National Association for Sport and Physical Education recommendations for daily PE from kindergarten through grade 12 (150 minutes per week for elementary schools and 225 minutes per week for secondary schools).
 - Two districts will have adopted NASPE recommendations.
 - Three other districts will be in the process of evaluating their school health policy to adopt increased physical activity standards.
2. Recommend school districts use health-related fitness data to measure change and improve programs, as well as to funnel "at risk" students into additional school- and community-based physical activity and nutrition programs to promote behavior change.
 - Sixty percent of local school districts will be implementing Fitnessgram annually to all students in grades 3-11. Currently, only students enrolled in PE classes are assessed.
3. Apply for local, state and national funding to ensure that schools have the resources (e.g., facilities, equipment, appropriately trained staff) to provide high-quality physical education and activity programs. Designate the largest portion of funding for schools that are under-resourced. Work with local officials to identify the areas of greatest need.
 - Task group established that identifies areas of greatest need and searches for, distributes, and assists school districts and schools with grant applications and other funding.
 - Baseline of physical activity-related funding applications submitted and received by school districts and schools is established.
 - The number of schools/districts and amount of funding applied for and received increases by 5% each year.



Strategy #2

Ensure that early childhood education settings for children ages 0 to 5 years of age promote and facilitate physical activity.

- Eighty percent of full-day child care facilities provide at least 60 minutes each of structured and unstructured physical activity per day.²

How will we do this? / • What will progress look like?

1. Develop and promote policies that clearly define physical activity components for pre-K, Head Start and other early childhood program providers.
 - The number of pre-K, Head Start, and licensed daycare providers that use the Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC)³ and implement recommended goal setting and action planning, continuing education and skill building will increase by a minimum of 5 percent each year.
2. Promote NAP SACC standards for physical activity and nutrition
 - Fifty percent of full-day child care faculty and staff will have attended NAPSACC standards informational and staff development opportunities.

Strategy #3

Provide opportunities for physical activity before and after school.

How will we do this? / • What will progress look like?

1. Support Safe Routes to School efforts to increase active transportation to and from school and support accommodations for children with disabilities.
 - Baseline is established of the percentage of children 5-18 years of age taking safe walking and biking trips to and from school.
 - The percentage of children 5-18 years of age taking safe walking and biking trips to and from school has increased by 10% each year to a minimum of 15% of all public school students.
 - Ten percent of schools participate in International Walk/Bike to School Day each year.

2 A National Association for Sport and Physical Education (NASPE) pre-school guideline <http://www.aahperd.org/naspe/standards/nationalGuidelines/ActiveStart.cfm>

3 The NAP SACC assessment tool is for childcare settings and uses an organizational assessment of 14 areas of nutrition and physical activity policy, practices, and environments to identify the strengths and limitations of the childcare facility. The NAP SACC also includes goal setting and action planning, continuing education, and skill building for providers.



2. Encourage school districts to adopt standards for the inclusion of physical activity in after-school programs.
 - Fifty percent of school districts with after school programming will have physical activity standards for their program that require 20% of after school programming be devoted to physical activity.⁴
 - Fifteen percent of schools will have implemented before/after school programming that specifically promotes physical activity and includes a parental component.
 - Fifty percent of school districts have policies encouraging before and after school active living related clubs, intramurals, and other practices.

Potential Partner Agencies

Alliance for a Healthier Generation

Bexar County Independent School Districts,

Boys and Girls Club of San Antonio

City of San Antonio

Coordinated School Health Program Providers

Head Start agencies

Local colleges and universities with child development, kinesiology and physical education programs

Mayor's Fitness Council

National Association for Sport and Physical Education

PE Resource and Equipment providers

Region 20 Education Service Center

San Antonio Sports

School District School Healthy Advisory Committees

State legislators

Texas Alliance for Health Physical Education Recreation and Dance

YMCA of Greater San Antonio

YWCA

⁴ Schools may adopt or adapt existing standards such as the National Afterschool Standards for Physical Activity and Healthy Eating.



Health Care

Health care is a major industry in Bexar County. It is comprised of people and physical resources devoted to providing health-related services to the community. A major component of improving our health and well-being involves the use of health care resources to increase the level of daily physical activity of patients. This *Active Living Plan* envisions the health care community changing the behavior of patients by providing clear, consistent messages that inspire, educate, and transform Bexar County into a community of healthy residents through an internalized lifestyle of active living.

Strategy #1

Make physical activity a patient “vital sign” that all health care providers assess and discuss with their patients.

How will we do this? / • What will progress look like?

1. Ensure that all local health care professional organizations encourage their members to assess their patients’ physical activity and discuss ways to make progress toward meeting the Physical Activity Guidelines for Americans.
 - At least three San Antonio health care delivery systems have developed educational programs or adopted existing programs, such as *Exercise is Medicine* (American College of Sports Medicine, <http://exerciseismedicine.org>), for their members regarding the assessment of patients’ physical activity and training to discuss ways to progress toward meeting Physical Activity Guidelines for Americans.
 - Healthcare professional training programs, such as those based at University of Texas Health Science Center at San Antonio (UTHSCSA), include physical activity education in their training.
 - Healthcare professional training programs include post-graduate physical activity education courses for healthcare professionals.
2. Include fields for tracking patients’ physical activity in medical records and electronic health records.
 - There is active participation of at least three San Antonio healthcare delivery systems to include fields for tracking physical activity in medical records.
3. Encourage health care professionals to be role models for active lifestyles for patients.
 - First year: Baseline established of current number of healthcare providers who meet the Physical Activity Guidelines for Americans.
 - Five years: The number of health care providers who meet the Physical Activity Guidelines for Americans will have increased by 25 percent.



Strategy #2

Establish physical inactivity as a treatable and preventable condition with profound health implications.

How will we do this? / • What will progress look like?

1. Establish an information network and referral base to providers for education, services, programs, and other resources promoting physical activity, such as *Exercise is Medicine* (American College of Sports Medicine, <http://exerciseismedicine.org>).
 - Achieve the active participation of at least three San Antonio healthcare delivery systems⁵ in Primary Care Medical Home project models where providers work in partnership with insurers to evaluate and promote effective practices and programs that encourage physical activity.
 - Local directory of Medical Home model providers is established.
 - At least three San Antonio healthcare delivery systems consistently provide information to patients promoting physical activity.
2. Ensure sufficient and appropriate referrals for services to qualified providers based on each individual patient's needs
 - Active Living Recognition program is established for providers to encourage quality referrals and services for patient needs.
 - Achieve regular participation of at least three San Antonio healthcare delivery systems to disseminate best practice guidelines for promoting physical activity including approaches for prevention.
3. Provide sufficient access to resources/providers promoting physical activity services based on each individual's needs. Focus on groups at high risk for chronic disease and inactivity.
 - At least three San Antonio healthcare delivery systems provide educational resources for high risk populations regarding the importance of physical activity and risks of physical inactivity.
 - Methods for tracking the prevalence of physical inactivity in San Antonio are established.

Potential Partner Agencies

Bexar County Community Health Collaborative

Bexar County Medical Society

Federally Qualified Health Centers and Community Clinics

Hospitals and Health Systems serving San Antonio and Bexar County

Methodist Healthcare Ministries

Private providers of health services

Private and public providers of physical activity services, including the City

Parks & Recreation Department

San Antonio Medical Foundation

San Antonio Metropolitan Health District

University of Texas Health Science Center at San Antonio

⁵ Health care delivery systems refer to health care professionals and the organizations that support them.



Mass Media

Mass media includes traditional media, such as TV, newspapers, and magazines, and new media, like social networking, text messaging, and websites. This sector has the potential to influence behaviors and attitudes among residents in communities throughout the city. Through partnership and collaboration with other sectors, mass media is in a unique position to promote physical activity to benefit the overall health of the community.

Strategy #1

Encourage partnerships across sectors to combine resources and key messages around common themes in promoting physical activity in San Antonio and Bexar County.

How will we do this? / • What will progress look like?

1. Establish a Mass Media/Physical Activity Work Group to coordinate a physical activity campaign across agencies and sectors with shared resources. Consider using existing committees of the Mayor's Fitness Council or Bexar County Community Health Collaborative as the base work group.
 - Work Group has established meeting schedule.
2. Include representatives of the eight ALC sectors, local media organizations and supporting marketing/public relations professionals in the Media Work Group. The Work Group will require members to secure and share resources.
 - Work Group includes cross-sector representation and shared resources.
3. Align Work Group activities with the *Active Living Plan*.
 - Work Group activities support the Active Living Plan.



Strategy #2

Initiate the coordination of a sustained mass media campaign to promote physical activity and healthy lifestyle habits throughout the community through use of the Work Group.

How will we do this? / • What will progress look like?

The Work Group will:

1. Develop a 5-year plan to generate local support and funding for a sustained mass media/ social marketing campaign to increase physical activity. Consider using the SABalance.org web portal for implementing tactics of the sustained campaign.
2. Work with local communications/advertising professionals to establish a pro bono “Ad Council,” which will work with the ALC Media Work Group to develop a highly visible San Antonio logo and campaign brand.
3. Develop mass communication messages that promote physical activity, have a clear and standardized local “brand,” and are consistent with current Physical Activity Guidelines for Americans and the *Active Living Plan*.
4. Develop an approach to educate members of private and public media about physical activity and health as well as the *Active Living Plan*.
5. Engage traditional and new media; English and Spanish language media; electronic, print, and web-based media channels, including social media, to reach diverse audiences throughout the San Antonio Area, including high-risk populations.
6. Encourage writers and producers to include messages and stories related to physical activity and health that are consistent with the local brand.

Potential Partner Agencies

Alternative newspapers

Bexar County Community Health Collaborative

The DeBerry Group

Family Service Association

Local area blogs

Local Health Systems

Local television and news services including both English and Spanish language stations

Mayor’s Fitness Council

Professional Organizations

Public Relations San Antonio

Advertising Federation of San Antonio

International Association of Business Communications

American Marketing Association

Public Broadcasting System (PBS)

San Antonio Sports

San Antonio Express News

Social media sites



Parks, Recreation, Fitness and Sports

Opportunities for regular physical activity are found in our region's public and private parks, recreation facilities, and sports organizations. Proximity to parks and recreational facilities is associated with higher levels of physical activity. Improving the use and equitable distribution of the locations of these valuable community resources can greatly impact our community's level of fitness. This *Active Living Plan* envisions availability, enhanced access, quality, security, and programming of our region's existing and future recreational facilities in all neighborhoods.

Strategy #1

Increase funding and resources for parks, recreation, fitness, sports programs and facilities in areas with limited access to physical activity opportunities. This strategy applies to capital project funding for infrastructure as well as operating funds for programs.

How will we do this? / • What will progress look like?

1. Establish a dedicated funding source for the development, rehabilitation, and maintenance of parks and recreation infrastructure and programs.
 - Baseline of existing funding has been established.
 - Fundraising group or donation program dedicated to improvement of existing neglected parks and recreation facilities established.
 - Regional funding source created.
2. Support and advocate for tax incentives and development codes to promote the development, utilization, and maintenance of parks, recreation, fitness, and sports facilities.
 - Five new developments include park space, recreation facility, or green space that is accessible and visible to nearby residential neighborhoods and office buildings.
 - Establish a comprehensive volunteer program to dedicate community service hours to local park or recreation facility improvements and maintenance, such as the City Parks and Recreation Department volunteer program.
3. Increase funding to improve the equity of access to parks, trails, recreation, fitness, and public, private, and non-profit sports programs and facilities.
 - Completed assessment of neighborhood needs and opinions of underutilized facilities.
 - Priority needs for subsequent action have been established.
 - Equitable distribution of resources dedicated to retrofitting existing facilities to attract new users from the community.

Strategy #2

Promote public and private programs and facilities where people work, learn, live, play, and worship to provide easy access to safe and affordable physical activity opportunities.

How will we do this? / • What will progress look like?

1. Adopt community strategies that improve access, safety, and security of parks, recreation, fitness, and sports facilities, especially in low-resource and high-crime neighborhoods with limited recreational opportunities.
 - Initiate reduced costs for participation in programs and/or use of facilities; increased operating hours, joint use agreements with academic and church facilities, and create new parks and trails.



- Three new initiatives, such as joint use policies or sports programs, associated with academic or religious facilities have been developed and implemented.
 - Recreation facilities or fitness opportunities are available within walking distance (1/4 mile) to 70% of neighborhoods and within biking distance (2 miles) to all neighborhoods.
2. Provide recreation, fitness, and sports programs within parks and public recreation facilities appropriate for individuals of all cultures, abilities, developmental stages and needs to promote positive physical activity outcomes.
 - Establish and utilize partnerships with fitness instructors and local gyms to provide fitness programs in recreation facilities and parks.
 - Create a monthly program focused on family fitness, incorporating games, activities and wellness fairs.
 - Develop three comprehensive community fitness challenges with local parks or other facility/organization focusing on weight loss, walking, and/or fitness.
 3. Upgrade existing facilities and develop new facilities consistent with current design principles to provide maximum accessibility and safety for all physical activity levels.
 - Three new parks, open spaces, or recreational facilities complementing the cultural preferences of the neighborhood and accommodating a range of age groups including children and their parents are established.
 - Five existing parks or recreational facilities are retrofitted to meet current safety, design and accessibility guidelines.

Potential Partner Agencies

Bexar County Parks and Recreation Department
 Brackenridge Conservation Society
 City of San Antonio Development Services Department
 City of San Antonio Parks and Recreation Department
 Friends of the Park Association
 Green Space Alliance of South Texas
 Local Fitness Instructors and Private Gyms
 Mayor's Fitness Council
 Other municipal Parks and Recreation Departments
 Professional Athletic Teams and Athletes
 Real Estate Developers
 San Antonio Parks Foundation
 San Antonio Sports and Social Club
 San Antonio Sports
 Sporting Clubs and Organizations
 Texas Parks and Wildlife Department
 YMCA of Greater San Antonio



Public Health

The public health sector includes governmental public health agencies and non-government organizations that contribute to promoting the health of the community. Public health sector organizations offer the necessary expertise and resources to develop, promote and drive community-wide physical activity initiatives through policy advancement via coordination with political bodies, the implementation of policies, education, practice, evaluation, and research.

The public health sector can support implementation of the *Active Living Plan* to capitalize on:

- Existing local momentum to improve community health,
- Widespread desire to address the growing concern about increases in obesity and chronic disease, which are preventable with modest lifestyle changes, and
- Existing cross-sector partnerships.

Strategy #1

Develop local expertise within governmental and non-governmental public health organizations in physical activity as part of an integrated and coordinated approach to chronic disease prevention.

How will we do this? / • What will progress look like?

1. Invest in capacity building by developing, promoting and offering continuing education opportunities for physical activity and public health across disciplines and sectors in the community.
 - Academic institutions, professional societies, and local organizations have made training opportunities and resources available to increase the capacity of the local public health workforce in physical activity.
 - A database of continuing education and short courses related to physical activity has been established and at least one local or online education opportunity is promoted each month.
 - The number of Physical Activity in Public Health Specialists (PAPHS)⁶ certified professionals in the local public health workforce has increased from 0 to 20, or 4 per year.

Strategy #2

Monitor local policy and environmental factors contributing to physical activity and levels of physical activity in communities (surveillance), and monitor the implementation and effectiveness of local public health approaches to promoting active lifestyles (evaluation).

How will we do this? / • What will progress look like?

1. Improve and expand local observation of physical activity, inactivity, and fitness levels throughout the community, including youth and underserved populations.

⁶ PAPHS certification demonstrates competency in six key areas for the promotion of physical activity as it relates to chronic disease prevention and management. These key areas are partnerships, data and scientific information, planning and evaluation, interventions, organizational structure, and exercise science in public health settings. For a complete copy of the PAPHS core competencies, go to: http://www.nspapph.org/images/resources2/approved_bod_cc_011410.pdf. For more information about the certification process, go to <http://www.nspapph.org/slider-information/acsm-nspapph-physical-activity-in-public-health-specialist-paphs-certification>



- An active living research task force to centralize and coordinate local research and surveillance efforts has been established with participation from the local public health agency.
 - An index of existing local surveillance data and research has been developed.
 - Gaps in local research and surveillance data have been identified and a plan for obtaining and maintaining current local research and surveillance has been created.
2. Expand surveillance of local environmental factors and policies related to physical activity, including disparities of resource availability and utilization.
 - An active living research task force (see above) to review local environmental factors and policies related to physical activity has been established with participation from the local public health agency.
 - Report to local public health system partners on local research and surveillance initiatives are made annually.
 3. Monitor implementation and evaluation of local initiatives and policies that promote active lifestyles.
 - An index of local physical activity promotion initiatives to assess level of local expertise about physical activity and health, current local practices for physical activity promotion, current implementation of related policies, and local physical activity program outcomes has been created and is maintained.
 - Published/publicized the initial index (baseline) by January 2013 and updated quarterly.
 - Evaluation status and analysis of local initiatives (presence of evaluation plan, quality of evaluation plan, funding of evaluation plan, evaluation outcome) included.
 - Funding sources for local initiatives (i.e., public v. private funding, local v. state v. federal funding) included.
 - The initial index serves as a baseline of local physical activity initiatives and evaluation status.
 - The proportion of physical activity initiatives that include evaluation plans has increased by 5% each year.
 - An index of local, state, and national policies that impact active living in the San Antonio area has been created and maintained.

Potential Partner Agencies

Bexar County Community Health Collaborative
 Bienestar Health Program/Child Diabetes Prevention - The Social & Health Research Center
 San Antonio Metropolitan Health District (Metro Health)
 San Antonio Parks and Recreation Department
 The University of Texas at San Antonio
 College of Education, Department of Health and Kinesiology
 The University of Texas School of Public Health, San Antonio Regional Campus
 UT Health Science Center at San Antonio (UTHSCSA)
 Medical and Allied Health Schools
 School of Nursing
 Institute for Health Promotion Research



Transportation, Land Use, and Community Design

The way we live, work, and play is dependent largely on our built environment. Environmental and policy decisions regarding transportation, land use, and community design can change the physical activity behaviors of residents on a large scale. Planning at the regional, county, and local levels must plan for people, rather than for cars and parking lots. Traditional, conventional urban design in our community supports sedentary behaviors. A healthy community is one that includes multi-modal transportation choices and promotes equitable, affordable housing and mixed use opportunities. San Antonio's environment must shift to design that supports active living of all residents, promoting stair climbing, walking, bicycling, skateboarding, using mass transit, and active recreation. The ALC envisions healthier streets, urban spaces, and buildings for a livable and active future.

Strategy #1

Through regional and local community design, prioritize resources and provide incentives to increase active transportation and other physical activity by designing for "people first," that is, to encourage walking and bicycling⁷, through all regional and local community design, infrastructure projects, systems, policies, and initiatives.

How will we do this? / • What will progress look like?

1. Support and increase incentives for transportation, land use, and community design projects to create safe and accessible active transportation networks, including not just roadways with pedestrian, bicycle, and transit accommodation, but also networks of greenways, trails, and multi-use pathways.
 - Local, state and federal funding sources identified and secured to fund priority pedestrian, bicycle, and transit projects.
 - Regional mode share for cyclists, pedestrians, and transit users increased.
2. Support policies and increase incentives that enhance street and building amenities standards related to pedestrian, bicycle, and transit in planning and development of transportation networks, urban design, and new developments.
 - Complete streets, accommodating all users regardless of age, ability or mode, are established throughout the community to serve areas of major activity.
 - Various infill development and zoning adjustments that utilize form-based zoning, mixed-use design, or transit-oriented design are supported.
 - Program established to enhance signage and viability of transit services and stops, as well as to ensure safe walking and bicycling routes to transit stops.
 - Professional organizations and media have implemented programs to educate the public on the benefits of the recommended strategies and policies.
3. Support and increase incentives for the initiatives establishing or maintaining safe urban space for users regardless of mode choice.
 - Intersections with highest rate of vehicular/pedestrian and vehicular/bicycle crashes have been retrofitted with improved amenities and signage.
 - The amount of safe and secure parking facilities for cyclists within major areas of activity has increased.

⁷ For more information, go to <http://www.thecommunityguide.org/pa/environmental-policy/travel-policies.html>



Strategy #2

Use a comprehensive, strategic, and collaborative approach to increase connectivity and accessibility to essential community destinations, to increase active transportation and physical activity by utilizing the concepts of infill development, transit orientated development, and complete streets, and to revitalize the region's livable and sustainable communities.

How will we do this? / • What will progress look like?

1. Encourage adoption of policies at the state, county and local levels that guide planning, design, and development of active communities and transportation systems that safely accommodate all users regardless of age, ability or mode of travel, with specific attention to policies supporting and maintaining a network of interconnected streets, sidewalks, and small blocks to encourage pedestrian activity.
 - Improved neighborhood transit network that allows people improved access to a greater number of regional jobs.
 - Established coalition to develop comprehensive strategies to impact active living through approaches related to parking, transit, cycling, building standards, streetscape standards, and land use.
 - Comprehensive sidewalk inventory established.
 - Dedicated bicycle facilities increased.
2. Enhance traffic safety in areas where persons are, or could be, more physically active (e.g., schools, parks, recreation areas) by utilizing traffic calming techniques and designing streets with adequate pedestrian and cycling accommodations.
 - Air quality standards achieved as designated by the US EPA.
 - Five major areas of transit transfers will have enhanced safety amenities for patrons.
 - Incorporation of Health Impact Assessment with major projects to judge the potential health effects of a proposed project, policy, or program before it is built or implementation has occurred.
3. Maintain and enhance compact neighborhoods with a diverse mix of land uses and improve transit accessibility to regional destinations.
 - Greater number of households within walking distance (quarter mile) of an active recreation space.
 - Increased utilization of Form Based Development Code and mixed-use zoning at major nodes of activity.

Potential Partner Agencies

Alamo Area Council of Governments
American Institute of Architects
American Planning Association
Centers for Disease Control and Prevention Healthy Community Design Initiative
City of San Antonio
Congress of New Urbanism
Neighborhood Association Alliance
Real Estate Developers
San Antonio Bexar County Metropolitan Planning Organization
Texas Department of Transportation
Urban Land Institute
VIA Metropolitan Transit



Volunteer and Non-Profit

The National Physical Activity Plan notes that supportive environments are essential if people are to have “real and sustainable opportunities for daily physical activity.” Volunteer and non-profit organizations have long been recognized as adaptable sources of innovation and social cohesion, and as early responders to emerging ideas, needs, and community opportunities. As such they have led the development and promotion of physical activity recommendations and programs. The unique characteristics of these organizations will allow them to mobilize public action in the implementation of many aspects of the *Active Living Plan* and programs for physical activity.

Strategy #1

Develop and conduct transformational outreach programs for non-profit and volunteer organizations and their members to promote active living and support the *Active Living Plan*.

How will we do this? / • What will progress look like?

1. Publicize the *Active Living Plan* as well as what and how local organizations can contribute to its implementation.
 - Four outreach events/activities completed per year.
2. Create database of organizations willing to support portions of the *Active Living Plan* and identify areas of interest, specific capacity for funding, volunteer resources, capacity for dissemination of information, and resources for advocacy.
 - Initial database, including areas of interest, resources available to assist with master *Active Living Plan* (e.g., funds, volunteers, advocacy resources, etc.) and level of influence, created by July 2012.
 - Update and release of database quarterly to constituents.
3. Use all available communication channels to members, volunteers, and constituents, including print publications, websites, social media, broadcast media, and newsletters to promote engagement in behavior change and advocacy.
 - 50% of participating organizations include active and healthy living pieces in communication media monthly.
 - 30% of participating organizations promote action and methods for advocacy in calls by member organizations for specific advocacy related to active living.
4. Adopt the workplace tactics recommended by the Business and Industry sector to promote active living among employees and constituents.
 - 30% of participating organizations have adopted at least two workplace tactics recommended by the Business and Industry sector.



Strategy #2

Encourage local, state and national decision makers to adopt and implement policies and system changes identified in the *Active Living Plan* to promote active living.

How will we do this? / • What will progress look like?

1. Identify joint priorities so multiple organizations across issue areas can speak with one strong voice.
2. Develop and disseminate position statements to policy- and decision-makers on issues relevant to active living.
3. Assist in prioritizing community needs and facilitate collaboration between the community and government to achieve the services, programs and accessibility that most benefit the community, particularly those at highest need.
4. Use community mobilization techniques, such as community assessment, education, skill-building, and specifying needed action, to recruit and engage members, volunteers, and constituents.
5. Use enhanced strategies to reach and serve all populations with advocacy and outreach efforts, including high risk and traditionally underserved populations.
6. Implement a minimum of one advocacy training opportunity per year.

Potential Partners

American Cancer Society
American Heart Association
American Lung Association
Bexar County Community Health Collaborative
Boys and Girls Club of San Antonio
Faith-Based Organizations
Junior League
Methodist Healthcare Ministries
Neighborhood Association Alliance
Park Volunteers (e.g., Friends of the Park, Brackenridge Park Conservancy)
San Antonio Children's Museum
San Antonio Sports
Scouts
United Way
Witte Museum, Body Adventure Initiative
YMCA of Greater San Antonio
YWCA



Conclusion

The *Active Living Plan* provides cross-sector strategies and tactics to ensure access to safe, healthy places and programs to support physical activity and active living, ultimately decreasing premature illness and death and improving quality of life. This plan helps leaders to incorporate health considerations into decision-making and enhances collaboration and use of best practices to meet activity-related goals.

The *Active Living Plan* presents strategies and measures that are aligned with the activity goals and vision of the nation and with the *SA2020* community vision. By embracing these strategies and approaches and their rigorous implementation, San Antonio and surrounding areas can be transformed into a vibrant and healthy community through active living.

The leadership of San Antonio has taken a positive step in planning for the future with its *SA2020* plan. Their plan is the result of well-attended community-wide meetings to identify goals for what residents want San Antonio to be in the year 2020 and to develop strategies to get there. Health and fitness goals were an important area for the plan:

“Improving the health and fitness of San Antonio is not only essential to promoting a robust quality of life, but is integral to the success of efforts to improve education and promote economic competitiveness. Improving nutrition and increasing physical activity in schools bolsters academic performance and test scores. Enhancing health and fitness also promotes economic competitiveness by lowering health care costs, promoting a healthy workforce, and attracting creative class workers who seek out cities that provide world-class parks and recreation facilities, healthy and fresh food, and excellent health care.

Improvements in other areas can also positively impact the health and fitness of cities. “Complete streets” policies integrate health into zoning, planning and transportation decision-making, and encourage physical activity through public works improvements in roads and sidewalks that make walking and bicycling safer and easier. Improvements in community safety can also encourage greater levels of recreation and exercise by making parks and neighborhood sidewalks safer for walking and jogging.”^{5, p. 71}

The *Active Living Plan* serves as a roadmap to achieve the *SA2020*'s health and fitness vision. This plan is not one to “sit” on the shelf. The next step is to engage the potential partners listed in this plan along with community leaders and stakeholders to define measurable outcomes and annual objectives to advance the strategies within the plan.



Appendices

- I. Why Promote Active Living? Local Data and the Impact of Inactivity and Obesity
- II. What is the Active Living Council?
- III. What is the *Active Living Plan for a Healthier San Antonio*?
- IV. Using the *Active Living Plan*

Appendix I

Why promote active living? Local data and Impact of Inactivity and Obesity

The leading causes of death and disability in the United States, include obesity, heart disease, stroke, some cancers, and diabetes, and are all *chronic* and *preventable*. Experts agree that the *actual* leading causes of death are three specific lifestyle behaviors: tobacco use, poor nutrition, and *insufficient physical activity*.¹² Improving all three of these behaviors is crucial for avoiding premature death and chronic disease. This plan focuses on increasing physical activity.

Most Americans, adults and children, do not meet the daily physical activity recommendation to maintain good health, and national surveys indicate the trend is worsening, not improving. Only one in four adults meets the physical activity recommendations (150 minutes per week of moderate-to-vigorous physical activity), and one in four do not engage in any physical activity at all. These statistics are consistent with physical activity behaviors of Bexar County residents. A recent survey of local residents reports that while more than half of adult respondents engaged in some physical activity, 26% engaged in no leisure time physical activity at all.¹³ While nearly 50% of Bexar County high school students reported some physical activity, only 30% met national guidelines, i.e., 60 minutes most days.¹⁴ For Bexar County high school students just over 15% reported no physical activity in the past seven days.

Obesity and physical inactivity are critical public health threats due to associated health consequences and the economic burden to society, not only from increased health care costs, but also reduced productive years due to disability and illness. Society has witnessed a dramatic increase in overweight and obesity across the population over a single generation; the childhood obesity rate has tripled.¹⁵ More than two-thirds of adults are overweight or obese, and more than one-third of children are overweight or obese.^{16, 17, 18} Among Bexar County residents, 69.6% of adults are overweight or obese, and 31.8% of adolescents are overweight or obese.¹³ Obesity and its consequences also lead to financial burdens. Researchers for the Centers for Disease Control estimated medical costs of obesity in the United States to be \$147 billion annually in 2006, and determined that obese persons spent \$1,429 or 42% more than normal weight persons.¹⁹ Nearly half of these costs were Medicare and Medicaid. According to the Milken Institute, “The total effect of chronic disease on the economy is \$1.3 trillion annually. Of this amount, lost productivity totals \$1.1 trillion per year, while another \$277 billion is spent annually on treatment.”²⁰ Moreover, independent



of obesity, physical inactivity has direct medical costs that accounted for 2.4% of total US health care expenditures in 1995.²¹ As such the prevention of obesity and chronic disease are an important public health priority.

Given that inactive lifestyle is a critical contributing factor to obesity, chronic disease, and premature death, increasing physical activity has been identified as a national high-priority health issue that is critical to improving the health of Americans at every age. Based on data collected for Bexar County, it is evident that physical inactivity is also a critical health issue for our local community as well. **Clearly, there is an urgent need to identify and implement effective strategies to facilitate and support opportunities for active living.** While some strategies are being developed and implemented at the national level, communities must identify local strategies that will improve the health and enhance the quality of life of local residents.

Appendix II

What is the Active Living Council?

In March 2010, the City of San Antonio, through the San Antonio Metropolitan Health District, received funding of \$15.6 million from the American Recovery and Reinvestment Act of 2009 to implement Communities Putting Prevention to Work, a project designed to help prevent and reduce obesity through policy, environmental, and system changes. One component of the project was the creation of an Active Living Council (ALC) to address active living issues in Bexar County. “Active living” is a way of life that integrates physical activity into daily routines, such as walking to the grocery store, riding a bicycle to work, or exercising. Facilitating and supporting opportunities for active living is essential for increasing the likelihood that adults and children meet the Surgeon General’s recommendations for daily physical activity, thus reducing the risk of obesity and chronic disease.

With this foundation the ALC developed the following vision and mission statements:

Vision-To transform Bexar County into a healthy community through active living.

Mission- To improve quality of life by facilitating positive change in policy, infrastructure, and attitudes that result in a vibrant and healthy community for all Bexar County residents.

The ultimate outcome of the Active Living Council’s efforts is to decrease premature illness and death and to improve quality of life of Bexar county residents. The work of the council will help ensure that every individual in Bexar County has access to safe, healthy places and programs to support physical activity and active living.



Plan of Action

In order to carry out the ALC vision, an initial plan of action was developed with two strategies. The first strategy was to develop and promote implementation of a 3-5 year master plan to reduce sedentary behaviors and increase physical activity in Bexar County. The second strategy was to develop two policy recommendations to be presented to the community and local officials to reduce sedentary behavior and increase physical activity in Bexar County. This document contains the master plan.

Additionally, the Active Living Council will:

- Provide a forum to address active living issues
- Promote coordination among the various sectors that impact active living
- Foster local physical activity and active living projects
- Promote improved access to places and programs for physical activity (such as parks and open space)
- Promote policies related to increasing physical activity and active living (such as transportation, land-use, community design, and safety)

Active Living Council members are volunteers who represent multiple levels of influence and levels of physical activity knowledge and experience. The 20-member council is composed of 2 members from each of the following categories:

- Business & Industry
- Education
- Healthcare
- Mass Media
- Public Health
- Volunteer & Non-Profit
- Parks, Recreation, Fitness, & Sports
- Transportation, Land-use, & Community Design
- Community Representatives
- Other



Active Living Council Members

2011 ACTIVE LIVING COUNCIL MEMBERS

Business & Industry

Wald, Peter

Bruce, Rebecca

Community Representative

Quintanilla, Mimi

Kirby, Karen

Education

Castro, Gina Maranto

Healthcare

Zaharoff, Annette (Chair)

Higgins, Christine Criscuolo

Mass Media

Japhet, Mary Ullmann

Ortiz, Jacqueline

Suescun-Fast, Anamaria

Other

Day, Daniel

Biediger, Valerie

Parks, Recreation, Fitness, & Sports

Velasquez, John

Munoz, Bryan P.

Public Health

Velasquez, Katherine

Esparza, Laura (Co-Chair)

Transportation, Land-Use, & Community Design

Pobanz, Hannah

Kelly, Lydia

Volunteer & Non-Profit

Amy Brown-Minor

Chris Quintanilla



Appendix III

What is the *Active Living Plan*?

The *Active Living Plan* presents strategies to increase physical activity to promote health and wellness among all segments of the Bexar County population. If major improvements in health are expected in Bexar County, physical activity promotion **must** be a health priority of our city and county.

Existing national, state, and local resources contributed to the organization, content, and format of this plan, including *Healthy People 2020*, the *National Physical Activity Plan*, *Active Texas 2020*, and *SA2020 Final Report*. The plan provides a community-driven foundation that policymakers and other community leaders can utilize to support policy, environmental, and system changes to increase the likelihood that people in the community will become more physically active, ultimately benefiting the health of Bexar County residents. While implementation of the plan's recommendations is left to residents and community leaders, the *Active Living Plan* serves as a roadmap for transforming Bexar County into an active living community, articulating priorities and guiding how resources are allocated to promote active living for all residents.

The *Active Living Plan* recommends several overarching strategies to guide decisions about policy and resource allocation in Bexar County. The plan also includes specific recommendations organized in eight community sectors:

- Business & Industry
- Education
- Healthcare
- Mass Media
- Parks, Recreation, Fitness, & Sports
- Public Health
- Transportation, Land-use, & Community Design
- Volunteer & Non-Profit

Each sector presents strategies to promote physical activity and outlines more specific tactics that community organizations, agencies, leaders, and residents can use to address the strategies. Members of the Bexar County Active Living Council collaborated with each other and the broader community to develop a plan that will guide the transformation of Bexar County into an active living community.



Appendix IV

Using the *Active Living Plan*

The National Physical Activity Plan and its implementation companion, *Make the Move*, provide a comprehensive long-term strategy for transforming the nation into a more active one. This *Active Living Plan* localizes and prioritizes the strategies and is designed to help local institutions and organizations from all sectors of the Bexar County community develop and promote policies, environments, systems, and programs that support active living. Policy makers, funding decision makers, program providers, and Bexar County community members all play a role in implementation of the plan's recommendations. They may use this plan to guide decisions about policy, resource allocation, program development, and advocacy.

The *Active Living Plan's* six overarching strategies represent broad approaches to promoting active living throughout the community. Each of the plan's eight community sectors contains priority strategies and associated implementation tactics and evaluation measures. Including all eight categories in one plan allows users to take advantage of cross-sector synergies.



References

1. Healthy People 2020 Leading Health Indicators. (2011). Accessed November 5, 2011 from <http://www.healthypeople.gov/2020/LHI/default.aspx>
2. National Physical Activity Plan. (2009). Accessed January 28, 2011 from <http://www.physicalactivityplan.org/NationalPhysicalActivityPlan.pdf>
3. Make the Move: 2010-2011 National Implementation of the U.S. Physical Activity Plan. <http://www.physicalactivityplan.org/implement.php>
4. Active Texas 2020 DRAFT (8-20-2010). Accessed January 28, 2011 from www.activetexas2020.org
5. SA2020 Final Report (2011). Accessed November 5, 2011. http://sa2020.org/pdfs/SA2020_Final_Report.pdf
6. Kahn, E.B., Ramsey, L.T., Brownson, R.C., Heath, G.W., Howze, E.H., Powell, K.E. et al.(2002). The effectiveness of interventions to increase physical activity. A systematic review. *American Journal of Preventive Medicine* , 22(Supplement 4), 73-107.
7. Luepker, R.V., Perry, C.L., McKinlay, S.M., Nader, P.R., Parcel, G.S., Stone, E.J. et al.(1996). Outcomes of a field trial to improve children's dietary patterns and physical activity. The Child and Adolescent Trial for Cardiovascular Health. *Journal of the American Medical Association*, 275, 768-76.
8. McKenzie, T.L., Nader, P.R., Strikmiller, P.K., Yang, M., Stone, E.J., Perry, C.L. et al.(1996). School physical education: Effect of the Child and Adolescent Trial for Cardiovascular Health. *Preventative Medicine*, 25, 423-31.
9. Trudeau, F., Shephard, R.J.(2005).Contribution of school programs to physical activity levels and attitudes in children and adults. *Sports Medicine*, 35, 89-105.
10. Maher, E.J., Li, G., Carter L., Johnson D.B.(2008).Preschool child care participation and obesity at the start of kindergarten. *Pediatrics*, 122(2), 322-30.
11. Whitaker, R.C., Pepe, M.S., Knight, J.A., Seidel, K.D., & Dietz, W.H.(1998).Early adiposity rebound and the risk of adult obesity. *Pediatrics*, 101(3), 5.
12. Mokdad, A.H., Marks, J.S., Stroup, D.F., &Gerberding, J.L. (2004). Actual causes of death in the United States, 2000. *JAMA*, 291(10), 1238-1245. doi: 10.1001/jama.291.10.1238
13. BRFSS, Texas and San Antonio/Bexar County (2009). Center for Health Statistics (CHS), Texas Behavioral Risk Factor Surveillance System; Austin, TX: Texas Department of State Health Services, CHS in Yan, A. (2011). San Antonio Bexar County Physical Activity and Inac-



tivity Report Year 2010. Community Assessment report commissioned by the Bexar County Active Living Council.

14. YRBS (2010), San Antonio/Bexar County, San Antonio Metropolitan Health District in Yan, A. (2011). *San Antonio Bexar County Physical Activity and Inactivity Report Year 2010*. Community Assessment report commissioned by the Bexar County Active Living Council.
15. Ogden, C. and Carroll, M. (2010). Prevalence of obesity among children and adolescents: United States, Trends 1963-1965 through 2007-2008. National Center for Health Statistics Health E-Stat accessed March 4, 2012 from http://www.cdc.gov/nchs/data/hestat/obesity_child_07_08/obesity_child_07_08.htm
16. Flegal, K.M., Carroll, M.D., Ogden, C.L., and Curtin L.R. (2010). Prevalence and trends in obesity among US adults, 1999-2008. *JAMA*, 303 (3), 235-241. doi: 10.1001/jama.2009.2014
17. Ogden CL, Carroll MD, Kit BK, Flegal KM (2012). Prevalence of obesity in the United States, 2009–2010. NCHS data brief, no 82. Hyattsville, MD: National Center for Health Statistics. 2012.
18. U.S. Obesity Trends: National Obesity Trends. Accessed March 4, 2012 from <http://www.cdc.gov/obesity/data/trends.html>
19. PRNewswire (July 27, 2009). *Study Estimates Medical Cost of Obesity May Be As High as \$147 Billion Annually*. Accessed Oct. 16, 2011 from <http://news.prnewswire.com/DisplayReleaseContent.aspx?ACCT=104&STORY=/www/story/07-27-2009/0005066637&EDATE>
20. DeVol, R., & Bedroussian, A. (2007). An unhealthy America: The economic burden of chronic disease - - Charting a new course to save lives and increase productivity and economic growth. *Milken Institute*. <http://www.milkeninstitute.org/publications/publications.taf?function=detail&ID=38801018&cat=resrep>
21. Ehemann, C., Henley, J.S., Ballard-Barbash, R., Jacobs, E.J., Schymura, M.J., Noone, A., Pan, L., et al. (2012). Annual report to the nation on the status of cancer, 1975-2008, featuring cancers associated with excess weight and lack of sufficient physical activity [Electronic]. *Cancer*, DOI: 10.1002/cncr.27514 Accessed March 29, 2012 from <http://onlinelibrary.wiley.com/doi/10.1002/cncr.27514/full>



