

A technical package for increasing physical activity





ACTIVE

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ACTIVE: A TOOLKIT FOR ACTION

The Global Action Plan on Physical Activity 2018-2030 provides a shared vision of *More active people for a* **healthier world** and sets out goals to achieve a relative reduction in global levels of physical inactivity of 10% by 2025 and 15% by 2030. The action plan outlines four objectives and 20 recommended evidence-based policies applicable and adaptable to all country contexts to increase levels of physical activity (1), and provides countries with a roadmap for implementing a national response to increase health and wellbeing. Collectively, the 20 recommended policies form a "whole system" approach to increasing the opportunities for people of all ages and abilities to be more physically active every day, at home, work, school and in their local communities.

This **ACTIVE technical package** is the first of several implementation tools that the World Health Organization (WHO) will develop to support countries plan, implement and evaluate the implementation of the Global Action Plan. It outlines four policy action areas, which directly reflect the four objectives of the Global Action Plan endorsed by the World Health Assembly in May 2018, and identifies the key policies within each action area:

- 1. ACTIVE SOCIETIES
- 2. ACTIVE ENVIRONMENTS
- 3. ACTIVE PEOPLE
- 4. ACTIVE SYSTEMS

ACTIVE is one of several WHO technical packages that support countries to prevent and reduce NCD risk factors - others include tobacco use (MPOWER), salt reduction (SHAKE), elimination of transfat (REPLACE) and reduction in alcohol (SAFER).

Implementation of the ACTIVE technical package will be supported by of a series of "how to" toolkits, each one addressing in more detail the specific tasks and processes necessary to implement each policy recommendation across different settings and the life course. Priority areas for the "how to" resources focus on promoting physical activity through social marketing campaigns, in primary health care and by using school-based approaches. "How to" toolkits to support multisector planning of a whole systems approach, and on creating supportive environments for physical activity, will be forthcoming. WHO will also be developing a global monitoring framework and supporting capacity building initiatives to accelerate implementation across multiple sectors, including health, sports, transport, urban design, civil society, academia, private sector and community-based organizations.

FOUR POLICY ACTION AREAS

ACTIVE ENVIRONMENTS

Promote safe, well maintained infrastructure, facilities and public open spaces that provide equitable access to places for walking, cycling and other physical activity.

ACTIVE SYSTEMS

Strengthen leadership, governance, multisectoral partnerships, workforce, research, advocacy and information systems to support effective coordinated policy implementation.

ACTIVE SOCIETIES

Implement behaviour change communication campaigns and build workforce capacity to change social norms.

ACTIVE PEOPLE

Ensure access to opportunities, programmes and services across multiple settings to engage people of all ages and abilities in regular physical activity.



ACTIVE SOCIETIES

Implement behaviour-change communication campaigns and build workforce capacity to change social norms.



- **Action 1.1* Communications:** Implement social marketing campaigns linked with community-based programmes.
- **Action 1.2. Co-benefits:** Build awareness, through knowledge-sharing and information campaigns, of the multiple social, economic, and environmental co-benefits of physical activity, particularly from walking and cycling.
- Action 1.3. Mass participation events: Implement regular mass participation initiatives.
- **Action 1.4. Capacity-building:** Strengthen professional knowledge, within and outside the health sector, as well as in grassroots community groups and civil society organizations.

ACTIVE ENVIRONMENTS

Promote safe, well maintained infrastructure, facilities and public open spaces that provide equitable access to places for walking, cycling and other physical activity.



- **Action 2.1. Policy integration:** Integrate urban and transport planning policies, and prioritize the principles of compact, mixed-land use to deliver highly connected neighbourhoods.
- Action 2.2. Infrastructure: Improve walking and cycling network infrastructure.
- **Action 2.3. Safety:** Implement and enforce road safety and personal safety measures to improve the safety of pedestrians, cyclists, and other vulnerable road users.
- **Action 2.4. Public open spaces:** Improve access to good-quality public and green open spaces, green networks, recreational spaces (including river and coastal areas) and sports amenities.
- **Action 2.5. Design:** Strengthen the policy, regulatory and design guidelines to enable all occupants and visitors to be active in and around the public buildings.

^{*} Action 1.2 and 3.2 are recommended as 'Best' and 'Good' buys for the prevention and control of noncommunicable diseases (2).

ACTIVE PEOPLE

Ensure access to opportunities, programmes and services across multiple settings to engage people of all ages and abilities in regular physical activity.



- **Action 3.1. Schools:** Ensure provision of good-quality physical education and positive opportunities for physical activity across pre-primary to tertiary educational settings.
- Action 3.2* Health care: Implement systems of patient assessment and counselling on physical activity in primary and secondary health care and social services.
- **Action 3.3. Multiple other settings:** Implement programmes in workplace, sport and faith-based settings, and in public open spaces and other community venues, to increase opportunities for physical activity.
- **Action 3.4. Older adults:** Provide appropriately-tailored programmes and services to support older adults to start and maintain regular physical activity.
- **Action 3.5. Least active:** Implement programmes and services that increase the opportunities for physical activity in the least active groups.
- **Action 3.6. Whole-of-community:** Engage communities to implement comprehensive initiatives at the city, town or local level.

ACTIVE SYSTEMS

Strengthen leadership, governance, multisectoral partnerships, workforce, research, advocacy and information systems to support effective coordinated policy implementation.



- **Action 4.1. Governance:** Strengthen national and subnational policies, recommendations and action plans, and establish multisectoral coordination mechanisms.
- **Action 4.2. Data systems:** Enhance information systems and digital technologies to strengthen monitoring and decision-making.
- **Action 4.3. Evidence:** Strengthen research and evaluation capacity to inform effective policy solutions.
- **Action 4.4. Advocacy:** Escalate advocacy efforts to increase awareness, knowledge and joint action.
- Action 4.5. Resources: Strengthen financing mechanisms to ensure sustainability.

Full details of each policy action are available in the Global Action Plan on Physical Activity 2018–2030, with recommended roles for different stakeholders listed in Appendix 2 (1).

What is physical activity?

There are many different ways to be physically active: walking, cycling, sports and other active forms of recreation (for example, dance, yoga, tai chi). Physical activity can also be undertaken as a form of transport (walking and cycling), at work and around the home (cleaning, carrying and care duties). All forms of physical activity can provide health benefits if undertaken regularly and of sufficient duration and intensity (3).

What is sedentary behaviour?

Sedentary behaviour is characterized by a very low energy expenditure, such as sitting, reclining or lying down (4). Extended periods of sedentary behaviour (for example sitting at work, during travel, or for leisure) are detrimental to health (5). All individuals, and especially children, should be advised and supported to limit long periods of sedentary behaviour by incorporating regular activity breaks throughout the day, and, in particular, to limit the amount of time spent using screen-based devices such as phones and tablets, and watching television.

What are the causes of physical inactivity?

Participation in physical activity is influenced not only by individual and family characteristics, such as knowledge, motivation and social support, but also by wider social and cultural values, as well as environmental and economic conditions. These factors determine how accessible, affordable, acceptable and safe it is for individuals to be physically

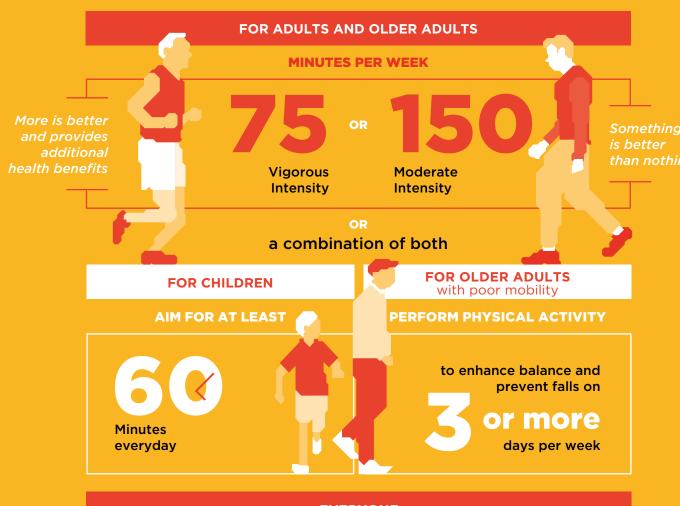
active and thus can either enable or hinder participation. Understanding these causes of inactivity in a community is necessary for the development of effective tailored policy responses.

Of note, is that girls, women, older adults, people of low socioeconomic position, people with disabilities and chronic diseases, and marginalized populations are often less active than others because they have less access to appropriate places and programmes to support them.

Economic development and the associated changes towards more sedentary occupations and recreation, as well as the increasing use of motorized transport, can help explain the higher levels of inactivity seen in some high-, as well as middle-income, countries. Governments and communities must act to counterbalance these trends and provide the environments, facilities and services that support people to be active through more walking and cycling, sports and active recreation, as well as through incidental physical activity throughout each day.

The global recommendations on physical activity for health outline the type, intensity, frequency and duration of physical activity for optimal health benefits for youth, adults and older adults (2). Regular participation in physical activity is recommended for all ages and abilities to provide multiple health benefits.

HOW MUCH PHYSICAL R GOOD HEALTH?



EVERYONE

PERFORM MUSCLE-STRENGTHENING ACTIVITIES

or more days a week



and increase gradually

CURRENT LEVELS OF PHYSICAL INACTIVITY

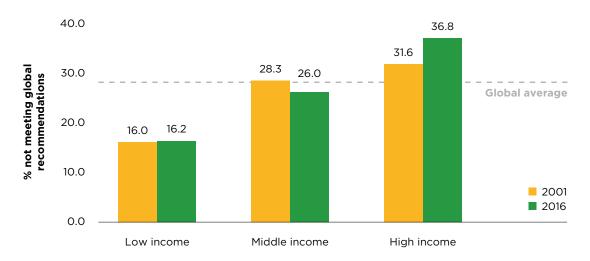
Worldwide, 28% of adults (1.4 billion) do not undertake sufficient physical activity to protect against common chronic diseases or to increase their physical, mental and social health and well-being (6).

Economic development is associated with increasing levels of physical inactivity. Levels of insufficient physical activity are more than twice as high in high-income countries compared with low-income countries, and increased

by 5% in high-income countries between 2001 and 2016 (Figure 1).

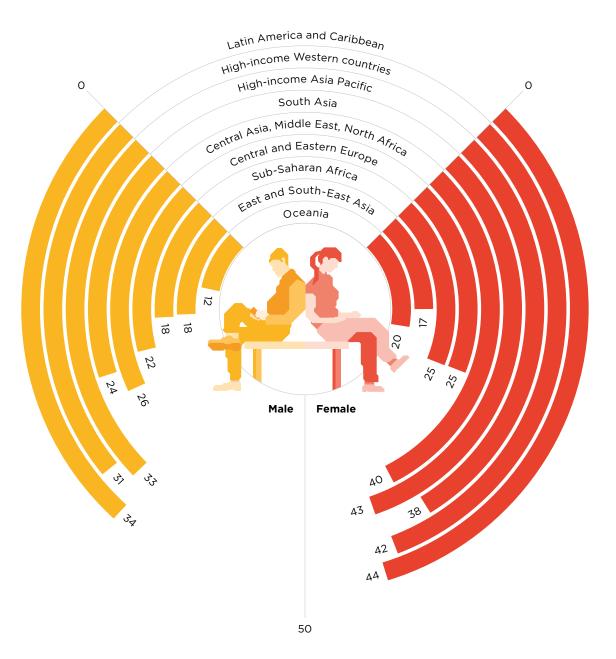
The highest levels of physical inactivity in men and women are observed in Latin America and the Caribbean (39%), and high-income Western countries (37%); the lowest levels in East and South-East Asia (17%) and Oceania (16%). Globally, women are less active (32%) compared with men (23%) across all subregions except for East and South-East Asia (Figure 2).

FIGURE 1. Levels of physical inactivity in 2001 and 2016 by World Bank Income Group



Source: Guthold et al., Lancet Global Health, 2016 (6).

FIGURE 2. Levels of physical inactivity in 2016 by sex and subregions



% not meeting global recommendations

Source: Guthold et al., Lancet Global Health, 2016 (6).

WHERE TO START?

Assess the current situation

To start, most countries should convene relevant stakeholders at national and, where relevant, subnational level, to assess the current situation on promoting physical activity. The process should aim to identify all existing policies within health and other sectors, which can be strengthened, as well as identify policy gaps and opportunities. The **ACTIVE technical package** and the recommended whole systems approach provide a guiding framework for this analysis.

Establish a coordinating mechanism

All countries should establish a clear, accountable coordinating mechanism for developing and implementing their national response. This mechanism should provide national leadership and ensure appropriate ongoing engagement and harmonizing of policy priorities and planning, implementation, resourcing and evaluation between relevant sectors. Ministries of health, sport and education are well placed to convene stakeholders, including community representatives, although other government sectors could also share this leadership role.

Develop a national plan of action

Most countries without a current and comprehensive national action plan on physical activity will need to develop documents, or review and revise those existing. This process should be informed by the results of the situation analysis and focus on identifying a strategic combination of policy responses from the **ACTIVE technical package** to implement in the short term (i.e. during the next 2–3 years).

Ministries of health are recommended to prioritize and lead on the implementation of the NCD "Best buy" policy recommendations (2), namely, public communication campaigns linked to community programmes (Action 1.1) and patient advice and counselling in primary health care (Action 3.2). In addition, ministries of health should advocate to ensure synergies and coherence in policy across key government portfolios including infrastructure, planning, education and sport.

All countries should plan to update and extend their national and subnational action planning to cover the medium term (4-6 years) and longer-term (7-12 years), building on earlier experiences, prioritizing policies to address remaining gaps, and exploiting new opportunities.

A WHOLE SYSTEM APPROACH TO NATIONAL ACTION

The ACTIVE technical package

recommends that all countries develop and implement a "whole system" approach to increase levels of physical activity. This involves implementing a combination of policy actions across multiple settings, over the short-, medium- and long-term which collectively aim to address the social, cultural, economic and environmental constraints, as well as knowledge, motivation and skills. A systems-based approach requires all relevant areas of government and the non-government sector to contribute to the national response (Figure 3). A whole system approach is inclusive of all stakeholders and is larger than, but requires, a wholeof-government engagement in solutions.

Coordinated policy actions across multiple settings and sectors will have the greatest impact on reducing levels of inactivity and sedentary behaviour.

A whole system approach can be an effective tool for engaging multiple stakeholders in the numerous opportunities for policy actions which influence physical activity. A focus on the systems that influence physical activity recognizes that not only is there a wide range of policies and interventions required, but also that they interact on multiple levels, such that any one policy response

can reinforce (or attenuate) actions in different parts of the system. For example, school-based initiatives can be reinforced by concurrent transport-led programmes promoting walking and cycling, but could be also compromised by failure to implement and enforce road safety measures. Advice of health care providers to patients can be reinforced by community-wide communication campaigns, but these could be compromised by inadequate access to safe, affordable facilities, such as parks or leisure centres. Countries will need to ensure policy alignment across different parts of the relevant systems, and coherence in the implementation of their responses to maximize impacts on physical activity levels.

In partnership with relevant stakeholders, WHO will develop tools to support countries to plan and implement systems-based approaches for increasing physical activity.

There is no single policy solution to increase physical activity. Each country should use a "whole system" approach to implement policy solutions tailored to context across all areas of government action.

All countries should use the guiding principles outlined in the Global Action Plan on Physical Activity (1) to inform their selection of policy actions. Employing a rights-based approach, countries should ensure resourcing according to the principle of proportional universality, by directing greatest efforts to increasing levels of physical activity in the least active populations.

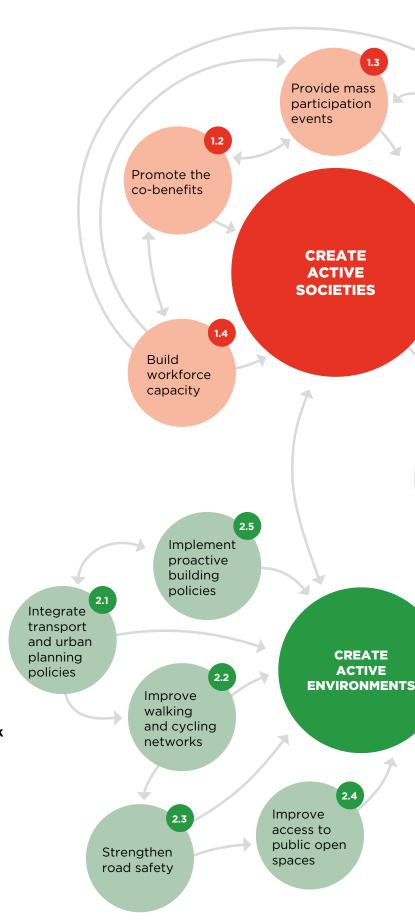


FIGURE 3. A whole system framework for a national response to increase levels of physical activity



Numbers shown refer to the recommended policy actions. For full details refer to the Global Action Plan on Physical Activity Appendix 2 (1).



SCALING FOR SUCCESS

Achieving full implementation of the **ACTIVE technical package** at national scale is a medium- to long-term agenda for most countries. Initially, implementation may be at the subnational or city level to assess effectiveness, build momentum and demonstrate partnerships. Learning from these local experiences, implementation should then be scaled up to ensure national reach and coverage; policy actions should be broadened incrementally to achieve a comprehensive whole system approach.

Strengthen partnerships

Effective implementation of a national physical activity action plan is beyond the scope of any single agency. Partnerships are key to engaging multiple stakeholders in contributing to coordinated policy implementation across relevant key settings, such as education, transport, urban planning, sport, and health. New and bold leadership will be needed from within governments to initiate and facilitate cross-governmental collaboration and partnerships with non-state actors at all levels.

Promote synergies

Investment in policies and partnerships aimed at increasing physical activity

can help achieve the large number of outcomes relevant to different stakeholders. Promoting these different outcomes can help forge and strengthen cooperation. Highlighting and reinforcing the mutual benefits and consequences of joint action on physical activity will enhance synergy across sectors. Collective actions will also contribute to the efforts of national governments in achieving the 2030 Sustainable Development Goals (7).

Ensure sustainability

The targets set for reducing physical inactivity by 10% by 2025, and 15% by 2030, endorsed by all governments at the Seventy-first World Health Assembly (8), will be achieved only through sustained implementation, appropriate resource allocation and, where needed, enforcement of the coordinated policies at the country level. To achieve success similar to that seen in other areas of public health (such as tobacco control in many countries), changing population levels of physical activity will require the cumulative impact of multiple and sustained actions. Meaningful community engagement and coownership of solutions are essential to achieving the desired societal changes and multiple benefits for health, the environment and the economy.

PARTNERSHIPS FOR ACTION

Effective implementation of ACTIVE demands partnerships. By working together to achieve the shared vision of more active people for a healthier world, partners can also accelerate progress to achieve their own respective goals.

These partners include, but are not limited to:

Member States

ministries of health, transport, education, sports, youth, urban planning, environment, tourism, finance, and labour

Development agencies

international financial institutions such as the World Bank, regional development banks, subregional intergovernmental organizations and development aid agencies

Intergovernmental organizations

UN agencies, UN Interagency Taskforce on NCDs (UNIATF) and others

International organizations

global health initiatives and agencies

Nongovernmental organizations

civil society, community-based organizations, human rights-based organizations, faith-based organizations

Professional associations

in medical and allied health areas, such as sports medicine, physical therapy, general practice, nursing, exercise and sports science, physical activity and public health and other relevant disciplines, including transport, sport, and education

Philanthropic foundations

that are committed to promoting global health and achievement of the SDGs

Academic and research institutions

across multiple disciplines including implementation science and the network of WHO collaborating centres

Industry leaders and private sector

committed to improving the health of employees, their families and communities

Media

journalists and media outlets, including both traditional and new media

City leaders and local government

mayors, governors and local officials

Community

representatives of faith-based, social and cultural groups

WHO

at all levels, headquarters, regional and country offices

CONNECTING HEALTH POLICY PRIORITIES

Regular physical activity is important for good health and well-being across all ages, and is proven to help prevent and treat noncommunicable diseases (NCDs) such as heart disease, stroke, diabetes and breast and colon cancer (1). Physical activity also contributes to the reduction of other important NCD risk factors such as hypertension, overweight and obesity, and is associated with improved mental health, delay in the onset of dementia and improved quality of life (1). National actions to increase physical activity also contribute to achieving other health priorities and many of the 2030 Sustainable Development Goals (SDGs).

In addition to providing multiple short-term as well as lifelong health benefits, investing in physical activity can help achieve many other closely related health priorities and support the delivery of existing global and national commitments, including:



PHYSICAL ACTIVITY AND THE SUSTAINABLE DEVELORMENT GOALS

Policies that increase participation in walking, cycling, sport, active recreation and play can contribute directly to achieving the 2030 SDGs (as detailed in Appendix 1 of the Global Action Plan (1)). Figure 4 shows the multiple co-benefits of implementing policies to increase physical activity.



FIGURE 4. Economic, social and environmental co-benefits of policy action to increase physical activity

SUPPORTING COUNTRY IMPACT

Working in partnerships, WHO will support countries in implementing the **ACTIVE technical package** to increase levels of physical activity. Global, regional and national coordination and capacity will be strengthened to respond to countries' needs for technical support, innovation and guidance.

WHO will focus on the following key areas:



Facilitate and promote multisector partnerships



Develop and disseminate policy, guidelines and tools



Catalyse innovation and digital solutions



Advocate for policy action, partnerships and community participation



Support knowledge transfer



Promote investment in research and evaluation



Support resource mobilization



Provide technical support



Partner to strengthen workforce capacity



Monitor progress and impact

MONITORING PROGRESS

Effective monitoring of global and national implementation is required. WHO will lead on the development of a global monitoring framework to provide a set of recommended process, impact and outcome indicators that are feasible in all countries. The framework will aim to minimize the burden of obtaining data by using, wherever possible, existing data-collection systems and established indicators within other relevant health, social and environmental policies, as well as the reporting framework and indicators of the SDGs. Global progress reports on country implementation will

be presented at the World Health Assembly in 2021, 2026 and 2030.

To support monitoring and evaluation at the national and subnational level, guidance on an expanded set of process, impact and outcome indicators will be developed. It is envisaged that countries will publish regular national reports and will be encouraged to strengthen reporting of disaggregated data.



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WHO resources supporting policy action on physical activity

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