**Why is physical activity important for health and well-being?**

An active lifestyle promotes physical and mental health, leading to better overall health and well-being. The many benefits of physical activity include improved cardiovascular health, stronger bones and muscles, healthy weight maintenance, better sleep, increased self-esteem and confidence and fewer symptoms of anxiety and depression. Active children are more likely to become active adults, and the benefits of physical activity continue throughout life, reducing the risk of developing chronic health conditions such as heart disease, stroke, cancer, high blood pressure, type 2 diabetes, osteoporosis and obesity.

**Why is physical activity important for education and learning?**

Regular physical activity may contribute to addressing the global learning crisis, as it is associated with better brain health, which includes cognitive development, classroom behaviour (e.g., time spent on tasks) and academic performance. It has also been linked to a reduction in bullying, pro-social behaviour and better school engagement and attendance. Physical activity outdoors has been linked to lower visual impairment (myopia), which may facilitate better learning.
Why are schools ideally placed to improve physical activity?

Schools can provide equitable access to opportunities for structured and incidental physical activity. This should include mandated-quality physical education and general physical activity opportunities (including active play, walking and cycling for transport, active lessons and sport). By listening to children and adolescents and involving them in planning, organizing and delivering physical activity initiatives, schools can maximize their participation, enjoyment and skill development, while catering for learners’ diverse needs, abilities and interests, as well as ensuring gender-equitable access. Schools can expose learners to a wide variety of physical activity options and contexts, from active travel, to sport, to fundamental movement skill development, to active play and active lessons, each potentially conferring unique benefits.

What are the current gaps?

Most learners do not have enough physical activity, as, worldwide, only one in five adolescents achieves the recommended level of physical activity (at least 60 min/day at moderate-to-vigorous intensity). Physical activity can be affected by conflict, emergencies and crises and has further decreased during the COVID-19 pandemic. The multiple barriers to physical activity include poor access to safe spaces, cost of facilities and equipment, weather conditions, lack of mandated active play and recreation time, competing academic demands and societal/cultural norms that discourage certain demographic groups, like girls, from participating in physical activity.

A systems approach can help address these gaps by integrating and aligning multiple elements, with the goal of amplifying benefits for education, health and well-being.

Physical activity is a good example of the importance of a systems approach. Numerous determinants of physical activity can be addressed by the education sector (in formal and informal curricula) working with other sectors, such as transport (e.g., safe transport to school, walking school bus) and urban design (e.g., sport and play facilities, safety). Bringing such elements together to promote physical activity sustainably is the essence of an HPS and systems approach.

This brief explores how policies, curricula, environments and services can be better designed and integrated to support physical activity.
Activating synergies in health interventions

What is the relation between physical activity, substance use and behavioural outcomes?

Some school physical activity interventions that also target substance use have been shown to reduce use of alcohol, marijuana and tobacco among adolescents.

Participation in sport has been linked to pro-social behaviour (teamwork, loyalty) among adolescents, restricts the time available for unstructured activities and may lead to greater civic engagement in the community, each of which can contribute to well-being.

What is the relation between physical activity and mental health?

Regular physical activity of at least moderate-to-vigorous intensity is associated with fewer depressive symptoms and better emotional well-being in children and adolescents. Participation in physical activity can improve sleep and self-esteem, create a sense of achievement and engagement and provide opportunities for social interaction, all of which support healthy physical and socio-emotional development.
How can we strengthen physical activity using a health-promoting schools and systems approach?

The following are examples of actions, activities or initiatives that can be conducted to strengthen physical activity using an HPS and systems approach. The list is not exhaustive; actions will depend on the context (e.g., social, cultural, country-specific), vary by the level of schooling (e.g., primary, secondary) and are ideally generated through engagement with all stakeholders (e.g., teachers, learners, community, caregivers, government, private sector and civil society organizations), based on local data. Solutions that target multiple aspects of education, health and well-being are encouraged as cost-effective ways of amplifying benefits.

1. Government policies and resources
   • Develop national policies and guidelines for HPS and physical activity in schools, with a focus on inclusivity (e.g., girls and young women, learners with varying abilities and special needs), and provide a variety of physical activity opportunities (play, games, sport, safe active travel), ensuring alignment with the ministry of education in all relevant sectors (e.g., health, infrastructure). Develop safety standards for school environments (e.g., sun safety, safe play equipment, zero tolerance of harassment) and regulate greater access to school sports and play facilities outside school hours.
   • Allocate a budget and human resources for physical activity, including specialized physical education teachers, purchase and maintenance of sports and play facilities and equipment, professional development and active before- and after-school programmes.
   • Ensure good-quality physical education, defined according to its frequency and inclusivity (e.g., older girls, with consideration of individual experiences of menstruation and the variety of programming), and encourage a minimum of weekly physical activity and active learning a part of the national comprehensive health and nutrition curriculum.
   • Build partnerships to promote active travel to and from school, including improving urban planning (such as slowing traffic near schools), safe neighbourhoods and public transport.

2. School policies and resources
   • Communicate and endorse school policies and standards (e.g., for health and well-being, physical activity, sitting time and screen time, sun safety, sexual harassment) in all local languages to learners, staff, parents, carers and the wider community.
   • Employ physical education teacher(s) and support continued professional development (e.g., HPS, physical skills development, inclusive, high-quality physical education and active learning methods) for school staff.
   • Provide access to wellness programmes to improve school staff health and well-being.
   • Consider whether school uniform policy or clothing standards are amenable for physical activity, as well as being affordable and accessible and/or subsidized, e.g., sports bras for girls.
   • Support active travel to and from school (e.g., walking, school bus, “buddies”, bicycle storage, changing rooms, pedestrian crossings).

3. School governance and leadership
   • Create school committees to oversee and advocate for a physical activity policy and programming with school health and well-being focal points. Involve teachers, school health staff, student representatives, parents and carers in decision-making to promote HPS, active learning and physical activity.
   • Regularly evaluate the effectiveness of physical activity initiatives, active learning and the delivery of high-quality physical education in a sensitive, non-comparative context (e.g., by ensuring enjoyment, participation, especially of girls and other marginalized groups of learners, health and well-being, as well as zero tolerance of harassment).
   • Provide active before- and after-school programmes and field trips, ensuring safety of girls and assuring families of this.
4 School and community partnerships

- Engage with local community groups and events (e.g., sports, yoga, mindfulness activities, skills development, outdoor activities, carnivals) and share use of community active recreation and play facilities, while ensuring the safety for female users.
- Provide parents and carers with practical guidance on achieving the recommended daily levels of physical activity and limiting competing activities such as recreational screen time (e.g., set limits for screen time, provide information on safe active travel).
- Involve families in sports days and in homework designed to increase participation in physical activity, especially of older girls.

5 School curriculum

- Structure high-quality physical education lessons with inclusivity and peer-led learning in mind (e.g., activities in small groups, team sports, non-competitive activities, avoid elimination games).
- Integrate physical activity and active learning into other parts of the curriculum (e.g., registration runs, nutrition and home economics, data collection on jumping heights or running times in mathematics classes, mapping active journeys to school in geography).
- Incorporate high-intensity physical activity “bursts” (classroom active breaks) into lesson time to avoid prolonged sitting.
- Implement programmes to develop fundamental movement and coordination skills of learners in elementary school.

6 School social–emotional environment

- Provide diverse physical activity programmes (e.g., gardening, running club, ball skills, orienteering, strength training, dance, yoga) and a respectful, inclusive environment for diversely sized bodies, older girls and learners with special needs and different abilities.
- Set up “buddy groups” and peer-led physical activity opportunities.

7 School physical environment

- Ensure access to clean, safe, gender-inclusive washrooms and changing rooms.
- Ensure access to clean, safe, shady spaces that are conducive to being outdoors and being physically active.
- Ensure access to supervised recreation and play equipment and facilities that are age-appropriate and meet safety standards.
- Ensure that clean drinking-water is free and widely accessible in all recreation areas.

8 School health services

- Facilitate access to health services as appropriate (e.g., for concerns about growth and physical health).
- Ensure that learners and their families understand the process and referral pathways for accessing health services, whether at school or in the community (e.g., pathways to access affordable health services for vulnerable people with limited resources).
How does a systems approach work in different contexts?

Polygon for physical activity of school-aged children, Croatia

**Background:** In Croatia, 14% of the main elementary schools and 83% of peripheral elementary schools have either no or limited access to a gymnasium, making it difficult to achieve mandated physical education requirements in all weather conditions.

**Approach:** Under the National Health Promotion Programme “Healthy Living” (2014–2015), the Croatian Institute of Public Health, the Ministry of Health and the European Social Fund supplied schools that did not have a gymnasium with mobile multi-purpose sports and play equipment adaptable for outdoor and indoor use. Professional development support was provided to physical education and classroom teachers in the form of a manual (including a video) produced in collaboration with the Ministry of Science Education and Sport and the Education and Teacher Training Agency.

**Results:** Teachers in the 120 main elementary schools without gymnasia reported greater student enjoyment of physical education and motivation to exercise with school equipment and their own perceptions of having access to suitable equipment and conditions to teach physical education. Teachers shared photographic documentation of how they innovatively used the equipment indoors and outdoors. Students created a video presenting their impressions of the programme.

**Messages:** A systems intervention, led by Government agencies with multisectoral (education, health) collaboration and investment in equipment and capacity-building, led to better implementation of the national physical education curriculum.


Schools in motion, Costa Rica

**Background:** In 2018, the Ministry of Health collaborated with the National University of Costa Rica to develop healthy environments to promote students’ physical activity. They addressed multiple levels, including school policy, governance, curriculum and environment of the participating schools.

**Approach:** School policies to promote movement were followed by re-organization of school spaces to encourage physical activity, facilitate high-quality physical education and promote acquisition of motor skills. The intervention consisted of virtually coached movement sessions of 20–40 min once or twice a week, supervised by an undergraduate teacher. The sessions were designed to promote playfulness, enjoyment and improvement of basic motor skills (self-efficacy). Resources such as hula-hoops, ropes, cones, gymnastics balls and frisbees were provided. Suspension of face-to-face lessons in 2020 due to the COVID-19 pandemic resulted in a new initiative. A health and wellness page was created on the social network Facebook to promote active lifestyles in and around the students’ home environments. In June 2020, a graduation ceremony was conducted for the school “Concepción de San Isidro de Heredia”, which completed 10 movement challenges. In May 2021, a dialogue was held, called “Intervention in school children to promote physical activity in times of pandemic: Families in movement and mobile active schools”.

**Results:** Participating students achieved greater self-efficacy and tended to enjoy physical activity more, with higher participation levels. It was noted that parent or caregiver accompaniment is important at an early age to reinforce the enjoyment of physical activity.

**Messages:** A coordinated approach across multiple levels of school systems led to increased self-efficacy in physical activity. Flexibility in adapting the intervention to a virtual platform enabled the benefits to continue even when schools were closed in 2020 due to the COVID-19 pandemic.

Physical activity

Quality Physical Education (UNESCO)

International Benchmarks for Physical Education Systems (International Council of Sport Science and Physical Education)

Global Recommendations on Physical Activity for Health (WHO)
https://www.who.int/publications/i/item/9789241599979

Promoting Physical Activity through Schools: a toolkit (WHO)
https://apps.who.int/iris/handle/10665/350836

Promoting Physical Activity through Schools: policy brief (WHO)
https://apps.who.int/iris/handle/10665/354605

Policy Brief on Promoting Physical Activity Among Adolescents (UNICEF)

Webinar: Promoting Physical Activity in Schools (Save the Children)

Resources

Health-promoting schools

Making every school a health-promoting school: global standards and indicators
https://www.who.int/publications/i/item/9789240025059

Making every school a health-promoting school: Implementation guidance
https://www.who.int/publications/i/item/9789240025073

Making every school a health-promoting school: country case studies
https://www.who.int/publications/i/item/9789240025431

WHO guidelines on school health services
https://www.who.int/publications/i/item/9789240029392

Physical activity

PROMOTING PHYSICAL ACTIVITY THROUGH SCHOOLS: A TOOLKIT
Promoting Physical Activity through Schools: a toolkit (WHO)
https://apps.who.int/iris/handle/10665/350836

PROMOTING PHYSICAL ACTIVITY THROUGH SCHOOLS: POLICY BRIEF
Physical activity is good for hearts, bodies and minds. Regular physical activity can improve physical fitness; improve heart, vascular and metabolic health, and bone health; and reduce adiposity in children and adolescents (1). Being active can also improve cognitive function, including academic performance and mental health, and can reduce symptoms of depression and anxiety (1). In contrast, too much sedentary behaviour can be unhealthy; it increases the risk of obesity and poorer fitness and cardiometabolic health, and can affect sleep duration (2).

Global estimates indicate that over 80% of young people in school are not meeting the global recommendations of 60 minutes of moderate-to-vigorous physical activity per day (see Box 1) (3). In most countries, girls are less active than boys, and levels of inactivity among girls have not improved since 2001 (in fact, the gap between girls and boys is widening) (3). In addition, the most socially disadvantaged groups in most countries, such as girls and those living with chronic health conditions or disability, are often the least active.
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