

Creating and Making the Case: Global Advocacy for Physical Activity

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Physical Activity—A Field in Need of Strategic Advocacy?

What are the characteristics of fields within health that have been well advanced globally? How well placed is physical activity against these criteria? Could physical activity yet be described as “well advanced,” or is it still an underdeveloped area in public health? Could physical activity at the global level be described as having the following?

- An identified and well-disseminated body of knowledge
- Accessible surveillance data
- Clear and simple guidelines or recommendations based on evidence
- An identifiable, coordinated, and well-mobilized global voice
- Policies and plans that are published and widely disseminated
- Evidence of effectiveness for key public health strategies
- Reasonable global and national consensus regarding the key strategies that should be prioritized
- A well-trained and identified workforce
- Clearly identified leaders in the field
- An identifiable set of initiatives, products, and services to support global advocacy
- Sufficient investment of human and financial resources to support and grow all of the above

Certainly, relative to 10 years ago, physical activity has made significant progress in relation to science, research, evidence, monitoring, and guideline development. Regional physical activity networks have been formed and have begun mobilizing professional activity in relation to physical activity. These include the Physical Activity Network of the Americas (RAFA-PANA), the European Network for Promoting Health Enhancing Physical Activity (HEPA Europe), the Asia Pacific Physical Activity Network, and the African Physical Activity

Network (AFPAN). In addition, we have seen the innovation of the International Congresses on Physical Activity and Public Health (Atlanta 2006 and Amsterdam 2008) and the development of the *Journal of Physical Activity and Health*. There have also been encouraging initiatives in relation to policy, especially with the release in 2004 of the World Health Organization's *Global Strategy for Diet, Physical Activity and Health*.¹ However, despite the advances, there has been disappointing commitments to national-level physical activity policies and action plans; program development, dissemination, and implementation; and funding for initiatives, products, and services. The priority afforded to this vital health issue falls short of the priority that would be warranted by the evidence.

The global physical activity report card would read, "Physical activity is doing much better than 10 years ago but has a considerable way to go to reach its potential." As long as there is an imbalance between the state of physical activity evidence and the necessary commitments to action, advocacy must be the priority strategy. Measuring this imbalance is challenging, but a checklist based on the 10-point plan outlined in this article could be used to provide a report card on country-level commitment. A positive report card at the country level would require national commitments to physical activity policy, physical activity plans, an adequately resourced implementation strategy, population physical activity monitoring, mass media campaigns, well-disseminated programs in key settings and across the life span, active transport programs, built environments that support active living, workforce development and training, financial incentives (tax and price) for physical activity participation, health care funding systems that support prevention, and programs that target the most needy and marginalized groups. This would require a national evaluation framework to monitor the dose of physical activity intervention being delivered to the population.

Definitions and Challenges

The World Health Organization defines advocacy for health as "a combination of individual and social actions designed to gain political commitment, policy support, social acceptance and systems support for a particular health goal or program."² Implicit in this definition is that the key goal of physical activity advocacy is not individual behavior change but achieving advances in political commitment, policy support, infrastructure, funding, and systems changes.³

Global physical activity advocacy is not well mobilized, funded, or supported. Relative to its potential for return on investment, physical activity advocacy is underutilized, underresourced, underresearched, and undervalued. In addition, physical activity advocacy does not yet have a strategic home base and often has no structured and mobilized strategy.

It is now time for a concerted, structured, and well-mobilized global approach to physical activity advocacy.