

## Improving Surveillance

### Physical Activity in the United States

In the United States a high proportion of people do not meet present guidelines for physical activity.<sup>1</sup> This lack of physical activity leads to a substantial population health burden. Physical activity happens in many ways with varying intensities, settings, and rationale.<sup>2</sup> There are national surveillance systems for physical activity led by the Centers for Disease Control and Prevention and other relevant government agencies such as the U.S. Department of Labor, the U.S. Department of Transportation, and the U.S. Census Bureau.<sup>1</sup> However, physical activity surveillance is a complex process that has many components. Physical activity behavior can be influenced by a range of factors such as personal, physical, social, environmental, institutional, community, and societal.<sup>2</sup> Surveillance systems ideally should capture personal-level behavior, systems change, programming, environmental supports, policy change, and equity impact.

In children and youth ages 2 to 18 years, the effects of physical activity are well documented since physical activity and physical fitness are linked to health status. There is a rising concern for young people with high levels of sedentary behavior and the association it may have with negative health outcomes.

In health care settings, physical activity has been demonstrated to reduce risks of chronic medical conditions and as an effective treatment for many diseases. Because of this, there is an opportunity for surveillance of physical activity that health care providers and the health care system can use to promote physical activity to patients.

Another chance for physical activity surveillance of adults is in the workplace. This can help evaluate workplace culture, policies, and program designs that can stimulate physical activity and active commuting to and from work.

There is also opportunity for surveillance and change behavior in the community with environment design, policies, and programs. These can safely facilitate improvement in public transportation, and active transport such as walking, biking, and rolling.

The Physical Activity and Health Innovation Collaborative (PA IC) is an ad hoc activity affiliated with the Roundtable on Obesity Solutions at the National Academies of Sciences, Engineering, and Medicine. The PA IC brings together individuals from various disciplines and sectors—such as academia, government, nonprofit organizations, foundations, health care, and the private sector—to discuss strategies to promote active lifestyles among Americans. Consistent with this goal, the PA IC convened a panel of experts in April 2017 to catalyze development of a more robust physical activity surveillance system in the U.S. This work led to a [paper](#) and subsequent follow-up [report](#) that outlined subsequent action steps to make this happen. The group of experts identified gaps in the present physical activity surveillance and presented 22 strategies to improve national physical activity surveillance.<sup>1</sup> These strategies support physical activity in children, health care, workplaces, and the community. The committee also recommended actions to support implementation of the strategies. Such actions would lead to stronger systems that monitor physical activity behavior and would assess policies, programs and elements of infrastructure that would increase physical activity in the United States.<sup>2</sup> The National Physical Activity Plan of the Physical Activity Alliance is continuing projects to address the action steps and make them happen.



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## References

1. Implementing Strategies to Enhance Public Health Surveillance of Physical Activity in the United States. Washington, DC: National Academies of Sciences, Engineering, and Medicine; 2019.
2. Pate R, Berrigan D, Buchner D, Carlson S, Dunton G, Fulton J, Sanchez E, Troiano R, Whitehead J, Whitsel L. Actions to Improve Physical Activity Surveillance in the United States. *NAM Perspectives*. 2018;8.