WHO GUIDELINES ON PHYSICAL ACTIVITY AND SEDENTARY BEHAVIOUR

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WHO HQ
BENEFITS ACROSS THE LIFE COURSE

• all-cause mortality, cardiovascular disease mortality
• site-specific cancers, hypertension, type-2 diabetes
• mental health, cognitive health and 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
EVERY MOVE COUNTS
Moderate intensity:
- Brisk walking
- Household chores
- Games and sport
- Riding a bike

Vigorous intensity:
- Jogging or running
- Swimming fast
- Competitive team spots
- Martial arts

Muscle strengthening:
- Carrying heavy shopping
- Yoga/Pilates/Tai chi
- Lifting weights
- Push-ups/sit-ups
- Heavy gardening

Sedentary: Any waking behaviour with very low energy expenditure while sitting, reclining, or lying: desk-based office work, driving a car, and screen time
FOR ALL ADULTS AND OLDER ADULTS

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

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

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.
For all children and adolescents

At least 60 minutes a day

Moderate- to vigorous-intensity, mostly 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.
SEDENTARY BEHAVIOUR – HEALTH IMPACT

Unfavourable for:

**Children:**
- Adiposity
- Cardiometabolic health
- Fitness
- Behavioural conduct
- Sleep

**Adults**
- All-cause, CVD and cancer mortality
- Incidence CVD, cancer and T2D
SEDENTARY BEHAVIOUR

LIMIT
the amount of time spent being sedentary

REPLACE
with more physical activity of any intensity (including light intensity).

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with more physical activity of any intensity (including light intensity).
KEY SUBPOPULATIONS

Cancer survivors
- all-cause mortality, cancer-specific mortality, and risk of cancer recurrence or second primary cancer

Hypertension
- cardiovascular disease mortality, disease progression, physical function, health-related quality of life

Type-2 diabetes
- cardiovascular disease mortality and disease progression

HIV
- physical fitness and mental health, and does not adversely affect disease progression (CD4 count and viral load) or body composition.
Women who, before pregnancy, habitually engaged in vigorous-intensity aerobic activity, or who were physically active, can continue these activities during pregnancy and the postpartum period.

**Maternal health**
- decreased risk of pre-eclampsia
- gestational hypertension
- gestational diabetes
- excessive gestational weight gain
- delivery complications and
- postpartum depression

**Fetal health**
- fewer newborn complications
- no adverse effects on birthweight
- no increase in risk of stillbirth
LIFE COURSE APPROACH

**PHYSICAL ACTIVITY**

For better health, infants under 1 year should have each day:

- At least 30 minutes

For children 1-2 years:

- At least 180 minutes

For better health, children 3-4 years:

- At least 180 minutes

- At least 60 minutes moderate to vigorous

**SEDENTARY SCREEN TIME**

- No more than 0 minutes

**GOOD QUALITY SLEEP**

- 14-17 hours (0-3 months of age)
- 12-16 hours (4-11 months of age)
- 11-14 hours (1 year of age)
- 10-13 hours

**GUIDELINES ON PHYSICAL ACTIVITY, SEDENTARY BEHAVIOUR AND SLEEP FOR CHILDREN UNDER 5 YEARS OF AGE**

Regional Meeting on Physical Activity
22-23 November 2021
National guidelines can underpin physical activity policy
### NATIONAL PHYSICAL ACTIVITY GUIDELINES BY REGION

#### RESPONSE OF MEMBER STATES

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<th>Reported PA Guidelines</th>
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<th>EMR</th>
<th>EUR</th>
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Grand Total: 47 100% 35 100% 21 100% 53 100% 11 100% 27 100% 194 100%
ENDORSE OR ADOPT?

• Endorsement
  — Translation and endorsement of WHO guidelines by policy makers.
  — Does not include addition of any local data, e.g. on PA prevalence or barriers.

• Adoption
  — Involves stakeholders from the start, who review and endorse guidelines.
  — Work on tailoring of images/messages to local situation