

FOUNDATIONS OF PHYSICAL ACTIVITY AND PUBLIC HEALTH







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To our colleagues and their students, who will improve public health by zealously promoting science and the practice of physical activity in individuals and in populations.

PREFACE

Welcome to Foundations of Physical Activity and Public Health. This text is a collection of the concepts that define the emerging field of physical activity and public health. Much like the more established fields (i.e., the effects of nutrition and smoking on public health), physical activity and public health has its roots in the grafting of two other fields. In this case, public health scientists and exercise scientists have come together to create a window to improve health through research and promotion of physical activity. Methods and evidence from the public health sciences (epidemiology, health promotion, behavioral science, and environmental health) and kinesiology (exercise physiology, the movement sciences, and sport and exercise psychology), combined with a necessary eye on health policy, constitute our field. Although nothing can be substituted for experience, this text offers the background and introduction to tools needed for the planning, implementation, and evaluation of physical activity promotion programs. This is the first textbook of its kind designed for a semester-long course in the field.

Few singular health behaviors can have as broad an impact on the health of individuals and populations as does physical activity. The scientific base is growing and solidifying regarding the effects of physical activity on all-cause morbidity and mortality due to multiple noncommunicable diseases such as heart disease, some cancers, diabetes, and osteoporosis.

It is a very exciting time of growth in physical activity and public health. The seminal scientific works of Dr. Jeremy N. Morris and Dr. Ralph S. Paffenbarger Jr. helped set the stage for what is now a worldwide focus on advancing the science as well as reducing physical inactivity and promoting the benefits of regular physical activity for the prevention and treatment of chronic diseases and other health challenges. As the science and practice advance, physical activity is receiving increased attention from policy and organizational decision makers worldwide, including governmental ministers of health. Professional societies have been created to focus on advancing the research and practice of the field, the scientific literature has expanded dra-

matically on multiple fronts, and physical activity and inactivity are becoming parts of health policy decisions at all levels. An outstanding example is the Toronto Charter for Physical Activity: A Global Call to Action (www.globalpa.org.uk/charter). This advocacy tool drives policies worldwide that are supportive of the role of physical activity in promoting health.

How This Book Is Organized

Foundations of Physical Activity and Public Health is organized into three parts and 16 chapters.

PART I: INTRODUCTION TO PHYSICAL ACTIVITY AND PUBLIC HEALTH

Part I introduces concepts of public health, kinesiology, and measurement. The chapters in this part highlight fundamentals of each and how they have come together.

Chapter 1 introduces the fundamentals of public health and provides information about the various subdisciplines of public health and how public health differs from medicine. Finally, there is a discussion about how public health policy is often linked to the legal and regulatory system as well as discussion of an emerging specialization in public health.

The fundamentals of kinesiology are discussed in chapter 2. In the past, exercise was studied and often promoted as a means of enhancing maximal performance rather than promoting basic health benefits for all. The components of exercise training are presented as well as the methods for applying them to target populations. The general health, fitness, and performance effects of physical activity and exercise are discussed. A final section presents ways to integrate traditional exercise prescription into physical activity and exercise programs.

Chapter 3 focuses on the emergence of the subdiscipline of physical activity and public health. Examples of the interdisciplinary interest in the field of physical activity and public health are reviewed and the knowledge, skills, and aptitudes for careers in physical activity and public health are provided.

In chapter 4, the importance of measuring physical activity is introduced and the strengths and weaknesses of various laboratory and field methods are discussed. Overviews of the following techniques are included: indirect calorimetry, doubly labeled water, accelerometers, pedometers, direct observation, and self-report instruments. Observational techniques such as physical activity surveillance and sources of data-based comparison are also discussed

PART II: HEALTH EFFECTS OF EXERCISE AND PHYSICAL ACTIVITY

The scientific base of the health effects of physical activity and inactivity is remarkable in its size and complexity. It continues to grow each year, and the overwhelming evidence for the health benefits and risks of physical activity provides much of the rationale for action.

Cardiovascular and metabolic diseases and their relations to physical activity are presented in chapter 5. The chapter starts with a discussion of the prevalence and economic costs of cardiovascular and metabolic diseases. Specific physiological, biomechanical, and behavioral adaptations to physical activity and exercise are also identified. Common testing methodologies for predicting and diagnosing metabolic disease are provided. The evidence for the effect of physical activity on cardiorespiratory and metabolic disease is discussed.

Chapter 6 contains common definitions for overweight and obesity and a discussion about the prevalence (U.S. and worldwide) and the economic costs of these conditions. A discussion of caloric balance is included, and the contributions that physical activity and exercise have on balance are highlighted. The various risk factors associated with overweight and obesity are discussed and specific physiological, biomechanical, and behavioral adaptations to physical activity and exercise are identified. Methods for assessing body composition are provided. The effects of physical activity on weight loss, weight maintenance, and weight regain are discussed along with the physical activity guidelines for achieving caloric balance and a healthy weight.

Chapter 7 focuses on musculoskeletal disorders and functional health. The risk factors, prevalence, and economic costs of musculoskeletal disorders and disability are discussed. Specific physiological, biomechanical, and behavioral adaptations to physical activity and exercise are provided. Common testing methodologies for muscle function and functional health are included. The evidence for the effect of physical activity on musculoskeletal disorders and disability in functional health is discussed.

In chapter 8, cancers related to physical inactivity are discussed and the prevalence of each is highlighted. The mechanism by which physical activity might reduce the risk of some cancers is included along with a discussion of common risks for cancer. Specific physiological, biomechanical, and behavioral adaptations to physical activity and exercise are identified. Included is a discussion of scientific evidence supporting the benefits of physical activity for cancer survivors as well as evidence for the role of physical activity in the prevention of cancer.

Chapter 9 examines the effects of physical activity on mental health. The prevalence, economic costs, and risk factors of mental health disorders are discussed. A framework for studying mental health problems and their response to physical activity interventions is provided along with a discussion about the effects of physical activity on brain function: reaction time, learning tasks, cognitive function, and academic achievement. The recommendations for physical activity complete the chapter.

In chapter 10, adverse events associated with physical activity are discussed. Participation in regular physical activity and exercise may increase the risk of musculoskeletal injuries and sudden cardiac death in some cases. The chapter contains a discussion about defining adverse events, the prevalence of problems, the risks associated with injury, and the adaptive processes that may help prevent injury.

PART III: STRATEGIES FOR EFFECTIVE PHYSICAL ACTIVITY PROMOTION

The chapters in part III introduce evidence-based strategies for increasing physical activity in individuals and populations. Public health is characterized by translating science into action for advancing the health of the population. The strategies presented in part III have been scientifically demonstrated to increase physical activity and can be used for action in a variety of settings.

Methods for promoting physical activity are discussed in chapter 11, which opens with a discussion about the importance of using the Guide to Community Preventive Services as a resource for identifying physical activity intervention programs that work. A discussion about the impact of community-wide campaigns on increasing physical activity is included along with an overview of massmedia campaigns.

In chapter 12, the rationale for school-based physical activity interventions is presented. The scientific benefits of physical activity in youth are reviewed, and commonly used physical fitness tests for school settings are discussed. A section that highlights current U.S. strategies and policies for promoting physical activity via school-based programs is included. The remainder of the chapter focuses on examples of evidence-based school physical activity programs.

In chapter 13, the focus is on evidence-based strategies for behavioral and social approaches to physical activity promotion. The chapter includes a discussion of current behavioral theories and theoretical models that are used to explain physical activity behavior in individuals. Social support strategies for physical activity promotion in communities are defined and highlighted, and examples of both types of approaches are provided.

In chapter 14, environmental and policy influences on physical activity are reviewed, as are strategies for change. The ways in which aspects of the physical and built environment can encourage or inhibit physical activity are reviewed. The role of urban design for physically active populations and evidence-based strategies for change are discussed.

In chapter 15, evaluation of physical activity programs is introduced. The chapter begins with a discussion of the six-step Physical Activity Evaluation Framework developed by the Centers for Disease Control and Prevention (CDC). The concepts of formative evaluation, process evaluation, outcome evaluation, and cost-effectiveness evaluation are covered. Logic models are presented. The chapter also contains discussions about evaluation designs, data collection and analysis, and publishing and communicating results.

Chapter 16 is the final chapter in the text, which focuses on building effective partnerships for physical activity programs. Examples of effective partnering include a state plan (Active Texas 2020), the U.S. National Physical Activity Plan, and the international Toronto Charter for Physical Activity. Strategies for physical activity advocacy are included, and models for advocacy and effective leadership conclude the chapter.

SPECIAL FEATURES

The content and chapter organization of Foundations of Physical Activity and Public Health is based on contemporary teaching principles to maximize learning opportunities for students. Following are the features in each chapter:

- Objectives are summaries of take-away messages you should learn by reading and studying the material.
- · Opening questions help you think about how you can use information in the text.
- Highlight boxes are examples of topics covered in the text, which will help you translate theory into practice.
- Case studies are real-life examples of selected concepts covered in the chapter, and are found in part III.
- Key leader profiles are mini-biographies of world leaders in physical activity and public health. Each leader addresses four key questions about his or her work in the field.
- · What you need to know is a bulleted review of the chapter to help you study the information provided.
- · Terms to know are the key terms covered in
- Study questions are general questions that represent all the material covered in the text.
- · E-media are web-based resources that pertain to the material covered in the chapter.
- Bibliographies are additional published resources for further study.

NOTE TO STUDENTS

As the field of physical activity and public health expands, an increasing number of job opportunities will be available for those who achieve the core competencies as endorsed by the National Society of Physical Activity Practitioners, established in

2006 (www.nspapph.org). Coursework that covers concepts of physical activity and public health will help future graduates in diverse employment settings such as public health and health care, business and industry, the nonprofit sector, education, mass media, urban planning and architecture, and parks and recreation. University students in majors and minors such as kinesiology, athletic training, physical therapy, medicine, nursing, and nutrition, as well as trainers in public services (fire, police, and military), rehabilitation specialists, and wellness instructors will find a natural connection between their professional duties and the need for promotion of physical activity and public health to colleagues and communities.

NOTE TO INSTRUCTORS

This text is targeted to students in exercise science or public health programs who are enrolled in elective courses that expand their understanding beyond what is taught in traditional core courses. The 2008 Physical Activity Guidelines for Americans (www. health.gov/PAGuidelines), the accompanying Physical Activity Guidelines Advisory Committee Report (www.health.gov/PAGuidelines/committeereport. aspx), and the CDC's Guide to Community Preventive Services (www.thecommunityguide.org) are valuable resources that provide much of the framework for the development of this text.

The following free ancillaries are also available to instructors who adopt this textbook:

- The instructor guide includes syllabus suggestions, teaching tips, and sample class assignments.
- The **test package** includes over 300 questions, including multiple choice, true-false, and fillin-the-blank questions. The test package can be downloaded in multiple formats depending on your teaching needs, and can also be modified to include test questions that you create.
- The image bank includes all of the figures and tables from the text. You can use these items to create your own Power Point presentations. handouts, or other class materials.

These resources can be accessed at www.Human Kinetics.com/FoundationsOfPhysicalActivity And Public Health. The authors, who have taught courses in physical activity and public health, have helped develop all of the ancillary materials.

We trust that Foundations of Physical Activity and Public Health will allow you to develop courses that inspire students to pursue careers in physical activity and public health.



ACKNOWLEDGMENTS

Because life is a journey with many encounters that continually make us who we are, it is nearly impossible to acknowledge all those who have influenced and taught me over the years. Several people do stand out, however. Thom McCurdy and Louis E. Burnett Jr. sparked and fed my early interest in science. Caroline A. Macera introduced me to epidemiology and public health. Milton Z. Nichaman made me an epidemiologist. Steven N. Blair helped me tremendously by showing me how it all fit together and being the role model that we all should have and be. Thanks to each of these mentors who have helped to shape my thinking.

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-HWK

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-TDM

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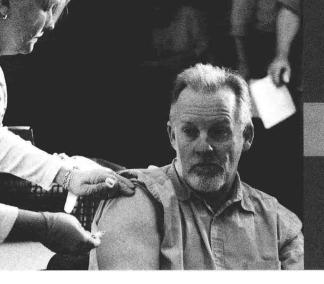
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PART I

INTRODUCTION TO PHYSICAL ACTIVITY AND PUBLIC HEALTH



FUNDAMENTALS OF PUBLIC HEALTH

OBJECTIVES

After completing this chapter, you should be able to discuss the following:

- » The definition and history of public health
- » How public health has become specialized and the five main pillars of public health
- » The five main principles that guide health promotion and health education efforts in public health
- » The 10 essential functions that support the core services of public health
- » Why public health policy is often linked to legal and regulatory systems
- » The emerging physical activity specialization in public health

OPENING QUESTIONS

What comes to mind when you read the words *public health*? Screening children for nutritional deficiencies?

- » Quarantine practices to isolate a person with tuberculosis to prevent an outbreak of the disease?
- » Disaster responses to prevent disease transmission during and after a hurricane or earthquake?
- » Prenatal education for expectant mothers?
- » Promotion of physical activity to lower the burden of chronic, noncommunicable diseases such as heart disease and diabetes mellitus?

If you answered yes to any of these questions, you are correct. Public health is all this and more.

Public health is a field that encompasses many disciplines in an effort to promote and protect health and prevent disease and disability in defined populations and communities. Although medicine and medical training are integral to public health, particularly in understanding the mechanisms of disease transmission, medicine is more interested in the treatment of and cures for diseases and disabilities in individuals. The key difference between public health and medicine is that public health traditionally has focused less on individuals and treatment and more on populations and prevention.

Clearly, then, public health should be focused on problems that affect, or could affect, a substantial portion of the population. For this reason, rare diseases and disabilities and seemingly random health events are often less of a concern to public health than problems that may affect many people in a population. This is not to say that such situations are not important, particularly to the people afflicted, but rather, that the focus of public health is on the health of the population as a whole. Overall, the health of a population is rarely improved by focusing only on rare diseases and health problems that affect the few.

This first chapter offers an overview of the principles and key areas of public health and describes the fundamental services of public health. Happily, public health has grown far beyond its origins and has allowed populations to thrive in the face of new and emerging health problems.

DEFINING MOMENTS IN PUBLIC HEALTH

Although a complete treatment of the history of public health is beyond the scope of this chapter (it could, and does, fill whole books), an understanding of some defining moments in public health is instructive. This understanding helps place the emergence of physical activity and public health as a separate discipline within public health in context. Winkelstein (2011) offers a more complete treatment of the history and evolution of public health.

Although disease and epidemics have occurred for thousands of years, the earliest roots of organized public health emerged in the mid-14th century. At the time, the Black Death (bubonic plague) ravaged Europe, killing an estimated 25% of the population. As we know now, the disease was tied to the black rat, the rat flea (Xenopsylla cheopis) that lived on the blood of the black rat, and the bacterium Pasteurella pestis that helped the flea to seek out additional food by biting warm-blooded humans. At the time, however, an understanding of the germ theory of infection and disease (i.e., that microorganisms are responsible for sickness and not simply "bad air" or other nonbiological reasons) was still 400 to 500 years in the future. Advances in transportation (shipping) around Europe and the Middle East spread the disease to other geographic areas. Although no one knew when or how the disease would strike, public health was advanced