



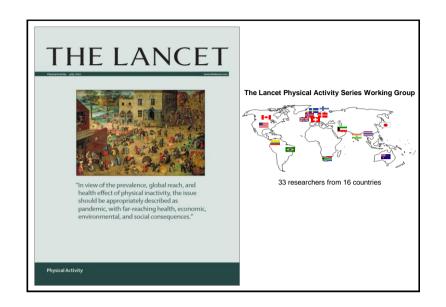
Institute of Social and Preventive Medicine

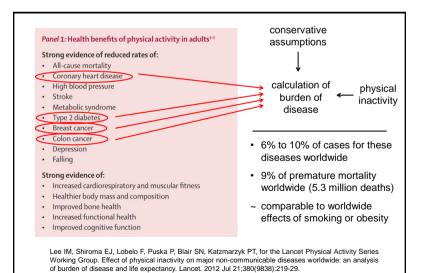
How can our societies support physical activity and how can physical activity support our societies?

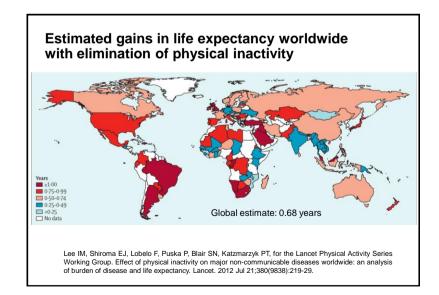
Brian Martin, MD MPH

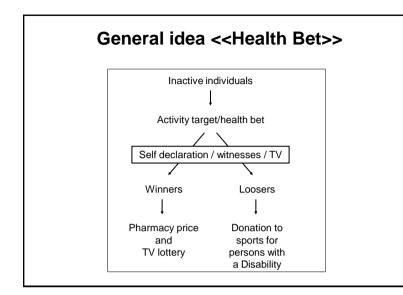
Head Physical Activity and Health Unit, Institute of Social and Preventive Medicine Chairman Agita Mundo, the Global Physical Activity Promotion Network

Dubai's Third Forum for Physical Activity, 12.-13.03.2013, Dubai











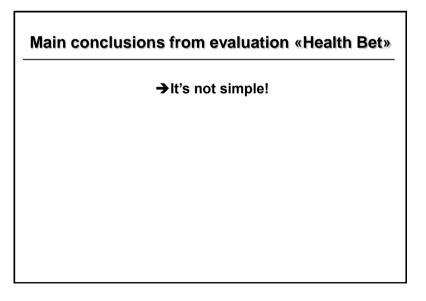
Participation «Health Bet» in September 2003

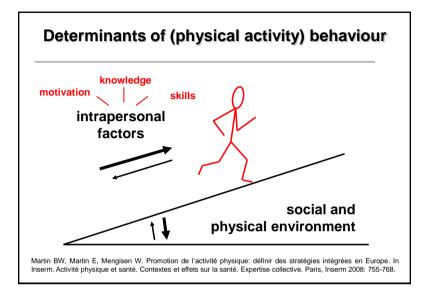
- TV health programme «Gesundheit Sprechstunde» with 300'000-500'000 spectators
- Health magazine «Gesundheit Sprechstunde» with circulation 80'000
- · Article in in pharmacy magazine
- 170 (-> 180) participating pharmacies/dispensing chemists

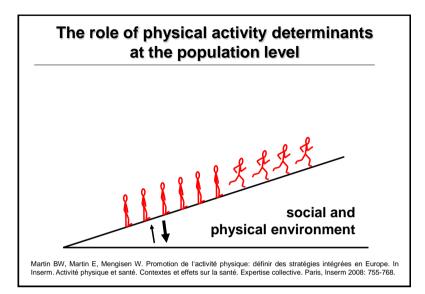
→ 35 bets accepted out of 55 offered

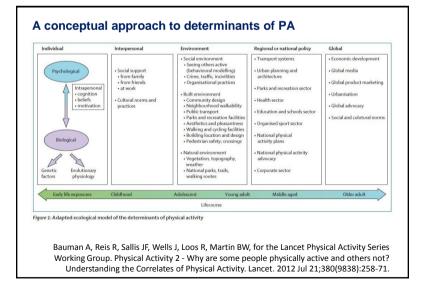
→ 8 winners

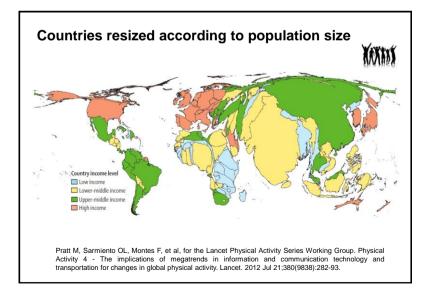
Dössegger A, Nützi C, Kienle G, Ackermann B, Stutz S, Martin BW. Experiences in nationwide recruiting for the Allez Hop Physical Activity Programme. . Schweiz Z Sportmed Sporttraumatol 2009: 57 (2); 61-64

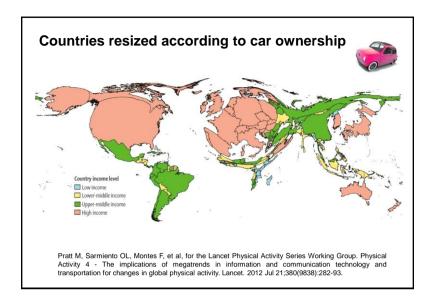


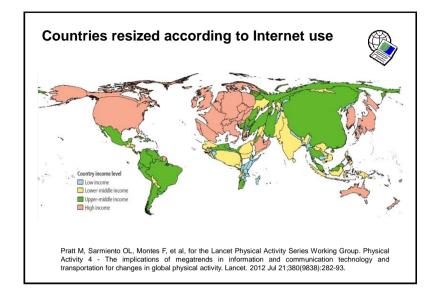


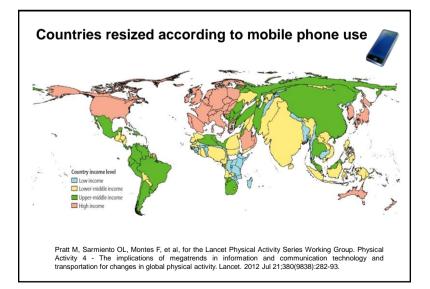






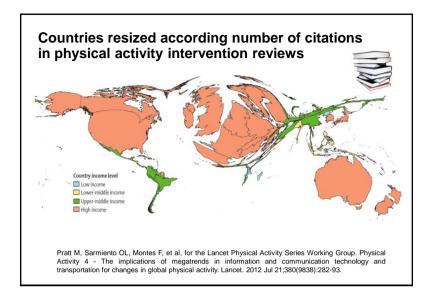


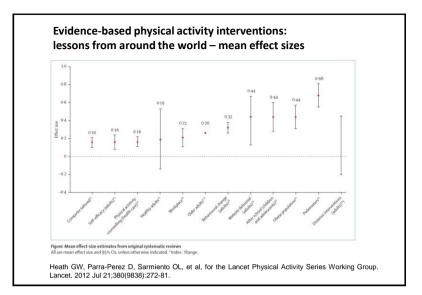




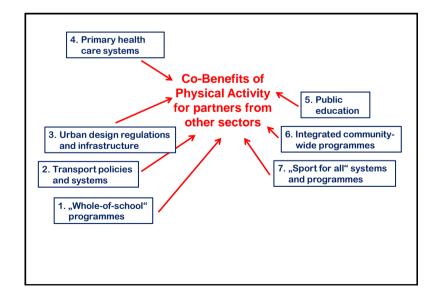
 Key messages Non-community 	"The implications of megatrends – key messages"
	low income or middle income countries
 Physical inactivi accounting for The challenges several importa shape people's l Information an 	 " On the basis of a review of publications about physical activity interventions, we modelled the effects of megatrends in internet access, mobile phone access, and car ownership on physical activity."
	wn enormousiy during the past decade; these technologies have the set physical activity
Trends in transp improved and v negatively and 0 On the basis of modelled the ef ownership on p The direct and p middle-income planned physic The greatest po of supportive p	 The direct and potentiating effects of mobile phone technology on physical activity in middle-income and upper-income countries are similar in size to the mean effects of planned physical activity interventions in community and clinical settings. The greatest potential () might be in the creation of supportive policies in sectors outside health (transportation, urban planning, and communication)"
have been done	 grismatch between where the studies of physical activity interventions and where the potential lies for population-level effects that will truly alth (low-income and middle-income countries)

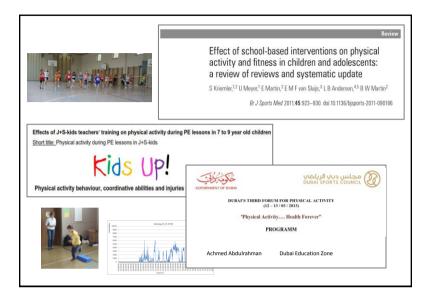
Fratt w, Sammeroux Montes r, et al., of the Lancet Physical Activity Series Working Group. Physical Activity 4 - The implications of megaternds in information and communication technology and transportation for changes in global physical activity. Lancet. 2012 Jul 21;380(9838):282-93.

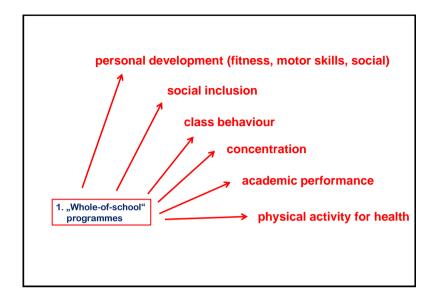


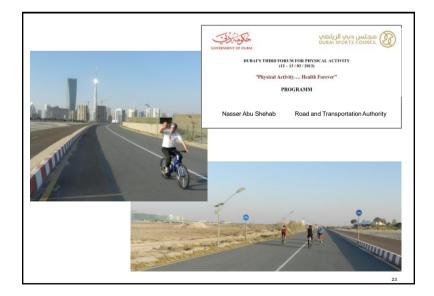


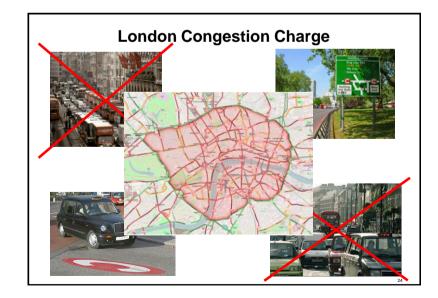


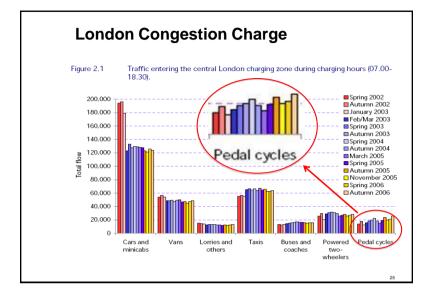


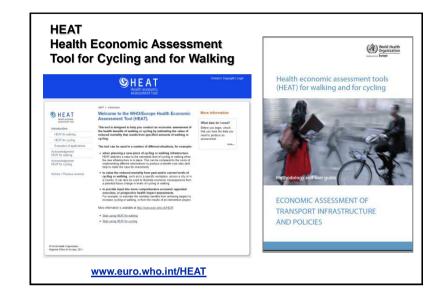


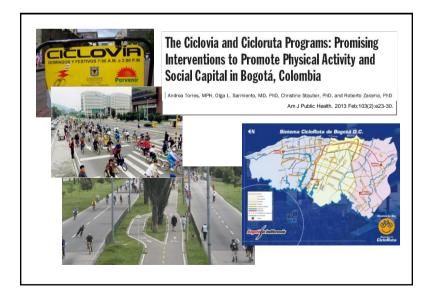


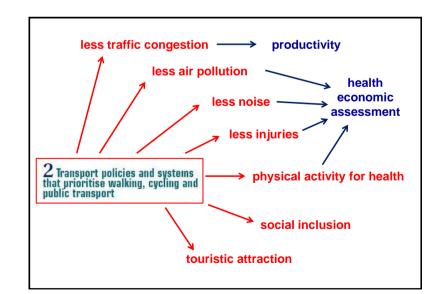




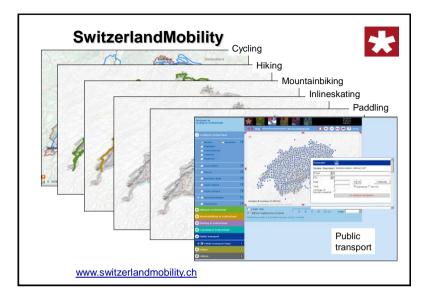




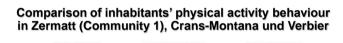


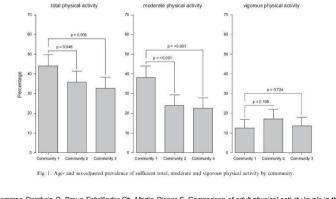




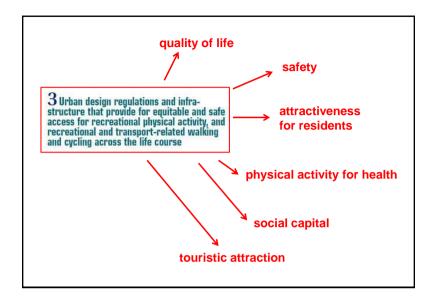


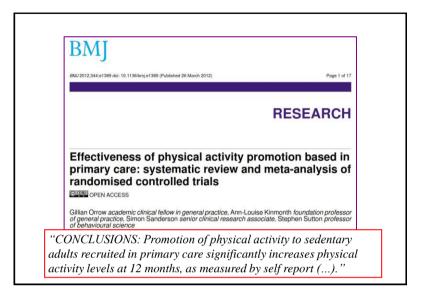


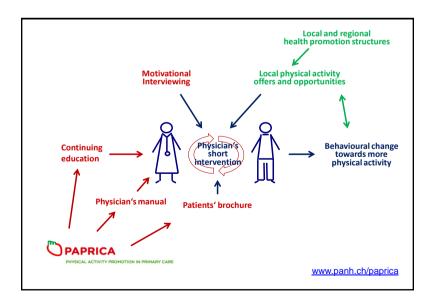




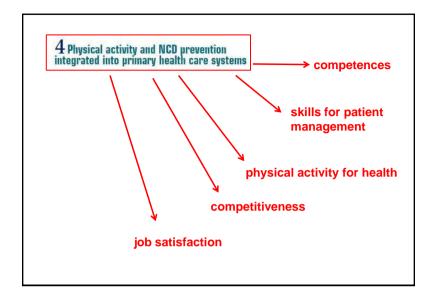
Thommen Dombois O, Braun-Fahrländer Ch, Martin-Diener E. Comparison of adult physical activity levels in three Swiss alpine communities with varying access to motorized transportation. Health & Place, 2007; 13(3): 757-66

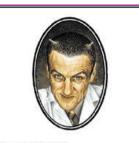










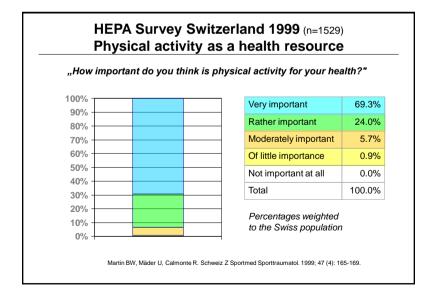


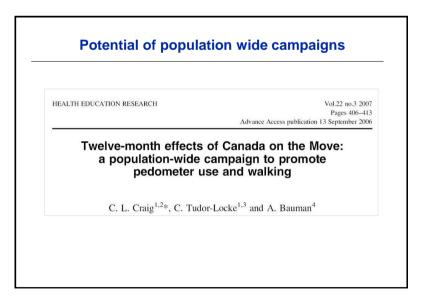
Dr. Luzi Fehrs Krankheits-Tipp Nr. 2:

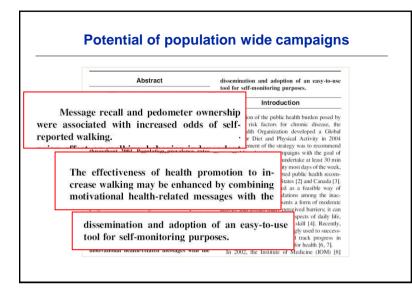
Vermeiden Sie sorgfältig jede sportliche Betätigung. Gehen Sie nie zu Fuss. Fahren Sie nie Velo. Grundsätzlich verboten ist tiefes Durchatmen - es sei denn, Sie ziehen Rauch ein. Health Promotion Mass Media Campaign by Foundation Health Promotion Switzerland in the year 2000

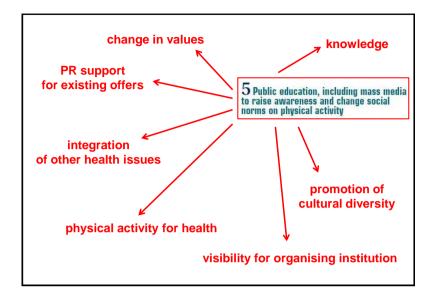
"Dr. Luci Fehr's Illness Tip No 2:

Carefully avoid all forms of sports and physical activity. Never walk. Never use your bicycle. Never ever breathe harder – unless you are inhaling tobacco smoke."

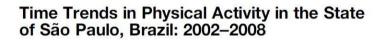






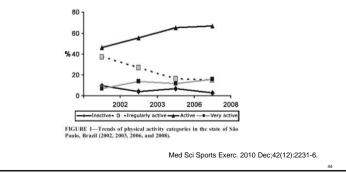




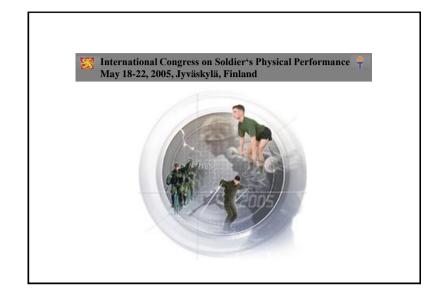


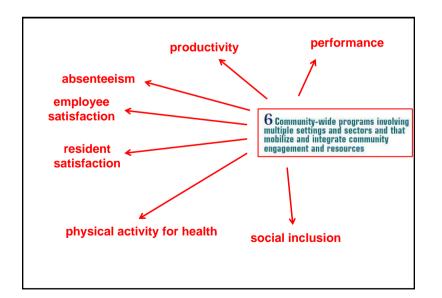
VICTOR K. R. MATSUDO¹, SANDRA M. MATSUDO¹, TIMÓTEO L. ARAÚJO¹, DOUGLAS R. ANDRADE¹, LUIS C. OLIVEIRA¹, and PEDRO C. HALLAL²

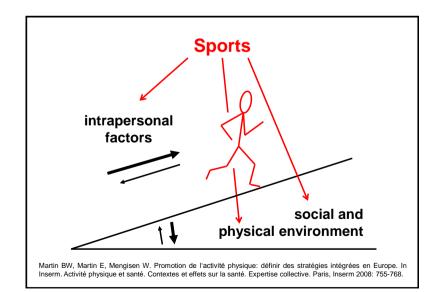
¹Physical Fitness Research Center, CELAFISCS, São Caetano, BRAZIL; and ²Federal University of Pelotas, Pelotas, BRAZIL







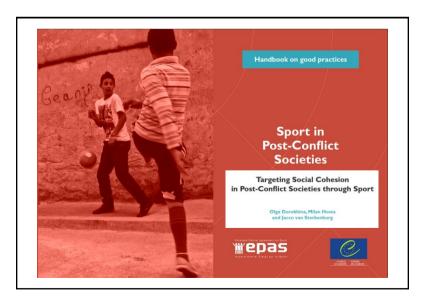


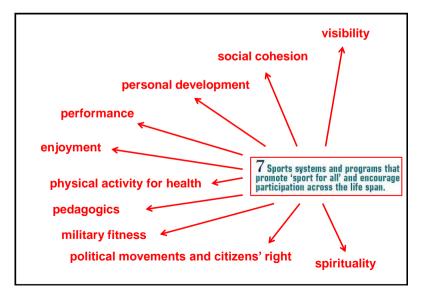


1832 Foundation of Federal Gymnastics Federation In addition to fitness and social aspects, changing priorities over time:

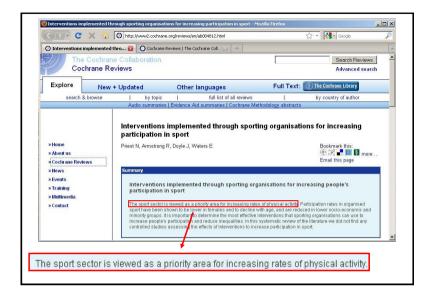
- Piety
- Radical/liberal political movement
- Military
- Conservative

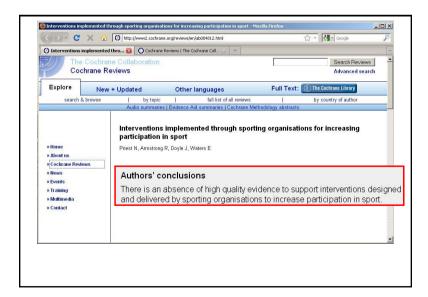


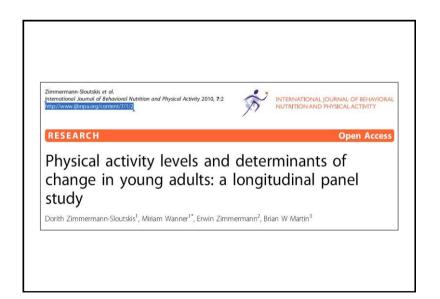


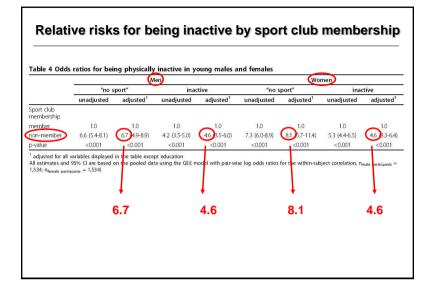








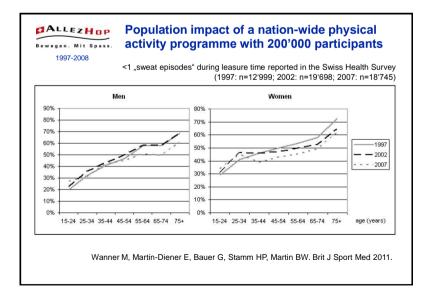




Relative risks for becoming inactive by sport club membership

	Men				Women			
	becoming "no sport"		becoming inactive		becoming "no sport"		becoming inactive	
	unadjusted	adjusted ¹	unadjusted	adjusted ¹	unadjusted	adjusted ¹	unadjusted	adjusted
Sport club membership								
remaining member	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0
becoming member	1.4 (0.7-2.7)	1.3 (0.4-3.3)	2.1 (1.2-3.7)	2.7 (1.1-6.3)	1.5 (0.8-2.8)	2.7 (1.1-7.0)	2.1 (1.2-3.6)	1.6 (0.7-3.7
p-value	0.3	0.6	0.01	0.02	0.2	0.04	0.007	0.2
becoming non- member	7.4 (4.9-11.0)	7.8 4.4-14.0)	5.6 (3.9-8.1)	5.9 3.4-10.5)	7.0 (4.5-11.1)	11.9 (5.9-24.1)	5.4 (3.5-8.5)	5.1 2.7-9.6
p-value	< 0.001	<0.001	< 0.001	< 0.001	< 0.001	< 0.001	< 0.001	< 0.001
remaining non- member	9.2 (6.6-13.1)	7.8 (4.7-12.9)	5.2 (3.7-7.4)	5.1 (3.1-8.4)	10.7 (7.3-15.6)	12.4 (6.4-24.1)	7.9 (5.4-11.3)	6.9 (4.0-11.8
p-value	< 0.001	< 0.001	< 0.001	< 0.001	< 0.001	< 0.001	< 0.001	< 0.001
¹ adjusted for all v ² OR = 12.7 (2.6-61 All estimates and S independent corre active in sports (n _n	95% CI are based of lation structure for	mbers estimates the pooled dat the within-subje n _{female participants}	become unreliables to for the one-year of association. Only	outcome conditi observations we sly active (n _{male p}	ere included with o	lata for the preces	ding wave in indiv	







Changes in sport activities 1999 to 2007

Table 1 Most popular sports activities in Switzerland in 1999 and 2007 for men and women aged 15-74 years (including those sports named by at least 10% of the population)

	Men (aged 15-74	years)	Women (aged 15-74 years)		
	Level 1999	Level 2007	Level 1999	Level 2007	
Bicycle, mountain bike	31.9%	38.4%	31.5%	31.7%	
Walking/hiking*	18.2%	29.4%	26.9%	37.9%	
Swimming	21.1%	20.7%	31.3%	30.0%	
Skiing	19.2%	22.9%	16.9%	20.6%	
Jogging/running	19.6%	19.1%	15.7%	14.6%	
Fitness training	8.2%	11.2%	14.8%	16.8%	
General gymnastics	7.3%	7.7%	26.4%	15.6%	

*Walking/hiking was composed of two-thirds hiking and one-third walking, the latter including 47% Nordic walking, 20% walking and 33% brisk walking in 2007.

Wanner M, Martin-Diener E, Bauer G, Stamm HP, Martin BW. Allez Hop, a nation-wide programme for the promotion of physical activity in Switzerland: What is the evidence for a population impact after one decade of implementation. Brit J Sport Med 2010.

Why is there not more scientific evidence for the role of sports? • Good studies need early planning and long-time commitment • Designs with control groups are difficult in settings where there is a long-time history of sports Dubai would be in an ideal situation to address these issues!











