



10,000 Steps Working Paper Series

Paper 2: Audit of 10,000 Steps Providers

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10,000 Steps Working Paper Series, Paper 2: Audit of 10,000 Steps Providers

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EXECUTIVE SUMMARY

This report from 10,000 Steps details the findings of the recent audit of 10,000 Steps Providers. This study highlighted the Providers use of the 10,000 Steps programs and resources since the program rolled out nationally in 2004.

- An estimated 73.5% of Providers have used the 10,000 Steps resources or implemented at least one of the 10,000 Steps programs.
- Of those Providers that have used the resources or implemented a program:
 - 63.2% have implemented a 10,000 Steps Challenge,
 - 25.0% have implemented a 10,000 Steps Pedometer Library Loan Scheme,
 - 9.1% have implemented 10,000 Steps Walkway Signage,
 - 23.9% have used the 10,000 Steps GP and Health Care Professional resources,
 - 41.4% have used the Professional Guide to Physical Activity resources,
 - 31.7% have used the media articles and finally,
 - 32.4% have accessed the research section.
- An estimated 40% of Providers purchased 10,000 Steps pedometers or 10,000 Steps pedometer and logbook packages from Health Management Group.
- Providers commented on the usability of the 10,000 Steps resources and website:
 - An estimated 89% of Providers agreed or strongly agreed that they liked the presentation of the 10,000 Steps website
 - An estimated 77.2% of Providers agreed or strongly agreed that they were able to easily find their way around the website to get the information they were looking for.
 - An estimated 93.4% of Providers agreed or strongly agreed that the information provided on the website is credible.
 - An estimated 93.8% of Providers agreed or strongly agreed that the information provided on the website is useful.
 - An estimated 73% of Providers agreed or strongly agreed that they found the resources easy to use.
 - An estimated 46.1% of Providers agreed or strongly agreed that they found the programs easy to implement.

BACKGROUND

10,000 Steps Rockhampton was Australia's first 'whole of community' health promotion physical activity project funded by Queensland Health. In 2001, the Rockhampton region was chosen for a two year trial of the project as the residents showed 'typical' levels of inactivity. During these two years, the 10,000 Steps Rockhampton Project was an exemplary model of an effective multi-strategy, multi-sector physical activity project. The project has been successful in motivating local communities, workplaces and individuals to increase their physical activity (PA) levels. As a result of the success in Rockhampton, Queensland Health extended their funding to support the dissemination of the program throughout the state and beyond.

As part of the program, 10,000 Steps is making the resources and programs implemented in the Rockhampton project available via the 10,000 Steps website in a restricted access section. Organisations and community groups register with 10,000 Steps to become '10,000 Steps Providers' and gain access to the resources and programs. These organisations can then use the resources and implement the programs to promote physical activity and raise physical activity awareness in their various locations. When registering with 10,000 Steps, Providers are under no obligation to use the resources or implement the programs and are not required to report to the 10,000 Steps project office. Therefore 10,000 Steps has been unable to identify the resources that have been utilised, the programs that have been implemented, nor evaluate the usefulness and effectiveness of these materials. To determine this information, 10,000 Steps has conducted an audit of the 10,000 Steps Providers. This evaluation activity will assist 10,000 Steps in the further development and refining of the 10,000 Steps website and resources. This report will highlight the methods and the findings of the audit of 10,000 Steps Providers.

Purpose

The purpose of this study was to conduct a survey of the 10,000 Steps Providers that have affiliated with the 10,000 Steps project to determine the efficiency and effectiveness of the 10,000 Step resources and website. This study aimed to investigate what resources the Providers have accessed and whether they have implemented 10,000 Steps programs within their organisation or community. The Providers were also asked to provide feedback on the usability of the resources and website, and suggest any further information or programs that may be beneficial to them or future Providers.

METHOD

Participants

The population surveyed was drawn from all Providers affiliated with 10,000 Steps as of February 1, 2006 (N=402). The Providers consisted of a variety of organisations including government (n=76), workplaces (n=121), including both corporate and private agencies), health service providers (n=132), schools (n=33), universities and TAFE (n=7), and community groups (n=33). In total, 83 Providers registered with 10,000 Steps in 2004; 294 registered in 2005 and 25 Providers registered in 2006 (prior to February 1).

Instruments

A web-based survey was utilised to determine the use of the 10,000 Steps resources and programs and evaluate their effectiveness. The web-based survey was developed using SSiWeb Software (Sawtooth Software) housed within the Population Research Laboratory at Central Queensland University. This type of survey was considered an appropriate method to conduct the audit as 10,000 Steps had a database of all Provider e-mail addresses and all Providers had access to the internet at time of registration. This approach proved to be an efficient and cost effective method to collect the data of interest.

The survey consisted of three components: 1) questions relating to the use of the 10,000 Steps resources and programs (e.g. 10,000 Steps Challenge); 2) questions relating to the use of additional 10,000 Steps resources and materials (e.g. pedometers and

promotional materials) and; finally, 3) questions relating to the usability of the website and resources. The web-based survey consisted of 51 questions in total. However, if participants indicated that they had not used a particular resource questions relating to its use and implementation were automatically skipped by the survey software management system. The audit of 10,000 Steps Providers received ethical approval by the Human Research Ethics Committee at Central Queensland University.

Procedures

The survey was conducted between 20 February and 28 March, 2006. All participants were e-mailed an introduction letter that contained a brief overview of the survey, an invitation to participate and most importantly, the unique link and URL address for the password protected web survey. As detailed in the information e-mail, clicking on the survey link was considered as informed consent to participate in the survey. Participants that completed the survey prior to the due date (28 March, 2006) went into the draw to win a minor incentive (Cardiosport Heart Rate Monitor donated by Health Management Group). Three reminder e-mails were sent out to all Providers at one, two and four week intervals after the initial survey request. A Thank You and final reminder notice was also posted on the 10,000 Steps Provider listserv one week prior to the survey closure date. Complete survey data was downloaded into SPSS Version 13.0 for data analysis.

Response Rate

Out of the 402 e-mails sent to potential participants, 26 were undeliverable. Of the remaining 376 potential participants, 196 responded with complete or partial surveys that were able to be analysed. Therefore, the response rate was calculated as follows: $100 \times (196/376) = 52.13\%$. Using the more conservative base of 402 potential respondents the response rate is found to be: $100 \times (196/402) = 48.76\%$. Based on initial registration information from the Providers, the 180 non-respondents (excluding the 26 undeliverable non-respondents) consisted mainly of health service providers (37.2%), workplaces (26.7%) and government organisations (19.4%).

The response rate calculated in this study was found to be comparable to those achieved by similar survey mediums (i.e. e-mail and web-based surveys). In a web-based survey of health professionals, Braithwaite and colleagues (2003) reported a response rate of under 30% raising to 52% following five reminders. In an earlier web-based survey, Dibb, Rushmer and Stern (2001) reported a response rate of 22%. However, no follow up e-mails were sent and responses were cut off after one week. In further analysis of response rates for surveys conducted via these mediums, response rates have varied between 19% to 61% in e-mail surveys (Sheehan, 2001) and 9% to 94% in web-based surveys (Braithwaite et al., 2003), with the average response rate found for e-mail surveys being 36.83% (Sheehan, 2001). It would appear that this audit of 10,000 Steps Providers has achieved an acceptable and above average response rate in comparison to previous e-mail or web-based surveys.

The following methods and reasons may have contributed to the above average response rate achieved for this web-based survey:

- The survey request was personalised for each Provider.
- Follow up e-mails were sent after the initial survey request.
- Only necessary questions were made compulsory during the web-based survey.
- Minor incentives were used. Participants who completed the survey were able to request a plain English copy of the results and went into the draw to win a Cardiosport Heart Rate Monitor.
- Topic salience. The topic of the survey (10,000 Steps programs and resources) should have been relatively important to each 10,000 Steps Provider.
- Research affiliation. Participants were contacted via an e-mail sent from 10000steps@cqu.edu.au. In this way, the survey could be associated with a credible research institution, Central Queensland University.

RESULTS

10,000 Steps Resources and Programs

The 10,000 Steps Provider audit found that out of the 196 respondents who completed the survey 73.5% have used the resources or implemented at least one of the 10,000 Steps programs. Of the 144 Providers that have implemented a program or used the resources:

- 63.2% (n=91) have implemented a 10,000 Steps Challenge,
- 25.0% (n=36) have implemented a 10,000 Steps Pedometer Library Loan Scheme,
- 9.1% (n=13) have implemented 10,000 Steps Walkway Signage,
- 23.9% (n=34) have used the 10,000 Steps GP and Health Care Professional resources,
- 41.4% (n=58) have used the Professional Guide to Physical Activity resources,
- 31.7% (n=44) have used the media articles and finally,
- 32.4% (n=45) have accessed the research section.

The 10,000 Steps Challenge was the most utilised program, followed by the information resources (Professional Guide to PA, media articles and research section) and then the Pedometer Loan Scheme and GP & Health Care Professional resources. The 10,000 Steps Walkway Signage had the lowest implementation rates.

10,000 Steps Challenge

A total of 91 respondents reported implementing a 10,000 Steps Challenge within their organisation or community. Almost 15% of Providers were in the process of implementing a Challenge at the time of the survey and a third of the respondents had conducted a Challenge within the last 3-6 months (Figure 1).

The majority of Providers implemented a Challenge within their current workplace (73.3%). The Challenge was also implemented in schools and across whole communities (Table 1), even though it was not originally designed for these locations. When implementing a Challenge, 6.6% of Providers employed a Challenge state wide across their organisation, while a further 6.6% implemented a Challenge nationally. However, the majority of Providers (53.8%) implemented their Challenge at just a single local site (Table 2). The number of individuals who participated in a 10,000 Steps Challenge ranged from 3 up to 17,000, with the total number of Challenge participants reported in this study being 36,744 individuals.

Table 1. Where Providers implemented the 10,000 Steps Challenge

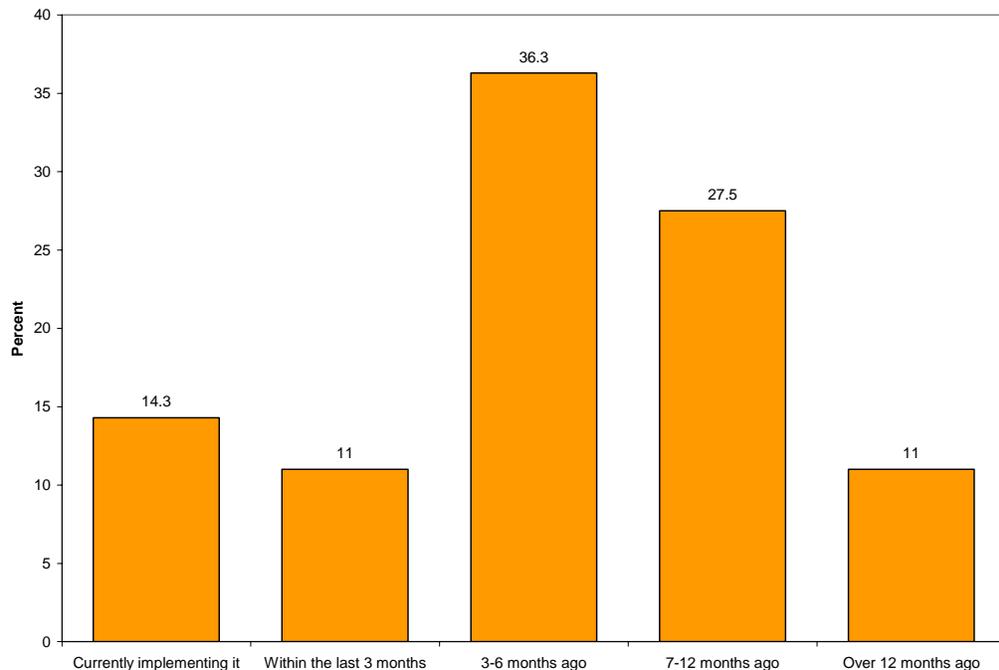
Where	N	Percent
Workplace	66	73.3%
Community Wide	9	10.0%
School	10	11.1%
Club or Community Group	3	3.3%
Other	2	2.2%
Total	90	99.9%*

* Due to rounding

Table 2. The extent to which the 10,000 Steps Challenge was rolled out

Extent	N	Percent
Local site	49	53.8%
Multiple locations	30	33.0%
State wide	6	6.6%
Nation wide	6	6.6%
Total	91	100.0%

Figure 1. When Providers implemented a 10,000 Steps Challenge



Participants were invited to enter any comments regarding the 10,000 Steps Challenge. The majority of the feedback regarding the Challenge was positive and informative. Providers reported that the Challenge resulted in increased physical activity awareness, participation, and motivation; and also aided team building. Providers commented that there were also subjective reports of increased feelings of well being and weight loss from many participants. Some typical responses are presented below:

- *“The challenge was great as it created an opportunity to increase physical activity levels and improve team relationships within the workplace.”*
- *“It was fun. It got everyone involved, even people who initially did not want to. I think everyone walked further than they realised and were motivated to walk more when they compared what they did to others.”*

A few Providers reported that the 10,000 Steps Challenge was difficult to maintain over the entire duration of the program. Some Providers also found that participants were enthusiastic at the beginning with motivation decreasing after the initial few weeks. In these instances, the length of the Challenge may have influenced the ease of implementation and participant’s enthusiasm and motivation. The 10,000 Steps Challenges vary in length from approximately 3 to 12 weeks or alternatively custom challenges of any length can be created by the organisation. It is possible that longer challenges may result in increased difficulty to maintain and decreased enthusiasm in participants; however this was not assessed in the current study. Furthermore in feedback, a couple of Providers requested more information on how to create a sustainable physical activity program following the initial 10,000 Steps Challenge.

- *“People registered but difficult to maintain given other priorities...”*
- *“People very enthusiastic at the beginning but enthusiasm wore off before the challenge finished”*

Providers also reported on how the Challenge was specifically implemented within their organisation. Many Providers reported that the initial Challenge was met with much enthusiasm and that follow up Challenges were employed. Some organisations reported

that they had conducted up to five different challenges over the past 12 to 24 month period. A few Providers summarised the alternate strategies used when implementing a Challenge within their organisation. One community club used a 10,000 Steps Challenge as a fundraising event to raise money for charity benefits. Alternatively, a school conducted a Challenge including all students over an 11 week school term. To help students participate in physical activity, a 1,000 metre walking course was marked out for students to walk during lunch times. Rewards were given when certain distances were achieved. The flexibility of the 10,000 Steps Challenge allowed the Providers to alter the Challenge to best suit the target audience and the goals of their organisation.

Not all of the Providers who used the 10,000 Steps resources implemented a 10,000 Steps Challenge. A majority of the Providers (50.9%) that had not implemented a Challenge reported that they were currently considering the option. Over a third of the respondents (37.7%) had not implemented a Challenge because this resource was not relevant to the core business of their organisation. Other reasons for not implementing a 10,000 Steps Challenge, such as requiring more information or support and time constraints, are identified in Table 3. It should be noted that at least half of the Providers who 'needed more information or support' reported that they needed more support from their own organisation (i.e., not 10,000 Steps) to aid in the implementation of the program.

Table 3. Reasons for not implementing a 10,000 Steps Challenge

Reason	Responses		Percent of Providers
	N	Percent	
Not relevant to core business	20	30.3%	37.7%
Too expensive	1	1.5%	1.9%
Looking into it	27	40.9%	50.9%
Needed more information/support	7	10.6%	13.2%
Could not get approval	2	3.0%	3.8%
Time constraints	4	6.1%	7.5%
Was not aware of program	1	1.5%	1.9%
Other	4	6.1%	7.5%
Total	66	100.0%	124.5%

Overall, it appears that the majority of Providers found the Challenge to be successful within their organisation or community group. Subjectively, the Providers reported that the Challenge was able to raise physical activity awareness and participation, and also contributed to social cohesion within the workplace. The main problems identified by Providers when implementing a Challenge, was the difficulty in continuing the program over the specified time frame and also maintaining the participants enthusiasm and motivation. To aid Providers in conducting a 10,000 Steps Challenge it may be beneficial for 10,000 Steps to provide more in depth fact sheets on how to efficiently implement the program. It would also be valuable to provide tips and ideas on how to maintain participant's enthusiasm and motivation throughout a Challenge. Finally, highlighting ways to create a sustainable physical activity program after a Challenge may be useful for Providers to continue promoting physical activity within their organisation.

10,000 Steps Pedometer Library Loan Scheme

A total of 36 Providers implemented a 10,000 Steps Pedometer Library Loan Scheme. Over half (54.3%) of the loan schemes (were implemented prior to the last six months, and approximately a quarter of the loan schemes were only being implemented at the time of the survey (Figure 2). The majority of loan schemes were implemented in public libraries (58.3%); however schools, workplaces and various types of health centres (hospitals, GP's, medical services) had also adopted the program (Table 4).

Figure 2. When Providers implemented a 10,000 Steps Pedometer Loan Scheme

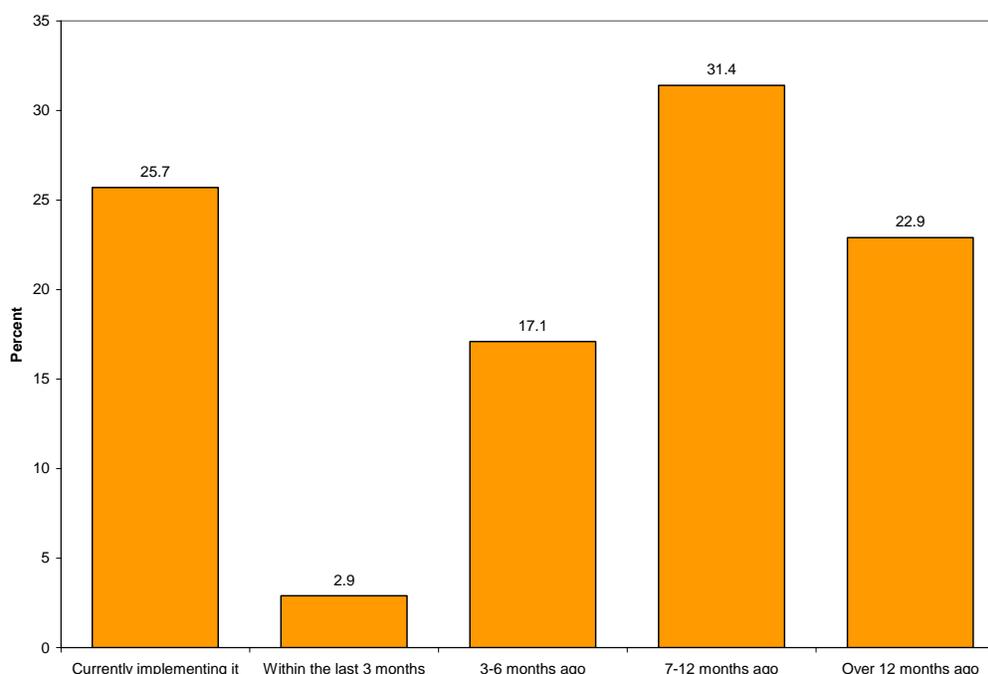


Table 4. Where Providers implemented the 10,000 Steps Pedometer Loan Scheme

Where	N	Percent
Private Library	2	5.6%
Public Library	21	58.3%
School Library	6	16.6%
Workplace	2	5.6%
Health Centre	5	13.9%
Total	30	100.0%

By combining all pedometer loan schemes implemented, it was estimated that a total of 4,838 individuals have borrowed a pedometer from the loan scheme program. Participant numbers ranged from 1 (in loan schemes just starting) to 780 (in well established programs). A few Providers commented that they could not give accurate estimates at the time of completing the audit, so it may be assumed that the total uptake of the pedometer loan scheme is actually over 5,000 individuals.

Similar to the 10,000 Steps Challenge, a high percentage of the feedback about the pedometer loan scheme was positive and also informative. Organisations appeared to be pleased with the initial uptake of the pedometer loans and a few were looking at expanding the loan scheme to other libraries in the area.

- *“It has been running really well at the library it is currently in and we are about to implement it into 2-3 more libraries very soon.”*

Unfortunately, a few Providers found that library staff were unsupportive of the pedometer loan scheme and believe that this may have affected uptake of the program in their local region.

The flexibility of the loan scheme was highlighted as the Providers detailed the different methods used when implementing the loan scheme within their organisation. One organisation created a library of pedometers within their workplace that both staff and the

general public can access. Schools have added class sets of pedometers into the library that teachers can borrow and use with their students. Finally, one health centre lends pedometers on a trial basis to interested clients. The clients can then determine if a pedometer would be valuable motivation tool to increase their physical activity prior to purchasing one. The pedometer loan scheme resources provided by 10,000 Steps were able to be incorporated and adapted to suit each organisations requirement.

Most respondents who had used some of the 10,000 Step resources but had not implemented a library loan scheme found that it was not relevant to their organisation's core business or target audience (approximately 30%). A quarter of respondents found that a pedometer loan scheme was not necessary as their organisation had alternative arrangements for sourcing pedometers. A small percentage of Providers reported the loan scheme was too expensive to implement (15.0%) or were unaware of the scheme (5.6%). Further reasons for not implementing a pedometer loan scheme are highlighted in Table 5.

Table 5. Reasons for not implementing a 10,000 Steps Pedometer Loan Scheme

Reason	Responses		Percent of Providers
	N	Percent	
Not relevant to core business	34	29.0%	31.8%
Too expensive	16	13.7%	15.0%
Looking into it	14	12.0%	13.1%
Needed more information/support	8	6.8%	7.5%
Could not get approval	3	2.6%	2.8%
Implemented by another organisation	3	2.6%	2.8%
Not necessary	28	23.9%	26.2%
Was not aware of program	6	5.1%	5.6%
Other	5	4.3%	4.7%
Total	117	100.0%	109.3%

It appears that most of the Providers who had implemented a pedometer library loan scheme were happy with the initial uptake of the program and it was positive to find that some organisations were considering expanding the program to other library sites. This study highlighted that expense of implementation and lack of support from library staff are important issues that need to be overcome to successfully implement a pedometer loan scheme. It is recommended that 10,000 Steps provides more information to Providers about establishing partnerships to overcome libraries reservations in implementing and promoting the program. In addition to this, it may be necessary to further highlight the benefits and also the sustainability of this program so that Providers can understand that the long term benefits of establishing a loan scheme far outweigh the initial cost.

10,000 Steps Walkway Signage

Only 13 Providers reported that they had implemented 10,000 Steps Walkway Signage. The time periods over which the signage was implemented can be seen in Figure 3. The signage was implemented in a variety of community locations, such as local gardens, walking paths and existing footpaths (Table 6). Providers that implemented the walkway signage often introduced it in multiple locations, with one Provider reporting that signage had been implemented in all locations listed in the table (excluding workplace). The amount of signage implemented by each organisation ranged from 1 (in workplaces) to approximately 50 (across a whole community), with around 200 signs implemented altogether.

Figure 3. When Providers implemented the 10,000 Steps Walkway Signage

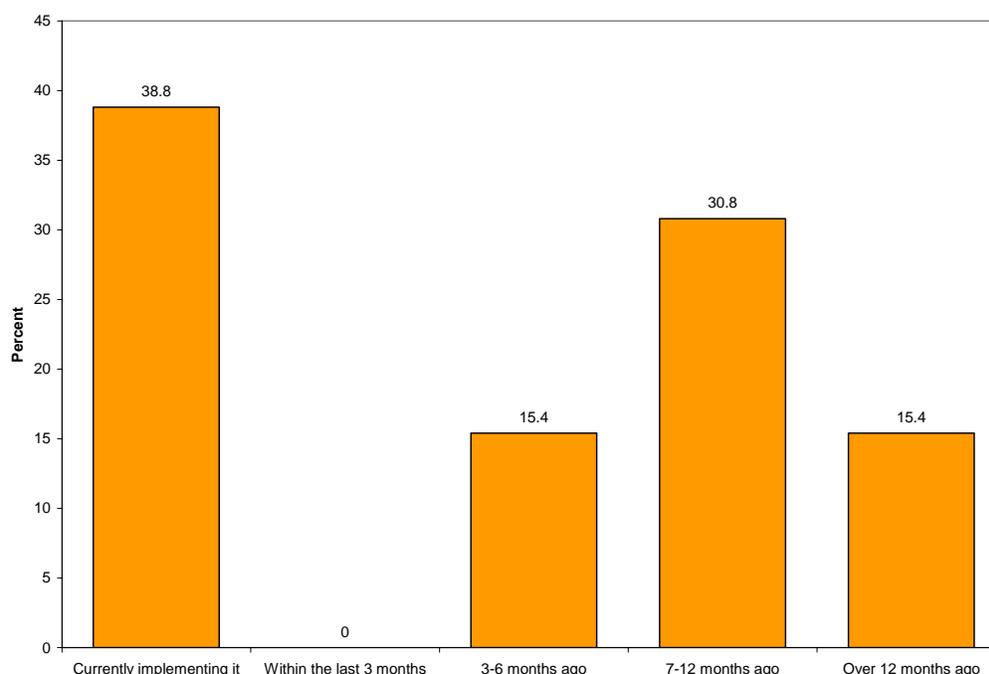


Table 6. Where Providers implemented the Walkway Signage

Where	Responses		Percent of Providers
	N	Percent	
Local gardens or parks	8	30.8%	61.5%
Existing footpaths	4	15.4%	30.8%
Walking paths	6	23.1%	46.2%
Local Streets	2	7.7%	15.4%
University Walkways	2	7.7%	15.4%
Workplaces	3	11.5%	23.1%
Other	1	3.8%	7.7%
Total	26	100.0%	200.0%

Providers commented on the use of the signage across their local community, with one Provider highlighting that more signage had been developed and would be installed in the near future. It was thought that the Walkway Signage was “quite effective” and was a good focus point for the community - “Good conversation point”. No negative feedback was received about the 10,000 Steps Walkway Signage.

Providers that had used some of the 10,000 Steps Resources but had not implemented the Walkway Signage generally found that this strategy was not relevant to their organisation’s core business (53.2%). However, approximately 19% of the Providers were looking into the Walkway Signage program at the time of the survey. Around 12% of Providers found that the signage was too expensive to implement and almost 9% found that they could not get approval to implement the signage in their local area. A few Providers noted that their local council was not or would not be supportive of the walkway signage and this inhibited their use of the program. Other reasons for not implementing the Walkway Signage are shown in Table 7.

It appears that the Walkway Signage has been a successful initiative in a few communities, where it has been used to create and encourage a friendly walking environment. However, Providers noted that lack of approval or lack of support from local

council as well as implementation costs have inhibited their use of the Walkway Signage. Again, 10,000 Steps may find it beneficial to provide more information on creating partnerships and implementing this sustainable physical activity intervention to help organisations engage and gain support from local councils.

Table 7. Reasons for not implementing 10,000 Steps Walkway Signage

Reason	Responses		Percent of Providers
	N	Percent	
Not relevant to core business	67	47.2%	53.2%
Too expensive	15	10.6%	11.9%
Looking into it	24	16.9%	19.0%
Needed more information/support	10	7.0%	7.9%
Could not get approval	11	7.8%	8.7%
Implemented by another organisation	3	2.1%	2.4%
Was not aware of program	5	3.5%	4.0%
Other	7	4.9%	5.6%
Total	142	100.0%	112.7%

10,000 Steps GP and Health Care Professional Resources

This survey revealed that 34 Providers have used the GP and Health Care Professional resources. However, out of the 56 health service providers who completed the survey only 15 reported using the GP and Health Care Professional Resources. Other organisations that used these resources are highlighted in Table 8. Approximately 25% of Providers were beginning to use these resources at the time of the study. An overall breakdown of when Providers started using the resources is shown in Figure 4. More importantly, 22 Providers (66.7%) reported that they were still utilising these resources at the time of the survey.

The GP and Health Care Professional resources were most used utilised by health service providers such as allied health professional centres and local general practitioners as would be expected. Surprisingly, a number of schools, universities, workplaces and community groups also accessed this resource to provide further physical activity and health information to their relevant members. An overview of where the GP and Health Care Professional resources were used can be seen in Table 8. In total, the Providers estimate that this resource has been exposed to almost 6,000 individuals across the various settings. However, a number of respondents were unsure of the exposure or unable to evaluate the dissemination of this resource within their organisation.

The additional feedback received about the GP and Health Care Professional resources was limited to how each Provider used the resources in their individual setting. The Providers who responded to this question generally reported that they used this resource for informational purposes, especially to provide further background information for other programs. Two Providers commented that they were able to adapt the information to suit the requirements of their organisation (e.g. incorporated behaviour change information as well).

Figure 4. When Providers used the 10,000 Steps GP and Health Care Professional resources

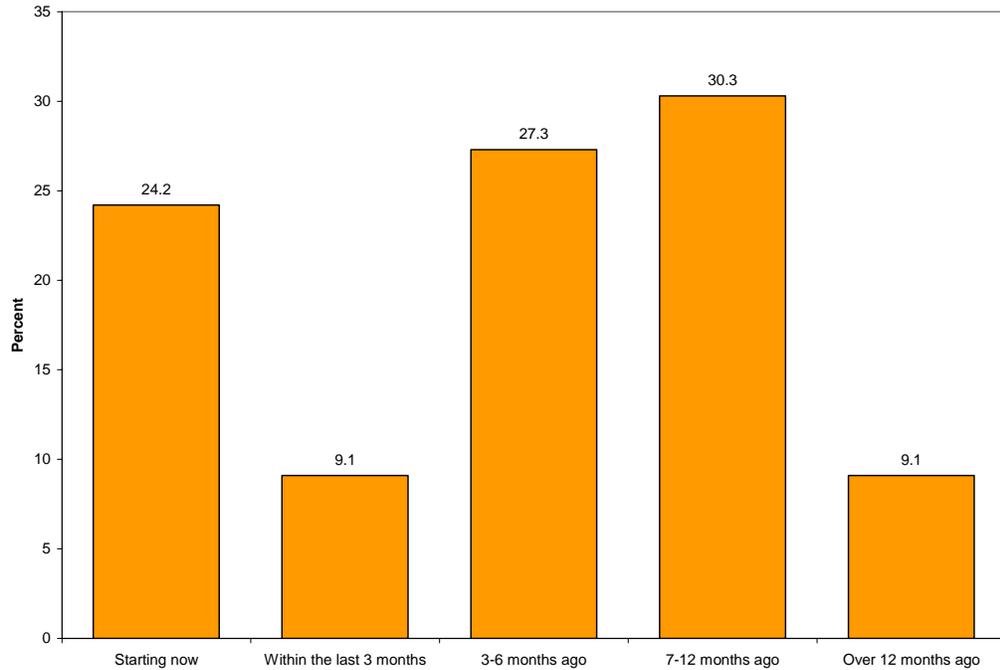


Table 8. Where Providers used the GP & Health Care Professional resources

Where	Responses		Percent of Providers
	N	Percent	
Hospital	5	10.4%	15.2%
Community medical/health centre	8	16.7%	24.2%
Local GP	10	20.8%	30.3%
Allied Health Professional centre	11	22.9%	33.3%
Local community group	3	6.3%	9.1%
School/University	2	4.2%	6.1%
Workplace	5	10.4%	15.2%
Other	4	8.3%	12.1%
Total	48	100.0%	145.5%

Providers who had not utilised these resources (but had used other resources) generally reported that this particular resource was not relevant to the core business of their organisation (48.5%). A small percentage (6.8%) actually used their own resources or other similar resources to gain this information while almost 10% of Providers reported that they were not aware of the GP and Health Care Professional resources. A complete breakdown of the reasons why the GP and Health Care Professional resources were not used can be seen in Table 9.

Table 9. Reasons for not using the GP and Health Care Professional resources

Reason	Responses		Percent of Providers
	N	Percent	
Not relevant to core business	50	45.9%	48.5%
Too expensive	2	1.8%	1.9%
Looking into it	18	16.5%	17.5%
Needed more information/support	16	14.7%	15.5%
Used own/other resources for this information	7	6.4%	6.8%
Was not aware of resource	10	9.2%	9.7%
Other	6	5.5%	5.8%
Total	109	100.0%	105.8%

Providers did not provide any anecdotal feedback on the success of the GP and Health Care Professional resources or its overall acceptance in each organisation. However, considering that two-thirds of the Providers are still utilising the resources and they have exposed the resources to around 6000 individuals it appears to have been a relatively successful initiative for those who have implemented it. Furthermore, the Providers did not highlight any negative issues about using the resources. Overall the GP and Health Care Professional resources had a smaller uptake than the 10,000 Steps Challenge or the Pedometer Loan Scheme. In addition 10% of Providers who had implemented another 10,000 Steps program were not even aware of these resources. It is important that the GP and Health Care Professional resources are continually promoted to ensure uptake and use in the community. It may be necessary to further promote the program on the 10,000 Steps website to reach current Providers and it may also be beneficial to promote the program directly to health care professionals.

Professional Guide to Physical Activity Resources

A total of 58 Providers reported that they used the Professional Guide to Physical Activity resources. Of these 56.4% stated that they used the physical activity manual as a stand alone resource, while approximately 21% reported that they used the resources to conduct a physical activity workshop. Providers reported that between 12 and 250 people attended the various workshops, with a total of 585 people reported by all participating Providers.

The few comments received in feedback about the Professional Guide to Physical Activity resource were very positive as Providers found the resource to be practical and useful.

- *“Great resources, well accepted by all in attendance”*
- *“Used in conjunction with other... material, good to value add with”*

Almost 30% of the Providers, who have not used the Professional Guide to Physical Activity resources (but have used other resources), reported that it was not relevant to their core business. More interestingly, over a quarter of Providers found that it was too expensive to utilise these resources. All of the Professional Guide to Physical Activity resources are free to access on the website and therefore, it may be speculated that Providers find it too costly to conduct the optional physical activity workshop. Furthermore, 18.5% of the Providers were not aware of this resource. The summary of reasons Providers did not use the Professional Guide to Physical Activity resources are presented in Table 10.

Table 10. Reasons for not using the Professional Guide to Physical Activity

Reason	Responses		Percent of Providers
	N	Percent	
Not relevant to core business	24	28.6%	29.6%
Too expensive	22	26.2%	27.2%
Looking into it	3	3.6%	3.7%
Needed more information/support	8	9.5%	9.9%
Could not get approval	1	1.2%	1.2%
Used own/other resources for this information	3	3.6%	3.7%
Was not aware of resource	15	17.8%	18.5%
Other	8	9.5%	9.9%
Total	84	100.0%	103.7

The Professional Guide to Physical Activity resources contains valuable background information on physical activity for health professionals, organisations and also individuals. The value of this information was highlighted by the extra feedback received from some Providers. Expense, lack of relevance and lack of awareness were the three main reasons why Providers had not used the Professional Guide to Physical Activity resources, despite using other 10,000 Steps resources. 10,000 Steps needs to promote these resources and also highlight how they can be used in relation to other 10,000 Steps programs. The Professional Guide to Physical Activity resources provides background physical activity information that would find useful when implementing any other 10,000 Steps initiatives. 10,000 Steps should provide links to these resources from the other programs, such as the 10,000 Steps Challenge and 10,000 Steps Pedometer Loan Scheme. This would help raise Providers awareness of the Professional Guide to Physical Activity resources and may help the Providers overcome issues of relevance and expense.

Media Articles

Approximately a quarter of Providers, who responded to this survey (44), have used the media articles supplied in the Provider section of the 10,000 Steps website. The Providers have distributed these articles in a variety of manners with the most popular being newsletters (61.4%), followed by noticeboards (36.4%) and within the local community newspaper (27.3%; Table 11). Only two Providers would like additional information provided in the media articles section.

Table 11. Where Providers distributed the 10,000 Steps media articles

Where	Responses		Percent of Providers
	N	Percent	
Newsletter	27	33.3%	61.4%
Mailing list	9	11.1%	20.5%
Local paper	12	14.8%	27.3%
Internet site	5	6.2%	11.4%
Noticeboard	16	19.8%	36.4%
Radio	3	3.7%	6.8%
Workplace	7	8.6%	15.9%
Other	2	2.5%	4.5%
Total	81	100.0%	184.1%

As with previous resources, the main reason why Providers have not used the media articles (despite using other resources) was because they felt this resource was not relevant (42.2%). However, almost a quarter of these Providers were currently considering using the media articles. Finally, almost 20% of respondents were not aware that they could use the 10,000 Steps media articles for distribution (Table 12).

Table 12. Reasons for not using the media articles

Reason	Responses		Percent of Providers
	N	Percent	
Not relevant to core business	38	40.9%	42.2%
Too expensive	1	1.1%	1.1%
Looking into it	22	23.7%	24.4%
Needed more information/support	4	4.3%	4.4%
Used own articles	4	4.3%	4.4%
Was not aware that I could use them	17	18.3%	18.9%
Other	7	7.5%	7.8%
Total	93	100.0%	103.3%

Overall, it appears that a large proportion of Providers have not used the media articles because they felt they were not relevant or because they were not aware that the articles could be distributed. In response to these findings, 10,000 Steps needs to reiterate that Providers are free to disseminate the supplied media articles to promote their 10,000 Steps activities and/or raise physical activity awareness in their organisation or community. Furthermore, 10,000 Steps should promote the use of the media articles across all of the 10,000 Steps programs and resources. The media articles focus on general physical activity information which can be useful in raising physical activity awareness, regardless of the actual program Providers are adopting. On the website, it would be beneficial to highlight the use of the media articles and provide links to the media articles in most of the other 10,000 Steps resource sections. This would raise awareness of the media articles and may also show Providers the relevance of using the media articles regardless of the 10,000 Steps activities they are conducting.

Research Section

A total of 45 Providers accessed the Research section within the Provider area of the 10,000 Steps website. Thirty-nine Providers reported that the references provided in this section were useful, while the other six Providers did not respond. Providers were asked if they would like any additional information provided within the Research section. A list of possible choices was provided (Table 13) and Providers were able to select multiple responses. The information that was most requested was references for articles on the benefits of active workplaces (55.8%). This was followed by references for articles on the benefits of physical activity (41.9%) and references for articles on the benefits of physical activity and diabetes (39.5%). A small proportion reported that they would like abstracts for the articles (16.3%), while approximately a quarter of the Providers reported that would not like any other information.

Around 63% of the Providers who have used at least one of the 10,000 Steps resources but did not use the Research section reported that they were not aware of this section. Almost 14% of Providers that did not use the Research section were considering accessing it, while 12.8% reported that it was not relevant to their organisation. A summary of these reasons can be seen in Table 14.

The research section needs to be further highlighted as a valuable 10,000 Steps resource where Providers can access peer reviewed articles about 10,000 Steps and physical activity. A large proportion of Providers were not even aware that this resource existed. Based on Provider's suggestions, it is recommended that 10,000 Steps provide a few references for each of the major areas in which Providers would like additional information, e.g. benefits of active workplaces, benefits of physical activity, etc. The information Providers receive from such articles would aid them in promoting the various 10,000 Steps initiatives to management or supporting partners and even provide background information on physical activity to participating individuals. It does not appear that links to abstracts are necessary at this stage. 10,000 Steps should further promote the use of the research section, as the listed articles can provide supporting evidence for the implementation and use of possibly all of the 10,000 Steps resources. Promoting the use of the research section across all programs should raise Providers awareness of the

section, and supplying additional references should make the resource more valuable to Providers.

Table 13. Information Providers would like in the Research section

Information	Responses		Percent of Providers
	N	Percent	
Nothing else	11	8.4	25.6%
Links to abstracts	7	5.3	16.3%
References for articles on pedometer reliability and validity	12	9.2	27.9%
References for articles on the effectiveness of pedometer interventions	16	12.2	37.2%
References for articles on benefits of active workplaces	24	18.3	55.8%
References for articles on benefits of physical activity	18	13.7	41.9%
References for articles on benefits of physical activity and children	13	9.9	30.2%
References for articles on benefits of physical activity and the elderly	12	9.2	27.9%
References for articles on benefits of physical activity and diabetes	17	13.0	39.5%
All of the above	1	0.8	2.3%
Total	131	100.0	304.7%

Table 14. Reasons for not accessing the Research section

Reason	Responses		Percent of Providers
	N	Percent	
Was not aware of the Research section	60	63.2%	63.8%
Was thinking about accessing it	13	13.7%	13.8%
Not relevant to core business	12	12.6%	12.8%
Time constraints	7	7.4%	7.4%
Other	3	3.1%	3.2%
Total	95	100.0%	101.1%

Not implemented any 10,000 Steps Programs or used any 10,000 Steps Resources

Fifty-two of the Providers (26.6%) who completed the survey had not implemented or used any of the 10,000 Steps resources and programs. However, over 40% of these Providers were actually considering using the resources or implementing a program in the future (Table 15). The other main reasons for not implementing any program or utilising any of the resources were that the Providers could not get approval (22%) and also that the Providers needed more information or support (18%). Unfortunately, the study did not specify whether the Providers needed more support from 10,000 Steps or from their organisation to help implement the resources.

Table 15. Reasons for not using any 10,000 Steps programs or resources

Reason	Response		Percent of Providers
	N	Percent	
Not relevant to core business	3	4.8%	6.0%
Too expensive	2	3.2%	4.0%
Looking into it	21	33.9%	42.0%
Needed more information/support	9	14.5%	18.0%
Could not get approval	11	17.7%	22.0%
Programs were not suitable	2	3.2%	4.0%
Not needed at present/ Waiting for appropriate time	5	8.1%	10.0%
Was not aware of the programs or resources	2	3.2%	4.0%
Other	7	11.3%	14.0%
Total	62	100.0%	124.0%

Even though this group of Providers did not specifically use any of the 10,000 Steps resources, 96% still found that the information provided on the website was useful. Only five of these Providers suggested additional resources or programs that may be beneficial. The suggested resources were: 1) information on Heartmoves, green prescription or active scripts; 2) more information to aid in the implementation of programs; 3) walking school bus programs and ride/walk to work days; 4) articles or programs with a specific indigenous focus; and finally, 5) information and resources to promote dog walking. In response to these suggestions it is important to note that some of these requests fall beyond the boundaries of 10,000 Steps. Heartmoves, green prescription, active scripts and walking school bus are other government initiatives which individuals and organisations are free to access on their own accord. Furthermore, Heartmoves, green prescription and active scripts are all similar initiatives to the 10,000 Steps GP and Health Care Professionals resources. Therefore, Providers that are interested in these alternate resources may actually find it valuable to investigate the current package for GP and Health Care Professional provided by 10,000 Steps. The walking school bus is an initiative directed at schools and children; which are not the target population of the 10,000 Steps project at this time. While 10,000 Steps cannot provide this alternate information requested, it may be beneficial to consider providing links to some of these alternate physical activity sites.

10,000 Steps has already planned to produce, provide or distribute most of the other information suggested (Walk to Work days, dog walking materials and implementation guides). 10,000 Steps features the details of the Walk to Work days in the e-newsletters and on the Provider listserv. Links to the Walk to Work website are provided at this time so members can access additional information if required. Initial information on the 10,000 Steps Dog Walking strategy is now available on the 10,000 Steps website with only specific artwork files waiting to be finalised. Following the recent upgrade of the 10,000 Steps website, up-to-date implementation guides are being developed to aid Providers in the use of the website and the implementation of the programs. Finally, 10,000 Steps may like to investigate the possibility of liaising with Queensland Health and Indigenous health promotion officers to develop resources with an Indigenous focus. 10,000 Steps is able to provide most of the additional resources requested by the Providers who have not utilised the current 10,000 Steps resources and programs.

Prior to conducting the survey it was understood that not all Providers may register with the aim of utilising and implementing the various 10,000 Steps resources. Providers may have registered to gain further information about 10,000 Steps and physical activity or they may have registered to determine if the 10,000 Steps programs were suitable for their organisation. Therefore Providers that have not used the resources (n=52) were asked why they initially registered with the 10,000 Steps project. Providers were asked to select all reasons that apply. Two-thirds of this group of Providers did register with the aim of implementing the programs. A lot of Providers registered for professional interest or

because they wanted to know more about 10,000 Steps. The reasons Providers (who had not used any 10,000 Steps resources) registered are highlighted below:

- 13.2% (n=7) of these Providers registered for personal interest,
- 56.6% (n=30) of these Providers registered for professional interest,
- 66.0% (n=35) of these Providers registered with the aim of using the resources/programs,
- 43.4% (n=23) of these Providers registered because they wanted to know more about 10,000 Steps,
- 11.3% (n=23) of these Providers registered because they wanted to know more about physical activity,
- 7.5% (n=6) of these Providers registered for health promotion purposes, and
- 3.8% (n=7) of these Providers registered for other reasons.

Future use of 10,000 Steps Programs and Resources

All Providers that completed the survey were asked to comment on their intended use of the 10,000 Steps resources and programs in the future (Table 16). It was reported that:

- 61.8% (n=115) of Providers intend to implement a 10,000 Steps Challenge in the future,
- 23.1% (n=43) of Providers intend to implement a 10,000 Steps Pedometer Loan Scheme,
- 21.0% (n=39) of Providers intend to implement 10,000 Steps Walkway Signage,
- 31.7% (n=59) of Providers intend to use the GP & Health Care Professional resources,
- 34.4% (n=64) of Providers intend to use the media articles provided,
- 37.1% (n=69) of Providers intend to access the Research section and, finally
- 19.4% (n=36) of Providers do not plan on using any of the 10,000 Steps resources or programs in the future.

Table 16. Future use of the 10,000 Steps resources and programs

Resource	Responses		Percent of Providers
	N	Percent	
No, not planning on using any of the resources	36	7.1%	19.4%
10,000 Steps Challenge	115	22.8%	61.8%
Pedometer Loan Scheme	43	8.5%	23.1%
Walkway Signage	39	7.7%	21.0%
GP & Health Care Professional resources	59	11.7%	31.7%
Professional Guide to Physical Activity	79	15.7%	42.5%
Media articles	64	12.7%	34.4%
Research section	69	13.7%	37.1%
Total	504	100.0%	271.0%

Other 10,000 Steps Resources

All of the Providers that responded to the survey (n=196) were asked about their use of additional 10,000 Steps resources, such as pedometers and promotional materials. The Providers use of other 10,000 Steps resources are highlighted below.

10,000 Steps Pedometers

Approximately 40% of the Providers have purchased 10,000 Steps Pedometers or 10,000 Steps Pedometer and Logbook packages from Health Management Group. However, over half of the Providers (51.6%) have purchased another brand or type of pedometer, with approximately 14% of Providers purchasing both 10,000 Steps and another brand of pedometer.

When investigating which other types of pedometers Providers have purchased, the most common brand was Yamax pedometers that were not 10,000 Steps branded (23.2%). Following this was the Heart Foundation pedometer (still Yamax brand) and also Omron pedometers. See Table 17 for more details.

The two major reasons Providers purchased other brands of pedometers were because they were a cheaper option (49.5%) and also more readily available (47.2%; Table 18). In addition to this, many Providers purchased another brand of pedometer because they were unaware of the 10,000 Steps pedometer at the time of purchase (22.7%). A few reported that they had problems with 10,000 Steps pedometers such as purchasing issues (out of stock and minimum order numbers not practical). Other reasons that were reported were the ability to brand the pedometer with company logo (which can not be done with the 10,000 Steps pedometer) and also purchasing the alternate (often cheaper) brand for a comparison or replacement pedometer.

Table 17. Other brands of pedometers Providers purchased

Brand	Responses		Percent of Providers
	N	Percent	
Omron	14	11.8%	14.7%
Sportlife	8	6.7%	8.4%
Walk4Life	4	3.4%	4.2%
Oregon Scientific	5	4.2%	5.3%
Weight Watchers	12	10.1%	12.6%
Heart Foundation pedometer	14	11.8%	14.7%
Yamax but not 10,000 Steps branded	22	18.5%	23.2%
York	2	1.7%	2.1%
Coles	2	1.7%	2.1%
Diabetes	3	2.5%	3.2%
Other	25	21.0%	26.3%
Do not know which brand/type	8	6.7%	8.4%
Total	119	100.1%*	125.3%

* Due to rounding

Table 18. Reasons Providers purchased other brands of pedometers

Reason	Responses		Percent of Providers
	N	Percent	
Cheaper option	48	33.8%	49.5%
Availability	46	32.4%	47.2%
Was not aware of 10,000 Steps pedometer/Ordered prior	22	15.5%	22.7%
Did not like 10,000 Steps pedometer	3	2.1%	3.1%
Wanted other functions on the pedometer	4	2.8%	4.1%
Other brand recommended	3	2.1%	3.1%
Better Quality	2	1.4%	2.1%
Existing arrangements with different vendor/Other pedometer supplied	6	4.2%	6.2%
Problems with 10,000 Steps pedometer	3	2.1%	3.1%
Other	5	3.5%	5.2%
Total	142	99.9%*	146.4%

*Due to rounding

Provider Listserv

A total of 95 Providers reported that they were subscribed to the 10,000 Steps Provider listserv. However when viewing Listserv details on the 10,000 Steps website at the time of the survey only 86 Providers were actually subscribed. Providers appear to be unsure of their membership to the Provider listserv. A number of Providers even commented during the survey that they were unsure of their subscription status. It is possible that Providers have confused the listserv with the 10,000 Steps monthly e-newsletter which is disseminated via e-mail, similar to the listserv. The majority of Providers who said they were subscribed to the listserv stated that they found the information useful (91.3%). However, as more Providers stated they were members than

actually are, the validity of these responses is questionable. It may be necessary to further evaluate the efficacy of the listserv by directly targeting the current listserv members.

Nine Providers suggested other information that they would like to receive on the listserv. It was highlighted that specific case studies as well as other Provider's ideas and feedback about the programs would be useful. Listserv members would like more information about 'what works' from other Providers who have previously implemented the programs. Providers also thought they would benefit from ideas to maintain the motivation of participants when conducting a 10,000 Steps Challenge.

In response to these suggestions, 10,000 Steps should consider distributing case studies on the Provider listserv. Further encouragement should be given to Providers to post overviews of their programs and ideas on the listserv, which may aid other Providers who are implementing a similar program. Finally, it is recommended that 10,000 Steps investigate the possibility of providing tips for maintaining motivation within a 10,000 Steps Challenge on the listserv.

Participants were asked to state their main reason for not subscribing to the listserv. Of the 92 Providers who responded to this question, 60.9% were not actually aware of the listserv (Table 19). Again, a few respondents commented that they were unsure what the listserv was or whether they were currently subscribed.

Table 19. Reasons for not subscribing to the 10,000 Steps Provider Listserv

Reason	N	Percent
Was not aware of the listserv	56	60.9%
Am planning to join	6	6.5%
Not sure whether it is worthwhile	9	9.8%
Do not wish to join	15	16.3%
Other	6	6.5%
Total	92	100.0%

From the overall feedback given about the listserv it appears that a lot of Providers are unsure what the listserv is and its functionality. Accordingly, many Providers do not seem to know if they are currently subscribed. 10,000 Steps needs to clarify the function of the listserv and furthermore promote its use. Providing case studies and further encouraging Providers to add their ideas, feedback or even problems to the listserv may encourage its use and add to its value as a 10,000 Steps resource. To further evaluate the efficacy of the listserv it may be necessary to conduct research via the listserv itself and target the current listserv members.

Promotional Materials

10,000 Steps currently provides a range of promotional materials to Providers for free or for a small cost-recovery fee. When examining the use of these promotional materials it was found that:

- 17.7% (n=33) of Providers used the 10,000 Steps bookmarks,
- 31.7% (n=59) of Providers used the 10,000 Steps posters,
- 17.7% (n=33) of Providers purchased and used the 10,000 Steps Challenge maps,
- 3.2% (n=6) of Providers purchased the temporary tattoos, and
- 63.4% (n=118) of Providers indicated that they did not use any of the above promotional materials.

This indicates that a lot of Providers who have implemented a 10,000 Steps program or used the resources have not used any of the promotional materials that 10,000 Steps have available. Some Providers may have created their own promotional materials however this was not assessed in this study. Further advertising of the current promotional materials may be necessary to ensure all Providers are aware of the free or low cost materials they have access to as a Provider.

A quarter of the Providers (n=46) indicated that they would like other 10,000 Steps materials to promote the programs. Suggestions for promotional materials included: water bottles, hats, caps, visors, t-shirts, towels, frisbees, badges, balls, brochures, bum bags, coffee mug, exercise books (for prizes), hackey sacks, pens, information leaflets, interactive maps, lanyards, notebooks, ongoing tips, stickers, stubby holder, and colouring pictures. The most requested promotional materials were water bottles, hats, t-shirts and caps. 10,000 Steps may like to investigate the development of some of these suggested promotional materials, particularly the most requested items. However, while this study gave Providers an opportunity to request items, it did not identify whether Providers would be willing to purchase additional promotional items if available.

10,000 Steps Logo

As a 10,000 Steps Provider, organisations are granted the non-exclusive right to use the 10,000 Steps logo to promote their 10,000 Steps activities. Providers are able to use the logo to create their own promotional materials, or alternatively use the branded promotional materials that 10,000 Steps supplies. 10,000 Steps investigated the Providers use of the logo on both supplied and created promotional materials. This establishes how the 10,000 Steps logo was used to create and increase brand awareness and recognition across the various organisations and communities.

Providers reported that they used the logo in a variety of ways to aid in the promotion of 10,000 Steps. The most common uses of the logo were displaying it on information sheets, posters, media releases and maps (to display virtual walking journeys). A number of Providers also used the logo in the development of their own promotional materials such as on water bottles, t-shirts, mugs and hats. Further uses of the 10,000 Steps logo can be seen in Table 20.

Providers were given the opportunity to comment on their use of the logo. The majority of feedback was positive and informative. Providers explained the different circumstances in which they applied the logo, such as in posters, brochures and trophies. Overall, Providers found it beneficial to have such a recognisable logo.

- *“Using the logo was great. It reminded the community about the program and enhanced the chances of the program being used in other workplaces. It allowed us to promote the great work done by your foundation”*

Table 20. Use of the 10,000 Steps logo

Use	Responses		Percent of Providers
	N	Percent	
Have not used the 10,000 Steps logo	69	21.1%	40.4%
Information sheets	82	25.1%	48.0%
Media releases	24	7.3%	14.0%
Posters	48	14.7%	28.1%
Bookmarks	13	4.0%	7.6%
Maps	24	7.3%	14.0%
Tattoos	2	0.6%	1.2%
Banners	14	4.3%	8.2%
Water bottles	6	1.8%	3.5%
T-shirts	6	1.8%	3.5%
Hats	4	1.2%	2.3%
Signs	22	6.7%	12.9%
E-mails	2	0.6%	1.2%
Newsletters	5	1.5%	2.9%
Other	6	1.8%	3.5%
Total	327	99.8%*	191.2%

* Due to rounding

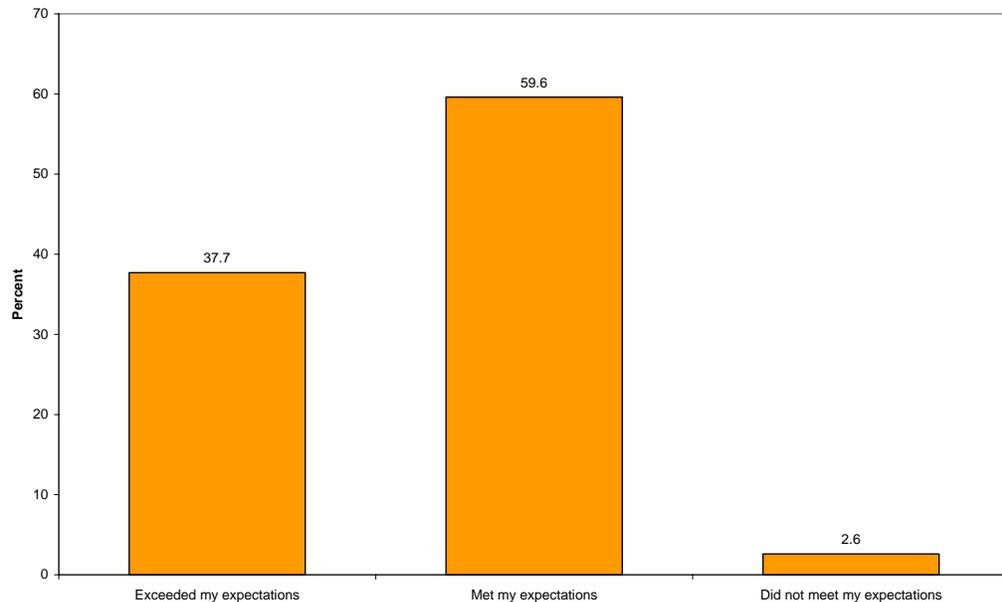
10,000 Steps Project Office

Providers were given a chance to comment on the support from the 10,000 Steps project office. It was found that 60% of the Providers (n=114) who responded to the survey had been in contact with the 10,000 Steps project office. Of these, 97% reported that the support from the project staff either met or exceeded their expectations (Figure 5). Only 3% Providers were felt that the support form the project office did not meet their expectations. This was due to time delays and level of support available.

Providers were given the opportunity to provide further feedback if desired. The extra feedback was extremely positive with almost all Providers reporting that the project staff were helpful, friendly, prompt and courteous.

- *"They are great, always very helpful and very pleasant to speak with. Always very prompt with requests/replies."*
- *"The team provides a high level of support, expertise & response. Always available, creative, enthusiastic, knowledgeable and informative. Fantastic!"*

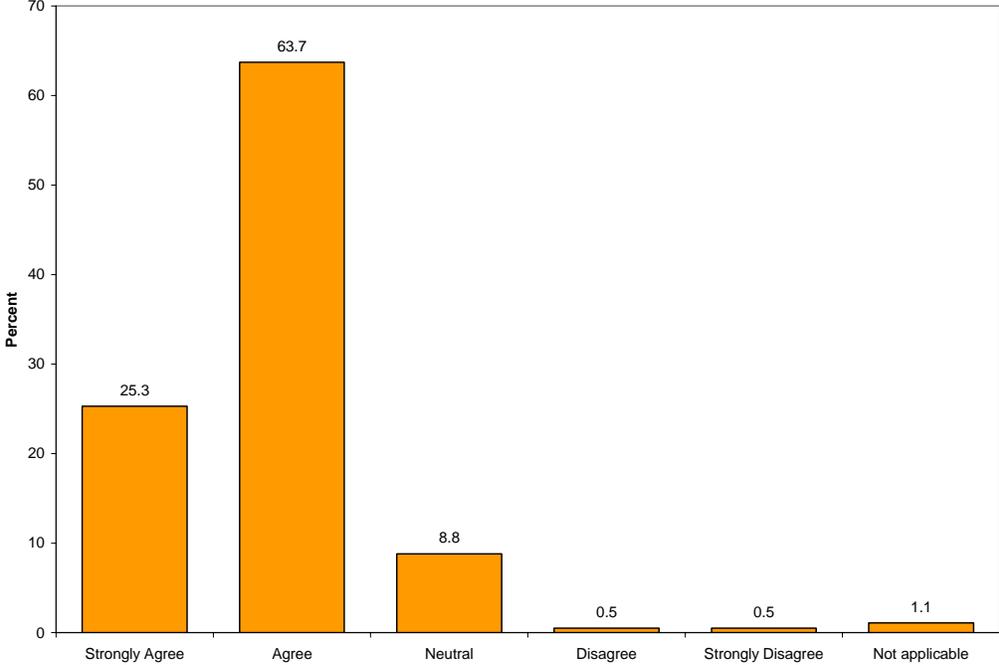
Figure 5. Support from 10,000 Steps Project Office



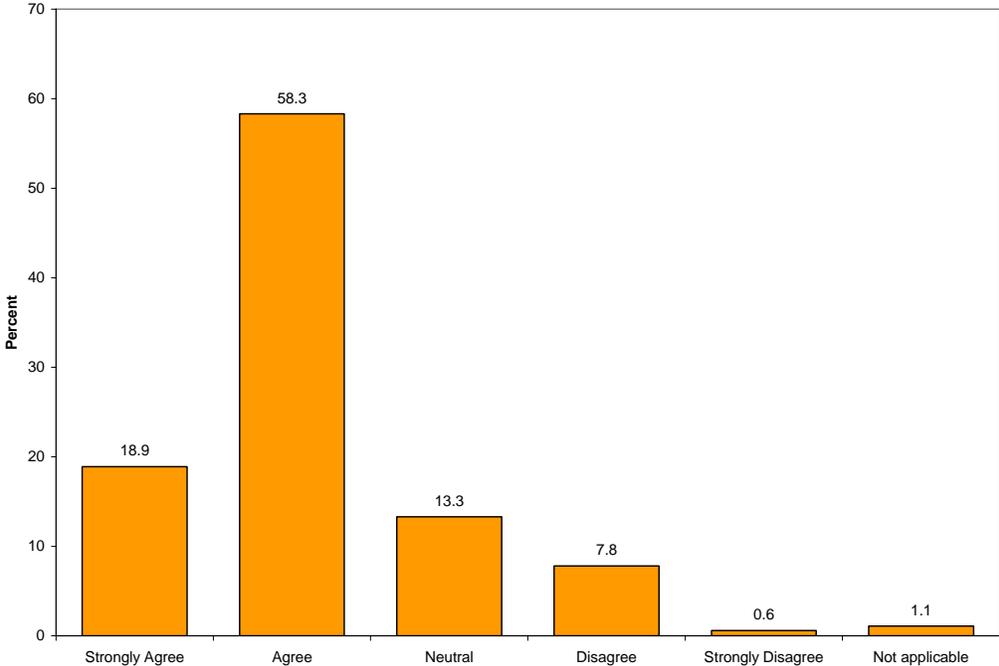
Resource Usability

Providers were asked to rate the usability of the 10,000 Steps website, resources and programs. Data is presented in a series of bar charts for each resource usability question. These questions were based on a Likert Scale ranging from strongly agree to strongly disagree. A not applicable response option was also available if the question was not relevant to the respondent. The usability question is written above each figure.

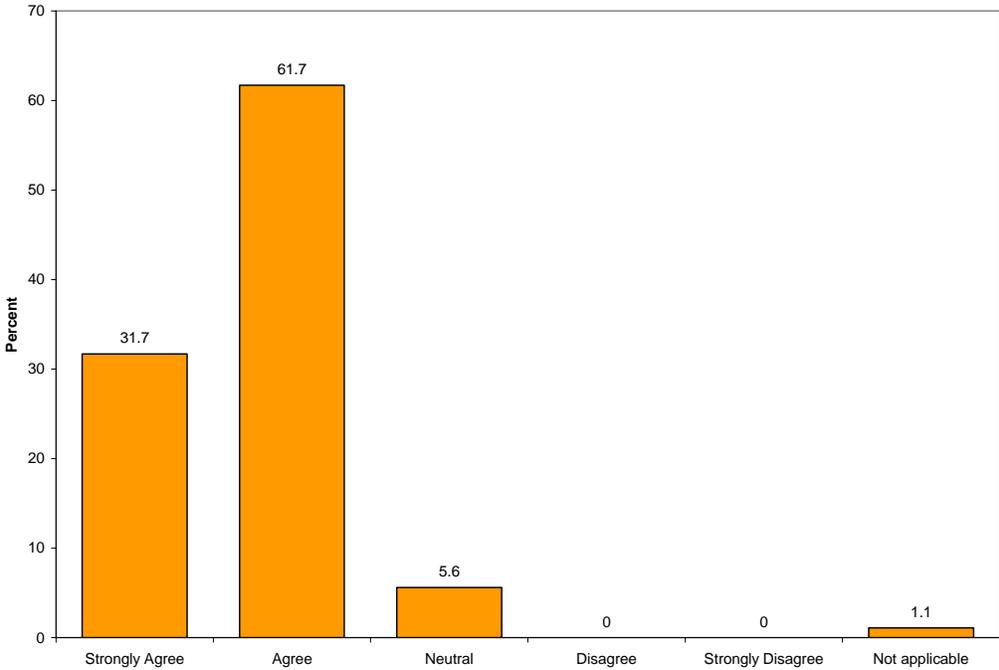
I like the overall presentation of the 10,000 Steps website.



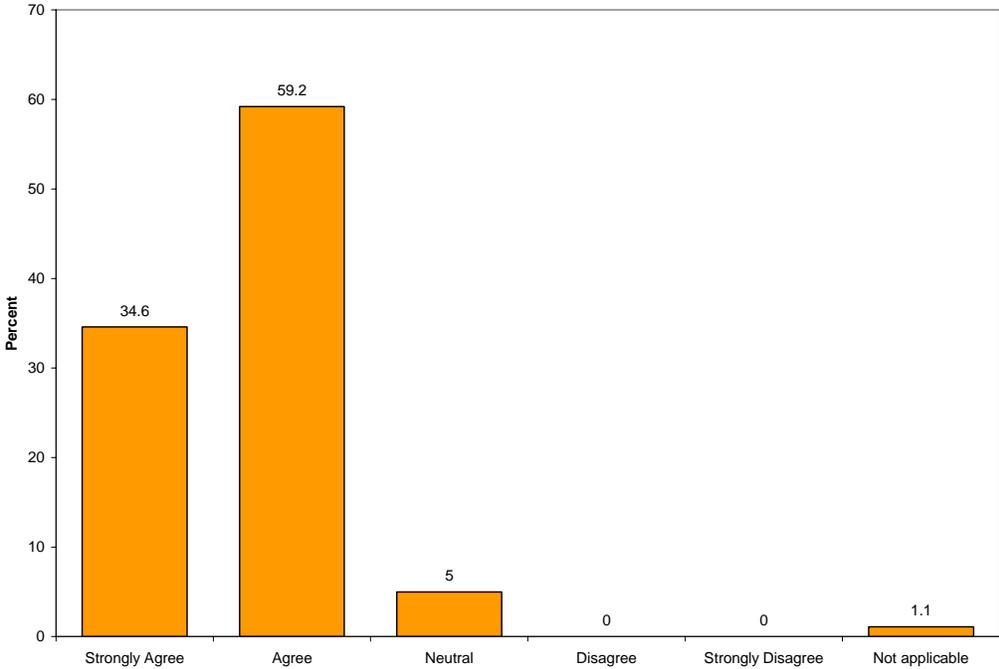
I am able to easily find my way around the website to get the information I am looking for.



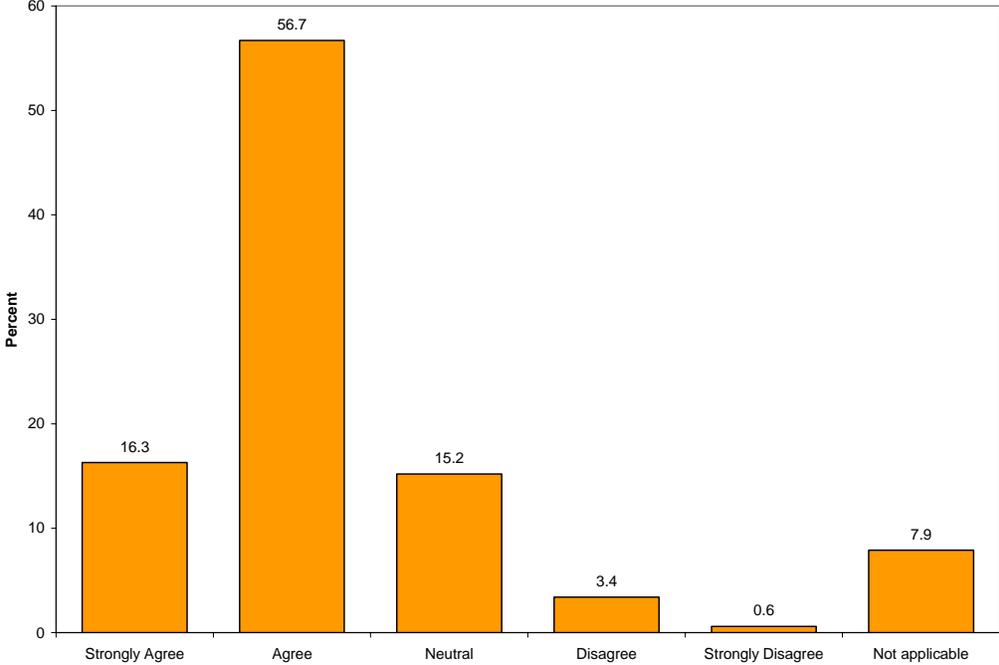
I think that the information provided on the website is credible.



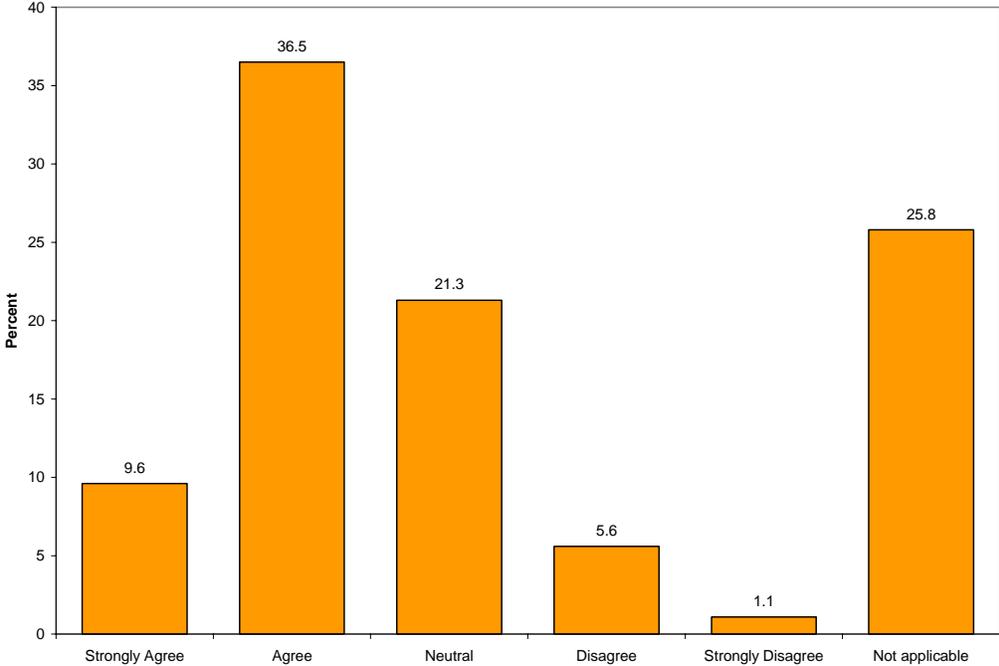
I think the information provided on the website is useful.



I found the resources easy to use.



I found the programs easy to implement.



It may be summarised that:

- 89% of Providers agreed or strongly agreed that they liked the presentation of the 10,000 Steps website
- 77.2% of Providers were agreed or strongly agreed that they were able to easily find their way around the website to get the information they were looking for.
- 93.4% of Providers agreed or strongly agreed that the information provided on the website is credible.
- 93.8% of Providers agreed or strongly agreed that the information provided on the website is useful.
- 73% of Providers agreed or strongly agreed that they found the resources easy to use.
- 46.1% of Providers agreed or strongly agreed that they found the programs easy to implement. 25.8% of Providers reported that this statement was not applicable.

The response to the 10,000 Steps website and resources on usability issues is very positive. It appears that Providers like the layout of the website; the information is credible, useful and easy to find, and; the programs and resources are generally easy to use.

Suggestions from Providers

To conclude the survey, Providers were given the opportunity to identify any other resources they may find beneficial in the Provider section, and also suggest any other information and functions they may find beneficial on the 10,000 Steps website. Below is a summary of other resources, information and functions that Providers have suggested.

Other resources that may be beneficial in the Provider section

- More articles (e.g. research on effects of different footwear etc.)
- Dog walking strategy (information/brochures/pamphlets/posters)
- Translated fact sheets
- Resources targeted at the indigenous population
- Links to kid friendly websites which continue to promote health and wellbeing
- Links to other websites for partnership building information
- List of local contacts for mutual support
- List of suppliers for optional promotional materials (e.g. water bottles)
- Ability to monitor team progress on a map
- Easy-to-use toolkits for monitoring program
- Resources in the United States

Other information that may be beneficial on the website

- Ability to monitor and compare team progress against other teams
- Interactive maps to track team progress (include information about towns along the virtual walking journey)
- Ability to include members without e-mail access
- Clearer information on how to calculate steps
- Information on the measurement of 'other' activities
- More information on role outlines for coordinators, team captains and walkers
- Links to local physical activity databases (so individuals can get involved in local programs)
- Ensure full text when printing off website
- Improve navigation of website
- Improve navigation to the Provider area
- Easier access to the Provider area (suggested twice)
- Information on women's fitness

Other functions that may be beneficial on the website

- Steps to kilometre/kilometre to steps converter
- More information for coordinators in regards to setting up challenges (suggested three times)

- Ability to download team data from challenges into an excel spreadsheet
- Ability for coordinator to view team progress even when teams are not in workplace challenge
- Program for recording steps that participants can use anywhere in the organisation (without internet access)
- Integrate 10,000 Steps with diabetes care
- Revise (new) edit steps feature in Step Log
- Where to obtain grants to purchase pedometers (for schools)
- Promote Seniors Week
- Suggestions when working with special needs groups (e.g. aged, disability)
- More user friendly

During 2005, the 10,000 Steps website was usability tested and a completely new website was developed based on the findings and recommendations. The new website was launched a few weeks before the Provider audit was conducted. Thus, at the time of the survey, some Providers may have not visited the new site and have made suggestions based on the previous 10,000 Steps website. Therefore, 10,000 Steps has recently implemented or is in the process of implementing quite a few of the suggestions the Providers have recommended. The design of the new website is much more user friendly and navigation around the site has improved. In line with these improvements, guidelines for the Challenges and role outlines for all participants are in the process of being updated to ensure they reflect the current website. Teams can now add members without e-mail addresses (offline members), and in one Challenge (Original 10,000 Steps Challenge) teams are able to view progress on an interactive map – this is a test feature that will be applied to other Challenges in the future. 10,000 Steps is also in the process of uploading dog walking strategy materials. The suggestions from the Providers have reinforced the need for these improvements and additions made with the upgrade of the 10,000 Steps website. It also shows that 10,000 Steps are able to respond to the needs and requirements of the users and Providers.

In line with the suggestions, 10,000 Steps may find it beneficial to consider adding the following resources to the website: more articles, links to other 'useful' websites, and possibly a list of local Provider contacts from different areas. One Provider requested easy-to-use toolkits for monitoring programs and therefore, it may be necessary to further highlight and promote the evaluation materials provided for the various resources. 10,000 Steps could also investigate the possibility of liaising with Queensland Health and Indigenous health promotion officers to develop resources with an Indigenous focus.

Unfortunately a few of the suggestions are beyond 10,000 Steps current focus and capabilities. At this stage 10,000 Steps is not able to provide 10,000 Steps resources in the US, apart from what is available on the 10,000 Steps website. It is also beyond the means of 10,000 Steps to produce translated fact sheets, provide specific physical activity information for special needs groups or provide links to local physical activity programs. However, these ideas are certainly feasible suggestions that should be considered in the future by 10,000 Steps or other similar physical activity projects.

CONCLUSION

Overall, the response towards 10,000 Steps from the audit of Providers was extremely positive. Providers that implemented a program generally found that it was successful in raising physical activity awareness within their target audience. The resources were reported to be both practical and useful. Even Providers who had not specifically implemented a program or used any of the 10,000 Steps resources found that the overall information provided on the website was still useful. Most Providers either agreed or strongly agreed that the information provided on the website was useful and credible; and that the resources were easy to use, and the programs were easy to implement.

This survey did highlight that some Providers were not aware of certain resources that 10,000 Steps provides. 10,000 Steps needs to further promote these resources, such as the GP and Health Care Professional resources, the Professional Guide to Physical Activity resources, the media articles, research section and the Provider listserv. Apart from the GP and Health Care Professional resources, the above resources would all provide background information or useful materials that would aid in the implementation of any 10,000 Steps program. 10,000 Steps needs to ensure that Providers are aware of all the valuable resources they provide.

Finally 10,000 Steps should consider some of the suggestions and recommendations that Providers made through out the survey. They may need to provide additional information and resources on the website, or provide links to other useful resources and websites. Applying these suggestions should improve the 10,000 Steps website and resources for both current and future 10,000 Steps Providers.

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