

Dance – tackling the epidemic of physical inactivity

Jan Burkhardt, dance and health specialist, makes the case for dance as a remedy for inactivity across all communities and ages based on research in England

Dance has a significant part to play in the public health agenda, which sees tackling physical inactivity as a major priority. Public and voluntary sector organisations across the country are working to address an epidemic of physical inactivity, which research shows contributes to more than 20 health problems, including type 2 diabetes, heart disease, cancer and depression. Dance can engage young and old alike and gets people active in a fun, social way and so it can be a key player in this agenda. Making links and raising the profile of dance is crucial as many public health organisations tend to think of physical activity as sports or walking projects and will not have considered dance.

Physical inactivity is a public health issue, so it is worth clarifying what we mean by this term. Public health focuses on the health of the population, particularly preventing ill health and encouraging wellbeing. It deals with population-level, rather than individual-level, health issues and with preventative, rather than curative, aspects of health.

Physical inactivity contributes to one in ten deaths in the UK, which is equal to smoking and costs the UK economy £8.7 billion a year in health costs and lost productivity. It is the fourth largest cause of disease and disability in the UK(1). The UK's population has significantly lower physical activity levels than most other developed countries. The strategic framework that outlines the national plan in England for action around

physical activity is Everybody Active Every Day.(1)

In the UK, women and girls are more inactive than their male counterparts at all ages. Only 38% of girls achieved the recommended hour of physical activity each day compared with 63% for boys.(2) Of major concern is that 19% of men and 25% of women do less than 30 minutes a week of physical activity and they are particularly at risk.(1)

As we know, dance is popular and effective at engaging women and girls in physical activity. People Dancing's Mapping Community Dance research revealed that 4.7 million people participated in community dance in England, and most of these are women and girls. The DCMS Taking Part Survey for England 2013/14 showed that 45.7% of 5-10 year old girls took part in dance outside of school (compared with 15.7% of boys). Only 11.7% of girls played sport outside of school, compared with 31.9% of boys.

Public health is particularly focused on reducing inequalities in health as, despite a national health service that is free to all, the gap between the health of the richest and poorest communities is unacceptably large. Dance can be effective at engaging disadvantaged communities. Over the last five years the DAZL dance programme, commissioned by Leeds City Council Public Health, has engaged over 8,500 children from the most deprived areas in regular dance activity. Of these, 78% were girls and more than half were otherwise

'inactive' beyond the school day. Subsidised regular dance sessions can provide deprived communities with regular physical activity. Community dance performances bring people together to share their achievements and can provide a positive and celebrational focus for disadvantaged communities. Dance performances and workshops can also be used to communicate health education messages in a lively, interactive way to communities where literacy levels are low or language is a barrier.

There is evidence to show that there are significant health benefits to dance at all ages. Key health benefits are:

- Early years: dance improves cognitive and physical development, and enhances social skills
- Children and young people: dance increases cardiovascular fitness, can prevent or reduce obesity and improve cognitive function and self-esteem
- Adults: dance can reduce the risk of type 2 diabetes and coronary heart disease, and help maintain a healthy weight. It can also reduce symptoms of depression and anxiety
- Older people: dance is a social activity that helps maintain cognitive function, reduces cardiovascular risk and risk of falls.

Children and older people are a particular focus for public health interventions around physical activity. Children, because our lifetime habits tend to be established in childhood.

The PE and Schools Sports Premium is funded primarily by the Department of Health and provides each primary school with approximately £7,000-£9,000 for improving the quality of PE teaching and providing physical activity after and beyond school. Youth Dance England has some concerns that dance is not well represented in this and we as a sector need to encourage more schools to programme dance and make the case for dance engaging 'inactive' girls.

Older people are another major focus for health because we have an ageing population with a rise in long-term health conditions such as type 2 diabetes, heart disease and mobility problems, particularly in deprived communities. Figure 1 (below) shows life expectancy (how long we live on average) and disability-free life expectancy (how long we live without a health problem that limits our ability to function fully). This is mapped against the level of deprivation in neighbourhoods.

The graph shows that in our most deprived communities people will, on average, live with a disability from their early 50s and die in their early

70s. In our most affluent communities people will, on average, live with a disability from their late 60s and die in their early 80s. Thus public health's focus is primarily on the most deprived communities but also on ensuring that people live well and disability-free for as long as possible. Maintaining physical activity is absolutely key to this.

Dance can be a gentle, non-competitive form of exercise that also reduces social isolation, so is suitable for many older people. There is an exciting growth of opportunities for dance programmes with older people to reduce falls, prevent dementia and simply keep people active and mobile. Public Health is working closely with Adult Social Care on this agenda within local authorities. Clinical Commissioning Groups who commission the wider health services such as primary care, for example, are also investing in preventative health programmes that often include physical activity. Work underway around the country to link up the dance and health sectors has shown that commissioners respond positively to the idea of dance programmes and

have often simply not thought about dance and, once prompted, are keen to engage.

So there is a lot we can do to build stronger links with the health and wellbeing sector and develop new opportunities for dance programmes. Whatever level you are working at, whether it be as a strategic manager or frontline practitioner, there are links you can make around the physical activity agenda. Dance organisations can find out who to contact in Public Health and Adult Social Care with remits on obesity or physical activity and build relationships, share information and invite them to see dance work. Sports and Leisure services may be another good link to health as they may already have developed these relationships.

On a more local or frontline level there is a wide range of partners working on the physical activity agenda; schools, children's centres, community and voluntary sector organisations, healthy living projects, day centres and many more. We can all build relationships and make the case for dance as an effective tool for getting inactive people active and improving wellbeing. Engaging in the health agenda is not necessarily about changing what you do; it's about reframing dance, which, as a physical activity, clearly meets health outcomes, and showing that it can reach inactive populations. Developing these opportunities for dance will not only be good for the sector in funding new dance programmes but good for the health of the nation too.

Info

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References

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- Griffiths LJ, Cortina-Borja M, Sera F, et al. BMJ Open (2013) How active are our children? Findings from the Millennium Cohort Study.

Commissioning Dance for Health and Wellbeing: Guidance and Resources for commissioners: PHE National Obesity Observatory
www.noo.org.uk/Resources/Nice_Sign

Figure 1 Life expectancy and disability-free life expectancy (DFLE) at birth, persons by neighbourhood income level, England, 1999–2003

