

Promoting Physical Activity

Regular physical activity is associated with healthier, longer life. Physically active people have less risk of heart disease, high blood pressure, diabetes, obesity, and some types of cancer. In fact, a recent study showed that regular physical activity can prevent diabetes even in high-risk people. Despite all the benefits of physical activity, most Americans are sedentary: only 25% of adults and 27% of high-school students get moderate exercise regularly. In addition, lack of physical activity has contributed to a sharp rise in childhood obesity over the last 20 years: 1 in 4 American children today is obese and at risk of related health problems. Since regular physical activity helps people stay healthier, the question is: *what strategies work best in helping people to become more physically active*?

The **Guide to Community Preventive Services** addresses the effectiveness of population based interventions for three approaches to improve physical activity: 1) informational, 2) behavioral and 3) environmental and policy approaches.

Summary of Findings:

The independent Task Force on Community Preventive Services, issues the following findings for interventions within each of these strategic areas. Recommendations are based on the strength of the evidence of effectiveness found through a systematic review of published studies conducted by a team of experts on behalf of the Task Force. A determination that there is "insufficient evidence to determine effectiveness" does NOT mean that the intervention does not work, but rather indicates that additional research is needed to determine whether or not the intervention is effective. Decision makers should consider these evidence-based recommendations in light of local needs, goals, and constraints when choosing interventions to implement.

Intervention	Recommendation
Informational approaches to increasing physical activity	
Community-wide campaigns	Recommended (Strong Evidence)
"Point-of-decision" prompts	Recommended (Sufficient Evidence)
Classroom-based health education focused on information	Insufficient Evidence to determine effectiveness
provision	
Mass media campaigns	Insufficient Evidence to determine effectiveness
Behavioral and social approaches to increasing physical activity	
Individually-adapted health behavior change	Recommended (Strong Evidence)
Health education with TV/Video game turnoff component	Insufficient Evidence to determine effectiveness
College-age physical education/health education	Insufficient Evidence to determine effectiveness
Family-based social support	Insufficient Evidence to determine effectiveness
School-based physical education	Recommended (Strong Evidence)
Non-family social support	Recommended (Strong Evidence)
Environmental and policy approaches to increasing physical activity	
Creation and/or enhanced access to places for PA	Recommended (Strong Evidence)
combined with informational outreach activities	
Transportation policy and infrastructure changes to promote	In progress
non-motorized transit	
Urban planning approaches – zoning and land use	In progress

Publications

- MMWR/Recommendations and Reports –<u>October 26, 2001/Vol50/No. RR-18</u> A report on findings.
- American Journal of Preventive Medicine Am J Prev Med 2002; 22(4S), A report on evidence, findings and expert commentaries. See www.thecommunityguide.org/pa/ for links to individual articles

The Guide to Community Preventive Services (Community Guide) provides recommendations on population-based interventions to promote health and to prevent disease, injury, disability, and premature death, appropriate for use by communities and healthcare systems. For more information about the Community Guide (including links to publications and a variety of resources) see

www.thecommunityguide.org and for more information about the Task Force review of physical activity see www.thecommunityguide.org/pa/

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