

Full Length Research Paper

An action plan for promoting physical activity in women and sensitive to social gender equity: Case of Bartin/Turkey

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The purpose of this paper was to investigate physical activity opportunities from the point of gender issue of Bartin City, also to investigate in the context of the important health indicators of the Healthy Cities Union such as physical environment, inequalities, physical and social infrastructure of the city. Additionally, the second aim is to determine the effects of these conditions to the physical and mental health of the women. In this context, it is prepared an action plan for women including the decisions of a plan that is sensitive to the social gender equity and aiming to improve the physical environment and physical and social infrastructure that is appropriate for increasing to the characteristics of life qualities in the case of Bartin. Interviews with women who live in Bartin city have been conducted in order to investigate the influence of the environment on physical activity of women. Especially, the subject of socialization and health of women is the main concern of this study. Action plan aimed to increase the physical activity levels of women living in Bartin.

Key words: action plan, gender issue, health, physical activity, women, Bartin, Turkey.

INTRODUCTION

One of the basic functions of the city is to present equal opportunities in support of being healthy of the society which has different individuals in terms of social group, age and gender.

The Healthy Cities Project of World Health Organization is a long term international initiatives aiming to develop comprehensive local strategies for healthy and sustainable development in the 21st century. The approach of healthy cities is to make efforts physical, mental, social and environmental prosperities of the people who lives and works in the cities. For the health circumstance of community, the improvement of the socio-economic conditions is as related as the characteristics of the physical environment. The Municipality of Bartin is one of the 23 cities in Turkey that are the member of The Healthy Cities Union that was founded in 2004.

World Health Organization reported that overweight and obesity are major risk factors for a number of chronic diseases, including diabetes, cardiovascular disease and cancer. Once considered a problem only in high income countries, overweight and obesity are now dramatically on the rise in low and middle-income countries particularly in urban setting (Anonymous, 2009). Especially Obesity (because of inactivity life styles) among children, women and other adults is a common public health issue both developed and developing countries (Jurg et al., 2008). Healthy diets and regular, adequate physical activity are major factors in the promotion and maintenance of good health throughout the entire life course. Overall, 1.9 million deaths are attributable to physical inactivity. Governments have a central role in cooperation with other stakeholders to create an environment that empowers and encourages behavior changes by individuals, families and communities, to make positive, life-enhancing decisions on healthy diets and patterns of physical activity (WHO 2004).

A study carried out in the Netherlands / Amsterdam aimed in order to contribute to the prevention of overweight and

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inactivity in children. It was a joint project involving municipal authorities, primary schools and local sport clubs. Study was aimed at promoting physical activity among primary school children. Its various components including sport activities, activity week, in-class exercises, lessons aimed at amongst others increasing awareness and self-efficacy (Jurg et al., 2008).

Health experts recommend that children and young people should achieve a total of at least 60 minutes of (at least moderate-intensity physical activity) each day. For general health benefit, adults should achieve a total of at least 30 min a day of at least moderate-intensity physical activity on five or more days of the week ((Department of Health, 2004).

According to WHO; Moderate-intensity physical activity is defined as a moderate amount of effort and noticeably accelerates the heart rate. Examples of moderate – intensity exercise include: dancing, gardening, and active involvement in games and sport and with children/walking domestic animals. It is approximately 3-6 Metabolic Equivalents (METs). Metabolic Equivalents are commonly used to express the intensity of physical activities (Anonymous, 2009). They emphasized that the examples of physical activity vary between individuals, the intensity of physical activity depends on an individuals previous exercise experience and their relative levels of fitness.

PHYSICAL ACTIVITY AND HEALTH

The epidemiological evidence of the positive effects of physical activity on health has been widely reported and confirmed in recent global reviews (Bull et al., 2004; Bauman 2004; Department of Health 2004).

Regular physical activity helps prevent cardiovascular diseases (heart disease, high blood pressure and stroke) which account for one-third of deaths among women around the world. Cardiovascular diseases can cause half of all deaths in women over in 50 developing countries. Regular physical activity, combined with adequate diet has shown to be one of the most effective means of controlling mild to moderate obesity and maintaining an ideal body weight in women. Recent studies show that even modest physical activity and dietary changes can prevent more than half of the cases of non-insulin dependent diabetes. Physical activity can also greatly help prevent and manage osteoporosis, a disease in which bones become fragile and more likely to break. Women, particularly post-menopausal have a higher risk of developing osteoporosis than men (WHO, 2003). Regular physical activity reduces the rise of depression and has positive benefits for mental health including reduced anxiety, and enhanced mood and self-esteem. Also it contributes to the prevention and management of over 20 conditions and diseases including coronary heart disease, diabetes, cancer, weight management (Depart-

ment of Health, 2004).

Reducing stress, anxiety, depression and loneliness through physical activity is particularly important for women, as rates of depression for women are almost double of men in both developed and developing countries.

It is recommended that individuals engage in adequate levels throughout their lives, different types and amount of physical activity are required for different health outcomes: at least 30 min of regular, moderate-intensity physical activity on most days reduces the risk of cardiovascular disease and diabetes, colon cancer and breast cancer. Muscle strengthening and balance training can reduce falls and increase functional status among older adults. More activity may be required for weight control. The world health report (2002) highlights the potential for improving public health through measures that reduce the prevalence of risk factors (most notably the combination on unhealthy diets and physical inactivity) of non-communicable (NCD) diseases (WHO 2004).

People's participation in physical activity is influenced by the built, natural and social environments in which they live as well as by personal factors such as sex and age and ability, time and motivation. Local governments have a crucial role to play in creating environments that promote opportunities for physical activity and active living (Edwards and Tsouros, 2006). Active living contributes to individual physical and mental health but also social cohesion and community well-being (Edwards and Tsouros 2006). It is apparent that physical activity is essential in the prevention of chronic disease and premature death (Lee and Skerett, 2001).

Action plans, initiatives and some strategies have been proposed because of health and social problems (such as depression, obesity, individualism and isolation etc.) are common in countries especially the reason of inadequate physical activity levels of adults and young people. For example in London, it is especially emphasized that increasing levels of participation in appropriate sport and physical activity can contribute to social cohesion, neighborhood revitalization and increased sense of community identity (London Cabinet Office, 2001). A study of six countries in Western Europe showed that a positive relationship between perceived communities based opportunities for physical activity (opportunities in the residential area, local clubs and community support), self-reported levels of physical activity and self-rated health. The health impact is more pronounced among women when good opportunities are available (Rütten, 2001).

Walking is an important part of physical activity, and higher levels of total physical activity are important for health. Increasing walking could have important public health benefits. It has been suggested that walking is higher in areas with elevated residential and employment densities, more connected street patterns, quality pedestrian infrastructure and amenities such as sidewalks and

street trees, and the presence of a variety of destinations (mixed use) (Cervero and Kockelman, 1997; Frank and Pivo, 1994; Handy et al., 2002; Handy, 2003; Saelens et al., 2003; Forstyh et al., 2008). Active living can make to maintaining health and well-being throughout life. Physical activity increases opportunities for socialization, networking and cultural identity in any public places.

Factors influencing physical activity

Some factors influence physical activity type and levels in communities. These factors are classified by Dahlgren (1994) individual and individual's environments in which ones live such as social or built environment. Gender, age or ability is individual determinants. Social environment is defined as culture, social support, equity, social cohesion and income. Built environment such as green space, urban design, land-use patterns and transport are also important influence to physical activity. Conditions in the built environment can both negatively and positively affect participation in physical activity. For example, walkable neighborhoods allow people to make travel on foot an enjoyable part of their everyday lives (Frank et al., 2006). Design elements in the built environment, such as street layout, land use, the location of recreation facilities, park and public buildings and the transport system can either, encourage or discourage physical activity. People are more active when they can easily access key destinations such as parks, green spaces, workplace and shops. Other barriers to active living include fears about crime and road safety, transport, emissions and pollution, problems with access and for a lack of recreation and sport facilities and negative attitudes about physical activity and active transport. Green spaces and parks provide citizens with opportunities to socialize and enjoy active recreational activities outdoors. Urban sprawl, large shopping centers on the urban periphery and the geographical separation of living, working, learning and shopping require increased car use and reduce the opportunities for active living in the city (Edwards and Tsouros, 2006). Urban environment which have good urban design, also encourages the expansion of social networks.

Some researchers showed that urban sprawl has been correlated with higher body weight, obesity and associated chronic diseased (Frank and Engelke, 2000, Saelens et al., 2003).

Natural environment also weather conditions, air, topography or water of presence can be affect ones active or inactive living. Neighborhood parks that are within walking or cycling distance of a person's home or workplace can promote greater physical activity. Path that link homes, workplace, commercial centers, public transport and community facilities provide safe and attractive for pedestrians.

The level of physical activity and design elements of

urban landscape is an important interest area in many studies (Forsyth et al., 2008; Brownson et al., 2000; Curson and Kotts, 2000; Day, 2000; Franck and Paxson, 1989; Frank and Engelke, 2001; French et al., 2001).

Exercise equipment and walkways built at local parks provide people who have neither the opportunity nor the time to go fitness centers to exercise in the open air.

Several studies have found that crime and fear of crime are barriers to exercising and being physically active outdoors among women (Handy et al., 2002). Physical characteristics of environment affect the level of physical activity. Residential area characteristics have included street patterns, pedestrian-oriented infrastructure and amenities and mixed use. Physical activity and built environment associations have been examined in Minnesota by Forsyth et al. (2008). They examined in their studies factors influencing walking and total physical activity such as physical character of residential areas and individual characteristics. They found that walking for specific purposes (that is, travel or leisure) varies in relation to the physical characteristics of places. They research how both walking and total physical activity is affected by physical elements of residential areas or individual characteristics.

Urbanization has resulted in several environmental factors which may discourage participation in physical activity. Among whole population women like older people, and disabled people are commonly inactive and have unequal access to active leisure time and suitable design elements in urban. High population, increased levels of crime, poverty, and low air quality and, the lack of parks, sidewalks and sports/recreation facilities are the reasons for physical inactivity. As a result of urbanization such as the lack of opportunities to exercise in urban environment may have also be reduced recommended physical activity levels for citizen in order to proceed to action for physical activity, environmental changes may also be essential (Ronda et al., 2001).

Among whole population women like older people, and disabled people are commonly inactive and have unequal access to active leisure time and suitable design elements in urban landscape.

Studies have shown that safety, presence of others (King et al., 2000), social support from friends, families and formalized exercise programs, good environment such as beautiful scenery, involving relationship with others encourage women to make more activity (Krenichyn, 2004). Some researchers found that leisure activities were most meaningful when they allow opportunities for social interaction and feelings of connection (Henderson and Allen, 1989; Samdahl and Jekubovich, 1997).

Gender and physical activity

Many studies carried out different countries have shown

that women are less likely than men to reach recommended levels of physical activity. For example, studies in Australia have consistently found that women are only half as men to be adequately active. Some promotions aimed to increase the physical activity levels of women in Sydney for this purpose. Physical activity campaigns, community –based promotional activities emphasized special activity days and competitions, using mass-media to inform people about awareness of physical activity benefits are some of the strategies used in Australia. Their findings demonstrate that a community-based intervention targeting a specific population can achieve positive changes in physical activity and that local government has the capacity to be involved in and sustain physical activity interventions (Wen et al., 2002). Population studies of exercise behavior from New Zealand, North America and Australia have found that 25-30% of adults are sedentary in their leisure time (Owen, 1996). Dutch researchers found that 40-53% Dutch adults met the moderate intensity recommendations (Ronda et al., 2001). They aimed to analyze stage of change and awareness levels of physical activity among Dutch adults, showed 41.7% of the respondents in their study, met the recommended physical activity levels.

Inactivity is more common in women than men very nearly all over the world. For example physical activity levels are low in the UK only 40% of men and 28% of women meet the minimum recommendations for physical activity in adults (NHS Information Centre 2008). In Scotland 72% women and 59% men are not active enough for health (Physical Activity Task Force, 2003).

Physical inactivity is recent global health problem. At least 60% of the world's population fails to complete the recommended amount of physical activity required to induce health benefits (WHO, 2002). World Health Organization reported that the world population is getting more obese (1/6 of world population is obese). It is reported that 23% of men and 36% of women are obese in Europe. According to the 2008 health reports of Turkish Statistics Establishment 47.2 % of Turkish population is overweight or obese. This ratio is 49.2% for men and 45.2% for women. On the other hand the ratio of obese population of Turkey increases 65% in last decade. Across all countries, and regions and all age groups, girls are less active than boys, and the gender gap increases with age (Currie et al., 2004). Possible reasons for these disparities;

- i) Gender-stereotyping,
- ii) Lack of support systems and programs that are specifically geared to girls and women,
- iii) Under-presentation of girls and women in leadership roles related to sport and physical activity,
- iv) Lack of time due to domestic responsibilities and caring for children and elderly people,
- v) Concerns for personal safety, especially at night.

Although participation levels vary between countries, in the European Union women (43%) report no physical activity of moderate intensity in the past seven days than men (38%). Men are more likely than women to report considerable (18% versus 12%) or some, (39% versus 35%) leisure-time physical activity (Van Lenthe et al., 2005). For many years, researches in the USA and UK has documented that women spend less time than men in leisure activities.

Many studies has confirmed that women do not engage in enough leisure time physical activity, particularly women of color, women living in rural areas, older women and women with lower levels of education (Ransdell and Wells 1998; Brownson et al., 2000; King et al., 1992; King et al., 2000; Wilcox et al., 2000).

Women are less likely than men to reach recommended levels of physical activity and have unequal access to active leisure time. A study showed that a community based intervention targeting a specific population can achieve positive changes in physical activity and that a local government has the capacity to be involved in and sustain physical activity interventions (Wen et al., 2002). It demonstrates that a statistically significant reduction was in the proportion of sedentary women. Wen et al. (2002) stated that the community-based intervention was designed to assist women to overcome barriers (such as social and personal) to physical activity and to enhance the capacity of the local council to support and promote physical activity in the community.

Urban landscape features have important effect on women's physical activity levels. Krenichyn's study looks at relationships and caring among friends, family, acquaintances and strangers in order to understand women's experiences of Physical activity in Prospect Park in Brooklyn, New York. Krenichyn's study informs research regarding the influence of the environment on physical activity and supports the assertion that an ethic of a care provides a more comprehensive for theories of public space (Krenichyn, 2004).

Although in principle women should be encouraged to increase their participation in physical activity, it is important not to overlook the fact that often in rural and in low income urban areas women may be already physically exhausted by other forms of day-long" occupational" physical activities. Women in these areas may need a better balanced set of support actions such as nutrition, income generation initiatives, advice on physical activities most relevant to their specific conditions and adapted leisure pursuits (WHO 2002).

Public places such as urban parks provide a setting for women's leisure activities and their physical activities. However, women's leisure in general, has also been mostly characterized in terms of constraints, such as a lack of time or money dual responsibilities in and outside of the home, or beliefs that women are not entitled to leisure time (Henderson et al., 1991; Henderson et al., 1999; Krenichyn 2004).



Figure 1. Bartın City in Turkey map.
(source: http://www.bartın74.net/images/Bartın_Haritaları/Türkiye-haritası.jpg).

DESIGN OF THE STUDY

In this study, Bartın City Center was selected as a research area. Bartın is a small province in northern Turkey on the Black Sea, and is formerly a district of Zonguldak Province (Figure 1). Bartın has been made into a province seat in 1991. The aim of this research was to investigate the role of the urban outdoor characteristics on the physical activities of the women in the city center who are in different ages. The relationship between health and physical activity, women and outdoor usage and designed physical space with the opportunities of activities were all compared. The women were discussed as a whole with their responsibilities, gender and bottlenecks. For this purpose, in all over the city, the spaces that present the opportunities of activity, geographical positions, the layout of street, and the characteristics of outdoor were determined by using the map scaled 1/25000, the development plan scaled 1/1000 and the analysis of research area. The theoretical part of the research was made up of the analysis of the related literature. The study was put down to the analytical survey with the data getting from the related public organizations, non-governmental organizations, and the interviews with authorities, and especially women. Interviews were conducted with 40 women who ranged in age from 25 to 65 who were selected randomly in various places such as open market, park or were met at street corner. Interviews lasted between 15-20 min.

The evaluation of interviews with women users and observed facts about city

Interviews with women who live in Bartın city have been conducted in order to investigate the influence of the environment on physical activity of women. The women who participated the interviews were mentioned some problems as follows:

i) The existing places are not aesthetic (61%)

ii) The existing places are not functional (57%)

iii) Women can not join the existing activities with equal ease (53%).

iv) There are not enough places in terms of quality and quantity that can do physical activities in Bartın (40%),

v) There is no any place to be relaxing (31%).

In this study, it was determined that the city of Bartın in terms of the characteristics of the open spaces was not support to the active life and the qualities of physical activities of the women. Despite the participation of the active or passive recreational activities was very important factor for the physical and mental health of women, the city had some important problems of physical and social infrastructure such as deficiency open a green areas in terms of quality, the low quality of existing areas in terms of having the participation opportunities of active physical activities, not having social spaces except Culture House and only one cinema. In addition to these strings attached, comfortable, peaceful and active participation of the women was blocked from the presence of some physical barriers which stated in the pedestrian areas and some ways of the access network (such as inappropriate height of pavement, the lack of ramp, etc.), not being sufficient urban lighting for security, the presence of sport areas that only the men were interested in (stadium, synthetic pitch, etc.).

RESULTS

As a result of the study, it was developed the suggestions for the physical activity areas and urban outdoors (street, way, urban open and green areas, public spaces) that supported especially the voluntary participation of the women users in the city of Bartın that is a member of Healthy Cities Union.

In this research, an action plan which shows the roles of local government and related non-governmental orga-

nizations was taken place. First, in action plan process, it began with the analysis of problem, and then the related actors were determined as Bartın Municipality, Bartın Governorship, Health Provincial Directorate, Environment Provincial Directorate, Bartın Women Solidarity Association and Bartın University Faculty of Forestry Department of Landscape Architecture. It determined each actor's authority and responsibilities in terms of solving problems. Additionally, for the realization of these, the suggestions related to the management of required time, human and financial resources were developed.

It is believed that the action plan in the case of Bartın will be a guide for the cities that have the similar problem and the expected similar suggestions for the solutions, and has an active part in the planning process of the cities that is sensitive for social gender equity. The contribution of this study is to show that a model an action plan is an important tool for promoting women's physical activity in a small city sample.

Conceptual definition – Action planning

In the industrialized countries the label "action planning" gained wide acceptance in the academic profession as a new focus, procedure and set of techniques of planning, and in practice as new institutional structures for dealing with both localized issues and larger social objectives (environmental concerns, transport alternatives, minority issues). Action planning became synonymous with an activist posture in planning, a problem solving rather than a problem defining enterprise (Faludi, 1978).

An Action Plan is not only a physical planning, but also a movement plan that is to make in the particular time period, for a specific purpose, and depend on the performance (Davidson, 1996; Baross, 1991). Figure 2 indicates the schema of action plan.

An action planning process

In order to develop an action plan for promoting physical activity in women and sensitive to social gender equity in Bartın City; before all else the main problem has been identified using by problem tree techniques (Figure 3). In this techniques; The main problem, which is also called as a core problem, is defined as like a "tree trunk". The reasons of the main problem is seen like a "tree roots". From the analysis of the problem, the main problem is determined as the gender equity and opportunities of activity in the Bartın City. The Analysis of Problem has been carried out using by maps, analytical surveys and projects. When the settlement area was analyzed that there was no systematic and well organized distribution of the open and green areas (Figure 4). There are only stadiums for the open-green areas. These spaces serve limited opportunities such as marsh run etc. for women

(except the days and hours of football for men).

According to the problem tree; influences of core problem (which is based on assumptions) are giving below;

- i) Unhealthy generations, cities.
- ii) Social conflicts.
- iii) Mental illnesses (stress, depression etc.).
- iv) Physical illnesses (obesity, cardiovascular diseases, etc.).
- v) Inactive life style.
- vi) Deficiency of activity opportunities which are sensitive to gender equity.

The results coming from the core problem are seen as a "tree branches". After identification of the core problem stage, strong and weakness points are analyzed helping by "SWOT" analysis techniques.

Strong points:

- i) The existence of women foundations,
- ii) The presence of university,
- iii) The sensibility of users,
- iv) The membership of Healthy Cities Union,
- v) Climatic advantages (the existence of sea, and flora etc.),
- vi) Having the possibilities of being on foot (having a perceptible city structure that is on the scale of human)
- vi) The presence of natural resources such as river, etc.

Weaknesses

- i) The deficiency of activity's areas in terms of quality and quantity.
- ii) Inaccuracy or lack of organization.
- iii) Ongoing tendency.

Due to the develop strategies interviews results, observed field facts have been evaluated and designated an action plan (Tables 1, 2 and 3).

The action plan was suggested in 3 stages:

- Stage 1 the determination of priority areas.
- Stage 2 Model design and organization on the pilot area.
- Stage 3 Implementations.

(In every stage, because of monitoring, it would be come back to the previous stage.)

The main aim of action plan must be to raise awareness of the benefits of physical activity and to increase participation physical activity. Some intervention strategies at the local level raising awareness, skill development and national level initiatives should be implemented. Action plan mainly intends to contribute and

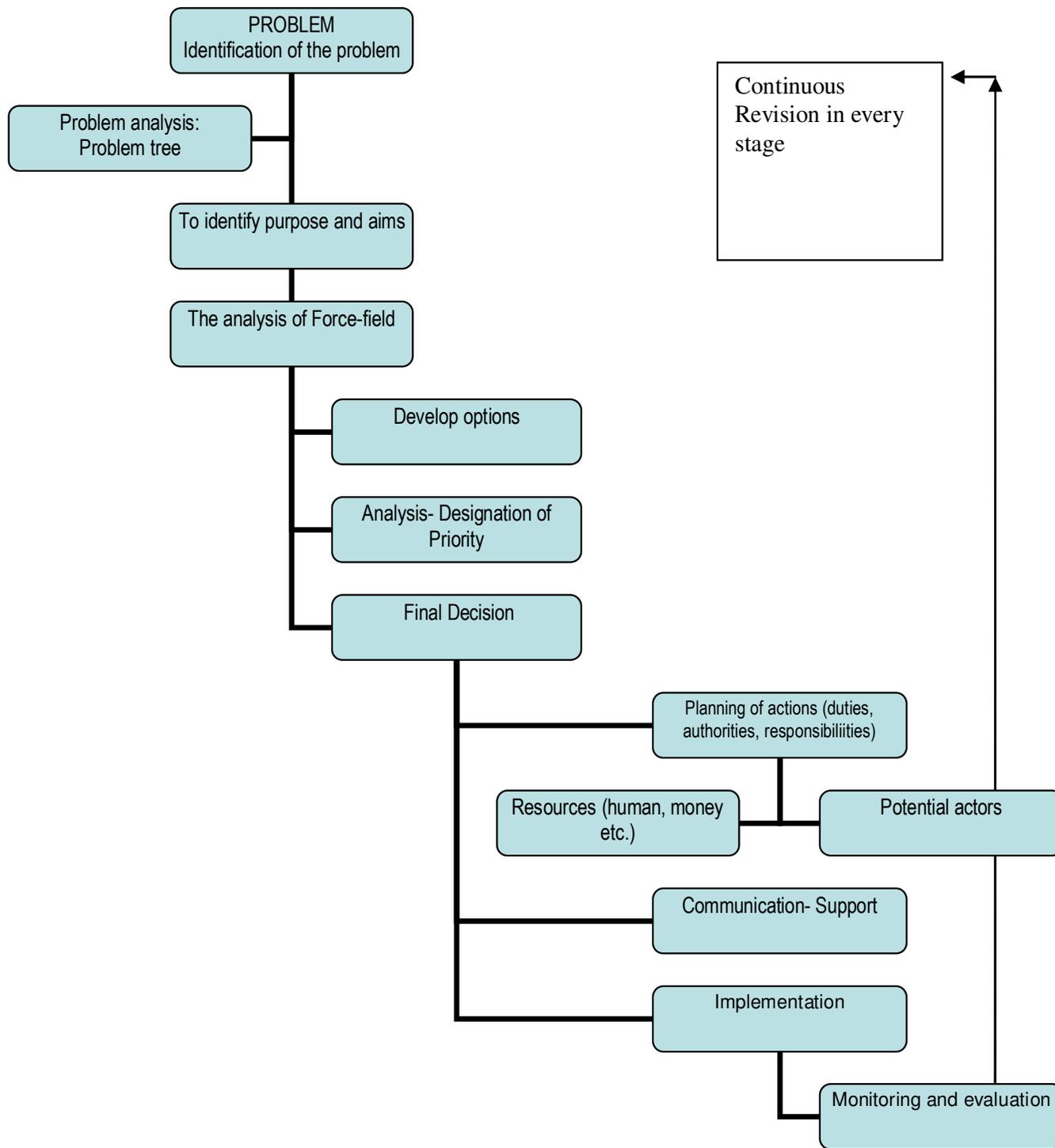


Figure 2. The Schema of Action Plan

and engagement of the voluntary business and community sectors.

It is obvious that positive characteristics of urban landscape support people in more active lifestyles. So, local

governments must give attention to create urban parks, green areas, and street trees. Also they should manage organizations which make people more active and encourage healthy life styles. Effective solutions the nee

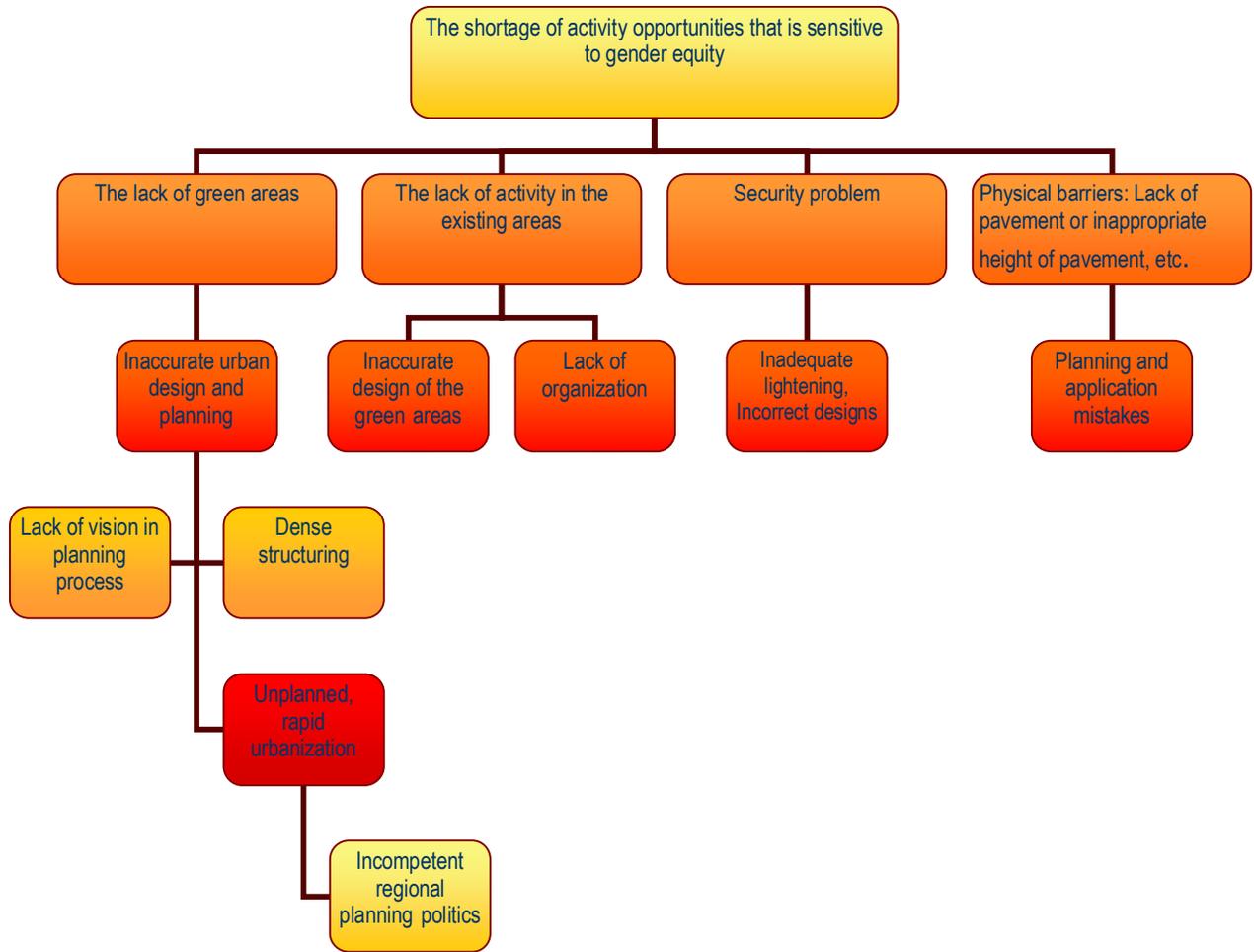


Figure 3. The problem tree (shortage of activity opportunities that is sensitive to gender equity).

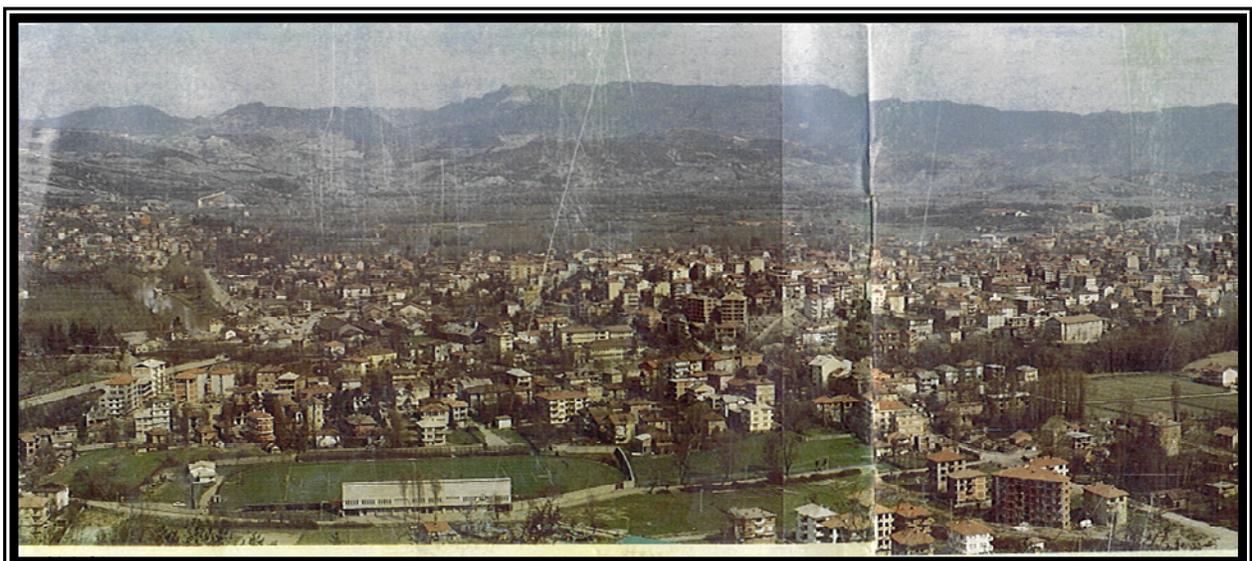


Figure 4. The existing open and green areas in Bartın and surrounding area.

Table 1. Action Plan: Duties, related actors and the programming of time – 1

The stages of action	Series of actions	Time	Description of duty- authority	Functionary- Responsible	Resource (Human, finance)
stage 1 The selection of activity area	Sub-stage 1.1. Determination of priority areas	10 days	Site survey- map analysis	Officers in charge from Municipality and Bartin University Faculty of Forestry, Dept. of LA	Human resources from the officers of Municipality and University. Vehicle: Municipality (For site excursion)
	Sub-stage 1.2. Determination and design of the areas for women activities.	10 days	Analytic survey.	Officers in charge from Municipality and Bartin University Faculty of Forestry, Dept. of LA	Human resources from the officers of Municipality and University. Vehicle: Municipality (For site excursion)
	Sub-stage 1.3. Selection the pilot project area: Centre of Bartin and Gazhane Park and its surrounding.	On the time of stages 1 and 2.	Analysis of Gazhane Park and its surrounding.	From Bartin University Faculty of Forestry, Dept. of LA 1 lecturer, 1 research assistant and 2 students.	Human Resource: The design group that are made up of academicians and students.

Table 2. Action Plan: Duties, related actors and the programming of time – 2.

The stages of action	Series of actions	Time	Description of duty- authority	Functionary- Responsible	Resource (Human, finance)
Stage 2 The landscape design for pilot area.	Sub-stage 2.1. Determination of priority areas (selection design area)	After the end of stage 1, in 1 month	Structural and planting landscape design: Survey, design projects scaled 1/500 and 1/1000, interviews of related actors, and providing public participation.	Design group	Human resource from Municipality (Outputs, and public notice, etc.)
	Sub-stage 2.2.	1 month	The meeting of users and design group: Determination of the functions in the area, and organizing workshop.	Design group and the delegates of community.	Municipality, Design group.

engagement of a wide range of agencies.

The Global Strategy of World Health Organization recommends that governments have a primary steering and stewardship role in initiating and developing the strategy, ensuring that it is implemented and monitoring its impact in the long term (WHO, 2004). So it is important that action plan for promoting physical activity in women for Bartin citizens. Bartin municipality and central governments (ministries) have major role to implement and sustain this plan. Local authorities should be closely

involved. Multidisciplinary experts, advisory boards should also be established.

National and local governments should frame politics and provide incentives to ensure that walking, cycling and other forms of physical activity are accessible and safe, transport policies include non-motorized modes of transportation, labor and workplace policies encourage physical activity and sport and recreation facilities embody the concept of sports for all. Public policies and legislation have an impact on opportunities for physical

Table 3. Action Plan: Duties, related actors and the programming of time – 3.

The stages of action	Series of actions	Time	Description of duty- authority	Functionary- Responsible	Resource (Human, finance)
Stage 3 Application of project and organizing program for the pilot area (Collective sports days, aerobic programs, etc.)	Sub-stage 3.1. Application of the Project on the area.	1 month	Site works.	Local government, Parks and Gardens Department, University design group, application unit, public and private nurseries etc.)	Human, vehicle.
	Sub-stage 3.2. Application of Structural and planting design.	1 month	Application of suitable equipments and functions on the research area.	Local government, Parks and Gardens Department, University design group, application unit, public and private nurseries.	Plants.
	Sub-stage 3.3. Organizations.	periodic (On the weekend, special days such as Mother Day, Spring Festival, etc.)	Organizations (for public sports, special days, aerobic, plates etc.) using mass media for the announcement of sports days	Local government and Women foundations such as Bartın Women Solidarity Association.	Human.
	Sub-stage 3.4.	All year.	Monitoring	Local government.	Human.

activity, such as those concerning transport, urban planning, education, labor, social inclusion, and health-care funding related to physical activity.

Environments should be promoted that facilitated physical activity, and supportive infrastructure should be set up to increase access to, and use of, suitable facilities (WHO, 2004). Local authorities need to address inequality based on gender and to support role models and events that feature active girls and women (WHO 2006).

Local strategies and plans should aim at promoting physical activity among people of all ages, in all social circumstances and living in different parts of cities, with special attention to equity deprivation and vulnerability (Edwards and Tsouros, 2006).

In general, physical activity interventions carried out in developing countries include strategies to;

- i) Raise awareness of the importance and benefits of physical activity among population.
- ii) Educate the whole population and for specific groups.
- iii) Conduct local physical activity programs and initiatives.
- iv) Build capacity; among individuals implementing local physical activity programs, through training of potential programs coordinators.
- v) Create supportive environments that facilitate participation in physical activity.

- vi) Give recognition/awards (WHO 2008).

Main purpose of the strategies should be promoted in people especially fragile class (such as women, elderly, disabled and children) for physical activity who are sedentary in their leisure time.

Walking as a low-cost activity for everybody is the most important type of physical activity. Local governments should encourage walking and later maintaining, walking route and environment.

As final remarks;

- i) Physical activity is an indispensable instrument for the physical and mental health of a person that in all ages and all kind of gender.
- ii) Furthermore, the opportunities of activity and areas are the most effective tools in terms of the organizing social togetherness and the creation of social control and secure society.
- iii) For that reason, in the cities, especially local governments should produce politics and projects in order to plan, design, manage and organize urban spaces that are equipped with equal opportunities.

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