In January 1941, the *Medical Journal of Australia* published an article on physical fitness that began with the words:

> These are times when the term “physical fitness” is on almost everybody’s lips, times when ability to live strenuous days, to do a man’s work and more, is regarded as almost the *sumnum bonum* [“highest good” or “ultimate goal”] of life.¹

Some 3 years earlier, the National Health and Medical Research Council (NHMRC) had listed the physical fitness of the nation among its priorities. The Chair at this time was Howard Cumpston, Australia’s first Director-General of Health, who, at the Australasian Medical Congress in 1920, had spoken of his “dream of leading this young nation of ours to a paradise of physical perfection”.² Cumpston’s concerns were focused on “preventable defects affecting the general health, the bodily fitness, and the national efficiency of a large part of the young people of this nation”.³ The federal Minister for Health, William Hughes, shared these concerns, declaring in 1937 that Australians “could not leave to chance the development of their national health and physique”.⁴

It was feared that Australia was lagging behind other nations, especially European countries, in its encouragement of sport and physical training; Britain passed its Physical Training and Recreation Act in 1937.⁵ In November 1938, the NHMRC recommended the creation of a national council of physical fitness⁶ — a recommendation adopted shortly thereafter, and one which heralded the launch of the National Fitness Campaign.

Befitting the war stance of the country, the NHMRC proposed the promotion of physical fitness be “constantly linked with pride in the nation’s achievements”.⁷ By aiming to create a citizenry ready to defend the nation, focus was placed on the fitness of children.⁸ Yet this was not the first time the defence of the nation had been a motivation for improving the physical fitness of the youth of Australia. Before Federation in 1901, military drills had formed the basis for physical education in schools, and in 1909 a national cadet scheme had been introduced to improve the quality of physical training for boys, with the scheme lasting until 1931.⁹

In order to give the National Fitness Campaign a statutory basis, the National Fitness Bill was introduced into federal Parliament in 1941. The then Minister for Health, Sir Frederick Stewart, argued that, although

this is a machine age and a time of mechanised warfare … behind the machine, in the shop or on the battlefield, there must be a fit people … and provision, above all, to ensure the continued fitness of the young folk to whom we will hand on that heritage for which we are now fighting.⁰

The Bill received support from all sides of politics and the *National Fitness Act 1941* was assented to on 4 July of that year.¹¹

The aims of the National Fitness Act were to promote an appreciation of and engagement in physical fitness. It endeavoured to achieve this by establishing a fund from which monies were distributed to newly formed state-based national fitness councils, which coordinated promotional campaigns, programs, education and infrastructure for physical fitness, with volunteers undertaking most of the work.

Specifically focused on children and youth, national fitness councils supported the provision of children’s playgrounds, youth clubs and school camping programs, as well as the development of physical education in schools and its teaching and research in universities.

By the time the Act was repealed in 1994, fitness had become associated with leisure and recreation rather than being seen as equipping people for everyday life and work.

The emergence of the *Australian National Preventive Health Agency Act 2010* offers the opportunity to reflect on synergies with its historic precedent.

### Historical facts

- During a time of war, the federal government passed the *National Fitness Act 1941* to improve the fitness of the youth of Australia and better prepare them for roles in the armed services and industry.
- Implementation of the National Fitness Act made federal funds available at a local level through state-based national fitness councils, which coordinated promotional campaigns, programs, education and infrastructure for physical fitness, with volunteers undertaking most of the work.
- Specifically focused on children and youth, national fitness councils supported the provision of children’s playgrounds, youth clubs and school camping programs, as well as the development of physical education in schools and its teaching and research in universities.
- By the time the Act was repealed in 1994, fitness had become associated with leisure and recreation rather than being seen as equipping people for everyday life and work.
- The emergence of the *Australian National Preventive Health Agency Act 2010* offers the opportunity to reflect on synergies with its historic precedent.

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**Open spaces were intended to foster social interaction and team games**

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designed to develop good posture; stimulate the normal functioning of the heart, lungs, liver, intestines and muscles; and “counteract the artificial activities that make up the daily routines for most of us: for instance, driving in cars and sitting at desks.”

Heeding widespread calls for investment in civic infrastructure for young children, the national fitness councils served as strong advocates for playgrounds. Assistance in developing these was directed through small grants auspiced by state-based playgrounds associations. Guidance in playground design was provided in the form of Children’s playgrounds, a publication distributed to local councils throughout Australia in 1944. In this, playgrounds were defined as “a healthy and safe environment within easy distance of homes, especially reserved for the leisure hours of children” and, in the foreword by Cumpston, described as “one of the least expensive and one of the most valuable means of improving the general state of physical fitness of the community”. Play equipment was recommended to cultivate confidence, muscular strength, coordination and skill, while open spaces were intended to foster social interaction and team games. Critically, the guidelines suggested the site and design of playgrounds be grounded within the local context, with input sought from a multidisciplinary team encompassing, among others, the local medical officers, district health inspector and a landscape architect.

Evolving over time, the focus of national fitness councils broadened to encompass the emerging demographic category of the teenager. To this end, the councils supported the establishment of youth clubs and development of advanced experiential activities, namely rock climbing, bushwalking and camping. Adults were also targeted, particularly those over the age of 30 years, with Prime Minister Harold Holt launching the “Fitness Australia” campaign in 1967, which had as one of its outcomes the establishment of jogging groups across the country.

After more than 50 years in existence, the National Fitness Act was repealed by the Environment, Sport and Territories Legislation Amendment Act 1994 (Cwlth). This reflected an earlier change, in 1972, when responsibility for national fitness shifted from the Department of Health to the newly created Department of Tourism and Recreation, and the commensurate transfer of control of the national fitness councils to state government departments of recreation. As a result, the National Fitness Act fell into disuse, and the national fitness councils were phased out during the 1970s.

During its time, the National Fitness Act functioned to promote and enable a fit and healthy citizenry. However, it is difficult to gauge its success, as evaluations of initiatives were limited. Annual reports were delivered to federal Parliament, but proxy measures such as gross participation rates were, in general, employed as evidence of impact on the nation’s fitness. Compounding this evidence gap, contemporary analyses of the period preceding the repeal of the Act have highlighted an increase in prevalence of overweight and obesity among children and young people. Although these observations may serve to question the Act’s influence, this simplistic interpretation is questionable if for no other reason than that it ignores the social, technological and environmental transformations of the mid to late 20th century.

Beyond metrics of fitness, the Act’s legacy is more tangible. It provided crucial material resources and infrastructure in local communities. Perhaps more importantly, the Act nurtured the emergence of physical education, recreation and sports medicine bodies, including the Australian Council for Health, Physical Education and Recreation and the Australian Sports Medicine Association (now Sports Medicine Australia). Indelible also was the provision in the Act for research by the NHMRC into causes of physical unfitness. In its governance, design, application and rhetoric, the Act was strikingly modern. While authority of the Act resided with the Department of Health, the department cooperated with departments of labour and national service and, at a state level, education. With the Act commanding a position federally while engaging across multiple levels — national, regional and local — fitness was afforded a prominence to which current health
Acknowledged as being of equal importance as the Promotion of 1986. Its definitions of health and fitness are synonymous with the Ottawa Charter for Health Promotion of 1986. Its definitions of health and fitness were also congruent with the Ottawa Charter, as evidenced by Minister for Health Sir Fredrick Stewart stating in 1941, “Whilst we are now preoccupied with national fitness to survive, we cannot forget the ultimate goal of fitness [in order] to enjoy [life].”

Given the recent emergence of the Australian National Preventive Health Agency Act 2010, reflections on historic precedents are salient. In focus and application, there are synergies between the Acts of the past and present. Obvious among these is the prominence afforded to the promotion of physical activity, although it has been framed differently by the two Acts: as a means to fitness formerly, and now as part of a broader, more holistic, healthy lifestyle. Parallels between the Acts are also visible in their attention to the development of an appropriate workforce, the establishment of a research agenda, and the implementation of approaches in various settings to account for the multilevel influences that shape healthful behaviour.

However, despite these similarities, it is difficult here to see how well the past informs the present because of the fragmented evidence base for the impact of the National Fitness Act — and this is perhaps the most relevant lesson. Recognition of this knowledge gap substantiates the need to effectively evaluate interventions to be implemented under the new Act. While conceding the known difficulties in evaluating complex social interventions, guidance for this type of evaluation does exist — and evaluation is acknowledged as being of equal importance as the initiatives themselves.

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 reflects a prominence to which current health initiatives aspire.