

“It Takes a Village” to Promote Physical Activity: The Potential for Public Park and Recreation Departments

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ABSTRACT: Physical activity is often considered the responsibility of individuals. Recently, however, interest has developed in social ecological approaches that focus on a full spectrum of behavioral influences such as social and physical environments. A public park and recreation department has influence over some of the environmental and policy determinants of physical activity in a community. Therefore, the purpose of this exploratory examination of one community was to analyze the perceptions of people regarding physical activity, and to interpret the results from a social ecological perspective regarding how public parks and recreation staff might further promote active lifestyles. Data came from six focus groups conducted during April-June 1999 in a community in the Southeast United States. The six groups included a women’s walking group, teachers and school employees, YMCA members and employees, a Chamber of Commerce business group, a Community Coalition for Physical Activity group related to Healthy People 2000 objectives, and participants in senior (older adult) services. A total of 52 people who ranged in age from 22-75 years were involved in the group interviews. The participants were 46% African American and 54% European American with 70% of the participants women. Each of the focus groups was audio-taped and transcribed verbatim. A systematic method was used for coding and analyzing these qualitative data. Focus group participants expressed their perceptions about quality of life in the community and the physical activity opportunities that were available for themselves, their family, and friends. Constraints or barriers to participation were addressed. Although many of these constraints were individual in nature, they had environmental and policy implications. The potential for enhancing and promoting physical activity by public parks and recreation as well as local government, businesses, churches, schools, and health departments was described by the focus group members and was illustrated in a model that developed from these data. The results supported more efforts by the public park and recreation department, as well as a multisectoral approach, to providing physical activity opportunities in active communities. The major conclusions that emerged from these data that might be considered in other similar communities were: 1) Park and recreation departments, along with other

community groups, can have an increasing role in creating a definition of an “active” community. The greatest challenge is not only to educate people that physical activity is good for them, but also to educate them about ways that they can become physically active. 2) A range of settings, facilities, and programs for children and adults as well as education for, and information about, physical activity must be available. 3) Physical activity does not occur in a vacuum. Issues such as transportation and accessibility must be accommodated regarding what already exists as well as in determining new initiatives. 4) Safety concerns are crucial in the design and planning of supportive physical activity environments. This safety includes physical safety as well as perceived safety. 5. Partnerships will be required to promote physical activity in a community. A joint effort with a shared vision and conjoint responsibilities is required. “It takes a village” to promote physical activity in a community.

KEYWORDS: Physical activity, community development, health promotion, partnerships, health benefits, community recreation, social ecology

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Introduction

Staffs in public park and recreation departments have always been concerned with physical activity in various forms. The earliest playground programs in sandlots were an attempt to provide children with safe places for play and exercise. The evolution of recreation from the discipline of physical education is another example of the close ties that this field has had to physical movement and sport during the past century. With the recent trends indicating that 60% of Americans are not regularly active and 25% are not active at all (U.S. Department of Health and Human Services, 1996), the role that public parks and recreation has in promoting and enhancing the physical activity level of people is greater than ever before.

Physical activity and healthy living are often considered the responsibility of individuals. Recently, however, interest has developed in socio-ecological approaches that focus on a full spectrum of behavioral influences including social, environmental, legal, and physical environments. Ecology generally refers to the interrelations between organisms and their environment. An ecological approach refers to people’s transactions within their physical and sociocultural environments (Sallis, Bauman, & Pratt, 1998). Stokols (1992) noted several core assumptions of the social ecological approach to health promotion, including the multiple influences of physical (e.g., architecture, technology, geography) and social (e.g., culture, economics, politics) environments, the multidimensionality and complex nature of human environments, the need for multiple levels of analysis and diverse methodologies to study these issues, and the use of systems theory as the conceptual basis for ecological approaches. A number of health educators and physical activity researchers have concluded that behavioral

choices are influenced by a combination of intrapersonal, cultural, social, policy, physical, and environmental factors (cf. McLeroy, Bibeau, Steckler, Glanz, & Glanz, 1988; King et al., 1995; Richard, Potvin, Kishchuk, Prlic, & Green, 1996; Sallis et al., 1998; Stokols, Allen, & Bellingham, 1996).

The purpose of this exploratory examination of one community was to analyze the perceptions of people regarding physical activity and to interpret the results from a social ecological perspective regarding how public parks and recreation staff might further promote active lifestyles. Social ecology was used as the foundation to examine the perception of individual and environmental indicators for physical activity with a specific focus on the current and potential role of the public park and recreation department. In our exploratory research, we examined intrapersonal, social, physical, and policy factors. We focused on the role public park and recreation departments, as one aspect of community services, had in this multifactoral and multisectoral contribution to healthy living. The results provided information that may assist park and recreation administrators to further emphasize the role parks and recreation plays in promoting active communities, and how an ecological model of enhancing physical activity might be applied in other communities.

Background from Literature

For purposes of this study, physical activity was defined as any bodily movement produced by skeletal muscles that resulted in energy expenditure. It included, but was not limited to occupational, sports, exercise, household, or other daily and leisure activities. The interpretation of this physical activity by those involved in the study generally related to free time involvement at home and in the community. Other research has shown that the most popular leisure-time physical activities among adults are walking and gardening or yard work (U.S. Department of Health and Human Services, 1996).

The relationships of health, physical activity, and recreation are more closely acknowledged by recreation professionals than in the past because of recent initiatives such as benefits-based movement. The benefits approach focuses on how providers of recreation services determine the outcomes of activities (Allen, Stevens, & Harwell, 1996). The concept of benefit relates to a change that is viewed as advantageous or an improvement in a condition (Driver, Brown, & Peterson, 1991). For example, a benefit of participation in community sports programs for children and adults includes increased cardiovascular fitness. Increased fitness results in better health and leads to longer, more productive living and fewer premature deaths (Paffenbarger, Hyde, & Dow, 1991). The benefits of physical activity programs in a community relate to health in terms of disease prevention and improving quality of life. The interventions provided by public park and recreation departments to address how recreation can help people be healthier is an issue that has always been important in our field.

The core assumption of social ecology related to health promotion is that the benefits and healthfulness of a situation and well-being of participants are influenced by multiple facets (Stokols, 1992). Proponents of ecological approaches have criticized the explanatory models of health and health-related behaviors centered on intrapersonal determinants such as knowledge, attitudes, and skills and suggested they are of limited value for the understanding of how people live their lives. The context of people's lives must be examined to understand the barriers and motivations that exist and how the structure of a community enables or inhibits behavior. The context relates to social networks, organizations, community opportunities, and public policies. Richard et al. (1996) suggested that health problems, and we might expand that to also mean inactivity in a variety of leisure pursuits, result from social structure and conditions. The concept of health promotion, a benefit that parks and recreation staff generally associate with their programs, places an emphasis on the role of individuals, groups, and organizations as active agents in shaping health practices and policies to optimize both individual wellness and collective well being.

Therefore, although individuals recognize benefits, motivations, and constraints in their behavior, this behavior is also strongly mitigated by community opportunities and enhancements, as well as public policy. The social ecological perspective provides a framework for examining the multifaceted aspects of behavior as well as providing a model for broader approaches to addressing health issues such as inactivity in a community. Sallis et al. (1998) described how agencies might work together to address an issue such as physical activity. These authors discussed "behavior settings" as the physical and social contexts in which behavior occurs and suggested that the best approach may be multiple levels of influence on behavior. A supportive environment was conceptualized as settings, facilities, and programs. Settings might be neighborhoods, worksites, and schools. Facilities were physical places designed for physical activity; programs were structured recreation and fitness opportunities. They suggested that these supportive environments exist in relation to policies that are identified and used.

Although the social ecological approach to health promotion is critical of individual factors alone, personal motivations and constraints cannot be discounted. Individual factors relate to the intrapersonal and sometimes interpersonal aspects of motivations and constraints. Numerous constraints to involvement in recreation and physical activity have been identified. The study of constraints has several important functions including enhancing our understanding of the complexity of behavior, helping to shed new light on participation and motivation, and showing connections among different facets of leisure or physical activity (Jackson & Scott, 1999). Constraints, however, are complex. Constraints to leisure have been described as fitting into three categories: intrapersonal, interpersonal, and structural (Crawford, Jackson, & Godbey, 1991). Intrapersonal constraints refer to factors that affect preference or lack of interest. Interpersonal are intervening con-

straints associated with relationships with others. Structural constraints are intervening factors that mitigate between an interest and the ability to do an activity. Structural constraints can also relate to broader physical and social issues within a community.

The problem with some of the leisure constraints research is that researchers have focused on a micro approach and have not considered social, physical, and policy issues that might also be barriers to involvement in some activities. The McLeroy et al. (1988) social ecological model, as well as others (e.g., King et al., 1992) incorporates these micro ideas together with macro community environmental and policy determinants that must be taken into effect if health behavior change is to occur. For example, regardless of how much interest or time an individual might have, if no safe places to walk exist in his or her neighborhood, that person is not likely to be active in that way. Since it is not possible to remove all intrapersonal constraints, it may be more useful to focus on what organizations within a community can control or modify to promote involvement and make it easier for individuals to participate (Arnold & Shiness, 1998; King et al., 1995; Sallis et al., 1998).

Although some models of behavior change support individual processes, these alone do not take into account social and physical environmental influences on behavior. The results of studies to date about community-based interventions to promote physical activity, however, have been mixed (Sallis et al., 1998; Stokols, 1992; U.S. Department of Health and Human Services, 1996). The data do show that the presence of active community coalitions, widespread community involvement, and well-organized community efforts appear to be important (U.S. Department of Health and Human Services, 1996). Therefore, partnerships and coalitions within communities, for example, may be one strategy for implementing ecological perspectives.

Partnerships are a growing idea described in the park and recreation administration literature (cf. Andereck, 1997; Crompton, 1998; Vaske, Donnelly, & LaPage, 1995). Partnerships can provide a viable example as an ecological approach for expanding the range of services offered, enhancing opportunities, and building a sense of community pride (Vaske et al., 1995). These partnerships can result in collaborative goals backed up with a pooling of resources to meet those goals. They can result in more opportunities, increased credibility with the public, and opportunities for networking that can lead to other projects (Andereck, 1997). Physical activity is not the sole mandate of public parks and recreation departments, but it is important and will most likely require collaborative approaches to address social, physical, and policy factors.

Methods

For this exploratory study, focus groups were used as a way to obtain perspectives and to generate ideas by allowing respondents to express their opinions with spontaneity and candor. Six focus groups were conducted during April through June 1999. Each focus group lasted about 75 minutes.

Individuals were not randomly selected but did represent a variety of community constituencies, including individuals who were physically active, as well as inactive. For the convenience of participants, individuals involved in existing groups were recruited for data collection. The six groups included a women's walking group, teachers and school employees, YMCA members and employees, a Chamber of Commerce business group, a Community Coalition for Physical Activity group working on Healthy People 2000 objectives, and participants in senior (older adults) services. Seventy-six percent of the sample said they were physically active at least five days a week with 24% who said they were inactive. Physically active individuals were oversampled because the researchers felt they knew the most about community opportunities that enabled or constrained physical activity involvement. A total of 52 people were involved who ranged in age from 22-75 years with a mean age of 45 years. The participants were 46% African American and 54% European-American, which fairly well represented the composition of the population of the community. Income level was less than \$20,000 for 36% of the sample and over \$40,000 for 36% of the sample. Over 70% of the participants were women who represented an oversample of the community, but who also seemed to be aware of opportunities available and the needs of children.

Each of the focus groups was audiotaped. Two facilitators were involved with each group. In addition to the tape, one of the facilitators also took detailed notes. In cases where portions of the audiotape might not be understandable, notes from the facilitator were used as the data. Examples of the questions asked included the following:

What constitutes quality of life and how would you evaluate this quality in your community?

What do you or other people do for physical activity?

What prevents you or other people from being more physically active?

What are or should the following groups be doing in your community to promote physical activity: local government, health providers, state government, parks and recreation departments, businesses, churches, schools, and others?

All tapes were transcribed verbatim. The transcripts were examined using constant comparison as a systematic method for recording, coding, and analyzing qualitative data (Glaser & Strauss, 1967). The goal of this technique was to maximize credibility through comparison of groups and data. Three stages comprised the data management and analysis process. First, "pieces" of data were organized by identifying, reducing, coding, and displaying categories of data. The second stage included analyzing the categories and their properties by comparing them to one another and checking them back to the emerging themes. In the third stage, categories were delimited and refined, if necessary, to further focus on ecological perspectives and to see how other literature and theoretical models fit. Selected quotations and examples were used to illustrate the emerging themes. As researchers, we were not necessarily concerned with singular

conclusions, but with perspectives to help understand the physical activity perceptions of these residents so we could understand the implications for physical activity promotion in park and recreation departments. The emphasis of this project was to gain an understanding of the attitudes and experiences of these community residents within the context of their social and physical environments; therefore, we did not attempt to analyze the data relative to any personal characteristics of the respondents. Where specific quotes were used, however, we identified the nature of the focus group participants.

Description of the Research Community

The community examined in this study was located in the southeastern part of the United States. It had a population of approximately 45,000 people within the city limits and over 100,000 people in the county. About 60% of the population was white with 38% black and 2% identified as "other." The economic base of the community included small manufacturing and the community has led the state in the past three years in per capita job growth. The vision for the community was as a family-oriented place that excels in the world market. The mission statement found in promotional materials about the community was to provide an ideal business environment to promote growth and total community development.

The participants identified a number of opportunities for physical activity within the community. Several parks had trails and tennis courts. The hospital had a wellness program available. A public park and recreation program provided a recreation center and activities for all, but especially for children. Some of the senior centers had exercise equipment in them. Mall walking was available and perceived as important by seniors, especially because it was carpeted, had music, and lots of people were around. The city had newer subdivisions where people walked. A YMCA offered a number of programs for all ages and was available year round. The perception was that the "Y" catered more to middle class and professionals, even though opportunities were open to everyone. Private gyms and fitness clubs were available as were three golf courses. A nearby state park had thousands of acres including trails for walking and riding. People went dancing in bars in town. A kayaking and canoeing business was operated in the community, as were a roller skating rink and a bowling alley. Two small colleges and a military base also provided exercise and recreation opportunities for their constituents. The community had a plethora of churches that had limited recreation facilities. Overall, this community had open spaces and recreation facilities that could potentially meet the needs of a number of residents. The local park and recreation department was a visible organization and the respondents in this study were relatively familiar with its operation.

Findings

To gain a context for the perceptions of the individuals involved with the focus groups, the facilitators asked questions and probed the respon-

dents for their perceptions about the community in general and implications for physical activity. This findings section is based on the words and ideas of the respondents. The discussion section addresses overall conclusions and recommendations uncovered and how they were interpreted by the researchers to contribute to an ecological approach to providing physical activity related services within public parks and recreation departments.

Perceptions of Quality of Life

The researchers were interested in determining how residents perceived the quality of life in their community. In other words, what made living in this place “good?” This information provided a context for understanding what physical activity meant and the role it played in their expressions of quality of life.

Respondents generally thought this community was a good place to live. They saw it as a relatively quiet, slow paced, and clean community with growth potential. One person (business group) said, “I think you would make out of it what you do. I think quality of life is good because I think the people in [this community] care.” Many of the respondents perceived a friendly city. They believed that people were supportive and took time for each other. The community was small enough that one could be a part of it if they wanted. They believed the schools were good and the community was a fine place to raise children. People perceived that social opportunities, cultural activities, churches, affordable housing, employment opportunities, and health care were accessible. Some people did not believe the cultural activities were great in this community, but most people believed there was plenty to do and those opportunities were perceived as important elements of a good quality of life. One person (teachers and school employees group) said, “You don’t have the noise and the smog and the hustle bustle of a big, crowded city. You can get anywhere you need or would like to be fairly easily and quickly with very little traffic.” It was also noted that this community is half way (a 90-minute drive) between two larger cities that offered a number of amenities.

People generally felt that this environment was conducive to physical activity with growing opportunities existing for physical activity involvement. A few people felt that the public opportunities were somewhat limited, but were developing. More than one person noted that most southerners are just not oriented toward physical fitness, but focus more on food as a center of social activity. The perception of availability of physical activity opportunities sometimes appeared to be more oriented toward children than adults. Optimistically, focus group respondents thought the opportunities were becoming more numerous, but the big challenge was to increase awareness and get people to use the services that currently exist.

Several individuals thought socio-economic status might impact an individual’s perception of the quality of life. Some parts of the community were better places to live than others. Some racial prejudice still seemed to exist although strides had been taken to improve race relations. The

perception concerning quality of life also related somewhat to whether an individual was a “native” or had moved in from elsewhere. Lifelong residents seemed to believe that living in this community was improving from the past, but some people coming in from the outside felt the opportunities defined as part of quality of life related to physical activity were limited. Most of the respondents in these focus groups were fairly positive about the community and its potential.

Perceptions of Physical Activity Opportunities in the Community

When the participants were asked to respond to what they and their friends/family did regarding physical activity, many of the activities described were home based. The commonly mentioned activities included: housework, gardening, washing the car, mowing the lawn, swimming at home pool, taking care of or “chasing” (grand)children, climbing stairs, dancing in the living room, walking for pleasure or with the dog or to get mail and at work, horseback riding, restoring autos, washing windows, and competing with neighbors to see who can have the best lawn. One woman (Community Coalition for Physical Activity group) mentioned, “Playing soccer with my son and taking him to basketball practice. Running back and forth for everything from my mother to my husband, son, daughter all day.” Another person (teacher and school employees group) noted: “I don’t like bending over and touching my toes 20 times. I do not find that fulfilling. But bending over to pull a weed I don’t mind doing. So, I find I have to think of ways, things to do so I will be active, things that are productive.”

When the individuals were pressed further to consider “anything else they could think of,” the types of activities mentioned tended to be out of the home activities such as bicycle riding, using the stairmaster, shopping (of all kinds), swimming, boating including water skiing, aerobics, hiking, fishing, roller skating, martial arts, mall walking, go-cart racing, line dancing, exercising at the senior citizen center, golfing, hunting and processing the game, coaching children’s athletic teams, sports including softball, volleyball, and basketball, and tennis.

The activities described by these focus group members seemed to be typical of what might be said by individuals anywhere. Home-based activities were the most numerous and most readily discussed. Opportunities away from home, although important, were not as numerous nor done as frequently.

Constraints to Physical Activity

The respondents could identify potential physical activities and saw that more opportunities existed in the community than in the past. To be active, however, a number of constraints had to be overcome. The constraints noted were intrapersonal as well as environmental.

Intrapersonal: Some people felt the lack of physical involvement related primarily to themselves as individuals. Time and convenience were mentioned. Some people were working two jobs, so having time for physical activity was not always possible. One person (business group) said, “If I exercised, it would be during the six hours I get to sleep.” Another

individual (teacher and school employees group) said, "It takes too much energy to do it...once you work all day and go home, by the time you decide to go to the Y and get your clothes on, you say I don't think I feel like going."

Some respondents saw participation in physical activity as a generational phenomenon. If parents were not physically active, then their children were not either. One person (YMCA members and employees group) said, "The parents don't exercise. They don't put emphasis on it and the children come home and play video games and do not get outside. The parents don't reinforce going outside and playing and children are never gonna..."

A perception existed that many people were just not interested in being any more physically active. Respondents suggested that many people in their community hated physical activity and did not want to participate. Some felt they were lazy. Part of this attitude may be due to misperceptions about activity. One person (walking group) said, "All it takes is a pair of shoes." Another person (walking group) said, "...you need to pick an activity that you halfway enjoy and will get to like it and then miss it if you don't do it." Respondents suggested that people sometimes have a narrow view of what physical activity is and they think you have to belong to a health club or do something organized. Having a support system such as family or friends was also perceived as necessary to overcome constraints. In this part of the country, the heat was also mentioned as a constraint. When it is very hot, several people indicated they were not interested in going anywhere. They perceived the heat also tended to make people move slowly.

Physical and Social Constraints: Other people felt that the problems were more structural than individual. For example, some people felt that stores were too far from where they lived so they had to get into a car to go buy something. The opportunities for exercise were also not always available in the immediate neighborhood, which necessitated driving across town to go to a park. Transportation was necessary for most activities. Not having sidewalks also encouraged people to drive rather than walk to some places. Further, people said they wanted more paths linking the various parks and trails throughout the community.

Safety was a major environmental concern for a number of reasons. People perceived that some places were not safe. One reason that the mall was so popular for walking was that it was perceived as a safe place. Lighting was an important issue as well. One person mentioned that if the track were lighted, she would be more likely to walk at night. Unlit sidewalks or lack of sidewalks for walking were perceived as constraints. Riding a bike on city streets was not always perceived as safe because motorists were not looking for bicyclists and no cycling lanes existed. Feeling secure in any type of activity was considered important. Even parks that were perceived as safe in the daytime, such as the one major park in the community, required a partner if an individual was to feel completely comfortable.

Some racial differences were perceived to exist as possible constraints to physical activity involvement. For example, one woman (walking group)

said, "They've got nice tennis courts here. Nobody plays tennis in this town. I see a lot of white folks out there but don't see black folk there playing." One of the reasons mentioned was that black children are not exposed to this sport and most of the tennis courts are in white neighborhoods. Feeling like a minority in certain activities also related to race. One person (walking group) said, "But when you go in you can kinda like be out numbered. We are a minority when you go into fitness clubs and when you go into the Y." It was also perceived that white neighborhoods were more likely to have paved sidewalks.

The socialization of individuals was suggested as a reason why people were not more physically active. One person (walking group) said, "People are grown to have babies and cook and go to church." Another person (walking group) suggested, "Maybe it's because they used to walk 10 miles when they were younger." Some perception existed that people were just not encouraged to be physically active. Further, several respondents suggested that people's lifestyles are associated with food and not with physical activity. One person (business group) said, "We can't work out because after we eat we just go lay down and we get the remote control." Another person (business group) said, "And the blue collar people, and my family is mainly blue collar, exercising is the last thing on their list. They want to go hunting, fishing, and have a barbecue and they are not going to exercise. I think it is very cultural." Another attitudinal aspect related to "feeling old" and seeing physical activity as something for and mainly available to younger people.

A lack of education about physical activities was described in several of the focus groups. Children may not be getting exposure or skills training in schools and further, may not have the skills to know how to find out what is available in a community. A couple respondents suggested that a negative attitude often starts in school where recess and physical education classes have been cut. The perception existed that if people started physical activity regularly when they were young, they would continue. Not having clinics and workshops to teach lifetime physical activity skills was a problem noted for both children and adults.

Cost was a concern limiting physical activity that might be considered both an interpersonal and a social issue. For example, several people perceived the YMCA as having a high membership fee, although it was noted that scholarships were available and the membership fee was based on income level. Several respondents felt that more advertising about this option was needed. Some people have access to the YMCA through their corporate membership and some people can volunteer for a membership. These opportunities, however, were not perceived to be available to everyone. Even after membership is paid, people still have to pay for certain programs. Another point raised was that for children to participate in a program sponsored by the Y or by public parks and recreation, not only was there the initial cost but also the cost to get a physical and to purchase the appropriate equipment. Therefore, for lower income citizens, cost was perceived as a significant barrier.

A lack of opportunities in the community was also seen as a physical constraint. For example, several respondents mentioned that not enough places to swim existed. Swimming pools that did exist were not perceived to have the best hours. Respondents suggested that not enough basketball courts or soccer fields existed. Similarly, not enough safe walking trails and bicycling areas were available. The number of private opportunities was rated good, but the cost of those facilities was perceived as a constraint by some of the respondents because of the limitations regarding membership and the associated fees. The public opportunities were not always available at good times for either adults or for children, especially if transportation was needed to get people from home or work to a site for physical activity.

Children were perceived as the primary recipients of public and not for profit recreation programs. Churches also tended to focus on young people more than adults. A point was raised, however, that often too much emphasis was put on winning and not encouraging children, or adults for that matter, to learn the game and enjoy participating. One person (teachers and school employees group) suggested the need for a “klutz league” for people who were really not good at sports. One individual suggested that less structured and more informal sports opportunities would be good (e.g., having times for people to get together to play rather than having to sign up for a league).

More opportunities were perceived to lead to fewer constraints. Respondents wanted to see new facilities such as basketball courts, jogging/walking paths, an indoor track, a skate park, another public pool, and a civic or an exhibition center that could have multiple uses. Individuals also mentioned that they would like to see more dancing opportunities (i.e., line dancing) that did not necessarily take place in the bars. People said they needed more walking trails all over.

Community Responsibility for Physical Activity

The literature suggested that if the climate for physical activity is to change, socio-ecological models are to be encouraged, and people are to become more active, a combination of sectors must be involved. Focus group participants perceived the public park and recreation department, as well as other organizations and institutions, to have a central role in promoting physical activity in the community.

The Role of the Park and Recreation Department: The reactions to the effectiveness of the public parks and recreation department in this community were mixed. Some people felt staff in the recreation department did a great job. People lauded the parks and recreation department because it did not segregate and did a good job of providing opportunities for everyone. Other focus group respondents felt that the recreation program was narrow in its scope with a focus mainly on children.

Getting information out about what is available through the parks and recreation department seemed to be a critical concern. Respondents suggested that sometimes people did not know about the variety of

programs that were offered by the local recreation department. Respondents indicated that the department also needed to emphasize that the activities they offered occur all year long and not just in the summer. Respondents wanted more advertising and increased public awareness. Getting together with other groups to assist in marketing was suggested as important. Putting together a directory of all the facilities and opportunities available in the community was explicated as an important role that might be played. One person suggested it would be great if there were a source of information from the recreation department for someone who might want to get started on a focused physical activity program but could not afford a personal trainer. Helping people find physical activity buddies was offered as a possibility that the park and recreation department could do.

A couple of people in the focus groups suggested that the parks and recreation department could do much more. They also realized, however, that this increased role will require more funding. Some people thought that the local recreation department was being run on a shoestring and more money would enable a great deal more physical activity opportunities to be offered for all ages. In addition, because of the safety issues mentioned, respondents felt that parks and recreation staff could partner with local law enforcement officials to focus more on safety and security in the parks. Respondents suggested that department staff should make sure that they have equipment and signs that are in good shape. More water fountains in parks might also encourage people to be more active.

The focus group members suggested that perhaps there needed to be a major promotion of physical activity as a community effort. This effort would have to be shared by a number of groups but someone, probably parks and recreation staff, could be instrumental in organizing such an endeavor. One person suggested that parks and recreation staff could also take the lead in developing a major plan to incorporate physical activity into the community's master plan.

Other Community Collaborators: Focus group respondents were also asked about other sources of assistance for promoting physical activity in this community. For example, they suggested that local government officials could be supportive by trying to get additional grant money to undertake new initiatives related to physical activity. Having recreation and physical activity as a priority in the city and county government was described. One person in the Community Coalition for Physical Activity group noted that competition exists for the tax dollar and community citizens have not "yelled" loud enough for what they want.

Respondents thought that businesses and corporations can be major players in an attempt to make physical activity important in this community and offered several suggestions. For example, businesses could provide incentives such as having wellness centers at the work site. Walking trails could be built in industrial parks. Corporations and businesses could also sponsor more activity programs such as tennis tournaments. They could also sponsor athletic teams who play in city leagues. The Chamber of

Commerce might have a role to play in providing information about what is available in the community and in helping to promote various events oriented to physical activity that are happening.

In this community's culture, focus group members indicated that churches were numerous and important. Therefore, several respondents suggested that pastors and staff working in church programs could do more to encourage physical activity. Churches have been active with leagues and in teaching some kinds of activities. Respondents suggested that churches might focus on more activity programs for all people and not just for young people. For example, they might offer trips and tournaments just for seniors or for others who do not have access to transportation. Several respondents indicated that many churches have facilities that might be opened to the public or opened more generally for people to use.

A number of focus group participants felt that schools had a greater role to play in encouraging physical activity. For example, it was suggested that mandatory physical education should be reinstated. Children should have more than one 30 minute period a week in elementary school, and more than one unit of physical education should be required for graduation. Participants felt schools need to teach fitness skills at an early age. One person indicated that these skills, however, needed to be taught in a way that makes them fun as opposed to making kids wear ugly gym clothes and do calisthenics.

Focus group participants suggested health providers have a growing role to play in the promotion of physical activity and wellness. The problem is that sometimes there is not enough time or money to do what is needed to cure illnesses and also focus on wellness. Several respondents suggested that the hospital could do more in terms of prevention to improve the quality of life in this community. The hospital could sponsor activities like health screenings, blood pressure screenings, nutrition counseling, and exercise programs.

Conclusions and Discussion

The purpose of this exploratory examination of one community was to analyze the perceptions of people regarding physical activity, and to interpret the results from a social ecological perspective regarding how public parks and recreation staff might further promote active lifestyles. A social ecological approach enabled us to examine the perception of individual and environmental determinants for physical activity with a specific goal of explicating the potential role of public park and recreation departments. The results of this exploratory study may provide information to assist park and recreation staff to consider how a social ecological model of enhancing physical activity might be articulated and applied in communities.

As a means to illustrate what our data confirmed, Figure 1 was developed. This figure was modified from the work of Sallis et al. (1998) who adapted a diagram to explain how agencies might work together to

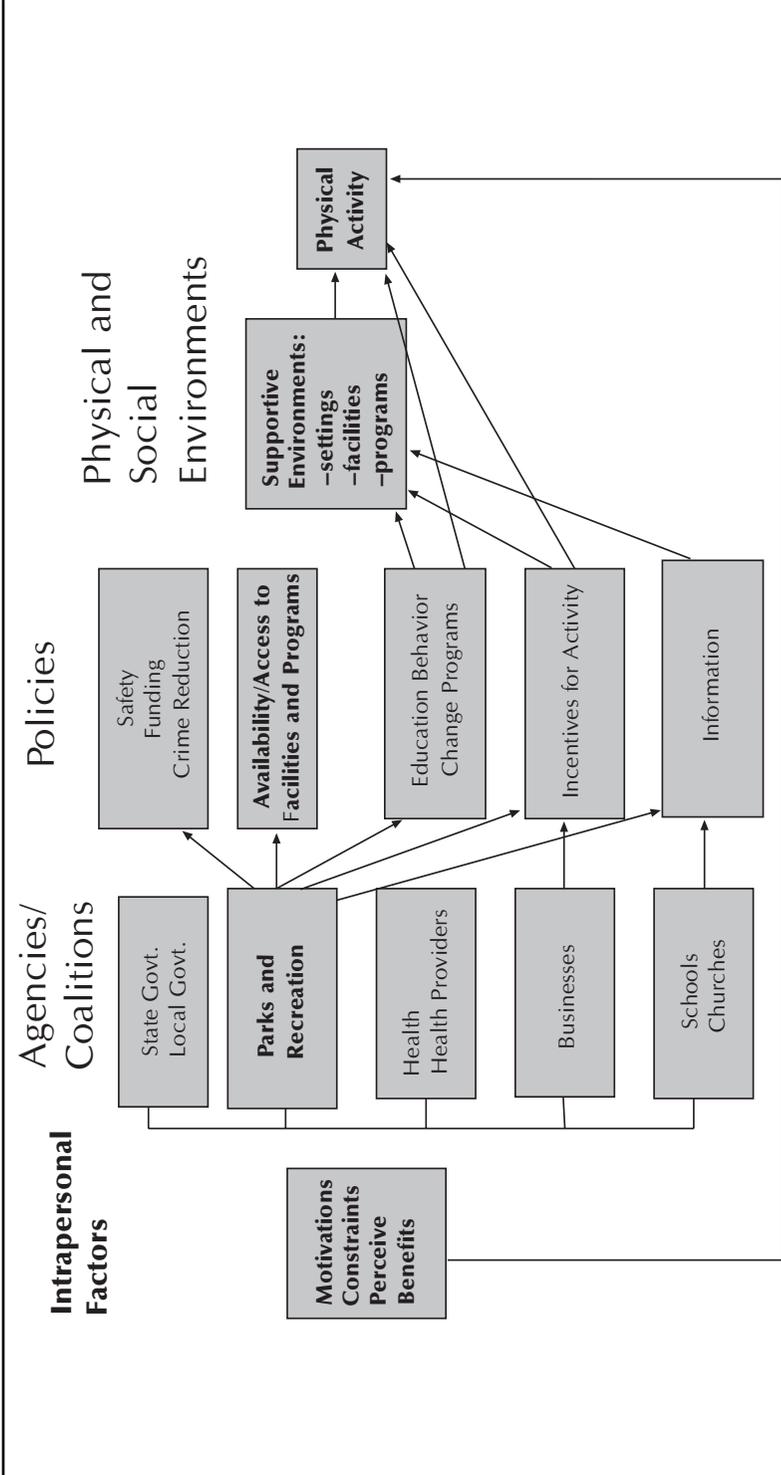
address an issue such as physical activity. Figure 1 begins with individual intrapersonal factors and progresses through the multisectoral ways that physical activity might be facilitated. Similar to Sallis et al., the focus group participants described dimensions of a supportive environments conceptualized as settings, facilities, and programs. These supportive environments existed in relation to policies that could be identified.

The figure illustrates a multifactor approach to creating active communities where people are involved in physical activity. Intrapersonal factors may result directly in some individuals becoming physically active. The social ecological model, however, suggests that these individual factors often are mitigated through agencies and coalitions that exist in a community. Parks and recreation organizations have an opportunity in this framework. Each of these agencies, either alone or through coalitions, effects policies. All agencies probably have the potential to influence all aspects of policy regarding physical activity, but parks and recreation is highlighted in the diagram to emphasize the number of roles these organizations can play, particularly through partnerships and coalitions. All of the policies impact physical and social environments, and can ultimately effect physical activity involvement.

The participants in this study, as well as the health promotion literature, noted how parks and recreation departments are only one of many providers of physical activity, but they are an important one. Although a role regarding physical activity has always existed for public park and recreation agencies, the focus currently on benefits-based programming, health, and the need to address the growing physical inactivity of people in the United States has further emphasized the role. In other words, because the need for physical activity as one component of healthy living is growing, a greater mandate exists to address physical activity issues in as many ways as possible. Sallis et al. (1998) for example, identified what a number of community groups could do through environmental and policy interventions and emphasized the role recreation has in providing more physical activity programs and obtaining more funding to promote physical activity. Further, as our study indicated, the potential for partnerships and collaboration with other community agencies and businesses was great. Many public park and recreation departments are already faced with more recreation needs than they can meet, but the area of physical activity ought to be of prime importance since it is of broad interest to the entire community and offers many opportunities for developing partnerships.

The effectiveness of creating healthy communities, however, is dependent on multiple organizations addressing intrapersonal, social, physical, and policy issues. As Figure 1 illustrates, many of the policies that can contribute to active communities can be addressed in collaborations among parks and recreation and government agencies, local businesses, health departments, schools, and churches. These partnerships can expand the capabilities of the entire community, enhance the opportunities, and build a sense of community ownership and pride (LaPage, Vaske, & Donnelly,

Figure 1
Social Ecological Framework to Promote Physical Activity and Active Communities
(Adapted from Sallis et al., 1998, p. 388 and study data)



1995). Despite the benefits, however, partnerships can be complex and threatening. A broad and encompassing area like health promotion related to physical activity will require communication if working together is to be achieved. Park and recreation departments, however, may be in a prime position to facilitate and encourage some of those collaborations. A number of examples exist in other areas besides physical activity where cooperative work has been successful (LaPage et al., 1995).

Although park and recreation departments may not be able to address everyone's intrapersonal motivations and constraints, staff can assure that social and physical barriers to public facilities do not become obstacles. Staff in departments can also examine what concerns are most salient in a community. For example, safety and equity were issues in this community that emerged as needing consideration. The physical as well as perceived safety of participation must be taken into account and addressed at multiple levels from multiple organizations. Further, citizens must perceive that the recreation department, as well as the community in general, has something to offer them regardless of their age, income level, race, or geographic location in the community.

As a summary, the following recommendations are offered based on this case study of a single community and the literature that is emerging about social ecological approaches and the potential expanding role of park and recreation programs to address physical activity needs:

- Park and recreation departments as well as other community agencies have an increasing role in creating a definition of an "active" community. The greatest challenge is not only to educate people that physical activity is good for them, but also to educate them about ways that they can become active. This activity does not need to be "structured" exercise but may involve a variety of individual and outdoor opportunities.
- A range of settings, facilities, and programs as well as education for and information about the benefits of physical activity must be available. These efforts must be focused on both children and adults. Further, the social nature of physical activities must be stressed in a community-based approach. The public park and recreation department might take a lead role in identifying and communicating all the public and private opportunities for physical activity that exist in the community.
- Physical activity does not occur in a vacuum. Issues such as transportation and accessibility must be accommodated regarding what already exists as well as in determining new initiatives. People need access to the opportunities. If people cannot get to a site to participate, their participation will be limited. Therefore, staff in parks and recreation departments in collaboration with other community groups will need to address access to physical activity in the broadest sense.
- Safety concerns are crucial in the design and planning of supportive physical activity environments and opportunities. This safety includes physical safety as well as perceived safety. Agencies in a community that work together to reduce crime and the perception of crime appear to be more likely to foster active lifestyles.

•Partnerships will be required to promote physical activity in a community. A joint effort with a shared vision and conjoint responsibilities is required. No one government, not for profit, or commercial business can be solely responsible for the opportunities. From an ecological perspective, “it takes a village” to promote physical activity.

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