



2007 January Volume 1

## HAPPY NEW YEAR!

Welcome to the first Green Prescription newsletter for 2007.

Our Green Prescription team appreciated your commitment to the programme last year, and we are looking forward to working alongside you again this year to help educate and provide a means of support for change.

All of the referrals received during the Christmas and New Year period have been actioned and new referrals have been coming through thick and fast.

Included in this month's Green Prescription newsletter is the latest information for the 2007 *Movement for Health Falls Prevention* programme and this year's upcoming *BikeWise Week*. It also features the latest GRx GP survey results, an outline of how to identify suitable patients for the GRx programme and an article from *Child Development* about the link between sleep deprivation and obesity in children.

**For any further information please contact us with the details provided below.**

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## Is your patient ready for GRx?

For the Green Prescription to be most effective, it is important that patients are:

- 1 *Medically stable*
- 2 *Achieving less than 2.5 hrs per week*
- 3 *In the 'Contemplative', 'Preparation' or 'Action' stages of change*

So how do you know how ready your patient is to make changes to their lifestyle? Here are some guidelines:

### Precontemplation stage:

Generally demotivated and defensive, they have no intention of becoming active and in their minds, their cons far outweigh the benefits of becoming active. The current GRx programme is not tailored towards patients in this phase, the best strategy is to continue to inform them of the benefits of physical activity.

### Contemplation stage:

Show a genuine intention to become more active in the next 6 months and require information, advice and support.

### Preparation stage:

In this phase, patients have become active, but irregularly, they have some form of action plan but need support and guidance.

### Action stage:

Although this is the action stage, it is also the most volatile stage where people are at high risk of relapsing back down into the preparation stage. They need support and motivation to continue into making physical activity a habit.

Through the GRx programme, we can effectively educate, motivate and support those patients in the 'Contemplation', 'Preparation' and 'Action' stage.

# Green Prescription 2006 GP Survey

Here is a summary of some of the key highlights of the November 2006 GP Survey.

The survey showed that almost all GPs are (99%) are aware and give advice on physical activity. Where GPs do not prescribe GRx, almost all (99%) give their advice verbally. In addition, the awareness and use of GRx amongst GPs has increased significantly from 73% in 2005 to 86% in 2006.

An estimated 3.0 GR<sub>x</sub>s have been written by GPs on average in the past month and when combined with GR<sub>x</sub>s written by Practice Nurses, the average number rises to 5.5.

The reasons for GPs not prescribing include lack of time during consultation, unwilling or unmotivated patients, and GPs saying they forget or are not in a habit of prescribing.

**SO LOOK OUT IN OUR NEXT EDITION FOR WAYS TO OVERCOME THESE OBSTACLES!**



## BIKEWISE WEEK

Invercargill is one of 15 regions taking part in this year's *Mayoral Cycling Challenge*, to be held on Sunday 4 March at 2pm. This event, one of a number to mark Bike Wise Week, pits

one region against another as they strive to have the most people 'ride behind the mayor'.

This event is not only for keen cyclists, but is also an event for people who may never have cycled before, occasional cyclists, and families wanting to have fun and get some exercise. It's a perfect excuse for anyone who cycles, or who has ever had a hankering to do so, to dust off their bike helmet and join in. An Avanti Black Thunder will be given away along with other great giveaways and spot prizes.

**Venue: Thomsons Bush, Invercargill**

**Time: Sunday 4 March @ 2pm**

# Link between sleep deprivation and obesity in children

Children who do not get enough sleep are more likely to be overweight, according to a new study.

Emily Snell and colleagues at Northwestern University in Evanston, Illinois, US, tracked more than 2000 children for five years, using detailed diaries kept by families to examine children's sleep behaviour and its relationship with weight.

"Children who get less sleep tend to weigh more five years later," Snell says. One extra hour of sleep per night cut the likelihood of being overweight from 36% to 30% in children aged 3 to 8, and from 34% to 30% in those aged 8 to 13.

Not getting enough sleep may affect hormones that influence appetite, Snell says. And staying up an hour later at night may provide more opportunity to eat, she adds. Less sleep leaves children more lethargic, so they cut down on exercise.

There is growing evidence linking sleep to children's cognitive and social functioning. However, some researchers believe that teenagers simply cannot get enough sleep because their bodies are biologically programmed to feel sleepy later at night, while their school day is fixed to begin in early morning (see [Teenagers lost in time](#)).

Journal reference: *Child Development* (vol 78)  
<http://www.newscientist.com/article/dn11126-sleep-more-to-weigh-less-kids-told.html>

