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Language Undefined

April 2012 Update

GAPA, the advocacy council of the International Society of Physical Activity and Health (ISPAH), along with other global and all regional physical activity networks (HEPA EUROPE, RAFA, APPAN, AFPAN and AGITA MUNDO) support the inclusion of the proposed target on physical inactivity in the WHO Global Monitoring Framework for NCD Prevention which was called for in the Political Declaration on the Prevention and Control of NCDs, adopted at the UN High Level Meeting in September 2011. The joint statement provides additional support to the views expressed by the Member States that have called for the inclusion of physical inactivity after it was omitted in earlier draft frameworks.

The case for why physical inactivity should be included as a global target and the scientific support for how physical inactivity meets the five selection criteria is set out in the Position statement available here. [1]

For those less familiar with this agenda, physical activity is well recognised as a core risk factor for the prevention of the leading NCDs and yet was omitted in earlier draft frameworks. Following the February 2012 round of consultations, Member States and others have highlighted the inconsistency and omission and this resulted in the inclusion of a target on physical inactivity in the latest draft Framework reported in the WHO Discussion Paper #2 (available from http://www.who.int/nmh/events/2012/consultation_april_2012/en/index.html [2]

It is important that submissions to the current consultation phase, particularly from Member States, comment on and support the inclusion of physical inactivity target. The opportunity to submit comments to WHO on the Discussion Paper #2 is open until April 19th 2012. For further information see http://www.who.int/nmh/events/2011/consultation_dec_2011/en/ [3]

Prevention of NCDs - Why we need a global target on physical inactivity?

- Physical inactivity has been identified as the fourth leading risk factor for global mortality causing an estimated 3.2 million deaths globally.
- A large share of these deaths, as well as a high burden of morbidity and disability attributable to physical inactivity, occurs in low- and middle-income countries.
- The inclusion of a global target on physical inactivity will directly support and advance the implementation of the WHO Global Strategy on Diet, Physical Activity and Health as called in paragraphs 43 (d) of the Political Declaration (resolution 66/2).

Act Now on Physical Activity for Better Health, Wellbeing and Prevention of NCDs

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- Increasing population-wide participation in physical activity is a major health priority in most high and middle
 income countries and is a rapidly-emerging priority in lower income countries experiencing rapid social and
 economic transitions.
- There is the need for all countries to invest in strategies, programs and supportive environments that inform, motivate and support individuals and communities to be active in ways that are safe, accessible and enjoyable.
- The benefits of action aimed at reducing physical inactivity cross several portfolios including health, environment, transport, sport, culture and the economy.

Prevention of NCDs - Why Physical Activity?

Physical inactivity is the fourth leading cause of deaths due to non-communicable disease (NCDs) worldwide. Increasing population-wide participation in physical activity is a major health priority in most high and middle income countries and is a rapidly-emerging priority in lower income countries experiencing rapid social and economic transitions. There is the need for all countries to invest in strategies, programs and supportive environments that inform, motivate and support individuals and communities to be active in ways that are safe, accessible and enjoyable. The benefits of action can cut across health, environment, transport, sport, culture and the economy.

Download the NCD Alliance Briefing Paper on Nutrition, Physical Activity and NCD Prevention here. [4]

Global Advocacy for Physical Activity (GAPA) [5] has developed **three key tools** for use by NCD advocates. These together provide a summary of the case, the evidence and the actions needed to prioritise physical activity in the fight against NCDs. Download an overview presentation <u>here.</u> [6]

- 1. The Toronto Charter for Physical Activity A Global call to Action The Toronto Charter for Physical Activity is an advocacy tool designed to help elevate the importance of physical activity as a policy priority throughout the world. The Toronto Charter provides a clear framework relevant to all countries on how to initiate or continue national population-based approaches to physical activity. It defines a set of priority areas for action relevant to all sectors and provides a unifying focus for building partnerships and taking joint action. The Charter is an advocacy tool for use by all involved in physical activity at the local, regional and national level. To download a copy of the Toronto Charter for Physical Activity please visit www.globalpa.org.uk [5].
- 2. NCD Prevention: Investments that Work for Physical Activity Written as a complementary document to the Toronto Charter for Physical Activity, Investments that Work identifies seven best investments to increase population levels of physical activity which, if applied at sufficient scale will make a significant contribution to reducing the burden of non-communicable diseases and promote population health. In addition, these investments will contribute to improving the quality of life and the environments in which we live. To download a copy of Investments that Work visit: www.globalpa.org.uk [5]
- **3. Advocacy Postcard** This postcard was developed as a simple, compact easy-to-use advocacy tool. It is designed to answer the critics who may think that physical activity doesn't warrant the strong policy attention and action that is afforded to tobacco and other issues. GAPA calls for national policy action on inactivity and calls on the WHO and United National to develop robust physical activity targets and indicators against which progress can be monitored. This call is justified on the basis that:
- 1. There is enough evidence on health and other benefits of physical activity to act now.
- 2. We have global physical activity guidelines based on international scientific evidence and consensus
- 3. We can measure and have tested tools to assess population levels of physical activity
- 4. We know inactivity is an increasing problem in BOTH high-income countries (HIC) and low and middle income countries (LMIC), particularly in countries experiencing rapid urbanization.
- 5. We have solutions across different settings and these require cross-sector partnerships
- 6. All countries can and should increase their action to increase physical activity across the life span
- 7. It works! we have examples of effective large scale national strategies on physical activity in the LMIC Context. Access at www.globalpa.org.uk [5] or click here. [7]

If you would like to stay involved in global advocacy around physical activity, GAPA is keen to expand its membership. Anyone wishing to become a member of GAPA, needs to first join ISPAH and select GAPA as your Council affiliation. For more information on joining, please visit http://www.ispah.org/ [8] The GAPA Executive

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TorontoCharterforPhysicalActivity.pdf.pdf [9]

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Links

- [1] https://ncdalliance.org/sites/default/files/Position%20Statement%202%20_Support%20for%20the%20Global %20PA%20Target March%2025%202012 FINAL.pdf
- [2] http://www.who.int/nmh/events/2012/consultation_april_2012/en/index.html
- [3] http://www.who.int/nmh/events/2011/consultation_dec_2011/en/
- [4] http://www.ncdalliance.org/sites/default/files/rfiles/NCD%20Alliance%20-%20Nutrition,%20Physical%20Activity,% 20and%20NCD%20Prevention.pdf
- [5] http://www.globalpa.org.uk
- [6] http://www.ncdalliance.org/sites/default/files/rfiles/GAPA%203%20advocacy%20tools%20.pdf
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