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The Physical Activity Movement

COMES OF AGE

FROM PHYSICAL ACTIVITY GUIDELINES TO A NATIONAL ACTIVITY PLAN

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As was summarized in the preceding two articles, an extensive body of knowledge links higher levels of physical activity to lower risks for chronic diseases and premature death (Physical Activity Guidelines Advisory Committee, 2008; U.S. Department of Health and Human Services [USDHHS], 1996). That knowledge prompted the development of the first federally approved *Physical Activity Guidelines for Americans*, released in 2008 (USDHHS, 2008). Even before the guidelines were released, however, research had documented that most Americans did not comply with the guideline recommendations that adults should engage in 150 or more minutes of moderate-intensity physical activity per week and that children and youth should engage in 60 minutes of moderate-to-vigorous physical activity per day (Troiano et al., 2008). It was in this context that the decision was made to create new guidelines that would complement a comprehensive strategic plan for increasing the physical activity levels of the U.S. population.

The plan became known as the U.S. National Physical Activity Plan (NPAP; Coordinating Committee, National Physical Activity Plan, 2010), and this article addresses three issues related to its development, implementation, and future. First, the article summarizes the procedures that were followed in developing the NPAP and provides examples of the strategies and tactics that comprise the core content of the plan. Second, it provides an overview of the current status of the plan and the NPAP Alliance, an organization founded to support the plan. Third, it comments on steps that will be needed to establish the plan as an effective and sustainable contributor to the long-term goal of substantially increasing the percentage of Americans who meet the physical activity guidelines for Americans.

Development of the NPAP

Efforts to develop a national physical activity plan in the United States were initiated as the 2008 *Physical Activity Guidelines for Americans* were being developed. An exhaustive description of the process that was followed to develop the NPAP is available in the first two articles of this feature. However, two components of the development process are relevant to this article. The first is that the NPAP was developed as a private-public collaborative partnership. Many national physical activity plans are produced and subsequently implemented exclusively by a country's national or federal government (Bornstein, Pate, & Pratt, 2009). In an effort to ensure the long-term success of the NPAP, the decision was made to involve key governmental agencies (e.g., Centers for Disease Control and Prevention [CDC] and U.S. Department of Agriculture) and key stakeholders from the physical activity and public health arena (e.g., American Heart Association [AHA], SHAPE America – Society of Health and Physical Educators, and American Cancer Society) as “organizational partners” (Table 1). The primary rationale behind this decision was that organizational partners, such as SHAPE America, would add significant value to the development of the NPAP. For example, representation from SHAPE America allowed for specific content expertise in areas such as physical education, schools and school systems, and parks and recreation when identifying the NPAP's recommendations. Equally important when

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considering the private–public collaborative partnership structure was the key role that organizational partners could play in implementing the NPAP’s recommendations.

The second component worth noting here is the sector-based arrangement of the recommendations of the NPAP. Successful policy, systems, and environmental changes are often best accomplished through collaboration across multiple societal sectors (Clark, 2010; Doyle, 2009). Therefore, the NPAP is organized around eight societal sectors (Table 2). The NPAP’s Education sector will

likely be of greatest interest to certain organization members working in that space, although it is important to consider other sectors where there is the potential for collaboration or synergy.

Content Examples from the NPAP

The NPAP aims to create a national culture that supports physically active lifestyles. As evident in its vision statement, the ultimate purpose of the NPAP is to improve health, prevent disease and disability, and enhance quality of life through increasing the physical activity levels of Americans (Coordinating Committee, NPAP, 2010). In total, the NPAP is composed of 52 *strategies* and 215 *tactics*, each based on evidence for its efficacy for increasing physical activity. Each strategy is a “big-picture” recommendation, with a series of action-oriented tactics.

Table 1.
Current NPAP Alliance Organizational Partners

- Academy of Nutrition and Dietetics
- Active Living Research
- American Academy of Pediatrics
- American Association of Cardiovascular and Pulmonary Rehabilitation
- American Cancer Society
- American College of Sports Medicine
- American Council on Exercise
- American Heart Association
- American Physical Therapy Association
- American Medical Association
- Arthritis Foundation
- Bell Institute
- National Academy of Sports Medicine
- National Athletic Trainers’ Association
- National Strength and Conditioning Association
- National Physical Activity Society
- Road Runners Club of America
- SHAPE America
- U.S. Department of Agriculture
- U.S. Centers for Disease Control and Prevention

Table 2.
Eight Societal Sectors Around Which the NPAP Is Organized

- Business and Industry
- Education
- Healthcare
- Mass Media
- Parks, Recreation, Fitness, and Sports
- Public Health
- Transportation, Land Use, and Community Design
- Volunteer and Nonprofit



Strategy 1 of the Education Sector, for example, is to

Provide access to and opportunities for high-quality, comprehensive physical activity programs, anchored by physical education, in Pre-kindergarten through grade 12 educational settings. Ensure that the programs are physically active, inclusive, safe, and developmentally and culturally appropriate. (http://physicalactivityplan.org/education_st1.php)

One of the tactics for this strategy is to “Advocate for increased federal funding of programs such as the Carol White Physical Education for Progress (PEP) grant program” (http://physicalactivityplan.org/education_st1.php). Additionally, the Education Sector’s third strategy is to “Develop partnerships with other sectors for the purpose of linking youth with physical activity opportunities in schools and communities” with the tactic to “Develop and institute local policies and joint use agreements that facilitate shared use of physical activity facilities, such as school gyms and community recreation centers and programming” (http://physicalactivityplan.org/education_st3.php).

Within the Business and Industry Sector, Strategy 3 is to “Educate business and industry leaders regarding their role as positive agents of change to promote physical activity and healthy lifestyles within the workplace and throughout society, giving particular consideration to efforts targeting low-resource populations” (http://physicalactivityplan.org/business_st3.php). In an effort to advance this strategy, another of the NPAP’s partner organizations, the National Coalition for Promoting Physical Activity (NCPA), created “The

CEO Pledge.” Currently, almost 200 CEOs from a wide range of organizations, including Johnson & Johnson, SHAPE America, the AHA, and Clif Bar, have taken the pledge, which states:

For the betterment of my company, our employees, their families, and our Country, I pledge to improve employee health and wellness by providing opportunities and resources for physical activity before, during or after the workday, and to enhance my own health and wellness by engaging in regular physical activity. (<http://www.ncppa.org/ceo-pledge%E2%84%A0-0>)

Additionally, individuals working within this sector have worked to address issues regarding the implementation of the Affordable Care Act and the use of financial incentives within wellness programs tied to healthcare plans.

Current Status of the NPAP

The NPAP was launched in May 2010. Since then, progress has been made in several key areas, including the establishment of a nonprofit organization to oversee the long-term growth and development of the NPAP; evaluation of awareness and impact of the NPAP; development of key strategic partnerships to advance the NPAP; and documentation of how the NPAP is being used as a template for developing physical activity plans within states, municipalities, and health-based nonprofits.

During the development of the NPAP, the organizational partners functioned as an informal coalition that worked to

“I pledge to improve employee health and wellness by providing opportunities and resources for physical activity before, during or after the workday.”

develop and launch a national physical activity plan for the United States. After the NPAP was launched, those who were instrumental in developing the plan recognized that formalizing the informal coalition would help ensure the long-term success of the NPAP. Therefore, a 501(c) (3) entity, the NPAP Alliance, was legally established. Currently, more than 20 individuals serve on the Alliance’s Board of Directors, representing the Alliance’s organizational partners and other experts. The board meets regularly to oversee the implementation of the plan. The current vice-president of the Alliance’s board is SHAPE America CEO Paul Roetert. Standing subcommittees of the Alliance also meet



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Table 3.
Summary of Products from Evaluation of the NPAP

Product	Type	Open Access (Y/N)	Where to Access
All Health is Local: State and Local Articulation of the U.S. National Physical Activity Plan	Peer-reviewed publication	Y	<i>Journal of Public Health Management and Practice</i>
Factors Related to Partner Involvement in Development of the U.S. National Physical Activity Plan	Peer-reviewed publication	Y	<i>Journal of Public Health Management and Practice</i>
Initial Dissemination and Use of the United States National Physical Activity Plan by Public Health Practitioners	Peer-reviewed publication	N	<i>American Journal of Preventive Medicine</i>
Sector Activities and Lessons Learned around Initial Implementation of the United States National Physical Activity Plan	Peer-reviewed publication (in press)	N	<i>Journal of Physical Activity & Health</i>
Tracking and Measuring Physical Activity Policy. In <i>Implementing Physical Activity Strategies</i>	Book Chapter	N	Human Kinetics
Business and Industry Sector: 2011 Accomplishments	Practice Brief	Y	http://www.unc.edu/~kevenson/_2011_NPAP_B&IReport.pdf
Education Sector: 2011 Accomplishments	Practice Brief	Y	http://www.unc.edu/~kevenson/_2011_NPAP_EducationReport.pdf
Health Care Sector: 2011 Accomplishments	Practice Brief	Y	http://www.unc.edu/~kevenson/_2011_NPAP_HealthCareReport.pdf
NSPAPPH Survey on Initial Evaluation of the National Physical Activity Plan	Practice Brief	Y	http://www.unc.edu/~kevenson/_NSPAPPH_2011Survey.pdf
Parks, Recreation, Fitness, and Sports Sector: 2011 Accomplishments	Practice Brief	Y	http://www.unc.edu/~kevenson/_2011_NPAP_PRFSReport.pdf
Perspectives from State Public Health Practitioners on the United States National Physical Activity Plan	Practice Brief	Y	http://www.unc.edu/~kevenson/_2012_NPAP_StatePractitioners.pdf
Public Health Sector: 2011 Accomplishments	Practice Brief	Y	http://www.unc.edu/~kevenson/_2011_NPAP_PublicHealthReport.pdf
Summary of Initial Results: National Society of Physical Activity Practitioners in Public Health Survey	Practice Brief	Y	http://www.unc.edu/~kevenson/_NSPAPPH_SurveySummary.pdf
Transportation, Land Use, and Community Design Sector: 2011 Accomplishments	Practice Brief	Y	http://www.unc.edu/~kevenson/_2011_NPAP_TransportationReport.pdf

regularly to address the ongoing challenges associated with increasing the physical activity levels of Americans through implementing the NPAP's recommendations.

As part of the process of developing the NPAP, a review of national plans from around the world was conducted. The purpose of the review was to document the processes other nations followed in developing their national plans, in order to inform the development of the U.S. national plan. The review revealed that few nations had conducted evaluations of their physical activity plans. Therefore, coalition leaders decided to plan and conduct a formal evaluation of the NPAP. Results of the initial review have been published in peer-reviewed journals and open-access websites. Table 3 provides an overview of the evaluation products.

Since the launch of the NPAP, the Alliance has entered into two important strategic partnerships. The first, with the NCPPA, tasks the NCPPA with leading efforts to implement the elements of the NPAP that focus on federal legislative policy and advocacy. The second is a relationship with three agencies of the USDHHS — the CDC; the President's Council on Fitness, Sports, and Nutrition; and the Office of Disease Prevention and Health Promotion. The agreement states that USDHHS and the NPAP Alliance will work collaboratively to more effectively communicate with the American public and policy makers about the importance of physical activity.

Very few states and municipalities have stand-alone physical activity plans. Instead, physical activity recommendations are often

included within chronic-disease prevention plans and/or obesity prevention plans. Given that many of the recommendations in the NPAP focus on state or local changes, the architects of the NPAP hoped it would spawn the development of state and local plans. The state of West Virginia and the city of San Antonio, TX, have served as models for how the content of the NPAP, and the process used to develop it, can be utilized effectively in developing a state and municipal physical activity plan, respectively (Elliott, Jones, & Bulger, 2014; Esparza, Velasquez, & Zaharoff, 2014). In addition to the development of physical activity plans specific to a geographic region, developers of the NPAP hope it would spawn plans that are population-specific. For example, given the positive effects of physical activity on many diseases, they hoped it would lead to plans specific to people with certain diseases or disabling conditions. Recognizing this, the Arthritis Foundation used the NPAP as a platform for developing an arthritis-specific physical activity plan (Waterman & White, 2014).

While the NPAP has been successful in many areas, it has faced and continues to face significant challenges in two areas. The first is the implementation of the NPAP's recommendations at the state and local levels. The actions taken by West Virginia and San Antonio represent progress; however, substantially more action by states and local governments is needed if the NPAP is to succeed in increasing physical activity. Part of the challenge lies in the comprehensive nature of the NPAP. With its 52 strategies and 215 tactics, state and local leaders who are trying to determine which strategies and tactics should be prioritized for implementation can end up feeling overwhelmed and skeptical. As will be discussed in the next section, members of SHAPE America and other organizations supporting physical activity can be instrumental in prioritizing and implementing the NPAP at the state and local levels.

The second significant challenge is to identify where and how the NPAP's strategies and tactics are being, or have been, successfully implemented. The NPAP Alliance has received or collected documentation of the advancement of some of the strategies and tactics. However, it is likely that thousands of individuals and organizations across the country are working hard to increase population levels of physical activity, yet do not share anything about their efforts. Many of these individuals undoubtedly are SHAPE America members. These individuals and organizations may or may not be aware that they are advancing a particular recommendation

from the NPAP, which makes documenting their efforts even more challenging. In order to identify where and how the NPAP is being implemented, the NPAP Alliance has initiated an "NPAP Champions" program. This program will regularly recognize individuals or organizations that are working to increase physical activity in their community by advancing the NPAP's strategies and tactics. While the NPAP Champions program takes an initial step toward identifying evidence that the plan is being implemented, significantly more work in this area is still required.

Future of the NPAP

The NPAP ultimately will be successful as the result of steady progress in three key areas: (1) ensuring that the strategies and tactics of the NPAP represent the current state of physical activity science and practice; (2) continuing to improve communications with policy makers and the general public about the myriad of positive benefits attributable to increased physical activity; and (3) encouraging and supporting individuals, organizations, and municipalities to implement the NPAP's strategies and tactics in their communities, large and small.

In order to ensure that the content of the NPAP accurately reflects the latest in physical activity research and practice, a decision was made early on that the NPAP should be updated on a five-year cycle. Given that the NPAP was launched in May 2010, an updated version will be scheduled for release in May 2015. In order to accomplish the goal of reviewing, updating, and releasing an updated NPAP, a national conference will be held in Washington, DC, in February 2015. This open meeting will bring together individuals with diverse backgrounds in physical activity research and practice. These individuals will likely be charged with developing new, refining existing, and/or prioritizing the NPAP's strategies and tactics. SHAPE America members played a crucial role in this process during the NPAP's initial development and are encouraged to participate in the 2015 open meeting. The conference will also represent an opportunity to recognize NPAP Champions and highlight additional examples of how the NPAP has been implemented across the country.


As previously mentioned, the NPAP Alliance is working closely with the USDHHS to improve how the importance of physical activity is communicated to policy makers and the general public. The work with USDHHS will continue, and it will include the development and dissemination of research and practice-based documents. In addition to its collaboration with USDHHS, the NPAP Alliance has formed a standing subcommittee for communications. Members of this subcommittee include researchers and practitioners with expertise in health communication, physical activity messaging, mass media, health marketing, and government relations. This committee will advise the Alliance's Board of Directors on developing and executing effective strategies for communicating with policy makers and the general public.

By design, the NPAP Alliance is a coalition of organizations from within and outside of government. This deliberate design reflects the reality that government alone cannot solve the problem of physical inactivity. Implementing the NPAP will take leadership from the NPAP's organizational partners, like SHAPE America. The NPAP needs SHAPE America members and those of other relevant organizations to become advocates for and champions of the NPAP. You need not ask for permission. If you have a particular practice or policy you are advocating for, find the NPAP strategy or tactic that aligns most with your area of interest and

By design, the NPAP Alliance is a coalition of organizations from within and outside of government. This deliberate design reflects the reality that government alone cannot solve the problem of physical inactivity.

use it as the evidence base for championing your cause. If there is no particular policy or practice you are championing, use the NPAP's framework to develop a physical activity plan for your school, school district, town, city, or state. Finally, being that the NPAP is composed of eight societal sectors and is intended to facilitate collaboration across those sectors, please use the NPAP as an opportunity to explore and foster relationships across sectors.

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