Why physical activity must be included in the Draft WHO Global Program of Work 2019-2023 and its Impact Framework

Since the United Nations Political Declaration on NCDs, endorsed by Heads of State and Government in 2011, physical inactivity has held a prominent and appropriate place in core UN and WHO policy frameworks.

The WHO has shown strong leadership by including physical inactivity in the Global Action Plan on NCDs, its ‘Best Buys’ guidance and in its Global Monitoring Framework, with a realistic and achievable target to reduce physical inactivity, both in adults and young people, by 10% by 2025.

In particular the NCD Action Plan focuses on four key risk factors that are driving the NCD epidemic, namely, tobacco, diet, physical inactivity and alcohol.

The WHO’s understanding of the role played by physical inactivity in driving NCDs, as well as its proposed solutions, have now been widely acclaimed by governments and civil society across the world. Most notably, the World Health Assembly this year has endorsed the development of a Global Action Plan on Physical Activity, to be presented in May 2018 for discussion and endorsement of Member States.

It is a most significant omission, therefore, that the current Draft WHO Thirteenth General Programme of Work (GPW) 2019-2023 explicitly targets only three of the NCD risk factors namely, tobacco, diet and alcohol, in addition to targets and indicators on intermediate risk factors.

Furthermore, the 13th GPW and its Draft Impact Framework contain no target for physical inactivity. This is inconsistent with previous UN and WHO Policy frameworks and
resolutions, demonstrating a lack of policy coherence, which will be confusing to policymakers and detrimental to the momentum now occurring with regard to the ongoing development of the Global Action Plan on Physical Activity.

Physical inactivity is included in current documents, strategies and resolutions for compelling reasons:

- Physical activity reduces the risk of developing a wide range of noncommunicable diseases including coronary heart disease, hypertension, diabetes and stroke
- Physical inactivity is the fourth leading cause of death worldwide, accounting for over 3.2 million deaths per year with a large share of deaths occurring in low- and middle-income countries
- A large share of deaths from physical inactivity occur in low- and middle-income countries
- A high burden of morbidity and disability attributable to physical inactivity is experienced in all countries, and particularly those of low and middle income.
- A conservative estimate of the cost of physical inactivity to healthcare systems worldwide is a staggering 53.8 billion (INT$) - a global impact for physical inactivity that is similar to that of tobacco consumption
- Reducing physical inactivity by 25% would save an estimated 1.3 million lives every year
- Physical activity initiatives make strong contributions to many other policy areas (explicitly outlined in ISPAH’s Bangkok Declaration 2016):
  - by promoting social inclusion;
  - by contributing to reducing air pollution, greenhouse gas emissions and traffic congestion;
  - by promoting a healthy and productive workforce; and
  - through effective return on investment in sectors such as transport and tourism.

Member States can act on physical inactivity based on existing evidence of effective and achievable interventions. There are published examples from Member States including Australia, Brazil, Canada, Colombia, England, Finland, Ireland, Scotland, Singapore and Thailand. Fact sheets on health-enhancing physical activity are available for the 28 Member States of the European Union and in 2016, the WHO European Region launched the first ever WHO Regional Strategy on Physical Activity and Health.

Thus, there is no doubt that physical inactivity is a vital risk to global health and sustainable development. Given the compelling evidence regarding the burden of inactivity, the protective effect of physical activity across the major noncommunicable diseases, as a key strategy for overweight and obesity and the sustainability agenda at large; and our knowledge with regard to proven interventions and early wins, the omission of physical inactivity from the WHO GPW 2019-2023 and its Impact Framework is both surprising and regrettable.
Inclusion of physical activity in the WHO GPW 2019-2023 and its explicit inclusion in the Impact Framework is essential to advance the WHO Global Action Plan on NCDs, the new Draft Global Action Plan on Physical Activity (to be considered by the WHO General Assembly in May 2018), and the contribution by WHO to the achievement of the Sustainable Development Goals.

The world is ready and willing to embrace a global action plan on physical activity. It looks to WHO to take the lead. It is time to capitalize on progress made so far and achieve real change in reducing physical inactivity through its inclusion as a central component of the WHO 2019-2023 agenda.

The undersigned agencies remain prepared to assist to this end.

**We call upon Member States, WHO and other interested partners, to endorse the inclusion of physical activity in the WHO GPW 2019-2023 and endorse inclusion of a physical activity target in the GPW Impact Framework.**

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