Housekeeping

✓ The webinar will be recorded

✓ Please use the Q&A function to post questions

✓ The recording and slides will be circulated post-webinar

The production of this policy laboratory has received support from an operating grant under the European Union’s 3rd Health Programme
Meet your chair

Dr Olivia Barata Cavalcanti

Director of Science and Programmes

UK
Objectives:

1. To **improve understanding** of the role of physical activity and exercise obesity prevention and treatment.

2. To **reframe the obesity narrative** away from solely individual responsibility, to include all factors related to the prevention, treatment, and management of obesity.

3. To **present global and country specific recommendations** on physical activity for health.

4. To **showcase physical activity policy monitoring tools**, and the variation in strategies designed to foster environments that promote active living.

5. To **discuss policy recommendations and practical actions** to turn physical activity guidelines and recommendations into practice.
World Obesity launches it’s policy dossier on physical activity!

• Through this dossier, we will be collating known evidence, resources and materials pertaining to obesity and physical activity.

• The dossier will explore global recommendations and country-specific case studies on policies and interventions that have been or should be implemented to increase physical activity.
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<td>Welcome and introductions</td>
<td>Dr. Olivia Barata Cavalcanti</td>
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<td>15:40-15:50</td>
<td>Global recommendations on Physical Activity for Health</td>
<td>Dr. Fiona Bull</td>
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<td>The WCRF MOVING Policy Database</td>
<td>Kate Oldridge-Turner</td>
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<td>Case study: Poland</td>
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<td>Q&amp;A – how can we translate guidelines into practice?</td>
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<td>Closing remarks</td>
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Meet your speakers

Margot Neveux
UK

Dr. Fiona Bull
Switzerland

Kate Oldridge-Turner
UK

Prof. Aleksandra Luszczynska
Poland

Prof. Shifalika Goenka
India

Prof. Greg Whyte
UK
The role of physical activity and exercise in obesity
A position statement from the World Obesity Federation

Margot Neveux
Senior Policy Manager
World Obesity Federation
UK
What is physical activity?

“Physical activity refers to all movement. Popular ways to be active include walking, cycling, wheeling, sports, active recreation, and play, and can be done at any level of skill and for enjoyment by everybody.”

Source: https://www.who.int/health-topics/physical-activity
‘Eat less move more’ alone doesn’t work!

- Obesity is a chronic relapsing disease
- People with obesity are constantly shamed and blamed for their disease.
  - Many see it as a simple lack of willpower, laziness, or a refusal to “eat less and move more”
  - The root causes of obesity run much deeper
The evidence

- Physical activity alone only has a modest impact on weight loss
- Individuals using exercise as a weight loss mechanism tend to overestimate the amount of energy spent
- Physical activity can be beneficial for weight maintenance
Benefits of physical activity

• While the impact of exercise alone on weight loss is minimal, physical activity incontestably confers significant other physical and mental health benefits for everyone, including people living with overweight and obesity
• We need to develop policies focused on supporting and enabling all people to engage in exercise in our daily lives
Thank you!

WOF’s position statement:

WOF’s policy dossier on physical activity & obesity:
https://www.worldobesity.org/resources/policy-dossiers/physical-activity

mneveux@worldobesity.org
@WorldObesity
@MargotNeveux
Global recommendations on Physical Activity for Health

Dr Fiona Bull

Physical Activity Unit, Department for Health Promotion, Division of Healthier Population
Switzerland
WHO GUIDELINES ON PHYSICAL ACTIVITY AND SEDENTARY BEHAVIOUR

Fiona Bull
Physical Activity Unit
Department for Health Promotion
Division of Healthier Population
Main Guideline take-homes

1. Good for hearts, bodies and minds
2. Any amount of physical activity is better than none, and more is better
3. All physical activity counts
4. Too much sedentary behavior can be unhealthy
Benefits across the life course

- All-cause mortality, cardiovascular disease mortality
- Site-specific cancers, hypertension, type-2 diabetes
- Mental health and cognitive health outcomes
- Falls, falls-related injuries, bone health and functional ability
- Physical function, health-related quality of life
- Physical, cardiorespiratory and muscular fitness, adiposity
- No adverse effects maternal and fetal health
Recommendations in more detail……..

At least **60 minutes a day**
moderate- to vigorous-intensity, mostly physical activity, across the week; most of this physical activity should be aerobic.

At least **150 to 300 minutes**
moderate-intensity aerobic physical activity

or an equivalent combination throughout the week

At least **75 to 150 minutes**
vigorous-intensity aerobic physical activity

or an equivalent combination throughout the week

For additional health benefits:

On at least **2 days a week**
muscle-strengthening activities at moderate or greater intensity that involve all major muscle groups.

On at least **3 days a week**
vigorous-intensity aerobic activities, as well as those that strengthen muscle and bone should be incorporated.

For additional health benefits:

more than **300 minutes**
moderate-intensity aerobic physical activity

or an equivalent combination throughout the week

more than **150 minutes**
vigorous-intensity aerobic physical activity

or an equivalent combination throughout the week

On at least **3 days a week**
varied multicomponent physical activity that emphasizes functional balance and strength training at moderate or greater intensity.
Recommendations for key populations

**People living with disability and chronic conditions**
(Cancer survivors; Hypertension; Type-2 diabetes and HIV)

**Pregnancy & Postpartum**

Women who habitually engaged in VPA, or who were physically active, can continue these activities.

- At least **150 minutes** a week
  - moderate-intensity aerobic physical activity
  - or an equivalent combination throughout the week

- At least **150 to 300 minutes**
  - moderate-intensity aerobic physical activity

- At least **75 to 150 minutes**
  - vigorous-intensity aerobic physical activity

- For additional health benefits:
  - more than **300 minutes**
    - moderate-intensity aerobic physical activity
  - more than **150 minutes**
    - vigorous-intensity aerobic physical activity

- For additional health benefits:
  - On at least **2 days** a week
    - muscle-strengthening activities at moderate or greater intensity that involve all major muscle groups.

- On at least **3 days** a week
  - varied multicomponent physical activity that emphasizes functional balance and strength training at moderate or greater intensity.

- At least **60 minutes** a day
  - moderate- to vigorous-intensity physical activity across the week.
  - Most of this physical activity should be aerobic.

- On at least **3 days** a week
  - vigorous-intensity aerobic activities, as well as those that strengthen muscle and bone should be incorporated.
Recommendations on sedentary behaviour

Unfavourable impact on:

**In children/adolescents:**
- Adiposity
- Cardiometabolic health
- Fitness
- Behavioural conduct
- Sleep

**In adults**
- All-cause, CVD and cancer mortality
- Incidence CVD, cancer and T2D
Resources you can use

Available at: //www.who.int/health-topics/physical-activity

Read more

British Journal Sports Medicine - https://bjsm.bmj.com/content/54/24


Journal of Physical Activity and Health: https://doi.org/10.1123/jpah.2020-0323

Hear more

WHO Launch Webinar recording: https://youtu.be/rI1-V0lMW5M


See more

WHO Every Move Counts video: https://www.youtube.com/watch?v=jY7YvglA92s
The WCRF MOVING Policy Database

Kate Oldridge-Turner

World Cancer Research Fund International
UK
“CO-CREATE” – Confronting obesity: co-creating policy with youth

- The CO-CREATE study aims to prevent overweight and obesity in adolescents by providing knowledge and infrastructure on policies to support making the healthiest choices the preferred ones.

- EU Horizon 2020 Project
- €10 million
- 14 partners + WHO Europe
- May 1st 2018 – April 30th 2023
MOVING Physical Activity Policy Framework

• MOVING was developed as part of CO-CREATE in 2018

• Developed from an analysis of global physical activity policy literature (including the WHO Global Action Plan on Physical Activity)

• Several rounds of consultation with physical activity policy experts
The MOVING framework

• MOVING is structured around four domains and six policy areas

• The MOVING framework’s six policy areas align with the four policy domains in the WHO GAPPA

• The cross cutting Active Systems domain – governance, leadership, surveillance, funding

• MOVING is underpinned by a new database of physical activity policies
Launched in June 2020
• 259 policy actions
• 1 evaluation
• 11 countries

Sits alongside the NOURISHING database
https://policydatabase.wcrf.org
What we’ve found so far...

- 29 School environment
- 70 Community and sport & recreation
- 17 Training for professionals
- 6 Workplace
- 40 Built environment
- 30 Transport

- 13 PA guidelines
- 37 Communication campaigns
- 17 Primary healthcare training, assessment and counseling
Inclusion criteria and methodology

**EU Comprehensive scan**
- In depth scan
- National level
- 27 European countries

**Global scan**
- Ongoing surveillance
- National and regional level

- Supported by the government
- In effect
- Related to one of the policy areas of NOURISHING and MOVING
- Relevant to reducing obesity and/or diet-related NCDs by promoting healthy diets or physical activity
- Verified by an in-country expert
What next?

• Continue to update the databases through policy scans
• New policy benchmarking tool for physical activity
• New policy indexes for physical activity
Thank you!

Kate Oldridge-Turner
Head of Policy and Public Affairs
k.oldridge-turner@wcrf.org
Case study: Poland

Prof. Aleksandra Luszczynska

SWPS University, on behalf of the Polish CO-CREATE team

Poland
Case Study: Poland

Aleksandra Luszczynska, SWPS University, on behalf of the Polish CO-CREATE team
Case Study: Poland

• Poland has no national guidelines on physical activity...

• 15.6% of youth aged 10-19 meet the weekly target of moderate-to-vigorous physical activity guidelines, proposed by WHO (the National Institute of Mother and Child, 2018)
Policy proposals developed by youth from Miejska Gorka

**Policy name: Gym Passes for Youth**
- Municipality will fund discounts for youth to use gyms and sport centers in the county (increase accessibility through lowering prices)

**Policy name: Mobile App FITKET**
- A mobile app encouraging people to collect points for their physical activity. Biweekly or monthly, the points can be exchanged for discounts in shops for healthy food, gyms, sports centers. Discounts will be funded by the municipality (monitor physical activity and gain discounts)
Policy proposals developed by youth from Wroclaw

**Policy name: Saturday awareness**

- Encouraging people to be physically active and eat healthily by organizing events every Saturday in shopping centers across Poland
- The events include healthy cooking and physical activity information and workshops, and consultations with specialists
- Vlogger/TV crew record the event to promote it among youth and adults
- Matches Wroclaw municipality policies ’Wroclaw for Weekend’ (city-funded health and education weekend events)
Case Study: India

Prof. Shifalika Goenka
Head Bioethics and Social and Behavioural Sciences, Public Health Foundation of India, India
India: Demographics, Democracy and Diversity.

The 2nd most populous country

Population: 1.3 billion people
India houses one-sixth of the world’s population.

50% of the population < age of 25

Rural / Urban break-up:
72.2% rural,
27.8% urban.

% of population below poverty line: 22%

More than 2000 ethnic groups

Religion: every major religion is represented Hindus, Muslims, Jains, Sikhs, Zoroastrians, Baha’i, Christians

Language: India has 20 languages officially listed in the constitution, 122 major languages, and 1599 ‘others’

Culture: Cultural diversity
India - High Obesity and Diabetes Burden

• Obesity has doubled in the last 10 years
• High & widespread central obesity, including the non-elite segment.
• For every 100 overweight adults>= 20 yrs. - 38 adults have diabetes, (Global avg. 19/100 )
• 65 million people live with diabetes, ranking 2nd highest in the world
• Most important risk factor for diabetes in India is overweight and obesity to which 36·0% of the diabetes DALYs could be attributed.

Sources : NHFS-4; doi: 10.4103/0971-5916.164234; Pradeepa et al, 2015 IUMR; Lancet Glob Health 2018;6: e1352–62. India State-Level Disease Burden Initiative Diabetes Collaborators,
• Every minute counts, every 5 minutes of physical activity counts
• Dose-dependent: the benefits continue to rise beyond the minimum recommended 150-300 --- 750 minutes per week
• Increasing physical activity in every walk of life is a no-brainer
Physical activity insecurity and high heat
Good news

• The Central Board of Secondary Education has made Health and Physical Education compulsory in all classes in India.

• Delhi’s master planners are reconfiguring open spaces within the new normal in Delhi: which we are studying

• Prime Minister of India, launched the Fit India movement on 29th Aug 2019 to make ‘physical fitness a way of life’
Case Study: UK

Prof. Greg Whyte
Chair, Scientific Advisory Board, UK Active
UK
ukactive is the not-for-profit health body representing over 4,000 businesses across the physical activity sector. It exists to unlock the sector’s potential to improve the health of the nation by getting more people, more active, more often.

**Ways of working**

### Everyone Active
Representing and advocating on behalf of businesses across the physical activity sector.

### 4,000+ Members and Partners

### Research Institute
Demonstrating the safety of the sector and its impact on physical and mental wellbeing.

### Public Affairs and Policy
Raising the value of our sector as essential to the nation’s health and wellbeing.

### Projects and Campaigns
Instilling consumers with confidence in our sector and the services it delivers.
Physical activity levels: UK

**Physical Activity Levels Adults**

<table>
<thead>
<tr>
<th></th>
<th>Active</th>
<th>Low Activity</th>
<th>Inactive</th>
</tr>
</thead>
<tbody>
<tr>
<td>Males</td>
<td>70</td>
<td>10</td>
<td>20</td>
</tr>
<tr>
<td>Females</td>
<td>65</td>
<td>12</td>
<td>22</td>
</tr>
<tr>
<td>Total</td>
<td>67</td>
<td>11</td>
<td>21</td>
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</table>

**Physical Activity Levels Children**

<table>
<thead>
<tr>
<th></th>
<th>Active</th>
<th>Low Activity</th>
<th>Inactive</th>
</tr>
</thead>
<tbody>
<tr>
<td>Girls</td>
<td>43</td>
<td>27</td>
<td>30</td>
</tr>
<tr>
<td>Boys</td>
<td>51</td>
<td>22</td>
<td>27</td>
</tr>
<tr>
<td>Total</td>
<td>47</td>
<td>24</td>
<td>29</td>
</tr>
</tbody>
</table>

- 29% (c. 11 million) adults are inactive (<30 minutes activity per week)
- 21% (c. 6 million) children are inactive (<30 minutes activity per week)
- Disparities between genders, but also between regions, socio-economic status, ethnicity and disability
Physical activity & COVID-19

Pre-COVID-19 Pandemic

• Number of people classed as active was rising (+400,000 regularly active adults)
• Number of inactive adults fell by 159,500 with the majority driven by women
• Small reduction in the gender gap with 61% of women regularly active vs. 65% of men

Following 1st Lockdown

• 7.1% reduction (3 million adults) in adults classed as active
• 7.4% increase (3.4 million adults) in inactivity for adults
• 40% women reported doing less physical activity than usual
• 39% people with long-term conditions reported doing less physical activity than usual

COVID-19: Factors affecting reduction in physical activity levels

• Anxiety of catching or spreading COVID-19
• Access to facilities
• Range of activities on offer
• Weather
• Home schooling

*Disproportionately affect women, leading to growth in the gender gap
Physical activity & COVID-19: Women

- Women make up 54% of gym members in UK
- 76% group class attendees are women (3 most popular: indoor cycling; aerobics; yoga)
- The most popular activity is swimming (42% of all visits), with women making up 53% of swimming visits (increasing with age)
- Lack of access to group sessions & swimming led to disproportionate reduction in activity for women**

PREGNANCY*:

- Only 28% reached WHO guidelines of 150 mins per week
- 80% felt that the loss of the type of activities and specialist support provided by the leisure and fitness sector was a key reason for the reduction in PA during lockdowns

*This Mum Moves Campaign (2021)
Q&A – how can we translate guidelines into practice?
Learn more:

• Read World Obesity’s position statement on the role of physical activity and exercise on obesity.

• Access the latest evidence, resources and materials on physical activity in World Obesity’s policy dossier.

• Explore the MOVING database of policy actions from around the world targeted at getting people, more active.

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Thank you!

WORLD OBESITY
POLICY LABORATORY

Physical inactivity and obesity - can we break the cycle?

THURSDAY 8TH APRIL 2021
15:30 - 16:30 BST