

VETERANS' HEALTH WEEK EDITION

THE DEPARTMENT OF VETERANS' AFFAIRS
promoting healthy lifestyles for Australia's veterans



PHYSICAL ACTIVITY ISSUE



FREE
VOL. 16 | NO. 2 | ISSUE. 2 2017



FIT AND HEALTHY – VETERANS' HEALTH WEEK 2017

This year, current and former serving personnel have taken up the challenge to hold activities during Veterans' Health Week that promote the importance of physical activity. A range of activities including competitive sport challenges, walking tours, presentations on how to exercise safely, gentle exercise sessions and 10K Steps launches will be held nationally during 21–29 October, 2017.

INSIDE THIS ISSUE

EAT WELL, EXERCISE WELL

Whether you've just started exercising, or you're a seasoned athlete, the benefits of adopting sports nutrition principles and good eating behaviours are well established. What we eat before, during and after exercise not only helps us perform better in our workout, but also allows us to have more energy throughout the day, promotes lean muscle maintenance and improves our overall health.

PHYSICAL ACTIVITY AND MENTAL HEALTH

While it is obvious that your feelings can influence your behaviour, it is not as obvious that your behaviour can impact your feelings. For example, when you feel tired and sad, you move more slowly. When you feel anxious you may either rush around or, at the other end of the spectrum, become completely exhausted.

Mental health and physical health are fundamentally connected. Recent studies show that the connection between your brain and your body is a "two-way street" and that means what you do can change your brain.



EXERCISE. ARE YOU TAKING THE RIGHT DOSE?

Just like a script for medications there is likely to be an exercise prescription most beneficial for your entire wellbeing. Gaining individualised advice about your exercise needs is particularly important if you have a health condition or concern. Exercise physiologists and physiotherapists are health professionals that prescribe exercises or specific movements as part of their treatment of a condition. An exercise prescription can be used as a stand-alone approach or to complement other health treatments.

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editorial



Naomi Mulcahy

WELCOME TO THE PHYSICAL ACTIVITY VETERANS' HEALTH WEEK EDITION

Down the end of my street there is a park which I don't visit nearly enough. The park has walking and cycling paths, playground and picnic areas, and in the early mornings and late afternoons there are boot camp workouts. On my way to work, cyclists whiz past either to or from the park. As I approach the train station in the morning and on my return home, my neighbours are going to or leaving the local sports centre. Then when I get to work, colleagues visit the local gym throughout the day, or go for a run or a walk. All these people make time in their day to be physically active. So why do they do it and how do they find the time?

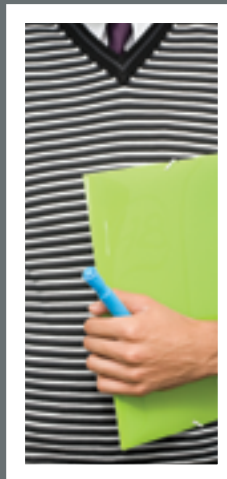
Let's start with the why. The evidence is overwhelming. Physical activity combined with healthy eating is the easiest way to avoid chronic disease. Remember Benjamin Franklin's wise advice that 'An ounce of prevention is worth a pound of cure'? But there are other reasons apart from reducing your risk of illness and disease. For many people, being physically active provides an opportunity to connect with others; whether it's through recreational or competitive sports, or simply catching up with friends for a weekly walk. For others, it's about the mental health benefits they experience by being active. There are many reasons why we exercise, and I think it's more likely to happen if you understand why it's meaningful for you. Simply being told to exercise won't make people do it.

Naomi Mulcahy National Coordinator, Men's Health Peer Education

And now for the how. We all have the same number of hours each day and week. How we spend those hours and prioritise our activities is the key thing. I've always thought of physical activity as something to do if I have a bit of extra time, if the weather is nice outside, and if I'm feeling in the mood to exercise. Instead, I'm now starting to say to myself, 'if I exercise the following benefits are more likely to occur'. I'd given it a low priority because I haven't focused enough on why I needed to do it, rather than should do it. Finally, I make sure it's activities I enjoy and can do regularly. Don't forget any incidental activity – such as taking the stairs and not the lift – provides a benefit to health.

This Veterans' Health Week (VHW) edition with its theme of physical activity includes a range of articles written by our medical, allied health, health promotion and community support advisers. In this issue we've also included a sub-section for those readers who want to take their physical activity to the next level. It includes inspirational articles from two veterans for whom adaptive sports helped them to stay connected to family, friends and to life. I thank them for sharing their experiences with us.

Finally, many thanks and congratulations to all VHW organisers who are holding an activity to promote the benefits of physical activity to current and former serving personnel and their families. We hope you enjoy VHW 2017 and make physical activity a part of you and your family's everyday life.



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The Committee would like to thank Dr Tony Ireland for being our medical adviser for this issue while Dr Warren Harrex was on leave.

MHPE MAGAZINE AND REPRODUCTION OF CONTENT

Just a reminder to our readers, if you would like to include an article that's appeared in an edition of the magazine in your own publication, please contact the Editor to confirm if there are any restrictions on the re-publication of the material.

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LETTERS TO THE editor



Dear Editor, as a MHPE volunteer for some years I have distributed 1000s of MHPE magazines. At one club I placed a magazine in front of each man yet only ten took one. I asked one chap he said, "I do not need that I am not sick." Another said, "Mate I do not want to jinx myself, if I read about it, I might get it." A president of a men's organization told me they had lost six members over two years who knew they were ill but would not go to the doctors until it was too late. A lady said to me as she took a magazine, I have made two appointments for my husband to see the doctor at 5pm, but each time he has gone to the hotel and did not keep the appointment, yet he had been suffering for two years. She said he told her he felt better after a couple of drinks and did not need to go. Another lady told me she buys capsules at the health store for her husband, hoping to help him, because he will not go to the doctors. Man is a machine and like all machines he will wear out. A man will make sure he has his car serviced regularly. Yet he never goes for a regular medical check-up at the doctors for himself. On the presumption that "No News Is Good News."

R.W. (Bob) Postlethwaite,
Lake Macquarie, NSW

Men's Health is a joke, right? I mean, do men care about health? Do men visit the GP when ill, get annual flu shots, maintain an annual prostate check...? Or how about being blood donors? Do you eat your vegies like gran told you to years ago? Avoid fast food outlets like the plague? Get some exercise? I do all of the foregoing and feel happier and less stressed than many a friend does. Sure I'm not perfect but at least I have made a start on living better into my old age. What about YOU?

Ange Kenos,
JP

Thank you for your comments. You have (both) illustrated in a real world sense why men's health needs a specific focus. Despite doing worse than women on many health measures, including overweight/obese, vegetable intake, incidence of many cancers, coronary heart disease, diabetes and hypertension, men are less likely than women to see their GP (at least till very late in life). Men are also more likely to be hospitalised. There are indications of progress: According to the Australian Bureau of Statistics, male life expectancy increased by 1.9 years in the years 2005-2015 (females increased by 1.2 years), although the average woman will still live 4 years longer than a man. Well done on your own health practices and continued efforts to influence the health behaviours of other men.

LETTERS TO THE EDITOR - WHAT WE'RE LOOKING FOR...

Letters should be no more than 100 words and relate to articles or topics discussed in the magazine or regarding men's health generally.

PLEASE SEND YOUR LETTERS TO THE EDITOR AT
menshealth@dva.gov.au
or

Men's Health Peer Education magazine
c/ - Department of Veterans' Affairs
GPO Box 9998, Brisbane
QLD 4001

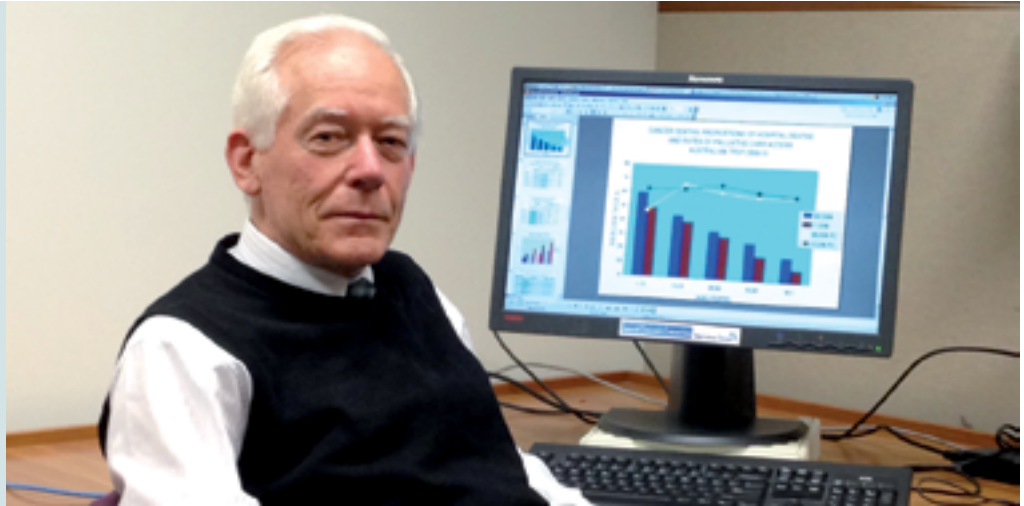
THE NEEDS OF KNEES

As I eased to a walk after another 150-metre sprint on the softball field, a pudgy passer-by growled at me that I was ruining my knees. “Not my problem” I thought—no history of significant injury, never overweight and all running done on grass or the beach. My knees are (and will be) just fine....

That was then. A few years later, recurring cartilage damage and increasing arthritis brought a brief (but brilliant!) running career to a limping halt. It is an all too familiar story.

The knee is a complicated hinge joint, which requires the support of muscles and ligaments to keep stable through its range of movement. So many of the games we play make heavy demands on knees. Football for sure, but consider also the jerks and jolts of tennis and netball, the torsions of the golf swing, the constant genuflexions of lawn bowls, etc. etc. The workplace and even the family home present hazards: the great Roger Federer injured his knee, not at Wimbledon, but while bathing his children!

About 55,000 Australians have knee replacement surgery every year, and the numbers are steadily increasing. While most of these operations are very successful, there are always some risks – uncommon complications include infections and thromboses, and even a few fatalities— and surgery of any sort is not exactly fun. Full recovery and rehabilitation may take 3 months or longer and about 20 per cent of patients report they are less than fully satisfied with the eventual result. Within 10 years about 1 in 20 knee replacements require repeat surgery. So, carelessly thrashing our knees to pieces just because we can always get new ones may not be the smartest play.



Dr Tony Ireland, PhD
DVA Medical Adviser

A 5-POINT PLAN IS SUGGESTED FOR REDUCING RISKS FOR KNEE DAMAGE, OR FOR LIMITING THE PROGRESSION OF EXISTING PROBLEMS.

- 1. Family.** Some of us are genetically more susceptible. Sure, we cannot choose our parents, but if arthritis or ligament problems are “in the family” then we can take extra care.
- 2. Fatness.** Every extra kilo puts extra load on the knees and increases the chance of damage. Overweight patients also do less well after replacement surgery. And of course, vigorous exercise and weight control are harder when the knees are shot.
- 3. Fitness.** Always a good idea, but pay special attention to the quadriceps muscles which stabilise and support the knee itself. These big muscles on the front of the thigh quickly become flabby if we are lazy, but just as quickly regain power and “tone” with simple exercises. Everyone’s exercise ‘kneeds’ are different and here especially a tailored program from a health professional pays dividends.
- 4. Footwear.** Stability from the ground up is a no-brainer. See the advice elsewhere in this issue.
- 5. (F)pharmacy.** Simple medications and even some complementary agents can be helpful, to relieve pain and possibly limit ongoing damage. Beware of touted miracle cures and get advice from your regular doctor.

Remember also that, like all chronic inflammatory conditions, knees can have fluctuating levels of dickiness. It is smart to rest when times are bad, then resume your program of prescribed exercise when the storm passes.

A final word on knees: “Your virtues you learn at mother’s knee, your vices at some other joint”.
(St Barnabas’ noticeboard, Broadway, Sydney)

THE AUSTRALIAN PHYSICAL ACTIVITY AND SEDENTARY BEHAVIOUR GUIDELINES

The Australian Physical Activity Guidelines sound straightforward:

- Doing any physical activity is better than doing none. If you currently do no physical activity, start by doing some, and gradually build up to the recommended amount.
- Be active on most, preferably all, days every week.
- Accumulate 150 to 300 minutes of moderate intensity physical activity or 75 to 150 minutes of vigorous intensity physical activity, or an equivalent combination of both moderate and vigorous activities, each week.
- Do muscle strengthening activities on at least 2 days each week.

Physical activity is anything that gets your body moving, makes your breathing quicken and your heart beat faster. Yet 60% of Australians don't meet minimum guidelines, and of those who do, more than half do walking only. Meeting the guidelines, unsurprisingly, declines with age.

The Australian Sedentary Behaviour Guidelines are even simpler:

- Minimise the amount of time spent in prolonged sitting.
- Break up long periods of sitting as often as possible.

Sedentary behaviour comprises sitting or lying down (except sleeping), and Australians average 39 hours weekly; 10 hours of work and 29 hours of leisure. Older Australians watch TV for more than twice the time young people use phone or computers!

People don't wake on their 65th birthday to a dramatic body change, but they are rewarded with different Physical Activity Recommendations:

- Older people should do some form of physical activity, no matter what their age, weight, health problems or abilities.
- Older people should be active every day in as many ways as possible, doing a range of physical activities that incorporate fitness, strength, balance and flexibility.
- Older people should accumulate at least 30 minutes of moderate intensity physical activity on most, preferably all, days.
- Older people who have stopped physical activity, or who are starting a new physical activity, should start at a level that is easily manageable and gradually build up the recommended amount, type and frequency of activity.
- Older people who continue to enjoy a lifetime of vigorous physical activity should carry on doing so in a manner suited to their capability into later life, provided recommended safety procedures and guidelines are adhered to.

Unlike the guidelines for the under-65s these haven't been updated for over a decade. They are sensible but lack the emphasis on reducing sedentary behaviour.

Look again though at the last guideline – don't wait till 65 and aim for the bare minimum; build activity, as vigorous as possible, into your life now, and keep it up as long as possible [www.en.wikipedia.org/wiki/Robert_Marchand_\(cyclist\)](http://www.en.wikipedia.org/wiki/Robert_Marchand_(cyclist)).

Why do it? Here's the stick: less cancers and cardiovascular disease. The juicy carrots are better sleep, more energy, meeting people, better concentration, less stress, and so on. See your GP first.

Whatever physical activity you are doing is good. Gradually make it longer, harder, more frequent and social and you will benefit more. Make activity part of your life. Try new things. Have fun!

The realities of motivation, success, barriers and self-responsibility are discussed here:

<http://www.abc.net.au/news/health/2017-01-23/you-say-you-want-to-get-fit-but-do-you-really/8203950>

If eligible, try the Veterans' Heart Health Program:

www.veteranshearthealth.com.au/

Useful sites include

www.healthyweight.health.gov.au/ and

www.myhealthybalance.com.au/

There are free apps, such as FitnessBuilder or Sports-Tracker, or use a pedometer or wrist device. Or 'just do it' without the technology.

I was going to close with 'good luck', but it isn't luck, is it?

Have a go!

Tony Hoare
DVA National Health
Promotion Adviser

PHYSICAL ACTIVITY AND MENTAL HEALTH



While it is obvious that your feelings can influence your behaviour, it is not as obvious that your behaviour can impact your feelings. For example, when you feel tired and sad, you move more slowly. When you feel anxious you may either rush around or, at the other end of the spectrum, become completely exhausted.

Mental health and physical health are fundamentally connected. Recent studies show that the connection between your brain and your body is a “two-way street” and that means what you do can change your brain.

It has been documented that there are high rates of physical illness among people with serious mental illnesses. People with serious mental illness are two to three times more likely to suffer from diabetes and the rate of cardiovascular disease is almost four times that of the general population. Depression is considered an independent risk factor for coronary artery disease. Clearly physical activity can improve both your physical and mental health.

Regular aerobic exercise (such as walking, jogging, swimming, cycling, and dancing) can reduce anxiety by making your brain’s “fight or flight” system less active. When anxious people are exposed to physiological

changes they fear, such as a rapid heartbeat in a person with cardiac disease, through regular aerobic exercise, they can develop a tolerance for such symptoms, and thus reduce their anxiety.

Regular exercise such as cycling or gym-based aerobic, resistance, flexibility and balance exercises, can also reduce depressive symptoms. Exercise can be as effective as medication and psychotherapies, for mild to moderate depression.

When you exercise, your body releases chemicals called endorphins, which interact with receptors in your brain that reduce perception of pain. Endorphins can also trigger a positive feeling in the body. The feeling, sometimes described as a “runner’s high”, can be accompanied by a positive and energising outlook on life.

People often find that exercising with another person, such as a friend or partner or as part of a group (see article on the Heart Health Program on page 9), encourages and supports them to maintain a regular exercise regimen. A recent study has shown that when you exercise simultaneously with someone else, it improves your self-esteem. This means that exercising with someone else can make you feel better about yourself.

Physical activity is only a part of the overall picture to improving both your physical and mental health. It is important to continue therapy with your treating mental health professionals, such as your psychologist or psychiatrist. Healthy eating, moderate alcohol consumption and smoking cessation are also very important. Your GP can help you look at your particular issues and to set goals. With physical activity, it can seem overwhelming at first. However doing any physical activity is better than doing none. The best advice is to start an activity that you like, and start small and slowly increase your activity. Set goals that are manageable for you. You may also be eligible to access services provided by DVA, such as exercise physiology or physiotherapy, to help you start.

Dr Rosemary Stafford
DVA Medical Adviser

SAVE YOUR TEETH

Over the last few months, a few veterans have written to me regarding significant dental problems they've encountered partly as a consequence of reduced saliva production, which is a side effect of many medications, especially those prescribed for some of the mental health conditions.

Saliva (spit) is necessary to moisten and clean our mouths and gums and to help in the first part of the food digestion process. Saliva also neutralises and removes the acids that occur in the mouth as a result of diet and helps to keep in balance the normal bacteria and fungi in our mouths. Once this system is disturbed, then mouth, tongue and gum infections can arise, as well as dental caries (holes in the teeth).

There are many causes of dry mouth, including side effects of medications; certain diseases and conditions; effects of surgery or radiation treatment to the salivary glands; dehydration; snoring; excessive mouth breathing, and smoking of cigarettes.

More than 400 medications are known to cause dry mouth as one of their side effects. Medications that commonly cause dry mouth are the antidepressants, antihistamines, decongestants, certain high blood pressure medications, some sedatives and pain medications and antacids.

If you've recently developed an annoying Dry Mouth, check with your doctor as to whether this could be a side effect of your prescribed or over-the-counter medications. It may be as simple as adjusting the dose to reduce these unwanted side effects.

However, even though I'm a medical specialist with a lot of clinical experience, I am the first to admit that most doctors don't know much about Teeth and Dental Care!

So if changing medicines does not solve the problem, then you should definitely consult your dentist. The dentist will be able to ensure that your teeth, gums and mouth are healthy, arrange any necessary cleaning and protective treatments such as fluoride, and if needed, can also prescribe special dental medications that will keep the mouth moist.

But prior to needing special dental medications, it is critical to any successful management to know there are many simple things you can do. These include things such as understanding that diet is the principal cause of decay and particularly avoiding snacks of sugary or acidic foods and drinks between meals (snacks that are sweet or acidic, even healthy foods such as fruit, will cause significant tooth damage). Other things that will help are drinking plenty of water, chewing on sugar-free gum that helps to stimulate production of saliva, breathing through your nose as much as possible, and maintaining good dental hygiene with regular use of Dental Floss, frequent brushing with fluoride toothpaste, and rinsing your mouth with an alcohol-free mouthwash. You should also reduce your consumption of caffeinated beverages and alcohol. Some people also find that using a humidifier when sleeping at night helps.

So, in summary, if you've been prescribed medications or are using medicines you've bought yourself



Dr Ian R Gardner
DVA Principal Medical Adviser

and if you develop a dry mouth, try the simple steps listed above. If symptoms persist, see your doctor and also your dentist. In many cases, the dry mouth symptoms can be fixed. Where this cannot be achieved, it is still possible to stop the tooth damage.

Make sure that you regularly consult your dentist to ensure optimal oral health and prevention of gum and tooth disease, especially if you're on medications that may reduce saliva output.

Some excellent additional FREE web-based references include:
MAYO Clinic: <http://www.mayo-clinic.org/diseases-conditions/dry-mouth/symptoms-causes/dxc-20318157>

Everyday Health: <http://www.everydayhealth.com/dental-health/oral-conditions/medications-and-oral-health.aspx>

WebMD: <http://www.webmd.com/oral-health/guide/dental-health-dry-mouth>

Dental health: the starting blocks for good nutrition

VETERANS HEART HEALTH PROGRAM IMPROVING VETERANS HEALTH

The Department of Veterans' Affairs Heart Health Program has been helping improve the health, fitness and wellbeing of returned service men and women for over 16 years. The DVA funded program aims to help veterans increase their overall physical health, physical fitness and wellbeing through practical exercise, nutrition and healthy lifestyle education support.

The program runs for 52 weeks, and focusses on increasing physical activity and making healthy lifestyle choices. The program covers a range of topics including setting healthy goals, eating well, lowering alcohol consumption, communication and stress management, taking care of your body, solving problems and maintaining a healthy heart. The program is offered in two formats – the Heart Health Group Program and the Individual Heart Health Correspondence Program.

John B, a veteran located in the Brisbane area had this to say about his time in the group program. "I've enjoyed the opportunity to work on improving my health and fitness

while in the program. I also enjoyed meeting some new mates. Having the group's trainer look after us throughout the program gave us the confidence we were doing the right things to improve our health.

"Each week, for the 12 months of the program, we attended a couple of 60 minute exercise sessions supervised by our group's trainer, we also had the chance to meet up once a month to talk about healthy lifestyle choices and how they affect our overall health and fitness, I learnt a few things that continue to help me greatly".

John goes onto say "I could not be more positive and thankful for the chance to participate in this great initiative".

If veterans are unable to attend a group, those taking part can access the program via the correspondence or individual program version. Programs are tailored specifically for the individual and participants are supported by their GP, a health coach via fortnightly phone sessions, along with the provision of an exercise resource.

The individual Heart Health Program provides the participant with flexible access to information and education and activity resources to give them the tools they need to improve their physical health and ultimately, to enjoy a healthier and happier lifestyle.

Michael, a veteran from Hobart speaks of his experience in the individual program. "Due to my work commitments I was unable to attend a group program but still wanted to use the program to support my exercise and point me in the right direction healthy eating wise".

"Each fortnight I had a phone call with my personal program health coach. He was an AEP, so knew his stuff. We discussed my goals and put plans in place to reach them. The program also organised a gym membership for me so I could exercise in my own time. So far I've lost 8 kg after making some small changes to my diet and I'm feeling a lot stronger due to my gym work, I'm also starting to improve my social life. The program has helped a lot."

The Veterans Heart Health Program is open to all returned veterans, peace keepers and peace makers who have not completed the program before. All age groups, fitness levels and levels of mobility are provided for in the program. Participants are supported by a network of health professionals all working to provide advice, direction and resources as they continue to make positive change.

Further information on the Heart Health program can be found on the programs website www.veteranshearthealth.com.au To register for the Heart Health Program, contact the program managers, Corporate Health Management on 1300 246 262



YOU KNOW HOW EFFECTIVE EXERCISE IS

There probably isn't anyone who doubts the proven benefits of regular physical activity and exercise. You could probably list the benefits yourself.

Regular physical activity/exercise reduces the risk of many health problems, such as cardiovascular disease, type 2 diabetes, anxiety, depression, musculoskeletal problems, some cancers and unhealthy weight gain. Exercise also helps with reducing falls and injury, reduces stress and improves energy, concentration, sleep and sense of wellbeing.

How often have you told yourself, "I must exercise more", "I know exercise is good". Then the excuses start with "but..." Unfortunately most

Australians do not meet physical activity guidelines. Chronic disease is growing in Australia, with 50% of us living with one chronic condition and an estimated 1 in 5 now living with multiple conditions according to the Australian Institute of Health and Welfare.

As a physiotherapist discussing exercise with a group, I will often ask if there is anyone who does exercise routinely. Invariably anyone who volunteers will report an exercise habit "come rain or shine." They are usually doing a daily walk. The next question is "what happens if you miss a day"? Usually the answer is that it rarely happens and their day does not seem right without their regular exercise. Exercise has become their habit.

HOW CAN YOU KEEP UP OR START THE EXERCISE HABIT.

1. Make exercise a priority-don't leave it for your "spare time". Plan well e.g. from the night before. You may be tired if you leave it at the end of a long day.
2. Be realistic with your goals. Don't panic if you miss a session. Try not to allow more than two days without doing some activity of moderate intensity so you won't lose the benefits of training effects.
3. Keep it simple and convenient.



SO WHY AREN'T YOU DOING IT?

4. Don't overdo it.
5. Establish what works for you. Is it variety or routine?
6. Consider what may motivate you - exercising with a friend, joining a group, walking a dog, listening to music.
7. Often a diagnosis of a condition makes this health message more personal and meaningful. You know *"exercise is good"* but translating the message to *"exercise is good for my mental health"* or *"exercise will make my own insulin work better"* can be more motivating.
8. Could you benefit from an exercise diary of some sort to see progress and keep motivated?

What about health conditions making exercise difficult?

Some health conditions make exercise more challenging. Get assessed and obtain education and advice for an appropriate exercise plan as most health problems are improved by activity. Learn about your condition - is it stiffness, weakness or poor muscle activation? What type or combination of exercise is needed - targeted strengthening, challenging balance exercises or even general cardiovascular fitness training?

Know your type of exercise and its benefits

You may hear of exercise being aerobic, strengthening, incidental and being described in terms of intensity. Australian guidelines are easily available (refer to the article in this issue on page 6 or the tear-out insert). Consider your current levels and aim accordingly. Professional advice can assist with what will help you manage your health concerns.

Consider these examples:

- Persistent chronic pain can be complex. The changes that occur in the chemicals in the nervous system from physical activity help with the coping of pain. Discuss with your health practitioner different exercise options such as exercising in the pool and specific targeted exercises that may benefit specific conditions. It's also important to gain support in self-managing a chronic pain condition, to understand it and learn how to monitor and pace activity.
- Updated guidelines for common conditions such as knee arthritis and back pain emphasise the importance of exercise and activity. It is important to learn how to do these exercises well, paying attention to achieving optimal postural control and balance, as well as targeting the strengthening exercises
- Your health issues may be around diabetes prevention or management. Exercise plays an important role. Increasing muscle bulk with a strengthening program makes your body a more efficient burner of sugar. Also more intensive aerobic activity has an effect directly on the way your own insulin works. This effect can even last up to 48 hours. Remember there's also the benefits of incidental activity, the *"little and often"* and avoid prolonged sitting which has adverse metabolic effects over time.
- Learn what benefits your mental wellbeing - is it the moderate intensity exercise that gets your heart rate up or the focus of a Tai Chi class? It may be a combination and your needs may change over time.
- Exercise is not only protective for some cancers in the first place but exercise also improves effectiveness and adherence to treatments such as chemotherapy and radiotherapy.
- Falls and injuries increase if muscles are weak and the frailer you are the more you have to gain from targeted exercises.

Any exercise is better than none, more is better get into the exercise habit.

DVA Physiotherapy Advisers

HOW NOT TO TRIP UP WHEN GOING TO THE SHOE STORE!

We are bombarded by advertising, promises, giveaways and technology when buying anything, and footwear is no different.

I want to outline the possible pitfalls so that you can buy the footwear you want and need, not the footwear they want to sell you.

1. Have a good idea of what you want and, more importantly of what you need.

If you are uncertain do some research or ask for advice before you enter the store. Does the footwear you want really suit the purpose you are buying them for? Many fashionable shoes look great while you are standing, but are not well designed for moving around. Going for comfort is not always the answer either. Footwear needs to have midsole stability to assist stance posture and gait. If you can twist the soling like a wet rag it is way too soft! Shoes need to flex but in the right places usually under the ball of the foot. Footwear that is firm around the heel (good heel counter) is great for stability for young or older feet.

2. What do I want my footwear made of?

Leather uppers* are the best fitting material for all footwear, however the type and finish of the leather will impact dramatically on how it performs for your activities. Leather with glossy finishes will prevent the leather from stretching to the shape of our feet, but also stop it from breathing. Yes we do want our footwear to breathe and to dry out when we are not wearing them. Avoid plastic uppers (synthetic leathers): they never mould to your foot

shape. Fabric uppers breathe well but don't have good weatherproof qualities. Many of your better joggers have well designed fabric uppers that assist greatly with keeping your feet ventilated during activity. Joggers are like most shoes - you do get what you pay for. The better sports shoes are dearer but usually do have better designed uppers, solings and construction.

3. Don't be confused by science and technology.

Footwear is designed to cover and protect our feet and assist in the activity we are undertaking. I am always reluctant to accept clinical advice from a young sports store staff member who has only been trained to take your standing foot pressure or outlines. Get your clinical advice on footwear from your Medical practitioner, Podiatrist, Pedorthist or Physiotherapist. Many of the scans and outlines shown to you in a store may look impressive but are static. We need footwear that is fitted for us to move around in!

4. Get a good fit. This is where your experienced shoe store staff should excel. Our shoe size can change dramatically depending on the time of day, the weather and the brand. Footwear is manufactured in many countries on many different style lasts and fittings - UK, US and European. Resist buying footwear online unless you can try on that exact shoe at a retail outlet. Further complicating the fit is allowing for the use of custom foot orthotics, socks and stockings designed to assist activity or help clinical conditions. Sock technology has improved – yes in leaps and bounds! The right socks can significantly reduce pressure on the feet. Enjoy your next visit to the shoe store.

Steven Williams
DVA Podiatry Adviser

**Uppers – the entire part of the shoe that covers the foot excluding the sole.*



STAYING ACTIVE AND ON YOUR FEET

It's no surprise that exercise is good for us and as we get older, physical fitness is essential for everyday tasks like getting in and out of the chair, carrying the shopping, and playing with the grandchildren. Exercise also helps to manage chronic conditions such as high blood pressure, arthritis, diabetes and depression.

The benefits of exercise, particularly as we age, have been well documented and veterans can ask their GP for a referral to an accredited exercise physiologist (EP) for an individualised exercise program. The EP will also provide you with the skills to manage the exercise program on your own, focussing on staying healthy and active in your own home and community.

Staying active also reduces our risk of a fall, which helps keep us independent and improves our overall health and wellbeing. As we grow older we lose muscle strength and sense of balance which can lead to a fall. The more active we remain, the better the chance of keeping our muscles strong, our joints mobile, and maintaining good balance. Specific activities include dancing, gym sessions, group exercise classes, home exercises, lawn bowls, Pilates, Tai Chi and yoga.

Staying Active and On Your Feet, a consumer falls prevention resource, can be downloaded from: www.activeandhealthy.nsw.gov.au/your-active-and-healthy-guide

This booklet will provide you with information and ideas on ways to reduce your risk of falling and causing an injury or breaking a bone.



DVA's Rehabilitation Appliances Program (RAP) assists entitled veterans, war widows, widowers and dependants to be as independent and self-reliant as possible, and includes the prescription of:

1. exercise pedals as part of an individually prescribed and monitored exercise program; and
2. the hire of a stationary exercise bike, which may be considered for a 3 month episode of care. e.g. post knee surgery rehabilitation in order to improve general strength and fitness.

Veterans can ask their GP for a physiotherapy referral to determine suitability of these items.

The RAP National Schedule of Equipment also includes specific items which can be prescribed by an appropriate health professional to prevent falls in and around your home. e.g. non slip surfacing, sensor lights, retractable garden hose reel. Under RAP, health providers undertake specific assessments to determine a holistic and comprehensive view of your health care needs particularly within your home.

Elvina Weissel
DVA Occupational Therapy Adviser

EXERCISE. ARE YOU TAKING THE RIGHT DOSE?

This edition of MHPE includes articles that demonstrate that any physical activity is good for us however it is important to note that in some cases taking the right dose of exercise may be better for us.

Just like a script for medications there is likely to be an exercise prescription most beneficial for your entire wellbeing. Gaining individualised advice about your exercise needs is particularly important if you have a health condition or concern. Exercise physiologists and physiotherapists are health professionals that prescribe exercises or specific movements as part of their treatment of a condition. An exercise prescription can be used as a stand-alone approach or to complement other health treatments. The exercises prescribed are normally very specific and can provide ongoing benefits for the conditions you have. This means that whilst we agree that doing any physical activity is better than none, there are some specific things you could be doing as part of your exercise approach to better help yourself to recover from or manage a health condition.

Even though physical activity is safe for most people, the following situations indicate seeking a medical or health professional's advice as especially important:

- Any chest pain
- Unusual shortness of breath or any change in your breathing, like wheezing
- Any change in your vision or speech
- Dizziness or a loss of consciousness
- Falls
- Any heart condition
- High or uncontrolled blood pressure
- Ongoing or increases in pain or discomfort

The above health issues don't need to occur only whilst undertaking activities. If they happen during, before or after exercise, it is important that you seek further advice. There is also the sick day rule. If you're feeling unwell with an acute illness like a cold or very elevated glucose readings if you have diabetes wait until you feel better before you continue with your exercise efforts. There are also some situations where your general practitioner or specialist may refer you for an exercise stress-test. These tests help health professionals determine the amount of activity you are safely capable of and how your heart and circulatory system currently copes with increases in activity.

Exercise therapy can also help in other complex health situations. Many specialists will recommend a course of exercise therapy to aid their patient to be in their best physical condition prior to having orthopaedic or bariatric surgeries. This is called prehabilitation or 'prehab'. Clients that undertake 'prehab' often have improved recovery times, decreases in reported pain and fewer complications during recovery. The benefits of exercise are also noted for patients before,

Physical activity is defined as any bodily movement produced by skeletal muscles that results in energy expenditure beyond resting expenditure. Public health guidelines encourage us to be physically active every day.

Exercise is a subset of physical activity. Exercise is planned, structured, repetitive, and purposeful in the sense that improvement or maintenance of your current condition is the objective.

If you have a health condition i.e. an injury or illness, being purposeful with your exercises should provide additional health benefits.



during and after cancer treatments with improvements observed in the patient's physical function and fatigue.

As a general rule, if you have a health condition that is likely to last more than six months or an injury that continues to bother you, consider seeing a health professional for specific exercise advice.

Lyndell Crawford-Round

DVA Exercise Physiology Adviser

Under DVA's Health Card arrangements, exercise physiologists and physiotherapists can be used for advice related to exercise treatments. Such treatments are provided on referral from a medical professional, such as your general practitioner (GP). Treatment by these providers normally involves an assessment of your condition, with subsequent treatments being based on these assessment results. Exercise treatment can help you with your preparation or recovery from surgery, injuries or the management of the health condition. If this sounds like something you are interested in, discussing treatment options with your GP or specialist is the first step.



MAKING OLD BONES



Dr Graeme Killer AO
DVA Medical Adviser

I guess we all want to make old bones. Not just old bones, but good old bones. Wealth helps, wisdom is important, but in the end your health is most important. While we all want health, we want it without necessarily paying for it. The down payment is just too hard or the timings don't suit, maybe next week or next year. As your bank manager would say, there is no return without a good investment. Physical activity is certainly a good health investment, but too often the so called bad health investments that have short term gain look far more attractive. Why stand when you can sit? Why walk when you can drive? There is no time to walk, I am just too busy. I actually love my dog, but I lock it in the back yard because I haven't got time to walk it. The myriad of excuses we use are simple, human and understandable acts of avoidance.

The arguments in favour of physical activity are all well-known and in some ways we are sick of hearing them: decreased risk of health conditions such as stroke, elevated blood pressure, heart disease, diabetes, depression, osteoporosis etc. The World Health Organization has identified physical inactivity as the fourth leading factor in global mortality and 3.2 million deaths per year are attributed to that cause. Added to this picture is the global epidemic of obesity. In Australia 2 out of 3 adults are overweight or obese and 1 in 4 children are overweight. Unfortunately obesity has become a family affair.

Sedentary lifestyle is just about top of bad health news week. The earliest research in this area on the links between physical inactivity and heart disease was on London transport involving bus drivers and conductors. Surprise, surprise, the conductors who walked up and down the aisles collecting fares had a lower incidence of heart disease than the bus drivers. The other question that is often posed in relation to exercise is, what happens if I cannot stick to a regular exercise routine? In the first instance, any exercise is a good idea, but importantly, we start losing muscle mass after only two weeks of inactivity. Two weeks out of our routine and we are in catch up mode and it can be hard to get our routine and fitness back. Imagine the impact of a six week layoff after surgery or illness. One of the problems of early space travel for the astronauts, was loss of muscle mass and bone density in the weight less environment and as a result exercise bikes became standard kit in the space laboratory.

To put things into perspective, physical activity is clearly very important for our health but should not be looked at in isolation. Not to mention diet would be an important omission. Recent evidence suggest as we get older we need more protein in our diet and dietary choices are important for all ages. Mental health and wellbeing sits at the other end of the health equation. If you are going to make old bones particularly good old bones try and find peace of mind. This thought brings to mind a few words of song writer Jez Lowe

*When I was young my father said to me
He said never take advice when it's free
Cause you have all the riches of the golden kind
But without the riches of your peace of mind
You won't make old bones
You won't make old bones you'll see*

THE RISE OF THE WEEKEND WARRIOR

Too busy to exercise, long work hours, time with kids, or just too tired most days to go to the gym/run/walk/ride? Hate early starts? Welcome to the world of the Weekend Warrior (WW).

There are many other forms of WW: middle aged (mostly) blokes who become rock legends in a mates garage, those who party hard at the weekend, and some use the term for ADF Reservists.

The WW I am thinking of dons Lycra, running shorts, kayaking gear or expensive cross-trainers and clocks up many hours on Sunday. Week's exercise done, far surpassing the government guidelines of 75 to 150 minutes of vigorous intensity physical activity per week. What's the problem?

Many people have few options in getting sufficient exercise other than being a WW. For the young and fit, it can work well. But if you are carrying a spare ten kilos, don't exercise regularly

or are on the wise side of 30 and get a call from a mate to 'smash out a few hours' on the bike/track/water/weights, consider:

- Have you seen your GP in the last 12 months?
- Did you ask your GP about exercise, and what was appropriate?
- Have you got any 'niggles'?
- Are you properly equipped (there is a reason for unattractive bike shorts)?
- Are you properly prepared for the nutritional demands of your workout?

The latter is often overlooked, or sometimes over-compensated. Plan a low GI carbohydrate breakfast prior to exercising. The most important thing is water, regularly, before you get thirsty. After that you can purchase heavily marketed products or instead

pay off those expensive shoes. Unless you are doing long WW sessions, sweating heavily or exercising in hot weather, you won't require colourful sports drinks. Or if needed, they are much cheaper in powder form. Most distance road cyclists have a banana in the jersey for the turn around. Protein shakes and bars afterwards to build muscle? Try adding a few spoons of skim milk powder to a low fat milk smoothie for a protein hit. If the goal is weight loss and you reward yourself and your mate after a two hour workout with a couple of café lattes and a muffin each, you will have made little ground.

What's the evidence being a WW works? Some people can exercise effectively as WWs and maintain excellent fitness (annoying, aren't they?). In a British study of over 63,000 people over 40, just 1-2 sessions of moderate activity totalling more than 150 minutes per week, or more than 75 minutes a week of vigorous activity, significantly reduced the risk of death from cardiovascular disease and cancer.

Don't take up your mate's offer yet. See your GP. Set a 12 week goal of gradually increasing your exercise tolerance, learning what works for you, and what you enjoy. Then perhaps you can join your mate as a WW. And don't feel constrained to just the exercising WW: rediscover your talents on garage guitar, or join the Reserves.

But definitely don't procrastinate on the couch, fretting about weight gain and heart problems. That's a Weekend Worrier.

Tony Hoare,
DVA National Health
Promotion Adviser



FIGHTING FIT



Ashley Durham

INJURED IN NIGHT NAVIGATION TRAINING

On night navigation at Kapooka, the guy behind me didn't quite stop in time, bashed into me, I went down the embankment and went end over end. My foot went out to stop the roll and the arch of my foot just flattened.

It was hoped that the bone would fuse on its own, but because of what happened to all the soft tissue tendons around the bone, it was being pulled apart and wasn't able to join the bone by itself. So I had the screws put into the arch of the foot to hold it together to fuse. After that initial injury, I went to 1HSB (Base Hospital Holsworthy Barracks) and the cartilage had got to the point where the tendons had shredded. After that the screws came out ahead of schedule because they had moved in the bone itself and they didn't want to cause a re-break. An arthroscopy was done on the ankle with half the cartilage in that ankle being cut out as well.

FACING A MED CLASS 4

I wasn't happy about it. I wasn't happy at all, because basically I went straight out of school into the military because that was all I wanted to do. So I was a bit disheartened by that fact. But what was really disappointing was that they decided that, such was the injury, I wasn't going to be a candidate for standby or active reserve, and unless I could prove beyond any shadow of a doubt that the injury was gone then I wasn't going to be able to re-enlist. Even nearly 12 years later now, my injury is still there so I'm not going to be able to re-enlist in the future.

REHAB IS CHALLENGING

As far as rehabilitation goes, I have always seen it as a challenge and I enjoy that part, and while it's been a hurdle I've enjoyed getting into it and proving to myself that it is something I can take on.

The hardest part was going from doing whatever I want whenever I want physically to having to know where to draw the line. That has been a bit difficult because you want to get moving, you want to do something that you used to be able to do and having to reign yourself in has been pretty challenging.

MY SUPPORT NETWORK GOT ME THROUGH

Family for me was a major benefit, they tried everything to get me to the level to help me progress through it. My partner has been very supportive. I think she worries more than me about my injuries and I keep telling her to stress less about it. She is always making sure that I'm not pushing it too far or, if I am pushing it too far, she orders me to stop and take a break, so I can't argue with that. Despite that, she has been great about it.

ENTERING THE CIVVIES SECTOR

With the Med Class 4 they decided they would organise my rehabilitation after I had discharged and entered the civvie sector. My physical rehabilitation and Return to Work started about 2 or 3 months after I discharged.

I was in Bathurst and, because of the size of the town and my limited experience, I bounced around a few retail jobs. I really didn't want to do this at the time, but they were my options because I lacked experience. However, I was also reeling from the fact that I couldn't be what I wanted to be anymore.

MAKING THE MOVE TO ALBURY

Albury was a place I had been posted before, in Latchford, so I knew the population was a lot bigger. Job prospect wise it was a bit better because in Bathurst there were more jobs that involved load bearing which I wasn't able to do. I had an idea of what was around and I could focus on areas that I knew was within my ability.

FITNESS IS MY PASSION

I started out at the Wodonga Sport and Leisure Centre for about 18-19 hours per week. My medical conditions restricted me because the foot wasn't doing what it was supposed to be doing so currently it is back down to 12 hours per week.

I faced the challenge of not being able to physically finish my Personal Training course but, having the opportunity to work here and learn new skills, persevering has allowed me to finish the course. I also know how to do many other tasks around the place. Now that I have persevered and asked questions, I started the Work Trial here and now I'm back on track working in an industry I'm passionate about.

A major motivation for me to finish my certificate was to acknowledge that, due to my injury, I can now focus on rehabilitating others like myself who have lower leg injuries or any other injuries for that matter. It gives me the personal experience to help others who have similar injuries, whether they are younger or older clients.

STAYING POSITIVE

I think the major thing for me was staying positive. There was a period there where I did kind of let it get me down and I got in a bit of a state where I didn't want to do anything or go anywhere. When I look back at that now I realise that during that time I could have made a lot more progress if I had actively gone out and been more positive about my recovery. As difficult as it is sometimes, my advice is don't give up on it and take any opportunities you are given because it can be just that one thing that changes your whole outlook.

For more information on DVA Rehabilitation services go to <https://www.dva.gov.au/health-and-wellbeing/rehabilitation> or contact DVA on 133 254 (metro) or 1800 555 254 (from regional Australia)

EAT WELL



EVERYDAY NUTRITION

The most powerful sports nutrition principles are not related to food surrounding your exercise, but what you eat every day. You can have all the supplements, pills and potions around your exercise, but if you are not putting real food first in your standard everyday diet you won't get the full benefits. There is a lot of advice about healthy eating, but one thing agreed upon is the importance of eating vegetables or salads at least twice per day (5 x serves) and eating two serves of fruit per day. During high intensity exercise and recovery or to increase weight for medical reasons, refined carbohydrates and sugars along with alcohol and fried foods should be enjoyed as treats at celebrations rather than an everyday feature.

FLUID

There are no set rules on how much you should drink throughout the day, as long as your urine is clear. Being dehydrated can be detrimental to your health along with sporting performance. All fluids add to your fluid intake including tea and coffee. Caffeine has small dehydrating effects, but normal strength teas and coffee still add positively to your fluid balance. As we get older, our thirst mechanism becomes less sensitive to our need for fluids. Drinking at regular intervals during the day and ensuring your urine is clear are useful yard-sticks.

Whether you've just started exercising, or you're a seasoned athlete, the benefits of adopting sports nutrition principles and good eating behaviours are well established. What we eat before, during and after exercise not only helps us perform better in our workout, but also allows us to have more energy throughout the day, promotes lean muscle maintenance and improves our overall health.

As a young person, sport ruled my life. I would describe myself as an athlete and had success at a National level in swimming and surf lifesaving. Fast forward 15 years, and I decided to jump back into the pool, and set myself the goal of swimming the English Channel. Even though, by this stage I had over a decade's experience in sports nutrition, I reverted back to my "she'll be right" attitude towards what I was eating,

and I was amazed at how tired I was and how long it took me to recover. "This is harder than I remember" and "I'm getting too old for sport" would run through my mind. More than once, I considered going back to my 'retired athlete' ways. I knew I wasn't alone. I met lots of people who were in physically demanding jobs such as those in the Defence Force, who also neglected nutrition when they got back into exercising and training. I gave myself a good talking to, and decided to apply to my own training some of the sports nutrition principles I applied to my athletes. It worked. With good nutrition, I was able to work, spend time with my family, socialise and train more efficiently.

EXERCISE WELL

BEFORE EXERCISE

You can choose to exercise without eating anything beforehand, but this may impact the amount of energy you have while you are working out, and your ability to recover afterwards. If you are finding the end of workouts difficult, or finding it hard to recover, having a quality snack before exercise may be helpful. For many people, simply timing exercise around meal times can mean you can have a meal and then head to your exercise session. For others, a snack like fruit, whole grain crackers with vegemite, oats or yoghurt are good options. Experiment with the timing; if you eat too close to your exercise, it may not sit so well in your stomach. If you are planning a race or participating in an event, pre-competition nutrition guidelines are a little different, and you should work with an Accredited Sports Dietitian.

DURING EXERCISE

For most workouts, drinking water is enough. If you are sweating heavily, including an electrolyte supplement will help keep you hydrated. If your exercise is long (over 90 minutes) or high intensity you may benefit from having a sugar and electrolyte containing sports drink. If your dietitian or doctor is concerned about you losing weight, or you want to put on weight from exercise, drinking kilojoule containing drinks may also be helpful to counteract the energy you are expending.

AFTER EXERCISE

If you go into exercise sessions without eating anything before or during, having something with protein and carbohydrate after your exercise will help you recover well. Recovery foods can be as simple as a cup of milk, tub of yoghurt or your normal healthy meal including high protein options such as meat or meat alternatives, cheese or nuts and seeds. A general rule is about 20g of protein which is found in approximately 100g of meat, or 2 dairy serves. Protein supplements are not necessary if you can get protein from real food, but they can be convenient so make sure you always have something in your sports bag.

BEFORE BED

Recent research has found, including a protein snack or supplement before bed is beneficial to promote lean muscle recovery, repair and growth overnight. The recommendation is 0.25g/weight per kilogram (kg), so between 15g and 30g will cover most people. You can reach this goal through dairy snacks like yoghurt, smoothies, cheese or milk, nuts and supplements such as whey protein isolate. Take one serve, just before bed.

Overall, eating to support your exercise isn't difficult. It just takes some planning and being conscious of how different foods affect your training everyday energy levels and recovery. Although the above are general principles, sports nutrition success are best through personalised recommendations. To find out what the best options for you are, look for an Accredited Sports Dietitian near you, or online.

Tara Diversi

DVA Dietetics Adviser
Advanced Sports Dietitian &
Accredited Practising Dietitian

Accredited Sports Dietitians work with individuals or teams to optimise sporting performance through targeted nutritional strategies, which include:

- **Planning what you eat and drink during training**
- **Increasing muscle mass**
- **Body composition for sporting performance and general health**
- **Hydration and sweat testing**
- **Supplement advice**
- **Race or game day nutrition plans**
- **Recovery nutrition**

FIT AND HEALTHY VETERANS' HEALTH WEEK 2017



PHYSICAL ACTIVITY

21 – 29 October 2017

AN AUSTRALIAN GOVERNMENT INITIATIVE

Veterans' Health Week (VHW) is an annual initiative where DVA partners with ex-service and community organisations to;

1. increase the health awareness of current and ex-service members and their families, and
2. encourage behavioural change leading to improved health outcomes.

This year, current and former serving personnel have taken up the challenge to hold activities during VHW that promote the importance of physical activity. A range of activities including competitive sport challenges, walking tours, presentations on how to exercise safely, gentle exercise sessions and 10K Steps launches will be held nationally during 21-29 October, 2017.

The Week will emphasise the physical, mental and social health benefits of physical activity. We hope the activities will encourage members of the veteran and ex-service communities and their families to enjoy being physically fit and active.

An important feature of VHW for 2017 has been the requirement to ensure all activities focus on the theme of physical activity. In addition, many activities have been designed to include hard to reach groups and participants, and to establish partnerships with other organisations. These activities will reflect the inclusive nature of VHW, and the goal is to ensure physical activity becomes a part of everyday life and not just something that is done during VHW. DVA thanks all ESO and community groups for providing a wonderful range of activities for veterans and ex-service communities and their families during VHW.

To find out what activities are happening in your area, check the listings of activities on the VHW website (<http://www.dva.gov.au/health-and-wellbeing/health-events/veterans-health-week>) or call 133 254 or, for regional caller, 1800 555 254.

We look forward to seeing you at an activity and we hope you enjoy VHW 2017.

NON-LIABILITY HEALTH CARE

Accessing mental health care through DVA is now simpler than ever for current and former members of the Australian Defence Force (ADF).

Anyone who has at least one day of full-time service with the ADF can now access treatment for any mental health condition through DVA's Non-Liability Health Care (NLHC) program.

NLHC provides access to treatment for certain conditions under DVA arrangements, without the need to link the condition to a person's service and without needing to make a claim for compensation.

Previously, mental health care under NLHC was limited to post-traumatic stress disorder, anxiety disorder, depressive disorder, and alcohol

and substance use disorders. The 2017-18 Budget included a measure to expand these arrangements to cover treatment for any mental health condition.

This measure builds upon the 2016 changes, which expanded eligibility for mental health treatment under NLHC, and simplified the process of making an application.

Applications can be taken over the phone (133 254, or 1800 555 254 for regional callers) or by email (NLHC@dva.gov.au), or through a paper or online form available at www.dva.gov.au.

Applicants need to satisfy proof of identity requirements, and ADF service will need to be confirmed.

For further information, including links to Factsheets and application forms, please visit www.dva.gov.au/nlhc.

An Australian Government Initiative

**HAVE YOU HAD
FULL-TIME
SERVICE IN THE
ADF?**

MASTER YOUR GAME



When I was a schoolboy I dreamed of playing cricket for Australia. Until I was 64, running was never a similar fantasy. One year later, entering the finishing straight in the 4 x 400 metre relay, the call from the Italian announcer is “Owstrahlee-ya!”, the shouts from the grandstand are “Go Ozzie, GO!” and the gold patch on my chest says AUS.

Most of us played organised sports at school or when we were younger. We enjoyed the exercise and the skills we learned. We loved the mateship, and we loved winning. Now we may look back with fondness, and perhaps a little pride and indulgent exaggeration of our past prowess. “Coulda’ been champions” resonates all too clearly.

Well, now’s your chance-whatever the sport you used to enjoy, or are sure you “Coulda” if given a decent shot. It may not be too late to revisit the thrills, the agonies, the sweat, toil, glories and damn good mates of competitive sports. The Masters movement now provides opportunities to compete in your preferred sport with (against?) people of your own age.

There is a Masters Association for nearly every individual and team sport, with competitions from local club to international level catering for over 50 different sports in age groups from 30 to 100 (!! years. Anyone can join up and have a go: the emphasis is on “Fitness, Fun and Fellowship” as the swimmers say it.

This is not to say that Masters sport is casual. Matches and carnivals are conducted according to the same rules as apply to elite youngsters (with a few concessions to ageing joints). Competition is whole-hearted at every level and victories, records and PBs are duly recorded and honoured. A huge difference from “junior” sports is the general absence of qualifying standards and selection trials: the mantra is “if you are old enough you are good enough”, so just about anyone can have the thrill of representing their State, or joining the Australian squad at a World Games.

In Masters sport, each individual is held responsible for doing the necessary training to compete safely. ***A medical check-up is obviously wise and it may take a year or several to get into the right shape***

to really test yourself, but that can be a super journey in itself. True, for the “85 and overs” a first-aid buggy might follow the field, but is very rarely required. You also have to provide proof of your age, but-hey! - getting older can mean you become the young gun in the next age division, with fresh hopes of gold medal glory.

How do you get started? Look up “Masters” and your chosen sport on the internet, and there will be a link to a local club or association. Most sports require registrations with the State or national body, and there are some membership fees to cover organisation, insurance and the like, but these are set at ‘pensioner’ levels.

Masters sport can be a great vehicle for regaining fitness, the joys of great games with people of your own age and standards, opportunities for travel, and perhaps even a chance to stand on a podium somewhere and sing the Anthem.

Dr Tony Ireland, PhD
DVA Medical Adviser

ADAPTIVE SPORTS LEADING THE WAY!



Being physically active is important for both our physical and mental health. Being active holds different meanings for different people. For Jeff Wright it means competing with team mates in a number of adaptive sports.

Townsville is currently leading the way in adaptive sports at a local level with a Friday night local wheelchair basketball league. This league consists of members from veteran groups, defence and civil community groups. This league offers participants an avenue to be physically active and connect socially in a fun and safe environment. It also offers an athletic stepping stone for competing at higher level such as representing at a regional, state and national level.

Interview – 10 questions with Jeff Wright

Jeff served in the Army for 20 years and the Police Force for 5 years. Jeff was severely injured in a high speed motorcycle accident in 2015 resulting in spinal, head and facial injuries as well as a broken elbow and ribs. In April 2016, after discussions from the specialist and physios to participate in adaptive sports he decided to give it a go at a Thursday night 'come and try' wheelchair basketball game, where he has never looked back.

1. What attracted you to compete in adaptive sports?

I have always had a sporting background growing up with playing touch football and basketball. My days would start with a jog up Castle Hill (Townsville Iconic Landmark). After my accident I was 8 months post injury, attending rehab every day and had been in my wheelchair for 6 months. I decided I needed motivation to get out and do things on my own. I surrounded myself with the right people in terms of physios, doctors and specialists. I told them to 'challenge me, because I was sure going to challenge them'. That's where the adaptive sports came in. Since my first game in April 2016 I have been hooked ever since. I have been very fortunate to have the support of a solid team including family and friends who have supported my athletic journey from the start.

2. What athletic level have you reached competing in adaptive sports?

I have competed in wheelchair basketball at a local level in Townsville at Mates 4 Mates and through the Townsville local league competition held every Friday night. From there I represented Townsville at a regional level where I competed against Cairns, Rockhampton and Mackay again in wheelchair basketball. I then went further to captain Queensland in the State of Origin Series in 2017 in wheelchair rugby league which then lead me to where I am now which is representing Australia in the September Invictus Games in multiple sports including wheelchair rugby, wheelchair basketball and swimming.

3. Tell us a bit about your training regime.

At present, I train 6 times a week, totalling about 10 hours a week. Consisting of a combination of skills, conditioning and competitions. I focus my training on a particular sport depending on the upcoming events.

4. Why do you think it is so important for veterans to be physically active?

It keeps your mind active, gives you power to make better choices for the day and works on stopping inner voice insecurities. You need to take time for yourself and be socially connected to other people such as team mates.

5. What advice do you have for someone who wants to start being involved with adaptive sports?

Just try it, because it can change your life. I believe it brings people out of the dark and back into the light. It's not about winning medals or representing Australia. It's about getting involved, having fun, making commitments and meeting other people with similar interests.

6. Do you have a favourite adaptive sport? If so why?

I would have to say wheelchair basketball. I think wheelchair basketball requires more skills and is most challenging. I also find there is a lot more opportunity for further development in this sport due to the higher number of tournaments and competitions.

7. Why do you think it is so important to have adaptive sports available for participants at a local level?

It's an opportunity for more people to be involved and allows for positive social connections and networking that goes beyond sports. The cost to compete at representative level can be quite expensive so not everyone can afford to participate. Local level is a cost effective way to be involved and have fun.

8. Do you think the awareness and participation around adaptive sports is increasing?

Yes definitely, especially in Townsville. The media has such positive good news stories to promote adaptive sports locally, it's great exposure for the sport. It really focuses people's attention on the athlete and the sport rather than the disability which I think is a highlight. We tend to appreciate and celebrate the skills of that athlete which is how it should be.

9. What positive outcomes have you benefited from by being more physically active?

Lots of benefits, including health, good mindset, exposure to the community and supports people dealing with their own problems. It really keeps your mind clear from a dark situation.

10. Lastly, I have to ask, what was it like meeting Prince Harry?

(Laughs) Excellent. He is a really nice fella. We had a bit of a joke and laugh. I did tell him that Australia was coming to take the gold medal from them in wheelchair basketball, which he replied that he would let the team know!

Carly Newton,
DVA Community Support Adviser
and
Jeff Wright



on the road again

A STORY OF GETTING BACK ON THE BIKE



In early 2008, I was diagnosed with a very serious illness called Group A Streptococcus (GAS) Toxic Shock Syndrome Multi-organ Failure in which I was given a 10% survival rate.

I was put into an induced coma in the Townsville Base Hospital for about five weeks. On the 14th day of my illness, it was suggested to my wife Karen to amputate both of my feet below the knee as I wouldn't survive much longer in ICU.

A week before my 44th birthday, I woke up, looked down, and saw my hands were covered in bandages and the space where my feet used to be. Before the illness I weighed 115kgs and was 190cm tall. After the surgery I was less than 60kg and 152cm.

Before my illness, I loved playing indoor/outdoor cricket, touch footy and other contact sports like rugby and league sports. I'd also spend time with my family walking and bike riding in national parks.

After the illness, I was invited to be a part of a new program for Army called Army Adaptive Sports Program which started in late 2009. This was also the time that the 2008 Paralympics was on, and I started a rehabilitation and ADF Sports Policy progress to play Wheelchair Basketball in Townsville. This is when I first started playing adaptive sports.

I was lucky enough to have this adaptive sport approved by the ADF and then I got involved in many adaptive sports such as: wheelchair racing, sit skiing and seated throws of shot put, javelin and discus.

Adaptive sports are very good for rehabilitation as they assist people with serious injuries back into the community and to reconnect with their family.

I wanted to get back into bike riding with my two children and wife when they were on school holidays or on the weekend. I was told that due to all the scarring it would be unhealthy to ride a normal bicycle so I decided to apply to DVA for a hand cycle.

At the time of my application, adaptive rehabilitation or sports equipment weren't available for DVA members so my application was unsuccessful. I decided to advocate for these items to be made available and eventually the list of available items was expanded. I now have a hand cycle and am preparing to climb Mt Kosciusko in February 2018 with my Scouts troop.

Dennis Ramsay

RECREATIONAL PROSTHETICS AND ADAPTIVE SPORTS AIDS FOR VETERANS

The Department's Rehabilitation Appliance Program (RAP) provides veterans with aids and appliances that help them take part in a range of activities enhancing quality of life and maximising independence.

The RAP National Schedule of Equipment has recently been enhanced to include a range of recreational prosthetics and adaptive sports aids. These include: upper limb prosthetic attachments to enable participation in recreation/sports e.g. swimming freestyle aid, basketball hand and adaptive aids for archery, fishing, cycling, golf, weightlifting, volleyball, pool/billiards. Minister for Veterans' Affairs, Dan Tehan has reinforced that "adding a prosthetic recreational sports aid category will

allow eligible veterans to access items to help get them back playing sport and being active."

Equipment to facilitate participation in sports without the use of a prosthesis has also been added e.g. sports wheelchairs for basketball or tennis, or competitive hand cycles.

Eligible veterans can access such items by asking their GP for a referral for an assessment by a specialist whose detailed assessment will provide evidence of the veteran's physical attributes, functional capacity and a commitment to perform the activity/sport on a regular basis. Following the assessment, approval will be sought from the department and delivery of the clinically required items arranged.

Information about RAP can be found on the DVA website: www.dva.gov.au/health-and-wellbeing/home-and-care/rehabilitation-appliances-program-rap or by calling 133 25 or 1800 555 254 (for regional callers).

'Playing sport and exercising regularly is good for physical and mental health and it's a fun, social activity, so helping veterans get active has many positive benefits.'

Minister for Veterans' Affairs,
Dan Tehan.

DO WEARABLE DEVICES IMPROVE YOUR HEALTH?

Fitbit, Garmin, and Misfit are just a few of the wearable devices that seem to be ever popular today. These devices can do a range of things from counting steps, measuring heart rate, counting calories and even tracking your sleep. The question is though, do these sleek and sophisticated pieces of technology really assist us to improve our health? A recent study published in *THE LANCET Diabetes and Endocrinology* saw an international team of researchers tracking 800 people from Singapore aged 21 to 65 to see whether using such devices improved their health.

The researchers studied four groups over the course of 12 months: A control group with no wearable device, a group with a Fitbit, and two other groups with a Fitbit and a cash incentive for themselves, or donations to charity during the first six months of the trial.

The researchers found only the cash incentive group had increased their level of activity over the first six months of the trial. Interestingly, at the end of the 12 months the cash incentive group had returned to the same level of activity they had recorded at the very start of the trial.

The researchers found that whilst the Fitbit user's overall physical activity had increased slightly over the six month trial, it was not enough to produce any measurable changes to health outcomes. They found no evidence the wearable devices promoted weight loss, improved blood pressure or increased cardiorespiratory fitness.

Even though the research on wearable devices is in early stages, it is worth considering whether spending a couple of hundred dollars on these devices is really helping to improve our fitness.

You may want to consider cheaper devices such as a pedometer.

What motivates us to exercise is a complex mix of thoughts and behaviours. It is definitely worth reflecting on ways we can increase our physical activity if we are hoping and wanting to improve our health.

Source: <https://www.theguardian.com/society/2016/oct/04/fitness-trackers-do-not-increase-activity-enough-to-noticeably-improve-health>

Nardi Ling

DVA Community Support Adviser
Qualified personal trainer and fitness instructor

EXTENDING THE LIMITS

Are you looking to upscale your workout or achieve a new fitness goal? This article will examine two different types of training programs, the benefits of undertaking each, and provide some advice on how to prepare for them and train safely and use them well.

The Marathon

Many people think that the marathon is something that they would never be able to do. However with enough preparation time and a good training program the marathon is possible for many, and finishing the course is a great personal achievement.

For absolute beginners to running it is suggested that you build up your running first for at least six months, ideally running at least four times a week. You should be able to comfortably run 5 kilometres (km) before undertaking the specific training for a marathon. Marathon training involves many elements over several months and there are no short cuts. Here are some of the key issues:

1. Get the necessary medical check-up before starting out
2. Complete at least six months of preliminary regular running, as above
3. Get advice from an experienced distance runner or coach
4. Follow a tested schedule of gradually increasing "mileage" *
5. Be careful not to step up distance or intensity too quickly.
6. Perhaps have some race practice in fun-runs or half-marathons

7. Get to know the race course- include appropriate hill running in training
8. Follow an approved diet plan for training and especially for competing
9. Obtain and 'break in' footwear and clothing which is supportive and comfortable
10. Know when to ease off or take a break: rest days are essential.

* Training programs usually involve a mixture of distances and speeds- a weekly long run which progressively approaches the magic 42.1 K and shorter faster runs which build resistance to the demands of the race. Training progressively increases the capacity of the heart and lungs to deliver oxygen to our muscles (aerobic or 'cardio' fitness) and also condition our legs and other machinery to cope with the loads of the long journey.

If you follow these key points, listen to your body, and practise good nutrition (see story on pages 20-21) you should be able to complete your very first marathon!



High intensity cross-training programs

High intensity cross-training programs, such as CrossFit, involve high intensity interval training, body weight exercises, Olympic weightlifting and more. The strength and conditioning components of these programs also help to develop muscle strength and increase bone density. The programs also encompass plyometrics, which are advanced activities (such as box jumps) used to develop power, which is particularly useful for athletes or sports people who want to increase their abilities. These programs can be a fairly intense activity so it's important to consider whether you are

HIGH ENDURANCE AND HIGH INTENSITY EXERCISE



ready to take on this form of exercise. They are meant to be adaptable to all fitness levels, and a competent instructor should be able to inform participants of a program to suit their fitness levels.

Key points:

Base fitness – These programs are adaptable to suit beginners by changing the load, number of repetitions, length of session etc. If you have been inactive for a while it is recommended you build some base fitness first before undertaking this activity. You should also visit your GP before starting.

Safety – Because these programs can be quite strenuous ***it is important to make sure you have a reputable instructor who has been appropriately trained.*** Don't be afraid to ask what qualifications the trainers have or to see evidence of their certification. If you are a beginner you should also ensure your trainer is approachable and you are able to ask for help in adapting the load, length, or intensity of the activity to meet your needs.

Nardi Ling

DVA Community Support Adviser
Qualified personal trainer
and fitness instructor.

Before beginning any exercise program, you should be sure it is safe to do so. It is suggested that you consult a physician before beginning a new exercise program or substantially increasing your physical activity.

LIFE AS A HAMSTER



When I reported missing heart-beats to my GP, he had me in monitoring equipment for 24 hours. I was walking around with coils of wire and a bulge scarcely concealed under my summer shirt, waiting for "Stand still, and keep your arms away from your body!" from armed gentlemen in black armour and helmets.

He next sent me for a treadmill test. I had done one before, when I cycled to work and was younger. They were going to jack it up until they got a stress reaction. After twenty minutes they told me to go home and stop wasting their time.

But this was now. Wires attached, I clambered up onto it. Walking on a moving belt felt strange. They turned it up until I started running, but told me I couldn't hold the handles, and not to drop back on the roller. I'll run over broken ground, but balancing on that was a nightmare. And if I fell I would take the wiring with me.

I kept it up for 12 minutes and a reasonable pace, but stopped when I wasn't sure I could stay on. They recorded it as 'stopped from exhaustion' – cheek! Results were inconclusive, and the missing beats returned, so it was another puzzle for my GP.

But I've had treadmills - life as a hamster is not for me.

Chris Clarke, DVA

I never was keen on treadmills. I used to pass those long well-lit windows of people in special clothes, running on them as though an advertising display for the gym and the clothes. They looked sweaty, uncomfortable, crowded, and going nowhere.

The last time I really ran, apart from for buses, was in snow. When I wake up to snow on the Canberra hills on a winter Saturday morning, I head off to walk up into it, for the way it transforms the landscape, and everyone up there is snow happy. This time as I got into my stride, my body starting saying "I want to run."

"Don't be silly," I said back, "You are in heavy clothes and climbing boots, and going uphill, and the whole idea is to enjoy the stillness and the peace."

"I don't care, I want to run."

So I jogged for a bit just to get it out of my system. But I kept running, all the way up the track into the snow, and then back down, over an hour. Well, I used to be a cross country runner – though the 'used to be' gets longer every year. It felt good, the easy loping style was still there, the hungry muscles bit into the hill. But everyone thought I was crazy. I thought I was crazy. And a little voice in the back of my head was saying "You'll regret this!"

Next morning I tried to get out of bed. My legs had turned into tree branches, with roots growing into my back. It was agony for two weeks. I kept telling myself I didn't regret it, but knew better.



KEEPING YOUR MIND ACTIVE

Challenging your brain with puzzles and games can keep your brain active and improve its physiological functioning.

EXTRA CHALLENGING WORD SEARCH

Words can run forwards, backwards, up and down and diagonally in the grid.
Letters may be used more than once.

FITNESS

NUTRITION

ENDORPHINS

RECOMMENDED

REGULAR

FOOTWEAR

BALANCE

EQUIPMENT

MODERATE

THERAPY

WARRIOR

REHABILITATION

SPORTS

SEDENTARY

FREQUENCY

ATHLETIC

FLEXIBILITY

STRENGTH

ADAPTIVE

PHYSICAL

ACCUMULATE

TRAINING

VIGOROUS

INTENSITY

ACTIVITY

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| R | N | X | S | C | N | H | T | Y | T | W | M | E | N | M | Q | W | T | Q | Q |
| E | N | P | O | X | I | I | E | N | J | Q | T | I | M | U | V | Y | R | Q | Z |
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| E | A | Q | A | I | T | E | S | A | T | X | Y | T | I | S | N | E | T | N | I |
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| L | U | R | E | T | E | B | F | L | E | X | I | B | I | L | I | T | Y | K | Z |
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| F | A | F | S | H | Q | R | Z | X | C | I | T | E | L | H | T | A | S | Q | R |



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TAKING ACTION WITH YOUR COPD

Chronic Obstructive Pulmonary Disease (COPD) is an umbrella term for a number of lung diseases that can make breathing difficult. This includes emphysema and chronic bronchitis.

Even though COPD is a long-term condition, there are things you can do to slow the disease and improve your day-to-day life.

Using the following tips, take action and be prepared:

Tip 1: Make sure you have up-to-date flu and pneumonia vaccinations

Having the flu is a serious illness and can be life threatening when you have COPD. Have a flu vaccine each year to reduce your chances of getting the flu and being seriously unwell. Having COPD also puts you at a high risk of getting pneumonia. Talk to your doctor to see whether your pneumonia vaccination is up-to-date.

Tip 2: Take steps to quit smoking

If you have COPD, and you smoke, the single best thing you can do is to quit smoking. Stopping smoking slows down worsening of COPD symptoms. Talk to your doctor and pharmacist about the options for quitting. For support to quit and a personalised quitting plan contact the National Smoking Quitline on 13 7848 or at www.quitnow.gov.au

Tip 3: Attend a pulmonary rehabilitation program

Research has shown that pulmonary rehabilitation is highly beneficial if you have COPD regardless of the stage of the disease. It will help you to breathe easier and help keep you out of hospital. Those who have attended a program have found they can resume many of the activities they had stopped because of their breathlessness.

What is it and how does it work?

The program combines exercise and education to help you to start to move more. The exercise program has safe, gentle and supported activities tailored to your current ability. You will gain the confidence to make exercise a part of your usual routine. Learning more about COPD can help you to find out about everyday ways to help control your symptoms. For example, you might learn more about how to reduce your breathlessness. Your confidence will grow and you will also get to meet other people with COPD.

Who is it for?

Whether you have just been diagnosed or you have more severe symptoms, pulmonary rehabilitation is recommended for every patient with COPD.

How do I access it?

Talk to your doctor about how to access a program or visit www.lungfoundation.com.au/patient-support/living-with-a-lung-condition/pulmonary-rehabilitation-2

Pulmonary rehabilitation

- increases your knowledge of COPD and your ability to manage it
- you will find it easier to do daily tasks and the things that you enjoy
- you will get to meet other people with COPD

Quitting smoking

- improves your lung health
- slows down the progression of COPD

Up-to-date flu and pneumonia vaccinations

- reduces your chance of a flare-up, serious illness or having a hospital visit

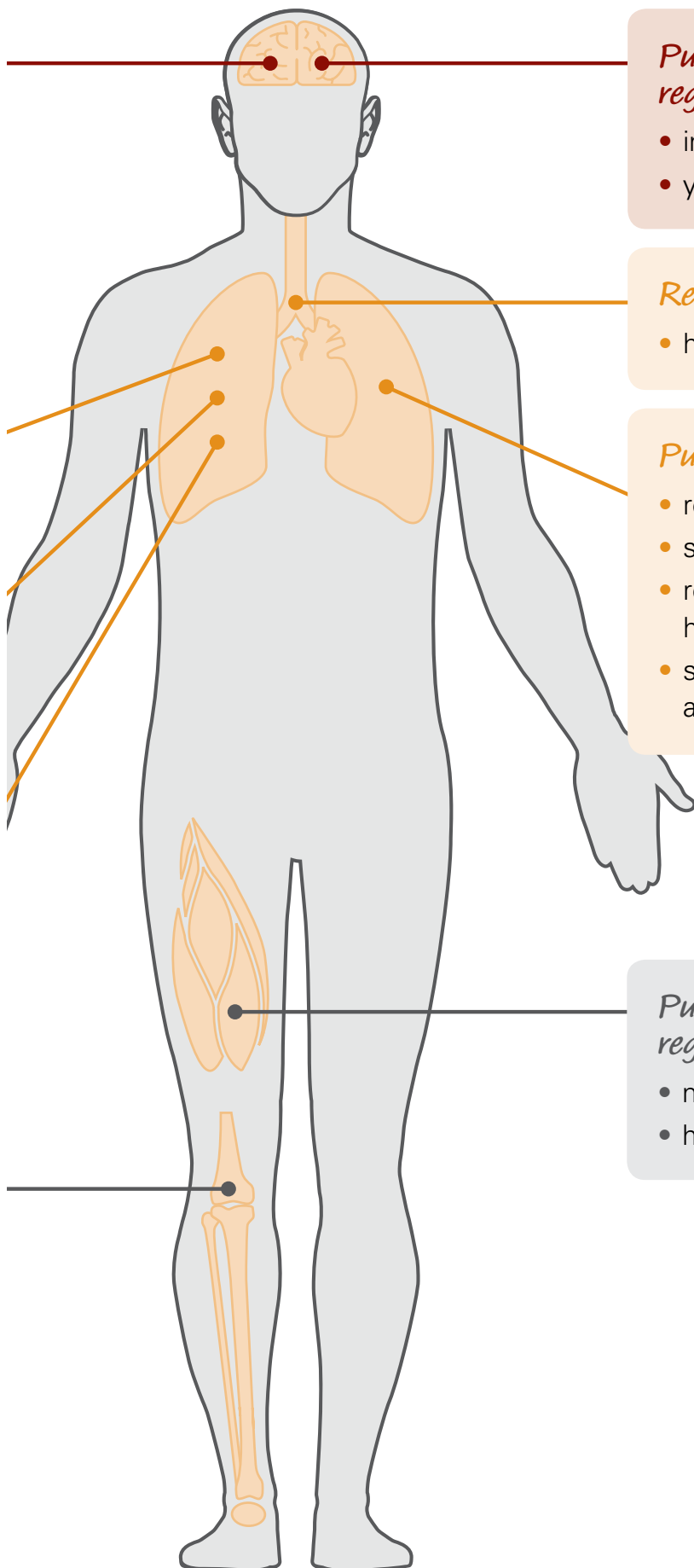
Managing your inhaled COPD medicines well

- helps to reduce your COPD symptoms, flare-ups and hospital visits
- reduces side effects

Regular exercise

- improves your bone strength
- reduces joint pain
- improves your balance

How taking action can improve your COPD



Pulmonary rehabilitation and regular exercise

- improves your mood and motivation
- you will sleep better and feel less tired

Regular exercise and being active

- helps to keep your chest clear

Pulmonary rehabilitation

- reduces your breathlessness
- slows down worsening of lung function
- reduces your chance of having to go to hospital for your COPD
- shortens recovery time after having a flare-up

Pulmonary rehabilitation and regular exercise

- makes your body stronger
- helps you maintain a healthy weight

Tip 4: Talk to your doctor about your COPD medicines

You might be taking a number of different medicines for your COPD. Most COPD medicines are breathed in using an inhaler device. Inhaled medicines work directly on the lungs and are very effective when used correctly.

There are many types of inhaler devices and they all have different instructions for use. Inhalers can be difficult to use. To make sure you are getting the most benefit from your inhaled medicines, ask a health professional to watch you while you use your inhaler. Even if you have been using your inhaler for a long time, ask a health professional to check your technique. If you are having difficulty using your device, ask your doctor whether there is a different device available. If you would like a reminder of how to use your device, instructional videos can be viewed from www.lungfoundation.com.au/patient-support/copd/inhaler-technique-fact-sheets

Talk to your doctor to find out:

- How your medicines work.
- When you should use your medicines and directions for use.
- How to best manage your inhaled medicines including how the device should be used, cleaned and stored.
- What steps to take in the case of a flare-up – your doctor can provide a written action plan just for you. Knowing what to do and being able to act early can help you to recover more quickly.

- Whether you might benefit from having a Home Medicines Review. A Home Medicines Review is a great way to learn more about your COPD medicines and the pharmacist can talk to you about how to best manage your inhaled medicines.

Tip 5: Keep active

Regular exercise can help your breathing, reduce your symptoms, and improve your quality of life. It might mean that you are able to do physical activities that you were previously unable to do, such as walking around the garden or up a small flight of stairs.

If you avoid exercise because you fear becoming breathless, talk to your doctor about a pulmonary rehabilitation program. If you have already participated in a program, Lung Foundation Australia provides 'Lungs in Action' classes where you can access an ongoing exercise program in the community. www.lungsinaction.com.au

Tip 6: Join a support group

Join a support group to meet other people living with COPD, share your experiences, and learn new information. To find out where your nearest support group is located, call Lung Foundation Australia on 1800 654 301 or visit www.lungfoundation.com.au/patient-support/support-for-you/patient-support-groups



SPIDERS' WEBS AND BOOKWORMS

JO WAGNER, DVA LIBRARIAN

ONLINE RESOURCES

ACTIVE LIVING / HEART FOUNDATION

Regular, moderate physical activity is great for your heart health. It's never too late to start and get the benefits. This online resources recommends ways to best achieve a moderate level of physical activity, and provides factsheets to help you be active every day.

<https://www.heartfoundation.org.au/active-living/get-active>

HEART FOUNDATION WALKING / HEART FOUNDATION

Walk yourself happy and healthy! Join Australia's largest free community-based walking network! Heart Foundation Walking makes regular physical activity enjoyable and easy. Walking groups are many sizes and walk at various times, distances, days and levels of difficulty. If you do not live near a group or prefer to walk on your own, you can join as a 'Virtual Walker' and track your progress online.

<http://walking.heartfoundation.org.au/>

PHYSICAL ACTIVITY AND SEDENTARY BEHAVIOUR: EVIDENCE SUMMARY / VICHEALTH

Regular physical activity contributes to good health across all life stages, whereas inactivity is one of the most significant risk factors of disease. This report outlines current physical activity and sedentary behaviour level in Australia and Victoria. It provides an overview of the impacts of physical activity and sedentary behaviour, as well as barrier to and enablers of active lifestyles.

<https://www.vichealth.vic.gov.au/media-and-resources/publications/physical-activity-and-sedentary-behaviour>

HAPPIER PEOPLE LIVE MORE ACTIVE LIVES: USING SMARTPHONES TO LINK HAPPINESS AND PHYSICAL ACTIVITY / NEAL LATHIA

Physical activity, both exercise and non-exercise, has far-reaching benefits to physical health. Although exercise has also been linked to psychological health (e.g., happiness), little research has examined physical activity more broadly, taking into account non-exercise activity as well as exercise. We examined the relationship between physical activity (measured broadly) and happiness using a smartphone application. This app has collected self-reports of happiness and physical activity from over ten thousand participants, while passively gathering information about physical activity from the accelerometers on users' phones. The findings reveal that individuals who are more physically active are happier. Further, individuals are happier in the moments when they are more physically active.

<http://journals.plos.org/plosone/article?id=10.1371/journal.pone.0160589>

BOOKS

FINDING GOBI: THE TRUE STORY OF A LITTLE DOG AND AN INCREDIBLE JOURNEY / DION LEONARD

In 2016, Dion Leonard, a seasoned ultramarathon runner, unexpectedly stumbled across a little stray dog while competing in a gruelling 155 mile race across the Gobi Desert. The lovable pup, who earned the name 'Gobi', proved that what she lacked in size, she more than made up for in heart, as she went step for step with Dion over the treacherous Tian Shan Mountains, managing to keep pace with him for nearly 80 miles. As Dion witnessed the incredible determination of this small animal, he felt something change within himself. This was the start of a journey neither of them would ever forget with a roller coaster ride of drama, grief, heartbreak, joy and love that changed their lives forever.

HarperCollins, 2017.
RRP \$22.99

EXERCISE FOR PHYSICAL AND MENTAL HEALTH / Z.B. HILL

You know that exercise and physical activity can change the way your body looks, helping you lose weight and build muscle. But did you know that exercise also changes the way you think? Find out how exercise affects your body and your mind, improving your physical health and helping you to feel good about yourself. Discover the science behind how exercise helps you avoid health problems and how working out can lift your mood. Learn how to create a workout plan and stick with it!

Mason Crest, 2015
RRP \$60.99

100 NO-EQUIPMENT WORKOUTS: FITNESS ROUTINES YOU DO ANYWHERE, ANYTIME / NEILA REY

The 100 Workouts Book is for everyone who wants to stay active, get fit, build muscle tone and/or shed extra weight in the home environment without acquiring any extra equipment. Be in complete control of your fitness. No more worrying about the right equipment, the right attire, finding a gym, or finding the space or time to exercise. The 100 no-equipment fitness routines will let you: Exercise on your terms; get fit with the time you have; have fun while getting fitter; stop worrying about the gym culture; find a routine to do whether you are an absolute beginner or someone already fit. Different workouts will ensure that your muscles don't get used to the same regime, giving you more in return, and also help you stay active and not get bored with the same routine.

**New Line Publishing, 2013
RRP \$29.99**

FIT AT 50: BACK FROM THE BRINK NATURALLY / MATTHEW MCLAUGHLIN

Fit at 50: Back from the Brink, stands out as a beacon of common sense, safe training, and habits you can stick with for a lifetime. Matthew McLaughlin learned the hard way, by making mistakes leading to physical injury and breakdown. In his early 40s, with the help of some of the world's foremost experts in medicine, physical therapy, and coaching, he has not only fully recovered; he has gone on to even greater fitness achievements. He shares the lessons he learned about stretching, strength training, cardiovascular exercise, and nutrition. Whether you're an experienced athlete or just looking for a way to start improving your lifestyle, this book is a simple, complete guide to a healthy, fit, and well-balanced body.

**Outskirts Press, 2012.
RRP \$39.99**

BOXING FOR FITNESS: SAFE AND FUN WORKOUTS TO GET YOU FIGHTING FIT / CLINTON MCKENZIE

Boxing for fitness is a non-contact cardiovascular workout that's safe, effective and enjoyable. It is suitable for men and women of all ages and fitness levels, from novices to cross-training athletes, and it can be practiced at home as well as the gym, so it's easy to get started. And it's a powerful stress-reliever.

**Firefly Books, 2011.
RRP \$49.99**

STRENGTH TRAINING PAST 50 / WAYNE WESTCOTT

Increase your strength to improve your health, your appearance, and your performance with strength training. Strength Training past 50 offers many benefits for active adults, including enhanced athletic performance, reduced risk of disease, and decreased symptoms of arthritis, diabetes, and osteoporosis. This book provides free weight exercises, workouts for increasing size, endurance and strength; sport-specific programs for tennis, golf, cycling and running; eating plans and nutrition advice for adding lean muscle and losing fat.

**Firefly Books, 2011.
RRP \$49.99**

AUSTRALIAN FISHING GUIDE / STEVE COOPER

Move outdoors and go and fish in over 1000 destinations around Australia. Divided into state chapters, Steve Cooper provides detailed information on his favourite fishing spots, highlights fish species in each area, recommends the best fishing methods and features many great anecdotes. Great way to get more active!

**Explore Australia, 2015.
RRP \$36.99**

MHPE NATIONAL ROUND-UP

MHPE NSW & ACT

NSW Western Sydney - Seniors Forum at St Marys on 22 February 2017

MHPE volunteers held an information stand at the St Marys Seniors Forum at the St Mary's Community Centre. The forum was organized by the federal member for Lindsay Ms Emma Husar MP who gave an address together with the Shadow Minister for Aging and Mental Health The Hon Julie Collins MP. The forum was an opportunity for local community and stakeholder groups to share resources and information.

Shoalhaven DCO Family Welcome Day 4 February 2017

MHPE South Coast crew also had a very good day at the annual Defence Family Fun Day at HMAS Albatross on Saturday 4 Feb 2017. This is a welcome day for all new defence members and their families who have recently moved to the base. We were able to talk to and hand out the many brochures to families that visited our stall. The Commanding Officer of HMAS Albatross, Captain Fiona Sneath and her family had a chat with us about who we were and what was happening at the base. Captain Fiona Sneath was the first female officer to take charge of Albatross. We were very fortunate to have cadets from Training Ship Shoalhaven to keep us hydrated with constant supply of bottled cold water.

Gary Tearle

(MHPE Shoalhaven/Illawarra Representative)

NSW Western Sydney Seniors Forum at St Marys



MHPE SA

National Volunteer Week – 8th May

Four MHPE volunteers, Richard Kirkman, Ian Short, Gareth Hubbard and Bob Kelly attended the launch of National Volunteer Week hosted by the Hon Hieu Van Le, Governor of South Australia on the beautifully manicured grounds of Government House. The MHPE volunteers marched with many other volunteers celebrating the biggest volunteering event in Australia.

Men's Health Week

– 12-18 June

MHPE volunteers Richard Kirkman and Ray Benzie along with Community Support Adviser (CSA) Neil Davies participated in two Men's Health Week events. This included a Men's Health event at COTA SA in Adelaide and also a Social Participation & Diversity event at the Jack Young Centre, Salisbury. MHPE information and resources were displayed at both events and guest speakers covered various topics of interest relevant to men's health. MHPE volunteers enjoyed the networking opportunities which were provided at both events and Neil and Richard also bravely put themselves through a 'health check' delivered by Uni SA!

SA MHPE Volunteer Representative, Richard Kirkman and Neil Davies, SA DVA Community Support Adviser supporting Men's Health Week



VHW Information

Session – 22nd June

Thirteen MHPE volunteers demonstrated their commitment to VHW 2017 by attending a VHW information session organised by the VAN Community Support team which provided an opportunity for volunteers to network with various prospective VHW organisers from Metro and Country SA. All MHPE volunteers in attendance committed to either organising a VHW event, assisting a VHW event organiser or both!

10,000 Steps 2017

MHPE volunteers are registering for this year's 10,000 steps challenge and are currently organising teams and planning some fun walks in their communities. After the 2016 MHPE volunteers North vs South battle it is anticipated that the rivalry will be heightened this year! MHPE volunteers are also promoting the 10,000 steps challenge to the wider veteran community.

Cooking for One or Two

MHPE volunteers in conjunction with VAN Community Support team are planning an end of year get together to discuss Cooking for One or Two opportunities in preparedness for the 2018 VHW theme 'Nutrition'.



Darwin Pit Stop during Men's Health Week
- Chassis Check

MHPE NT

A Pitstop event was held in Darwin CBD during Men's Health Week on Wednesday 14 June. Coordination of the event was undertaken by DVA in conjunction with Men's Health Strategy Unit NT and also had support from the Cancer Council and Heart Foundation.

We were able to capitalise on the visitors in town for the V8 Supercars on the following weekend. This, combined with the beautiful dry season weather encouraging people to get out and about, saw an increase in checks undertaken from last year's event.

Two of our MHPE volunteers and a new "volunteer in training" enjoyed their participation in the day, commenting on the positive feedback received from men getting their health check and also from other stall holders in the area. Since the event, we have received contact from one of the men who had undergone the check. Following discussion at the "duco" station, he had sought medical advice and has subsequently had some suspicious looking moles removed. He has expressed his gratitude at receiving the free advice and giving him the "kick start" he needed to consult a GP.



VIC MHPE volunteer Doc Anthony and
VIC MHPE Volunteer Representative, Alan White at Bunnings Warehouse

MHPE VIC

The MHPE volunteers in Victoria have been busy being involved in a number of events during Men's Health Week recently.

Up on the Victorian/NSW border in Albury-Wodonga, Gary Treeve was involved with a very successful 'Spanner in the Works' event that was run in conjunction with the Men's Sheds in the local area and Charles Sturt University. University students offered their time by providing the health checks for over 80 attendees. Gary utilised the opportunity to network with the Men Sheds that attended the 'Spanner in the Works' and has been invited by a number of them to present on Men's Health topics.

Victorian State Representative Alan White and fellow MHPE volunteer Doc Anthony teamed up with a representative from the Bayside Prostate Cancer Support group to man a stall at Bunnings Mentone. With Alan's famous shows bags filled in hand, Alan and Doc spoke to a number of men, veterans and their partners on the importance of staying healthy.

Outside of Men's Health Week the Victorian MHPE volunteers have been successful in engaging with a number of Men's Shed activities.

Harry Beckwith along with Luke Newhouse (DVA Community Support Advisor) attended the inaugural Men Shed Muster in Hoppers Crossing. Harry and Luke ran a Men's Health stand as part of the pop-up expo.

Graham Tongs has been showing his culinary skills by running a Cooking for One or Two program at the Melbourne Men's Shed. Graham has shown the "shedders" how to make a range of easy, delicious and healthy food ranging from rice paper rolls to Hungarian Goulash.

Our MHPE volunteers are busy planning for VHW so we are looking forward to seeing all of the activities.

FIVE, 10 AND 15 YEAR RECOGNITION FOR MEN'S HEALTH PEER EDUCATION VOLUNTEERS

A number of MHPE volunteers have achieved five, 10 and 15 years of active service. A BIG THANK YOU to all those listed here for your contribution to the health and wellbeing of the veteran and ex-service community.

15 YEARS

| ACT & NSW | WA | VIC | SA |
|------------------------------|-----------------------------------|------------|-------------------|
| Judith Carthew Ken Foster | Lester Leaman OAM Colin Turner | Alan White | Kathleen Behrendt |

10 YEARS

| ACT & NSW | QLD | WA | VIC |
|---|--|--|-------------|
| Graeme Goode John Macartney Wayne Mason Lyne Mooney Malcolm Scott | Ian Dainer George Newton Trevor Pope | Tom Hollow Alex Lennox Phil Maguire Norman Whitburn | Ralph Faber |

5 YEARS

| ACT & NSW | QLD | SA |
|--|--|--|
| James Belford Gary Benjamin Desmond Bowlay Adrian Button David Francis Graeme Franklin Robert Fry Peter Kearsy James McCann Paul McKibbin Chris Oyston Wayne Schmarr Denis Sweet Bob Turner | Brian Lewis Suzanne McGee Ken McKenzie Gordon O'Donohue John Robinson David Smith William Taylor | Trevor Klose Brian Thorpe Paul Tyson |

NSW&ACT MHPE volunteer Ken Foster and DVA NSW & ACT VAN & Community Support staff Wayne Tucker and Naomi Blundell



SA MHPE Volunteer Kathy Behrendt and Janice Silby, SA Deputy Commissioner



VIC MHPE Volunteer Ralph Faber and Luke Newhouse, DVA Community Support Adviser



Have we forgotten anyone? If you've been with MHPE for five, 10 or 15 years, and haven't received your MHPE volunteer certificate and badge, please contact your MHPE state coordinator.

MHPE volunteers come from all areas of Australia and receive training from DVA to discuss men's health and lifestyle issues with their peers, to raise the awareness of men's health in Australia among veterans and the ex-service community in particular.

WVCS SUPPORTING MORE ADF FAMILIES

Evidence has shown that supportive family relationships can play a major role in recovery from service related mental health concerns and that the earlier treatment is sought, the more effective the health outcomes are likely to be.

Recognising the importance of mental health support to both veterans and their families, the Government has committed additional funding to extend the reach of available services.

What does this mean?

Dr Stephanie Hodson CSC, National Manager of the Veterans and Veterans Families Counselling Service (VVCS), says more people than ever before will now have access to VVCS.

“All current and former members who have at least one day continuous full-time service in the ADF will now have access to treatment for all mental health conditions via the DVA Health Card (White).

“Importantly, the mental health condition does not need to be related to their service,” she says.

The 2017 Budget initiative also extends VVCS access to partners and children of current and former ADF members who hold a DVA Health Card (Gold or White for an accepted mental health disability).

In addition, the former partners of current and former ADF members will also have access to VVCS services for up to five years following separation or whilst they have co-parenting responsibilities for a child under 18.



“The role of partners of current and former ADF members is crucial to the health of those being supported, as well as their broader family.

“Partners of deployed members may experience mental health concerns similar to those of veterans, and it is important that care and support is available,” said Stephanie.

What is the VVCS?

VVCS offers free and confidential counselling for war and service-related mental health conditions, providing support for relationship and family matters that can arise due to the unique nature of military service.

It has provided more than 1.6 million counselling sessions to more than 300,000 veterans and family members since the first centre opened in Adelaide 35 years ago. Today, VVCS has centres in every capital city and in a range of regional centres. Additionally, VVCS services are also delivered through a network of outreach counsellors – ensuring wherever you are in Australia you can get VVCS support.

A service that understands life can change quickly – particularly for ADF families – VVCS has supported over 27,000 clients in the past year alone. This support has included delivery of 97,770 face to face counselling sessions and 6,270 after-hours phone counselling sessions, right across Australia.

For more information, or how to find out how VVCS can support your family, call 1800 046 011 (24/7) or visit www.vvcs.gov.au.

HEALTH TECHNOLOGY JOHN HALL, DVA



RISE AND RECHARGE (FREE, APPLE AND ANDROID):

Developed in conjunction with the Diabetes Institute, this app aims to get you active given that, on average, adults sit for up to nine hours a day (and much of this is with little movement!). Rise and Recharge tracks the time you spend sitting and how often you get up. It will encourage you to at least once every 30 minutes, with the goal of adding up your periods of movement to achieve a daily star rating that you have set. Five stars is, of course, the ultimate rating. The app will even allow you to customise it so that it gives you an alert to regularly get up and move (but I don't think that getting up from the couch to get more chips or another beer counts!).



CK25K (COUCH TO 5K) (FREE, APPLE AND ANDROID):

Following on from using Rise and Recharge, CK25K will help you go from being a couch potato to achieving a moderate goal of running five kilometres in eight weeks. The many positive reviews ('I started off hardly being able to run to the bathroom ...' might sound familiar to many) are reflected by some impressive numbers: over 50,000 users in Australia, plus 2,000 new users worldwide each day. The app will show you how to begin an exercise routine (running and walking), beginning at 30 minutes a day, for three days a week with the aim that in eight weeks you can run five kilometres. It is a full-featured app (not a 'lite version'), containing an audio coach and alerts, while letting you listen to your own music from your playlist or music apps. What do you have to lose?!



MAPMYWALK (FREE, APPLE AND ANDROID):

If running, for whatever reason, is not for you (which my left knee will attest to), then there's still no reason not to get active. Walking, no matter at what pace or distance, can provide health and wellbeing benefits. MapMyWalk will track and map every walk that you undertake, letting you save your favourite walks, get audio feedback on your walks as well as being able to view your route. Like many other apps, you can share your walking exploits (maybe even skite?) with your friends on Facebook or Twitter, or you can challenge and compete with others.



NEXERCISE (SWORKIT) (FREE, APPLE AND ANDROID):

With well over 100,000 health-related apps available, determining which one is suitable is a job in itself. Given that, maybe these will assist with your quest to improve your physical activity regime. Nexercise is not so much one app, but a series of apps developed by Sworkit (a clever mash up of 'Simply work it') under the 'Nexercise' banner. With over 14 million users and counting, the various Nexercise apps (there are eight) cover most parts of the body. Workouts can range from five to 60 minutes, and you simply follow the video trainer to know what to do. With these apps you can customise your workouts, and you're not limited to a set range of exercises. The range of apps cover, among other things, abs and core, stretching, lower body, cardio and upper body. You can stop reading now and start downloading!

MHPE VOLUNTEERS What do they do?

MHPE volunteers share health information. For example: one-on-one chats; health week events; working with Men's Sheds; distributing health information; running a stand at a community expo, or giving a talk at a local community group or ex-service organisation meeting.

To talk to a volunteer, please contact the relevant MHPE State/Territory Volunteer Representative below:

If you are based in Tasmania, please contact the DVA MHPE National Coordinator on: 1800 555 254

| NAME | STATE/TERRITORY | PHONE NUMBER | EMAIL ADDRESS |
|-----------------|-----------------------|--------------------------------|------------------------|
| Kevin Moss | Queensland | 0418 734 899 | kevin.moss04@gmail.com |
| Alan White | Victoria | (03) 9598 1007 or 0407 617 800 | askypilot@bigpond.com |
| Ron Blanchard | Northern Territory | 08 8927 5638 or 0476 145 303 | aileron@bigpond.com |
| Richard Kirkman | South Australia | 08 8336 7082 or 0413 816 437 | bkandrc@tpg.com.au |
| John Macartney | New South Wales & ACT | (02) 6657 4165 or 0427 787 296 | jrmaca@bigpond.com |
| John Sharp | Western Australia | 08 9291 9214 or 0419 663 246 | rossharp@inet.net.au |

KEEPING YOUR MIND ACTIVE ANSWERS

| | | | | | | | | | | | | | | | | | | | |
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| T | X | J | A | S | T | U | S | L | C | I | D | C | M | S | W | D | Q | H | R |
| R | N | X | S | C | N | H | T | Y | T | W | M | E | N | M | Q | W | T | Q | Q |
| E | N | P | O | X | I | I | E | N | J | Q | T | I | M | U | V | Y | R | Q | Z |
| N | O | Y | Q | B | W | S | E | R | I | O | H | P | R | G | K | C | A | L | W |
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VETERANS' HEALTH WEEK

Physical Activity 21–29 October 2017

AN AUSTRALIAN GOVERNMENT INITIATIVE



Australian Government
Department of Veterans' Affairs



PHYSICAL ACTIVITY IS
ANY ACTIVITY
THAT GETS
YOUR BODY MOVING,
MAKES YOUR
BREATHING QUICKEN
AND YOUR
HEART BEAT FASTER.

Department of Health physical activity guidelines for adults recommend:

- Aim to be active everyday.
- Accumulate 150 to 300 minutes of moderate intensity physical activity or 75 to 150 minutes of vigorous intensity physical activity, or an equivalent combination of both each week.
- Do muscle strengthening activities on at least 2 days each week.

MODERATE ACTIVITIES

- Ballroom dancing
- Cycling on the flat
- General gardening (raking, mowing)
- Tai chi
- Tennis (doubles, social)
- Throwing sports (softball, volleyball)
- Walking briskly
- Water aerobics

VIGOROUS ACTIVITIES

- Aerobic dancing (Zumba, tango)
- Bushwalking uphill (or stair climbing)
- Cycling (hills or more than 20km/hr)
- Heavy gardening (digging)
- Martial arts
- Race walking, jogging or running
- Running sports (basketball, football)
- Swimming (fast or laps)
- Tennis (singles)

DOING ANY PHYSICAL ACTIVITY IS BETTER THAN DOING NONE

For adults regular physical activity can:

- Help manage or reduce the risk of developing type 2 diabetes and cardiovascular disease
- Maintain and/or improve blood pressure, cholesterol and blood sugar levels
- Reduce the risk of, and assist with rehabilitation from, some cancers
- Prevent unhealthy weight gain and assist with weight loss
- Build strong muscles and bones
- Create opportunities for socialising and meeting new people
- Help to prevent and manage mental health problems
- Help to develop and maintain overall physical and mental well-being
- Help to maintain and improve brain health

Physical activity guidelines for those 65+

- Do some form of physical activity, no matter your age, weight, health issues or ability
- Be active every day in as many ways as possible, doing a range of physical activities that incorporate fitness, strength, balance and flexibility
- Accumulate at least 30 minutes of moderate intensity physical activity on most, preferably all days
- If you don't exercise, or are starting a new physical activity, start at a level that is easily manageable and gradually build amount, type and frequency
- If you continue a history of vigorous physical activity, carry on in a manner suited to your capability adhering to safety procedures and guidelines
- If you are new to physical activity, have a health issue, or are concerned about the safety of being (more) active, see your GP or health professional for advice about the most suitable activities

PHYSICAL ACTIVITY MUST BE SAFE

- If you haven't been active in a while, start slowly and build up
- Learn about the types and amounts of activity that are right for you
- Choose activities that are appropriate for your fitness level
- Build up the time you spend being active before switching to activities that take more effort
- Use the right shoes, safety gear and sports equipment
- Choose a safe place to do your activity
- See your GP or health professional if you have a health problem or questions

**WHATEVER ACTIVITY
YOU
CHOOSE,
MAKE IT
PART OF
YOUR LIFE**

Sedentary behaviour guidelines

Sedentary behaviour is relatively new in our evolutionary history and presents a modern health challenge. Sitting or lying down for prolonged periods during daytime hours are what we call 'sedentary' behaviours. You can meet the physical activity guidelines yet still be considered sedentary if you are inactive most of the day. Sedentary behaviour requires little energy expenditure and it is possible to be inactive while at work, school, at home, when travelling or during leisure time.

- Older Australians spend more than twice the time watching TV compared to young people using computers or the internet.
- Sedentary behaviour is associated with poorer health outcomes, including an increased risk of type 2 diabetes.
- You will benefit from breaking up the day with regular physical activity.



www.dva.gov.au/veterans-health-week

P03357 May 2017

The Men's Health Peer Education (MHPE) program aims to raise the veteran community's awareness of men's health issues and to encourage men in managing their own health and wellbeing.

MHPE volunteers share health information in a variety of ways. For example: having one-on-one chats; holding a health week event; working with Men's

Sheds; distributing health information; running a stand at a community expo, or giving a talk at a local community group or ex-service organisation meeting.

For information about the MHPE program, visit our website www.dva.gov.au/mhpe.htm or contact the relevant DVA MHPE Coordinator below:

| NAME | LOCATION | PHONE NUMBER | EMAIL ADDRESS |
|--------------------------------|--------------------|--------------|--------------------|
| DVA QLD MHPE Coordinator | Queensland | 07 3223 8715 | MHPEQLD@dva.gov.au |
| DVA WA MHPE Coordinator | Western Australia | 08 9366 8359 | MHPEWA@dva.gov.au |
| DVA VIC MHPE Coordinator | Victoria | 03 9284 6682 | MHPEVIC@dva.gov.au |
| DVA NT MHPE Coordinator | Northern Territory | 08 8935 1415 | MHPENT@dva.gov.au |
| DVA SA MHPE Coordinator | South Australia | 08 8290 0375 | MHPESA@dva.gov.au |
| DVA TAS MHPE Coordinator | Tasmania | 03 6221 6711 | MHPETAS@dva.gov.au |
| DVA NSW & ACT MHPE Coordinator | NSW & ACT | 02 9213 7661 | MHPENSW@dva.gov.au |



Australian Government
Department of Veterans' Affairs

Men's Health Peer Education

Produced by
Editor
National Coordinator, Men's Health Peer Education
The Department of Veterans' Affairs

Available for download at
www.dva.gov.au/mhpe.htm

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P03417

NEXT ISSUE VOLUME 17. NO. 1. 2018
THEME: **FIVE SENSES**

**DEADLINE FOR ARTICLES IS
23 FEBRUARY 2018**

If you'd like to share your story with our readers or have an idea for an article, we'd like to hear from you. You can email the Editor at menshealth@dva.gov.au or call 1800 555 254 (regional) or 133 254 (metro) and ask for the MHPE National Coordinator.