Comments from Canada

Canada would like to thank the World Health Organization (WHO) Secretariat for circulating a draft WHO global action plan on physical activity 2018 – 2030 for discussion. Canada appreciates this opportunity to provide these written comments through this web-based consultation, further to our participation at the PAHO Regional Consultation for Member States, held from September 14 – 15, 2017 in Washington, D.C.

General Remarks

Canada is pleased with the content and scope of the draft Global Action Plan. In particular, we are supportive of the action plan’s foundation in multi-sectoral action, as well as the structuring of the plan around four strategic objectives. Canada is strongly in support of the need to embrace policy and program actions to increase physical activity across domains such as work, active transport, and leisure. In addition, Canada and its provincial/territorial partners are pursuing similar objectives as part of the ongoing development of a pan-Canadian physical activity framework.

Canada wishes to extend compliments to the Secretariat for providing a coordinated and multi-faceted feedback process. We have confidence that this process will strengthen the current draft and we look forward to supporting the WHO in the further development of the action plan moving forward.

Equity

We are pleased to see that the action plan includes equity considerations throughout, recognizing that opportunities, barriers and risk factors around physical activity vary between diverse groups -- and that responses need to be adjusted accordingly. To strengthen this focus, the plan could more clearly acknowledge that these equity issues tend to be grounded in underlying structural determinants of health, which themselves can hinder participation in physical activity.

For example, while early childhood education and care settings are recognized as a potential site for positive intervention, barriers to accessing quality services due to high costs, limited availability, or limited hours of operation, could be explicitly recognized. Similarly, barriers to recreational physical activity and the use of active transport include crime and safety as well as air pollution. The plan would be strengthened by including in the discussion/recommendations greater consideration of underlying determinants of health that can reinforce inequities in physical activity.

Sex and gender

Paragraph 15 underscores the gender gap in physical activity; Canada suggests that WHO includes sources for this key statement. Given this gap, we believe that the action plan should pay much greater attention to gender, by using a sex- and gender-based analysis framework. We recommend that the plan goes beyond highlighting gender as a key determinant impacting on PA levels, as it does in para 24 and
through the guiding principle on equity, in para 47; it should shed light on the key reasons for this gap between the two sexes; propose actions that seek to close it; and, where appropriate, encourage epidemiological reporting by Member States be disaggregated by sex. In addition, Canada would like to see the inclusion of actions for both Member States and partners related to the leadership of women and girls in sports and recreation.

**Indigenous Peoples**

As described in WHO publications on Indigenous health as well the Lancet series on Indigenous health, Indigenous populations often have different and higher rates of NCDs compared to that of the general population. In Canada, self-reported obesity rates were 25.7% among Aboriginal adults versus 16.9% among non-Aboriginal adults. Because of these inequalities, there is a duty to tailor interventions and consider the needs of the Indigenous populations of the world in order to reduce inequities in health status.

Canada is currently in consultations with Indigenous groups in Canada to ensure their perspectives and needs are represented in the development of a pan-Canadian physical activity framework. The WHO may wish to consider engagement with relevant international Indigenous groups and to provide opportunities within the action plan to represent the Indigenous perspective, including additional proposed actions.

**Sleep and sedentary activity**

Canada sees opportunities to expand on the content of Strategic Objective I: Active Society. In particular, there is little mention of sedentary behaviours throughout the document, and no mention of the importance of sleep. Canada strongly supports the inclusion of sedentary behaviours and sleep as we consider the integration of physical activity with these two factors a key point. The Canadian 24 hour movement guidelines for children and youth were recently published and integrate physical activity, sedentary behaviour and sleep to address the whole day.

**Developmentally appropriate programs and activities**

The plan recognizes the role that sport and active recreation have in contributing to increasing physical activity, as well as the various means to leverage the popularity of sport to get people active. Canada suggests that when referencing quality age appropriate activities or programs (for example, paragraph 27), the plan also reference ‘developmentally appropriate’ programs and activities. This would bring the action plan in line with a sport for life model, which advocates for activities that are appropriate for the development level of the participant, not necessarily their age which is particularly true for children and youth.

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**Fiscal measures**

Canada notes that proposed actions in paragraph 163 emphasize the earmarking of taxes to fund physical activity programs, while paragraph 165 suggests partners advocate for the earmarking of such taxes. Member States have a wide and varied range of constitutional, legal and budgetary frameworks that may or may not allow for earmarked taxes. Member States maintain sovereignty over allocation of resources and budgeting. Recognizing these vastly different systems among Member States, the emphasis in these paragraphs should instead be about the need for investment in physical activity interventions, rather than the specific funding source of such investment.

**Importance of physical activity in children as it relates to behaviours in adulthood**

Canada suggests that the action plan could be strengthened by explicitly recognizing the important relationship between physical activity rates in children and youth with higher rates of physical activity in adulthood. There is considerable evidence that supports this link,\(^4\),\(^5\),\(^6\),\(^7\),\(^8\) strengthening the rationale for early intervention. In addition, the action plan could explore the link between physical activity and improved academic performance among children.

**Proposed actions**

Regarding the strategic objectives and the proposed actions for the Secretariat, in order to achieve the SDGs, WHO is increasing its meaningful engagement with others in the UN system and beyond. For this reason, Canada suggests that in the “Proposed actions for the Secretariat” section, under each of the four proposed stated objectives, the action plan could describe what course of action the Secretariat will take to engage with other relevant actors at the international level.

In addition, regarding the proposed actions for international and national partners, Canada suggests that the action plan could better clarify the role for international organizations, such as those in the UN family. Canada’s view is that the action plan should not only aspire to multi-sectoral collaboration, it should embody it by ensuring that other UN organizations named in the plan have agreed to participate in the implementation of this agenda and see themselves and their role in it. We would be specifically interested in the roles that UN Women and UNDP could play in implementation given their role in promoting gender equity, leadership among women and girls, and attainment of the SDGs.

\(^4\) E.g. Dohle and Wansink. Fit in 50 years: participation in high school sports best predicts one's physical activity after Age 70. BMC Public Health 2013, 13:1100


Implementation and supporting resources

Canada suggests that the Secretariat consider the needs of the end users when developing resources to accompany the action plan. Canada encourages the WHO to create resources and communications materials that are user-friendly and provide practical advice or best practices related to engagement with sectors beyond health. If such resources are attractive, users across sectors may be encouraged to promote these materials in workplaces and community spaces which will encourage uptake and dissemination.

In addition, Canada requests clarification on what the Secretariat will be developing to support the implementation of the action plan. Paragraph 51 refers to a “technical package,” paragraph 57 refers to an “operational guide,” paragraphs 63, 75, 85, 114, 119, 129, 135, and 139 refer to an “operational manual,” while paragraphs 98 and 121 refer to a “toolkit.” While we understand that a Global Physical Activity Toolkit will be developed at a later time, as described during the Secretariat hosted webinars, we are requesting clarification on whether additional resources are being referenced in the action plan.

Indicators

The document contains proposed indicators for various sections of the action plan. Canada notes that some indicators are unclear and could lead to varying interpretations by Member States. Other indicators would be difficult to report on as surveillance systems do not typically capture data to report on them.

Canada suggests that rather than a list indicators for each section, the action plan contain a small set of broad indicators upfront that would address, for example, whether Member States have surveillance systems in place to monitor and measure rates of physical inactivity over time (measured and/or self-reported data), and whether Member States have a framework or policy to facilitate multisectoral action on physical activity. An indicator could also address the actions assigned to WHO and to national/international partners.

Text-based Comments

In addition to the comments above, Canada proposes additional editorial comments to the draft action plan as found in Appendix A.
Appendix A

Specific Comments on Text

Paragraph 4: Canada suggests that there is an opportunity to strengthen the description of the global NCD burden related to physical inactivity, including specific mention of illness, disease, reduced quality of life, and economic impacts. Canada suggests the inclusion of additional data related to this in this paragraph⁹.

Paragraph 9: Canada suggests the following change for accuracy.

The 2030 Agenda for Sustainable Development, and the commitment for its 17 goals made in [DEL: 2016] [ADD: 2015] by world leaders...

Paragraph 16: Canada notes the absence of data from the AFRO region.

Paragraph 18: Given that women do the majority of unpaid work in the global economy, Canada suggests that the plan not only explicitly recognize physical activity taking place at workplace settings, but also as part of home-life.

Paragraph 27: This paragraph references the “need to secure and improve provision for toddlers and children under 5 years of age, ...” but does not specify what this provision is for. Canada requests this sentence be clarified.

Paragraph 30: Canada requests the inclusion of a reference for the statement on Canada in this paragraph.

Paragraph 45: Canada suggests the following language to be more inclusive.

A world where all countries provide the enabling environments and opportunities for [ADD: people] [DEL: all citizens] to be physically active and through this enhance the social, cultural, economic development and wellbeing of nations

Paragraph 47d: Canada suggests the following change to align with international human right instruments, in particular article 12 of the International Covenant on Economic, Social and Cultural Rights, which enshrines the right of everyone to the highest attainable standard of physical and mental health:

Human Rights-based approach: Health is and should be embraced as a universal right, an essential resource for everyday living, a shared social goal and a political priority for all countries. Policies, plans, programmes, interventions and actions on promotion of physical activity should be designed with the objective of progressively improving [ADD: the right of everyone to] the enjoyment of [DEL: all people to] the [DEL: right to] [ADD: highest attainable standard of physical and mental] health.

Paragraph 47e: Canada suggests including the **names** of the two policy actions that have been assessed by the WHO CHOICE model in this paragraph.

Paragraph 47h: Canada suggests the following change to ensure that the definition of Universal health coverage is in line with the principles set out in the UN General Assembly (UNGA) resolution 67/81, paragraph 10,\(^{10}\) the WHO definition for universal health coverage:

**Universal health coverage**: There needs to be equitable access to a full range of safe, effective, quality and [DEL: affordable] [ADD: essential] health [DELETE: and social care] services that [DEL: incorporate physical activity and] [ADD: include] NCD prevention [ADD: and control, including and physical activity] measures [ADD: , where] needed [ADD: ,] for all people [ADD: , without discrimination.] [DEL: regardless of age, gender, socioeconomic status, race and ethnicity.]

Paragraph 50: Canada suggests a minor grammatical correction.

This strategic objective aims to create societies with positive attitudes and values towards everyone being active, according to ability and across the life course, through increasing community-wide knowledge, understanding and literacy among public and professionals alike, on the multiple benefits of [DEL: physically] [ADD: physical] activity and many pathways to being active through walking, cycling, active recreation, sport, dance and play.

Paragraph 52: Canada suggests a minor grammatical correction.

The objective is to create societies with positive attitudes and values towards everyone being active, according to ability and across the life course. This will be achieved through increasing community-wide knowledge, understanding and literacy among public and professionals alike, on the multiple benefits of [DEL: physically] [ADD: physical] activity and many pathways to being active through walking, cycling, active recreation, sport, dance and play.

Paragraphs 54 – 61 and paragraphs 74 – 77bis (Proposed Actions 1.1 and 1.4): Canada notes that Proposed Action 1.1 and Proposed Action 1.4 speak to different issues, but as they are currently drafted, overlap in their proposed actions. Canada suggests that the wording of Proposed Action 1.1 be tightened to focus specifically on communication campaigns related to health benefits whereas the focus of Proposed Action 1.4 could be on community contributions to achieving the SDGs. Therefore, Canada suggests the following changes, including the move of paragraphs 55 and 61 to Proposed Action 1.4.

**Proposed Action 1.1 (page 16)**: Implement best practice communication campaigns to increase awareness, knowledge, understanding of physical activity and the multiple [ADD: health] benefits of being regularly active, according to ability [DEL: , for health and society]

55. [MOVE to PROPOSED ACTION 1.4: Conduct campaigns to increase community wide knowledge of the multiple benefits of physical activity for health, environment, sustainable development and society, optimizing the links and synergies and resourcing with new and existing related campaigns such as Breathe Free, Vision Zero\(^2\), and New Urban Agenda\(^3\)]

61. [MOVE to PROPOSED ACTION 1.4: Support and mobilise partnerships between health and other sectors around annual global promotion days such as “Move for Health Day” conducted since 2002 World Health Day\(^7\), Car Free Day]

Proposed Action 1.4 (page 18): [ADD: In contributing to the achievement of the 2030 Sustainable Development Goals, including SDG 3, SDG 11, and SDG 15, conduct] [DEL: Conduct] community wide awareness of the contribution that promoting walking and cycling have to cleaner air, sustainable development, mitigation of the impact of climate change, local economies, reducing inequalities, and sense of community and well-being [DEL: and is an enabler to achieving the 2030 Sustainable Development Goals including SDG 3, SDG 11 and SDG 15]

Proposed Action 1.2 (page 17): Canada requests the addition of “dance” as an activity in keeping with its inclusion in Strategic Objective I and III.

Implement mass participation initiatives in public spaces to engage whole of community and provide access to enjoyable, affordable, culturally appropriate and social experiences of being physically active through walking, cycling, active recreation, sports [ADD: , dance] and play.

Paragraphs 66 and 67: Canada suggests the following paragraph in place of paragraphs 66 and 67 in order to consolidate similar concepts into one paragraph. Canada also suggests using the word “foster” rather than “mandate” in order to consider the context in which each Member State operates and has jurisdiction over.

[ADD: Strengthen and foster] [DEL: Mandate] the integration of teaching and learning on physical activity into the formal curriculum [ADD: , as well as in the professional development] of all medical [ADD: , health,] and allied health [ADD: professionals] [DEL: professional qualifications] as part of training on prevention and management of noncommunicable diseases, mental health and promotion of wellbeing and health equity.

[DEL: Strengthen the provision of professional development and education of current medical and health professionals on physical activity as part of training on prevention and management of noncommunicable diseases, mental health and promotion of wellbeing and health equity]

Paragraph 69: This sentence is somewhat unclear and could be edited to improve clarity.

Paragraph 70, 71: The WHO may wish to consider whether there is an appropriate international partner to carry out the task of developing training materials, and whether the WHO’s role is to provide technical input to these plans, or whether the roles should be reversed.

Paragraph 80: “Level of service” is an ambiguous term in this sentence. An alternative could be “quality, safety, access and route network”.
Paragraph 95: “Mandate and enforce” is not practical terminology given the multiple authorities, jurisdictions and stakeholders involved in the development of urban planning, land use and spatial policy guidelines. Canada suggests more collaborative language be used to better reflect the nature of these policy communities who can be natural allies in helping to create health promoting environments. Canada suggests “Promote and facilitate collaboration” is more appropriate in this context.

[DEL: Mandate and enforce] [ADD: Promote and facilitate collaboration on the development of]
urban planning, land use and spatial policy guidelines, at all levels of government, that require provision and enhancement of equitable access to quality, safe public and green open spaces, recreational areas and sports facilities

Paragraphs 100, 101, 102: In many federated countries such as Canada, responsibility for education and childcare lies at the sub-national jurisdictional level.

Paragraphs 109, 111: Canada notes the frequent use of the term “young people” in the draft document. The term “adolescent” is also used in paragraphs 15 and 47. Canada suggests these terms be included in the glossary to improve consistency or explain why different terms are used in each instance.

Paragraph 116: Canada suggests adding the term “infrastructure” to this sentence to reflect the potential for improvements to recreational spaces, as well as child-friendly active transportation networks.

Partner and support the development and implementation of programs and policies [ADD: and infrastructure] to improve and increase the opportunities for physical activity in early years

Paragraphs 117 and 118: Canada suggests that the contents of paragraphs 117 and 118 could be streamlined and combined into one paragraph. In addition, Canada suggests that wording be modified to recognize various divisions of jurisdictional responsibilities within the country contexts of various Member States. For example, instead of “Integrate into health policy...,” Canada suggests “According to national context, make efforts to integrate into health policy...”

Paragraph 127: It appears a word is missing at the end of the sentence. Suggest “contexts”, or “manner”.

Paragraph 133: This paragraph assumes marginalized and vulnerable populations have lower physical activity levels when certain groups may have higher usage of public transportation and active transportation, or have more physically demanding jobs. An assessment of physical activity levels and barriers to activity faced by these populations may lead to improved or tailored approaches where possible.
Paragraph 135: Suggest replacing “increase” with “improve”.

Paragraphs 147 and 148: As both of these paragraphs relate to guidelines for physical activity among children, Canada suggests they be combined. A suggested paragraph could be:

**Develop and disseminate global guidelines for physical activity, diverse age-appropriate play, and sedentary behaviours, including guidance on policy and practice in pre-primary and other settings for children under 5 years and young people.**

Paragraph 152bis: Canada suggests the inclusion of natural experiments in the proposed actions in order to provide more specificity to the research agenda.

*ADD: Highlight the importance and encourage the study of natural experiments related to the effects of physical activity policy and program actions.*

Paragraph 167: The paragraph as written suggests that Member States advocate themselves on the role of physical activity in national economic and development priorities. Canada suggests alternate wording to better reflect the need for multisectoral collaboration within government to better align health with other government agendas.

Develop and implement [DEL: an advocacy strategy] [ADD: an engagement strategy] to increase understanding of the role of increasing physical activity as a direct contributor and an enabler to achieve the SDGs and contribute to national economic and development priorities.

Glossary

Canada suggests the following deletion to allow for a broader definition of mass-reach communication.

**Mass-reach communication:** communication interventions that target large audiences through television and radio broadcasts, print media (e.g., newspaper), out-of-home placements (e.g., billboards, movie theatres, point-of-sale), and digital media to change knowledge, beliefs, attitudes, and behaviours [DEL: affecting tobacco use].

Canada suggests amendments to the definition proposed for universal health coverage to be more aligned with SDG 3.8 and UNGA 67/81:

**Universal Health Coverage/care:** means that all people [DEL: and communities can use] [ADD: have access, without discrimination, to nationally determined sets of] the promotive, preventive, curative, rehabilitative and palliative [ADD: basic] health services [DEL: they need,] [ADD: needed, and that these services are] of sufficient quality to be effective, while also ensuring that the use of these services does not expose the user to financial hardship.