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Emerson Sebastião

Andiara Schwingel

Wojtek Chodzko-Zajko

Brazilian physical activity guidelines as a strategy for health promotion

Diretrizes brasileiras para atividade física como estratégia de promoção da saúde

ABSTRACT

Public health actions endorsed by the federal government, for instance, health promotion initiatives, usually have greater impact at population level compared to other types of initiatives. This commentary aims to instigate debate on the importance and necessity of producing federally endorsed Brazilian physical activity guidelines as a strategy for health promotion.

DESCRIPTORS: Motor Activity. Exercise. Sports. Health Behavior. Guidelines as Topic. Health Promotion.

RESUMO

Ações de saúde pública sancionadas pelo governo, como iniciativas de promoção da saúde, normalmente apresentam maior impacto em nível populacional. O objetivo deste comentário é instigar o debate sobre a importância e a necessidade de desenvolver diretrizes brasileiras de atividade física como estratégia de promoção da saúde.

DESCRIPTORES: Atividade Motora. Exercício. Esporte. Comportamentos Saudáveis. Guias como Assunto. Promoção da Saúde.

Department of Kinesiology and Community Health. College of Applied Health Sciences. University of Illinois. Urbana-Champaign, IL, United State

Correspondence:

Emerson Sebastião
Department of Kinesiology and Community Health
Louise Freer Hall
906 South Goodwin Ave
Urbana, IL
61801
E-mail: esebast2@illinois.edu

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INTRODUCTION

At the end of the 20th century, the Federal Brazilian Government was heavily invested in a campaign to eradicate hunger and misery in the country. In 1995, the federal government launched the Solidary Community Program, which was – a precursor of the Zero Hunger Program introduced in 2003. The Zero Hunger initiative was composed of 30 complementary programs dedicated to alleviating the immediate and underlying causes of hunger and food insecurity, implemented by or with the support of the federal government. This program evolved into the current Family Allowance Program that provides financial aid to poor and extremely poor families. The goal of the Family Allowance is to reduce short and long-term poverty by providing financial support to the poorest Brazilians, and it remains one of the most significant initiatives to alleviate poverty worldwide.

With its growing economy, Brazil is widely regarded as having strong potential for future development and economic expansion.^a Along with initiatives to combat poverty, Brazil has adopted strategies to address the alarming growth of chronic diseases. As with most nations, demographic and epidemiological transitions have significantly affected Brazil. In 2002, the Ministry of Health and the Pan American Health Organization (PAHO) developed nutritional guidelines for infants and children under the age of two years.^b In 2006, the Ministry of Health took an important step toward promoting healthy eating by developing nutritional guidelines for the entire population. Scientific committees of experts were appointed by the Ministry of Health to create the Brazilian Dietary Guidelines (BDG).^c According to Sichieri et al⁷ (2010), the principles underlying the BDG are consistent with the World Health Organization (WHO) guidelines. However, other principles are specific to the Brazilian context, reflecting local culture and reasoning related to healthy food and lifestyles and to disease prevention. The BDG was developed based on the available scientific evidence regarding food intake and disease prevention, but also considered local culture, food security, food safety, and environmental sustainability. This document was presented to the general public, government agencies, industry, and health professionals – with a focus on the family context.^c The BDG is mainly composed of seven core guidelines and two special guidelines, one related to physical activity. However, this special

guideline addresses physical activity only in the context of weight management; it does not address in detail the role of physical activity in preventing chronic disease, maintaining independence, and enhancing quality of life. To date, there are no comprehensive government guidelines recommending physical activity for the Brazilian population.

However, such guidelines would be timely and highly important. Physical activity is the easiest, most feasible, and most affordable means of achieving good health, but despite evidence about its benefits, rates of physical inactivity are high. Many chronic disease conditions are highly preventable or treatable through physical activity.⁵ There is also compelling evidence of physical activity's benefits to health in different age groups and populations.^{1-3,d} Furthermore, the negative impact of physical inactivity, such as the social costs of negative health outcomes associated with sedentary living, are also well documented.^{4,6}

The process of establishing guidelines is usually as follows. First, a review of the scientific literature regarding the benefits of physical activity is conducted. Second, an attempt is made to identify special circumstances and characteristics that need to be considered in the cultures and countries where the guidelines will be implemented. Third, a written document with guidelines and recommendations is developed, disseminated, critiqued, and ultimately adopted. In Brazil, some have suggested that rather than develop new physical activity guidelines, it would be simpler, faster, and more cost effective to adopt existing guidelines developed by the WHO or countries such as the United States, the United Kingdom, Australia, and Canada. This would save time and money since most literature outside Brazil regarding physical activity has already been summarized. However, this approach is unlikely to adequately address the unique aspects of physical activity promotion in the Brazilian cultural context, and it may not be as well supported as guidelines developed by Brazilian scientists and policy-makers specifically for the Brazilian population. Probably, a combination of both approaches, acknowledging the work that has already been done around the world, but placing it in the context of Brazilian public health would be the most appropriate solution.

^a The Americas: the Brazilian model. *The Economist*. 2011 Nov 17 [cited 2014 Jan 21]. Available from: <http://www.economist.com/node/21537004>

^b Ministério da Saúde, Secretaria de Política de Saúde; Organização Pan-Americana da Saúde. Guia alimentar para crianças menores de dois anos. Brasília (DF); 2002 [cited 2013 Nov 29]. (Série A. Normas e Manuais Técnicos, 107) Available from: <http://189.28.128.100/nutricao/docs/geral/guiaao.pdf>

^c Ministério da Saúde, Secretaria de Atenção à Saúde, Departamento de Atenção Básica. Guia alimentar para a população brasileira: promovendo a alimentação saudável. Brasília (DF); 2008 [cited 2013 Nov 29]. (Série A. Normas e Manuais Técnicos). Available from: http://bvsms.saude.gov.br/bvs/publicacoes/guia_alimentar_populacao_brasileira_2008.pdf

^d U.S. Department of Health and Human Services. Physical activity guidelines for Americans. Rockville(MD); 2008 [cited 2013 Dec 18]. Chapter 2. Physical activity has many health benefits. Available from: <http://www.health.gov/paguidelines/guidelines/chapter2.aspx>

The development and dissemination of Brazilian Federal Government guidelines or recommendations for physical activity would benefit the country by:

- Focusing attention on the development of new policies, strategies, and programs for chronic disease prevention.
- Better informing policy-makers, health professionals, and the general public about how to reduce risks of negative health outcomes associated with inactivity and/or sedentary behavior.
- Communicating to the public the benefits and risks associated with physical activity.
- Making it easier to communicate using standardized messages disseminated to the general public and to those involved in promoting physical activity.
- Helping individuals choose among many types and amounts of activity by communicating through culturally meaningful examples and models.
- Helping health professionals and the general public understand how to reduce the risks of activity-related injury.
- Identifying research gaps in the field and generating new research initiatives.

In contrast, by delaying the development of a high-quality, detailed, and authoritative document, Brazil would fail to highlight the importance of physical activity as a preventive factor for chronic diseases and conditions. Additionally, failing to develop physical activity guidelines would perpetuate the mistaken belief that guidelines are unnecessary. Lack of early action would limit progress in health surveillance, promotion,

and education. Furthermore, such comprehensive guidelines' continued absence might hinder efforts of both the promotion of physical activity and the reduction of sedentary behavior in the population.

Therefore, the time is now. Brazil already has a relatively substantial diet and nutrition document that aims to guide health professionals and families towards healthy eating. At this writing, the nation hosted the 2014 football World Cup, and in 2016, the State of Rio de Janeiro, Southeastern Brazil, will host the Olympics Games. These events will bring the world's attention to our shores and provides perfect timing for the federal government and Ministry of Health to commit firmly to physical activity's importance for all – and not allowing the focus to remain solely on elite sports.

Recently, the Federal Government of Argentina issued the Argentinian Physical Activity Guidelines.^e Developing Brazilian physical activity guidelines would make Brazil the second and largest country in Latin America to develop federal comprehensive guidelines for policy-makers, health professionals and the general public. The development of Brazilian guidelines would encourage other Latin American countries to do the same since physical inactivity is a worldwide concern, and, therefore, increased efforts to promote physical activity throughout Latin America are needed.

To achieve its goals, the guidelines should be widely promoted through various communication strategies, including but not limited to materials for websites, the public, and partnership organizations promoting physical activity. In summary, such guidelines should be considered a normal component of national preventive strategies for promoting health and reducing the population's sedentary behavior.

^e Ministerio de Salud de la Nación. Manual director de actividad física y salud de la República Argentina. Buenos Aires; 2013 [cited 2014 Jan 6]. Available from: <http://www.msal.gov.ar/images/stories/bes/graficos/0000000074cnt-2012-09-27-manual-actividad-fisica.pdf>

REFERENCES

1. Chodzko-Zajko WJ, Proctor DN, Fiatarone Singh MA, Minson CT, Nigg CR, Salem GJ, et al. American College of Sports Medicine position stand. Exercise and physical activity for older adults. *Med Sci Sports Exerc.* 2009;41(7):1510-30. DOI:10.1249/MSS.0b013e3181a0c95c
2. Haskell WL, Lee IM, Pate RR, Powell KE, Blair SN, Franklin BA, et al. Physical activity and public health: updated recommendation for adults from the American College of Sports Medicine and the American Heart Association. *Med Sci Sports Exerc.* 2007;39(8):1423-34. DOI:10.1249/mss.0b013e3180616b27
3. Janssen I, Leblanc AG. Systematic review of the health benefits of physical activity and fitness in school-aged children and youth. *Int J Behav Nutr Phys Act.* 2010;7:40. DOI:10.1186/1479-5868-7-40
4. Katzmarzyk PT, Janssen I. The economic costs associated with physical inactivity and obesity in Canada: an update. *Can J Appl Physiol.* 2004;29(1):90-115. DOI:10.1139/h04-008
5. Nunan D, Mahtani KR, Roberts N, Heneghan C. Physical activity for the prevention and treatment of major chronic disease: an overview of systematic reviews. *Syst Rev.* 2013;2:56. DOI:10.1186/2046-4053-2-56
6. Pratt M, Macera CA, Wang G. Higher direct medical costs associated with physical inactivity. *Phys Sportsmed.* 2000;28(10):63-70. DOI:10.3810/psm.2000.10.1237
7. Sichieri R, Chiuve SE, Pereira RA, Lopes ACS, Willett WC. Dietary recommendations: comparing dietary guidelines from Brazil and the United States. *Cad Saude Publica.* 2010;26(11):2050-8. DOI: 10.1590/S0102-311X2010001100006

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