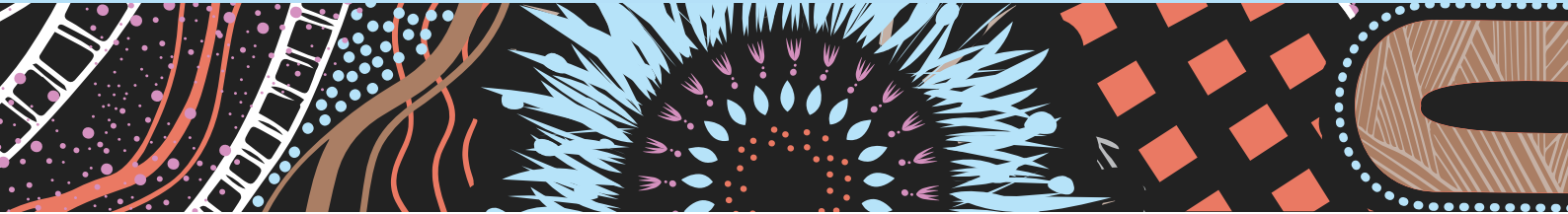




# Physical activity and the social and emotional wellbeing of First Nations people

## Summary paper



This paper is a summary of the *Physical activity and the social and emotional wellbeing of First Nations people* publication by Rona Macniven, Xhana Tishler, Grace McKeon, Jonathan Bullen, Brett Biles. This publication was commissioned by and published on the Australian Institute of Health and Welfare Indigenous Mental Health and Suicide Prevention Clearinghouse. It can be accessed online at [www.indigenouasmhspc.gov.au](http://www.indigenouasmhspc.gov.au).

**Some people may find the content of this report confronting or distressing.** If you are affected in this way, please contact **13YARN (13 92 76)**, **Lifeline (13 11 14)** or **Beyond Blue (1300 22 4636)**.

## Key findings

- Social and emotional wellbeing (SEWB) for First Nations people is a holistic concept that incorporates the influence on health of connection to land, culture, spirituality, family and community.
- World Health Organization guidelines advise that any form of physical activity is more beneficial than none, and that enhanced physical activity levels improve health outcomes.
- Physical activity is embedded in First Nations traditional practices, customary activities and connection with Country, and still holds cultural relevance today.
- Physical activity levels among First Nations children are higher than those of non-Indigenous children and First Nations adults. However, First Nations adults are less likely than non-Indigenous Australians to participate in regular physical activity.
- Engaging in physical activity as part of a group – especially with family and friends – is an important incentive for First Nations people to participate.
- Physical activity programs are more effective when they are community-led, culturally sensitive and align with First Nations values.
- Physical activity programs can improve SEWB for First Nations people by improving self-confidence, self-esteem, wellbeing and pride, and reducing stress. However, there is limited evidence from studies with First Nations people about the connections between physical activity and SEWB.
- Of the many existing physical activity programs, only a small number have been evaluated, and so many program outcomes are unknown.

## What we know

Aboriginal and Torres Strait Islander (First Nations) adults experience high or very high levels of psychological distress, with 24% having been diagnosed with a mental health or behavioural condition (AIHW 2022a). These figures reflect the lasting consequences of historical injustices, racial discrimination and cultural fragmentation, which have intergenerational effects, resulting in social inequalities and a deterioration in the overall wellbeing of First Nations people (Darwin et al. 2023).

Physical activity is critical for good mental health and wellbeing, and for preventing and reducing symptoms of anxiety and depression as outlined by the World Health Organization (Bull et al. 2020). Evidence from studies worldwide, predominantly with non-Indigenous populations, has found that physical activity protects against poor mental health and chronic diseases such as cardiovascular disease, diabetes and obesity (Bull et al. 2020).

Physical activity (including hunting, gathering, customary activities and connecting with Country) has been a feature of First Nations people's traditional lifestyles for tens of thousands of years and still holds cultural relevance today (Gray et al. 2013). Being on Country also has benefits for the physical, social, emotional and cultural wellbeing of First Nations people, including a healthier diet; more frequent exercise; greater transmission of culture; increased family time; and enhanced spiritual connectedness (David et al. 2018).

The Australian Bureau of Statistics has regularly collected and published data on physical activity levels (although the most recent data for First Nations children were collected in 2012–2013). Notably, physical activity levels among First Nations children are higher than those of non-Indigenous children and First Nations adults (ABS 2014). Only 12% of First Nations adults in non-remote areas undertake enough physical activity for health benefits (ABS 2019) and First Nations adults are less likely to participate in regular physical activity than non-Indigenous adults (ABS 2014).

This paper summarises existing evidence on the relationship between physical activity and First Nations SEWB. It describes the policy context and actions, as well as program approaches implemented with First Nations adults and children in Australia. It comprises a scoping review of academic research and grey literature, including government reports and policy documents.

## What is social and emotional wellbeing?

Social and emotional wellbeing is a complex concept that considers the influence of connection to land, culture, spirituality, family and community on health for First Nations people (Garvey et al. 2021). The National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Wellbeing 2017–2023 outlines 7 domains of SEWB – connection to body, mind and emotions, family and kinship, community, culture, Country, and spirituality and ancestors (Gee et al. 2014).

The framework acknowledges the importance of prioritising First Nations SEWB (Commonwealth of Australia 2017). Implementation involves joint efforts between government agencies, First Nations communities, health-care services and researchers.

'Mental health' is how people think, feel, cope and participate in everyday life (WHO 2013). The terms 'mental health' and 'mental illness' are generally seen as medical terms, focusing on problems from a biomedical perspective and not from a holistic view of health for First Nations people (Gee et al. 2014). Most First Nations people prefer the term 'SEWB' because it aligns with the holistic view of health (Commonwealth of Australia 2017), and because mental health and mental illness are only part of a person's SEWB (Gee et al. 2014).

To date, SEWB has been measured in different ways, including the use of constructs like 'self-esteem', 'resilience' and 'psychological distress'. Comprehensive, culturally appropriate measures need to be developed to understand First Nations SEWB at a population health, program evaluation, and clinical level (Newton et al. 2015).

## **Factors that affect SEWB**

### **Social determinants of health**

Social determinants of health are the social and environmental conditions in which people are born, grow, live, work, and age, and include early child development; education and skills development; employment and working conditions; minimum income for healthy living; sustainable communities; and a social-determinants approach to prevention (Marmot 2011). The key determinants influencing First Nations SEWB extend beyond this to include cultural determinants of health (Verbunt et al. 2021). When adopting a holistic approach to addressing SEWB outcomes, it is important to consider all possible determinants together.

### **Sociocultural factors**

It is imperative to consider the sociocultural factors that affect SEWB. Across all aspects of life, First Nations people have been subject to continuous historical injustices, involving high levels of racism, social inequalities, cultural fragmentation and discrimination. The intergenerational trauma resulting from the Stolen Generations has had detrimental effects on wellbeing (Darwin et al. 2023).

Racism and discrimination experienced by First Nations people is associated with aspects of poor physical and mental health that may affect SEWB – including anxiety, depression, increased body mass index, smoking, psychological distress, and poor sleeping patterns (Kairuz et al. 2021).

### **Socioeconomic and education factors**

First Nations people encounter significant socioeconomic disadvantage across a variety of measures (AIHW 2020), including employment and education. For example, between 2007–2008 and 2018–2019, the overall employment rates of First Nations people fell from 54% to 49%, while the rate for non-Indigenous Australians remained around 76% over the same period (AIHW 2021).

First Nations people may also have low levels of educational attainment and literacy. While the attainment of a Year 12 or equivalent qualification between 2008 and 2018–19 rose from 45% to 66% for First Nations people aged 20–24, there is still a distinctive gap compared with non-Indigenous people (AIHW 2022b). Low education levels may limit a person's employment opportunities and negatively affect their overall wellbeing.

## **What is physical activity?**

'Physical activity' is any form of bodily movement that involves the use of skeletal muscles, requiring energy expenditure (Bull et al. 2020). This includes exercise that is planned or structured, and sport. Incidental physical activity is also accrued through activities of daily living. For First Nations people, cultural activities including hunting, gathering, customary activities and connecting with Country may be considered incidental physical activity.

The World Health Organization recommends that all adults participate in 150 to 300 minutes of moderate-intensity physical activity a week (or 75 to 150 minutes of vigorous-intensity activity) (Bull et al. 2020). It suggests 60 minutes of moderate-vigorous aerobic physical activity a day for children and adolescents. Regular muscle-strengthening activity is suggested for all age groups (Bull et al. 2020). The guidelines suggest that any form of physical activity is more beneficial than none, and that enhanced physical activity levels elevate health outcomes. These international guidelines are consistent with the physical activity and exercise guidelines for all Australians (Department of Health 2019).

The Australian Sports Commission (ASC) has a First Nations-specific Clearinghouse for Sport that shares information on Australian and international initiatives to support and encourage First Nations people's participation and leadership in all aspects of sport. The ASC AusPlay survey identified that, between 2018 and 2022, 36% of First Nations adults aged 18 and over participated in a sport-related activity at least once a week (44% of First Nations men and 28% of First Nations women) (ASC 2023).

Barriers to participation include insufficient transportation; time inefficiency; high program costs; and conflicts with family and/or community commitments (Allen et al. 2021). Children in remote areas often face more barriers regarding access to facilities, activities, transport and weather patterns (May et al 2020).

Systematic reviews have summarised the positive effects of physical activity on physical health outcomes, including a reduction in weight, body mass index and waist circumference, and improved biomarkers such as insulin, cholesterol, glucose and triglycerides and reduced blood pressure (Pressick et al. 2016; Sushames et al. 2016). There is also evidence that physical activity, and smoking and alcohol-related health behaviours, may group together among First Nations adults (Noble et al. 2014).

## **The relationship between First Nations physical activity and SEWB**

In population-level studies specific to First Nations people, there is limited evidence about the relationship between physical activity and SEWB, although there is some evidence of relationships between physical activity and aspects of mental health. There is evidence of an association between low physical activity levels and incidence of depression in Torres Strait Islander adults (Taylor et al. 2017).

Several different reviews have summarised the evidence of SEWB outcomes arising from physical activity and sport program participation. One found that physical activity programs improved SEWB, specifically self-confidence, self-esteem, wellbeing and pride, and reduced stress (Macniven et al. 2019). A review of the impact of physical activity programs on First Nations young people's mental health and SEWB found evidence of increased connection to culture, self-esteem, and confidence (English et al. 2021).

## **Relevant policies, programs and initiatives**

There are several national and state policy documents that are relevant to First Nations people, physical activity and SEWB.

- **National Aboriginal and Torres Strait Islander Health Plan 2021–2031** (Department of Health and Aged Care 2021a) is a collaborative effort with First Nations health leaders to enhance the wellbeing of communities. It takes a holistic approach, addressing physical, emotional and cultural health through partnerships and community-controlled primary care. Increasing physical activity is an identified strategy.
- **National Agreement on Closing the Gap** (Commonwealth of Australia 2020) aims to address inequality and improve life outcomes for First Nations people. Multiple parties are involved, including the Australian Government, state governments, organisations and communities. The agreement focuses on 17 targets (including SEWB and suicide prevention). The goal is to enhance SEWB through tailored initiatives and supports.
- **The National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Wellbeing 2017–2023** (Commonwealth of Australia 2017) aims to change and improve the methods for delivering mental health programs and services for First Nations adults. Key recommendations recognise the importance of holistic approaches; cross-sectoral and intergovernmental action; valuing First Nations knowledge, cultural beliefs and practices; and collaborative working relationships.
- **National Preventive Health Strategy 2021–2030** (Department of Health and Aged Care 2021b) is a long-term approach for enhancing the health and wellbeing of all Australians. Increasing physical activity is a key area and First Nations people are a priority population. Recommendations include that mental health policy addresses SEWB for First Nations people, incorporating concepts of land-connection, spirituality and family.

New South Wales, Victoria and Western Australia have policies relevant to SEWB of First Nations people. No policies were identified in other states and territories:

- The NSW Healthy Eating and Active Living Strategy 2022–2032 (NSW Health 2022) is a 10-year framework to reduce obesity. First Nations people are listed as a priority population. Recommendations include strengthening partnerships with community-controlled organisations to enhance lifestyle programs and service delivery.
- The Victorian Public Health and Wellbeing Plan 2019–2023 (Department of Health and Human Services 2019) focuses on mental health and wellbeing, First Nations health, sexual/reproductive health, active living and promoting healthy lifestyles.
- The WA Aboriginal Health and Wellbeing Framework 2015–2030 (Government of Western Australia Department of Health 2015) is a 10-year framework established in collaboration with First Nations communities. Priority areas focus on risk factors (physical activity, suicide prevention, mental health and SEWB), managing illness better, building community capacity, better health systems, First Nations workforce development, data/ evidence/ research, and addressing social determinants.

## Programs and initiatives

Nine evaluated programs and initiatives that aim to improve SEWB among First Nations people in Australia were examined (Table 1).

**Table 1: Program descriptions and evaluation outcomes**

Name and brief description	Location/First Nations specific	Evaluation outcomes
<b>Deadly Choices</b> The program empowers First Nations people to make healthy choices for themselves and their families (Malseed et al. 2014). Includes a school health-education focus.	Queensland First Nations specific – Yes	One study examined Deadly Choices within a school-based health promotion and education program. Intervention group participants had improved self-efficacy and were significantly more confident to prevent chronic disease than control group participants (Malseed et al. 2014).
<b>Dead or Deadly Program</b> A holistic healthy lifestyle program where women participate in personalised health and wellbeing programs, group exercise, health education and camps. It aims to improve health, wellbeing and cultural connection by improving health literacy and lifestyle choices (Roberts et al. 2022).	New South Wales First Nations specific – Yes	Participants reported that the program delivered SEWB support and improvements, strengthened community, built support networks, and increased resilience and self-esteem (Fredericks et al. 2016).
<b>Traditional Indigenous Games (TIG) Program</b> The program aims to provide a sense of belonging within a school environment for First Nations children, through teaching TIG (Kiran and Knights 2010). Teachers receive specific training to deliver one hour of game participation for 12 weeks.	Queensland First Nations specific – Yes	No statistically significant improvement in physical activity levels or cultural connectedness were shown (Kiran and Knights 2010).

**Table 1 (continued): Program descriptions and evaluation outcomes**

Name and brief description	Location/First Nations specific	Evaluation outcomes
<p><b>Community surfing program</b></p> <p>First Nations surfing programs emphasise development of surf skills, particularly water safety (Rynne and Rossi 2012). Community surfing programs may vary in terms of history, structure, format and delivery. Some include weekend surfing camps a few times per year, while others involve weekly group-based surf lessons throughout the school term.</p>	<p>New South Wales, Victoria, Queensland, South Australia</p> <p>First Nations specific – Yes</p>	<p>Outcomes included reconnection with Country; and a fostering of connections between participants and program providers, and with other First Nations children (Rynne and Rossi 2012).</p> <p>Participants developed psychosocial skills related to confidence, self-esteem, empathy, maturity and independence. School attendance increased.</p>
<p><b>Indigenous Marathon Program (IMP)</b></p> <p>The program supports young First Nations adults to undergo marathon training (Macniven et al 2018a) and take vocational courses in health, fitness and running coaching. It encourages them to establish local community First Nations running groups and fun runs, using running and local role models to promote healthy lifestyles.</p>	<p>National</p> <p>First Nations specific – No (non-Indigenous people may participate in community groups)</p>	<p>Participation resulted in increased social support. There was an enhanced community readiness to adopt healthy lifestyles and a gradual reduction in ‘shame’ when participating in physical activity (Macniven et al. 2018b).</p>
<p><b>Fitzroy Stars Football Club</b></p> <p>A community sports club that creates opportunities for First Nations people through sport and provides a safe place for community participation.</p>	<p>Victoria</p> <p>First Nations specific – Yes</p>	<p>Findings showed how social connections and strong community networks in sports settings play a crucial role in maintaining and strengthening cultural identity (Thorpe et al. 2014). Participation in the team was driven not only by individual health considerations but also by the importance of social and community connections.</p>
<p><b>Sport-based Youth Mentoring Program</b></p> <p>The program, run by an Aboriginal community controlled organisation, has been delivered in a small number of remote communities for one week, 3 times each year, since 1995 (Peralta and Cinelli 2016). External mentors provide inspiration, encouragement and support for school students through sport and recreation activities and nutrition education.</p>	<p>Northern Territory</p> <p>First Nations specific – Yes</p>	<p>The program builds relationships and broadens skills and exposure; supports school activities; and increases students’ self-esteem and aspirations (Peralta et al. 2018). The program also had a positive influence on youth educational and social development (Peralta and Cinelli 2016).</p>
<p><b>‘Strong Men’: Aboriginal community development of a cardiovascular exercise and health education program</b></p> <p>A 10-week tailored cardiovascular exercise and education program (Biles 2020).</p>	<p>New South Wales</p> <p>First Nations specific – Yes</p>	<p>Health education sessions provided the time and space for the men to talk about their health and wellbeing. These conversations increased their levels of self-confidence, which was integral to improving self-efficacy (Biles 2020).</p>
<p><b>Sport and Active Recreation Program in an Indigenous Men’s Shed</b></p> <p>A combination of physical activity (swimming, water aerobics, gym-based activities, darts, and pool competitions) and a healthy eating program.</p>	<p>Unknown</p> <p>First Nations specific – No</p>	<p>The program enhanced self-esteem and improved eating behaviours, physical activity levels, social connectedness and connection with family and culture (Cavanagh et al. 2015).</p>

More information on the policies and frameworks is available in Appendix B in the full *Physical activity and the social and emotional wellbeing of First Nations people* publication.

## What works

First Nations community engagement, direction and ownership in all aspects of the conception, development, implementation and evaluation of physical activity programs is essential to effective policy and practice. Support from family and friends, and opportunities to connect with community or culture, also facilitate participation.

The design of programs and policies needs to consider social determinants of health. This includes ensuring affordability; culturally sensitive support services; and equipping participants with skills to achieve behaviour change.

The 9 evaluated programs and initiatives explored in this paper all achieved SEWB outcomes. These best-practice approaches focused on the social and cultural determinants of health, and embraced a proactive approach that encompassed sociocultural, socioeconomic, education and environmental factors.

Most of these programs also used First Nations ways of knowing, being and doing (Martin and Mirraboopa 2003). This allows First Nations people to become the managers of their solutions; to determine their ways forward (Sherwood 2010).

The WA Aboriginal Health and Wellbeing Framework 2015–2030 represents current best practice for First Nations physical activity and SEWB policy. Its key recommendations identify a stronger need for cost-effective, community-based approaches to service delivery and enhanced primary health care. To improve culturally appropriate health care, services at the local level should acknowledge the protective force of culture and its positive contribution to wellbeing. The principles identified in this framework could inform policy in other Australian jurisdictions.

The national and state policies that are relevant to First Nations physical activity and SEWB all acknowledge the importance of:

- Improving how programs and services are provided for First Nations adults to address social determinants of health influencing SEWB. Effective approaches must comprise holistic approaches; cross-sectoral and intergovernmental action; the valuing of First Nations knowledge, cultural beliefs and practices; and collaborative working relationships.
- The key role sport and physical activity can play in relation to promoting positive SEWB among young people.
- The more holistic way that health for First Nations people is recognised as a state of physical, mental and social wellbeing. Policy addressing SEWB for First Nations people needs to incorporate concepts of land-connection, spirituality and family.

## Conclusions

Social and emotional wellbeing for First Nations people is a complex concept, which takes into consideration the influence on health of connection to land, culture, spirituality, family and community. Physical activity has always been relevant to First Nations culture, and connecting with Country through physical activity promotes togetherness, which in turn supports SEWB. First Nations physical activity programs can enhance confidence and self-esteem, improve community cohesiveness and cultural identity and deepen connection to Country.

Understanding the cultural, historical, and social factors that influence physical activity and SEWB among First Nations people is essential for developing effective programs and policies. Culturally appropriate approaches that address known barriers and promote the known facilitators to participation are crucial for improving physical activity levels and enhancing overall SEWB outcomes.

First Nations people readily engage in traditional practices when On-Country. Identifying the benefit of these self-initiated activities will highlight potential community-driven practices – already present in many remote areas – that could be harnessed by more structured physical activity programs that aim to improve SEWB.

While there are relevant policy documents at national and state levels, the coordinated implementation of these policies and programs, and their impact on physical activity levels and SEWB outcomes, is not well understood. This underscores the need for collaborative working relationships and cross-sectoral and inter-governmental action.

We are more likely to achieve positive change by recognising effective approaches, and especially by valuing First Nations knowledge, cultural beliefs and practices.

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