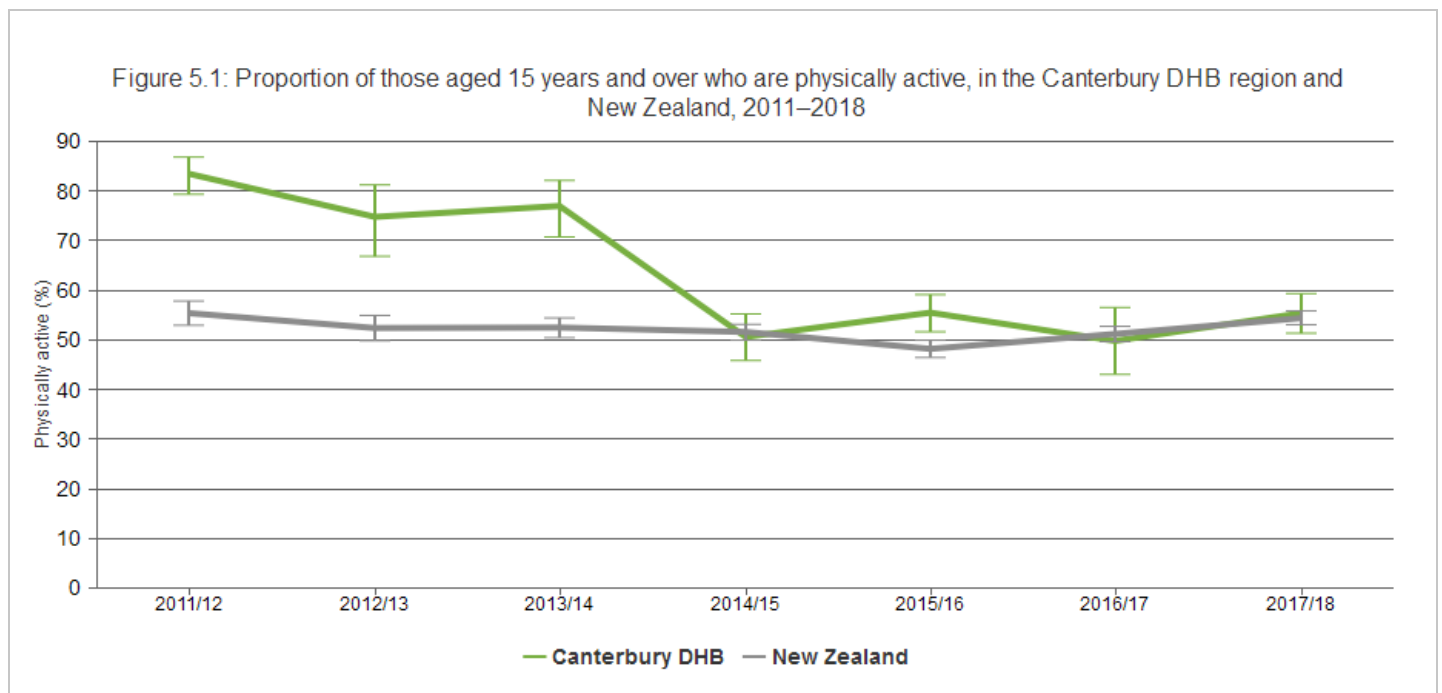


Health: Physical activity

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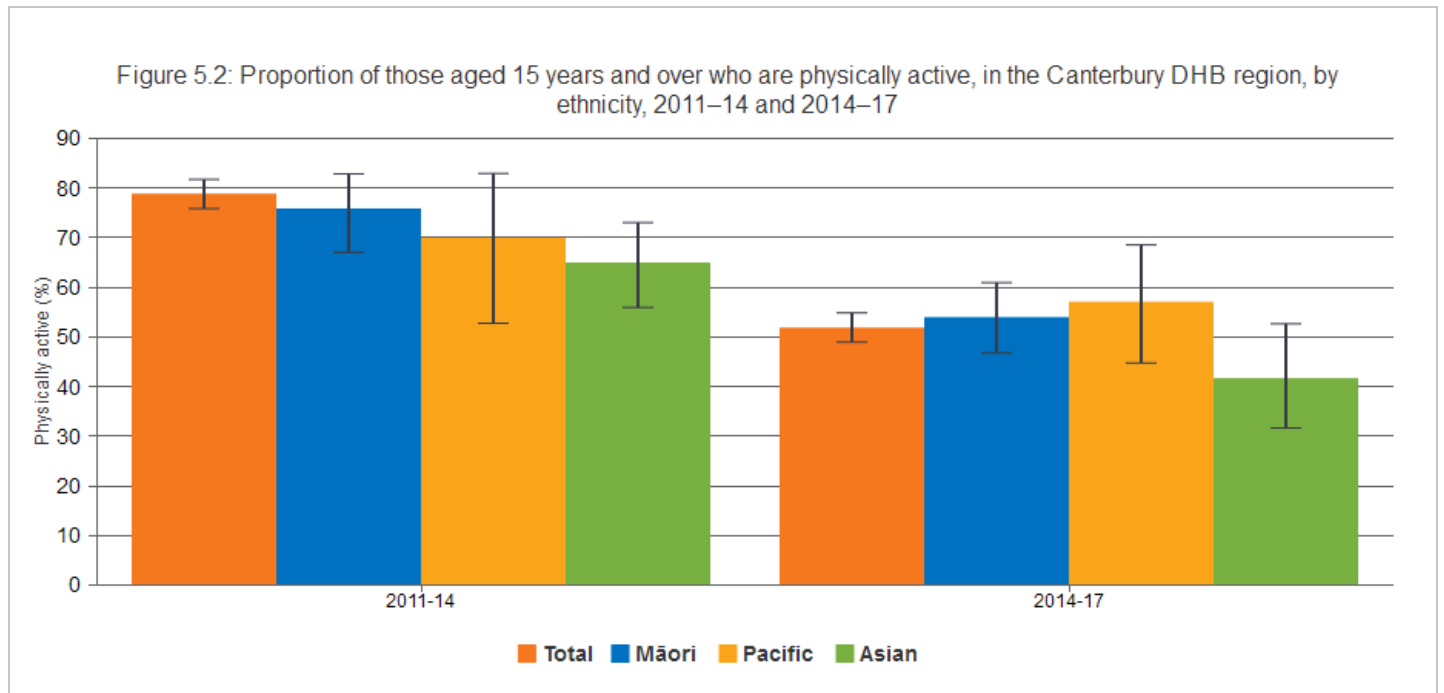
Regular physical activity is one of the most important things that people can do for their health. The benefits of physical activity include reduced risk of excessive weight gain in adults, reduced risk of cardiovascular disease, reduced risk of type 2 diabetes and metabolic syndrome, reduced risk of some cancers, maintaining/improving bone density and muscle function, preventing falls, improving mental health and mood, improved cognitive function, reduced risk of dementia, and improving/maintaining the capacity to carry out the activities of daily living [28]. Overall, physical activity can increase individuals' chances of living longer and increase the levels of individual and community wellbeing [28].

This indicator presents the proportion of those 15 years and over who report that they are physically active in the New Zealand Health Survey. Being physically active is defined as undertaking at least 30 minutes of brisk walking or other moderate-intensity physical activity (or equivalent vigorous activity) for at least 10 minutes at a time, on at least five days per week (such as 150 minutes of moderate-intensity or equivalent physical activity per week) [29,30].



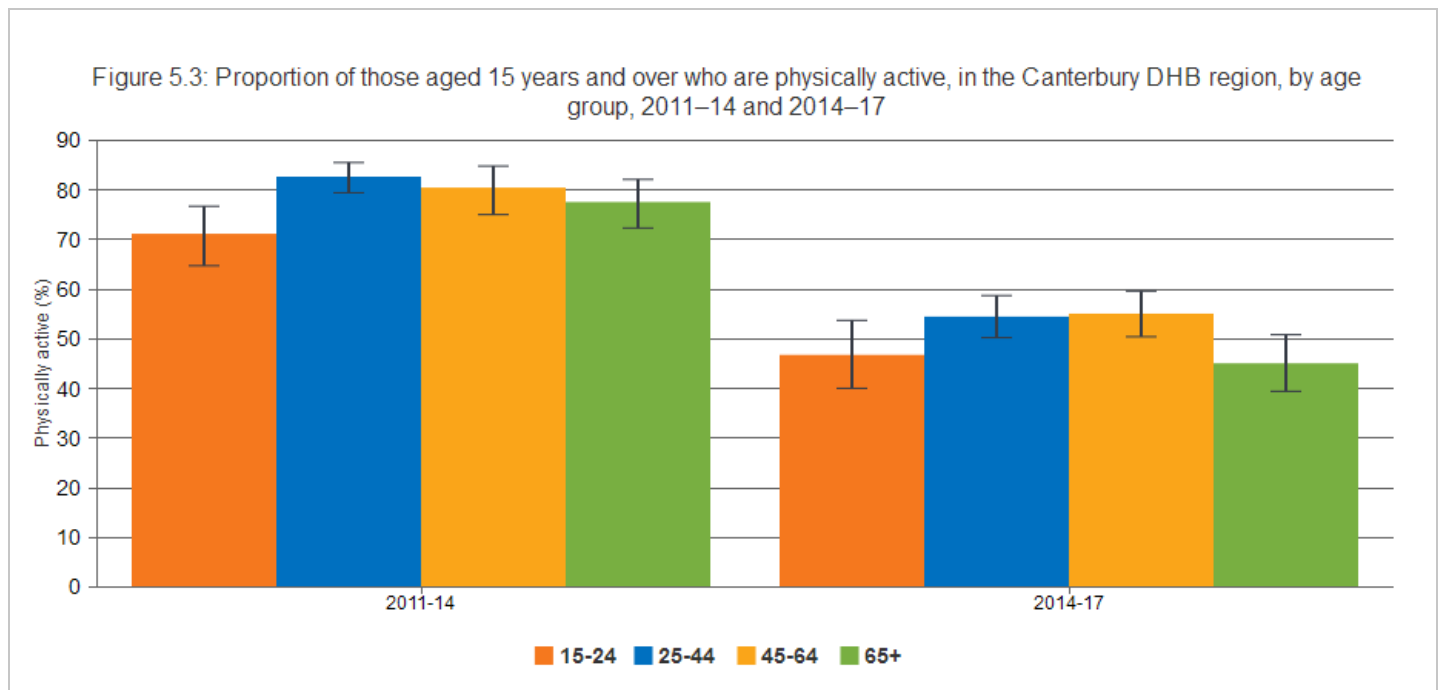
The figure shows that the proportion of respondents aged 15 years and over who indicated being physically active (at least 150 minutes of moderate-intensity or equivalent physical activity per week), was statistically similar in the Canterbury DHB region and New Zealand, over the period 2014/15 to 2017/18 (55.4% and 54.4% respectively, 2017/18). During the time period 2011/12–2014/15, the New Zealand Health Survey recorded notably higher levels of physical activity for respondents from the Canterbury DHB region, compared with respondents from across all of New Zealand. The reason for this picture is unclear, and the possibility of systematic error should be considered (for example, sampling error or response bias).

Breakdown by ethnicity



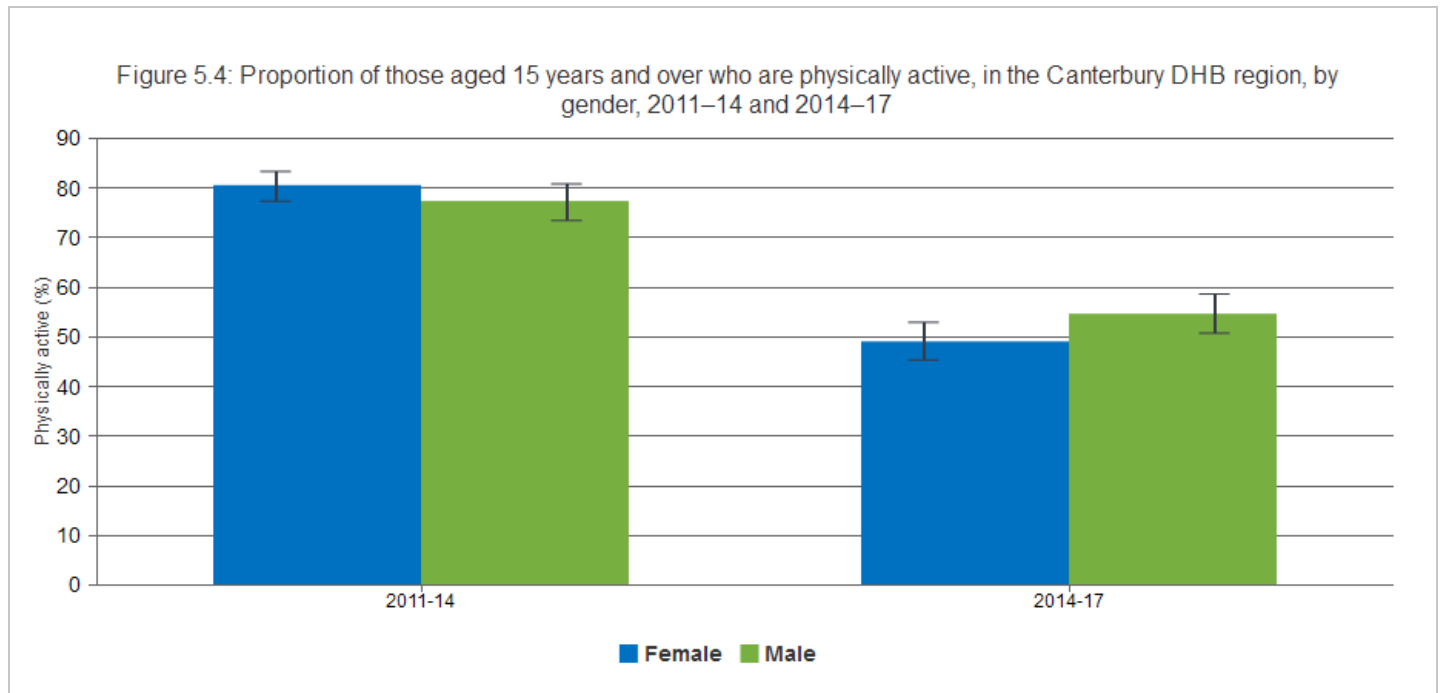
The figure shows the proportion of Māori, Pacific and Asian respondents, and all respondents, aged 15 years and over in the Canterbury DHB region, who indicated being physically active (at least 150 minutes of moderate-intensity or equivalent physical activity per week) for the periods 2011–14 and 2014–17. There were no statistically significant differences in the proportion of respondents who indicated being physically active across the different ethnic groups for either time period (51.9% for all respondents, 54.0% for Maori, 57.1% for Pacific, and 41.7% for Asian, 2014–17).

Breakdown by age



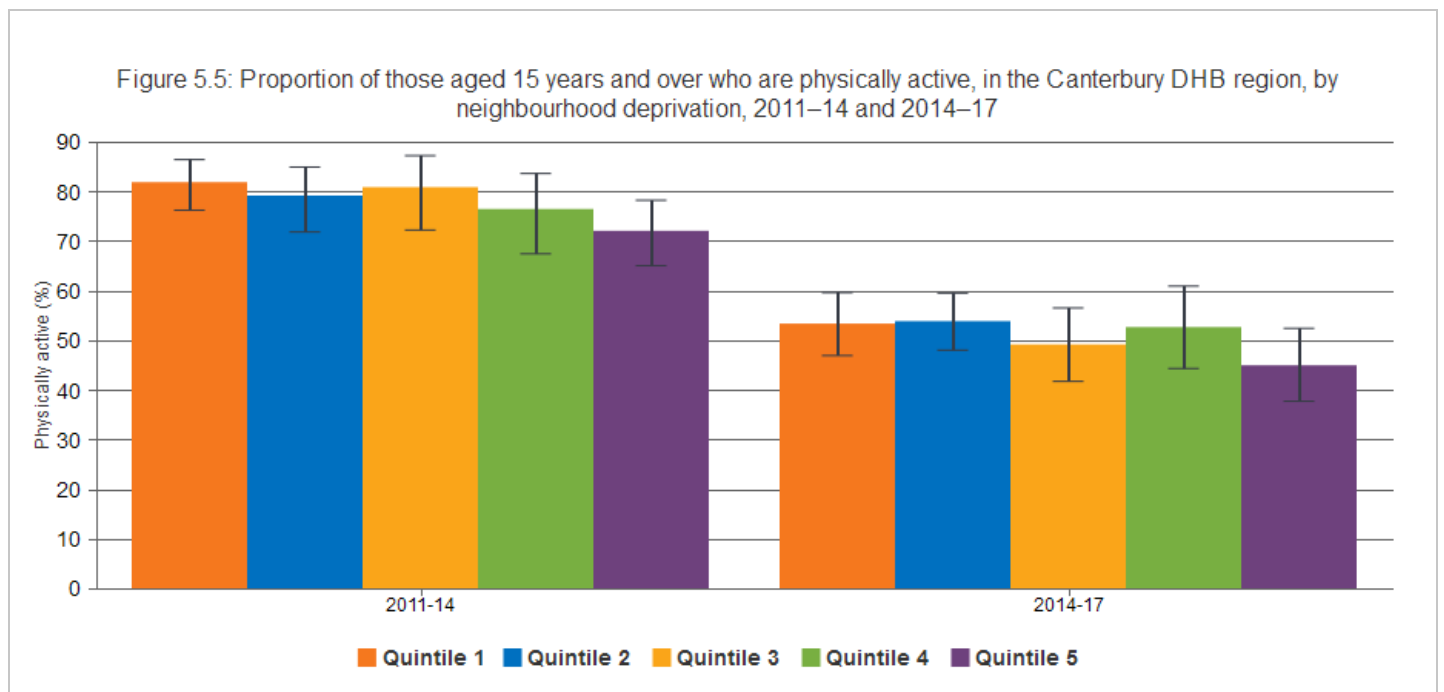
The figure shows a pattern of higher proportions of respondents being physically active (at least 150 minutes of moderate-intensity or equivalent physical activity per week) for the middle two age groups (25–44 years, 54.5% and 45–64 years, 55.1%, 2014–17) compared with the youngest (15–24 years, 46.8%, 2014–17) and the oldest age group (65+ years, 45.1%, 2014–17). However, the differences are not statistically significant (with the exception of 15–24 years vs. 25–44 years, in 2011–14).

Breakdown by gender



The figure shows that similar proportions of female and male respondents aged 15 years and over in the Canterbury DHB region indicated being physically active (at least 150 minutes of moderate-intensity or equivalent physical activity per week), for the periods 2011–14 and 2014–17. For the 2014–17 period, the proportion of females who were physically active (49.1%) was less than that for males (54.7%), however, the difference is not statistically significant.

Breakdown by deprivation



The figure shows the proportion of respondents aged 15 years and over in the Canterbury DHB region, who indicated being physically active (at least 150 minutes of moderate-intensity or equivalent physical activity per week) for the periods 2011–14 and 2014–17, by level of neighbourhood deprivation. The differences in the proportions of respondents who reported being physically active, from neighbourhoods that have the least deprived NZDep13 scores compared with the most deprived NZDep13 scores, are not statistically significant (for 2014–17, Quintile 1, 53.5%; Quintile 2, 54%; Quintile 3, 49.3%; Quintile 4, 52.8%; and Quintile 5, 45.1%).

Data Sources

Source: Ministry of Health.

Survey/data set: New Zealand Health Survey to 2018. Access publicly available data from the Ministry of Health website https://minhealthnz.shinyapps.io/nz-health-survey-2017-18-annual-data-explorer/_w_0811ceee/_w_77576899/#!/home

Source data frequency: Survey conducted continuously with data reported annually. Regional results (pooled data) released every 3 years.

Metadata for this indicator is available at <https://www.canterburywellbeing.org.nz/our-wellbeing/index-data>

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