

# A National Physical Activity Plan for the United States

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In October 2008, the U.S. Department of Health and Human Services released the first comprehensive federal Physical Activity Guidelines for Americans.<sup>1</sup> This landmark event represented a major advance in the ongoing effort to establish promotion of physical activity as one of the high priority public health goals of the 21st Century. The Physical Activity Guidelines provide the public with science-based guidance regarding the types and amounts of physical activity needed to maintain health and prevent disease. However, as important as they are, the guidelines *do not* lay out the changes that will have to be made in our society if most Americans are to meet the guidelines. That outcome requires a national strategic planning process aimed at identifying policies, practices, and initiatives that will have the collective effect of increasing population levels of physical activity. This editorial describes such a process, one that is currently underway and which is expected to produce, by early 2010, a National Physical Activity Plan for the United States.

National strategic plans have been developed in the U.S. for a number of health issues, including arthritis, heart disease, and tobacco control. A number of countries have developed national plans to promote physical activity promotion.<sup>2,3</sup> But, to date, the U.S. has not established a comprehensive physical activity plan, which can be defined as a comprehensive set of strategies, including recommended policies, practices, and initiatives, aimed at increasing physical activity at the population level. An effort to develop such a plan in the U.S. was launched in 2007 and has progressed through the following key steps:

1. With a modest level of financial support from the U.S. Centers for Disease Control and Prevention, an administrative entity was established at the University of South Carolina's Prevention Research Center.
2. An interim coordinating committee was formed, and that group sought organizational partnerships from national non-profit health organizations.
3. A permanent Coordinating Committee, comprised of representatives from the organizational partners, was established.
4. During the Coordinating Committee's first in-person meeting it was decided that:

- a. The planning process should be designed around 8 societal sectors, including public health; healthcare; education; mass media; business and industry; not-for-profit organizations; recreation, fitness, and sports; and transportation and community planning
  - b. To ensure consistency with the available scientific evidence, expert-authored "white papers" on promoting physical activity in and through each of the 8 sectors should be commissioned
  - c. To facilitate broad input into the planning process, a National Physical Activity Plan conference should be conducted in Washington, DC
  - d. The Plan should aim to initiate a social movement that results in a dramatic increase in physical activity throughout American society
  - e. Implementation of the Plan should be a major focus of the planning process from the beginning
  - f. Provisions should be made for ongoing evaluation of the Plan
  - g. Non-traditional partners and partners who reflect the diversity of the American population should be aggressively sought
  - h. The Plan should be informed by other countries' experiences with national physical activity plans.
5. A website was created ([www.physicalactivityplan.org](http://www.physicalactivityplan.org)) to facilitate communication about the Plan.
  6. A memorandum of understanding was signed with the National Coalition for Promoting Physical Activity (NCPA), which agreed to assume responsibility for coordinating the ongoing effort to implement the Plan.
  7. Working groups for each of the 8 sectors were formed to provide recommendations regarding the content of the Plan.
  8. A 2-day National Physical Activity Plan Conference was conducted in Washington, DC; during that conference the sector working groups generated their initial recommendations regarding the content of the Plan.

