

Women and Healthy Living in Canada

Fact Sheet Number 1 Fall 2012

PHYSICAL ACTIVITY

RETHINKING WOMEN AND HEALTHY LIVING IN CANADA

Rethinking Women and Healthy Living in Canada examines the sex, gender, diversity and equity dimensions of healthy living among women in Canada by conducting sex-and gender-based analyses of the healthy living discourse, key healthy living topics and selected healthy living strategies.

Fact sheets on women and healthy living have been prepared on physical activity, sedentary behaviour, self-injury, food insecurity, sodium, tobacco, alcohol, sexual behaviour and condom use.

Learn more at www.womenshealthdata.ca



Women and girls are less active than men and boys at all age levels in Canada and many women are not sufficiently active to attain the health benefits of physical activity.

Physical activity has been shown to have positive impact across a wide spectrum of health issues for girls and women, including reduced risk of several chronic conditions and improved emotional and social well-being. Physical activity also represents one of few modifiable factors that can reduce breast cancer risk, which makes it particularly important for women to be physically active [1].

Measuring physical activity is a challenge due to the lack of clear definitions and categories, but usually include leisure-time activities, occupational activities, active transportation (walking, cycling), and domestic work.

The Canadian Physical Activity Guidelines recommend adults to engage in at least 150 minutes of moderate-to-vigorous intensity physical activity per week, in bouts of 10 minutes or more, to achieve health benefits [2]. It is estimated that only 14% of Canadian women met these recommendations in 2007-2009 [3]. The current physical activity guidelines do not include sex- and gender-specific recommendations despite research suggesting that women are less physically active than men and they may experience different barriers to physical activity.

Sex- and gender-based analysis

Sex- and gender-based analysis (SGBA) begins with four core concepts: sex, gender, diversity and equity.

1. **Sex** refers to the biological characteristics that distinguish male from female bodies. Sex differences include different chromosomal patterns, reproductive organs, hormones and proportions of fat to muscle.



2. **Gender** refers to socially constructed roles, relationships, attitudes, behaviours, relative power, etc., that shape and describe what it means to be male or to be female in a society.

3. **Diversity** can be identified as variations in culture, ethnicity, sex, gender, age and ability that affect our values, beliefs and behaviours, influencing all aspects of our lives.

4. **Equity** is achieved when there are no unfair differences within and among populations that lead to differences in health status. Social systems and policies should

ensure that everyone has access to the resources, opportunities, power and responsibilities they need to ensure their full, healthy potential [4].

Sex issues

Canadian women are less physically active than men, regardless of age group [3]. In 2010, 50% of women and 56% of men reported being moderately active or active in their leisure-time [5]. Physical activity has shown to have positive effects on depression and anxiety, both of which are more common among women.

Gender issues

Physical activity is a gendered experience and the differences in physical activity rates for men and women are at least partially caused by the role of gender in the social, economic and health realities of women's lives. Women and men tend to engage in different types of physical activities; the most common activities among women include walking, gardening, home exercises, swimming and dancing [6]. Family responsibilities and lack of time are commonly reported barriers to women's physical activity [7-9]. Some women may also experience barriers to physical activity because of culture, socioeconomic status and the physical environment.

Diversity issues

Differences in physical activity rates exist in terms of socioeconomic status, ethnicity, immigrant status, age and geography. Women with low socioeconomic status and recent immigrant women are less likely to be as physically active as the Canadian average. Aboriginal women and older women are also less likely to be physically active. Across Canada, women in British Columbia, Alberta, Nova Scotia and the Yukon are more likely to report being active or moderately active in their leisure time compared to women in Quebec, Nunavut, Ontario, Newfoundland and Labrador and the Northwest Territories [5].

Equity issues

Not all women have the same opportunities to be physically active. Women with low income may not have the resources required to join exercise programs or clubs, and may not be able to get to recreational facilities due to transportation costs. As women are more likely to be in low-paying and precarious employment, their time may also be more constrained and they may be disproportionately less likely to have jobs that provide access to fitness facilities at the workplace [6].

High income neighbourhoods often have more community resources for recreational facilities and may thus provide girls and women with more options for being physically active [10]. Neighbourhood safety is another factor that influence girls and women's physical activity and there is a need for strategies that ensure that neighbourhoods are safe for walking, cycling and other forms of physical activity. There is also a need for strategies to ensure equitable access to resources [11], including access to suitable physical education classes and/or organized sports which may be subject to gender-related inequities.

Critique

Data on physical activity is often collected through self-report surveys, which can result in reporting bias. Activities performed by women with young children are often unstructured

(e.g. carrying children while performing household chores), and are often less memorable and more difficult to categorize compared to planned physical activities [12]. Physical activity is often measured as moderate-to-vigorous activity, conducted during leisure-time, and therefore does not capture light-intensity activities and activities that are performed at the workplace, in schools, in the household or through active transportation (walking, cycling) [13]. Women's and girls' actual physical activity can therefore be underestimated or misclassified [14].



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