Meeting Report

1. The World Health Organization held its fifth Dialogue with representatives of sports-related industries as a virtual meeting on 1 December 2020.

2. The objectives of the fifth Dialogue was to share updates from WHO as well as the industry on their work related to the promotion of physical activity; to discuss the impact of COVID-19 and identify key recommendations and priority actions that respond to consequences resulting from COVID-19 and that continue to support the implementation of GAPPA. For this Dialogue, participation was limited to core representatives from the Industry Associations.

3. The programme of the Dialogue is provided in Annex 1 and the list of participants in Annex 2.

SESSION I: Introductions

4. Dr Rüdiger Krech, Director, Department of Health Promotion warmly welcomed the delegates and is grateful to host this dialogue again during these difficult times. There is a common agenda to build back better and a need to understand how we can jointly move the physical activity and sports agenda forward. The time is now to identify our roles and responsibilities to build societies that are more active.

5. Dr Fiona Bull, Programme Lead for Physical Activity, Department of Health Promotion, presented the programme and invited delegates to introduce themselves.

SESSION II: Update from WHO

6. WHO provided an overview of activities supporting GAPPA implementation across 2020 and highlighted priorities for 2021. The launch of the **WHO guidelines on physical activity and sedentary behavior** on 26 November was a milestone marked by a large webinar with over 5000 registrations, 2672 attendees from 151 countries. This reaffirms the importance of physical activity and the risks of sedentary behavior. WHO thanked participants of the Dialogue for joining the webinar and their communications to amplify the key messages that were distilled from an enormous amount of new scientific literature. The guidelines gained huge interest and traction since the launch, through publication in a number of scientific journals, podcasts and social media with a simple, but highly
impactful message: Every move counts. Guidelines documents are available on the WHO physical activity webpage.

7. In parallel, and an on-going work program, is the development of WHO ACTIVE technical package of implementation guidance to supplement the policy recommendations of GAPPA in key policy areas. ACTIVE tools aim to support country and community level implementation. One of these is a ‘how to’ implementation guidance on Walking and Cycling, led by WHO in close collaboration with relevant departments across WHO and the wider walking and cycling community, incorporating UN agencies and civil society. The launch is planned for early 2021 and has high relevance given city actions in response to COVID-19 have been focused on safe and sustainable mobility options.

8. Building upon discussions on digital and technology in previous dialogues, other areas of work include mActive, an initiative under the WHO and ITU, as part of Be He@lthy, Be Mobile. This 4-week mobile phone-based (SMS-based messages) walking program, provides support using the best available research and behavior change theory; it is designed to help adults, particularly those less active, to increase regular walking and achieve the WHO recommendations of physical activity.

9. **Strengthening the investment case for physical activity is a new four-strand program of work underway** that includes: 1) updating and expanding the WHO Health Impact Assessment (HEAT) tool for use in LMIC contexts; 2) updating the assessment of ‘best-buys’ for physical activity assessed through the WHO Choosing Cost-Effective Interventions (CHOICE) tool; 3) a review of methods on assessing the total value of investing in sport and physical activity together, in an integrated, systems approach and providing estimates of the total return of investment in physical activity and sports; and 4) assessing current and future financing mechanisms of the physical activity eco-system.

10. WHO reported on progress on the protocols for commencing the pilot phase of the **Global Register of Voluntary contributions**. Final documents are advanced with input and alignment from other WHO departments, such as legal and partnerships. One of the objectives of this Dialogue is to review whether the current list of areas for commitments are still relevant and aligned to priorities given the impact of COVID-19, this will be discussed in Session 3.

11. Additional areas of WHO physical activity unit include progress and plans to produce the first WHO “**Global Status Report on Physical Activity**” which, due to COVID-19, was postponed to launch in 2021.

12. The WHO update concluded noting that the visibility of physical activity, particularly in media, during COVID-19 has been unprecedented in many countries. WHO highlighted the new UN Resolution “**Sport as an enabler of sustainable development**” which was supported at the UN GA on Dec 1 and the forthcoming launch of a new UNDESA advocacy brief “**Recovering Better: Sport for Development and Peace – Reopening, Recovery and Resilience Post-COVID-19**” (launched Dec 15 2020)

**Q/A and Discussion**

13. A follow-up action was proposed with the offer of assistance in communications around the launch of the walking and cycling toolkit, and WHO invited delegates for their feedback on dates and formats of the launch event in Q1/Q2 2021;
14. Participants pointed out their interest in the WHO work on investment case for physical activity and sports and emphasized this is highly relevant and timely within context and planning for building back better.

15. Participants noted that sports industries are doing some similar work assessing the impact of COVID-19 on sports sector and reiterated the importance of looking at impact in a broader term, not only cost-benefit analysis, but taking into consideration the impact of sports on employment and GDP. Understanding the physical activity eco-system as whole is an element of social transformation when looking at COVID-19 recovery packages.

**SESSION III: Update from sports-related industry associations**

**Update from World Federation of the Sporting Goods Industry (WFSGI)**

16. WFSGI conducted monthly surveys with its members (majority in America, Asia and Europe) tracking various trends as they progressed through COVID-19. The results are publicly available and show that the impact on business due to regulatory requirements from local governments dropped to 50%, although this is still a high number. A similar picture is shown with challenges caused by cash flows, with 80% of industry being impacted at the beginning, and this dropping to around 50%. The results highlight a very divided industry with the impact of COVID-19 and restrictions having more of an impact on some than others: larger industries, with larger reserves and access to government loans or money on the markets were reporting less impact.

17. Expectations from industries at the start of COVID-19 showed very concerning trends of member companies expecting a drop in business of up to 50-60%. This has evened off but there is still concern in business forecasting, largely because of the uncertain environment created by COVID-19. Measures taken by companies include consolidation of their production capabilities by focusing on lean production. Results show a large reliance on government loans and also companies making staff redundancies.

18. WFSGI updated on the work and priorities of their Physical Activity Committee to be achieved through collective and individual industry action: 1) raise awareness of the benefits of physical activity and sports 2) increase levels of physical activity and sports participation, especially among children.

19. WFSGI provided a summary of 4 work areas: Advocacy work has focused on the promotion of benefits of physical activity through sports, such as the promotion of the WHO Guidelines and weekly social media posts. WFSGI is also providing input to Commonwealth Secretariat on sports and SGD indicators. In the area of Public Policy, WFSGI supported implementation of Action 1 in Kazan Action Plan in relation to advocacy tool setting out the return of investment in physical activity and sports. In Networking, WFSGI held webinars with UCI and UNESCO and on First Access, WFSGI is producing a global sporting goods industry report, to be launched in January 2021.
Update from International Health, Racquet and Sportsclub Association (IHRSA)

20. IHRSA presented estimates on the impact of COVID-19 showing that up to 25% of all health clubs in the US and 50% in Portugal will close doors permanently by the end of this year. One of the biggest goals for IHRSA over the last 8 months was supporting clubs to stay open and to reopen, noting for many in the sector these are very difficult times. IHRSA has worked to promote the message that health clubs are safe, essential and vital; as governments are taking (sometimes) arbitrary decisions about what services are deemed essential. IHRSA is engaging in advocacy to produce a change in governments, focusing on positive developments and reversing often negative image of health clubs by the media.

21. IHRSA has continued to disseminate and support use in the sector of the Key Considerations document which helps industry with risk assessment and mitigation, as well as running webinars addressing rebound strategies for the fitness industry which have included speakers from WHO.

22. IHRSA reported on research findings that health clubs can help with contact tracing through their membership and sign in/out systems and results from a survey in the US that showed that out of 50 million check-ins, 0.0023% were infected. This provided evidence being used by IHRSA that it is safe to work out at the gym.

23. IHRSA published the COVID ERA Fitness report, looking at consumer behavior and sentiment, with results that highlight the social and community value that health clubs offer.

24. IHRSA has a new interim CEO & President, working on a wide range of new initiatives, such as quality standards and partnerships, including the foundation of the GHFA (Global Health & Fitness Alliance).

Update from EuropeActive

25. EuropeActive provided an update on the launch of their new strategy in early 2020 and their Manifesto endorsed by the sector and providing guidance and focus during COVID-19. European industry collaboration has been very strong during these difficult times with the Declaration for Action as one of the outcomes.

26. EuropeActive noted that there is support from the President of European Parliament and EU institutions have also been very supportive. Health and mental benefits of physical activity are being recognized, and change in messaging can be seen.

27. ThinkActive, a think tank has been launched and produced some research on economic impact in collaboration with Deloitte. The safe active study is to be published imminently, showing that fitness centers have a very flat infection rate and are safe to work out. This study is also used to highlight the lack of capacity of the industry to meet the demand of already active people.

28. Concrete action to get people active and keep them active has been undertaken with initiatives such as the “Be active hour” and the “European Week of Sport” which continued in 2020. The “Active ageing” communities project will be launched in January 2021.

1 https://www.europeactive.eu/sites/europeactive.eu/files/covid19/ThinkActive/SAFE-Active-Study-FINAL_print.pdf
29. EuropeActive is also producing guidelines and standards for safe operation of fitness centers during an infectious outbreak. The impact of COVID-19 on workforce has been substantial and in the interest of building back better, EuropeActive is looking at the role of digital competences and online marketing skills for professional standards.

30. WHO guidelines are being disseminated and EuropeActive would be happy to have a more practical discussion on how to reach even more people as physical activity is clearly part of the recovery. EuropeActive reiterates that COVID-19 has exacerbated inequality and that government support needs to address these inequalities by providing financial support to those who most need it, such as leisure centers and community provisions attended by lower income groups. WHO will be influential in setting standards that will address health inequalities.

Update from International Olympic Committee (IOC)

31. The IOC is impressed by activities from industries which gives an example of how we are getting better in managing this pandemic. There are a lot of parallels with the impact, adaption, and recovery from within the wider sports sector, and the IOC has been working on its 6 pillars of action including hygiene, avoiding the 3C’s, PPE and communication.

Session IV: Building back better

Presentation: Overview of global impact of COVID-19 on physical activity and sport sector, drawing on experiences from different regions and countries; highlighting government and industry responses.

32. Portas Consulting presented results of the WHO commissioned review and collation of evidence on what is known about the impact of COVID-19 on sports and physical activity. The review was structured to look at the impact of COVID-19 on: 1) the demand side – people’s behavior and mindsets; and 2) the supply side - responses and actions from government and the industries.

33. In general, the impact of COVID-19 on levels of physical activity is difficult to conclude due to varied and insufficient data. However, based on what is available, in general there has been a decline in most countries in levels of physical activity since the outset of COVID-19 when opportunities for physical activity and sports participation were restricted. In addition, the impact and changes in behavior were very varied across different population groups and overall they suggest a widening of inequality.

34. Specific types of activities and sports and people’s preferences also changed with those activities relying on facilities going down and activities performed outside, or alone, increasing. A positive shift in mindsets has been observed with mental as well as physical health being drivers for people to stay active.

35. From the supply side, governments and private sector have responded in many different ways, a few examples include campaigns showing safe practice in gyms; and accelerated production and supply of digital programs resulting in the creation of new events and platforms and government funding to stimulate sector.
36. Research showed three main areas of implications to support and enable the recovery of the sports sector: 1) targeting priority groups: children and young people, individuals with chronic conditions, low-income groups women and girls, older adults 2) adapting to changing preferences related to motivations, location and types of activity 3) reimagining the provision of sports and physical activity with levers for action in the areas of technology, facilities, workforce, funding, programs and initiatives.

37. Portas discussed these three implications and their alignment in relation to the proposed areas of commitments currently listed in the draft protocols for the WHO Register.

Discussion – moderated by Portas consulting

38. Participants raised additional topics for consideration by WHO for incorporation in the areas of commitment of the Register, these included: a greater emphasis on mental health; and inclusion of actions to reach low-income groups – particularly for children and youth. There was endorsement and agreement that the current areas listed for the commitments all remained relevant. There was a suggestion to express the areas of commitments as broad ‘categories’ to allow and invite responses from all sizes and types of private sector organizations, and also from other non state actors such as other non-profit clubs and facilities, and organizations. Participants reiterated the request for WHO to launch the pilot phase of the Register as soon as possible to ensure positive response action from industry.

39. The primary focus of the remaining discussion focused on the impact of COVID-19 on the eco-system of sport and physical activity and identifying priority mitigation actions in 2021, for implementation both individually and collectively.

40. The suggestions arising included: the urgency for actions to increase the visibility and importance of the contribution of sport and physical activity to health, society and the economy during COVID-19 response and recovery plans and financing programs; the need for more coordinated and collective actions to influence policy decisions relating to and affecting the sports and physical activity sector; and the benefits of, and opportunity for greater collaboration on a ‘common narrative’ to support advocacy and communications. The discussion highlighted the importance of WHO voice and its contribution was emphasized to provide independence and authenticity to this agenda.

41. Discussion of potential themes or populations to focus advocacy efforts were: the “lost generation” which referred to the potential large and long-term impact of the reduction in participation levels among children and young people; older adults as they were already a priority population due to their higher vulnerability to the impact of COVID-19 restrictions on mental and physical activity, and the substantial health gains possible from promoting increased physical activity combined with substantial reduction in burden and costs to the health care systems.

42. The timing of actions to increase visibility of sport and physical activity was identified as critical; the group recommended any action needed to be within Q1 of 2021 to inform national, and international policy decisions.

43. The discussion also identified a need for a common framework to support advancing the field of assessing the economic and social impact of sport and physical activity; for there to be more joined
up work as much is currently done in silos; and for sharing where possible of data to support analyses to strengthen the approaches and outputs.

44. WHO noted the call for a common framework supporting assessment of health and economic benefits and provided a preliminary outline of some of the probably process steps required as well as potential opportunities available to convene and support such work programs. The discussion emphasized the importance role of WHO in ensuring validity and neutrality through for example, independent expert review committees.

45. Other issues raised in the discussion on impact an constraints in the sports sector in responding to COVID-19 included: the constraints related to copyright laws on music which currently impedes SMEs charitable organisations developing content; the potential to create incentives/ disincentives (i.e. taxes) for industry to encourage positive action; the need for mechanisms to support physical activity and sports that have been curtailed by COVID in their resumption; and the need for more supporting evidence to influence prompt re-opening of clubs and facilities as essential services.

SESSION V: Closing remarks and next steps

46. WHO highlighted the imminent launch of a new UNDESA advocacy brief on “Recovering Better: Sport for Development and Peace – Reopening, Recovery and Resilience Post-COVID-19.” [this was launched on Dec 15 2020]

47. WHO acknowledged the important issues raised by this Dialogue, noting the need to raise the profile of physical activity yet it has substantial health benefits and relevance within the COVID-19 responses. WHO acknowledged the suggestions and recommendations and noted the need to act, while choosing correctly and carefully the way forward.

48. WHO thanked delegates for bringing insights, experience, passion and deliberation to this Dialogue. WHO also extended their thanks to Portas Consulting for their work and support with the Dialogue.

Next Steps

49. Action areas concluded from this meeting:

   1. Meeting report to be circulated for comment, finalized and posted on WHO website by WHO;
   2. WHO to finalize the areas of commitments for the Register and set launch date for pilot phase in early 2021;
   3. Delegates to reflect on the discussions and provide any further suggestions to WHO by email;
   4. WHO to review the recommendations arising from the Dialogue and the noted urgency and conduct internal assessment of the potential responses, including answering what output is needed, produced by whom, how and by when?; WHO will update delegates of the decisions in early Jan 2021;
   5. WHO to convene potential follow up meeting(s) to forward actions on the suggestions arising in Jan 2021 as required;
   6. The 6th Dialogue will be planned for first half of 2021; WHO will circulate possible options in Jan 2021.
Annex 1


1 December 2020
Virtual meeting

PROGRAMME

SESSION I 16:00 – 16:10
Introductions
1. Welcome remarks (5 mins)
2. Tour de table (5 mins)

SESSION II 16:20 – 16:30
Update from WHO
3. Update on GAPPA and 2021 priorities (10min)
4. Q&A (10min)

SESSION III 16:30 – 17:15
Update from sports-related industry associations
1. Update from industry on activities, impact of COVID-19 and response (35min)
   a) EuropeActive
   b) International Health, Racquet and Sportsclub Association (IHRSA)
   c) World Federation of the Sporting Goods Industry (WFSGI)
   d) International Olympic Committee (IOC)
2. Q&A (10min)

-----------------------------------------------BREAK 15 minutes---------------------------------------------------------------

SESSION IV 17:30 – 19:00
Building back better
(Presenter: Portas Consulting- 20min)
2. Discussion and recommended priority actions (70 mins)

SESSION V 19:00 – 19:15
Closing remarks and next steps (15min)
Summary of meeting and next steps
Annex 2

LIST OF PARTICIPANTS

Representatives of sports-related industries

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