

REACHING THE 2025 TARGET FOR 10% MORE PEOPLE MOVING MORE OFTEN THROUGH IMPACTFUL AND SUSTAINABLE JOINED UP LOCAL ACTIONS

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WORLD HEALTH ORGANIZATION (WHO), GENEVA.

HEALTH PROMOTION SYMPOSIUM, HONG KONG, MAY 4 2018













OUTLINE

Global NCD and physical activity agenda

2 What works

Putting it all together

New global action plan on physical activity





















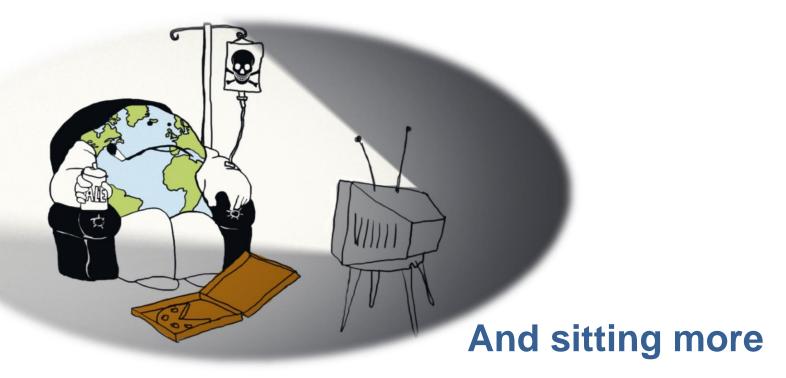








But the world is moving less and less





































Medical Conference





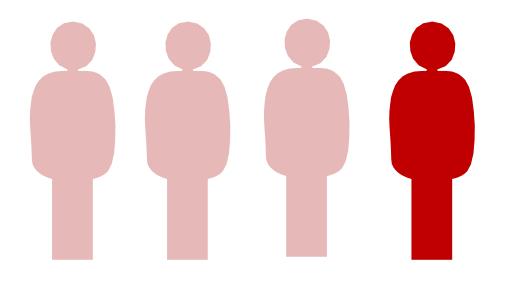








GLOBAL PRIORITY



Global Prevalence of physical Inactivity

23%



COUNTRIES VARY

TO 70%





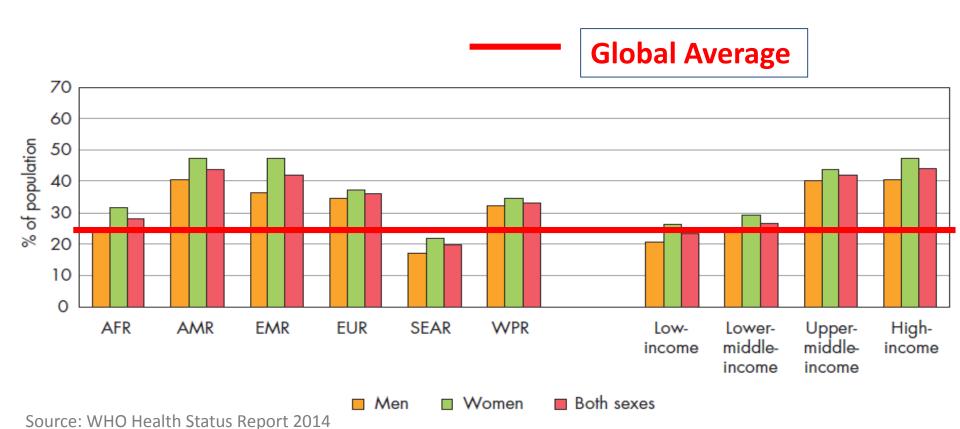








Prevalence of physical inactivity by WHO Region















PEOPLE ARE LESS ACTIVE AS THEY GET OLDER

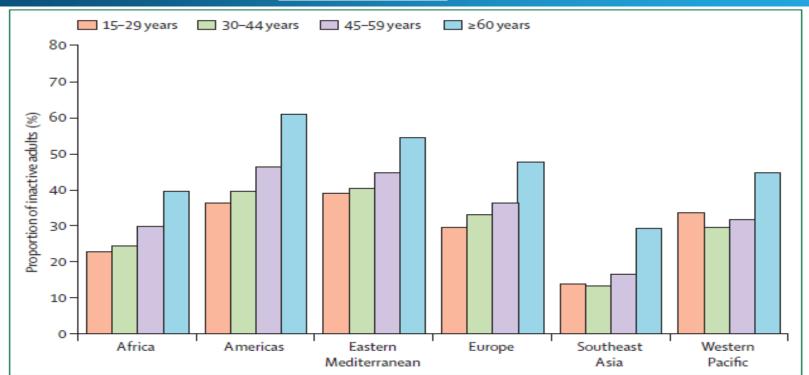


Figure 2: Physical inactivity in age groups by WHO region

Hallal, Andersen, Bull, et al., The Lancet 2012.











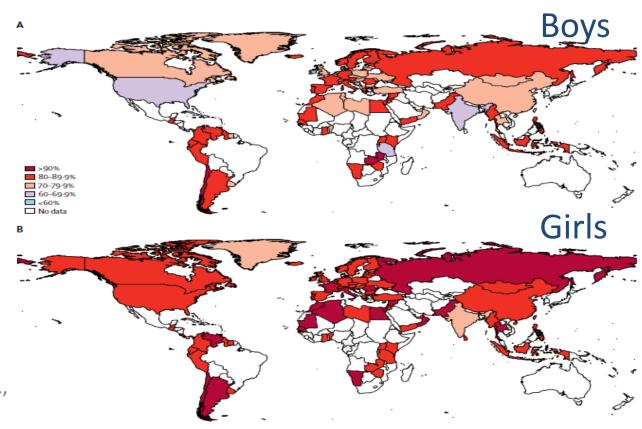


PREVALENCE OF PHYSICAL ACTIVITY: ADOLSCENTS 13-15YRS

80%

Adolescents (13-15yrs) not achieving 60 minutes a day

Hallal P Andersen L. Bull F. et al., The Lancet 2012.









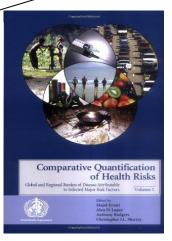


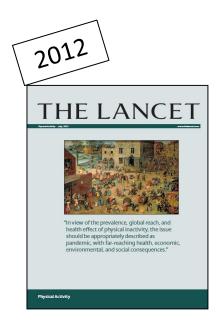


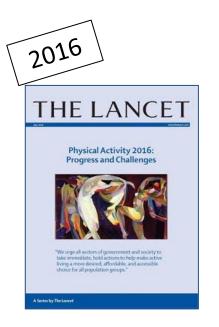


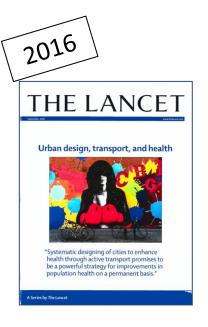
STRONG EVIDENCE: PHYSICAL ACTIVITY AND GLOBAL HEALTH

2004











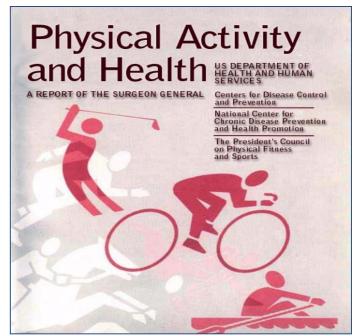




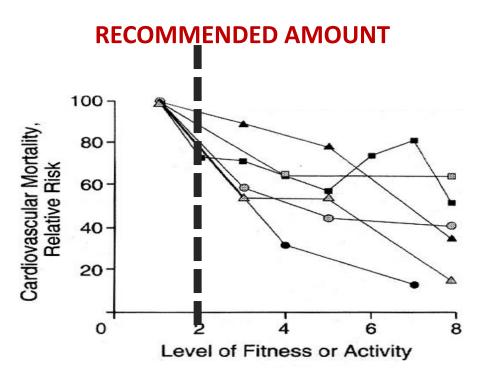








Landmark Report: 1996







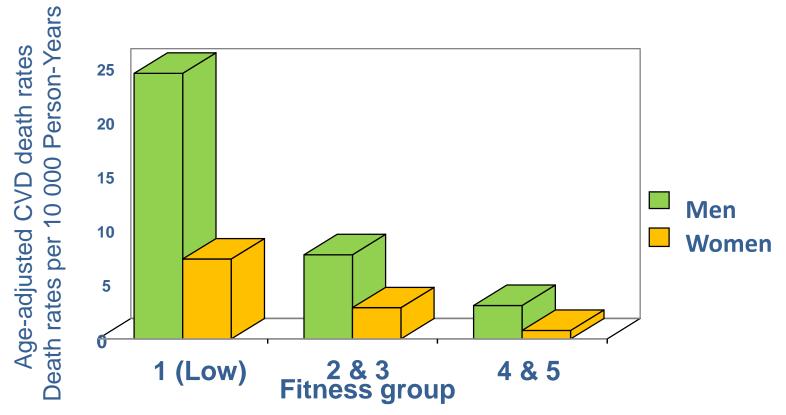








Dallas Cohort: Physical fitness in men and women



Blair et al JAMA 1989:262(17):2395-2401.



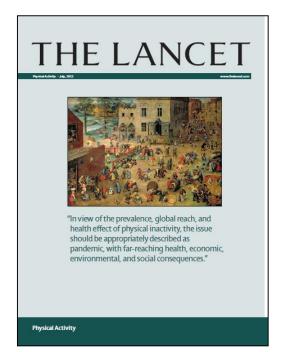






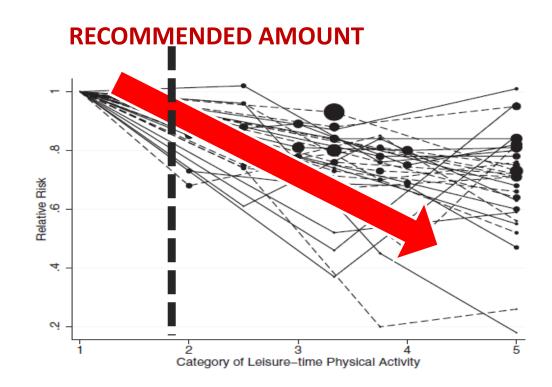






Launch with 2012 Olympics

July 28 2016 – Series II....



Lee et al. The Lancet, 2012





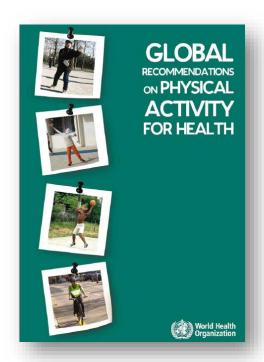








GLOBAL RECOMMENDATIONS: PHYSICAL ACTIVITY (WHO 2010)



Children and youth - aged 5-17

60 Mins a day

Plus muscle strengthening and bone health activities at least 3 times per week.

Adults aged 18-64

At least 150 minutes a week OR an equivalent combination of moderate / Vigorous intensity those two in bouts of at least 10 minutes.

Adults +65 years

At least 150 minutes a week

Plus: activity to enhance balance and prevent falls and musclestrengthening activities and be as physically active as their abilities and conditions allow.













FOUR COMMON DISEASE FOCUS ON FOUR COMMON RISK FACTORS

		Causative risk factors			
	4 by 4	Tobacco use	Unhealthy diets	Physical inactivity	Harmful use of alcohol
Noncommunicable diseases	Heart disease and stroke	√	✓	\checkmark	\checkmark
	Diabetes	√	✓	√	\checkmark
	Cancer	√	√	√	✓
	Chronic lung disease	√			





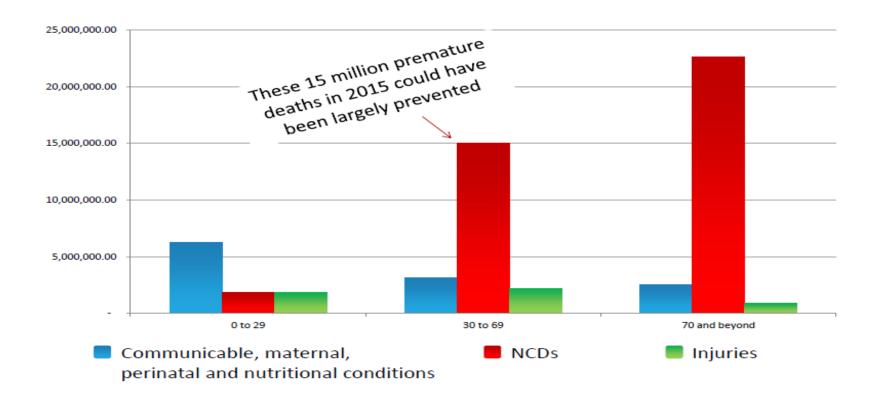








UPDATE ON THE GLOBAL DISEASE BURDEN OF NCDS









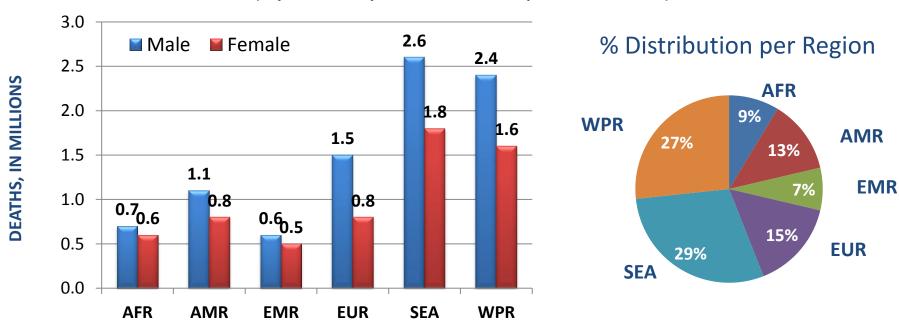






UPDATE ON THE GLOBAL DISEASE BURDEN OF NCDS

Premature deaths from NCDs between the ages of 30 and 69 in 2015 (By Country Income Group, in Millions)



Source: Global Health Estimates 2015: Deaths by Cause, Age, Sex, by Country and by Region, 2000-2015. Geneva, World Health Organization; 2016. http://www.who.int/healthinfo/global_burden_disease/estimates/en/index1.html













COMMITMENTS MADE TO CURB PREMATURE DEATHS FROM NCDS







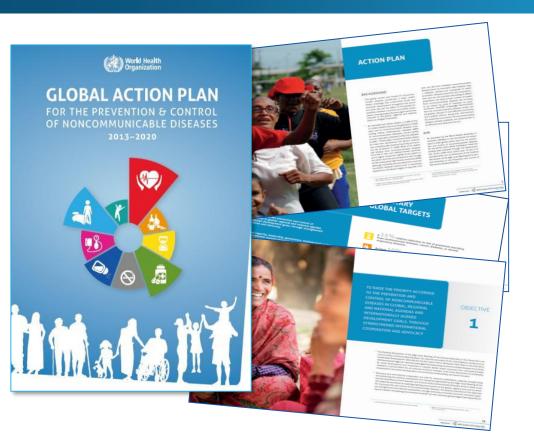








NCD Global Action Plan 2013-2020



Vision:

A world free of the avoidable burden of NCDs

Goal:

25% reduction by 2025













2013: Set of 9 voluntary global NCD targets for 2025

A 25% relative reduction in risk of premature mortality from cardiovascular disease cancer, diabetes or chronic respiratory diseases At least a 10% relative reduction in the harmful use of alcohol

A 10% relative reduction in prevalence of insufficient physical activity A 25% relative reduction in prevalence of raised blood pressure



















A 30% relative reduction in prevalence of current tobacco use

Halt the rise in diabetes and obesity A 30% relative reduction in mean population intake of salt/sodium

An 80% availability
of the affordable
basic technologies
and essential
medicines, incl.
generics, required
to treat NCDs

At least 50% of eligible people receive drug therapy and counselling to prevent heart attacks and strokes





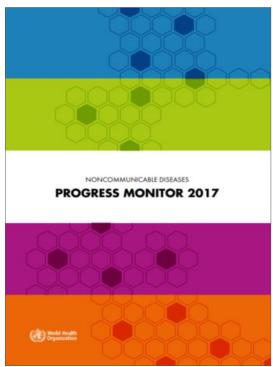








WHO NCD PROGRESS MONITOR 2013, 2015, 2017



Source:

http://www.who.int/nmh/publications/ncd-

世界卫生组织











National NCD targets and indicators

Mortality data

Risk factor surveys

National integrated NCD strategy

Tobacco demand-reduction measures

Harmful use of alcohol reduction measures

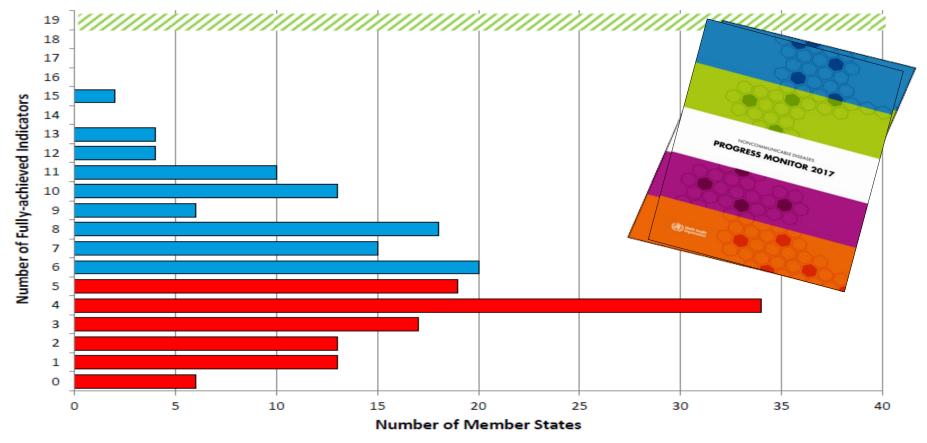
Unhealthy diet reduction measures

Public education on diet and/or physical activity

Guidelines for management of major NCDs

Drug therapy/counselling for high-risk persons

WHO Global Progress Monitor on NCDs (2017): Country-by-country scorecard















TOP PERFORMERS ON PROGRESS BY WHO REGION



EUROPE

UK, Turkey, Bulgaria (13) Finland, Norway (12)

EASTERN-MED

Iran (15) Saudi Arabia (12)

AFRICA

Mauritius (8)
CAR, Ghana, Madagascar,
Seychelles, Swaziland (7)

SOUTH-EAST ASIA

Thailand (12)
Maldives, Nepal, Sri Lanka (8)

WESTERN PACIFIC

Brunei (11) Malaysia, Mongolia, Singapore (10)

*Numbers show "fully achieved" counts.























OUALITY



GENDER



































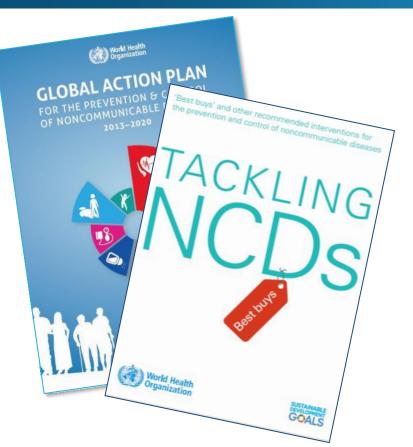








"BEST BUY" INTERVENTIONS FOR NCD PREVENTION AND CONTROL





Best buys: Effective interventions with cost effectiveness analysis ≤ I\$ 100 per DALY averted in LMICs



Good buys: Effective interventions with cost effectiveness analysis \geq I\$ 100 per DALY averted in LMICs



Other recommended effective interventions from WHO guidance (but WHO CHOICE cost effective analysis not available at this time)













"BEST BUY" INTERVENTIONS: PHYSICAL ACTIVITY



Public education campaigns combined with community based education and environmental programmes



Counselling and referral as part of routine primary health care services through the use of brief interventions



Macro level urban design to provide easy, safe, access to diversity of destinations and to public transport

School setting quality PE, adequate facilities and programs

Access to quality public open space and infrastructure to support walking and cycling

Workplace health programs

Promote activity through sport, clubs, programs & events









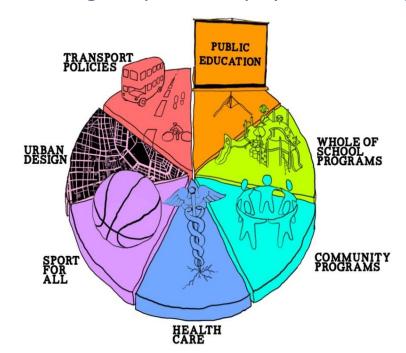




WE KNOW WHAT WORKS



7 settings to promote physical activity



International Society for Physical Activity and Health (ISPAH) - www.ISPAH.org









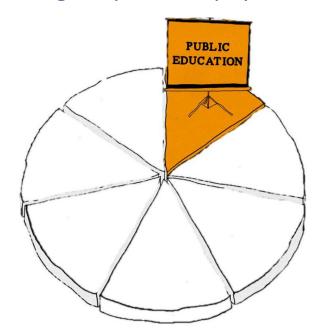




WE KNOW WHAT WORKS



7 settings to promote physical activity



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BEST BUY: PUBLIC EDUCATION CAMPAIGNS

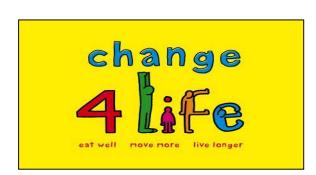


New Zealand



'Agita Sao Paula' Brazil





eat 4 life cook 4 life play 4 life dance 4 life walk 4 life swim 4 life













INCREASE KNOWLEDGE AND SKILLS

























Physical activity for pregnant women

BEST BUY: STRENGTHEN PREVENTION IN PRIMARY HEALTH CARE







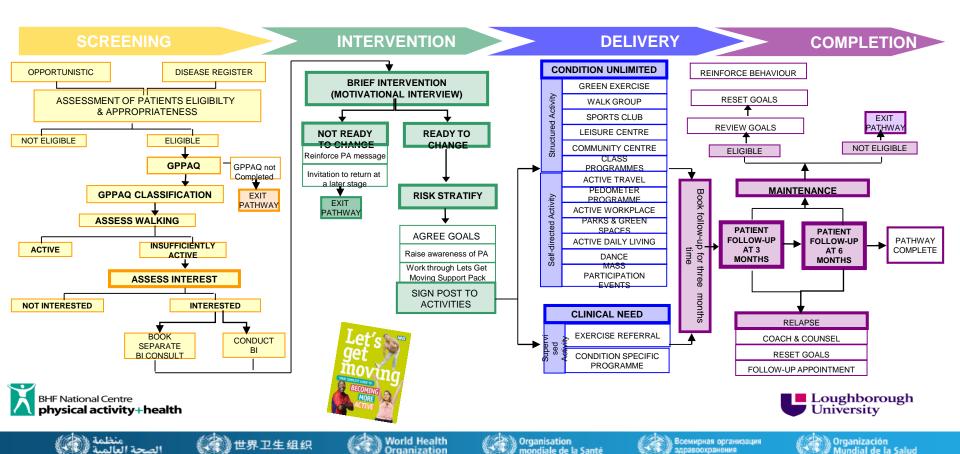








BEST BUY: STRENGTHEN PREVENTION IN PRIMARY HEALTH CARE



mondiale de la Santé

Organization

HEALTHY SETTINGS: AT WORK

















A resource kit for physical activity









HEALTHY SETTINGS: SCHOOLS



Policy + Environments + Programs

- Quality PE for all students
- Active play: recess,
- Active opportunities: before and after school
- Active learning: across the curricula
- Active travel: walk and cycle to school













HEALTHY SETTINGS: QUALITY EDUCATION SDG4







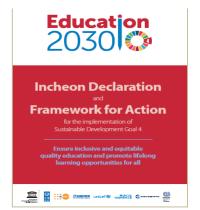




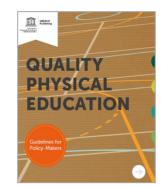
United Nations Educational, Scientific and Cultural Organization

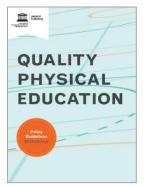




















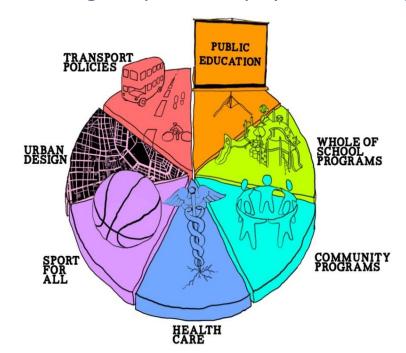




WE KNOW WHAT WORKS



7 settings to promote physical activity



International Society for Physical Activity and Health (ISPAH) - www.ISPAH.org





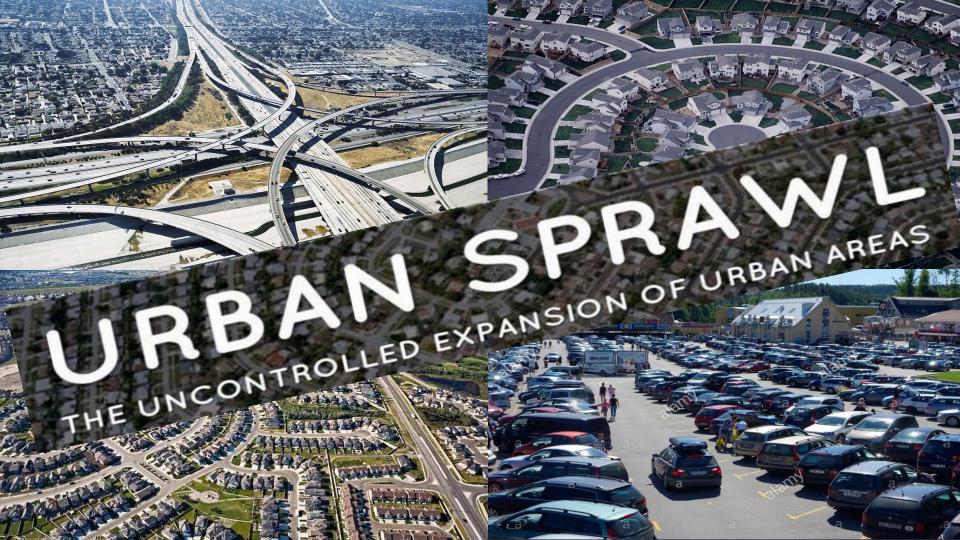




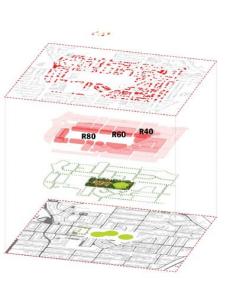


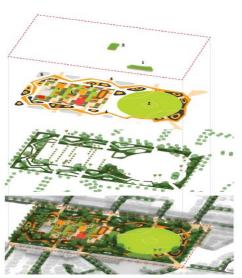






LOCAL CITY AND REGIONAL PLANNING: SHAPES WHERE AND HOW WE LIVE



















HEALTHY CITIES: CREATING AND SUPPORTING ACTIVE LIVING

RECLAIM AND REDESIGN





Source: Thank you to someone on twitter





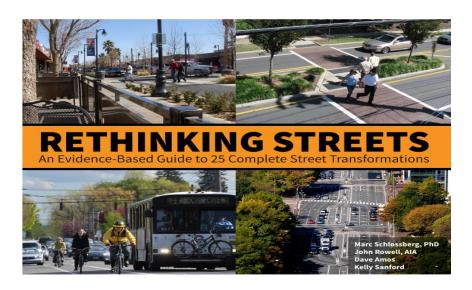








HEALTHY CITIES: CREATING AND SUPPORTING ACTIVE LIVING













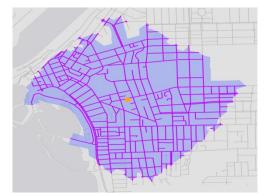




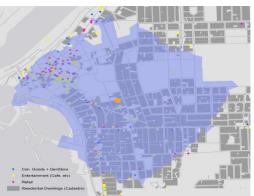
UNDERSTANDING LOCATION AND GEOGRAPHIES IS IMPORTANT



















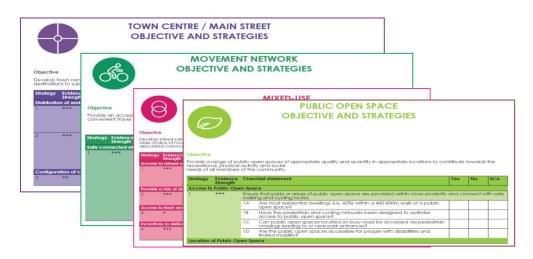






HEALTHY CITIES: CREATING AND SUPPORTING ACTIVE LIVING



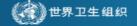






www.healthyactivebydesign.com.au











ABOUT HEALTHY ACTIVE

LATEST NEWS

for active transport

SITE MAP PRIVACY POLICY

W HARD MASTER CHECKLIST



DESIGN FEATURES CASE STUDIES NEWS 8 MEDIA CONTACT ADVOCATING CHANGE

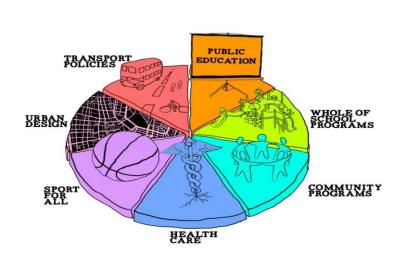
CASE STUDY

Oxford Street Leederville

Join our Mailing List

LOCAL PARTNERSHIP FOR ACTION

VISION + POLICY + PLAN + PEOPLE PUTTING IT ALL TOGETHER



- National Governance
- Adoption & adaption for local implementation
- Multi sector coordination cooperation collaboration
- Scale and sustainability
- Research and Evaluation













MANDATE: 140TH EXECUTIVE BOARD IN JAN 2017

 Requested to develop a new global action by May 2018



To ensure:

- Build on NCD Global NCD Action Plan 2013-2020
- Link with other key strategies and the SDG Agenda 2030
- Provide a road map and guidance to Member States













GLOBAL ACTION PLAN ON PHYSCIAL ACTIVITY 2018-2020

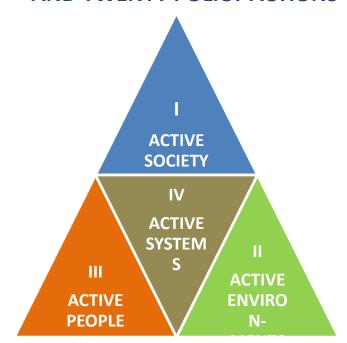
VISION:

More active people for a healthier world

MISION:

Ensure that all people have access to safe and enabling environments and to diverse opportunities to be physically active in their daily lives, as a means of improving individual and community health and contributing to the social, cultural and economic development of all nations.

FOUR STRATEGIC OBJECTIVES AND TWENTY POLICY ACTIONS

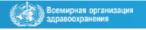






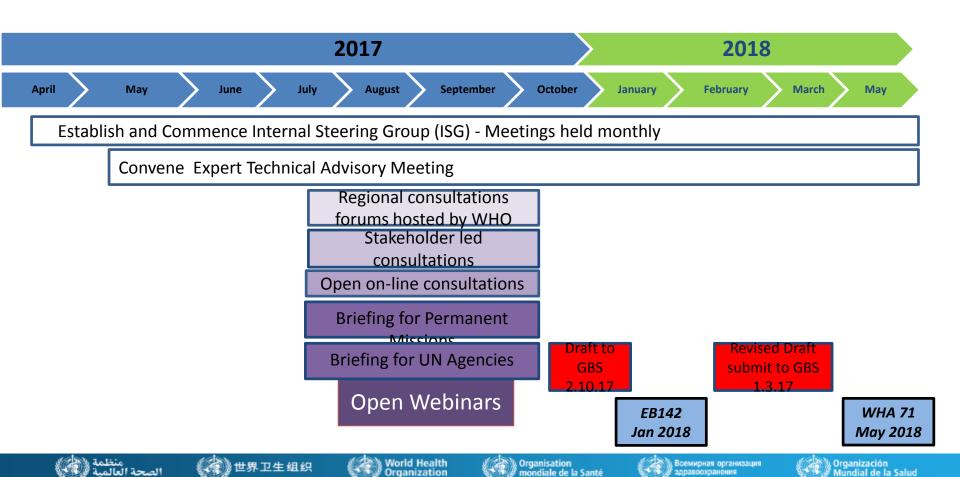








PROCESS FOR DEVELOPMENT AND TIMELINES



WHO HELATH ASSEMBLY: MAY 2018



EXECUTIVE BOARD 142nd session Agenda item 4.2

DRAFT Resolution



WHO Discussion Paper (version dated 3 August 2017)

Draft WHO global action plan on physical activity 2018 - 2030

INTRODUCTION

Background

ussion Paper – Not to be cited or disseminated

nse to Dementia 2017-2023; Global Strategy and Action Plan on Global Strategy for Women's, Children and Adolescents' Health Action Plan to End Preventable Deaths 2014 P. WHO Global Michael Pien to enu Preventable Deaths 2014"; WHO
221; and UN Decade of Action on Nutrition 2016 -2023.

these identified strategies and plans would deliver directly, or opportunities for the population to be more active. Conversely, tion plan on physical activity, could work reciprocally to support mes of the linked strategies. Harneszing these synergies and ferent out related policy agendas is critical for



WHO Global Action Plan on Physical Activity 2018–2030

Draft resolution proposed by Ecuador, France, Indonesia, Israel, Kenya, Luxembourg, Panama, Philippines, Portugal and Thailand

The Executive Board,

Having considered the report on physical activity for health,

RECOMMENDS to the Seventy-first World Health Assembly the adoption of the following resolution

The Seventy-first World Health Assembly

(PP1) Having considered the report on physical activity for health;

(PP2) Concerned by the rapidly growing burden of noncommunicable diseases, mental health disorders and other mental health conditions globally, and its negative impact on health, well-being, quality of life, and socioeconomic development;

(PP3) Acknowledging that increasing physical activity and reducing sedentary behaviour can prevent at least 3.2 million noncommunicable disease-related mortalities globally per year. reduce related disability and morbidity and the financial burden on health systems, and increase the number of healthy life years:

(PP4) Recalling the Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases (2011),3 the outcome document of the high-level meeting of the General Assembly on the comprehensive review and assessment of the progress achieved in the prevention and control of non-communicable diseases (2014).4 the 2030 Agenda for Sustainable Development,5 Health Assembly resolutions WHA51.18 (1998) and WHA53.17 (2000) on the prevention and control of noncommunicable

² Global Status Report on Noncommunicable Diseases 2014. Geneva: World Health Organization; 2014, page 33.

³ United Nations General Assembly resolution 66/2 (2011).

General Assembly resolution 68/300 (2014)

General Assembly resolution 70/1 (2015)

WHO Discussion Paper (December 2017)

Physical activity for health

More active people for a healthier world: draft global action plan on physical activity 2018-2030

Page 1 of 36

Furnan agenda: United Nations conference on housing and

(013-2020. Geneva: World Health Organization; 2013

Jourse Approach to Healthy Ageing: Draft Global Strategy and Health Assembly, Geneva, 23-28 May 2016

m's, Children's and Adolescents' Health (2016-2030): 2015

en 2014-2021, Geneva: World Health Organization; 2015













A glossary of terms is provided at the back of this document

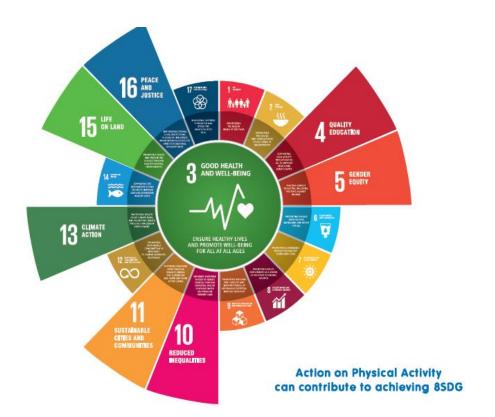
World Health Organization. Global Status Report on Noncommunicable Diseases 2014. Geneva: World Health Organization: 2014 (http://apps.who.int/iris/bitstream/10665/148114/1/9789241564854 eng.pdf?ua=1)

Adults are recommended to do at least 150 minutes of moderate-intensity physical activity per week, or equivalent. WHO Global Guidelines on Physical Activity and Health, 2010

http://www.who.int/dietphysicalactivity/factsheet_recommendations/en

I-Min Lee, Eric J Shiroma, Felipe Lobelo, Pekka Puska, Steven N Blair, Peter T Katzmarzyk, Effect of physical inactivity on major non-communicable diseases worldwide: an analysis of burden of disease and life expectancy. Lancet 2012; 380: 219-

S UN General Assembly, Political Declaration of the High-Level Meeting of the General Assembly on the Prevention and Control of Non-communicable diseases. New York: United Nations, General Assembly, 2011





THANK YOU











