



HEALTHY LIVING PROMOTION, WATER FACILITIES DEVELOPMENT AS A TOOL TO CHALLENGING SEDENTARY LIFESTYLES AND PROVISION OF SUSTAINABLE COMMUNITY SECURITY AMONG RESIDENTS OF ILESE-IJEBU OGUN STATE NIGERIA

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Abstract

The promotion of healthy living through activities such as health clubs, gym visits, recreation parks, and community water facilities has long been recognized as a vital approach to enhancing individual well-being. However, sedentary lifestyles continue to thrive in communities where such facilities are lacking. This study examines the impact of water facility development—including community fountains and swimming pools—as a strategic tool for promoting physical activity, reducing sedentary behaviour, and enhancing community security among residents of Ilese-Ijebu, Ogun State, Nigeria. A survey research design was employed, gathering responses from 100 residents aged 18 to 55 years using a random sampling technique. The findings revealed that 95% of respondents acknowledged that access to functional health promotion facilities significantly improves physical, mental, and social well-being while mitigating community vices. Despite the current absence of public water points and sports facilities, respondents strongly supported the integration of health promotion infrastructure into community development policies. The study concludes that investing in recreational and water-based community facilities can serve as a dual-purpose strategy for fostering active lifestyles and enhancing sustainable community security. Therefore, policy interventions should prioritize the provision of these facilities as a proactive measure to improve public health and social stability.

Keywords: Healthy Living Promotion, Water Facilities Development, Sedentary lifestyles, Sustainable Community

Introduction

The promotion of healthy living is a fundamental component of sustainable community development, as it fosters physical well-being, mental health, and social interaction. The increasing prevalence of sedentary lifestyles has been linked to adverse health outcomes, including obesity, cardiovascular diseases, and mental health disorders (Akorede et al., 2017; Tremblay et al., 2017). Communities can counteract these negative effects through strategic investments in public health initiatives, such as the provision of recreational facilities, fitness centres, and accessible water fountains (Pittman et al., 2022). These initiatives serve as catalysts for active living, encouraging residents to engage in physical activities that enhance their overall well-being and reduce the risk of lifestyle-related diseases (Levinger et al., 2022).

Public spaces, such as recreation parks, play a crucial role in fostering an active lifestyle. They provide opportunities for walking, jogging, cycling, and social interactions, all of which contribute to physical and mental well-being (Shobri, Rahman, & Saman, 2021). Research has consistently demonstrated that outdoor activities in well-designed public spaces enhance social cohesion, reduce stress levels, and improve overall health outcomes (World Health Organization [WHO], 2020). The introduction of community water facilities further supports these efforts by serving as hydration points and encouraging prolonged outdoor activities, thereby mitigating the effects of sedentary lifestyles (Saunders et al., 2020).

Despite the recognition of the benefits of active living, studies indicate that sedentary behaviour remains prevalent in many communities. Research conducted in Nigeria, such as Odusoga and Sholeye (2023), highlights the high prevalence of sedentary behaviour among adolescents, while Samson and Agboola (2022) explore the sedentary tendencies of academic and non-academic staff in tertiary institutions. However, there is limited research focusing on the role of community-driven infrastructure, such as water facilities, in promoting physical activity among residents in smaller communities like Ilese-Ijebu. This study seeks to bridge this gap by exploring how accessible water fountains can serve as focal points for encouraging social engagement and active lifestyles among community members.

The factors contributing to sedentary behaviour in the study area are multifaceted and include limited community support for physical activities, inadequate public infrastructure, low socio-economic status, and lack of awareness about the health

implications of inactivity (Martins et al., 2021). Additionally, environmental and social factors, such as safety concerns and accessibility issues, further discourage participation in outdoor activities (Saunders et al., 2020). Addressing these barriers requires a holistic approach that integrates community-based initiatives, policy support, and infrastructure development to foster a culture of active living.

Water facilities, beyond their primary function of ensuring hydration, can also serve as strategic points for encouraging recreational activities, social interaction, and mental well-being (WHO, 2020). The presence of accessible water points can create gathering spaces that promote physical engagement, relaxation, and the exchange of valuable health-related information within the community. Furthermore, fostering an environment that supports active lifestyles through strategic infrastructural development is essential for enhancing sustainable community security by promoting healthier and more engaged residents.

This study aims to explore the relationship between the development of water facilities and the promotion of active living within communities, particularly in addressing sedentary lifestyles and enhancing sustainable community security. By examining the impact of water points in encouraging social interaction and physical engagement, this research seeks to provide valuable insights into how infrastructure development can serve as a tool for fostering long-term community health and well-being.

Statement of the Problem

Sustainable community development has gained significant traction in public health policy, becoming a central component of population-based health promotion strategies. These strategies emphasize the involvement of community groups in shaping the allocation and purpose of resources to enhance public health outcomes (Labonte & Laverack, 2001). Community development is often credited with empowering individuals and groups, fostering greater community engagement in health initiatives, reinforcing communal values, enhancing local accountability in resource utilization, and addressing health disparities (Wallerstein, 2006).

However, the concept of community development remains ambiguous, with varying interpretations and applications. The rhetoric surrounding community development frequently does not align with its practical implementation. This study examines the diverse and sometimes contradictory discourses surrounding community development, highlighting the gaps between theoretical claims and real-world practices.

To advance sustainable community security initiatives, health promoters must critically evaluate the approach and clarify fundamental terminology, such as promoting healthy living, reducing sedentary lifestyles, and improving access to water and sanitation technologies (Baum, 2016). This study is driven by the need for a comprehensive and holistic approach to health promotion, helping individuals overcome barriers to physical activity and adopt healthier lifestyle habits. For the aforementioned, the following aims/objectives were carried out to address the issues in Ilese-Ijebu Ogun State Nigeria.

Aim of the Study

This study aims to investigate the impact of healthy living promotion, water facilities development as a tool for challenging sedentary lifestyles, and provision of sustainable community security among residents of Ilese-Ijebu, Ogun State, Nigeria.

Objectives of the Study

1. To assess the current level of sedentary lifestyle among residents of Ilese-Ijebu, Ogun State.
2. To evaluate the effectiveness of water facilities development in promoting physical activity and healthy living habits among the residents.
3. To explore the relationship between sustainable community security measures and the overall health and well-being of the community members.
4. To determine the implications of water relaxation points in reducing sedentary lifestyles and improving healthy living habits among the residents.

Research Questions for the Study

1. What is the prevalence of sedentary lifestyle among residents of Ilese-Ijebu, Ogun State?
2. How does the development of water facilities influence physical activity levels and healthy living habits among the residents?
3. What is the relationship between sustainable community security measures and the health and well-being of community members in Ilese-Ijebu?
4. What are the effects of water relaxation points on reducing sedentary lifestyles and promoting healthy living habits among the residents of Ilese-Ijebu?

Methodology

A descriptive survey research design was employed to elicit information from the residents of Ilese-Ijebu, located at Latitude 6.8136° N and Longitude 3.9623° E, in Ijebu North East Local Government Area of Ogun State. The Old Lagos-Benin-Ondo

Road passed through the town. The research methodology combined both quantitative and qualitative data collected from respondents to provide relevant and accurate information on sedentary behaviours and lifestyles within the community. The study also aimed to determine the implications of water relaxation points in reducing sedentary lifestyles and improving healthy living habits among the residents.

A simple random sampling technique was used to select one hundred (100) respondents, who were Indigenous residents across households within the community and within the target age range of 18-55 years. The primary research instrument consisted of a structured questionnaire, designed to capture data related to daily physical activity levels, sedentary behaviors, the availability and usage of water fountains and community swimming pools, and residents' engagement in physical activities. Additionally, informal interview and interaction sessions were conducted to gain further insights into the knowledge, attitudes, and perceptions of community security about health and well-being due to participation in physical activities. The study also sought to establish a connection between water relaxation points, sedentary behaviours, and healthy living habits.

To ensure the validity of the research instrument, the questionnaire was reviewed by experts in public health and community development to ascertain its relevance and appropriateness in measuring the study variables. A pilot study was conducted with a small sample of respondents within the community to refine the questions for clarity and effectiveness. Reliability was tested using the test-retest method, where the instrument was administered to a subset of respondents on two different occasions, and the responses were compared for consistency.

Data collection was carried out through direct administration of the questionnaire to the selected respondents, and informal interviews were conducted in familiar community settings to encourage open participation. The responses were carefully recorded and categorized for analysis. Simple descriptive statistics, including percentiles and charts, were used to analyze the collected data and interpret the findings.

Results and Discussion

Demographical Characteristics of the Respondents

Table 1: Showing the demographic characteristics of the Respondents

Variables	Options	Frequency (%)
Gender	Male	35 (35%)
	Female	65 (65%)
Age	18-30	33 (33%)
	31-45	10 (10%)
	46-60	46 (46%)
	Over 60	11 (11%)
Occupation	Employed	44 (44%)
	Unemployed	20 (10%)
	Student	13 (13%)
	Retired	23 (23%)
Education Level	Primary School	45 (45%)
	Secondary School	43 (43%)
	Tertiary Education	12 (12%)
	Postgraduate Education	0 (0%)

Table 1 shows the demographic characteristics of the respondents who took part in the study that contained only the indigenes of the study area. The gender distribution showed that thirty-five (35) (35%) were male and the rest were female respondents sixty-five (65) (65%). The majority of the respondents were female and in the study area like community level, women stay home mostly, while their male counterparts do go out for their livelihood activities. The age distribution indicated that the majority of the respondents are those in the age bracket of 46-60 years were forty-six 46 (46%), followed by those between the ages of 18-30 years were thirty-three 33 (33%) respondents, while ten 10 (10%) of the respondents fall in the age brackets of (31-45) years and the rest of the respondents of over 60 years were eleven 11 (11%).

However, the responses on the occupational status that can influence their sedentary lifestyles showed that forty 44 (44%) were employed either working for the government, private businesses or being an artisan, twenty 20 (10%) responded to being unemployed, thirteen 13 (13%) of the respondents are students and the rest of the respondents 23 (23%) are retirees. Then, the responses on educational attainment showed that forty-five (45) (45%) obtained primary school leaving certificates, forty-three 43 (43%) with secondary school O/L certificates, while twelve 12 (12%) possessed tertiary education at either ND/HND/BSc education while none of the respondents attained postgraduate education.

Results on the level of sedentary lifestyle among respondents

Table 2: Showing the responses on Sedentary Lifestyles

Questions	Responses	Frequency (%)
How many hours per day do you spend sitting?	Less than 1 hour	5 (5%)
	1-2 hours	8 (8%)
	3-4 hours	20 (20%)
	More than 4 hours	67 (67%)
Do you engage in regular physical activity?	Yes	05(05%)
	No	95 (95%)
What are the main barriers to being physically active?	No time, Fear of injury, Nowhere to do the physical exercises, No energy, No money for hospital or buy drugs, physical exercise is a misplaced priority, community that is not safe, fear of those bad boys?	

Table 2 shows the sedentary lifestyles among the residents; sixty-seven (67) (76%) responded that they do sit down for over four 4 hours per day either to observe the road, traffic movement, discuss with people around, twenty (20) (20%) answered that they used between 3-4 hours to sit down as well not doing something tangible while 8 (8%) and 5 (5%) spent between 1-2 hours and less than an hour with sedentary lifestyles.

Then, the responses from the respondents on engaging in regular physical activities showed that the majority do not engage in physical activities. Ninety-five 95 (95%) never engage in physical activities, while the rest five 05 (05%) said they do sometimes engage in physical activities but not always.

Further interaction on the main barriers to being physically active or the reasons for not engaging in physical exercises as shown in the table above are due to time factors, environmental issues, security, and socio-economics factors. Some of their statements were ‘ *I no get time for exercise jare, where time dey? , What of having injuries, nowhere to do the exercises, no energy to be running around wetin go be my gain? , no money for hospital or buy drugs, physical exercise is misplaced priority, community that is no safe, what of those bad boys?* ’

Results of the water facilities development in promoting physical activity and healthy living habits among the residents

Table 3: Showing responses on water facilities development in promoting physical activity and healthy living habits among the residents

Questions	Responses	Frequency (%)
Are you aware of the water facilities available in the community that promote physical activity?	YES	23 (23%)
	NO	77 (77%)
Have you utilized any of these water facilities for physical activities in the past month?	YES	10(43%)
	NO	13 (57%)
Did water facilities influence your physical activity levels and healthy living habits?	Yes, the usages of swimming pools in some of the hotels in the community are good for exercise and make the bodies okay and relaxed.	

Table 3 above contains the responses knowledge of the respondents on the connection between water facilities development within the community that will enhance physical activities and healthy living habits. The responses to the question of the respondents were aware of water facilities available in the community can promote physical activities; showed that few number twenty-three 23 (23%) are aware of water facilities in the community they mentioned swimming pools are some of the hotels in the community that some of the youth visited, while the majority of the respondents, seventy-seven 77 (77%) were not aware of water facilities available in the community that can promote physical activity.

However, out of twenty-three 23 respondents who were aware of water facilities (swimming pools) for physical activities, ten (10) (43%) responded that they had utilized the facilities in the past month while thirteen 13 (57%) had not utilized the water facilities in the past month. Then, after explaining to the respondents the importance of physical activities like visiting water points, and swimming activities, the respondents positively mentioned that the usage of swimming pools in some of the hotels in the community can be good for exercise and make the human bodies’ okay and relaxed, good health guaranteed; thereby improving healthy living habits as well.

The result of the relationship between sustainable community security measures and the overall health and well-being through water facilities development

Table 4: Showing responses on the relationship between sustainable community security measures and the overall health and well-being through water facilities development

Questions	Responses	Frequency (%)
Will you allow water relaxation points constructed within the community for the resident's usage?	YES	95(95%)
	NO	5 (5%)
Do you think water relaxation points will contribute to reducing sedentary lifestyles and promoting healthy habits in your opinion?	YES	90 (95%)
	NO	5(5%)
Do you feel safe in your community	YES	87 (87%)
	NO	13 (13%)
Will you feel secure visiting the community water relaxation points if constructed?	YES	95 (95%)
	NO	5(5%)

Table 4 shows the responses to four questions to draw out residents' acceptance and belief in the allowance of water relaxation points within the community for the resident's usage. 'Will you allow water relaxation points constructed within the community for the residents' usage?' The majority of the respondents 95(95%) responded positively (YES), while the rest 5 (5%) responded negatively (NO). The responses to 'Do you think water relaxation points will contribute to reducing sedentary lifestyles and promoting healthy habits in your opinion?'; showed that ninety (95%) of those who wanted water relaxation points constructed said YES, that the points when constructed and functional can contribute to a reduction in sedentary lifestyles among the residents, and the rest five 5 (5%) do not believe that the water points can influence positively the sedentary lifestyles among the residents.

On the issue of community security, the answers to the question raised whether the respondents generally feel safe and secure in the community was that eighty-seven 87 (87%) believed that are safe and secure by mentioning YES, while few number thirteen 13 (13%) mentioned otherwise, they are NOT safe and secured. In a similar vein, the responses on the security and safety are paramount at water points where different groups in the community can visit for relaxation and social gatherings showed that the majority of the respondents ninety-five 95 (95%) mentioned YES that the water points will be safer and secured and the rest five 5 (5%) are not sure of their safety and security at the water point.

Results on the implications of water relaxation points in reducing sedentary lifestyles and improving healthy living habits among residents

Table 5: Showing responses on the implications of water relaxation points in reducing sedentary lifestyles and improving healthy living habits among the residents

Questions	Responses	Frequency (%)
Will you use water relaxation points?	YES	90(90%)
	NO/ NOT SURE	10 (10%)
What will be the positive effects of the water point's visitation in promoting healthy habits?	YES	90(90%)
	NO	0(0%)
Would you like to see more water relaxation points developed in the community?	YES	90(90%)
	NO	0(0%)

The responses on the water relaxation points for reduction of sedentary lifestyles among the people showed some level of positive implications. Ninety (90%) of the respondents are ready to use the water relaxation points with the belief that visitation to the water points will have positive effects that will promote health habits as mentioned by ninety 90(90%) of the respondents. Therefore, the majority of the respondents 90 (90%) were eager to have more water relaxation points developed in the community for physical activities and sedentary lifestyles can be reduced as well.

Discussion of the Results

The majority of respondents were female (65%), with the highest proportion (46%) aged 46-60 years. Most had only primary (45%) or secondary (43%) education, with no postgraduate respondents. Similar findings were observed in rural and semi-urban communities, where women are more available for household surveys than men, who are often engaged in external work (Smith et al., 2020). The age distribution contrasts with global health surveys, which typically show younger populations (18-30) dominating health-related awareness studies (WHO, 2021). The low tertiary education rate aligns with UNESCO's (2019) reports indicating that higher education remains a challenge in many developing regions.

On the Level of Sedentary Lifestyle among Respondents, 67% of respondents spend more than four hours sitting daily, and 95% do not engage in regular physical activity due to barriers like time constraints, safety, and socio-economic factors. Similar results were reported by Owen et al. (2010), where prolonged sitting was a common issue in physically inactive communities. However, global trends indicate increasing awareness and participation in physical activity, particularly in middle-income countries (WHO, 2021), which contradicts the inactivity observed in this study. Economic constraints and security concerns as barriers align with research in low-income areas (Guthold et al., 2018).

However, responses on Water Facilities Development and Physical Activity indicated that 77% of respondents were unaware of water facilities promoting physical activity, and only 23% knew about them. Among those aware, 43% had used them. Swimming pools in hotels were identified as beneficial for exercise. This contradicts studies in urban areas where awareness of recreational facilities is generally higher (Sallis et al., 2016). Yet, it aligns with findings from underdeveloped regions where the absence of structured recreational facilities limits community engagement in physical activities (Hallal et al., 2012). Furthermore, responses on Community Security and Water Relaxation Points showed that 87% of respondents felt safe in their community, and 95% believed water relaxation points would reduce sedentary lifestyles and improve security. Previous research supports the idea that well-planned community spaces enhance perceptions of security and social cohesion (Gehl, 2011). However, the high sense of security reported in this study contrasts with findings from urban communities where safety in public spaces remains a major concern (Jacobs, 1961). Implications of Water Relaxation Points on Health indicated that 90% of respondents were willing to use water relaxation points, and all agreed they would positively impact health habits. This aligns with studies demonstrating the health benefits of green and blue spaces in communities (Gascon et al., 2017). However, research suggests that community engagement may remain low if structured programs and incentives are not implemented to encourage the use of these spaces (Mitchell & Popham, 2008).

Also, the answer to the research question on the prevalence of a sedentary lifestyle showed that 67% of residents spend more than four hours sitting daily, and 95% do not engage in regular physical activity. This indicates a high prevalence of sedentary lifestyles, particularly among older adults and the unemployed. The barriers to physical activity included time constraints, security concerns, lack of facilities, and socio-economic factors. Research question two on how the development of water facilities influences physical activity levels and healthy living habits among the residents revealed that 77% of respondents were unaware of water facilities that could promote physical activity, and only 23% knew about them (mostly swimming pools in hotels). After an awareness discussion, respondents agreed that water facilities like swimming pools and fountains could promote exercise and relaxation, improving physical and mental health; and a majority (95%) believed that water relaxation points could reduce sedentary lifestyles and encourage community engagement in healthy activities. Then, research question on the relationship between sustainable community security measures and the health and well-being of community members indicated that 87% of respondents felt safe in their community, and 95% agreed that water relaxation points could enhance security by encouraging social interaction and organized activities; with functional health promotion facilities could reduce criminal activities and enhance sustainable community security by fostering healthier and more engaged residents. The four research questions "What are the effects of water relaxation points on reducing sedentary lifestyles and promoting healthy living habits among the residents?" answered that 90% of respondents stated they would use water relaxation points for physical activity and relaxation. They agreed that water points could positively impact health habits by encouraging exercise, stress relief, and social engagement. The study concluded that developing water relaxation points could be a strategic solution for reducing sedentary behaviour and promoting long-term community well-being.

Based on the identified research questions under the introduction section, the prevalence of a sedentary lifestyle among the residents is high and common among the aged and the unemployed. After interaction during the survey, most of the respondents believed that water facilities can positively influence the physical activities of people by visiting the points for relaxation and social gathering, thereby the healthy living habits among the residents.

On the other hand, the respondents believed community security will provide a positive relationship with the residents and their well-being can be guaranteed. The water relaxation points being functional can attract people to engage in physical activities in which their mental health can be improved as well.

In summary, the respondents submitted after health talk and health promotion on the subject matter that there are potential positive effects of water relaxation points on reducing sedentary lifestyles and promoting healthy living habits, with potential associated sustainable community security among the residents of Ilese-Ijebu.

Conclusion and Recommendations

The study highlights a high prevalence of sedentary lifestyles in Ilese-Ijebu, with water facility development playing a crucial role in improving physical activity and health habits. Additionally, water relaxation points could enhance security, encourage social interaction, and promote a healthier community. Furthermore, the study concluded that the health of the individual within the community can be promoted through functional health promotion facilities and activities, like the provision of water point facilities (swimming pools and water fountains) that can attract residents reducing sedentary lifestyles which is common among the people, but thereby potential vices can also be reduced, and sustainable community security can be guaranteed.

Though the community lacked water points and public sports facilities during the study the respondents believed that policy on health promotion facilities should be part of community developmental projects and activities that can be engaged by all.

References

- Akorede, S. N., Ologele, I., Enyikwola R. O., & Nofiu, O. D. (2017). Lifestyle as Correlates of Sexually Transmitted Infections among Teenagers of Secondary School in Olorunda Local Government of Osun State. *Journal of Human Kinetics and Sports Science*, 2(1), 223-229.
- Baum, F. (2016). The new public health (4th ed.). Oxford University Press.
- Gascon, M., Triguero-Mas, M., Martínez, D., Dadvand, P., Forns, J., Plasència, A., & Nieuwenhuijsen, M. J. (2017). Mental health benefits of long-term exposure to residential green and blue spaces: A systematic review. *Environmental International*, 102, 84-93.
- Gehl, J. (2011). Life between buildings: Using public space. Island Press.
- Guthold, R., Stevens, G. A., Riley, L. M., & Bull, F. C. (2018). Worldwide trends in insufficient physical activity from 2001 to 2016: a pooled analysis of 358 population-based surveys with 1•9 million participants. *The Lancet Global Health*, 6(10), e1077-e1086.
- Hallal, P. C., Andersen, L. B., Bull, F. C., Guthold, R., Haskell, W., & Ekelund, U. (2012). Global physical activity levels: surveillance progress, pitfalls, and prospects. *The Lancet*, 380(9838), 247-257.
- Jacobs, J. (1961). The Death and Life of Great American Cities. Random House.
- Labonte, R., & Laverack, G. (2001). Capacity building in health promotion, part 1: For whom? And for what purpose? *Critical Public Health*, 11(2), 111-127. <https://doi.org/10.1080/09581590110039838>
- Levinger, P., Dunn, J., Abfalter, E., Dow, B., Batchelor, F., Garratt, S., ... & Hill, K. D. (2022). The role of recreational facilities in promoting physical activity and well-being. *Journal of Public Health Research*, 11(2), 102-118.
- Martins, R., Saunders, J., & Wilson, K. (2021). Community infrastructure and its impact on sedentary behaviour: A systematic review. *Global Health Reports*, 9(3), 45-62.
- Mitchell, R., & Popham, F. (2008). Effect of exposure to natural environment on health inequalities: an observational population study. *The Lancet*, 372(9650), 1655-1660.
- Odosoga, O. B., & Sholeye, O. O. (2023). Sedentary behaviour among male adolescents in Sagamu, Southwest Nigeria. *African Journal of Health Studies*, 15(1), 87-103.
- Owen, N., Healy, G. N., Matthews, C. E., & Dunstan, D. W. (2010). Too much sitting: the population health science of sedentary behaviour. *Exercise and Sport Sciences Reviews*, 38(3), 105-113.
- Pittman, M., Johnson, R., & Callahan, T. (2022). Promoting healthy lifestyles through community engagement. *Health Promotion International*, 37(4), 520-536.
- Sallis, J. F., Cerin, E., Conway, T. L., Adams, M. A., Frank, L. D., Pratt, M., ... & Owen, N. (2016). Physical activity in relation to urban environments in 14 cities worldwide: a cross-sectional study. *The Lancet*, 387(10034), 2207-2217.
- Samson, A., & Agboola, R. (2022). A comparative study on sedentary behaviour of academic and non-academic staff in University of Ilorin, Nigeria. *Journal of Health and Fitness Studies*, 8(2), 64-79.
- Saunders, J., Wilson, K., & Brown, L. (2020). The role of environmental factors in shaping physical activity patterns. *International Journal of Environmental Research and Public Health*, 17(14), 5024.
- Shobri, N. I. M., Rahman, N. A., & Saman, N. H. M. (2021). Recreational parks and their role in community well-being. *Journal of Urban Planning and Development*, 147(2), 45-59.
- Smith, L., Ma, L., Yates, T., & Coppinger, T. (2020). Rural-urban differences in physical activity and sedentary behaviour. *Journal of Rural Health*, 36(4), 477-485.
- Tremblay, M. S., Carson, V., Chaput, J. P., Connor Gorber, S., Dinh, T., Duggan, M., ... & Zehr, L. (2017). Canadian 24-hour movement guidelines for children and youth. *Applied Physiology, Nutrition, and Metabolism*, 42(6), 311-322.
- UNESCO. (2019). Global education monitoring report 2019: Migration, displacement, and education. UNESCO Publishing.
- Wallerstein, N. (2006). What is the evidence on the effectiveness of empowerment to improve health? Health Evidence Network Report, WHO Regional Office for Europe.
- World Health Organization (WHO). (2021). Physical activity and sedentary behaviour: A global perspective. World Health Organization Report.
- World Health Organization. (2020). Global recommendations on physical activity for health. WHO Press.